# Preparation for eHR -Briefing on eHR content

### 28 June 2013

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### Domains

# Radiology examination Referral



### **RADIOLOGY EXAMINATION**



### **Radiology examination**

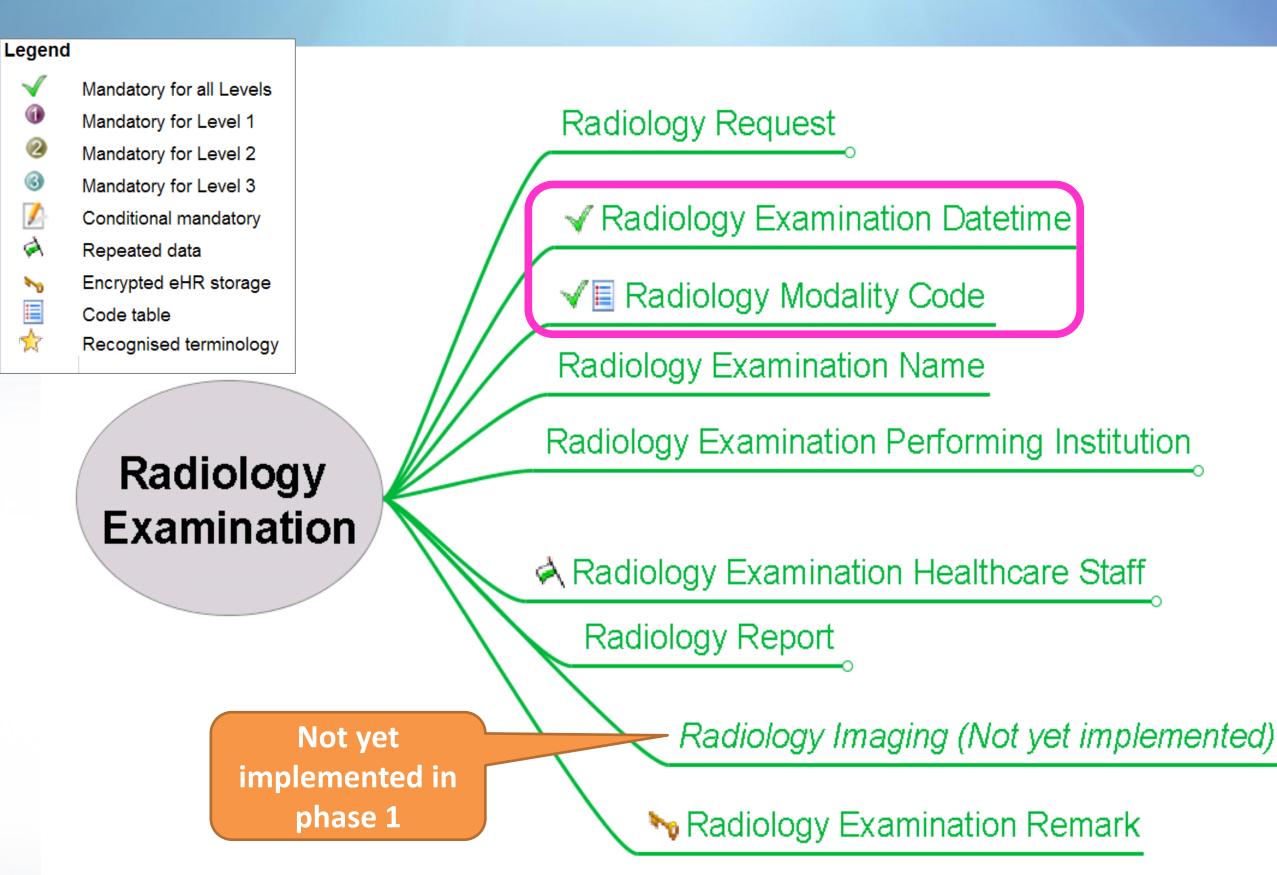
 Radiology result would include radiology report and images

- Images: to be implemented in later phases

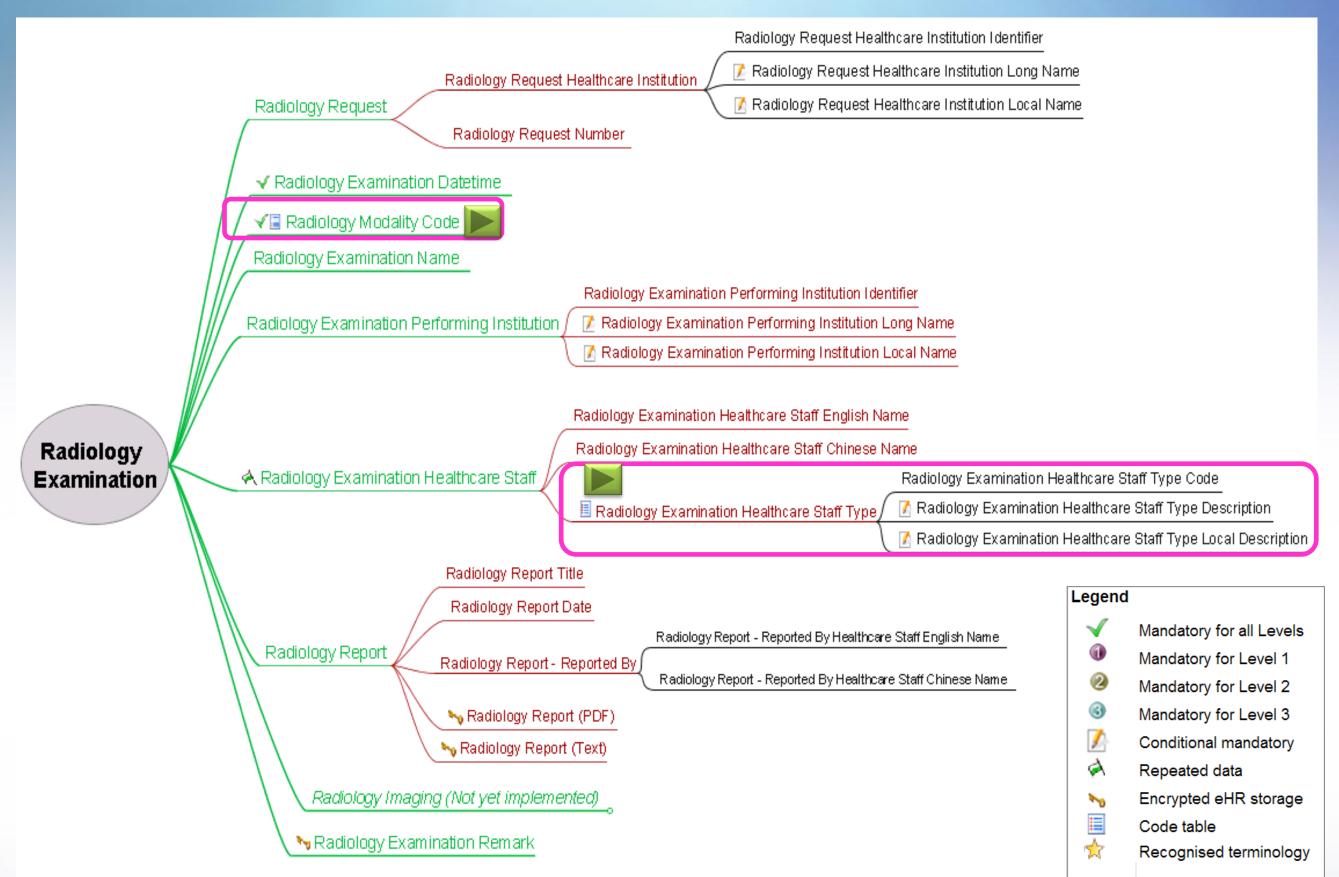
- Sub-classified according to radiology modality, e.g.
  - plain x-ray, ultrasound, CT, MRI ...



### Mind map: Radiology examination



### Mind map: Radiology examination



### Example – Level 1 (Radiology examination)

| Entity Name                           | Code Table            | Data requirement<br>(Certified Level 1) | Example (Certified<br>Level 1) |
|---------------------------------------|-----------------------|---|--------------------------------|
| · · · · · · · · · · · · · · · · · · · |                       | <b>V</b>                                |                                |
| Radiology request<br>number           |                       | 0                                       | 53215                          |
| Radiology examination<br>datetime     |                       | M                                       | 6/12/2010                      |
| Radiology modality code               | Radiology<br>modality | M                                       | СТ                             |
| Radiology examination<br>name         |                       | 0                                       | brain                          |
| Radiology report title                |                       | 0                                       | CT brain report                |
| Radiology report date                 |                       | 0                                       | 6/12/2010                      |
| Radiology report (PDF)                |                       | 0                                       |                                |
| Radiology report (Text)               |                       | 0                                       |                                |
| Radiology image<br>accession number   |                       | 0                                       | A12234                         |
| Radiology examination<br>remark       |                       | 0                                       | abc                            |



### Example – Level 2 (Radiology examination)

| Entity Name   | Code Table         | Data requirement    | Example (Certified Level       |
|---|--------------------|---------------------|--------------------------------|
|   |                    | (Certified Level 2) |                                |
| Radiology request healthcare<br>institution local name          |                    | 0                   | Dr. Chan Clinic                |
| Radiology request number  |                    | 0                   | 53256                          |
| Radiology examination datetime                                  |                    | М                   | 6/12/2010                      |
| Radiology modality code   | Radiology modality | М                   | MRI                            |
| Radiology examination name                                      |                    | 0                   | Head and neck                  |
| Radiology examination<br>performing institution local           |                    | 0                   | Dr. Chan Clinic                |
| Radiology examination<br>healthcare staff English name          |                    | 0                   | Dr. Chan Tai Man               |
| Radiology examination<br>healthcare staff Chinese name          |                    | 0                   | 陳大文教授                          |
| Radiology examination<br>healthcare staff type local            |                    | 0                   | Supervisor                     |
| Radiology report title  |                    | 0                   | MRI on Head and Neck<br>report |
| Radiology report date   |                    | 0                   | 6/12/2010                      |
| Radiology report - reported by<br>healthcare staff English name |                    | 0                   | Dr. Chan Tai Man               |
| Radiology report - reported by<br>healthcare staff Chinese name |                    | 0                   | 陳大文教授                          |
| Radiology report (PDF)  |                    | 0                   |                                |
| Radiology report (Text)   |                    | 0                   |                                |
| Radiology image accession<br>number                             |                    | 0                   | A12235                         |
| Radiology examination remark                                    |                    | 0                   | abc                            |

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### Example – Level 3 (Radiology examination) (1)

|                  | Entity Name  | Code Table            | Data requirement   | Example             |
|------------------|--|-----------------------|--|---------------------|
|                  | -  |                       | (Certified Level 3)  | (Certified Level 3) |
| (                | Radiology request healthcare<br>institution identifier     |                       | 0  | KH                  |
|                  | Radiology request healthcare<br>institution long name      |                       | M if [Radiology request institution identifier] is given<br>NA if [Radiology request institution identifier] is blank          | Kowloon Hospital    |
|                  | Radiology request healthcare<br>institution local name     |                       | M if [Radiology request institution identifier] is given<br>NA if [Radiology request institution identifier] is blank          | Kowloon Hospital    |
|                  | Radiology request number                                   |                       | 0  | 123546              |
| $\left( \right)$ | Radiology examination datetime                             |                       | М  | 6/12/2010           |
|                  | Radiology modality code                                    | Radiology<br>modality | Μ  | MRI                 |
|                  | Radiology examination name                                 |                       | 0  | Abdomen and pelvic  |
|                  | Radiology examination<br>performing institution identifier |                       | 0  | KH                  |
|                  | Radiology examination<br>performing institution long name  |                       | M if [Radiology performing institution identifier] is given<br>NA if [Radiology performing institution identifier] is<br>blank | Kowloon Hospital    |
|                  | Radiology examination<br>performing institution local name |                       | M if [Radiology performing institution identifier] is given<br>NA if [Radiology performing institution identifier] is<br>blank | Kowloon Hospital    |

### Example – Level 3 (Radiology examination) (2)

| Eastles Manage                    | Code Table | Dete as subserved  | Francis                          |
|-----------------------------------|------------|--|----------------------------------|
| Entity Name                       | Code Table | Data requirement   | Example                          |
|                                   |            | (Certified Level 3)                                      | (Certified Level 3)              |
| ·                                 | <b></b>    | T.   |                                  |
| Radiology examination             |            | 0  | Dr. Chan Tai Man                 |
| healthcare staff English name     |            |  |                                  |
| Radiology examination             |            | 0  | 陳大文教授                            |
| healthcare staff Chinese name     |            |  |                                  |
| Radiology examination             | Procedure  | 0  | С                                |
| healthcare staff type code        | healthcare |  |                                  |
| Radiology examination             | Procedure  | M if [radiology examination healthcare staff type code]  | Chief procedure healthcare staff |
| healthcare staff type description | healthcare | is given   |                                  |
|                                   | staff type | NA if [radiology examination healthcare staff type code] |                                  |
|                                   |            | is blank   |                                  |
| Radiology examination             |            | M if [radiology examination healthcare staff type code]  | Chief in-charge                  |
| healthcare staff type local       |            | is given   | onier in enarge                  |
| description                       |            | NA if [radiology examination healthcare staff type code] |                                  |
| docomption                        |            | is blank   |                                  |
|                                   |            |  |                                  |
| Radiology report title            |            | 0  | MRI on abdomen and pelvic        |
|                                   |            |  | report                           |
| Radiology report date             |            | 0  | 6/12/2010                        |
|                                   |            |  |                                  |
| Radiology report - reported by    |            | 0  | Dr. Chan Tai Man                 |
| healthcare staff English name     |            |  |                                  |
| Radiology report - reported by    |            | 0  | 陳大文教授                            |
| healthcare staff Chinese name     |            |  |                                  |
| Radiology report (PDF)            |            | 0  |                                  |
|                                   |            |  |                                  |
| Radiology report (Text)           |            | 0  |                                  |
| Radiology image accession         |            | 0  | A12236                           |
| number                            |            |  |                                  |
| Radiology examination remark      |            | 0  | abc                              |
|                                   |            |  |                                  |

### eHR viewer: Radiology examination

| 智健通<br>Clinical                               | Administration | Information |              | UPPPNU   | RSE021 UPPPNURS | SE021 🖂 (Loqout) |
|---|----------------|-------------|--------------|--|-----------------|------------------|
|   | CKBERRIES      |             |              |  |                 | Close Record ×   |
| HKIC : UH977321(6)                            | DOB :          | 29-Feb-1912 | Age          | e: 101 years Sex : M Details ►   | ADR             | Select Patient   |
| 醫健通 All Local                                 | Non-Local      | Radiology   |              |  |                 |                  |
| <i>e</i> health                               | Legend         | Date View D | ocument View | Modality: All 🕑 Period: All 😒  |                 | View: Active 💌   |
| 🚹 📝 🗟 🖾 🗛                                     | 11 🔝 🧪         | Exam Date 👻 | Modality     | ♦ Examination  | Performed At    | \$               |
| <ul> <li>Clinical Note &amp; Summa</li> </ul> |                | 10-Mar-2013 | СТ           | 🔁 🔳 Brain plain  | VHA             | ~                |
| Clinical Note & Summa                         |                | 26-Feb-2013 | MRI          | Knee plain   | VUC4_B          |                  |
| Referral                                      | inary          | 23-Nov-2012 | СТ           | 🚺 Brain plain  | VUC4_B          |                  |
| Birth Record                                  |                | 23-Nov-2012 | MRI          | 🚺 Chest  | VUC4_B          |                  |
| Encounter                                     |                | 23-Nov-2012 | MRI          | 🚺 Chest  | VHA             |                  |
| <ul> <li>Problem &amp; Procedure</li> </ul>   |                | 23-Nov-2012 | XRAY         | 🔁 🕕 Chest  | VHA             |                  |
| Problem / Diagnosis                           |                | 10-Jun-2012 | MRI          | 🔁 🔳 Knee plain   | VUC4_B          |                  |
| Procedure                                     |                | 05-May-2012 | IR           | CT guided drainage, peritoneum, Pre-CT guided procedure diagnostic set | VUC4_A          |                  |
| Investigation Report                          |                | 10-Apr-2012 | XRAY         | Chest  |                 |                  |
| <ul> <li>Medication</li> </ul>                |                | 10-Mar-2012 | XRAY         | Chest  |                 |                  |
| Prescribing History                           |                | 10-Mar-2012 | СТ           | Coronary plain, Coronary+con   |                 |                  |
| Dispensing History                            |                | 20-Dec-2011 | СТ           | Abdomen +con., Abdomen plain, Pelvis plain, Pelvis+con.                | VHA             |                  |
| <ul> <li>Laboratory Record</li> </ul>         |                | 20-Dec-2011 | СТ           | Brain plain  | VUC4_A          |                  |
| Chemical Pathology                            |                | 11-Nov-2011 | XRAY         | 🔁 🕕 Chest  | VHA             |                  |
| Haematology                                   |                | 11-Aug-2011 | XRAY         | 🔁 🔳 Radiology Report (PDF & Text)                                      | VHA             |                  |
| Immunology                                    |                | 21-Jan-2009 | СТ           | 🚺 64 Slice CT Thorax+Whole abdomen (Plain + Contrast)                  | VUC4_B          |                  |
| Microbiology & Virolog                        |                | 23-Dec-2008 | СТ           | Brain plain  | VHA             |                  |
| Anatomical Pathology<br>Toxicology            | y              | 20-Nov-2007 | СТ           | Abdomen +con., Abdomen plain, Pelvis plain, Pelvis+con.                | VUC4_A          |                  |
| Transplantation &                             |                | 24-Mar-2007 | СТ           | HRCT   |                 |                  |
| Immunogenetics                                |                | 02-Nov-2006 | XRAY         | Chest  | VHA             |                  |
| Molecular Pathology                           |                | 21-Sep-2004 | СТ           | HRCT   | VHA             |                  |
| General & Other                               |                | 08-Oct-2002 | ANGIO        | 🔳 C C Graft/Shunt, C Chamber Angio, Cardiac Cat(-Rgst)(+Rad)           | VHA             |                  |
| <ul> <li>Radiology Record</li> </ul>          |                | 30-Apr-2002 | СТ           | Brain plain  |                 |                  |
|   |                |             |              |  |                 |                  |

General Radiology Computed Tomography Angiographic / Vascular IR Non-vascular IR Magnetic Resonance Imaging Immunisation Record



# Related files: Radiology examination

- Data schema
  - Radiology examination
- Codex
  - Radiology modality
  - Procedure healthcare staff type



### Data schema: Radiology examination (2)

### eHR Sharable Data - Radiology Examination

| Form                     | Entity Name  | Eafthy ID | Definition   | Data           | Data Type            | Validation | Repeated | Code Table                            | Data requirement    | Data requirement    | Data requirement  | Example (Certified Level | Example (Certified Level | Example (Carlified Level   |
|--------------------------|--|-----------|--|----------------|----------------------|------------|----------|---------------------------------------|---------------------|---------------------|---|--------------------------|--------------------------|----------------------------|
|                          | Entry Mane   | Enary io  |  | Type<br>(code) | (desoription)        |            | Data     |                                       | (Certified Level 1) | (Certified Level 2) | (Certified Level 3)   | 1)                       | 2)                       | 3)                         |
| Radiology                | Radiology request  | 1003483   | The healthcare institution where the radiology request was   | CE             | Coded                |            |          |                                       | NA                  | NA                  | 0   |                          |                          | КН                         |
| Examination              | healthcare institution<br>Identifier   |           | created. It is the [HCI identifier] in the eHR Healthcare Provider<br>Index.   |                | element              |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology                | Radiology request  | 1003484   | The healthcare institution where the radiology request was   | ST             | String               |            |          |                                       | NA                  | NA                  | M If (Radiology request institution   |                          |                          | Kowloon Hospital           |
| Examination              | healthcare institution long<br>name  |           | created. It is the [HCI displayed English long name] or the [HCI<br>displayed Chinese long name] in the eHR Healthcare Provider  |                |                      |            |          |                                       |                     |                     | identifier] is given<br>NA_If [Radiology request  |                          |                          |                            |
|                          |  |           | Index. It should be the corresponding description of the selected  |                |                      |            |          |                                       |                     |                     | institution identifier] is blank  |                          |                          |                            |
|                          |  |           | [HCI identifier].  |                |                      |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology<br>Examination | Radiology request<br>healthcare institution local<br>name  | 1003485   | Local description of the healthcare institution where the radiology<br>request was created   | ST             | String               |            |          |                                       | NA                  | 0                   | M If (Radiology request institution<br>identifier) is given<br>NA. If (Radiology request            |                          | Dr. Chan Clinic          | Kowloon Hospital           |
|                          |  |           |  |                |                      |            |          |                                       |                     |                     | institution identifier] is blank  |                          |                          |                            |
| Radiology<br>Examination | Radiology request<br>number  | 1003486   | A unique identifier issued by the healthcare institution who<br>requested the radiology examination  | ST             | String               |            |          |                                       | 0                   | •                   | 0   | 53215                    | 53256                    | 123546                     |
| Radiology                | Radiology examination  | 1003487   | Date / time when the radiology examination was performed. If the   | тз             | Time stamp           |            |          |                                       | м                   | м                   | м   | 6/12/2010                | 6/12/2010                | 6/12/2010                  |
| Examination              | datetime   |           | radiology procedure examination date / time is not available, can  |                |                      |            |          |                                       |                     |                     |   |                          |                          |                            |
|                          |  |           | use the report creation date; if report creation date is not<br>available, can use the submission date to eHR.   |                |                      |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology                | Radiology modality code  | 1003488   | [eHR value] of the "Radiology modality" code table, to define  | CE             | Coded                |            |          | Radiology                             | м                   | м                   | м   | CT                       | MRI                      | MRI                        |
| Examination              |  |           | modality of the radiology examination  |                | element              |            |          | modality                              | -                   |                     |   |                          |                          |                            |
| Radiology<br>Examination | Radiology examination<br>name  | 1003489   | The name of the radiology examination such as the examination<br>region(s) or site(s)  | ST             | String               |            |          |                                       | 0                   | •                   | 0   | brain                    | Head and neck            | Abdomen and pelvic         |
| Radiology                | Radiology examination  | 1003490   | The healthcare institution where the radiology examination was   | CE             | Coded                |            |          |                                       | NA                  | NA                  | 0   |                          |                          | КН                         |
| Examination              | performing institution<br>Identifier   |           | performed. It is the [HCI identifier] in the eHR Healthcare<br>Provider Index.   |                | element              |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology                | Radiology examination  | 1003491   | The healthcare institution where the radiology examination was   | ST             | String               |            |          |                                       | NA                  | NA                  | M If Radiology performing   |                          |                          | Kowloon Hospital           |
| Examination              | performing institution long<br>name  |           | performed. It is the [HCI displayed English long name] or the [HCI<br>displayed Chinese long name] in the eHR Healthcare Provider  |                |                      |            |          |                                       |                     |                     | Institution identifier] is given<br>NA If [Radiology performing                                     |                          |                          |                            |
|                          | name   |           | Index. It should be the corresponding description of the selected<br>[HCI identifier].   |                |                      |            |          |                                       |                     |                     | institution identifier] is blank  |                          |                          |                            |
| Radiology                | Radiology examination  | 1003492   | Local description of the healthcare institution where the radiology  | ST             | String               |            |          |                                       | NA                  | 0                   | M If Radiology performing   |                          | Dr. Chan Clinic          | Kowloon Hospital           |
| Examination              | performing institution<br>local name   |           | examination is performed   |                |                      |            |          |                                       |                     |                     | Institution identifier] is given<br>NA if [Radiology performing<br>institution identifier] is blank |                          |                          |                            |
| Radiology                | Radiology examination  | 1003493   | Full English name (with title, where applicable) of the healthcare   | ST             | String               |            | R        |                                       | NA                  | 0                   | 0   |                          | Dr. Chan Tai Man         | Dr. Chan Tai Man           |
| Examination<br>Radiology | healthcare staff English<br>name<br>Radiology examination  | 1003494   | staff who performed the radiology examination<br>Full Chinese name (with title, where applicable) of the healthcare  | ST             | String               |            | P        |                                       | NA                  | 0                   | 0   |                          | 陳大文教授                    | 陳大文教授                      |
| Examination              | healthcare staff Chinese<br>name   |           | staff who performed the radiology examination.   | <b>.</b>       |                      |            | <u> </u> |                                       |                     |                     |   |                          | RACK REAL                | BR.A.SUBUR                 |
| Radiology<br>Examination | Radiology examination<br>healthcare staff type code  | 1003495   | [eHR value] of the "Procedure healthcare staff type" code table<br>which is used to identify the healthcare staff type who is chiefly<br>responsible for the radiology examination   | CE             | Coded                |            | R        | Procedure<br>healthcare<br>staff type | NA                  | NA                  | 0   |                          |                          | с                          |
| Radiology                | Radiology examination  | 1003496   | [eHR description] of the "Procedure healthcare staff type" code  | ST             | String               |            | R        | Procedure                             | NA                  | NA                  | M If (radiology examination   |                          |                          | Chief procedure healthcare |
| Examination              | healthcare staff type  |           | table which is used to identify the healthcare staff who is chiefly  |                |                      |            |          | healthcare                            |                     |                     | healthcare staff type code) is  |                          |                          | staff                      |
|                          | description  |           | responsible for the radiology examination. It should be the<br>corresponding description of the selected (radiology examination  |                |                      |            |          | staff type                            |                     |                     | given<br>NA If (radiology examination   |                          |                          |                            |
|                          |  |           | healthcare staff type code].   |                |                      |            |          |                                       |                     |                     | healthcare staff type code) is<br>blank   |                          |                          |                            |
| Radiology<br>Examination | Radiology examination<br>healthcare staff type local<br>description  | 1003497   | Local description of the type of the healthcare staff who<br>performed the radiology examination   | ST             | String               |            | R        |                                       | NA                  | 0                   | M ff (radiology examination<br>healthcare staff type code) is<br>given                              |                          | Supervisor               | Chief In-charge            |
|                          |  |           |  |                |                      |            |          |                                       |                     |                     | NA If (radiology examination<br>healthcare staff type code) is                                      |                          |                          |                            |
| Radiology                | Radiology report title   | 1003499   | The title of the radiology report  | ST             | String               |            | <u> </u> |                                       | 0                   | 0                   | Diank<br>O  | CT brain report          | MRI on Head and Neck     | MRI on abdomen and         |
| Examination              | and a start of the |           |  |                |                      |            |          |                                       |                     |                     |   | -                        | report                   | pelvic report              |
| Radiology<br>Examination | Radiology report date  | 1003499   | The documentation date of the radiology report, first use the last<br>endorsed date; if not available, use first endorsed date; if not<br>available, use radiology examination date. | TS             | Time stamp           |            |          |                                       | 0                   | 0                   | o   | 6/12/2010                | 6/12/2010                | 6/12/2010                  |
| Radiology                | Radiology report -   | 1003500   | Full English name (with title, where applicable) of the healthcare   | ST             | String               |            |          |                                       | NA                  | 0                   | 0   |                          | Dr. Chan Tai Man         | Dr. Chan Tai Man           |
| Examination              | reported by healthcare<br>staff English name   |           | staff who reported the radiology examination information   |                |                      |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology<br>Examination | Radiology report -<br>reported by healthcare<br>staff Chinese name   | 1003501   | Full Chinese name (with title, where applicable) of the healthcare<br>staff who reported the radiology examination information.  | 81             | String               |            |          |                                       | NA                  | 0                   | 0   |                          | 陳大文數授                    | 陳大文教授                      |
| Radiology<br>Examination | Radiology report (PDF)   |           | Format (PDF)   | ED             | Encapsulated<br>data |            |          |                                       | 0                   | 0                   | 0   |                          |                          |                            |
| Radiology<br>Examination | Radiology report (Text)  | 1003503   | Report of the radiology examination in text format   | тх             | Text                 |            |          |                                       | 0                   | 0                   | 0   | II                       | II                       | 11                         |
| Radiology                | Radiology Image  | 1003504   | The reference number of the radiology image(s)   | ST             | String               |            | <u> </u> |                                       | 0                   | 0                   | 0   | A12234                   | A12235                   | A12236                     |
| Examination              | accession number   |           |  |                | -                    |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology<br>Examination | Radiology Image  |           | The images of the radiology examination  |                |                      |            |          |                                       |                     |                     |   |                          |                          |                            |
| Radiology                | Radiology examination  | 1003505   | The additional information about the radiology examination   | тх             | Text                 |            |          |                                       | 0                   | 0                   | 0   | abc                      | abc                      | abc                        |
| Examination              | remark   |           | record   |                |                      |            |          |                                       |                     |                     |   |                          |                          |                            |

# **Codex: Radiology modality**





### **Radiology Modality**

Purpose: To identify the modality of the radiology examination, the type of radiology examination so that the report can be filed in the e-HR automatically

Reference : HA

| Term ID | eHR Value | eHR Description            | Full Description   |
|---------|-----------|----------------------------|--|
|         | XRAY      | General radiology          | General radiology  |
|         | FLUOR     | Fluoroscopy                | Fluoroscopy  |
|         | US        | Ultrasonography            | Ultrasonography  |
|         | СТ        | Computed tomography        | Computed tomography  |
|         | BI        | Breast imaging             | Breast imaging   |
|         | ANGIO     | Angiographic / vascular IR | Angiographic examination / vascular interventional radiology     |
|         | IR        | Non-vascular IR            | Non-vascular interventional radiology                            |
|         | MRI       | Magnetic resonance imaging | Magnetic resonance imaging                                       |
|         | NM        | Nuclear medicine           | Nuclear medicine   |
|         | PET/CT    | PET / CT fusion imaging    | Positron emission tomography / computed tomograhy fusion imaging |
|         | PET/MR    | PET / MR fusion imaging    | Positron emission tomography / magnetic resonance fusion imaging |
|         | OTHER     | Other radiology modality   | Other radiology modality   |



### **Codex: Procedure HC staff type**

Mind map

Back

Procedure Healthcare Staff Type Table

- Purpose : To indicate the healthcare staff who chiefly responsible for performing the procedure
- Source : HA

| Term ID | eHR Value | eHR Description                             |
|---------|-----------|---|
|         | С         | Chief healthcare staff of the procedure     |
|         | Α         | Assistant healthcare staff of the procedure |



### REFERRAL

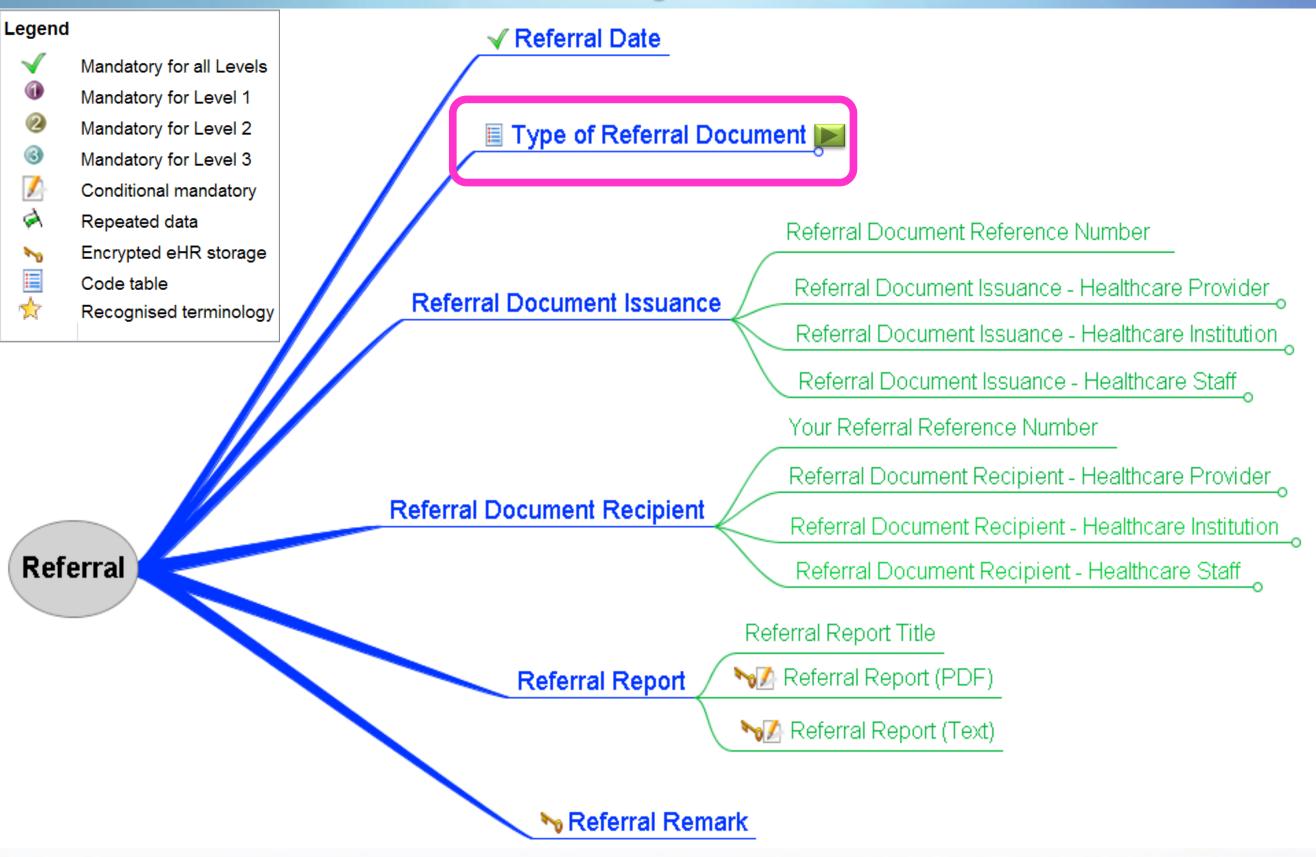


### Referral

- Referral documents the information that is required when a healthcare provider refers all or a portion of an eHR recipient's care to another healthcare provider, and the reply from the receiving healthcare provider to the referrer
- Level 1 data only



### Mind map: Referral



# Example – Level 1 (Referral) (1)

| Entity Name                                 | Code Table                   | Data requirement<br>(Certified Level 1)   | Example<br>(Certified Level 1) |
|---|------------------------------|---|--------------------------------|
| Referral date                               |                              | М   | 2/1/2011                       |
| Type of referral document code              | Type of referral<br>document | 0   | Request                        |
| Type of referral document description       | Type of referral<br>document | M if [Type of referral code] is given<br>NA if [Type of referral code] is blank | Request referral               |
| Type of referral document local description |                              | M if [Type of referral code] is given<br>NA if [Type of referral code] is blank | Referral request               |



# Example – Level 1 (Referral) (2)

| Entity Name                        | Code Table | Data requirement                    | Example             |
|------------------------------------|------------|-------------------------------------|---------------------|
| ,                                  |            | (Certified Level 1)                 | (Certified Level 1) |
| Referral document reference        |            | 0                                   | 125600              |
| number                             |            |                                     |                     |
| Referral document issuance -       |            | 0                                   | HA                  |
| healthcare provider identifier     |            |                                     |                     |
| Referral document issuance -       |            | M if [From healthcare provider      | Hospital Authority  |
| healthcare provider long name      |            | identifier] is given                |                     |
|                                    |            | NA if [From healthcare provider     |                     |
|                                    |            | identifier] is blank                |                     |
| Referral document issuance -       |            | M                                   | Hospital Authority  |
| healthcare provider local name     |            |                                     |                     |
| Referral document issuance -       |            | 0                                   | КН                  |
| healthcare institution identifier  |            |                                     |                     |
| Referral document issuance -       |            | M if [From healthcare institution   | Kowloon Hospital    |
| issued healthcare institution long |            | identifier] is given                |                     |
| name                               |            | NA if [From healthcare institution  |                     |
|                                    |            | identifier] is blank                |                     |
| Referral document issuance -       |            | M                                   | Kowloon Hospital    |
| healthcare institution local name  |            |                                     |                     |
|                                    |            |                                     |                     |
| Referral document issuance -       |            | 0                                   | 88888               |
| healthcare staff identifier        |            |                                     |                     |
| Referral document issuance -       |            | M if [From healthcare staff Chinese | Dr. Chan Tai Man    |
| healthcare staff English name      |            | name] is blank                      |                     |
| Referral document issuance -       |            | M if [From healthcare staff English | 陳大文醫生               |
| healthcare staff Chinese name      |            | name] is blank                      |                     |

ehea

# Example – Level 1 (Referral) (3)

|  |            | Bata and in the                                      | <b></b>              |
|--|------------|--|----------------------|
| Entity Name                            | Code Table | Data requirement                                     | Example              |
|  |            | (Certified Level 1)                                  | (Certified Level 1)  |
| Your referral reference number         |            | O if [Type of referral] = "Reply Referral"           | 125600               |
|  |            | NA if [Type of referral] <> "Reply Referral"         |                      |
| Deferrel decument recipient            |            | <u> </u>   | нкені                |
| Referral document recipient -          |            | 0  | HKSHL                |
| healthcare provider identifier         |            |  |                      |
| Referral document recipient -          |            | M if [To healthcare provider identifier] is given    | Hong Kong Sanatorium |
| healthcare provider long name          |            | NA if [To healthcare provider identifier] is blank   |                      |
| ······································ |            | · · · · · · · · · · · · · · · · · · ·                |                      |
|  |            |  |                      |
| Referral document recipient -          |            | 0  | HKSHL                |
| healthcare provider local name         |            |  |                      |
|  |            |  |                      |
| Referral document recipient -          |            | 0  | HKSH                 |
| healthcare institution identifier      |            |  |                      |
|  |            |  |                      |
| Referral document recipient -          |            | M if [To healthcare institution identifier] is given | Hong Kong Sanatorium |
| healthcare institution long name       |            | NA if [To healthcare institution identifier] is      | & Hospital           |
|  |            | blank  |                      |
| Referral document recipient -          |            | 0  | Hong Kong San        |
| healthcare institution local name      |            | Ŭ  | thong thong out      |
|  |            |  |                      |
| Referral document recipient -          |            | 0  | 99999                |
| healthcare staff identifier            |            |  |                      |
|  |            |  |                      |
| Referral document recipient -          |            | 0  | Dr. David Wong       |
| healthcare staff English name          |            |  |                      |
|  |            |  |                      |
| Referral document recipient -          |            | 0  | 王大文醫生                |
| healthcare staff Chinese name          |            |  |                      |
|  |            |  |                      |

### Example – Level 1 (Referral)

| Entity Name            | Code Table | Data requirement<br>(Certified Level 1)   | Example<br>(Certified Level 1) |
|------------------------|------------|---|--------------------------------|
| Referral report title  |            | 0   | Referral to MCH                |
| Referral report (PDF)  |            | M if [Referral report (Text)] is<br>blank |                                |
| Referral report (Text) |            | M if [Referral report (PDF)] is<br>blank  |                                |
| Referral remark        |            | 0   | abc                            |



### eHR viewer: Referral

| ]健調<br>health | Clinical                              | Administration      | Information                |                 |         |           |       | UPPPI       | URSE021 UPPPN    | URSE021                        | (Logou |
|---------------|---------------------------------------|---------------------|----------------------------|-----------------|---------|-----------|-------|-------------|------------------|--------------------------------|--------|
| 王黑<br>HKIC    | 莓 WONG, BL<br>: UH977321(6)           | ACKBERRIES<br>DOB : | 29 <mark>-</mark> Feb-1912 | Age : 101 years | Sex : M | Details 🕨 |       |             | Allergy &<br>ADR | Close Record<br>Select Patient |        |
|               | Referral                              |                     | eHR Docume                 | ent Viewer      |         |           |       |             |                  | 1                              |        |
|               | Period: All                           | ~                   |                            |                 |         |           | ↑ ↓   | Page 1 of 1 | <b>Q</b> 100%    | 00                             |        |
| 13            | View: Active<br>Referral to RAD       |                     | 100                        |                 |         |           |       |             |                  |                                | ^      |
|               | 05-Feb-2013<br>VHA                    | T                   | X.                         |                 |         |           |       |             |                  |                                |        |
|               | Referral to MED<br>04-Feb-2013<br>VHA |                     |                            |                 |         |           |       |             |                  |                                |        |
|               | Referral to MED                       |                     |                            | Deferr          |         |           | 0120  |             |                  |                                |        |
|               | 15-Dec-2011<br>VUC4_B                 | 12                  | 2                          | Referr          | arto    | CARDI     | 012-0 |             |                  |                                | 2      |
|               | Referral to CARDI<br>12-Oct-1999      | D                   | 02                         |                 |         |           |       |             |                  |                                |        |
|               | VUC4_A                                | T                   | 197                        | 1999            |         |           |       |             |                  |                                |        |
|               |                                       |                     |                            |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     |                            |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     |                            |                 |         |           |       |             |                  |                                |        |
| >>            |                                       |                     | 2                          | 70-             |         |           |       |             |                  |                                | 2      |
|               |                                       |                     | 07                         |                 |         |           |       |             |                  |                                | 9      |
|               |                                       |                     | 107                        |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     |                            |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     |                            |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     |                            |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     | 2                          |                 |         |           |       |             |                  |                                | 2      |
|               |                                       |                     | 000                        |                 |         |           |       |             |                  |                                | 4      |
|               |                                       |                     | 107                        |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     | 200407                     |                 |         |           |       |             |                  |                                |        |
|               |                                       |                     | P                          |                 |         |           |       |             |                  |                                | -      |

### **Related files: Referral**

- Data schema
  - Referral

- Codex
  - Type of referral



### Data schema: Referral

| Referral         Referral date           Referral         Type of referral document code           Referral         Type of referral document description           Referral         Type of referral document local description           Referral         Referral document reference number           Referral         Referral document issuance - healthcare print           Referral         Referral document issuance - healthcare st           Referral         Referral document issuance - healthcare print           Referral         Referral document recipient - healthcare print           Referral         Referral document recipient - healthcare print           Referral         Referral document recipient - healthcare print           Referral         Referral document reci  | I                                    |         |   | Data<br>Type | Data Type<br>(description)  | Validation<br>Rule                                      | Repeated<br>Data | Code Table                | Data requirement<br>(Certified Level 1)   | Example (Certified Level 1)                |
|--|--------------------------------------|---------|---|--------------|-----------------------------|---|------------------|---------------------------|---|--|
| Referral       Type of referral document code         Referral       Type of referral document description         Referral       Type of referral document local description         Referral       Referral document reference number         Referral       Referral document reference number         Referral       Referral document issuance - healthcare print         Referral       Referral document issuance - healthcare print         Referral       Referral document issuance - healthcare print         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare st         Referral       Referral document recipient - healthcare print         Referral       Referral document recipient - healthcare print <t< th=""><th></th><th>1001773</th><th>Date when the referral / reply to the referral was issued</th><th>(code)</th><th>Time stomp</th><th></th><th></th><th></th><th>м</th><th>2/1/2011</th></t<>  |                                      | 1001773 | Date when the referral / reply to the referral was issued   | (code)       | Time stomp                  |   |                  |                           | м   | 2/1/2011                                   |
| Referral       Type of referral document local description         Referral       Referral document reference number         Referral       Referral document issuance - healthcare prime         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare st         Referral       Referral document issuance - healthcare prime         Referral       Referral document recipient - healthcare prime         Referral       Referral document recipient - healthcare prime         Referral       Referral document recipient - healthcare in         Referral       Referral document recipient - healthcare in   |                                      |         | [eHR value] of the "Type of referral document" code table. Type of referral document is to define whether<br>it is a referral or a reply to a referral.   | TS<br>CE     | Time stamp<br>Coded element |   |                  | Type of referral document | O O   | Request                                    |
| Referral       Referral document reference number         Referral       Referral document issuance - healthcare properties and the set of the se                                    | 1                                    | 1003362 | [eHR description] of the "Type of referral document" code table, it should be the corresponding<br>description of the selected [Type of referral document code]. Type of referral document is to define<br>whether it is a referral or a reply to a referral.                         | ST           | String                      |   |                  | Type of referral document | M if [Type of referral code] is given<br>NA if [Type of referral code] is blank   | Request referral                           |
| Referral       Referral document issuance - healthcare properties of the sector of the s | tion 1                               | 1003363 | Local description created by the healthcare provider for the type of referral document. Type of referral<br>document is to define whether it is a referral or a reply to a referral.  | ST           | String                      |   |                  |                           | M if [Type of referral code] is given<br>NA if [Type of referral code] is blank   | Referral request                           |
| Referral       Referral document issuance - healthcare properties of the sector of the s | 1                                    | 1003360 | A reference number for the referral / reply record issued by the healthcare institution   | ST           | String                      |   |                  |                           | 0   | 125600                                     |
| Referral       Referral document issuance - healthcare properties         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - issued health name         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare st         Referral       Referral document recipient - healthcare properties         Referral       Referral document recipient - healthcare properties         Referral       Referral document recipient - healthcare properties         Referral       Referral document recipient - healthcare instructure instructure         Referral       Referral document recipient - healthcare instructure  | e provider identifier 1              | 1003463 | The healthcare provider who issued the referral / reply record. It is the [HCP identifier] in the eHR<br>Healthcare Provider Index.   | ST           | String                      |   |                  |                           | 0   | HA   |
| Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - issued health         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare st         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare ins   | e provider long name 1               | 1003464 | The healthcare provider who issued the referral / reply record. It is the [HCP displayed English long<br>name] or the [HCP displayed Chinese long name] in eHR Healthcare Provider Index. It should be the<br>corresponding description of the selected [HCP identifier].             | ST           | String                      |   |                  |                           | M if [From healthcare provider<br>identifier] is given<br>NA if [From healthcare provider<br>identifier] is blank       | Hospital Authority                         |
| Referral       Referral document issuance - issued health name         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare st         Referral       Referral document recipient - healthcare st         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare inst   | re provider local name 1             | 1003465 | Local description of the healthcare provider who issued the referral / reply record   | ST           | String                      |   |                  |                           | м   | Hospital Authority                         |
| name         Referral       Referral document issuance - healthcare in         Referral       Referral document issuance - healthcare st         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare ins   | e institution identifier 1           | 1003466 | The healthcare institution who issued the referral / reply record. It is the [HCI identifier] in the eHR<br>Healthcare Provider Index.  | ST           | String                      |   |                  |                           | 0   | КН   |
| Referral       Referral document issuance - healthcare st         Referral       Your referral reference number         Referral       Your referral reference number         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare instructure  | althcare institution long 1          | 1003467 | The healthcare institution who issued the referral / reply record. It is the [HCI displayed English long<br>name] or the [HCI displayed Chinese long name] in eHR Healthcare Provider Index. It should be the<br>corresponding description of the selected [HCI identifier].          | ST           | String                      |   |                  |                           | M if [From healthcare institution<br>identifier] is given<br>NA if [From healthcare institution<br>identifier] is blank | Kowloon Hospital                           |
| Referral       Referral document issuance - healthcare st         Referral       Referral document issuance - healthcare st         Referral       Your referral reference number         Referral       Your referral reference number         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare instructure instructure instructure         Referral       Referral document recipient - healthcare instructure  | re institution local name            | 1003468 | Local description for the healthcare institution who issued the referral / reply record   | ST           | String                      |   |                  |                           | м   | Kowloon Hospital                           |
| Referral       Referral document issuance - healthcare st         Referral       Your referral reference number         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare instructure in  | re staff identifier 1                | 1003469 | The healthcare staff who issued the referral / reply record. It is the [HCS identifier] in the eHR Healthcare<br>Staff Index.   | ST           | String                      |   |                  |                           | 0   | 88888                                      |
| Referral       Your referral reference number         Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare ins  | re staff English name 1              | 1003470 | Full English name (with title, where applicable) of the healthcare staff who issued the referral / reply<br>record  | ST           | String                      |   |                  |                           | M if [From healthcare staff Chinese<br>name] is blank   | Dr. Chan Tai Man                           |
| Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare ins  | e staff Chinese name 1               | 1003471 | Full Chinese name (with title, where applicable) of the healthcare staff who issued the referral / reply<br>record.   | ST           | String                      |   |                  |                           | M if [From healthcare staff English<br>name] is blank   | 陳大文醫生                                      |
| Referral       Referral document recipient - healthcare provide the sector of the sector | 1                                    | 1003472 | [Your referral reference number] is used in replying a referral request. It is the reference number of the<br>referral request issued by the referring healthcare provider.   | ST           | String                      | Applicable<br>only if [Type of<br>referral] =<br>"Reply | F                |                           | O if [Type of referral] = "Reply<br>Referral"<br>NA if [Type of referral] <> "Reply<br>Referral"                        | 125600                                     |
| Referral       Referral document recipient - healthcare pr         Referral       Referral document recipient - healthcare ins   | e provider identifier 1              | 1003473 | The healthcare provider to whom the referral / reply record is sent. It is the [HCP identifier] in the eHR<br>Healthcare Provider Index.  | ST           | String                      |   |                  |                           | 0   | HKSHL                                      |
| Referral         Referral document recipient - healthcare instruction           Referral         Referral document recipient - healthcare instruction           Referral         Referral document recipient - healthcare instruction  | e provider long name 1               | 1003474 | The healthcare provider to whom the referral / reply record is sent. It is the [HCP displayed English long<br>name] or the [HCP displayed Chinese long name] in the eHR Healthcare Provider Index. It should be the<br>corresponding description of the selected [HCP identifier].    | ST           | String                      |   |                  |                           | M if [To healthcare provider identifier]<br>is given<br>NA if [To healthcare provider identifier]<br>is blank           | Hong Kong Sanatorium<br>& Hospital Limited |
| Referral         Referral document recipient - healthcare instruction           Referral         Referral document recipient - healthcare instruction  | e provider local name 1 <sup>4</sup> | 1003475 | Local description of the healthcare provider to whom the referral / reply record is sent  | ST           | String                      |   |                  |                           | 0   | HKSHL                                      |
| Referral Referral document recipient - healthcare in   | e institution identifier 1           | 1003476 | The healthcare institution to whom the referral / reply record is sent. It is the [HCI identifier] in the eHR<br>Healthcare Provider Index.   | ST           | String                      |   |                  |                           | 0   | HKSH                                       |
|  | e institution long name 1            | 1003477 | The healthcare institution to whom the referral / reply record is sent. It is the [HCI displayed English long<br>name] or the [HCI displayed Chinese long name] in the eHR Healthcare Provider Index. It should be the<br>corresponding description of the selected [HCI identifier]. | ST           | String                      |   |                  |                           | M if [To healthcare institution identifier]<br>is given<br>NA if [To healthcare institution<br>identifier] is blank     | Hong Kong Sanatorium & Hospital            |
| Referral Referral document recipient - healthcare sta  | e institution local name             | 1003478 | Local description for the healthcare institution to whom the referral / reply record is sent  | ST           | String                      |   |                  |                           | 0   | Hong Kong San                              |
|  | e staff identifier 1                 | 1003479 | The healthcare staff to whom the referral / reply record was sent. It is the [HCS identifier] in the eHR<br>Healthcare Staff Index.   | ST           | String                      |   |                  |                           | 0   | 99999                                      |
| Referral Referral document recipient - healthcare sta  | e staff English name 1 <sup>4</sup>  | 1003480 | Full English name (with title, where applicable) of the healthcare staff to whom the referral / reply record<br>is sent   | ST           | String                      |   |                  |                           | 0   | Dr. David Wong                             |
| Referral Referral document recipient - healthcare sta  | e staff Chinese name 1               | 1003481 | Full Chinese name (with title, where applicable) of the healthcare staff to whom the referral / reply record<br>is sent.  | ST           | String                      |   |                  |                           | 0   | 王大文醫生                                      |
| Referral Referral report title   |                                      | 1003364 |   | ST           | String                      |   |                  |                           | 0   | Referral to MCH                            |
| Referral Referral report (PDF) Referral Referral report (Text)   |                                      | 1003366 | Referral / reply record in Portable Document Format (PDF)<br>Referral / reply record in text format   | ED<br>TX     | Encapsulated data           |   |                  |                           | M if [Referral report (Text)] is blank<br>M if [Referral report (PDF)] is blank   | 7  |
| Referral Referral report (Text) Referral Referral remark   |                                      |         |   | ТХ           | Text                        |   |                  |                           | M if [Referral report (PDF)] is blank   | abc  |

# **Codex: Type of referral**



Type of referral document Purpose : To define the type of referral document Source :

| Term ID eHR Value    |         | eHR Description          | Definition   |  |  |  |  |  |  |
|----------------------|---------|--------------------------|--|--|--|--|--|--|--|
|                      | Request | Request referral         | The request referral document is made by a healthcare provider<br>(referring provider) to refer a patient to other healthcare providers<br>such as specialists for ongoing care. |  |  |  |  |  |  |
| Reply Reply referral |         | Reply referral           | The reply document to a request referral is made by the referred healthcare provider.  |  |  |  |  |  |  |
|                      | Unknown | Unknown type of referral | The type of referral document is not known.  |  |  |  |  |  |  |



### **THANK YOU**

