

Clinical Laboratory Case ID Report
Record Layout & File Specifications

<u>DATA ITEM NAME</u>	<u>FIELD REQUIREMENT</u> <u>R = Required</u>	<u>FIELD LENGTH</u> <u>tab delimited</u>	<u>Flat File Field #</u>	<u>NAACCR Standard Item Number</u>	<u>HL7 Location or branded value</u>
<u>LABORATORY INFORMATION SECTION</u>					
RECORD TYPE	O	1	Field 1	10	L
PATH VERSION NUMBER	R	6	Field 2	7000	1
PATH FACILITY ID NUMBER (CLIA NUMBER)	R	25	Field 3	7010	OBX.15.1
LABORATORY NAME	R	50	Field 4	7020	MSH4.1
LABORATORY STREET ADDRESS	R	25	Field 5	7030	MSH4.1
LABORATORY CITY	R	20	Field 6	7040	MSH4.1
LABORATORY STATE/PROVINCE	R	2	Field 7	7050	MSH4.1
LABORATORY ZIP CODE/POSTAL CODE	R	5 + 4	Field 8	7060	MSH4.1
LABORATORY PHONE NUMBER	R	10	Field 9	7070	OBR.21.1- OBR.21.2
<u>PATIENT INFORMATION SECTION</u>					
PATIENT LAST NAME	R	25	Field 10	2230	PID.5.1
PATIENT FIRST NAME	R	14	Field 11	2240	PID.5.2
PATIENT MIDDLE NAME	O	14	Field 12	2250	PID.5.3
PATIENT STREET ADDRESS	R (starting 4/1/16)	25	Field 13	2330	PID.11.1
PATIENT CITY/TOWN	R (starting 4/1/16)	20	Field 14	70	PID.11.3
PATIENT STATE/PROVINCE	R (starting 4/1/16)	2	Field 15	80	PID.11.4
PATIENT ZIP CODE/POSTAL CODE	R (starting 4/1/16)	5 + 4	Field 16	100	PID.11.5
PATIENT PHONE NUMBER	O	10	Field 17	2360	PID.13.1
PATIENT DATE OF BIRTH	R	8	Field 18	240	PID.7.1
PATIENT AGE AT SPECIMEN	O	10	Field 19	7080	PID.7.1
PATIENT SOCIAL SECURITY NUMBER	R	9	Field 20	2320	PID.19.1
PATIENT SEX	R	1	Field 21	220	PID.8.1
PATIENT MEDICAL RECORD NUMBER	O	11	Field 22	2300	PID.3.1
SLIDE/PATHOLOGY REPORT NUMBER	R	20	Field 23	7090	OBR.3.1
<u>PHYSICIAN/ORDERING CLIENT SECTION</u> <u>(ATTENDING PHYSICIAN INFORMATION)</u>					
PHYSICIAN LICENSE NUMBER	O	8	Field 24	7100	OBR.16.1
PHYSICIAN LAST NAME	R	25	Field 25	7110	OBR.16.2
PHYSICIAN FIRST NAME	R	14	Field 26	7120	OBR.16.3
PHYSICIAN MIDDLE NAME	O	14	Field 27	7130	OBR.16.4
PHYSICIAN STREET ADDRESS	R	25	Field 28	7140	ORC.24.1
PHYSICIAN CITY	R	20	Field 29	7150	ORC.24.3
PHYSICIAN STATE/PROVINCE	R	2	Field 30	7160	ORC.24.4
PHYSICIAN ZIP/POSTAL CODE	R	5 + 4	Field 31	7170	ORC.24.5
PHYSICIAN PHONE NUMBER	O	10	Field 32	7180	OBR.17.1- OBR.17.4
<u>WORK FACILITY INFORMATION SECTION</u> <u>(corporate labs with multiple work sites)</u>					
WORK FACILITY ID NUMBER (AHA #)	O	25	Field 33	7190	ORC.21.3
WORK FACILITY NAME	O	50	Field 34	7200	ORC.21.1.1- ORC.21.1.2
WORK FACILITY STREET ADDRESS	O	25	Field 35	7210	ORC.22.1
WORK FACILITY CITY	O	20	Field 36	7220	ORC.22.3

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<u>WORK FACILITY INFORMATION SECTION</u> (corporate labs with multiple work sites) - continued					
WORK FACILITY STATE/PROVINCE	O	2	Field 37	7230	ORC.22.4
WORK FACILITY ZIP/POSTAL CODE	O	9	Field 38	7240	ORC.22.5
WORK FACILITY PHONE NUMBER	O	10	Field 39	7250	ORC.23.1- ORC.23.7
<u>REPORTING PATHOLOGIST INFORMATION SECTION</u>					
REPORTING PATHOLOGIST LAST NAME	O	25	Field 40	7260	OBR.32.1.2
REPORTING PATHOLOGIST FIRST NAME	O	14	Field 41	7270	OBR.32.1.3
REPORTING PATHOLOGIST MIDDLE NAME	O	14	Field 42	7280	OBR.32.1.4
REPORTING PATHOLOGIST SUFFIX	O	3	Field 43	7290	OBR.32.1.5
REPORTING PATHOLOGIST LICENSE NUMBER	O	8	Field 44	7300	OBR.32.1.1
REPORTING PATHOLOGIST STATE LICENSOR	O	2	Field 45	7310	OBR.32.1.9
<u>PATH REPORT & PATH CODING SECTION</u>					
DATE OF SPECIMEN COLLECTION	R	8	Field 46	7320	OBR.7.1
STATUS INDIVIDUAL RESULT	O	1	Field 47	7330	OBR.25.1
SNOMED CODE	O	18 (with up to 15 sets of codes)	Field 48	7340	N/A for HL7 submissions
SNOMED CODE – VERSION NUMBER	O	5	Field 49	7350	N/A for HL7 submissions
ICD CODE	O	10 (with up to 6 sets of codes)	Field 50	7360	OBX5.1 (if OBX.5.3 contains ICD)
ICD CODE – VERSION NUMBER	O	5	Field 51	7370	OBX 5.3
CPT CODE	O	5 (with up to 3 sets of codes)	Field 52	7380	N/A for HL7 submissions
CPT CODE – VERSION NUMBER	O	5	Field 53	7390	N/A for HL7 submissions
<u>PATH REPORT - TEXT SECTION</u>					
TEXT – DIAGNOSIS *(Note: If text cannot be separated into the Text categories outlined below, use this field for free text & combine all information from all text areas into this extended text field.)	R*	32,000	Field 54	7400	OBX.5.2
TEXT - CLINICAL HISTORY	R*	3000	Field 55	7410	OBX.5.1
TEXT - NATURE OF SPECIMEN	R*	3000	Field 56	7420	OBX.5.1
TEXT - GROSS PATHOLOGY	R*	3000	Field 57	7430	OBX.5.1
TEXT – MICROSCOPIC PATHOLOGY	R*	3000	Field 58	7440	OBX.5.1
TEXT - FINAL DIAGNOSIS	R*	4000	Field 59	7450	OBX.5.1
TEXT - COMMENT SECTION	R*	3000	Field 60	7460	OBX.5.1
TEXT – SUPPLEMENTAL REPORTS/ADDENDA	R*	4000	Field 61	7470	OBX.5.1
TEXT - STAGING PARAMETERS	R*	3000	Field 62	2600	
DATE CASE TRANSMITTED	O	8	Field 63	2110	MSH.7.1
Path – Report Type	O	2	Field 64	7480	01

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NOTES:

Files may be compressed before upload using the DOS/Windows ZIP compression standard. PKZIP or WINZIP are examples of programs that produce the correct compressed format.

Files must be in ASCII, with one CR/LF sequence at end of each record.

Fields are separated by 1 tab character, beginning after field 1.

No embedded CR/LF, TABS other than as field separators, or other control characters in text fields.

No quotes "" around fields, just data.

Dates are in YYYYMMDD format.

No "Header" records with variable names, just data.

For fields that are not required or have missing information, they should have nothing between tabs - do not insert blanks.

Since the first field is optional, the file may begin with 1 tab. Ex:

```
<TAB>PATH VERSION NUMBER<TAB>PATH FACILITY ID (CLIA#)<TAB>LAB NAME<TAB>...
```

or if fields 1 and 2 are supplied:

```
RECORD TYPE<TAB>PATH VERSION NUMBER<TAB>PATH FACILITY ID (CLIA#)<TAB>LAB NAME<TAB>...
```

The last field is optional, so the file may end with a tab. Ex:

```
field 63 DATE CASE TRANSMITTED<TAB>
```

or if field 64 is supplied:

```
field 63 DATE CASE TRANSMITTED<TAB>OPTIONAL PATH REPORT TYPE
```

But if field 64 is supplied, do not put a TAB after it.

Fields 48, 50, 52 can have multiple codes and variable lengths. Since there are no sub-field separators in this file specification, each code must be fixed width. For example: each SNOMED Code must be 18 characters in length. If a code is shorter than 18, pad the end of the code with spaces so that its length is 18. Do not separate multiple codes with TABS. Field 48 can have up to 15 sets of 18 character codes. Do not pad missing codes with 18 spaces.

Ex: The following line fragment begins with field 48, SNOMED CODE. It has 3 (made up) codes: 11111, 222222222222222222, and 333333333. A tab ends field 48 and field 49 follows. No extra spaces are added for missing codes 4-18. Tabs are represented as <TAB>, blanks as " ". Do not put " " in actual data file

```
...<TAB>11111_____222222222222222222_333333333_____<TAB>SNOMED CODE VERSION<TAB>...
```

Field lengths are the maximum allowed length for that field (or sub-field as in the case of fields 48, 50, 52). Don't add extra trailing spaces (except to pad sub-fields as in the previously mentioned fields 48, 50, 52).

Since there are 64 fields, each record must have exactly 63 separating tabs. Files with extra/missing tabs - in any record - will be rejected.

HL7 NOTES:

FCDS is now receiving Path files in HL7 format via file ftp uploads. Contact FCDS 305-243-4600 or mrudolph@med.miami.edu for an FTP account to submit Path HL7 files. Some fields accepted in the tab-delimited format are skipped or branded in the HL7 uploads (ex: CPT/SNOMED).