

Category	English Story	Data Tab
1	Nicole Francis White arrives at Manor Creek Clinic for a biopsy of the jagged scab-like lesion on her left forearm. Ongoing problems that are currently being monitored include hypertension. Because the pathology report indicated a lentigo maligna, the patient is referred to Dr. Edward Ferguson of UW Dermatology Associates for wide excision.	Cat1 Case2

## Category 1 Case 2

templateID	Data Element	Code/Value	Display Name	Code System OID	Code System Name	Conformance
<b>2.16.840.1.1 13883.10.20. 3</b>	<b>Header</b>					
2.16.840.1.11 3883.10.20.3	Date Case Report Exported	2/25/2012				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Last Name	WHITE				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Name Suffix					<b>SHOULD</b>
2.16.840.1.11 3883.10.20.3	Patient First Name	NICOLE				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Middle Name	FRANCIS				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Maiden Name	BICKFORD				<b>SHOULD</b>
2.16.840.1.11 3883.10.20.3	Patient Name Alias					<b>SHOULD</b>
	<b>Patient Address</b>					<b>SHALL</b>
	Patient Street Address	12708 Cambridge Court				<b>SHALL</b>
	City	Madison				<b>SHALL</b>
	State	WI		2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
	Postal Code	53705		2.16.840.1.11 3883.6.231	US Postal Codes	<b>SHALL</b>
	Country	USA	United States	1.0.3166.1	ISO 3166-1	<b>SHALL</b>
	Start Date	10/1/1998				<b>SHALL</b>
	End Date	1/30/2007				<b>SHALL</b>
	Patient Street Address	2900 66th Ave So				<b>SHALL</b>
	City	Menomonie				<b>SHALL</b>
	State	WI		2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>

	Postal Code	54751		2.16.840.1.11 3883.6.231	US Postal Codes	<b>SHALL</b>
	Country	USA	United States	1.0.3166.1	ISO 3166-1	<b>SHALL</b>
	Address History: Start Date	1/31/2007				<b>SHALL</b>
	Address History: End Date					<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Telephone	373-250- 1999				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Sex/Gender	F	Female	2.16.840.1.11 3883.5.1	HL7 Administrative Gender	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Date of Birth	8/14/1962				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Medical Record Number	8853698-47				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Social Security Number	523-61-1475		2.16.840.1.11 3883.4.1	United States Social Security Administratio n (SSA)	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Race	2058-6	African American	2.16.840.1.11 3883.6.238	Race & Ethnicity - CDC	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Race (multiple)	2072-7	Jamaican	2.16.840.1.11 3883.6.238	Race and Ethnicity - CDC	<b>MAY</b>
2.16.840.1.11 3883.10.20.3	Patient Ethnicity	2186-5	Not Hispanic or Latino	2.16.840.1.11 3883.6.238	Race and Ethnicity - CDC	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.1. 14.1	Patient Birth Place	OK	Oklahoma	2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Patient Marital Status	L	Legally separated	2.16.840.1.11 3883.5.2	HL7 Marital Status	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Physician Name	Jack Drake				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Physician ID (NPI)	2345125896		2.16.840.1.11 3883.4.6	NPI	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Physician Street Address	3579 63rd Circle				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	City	Madison		2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	State	WI		2.16.840.1.11 3883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Postal Code	53705				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Country	USA	United States	1.0.3166.1	ISO 3166-1	<b>SHALL</b>

2.16.840.1.11 3883.10.20.3	Physician email					<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Physician Telephone	6089793288				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Physician specialty			2.16.840.1.11 3883.6.101	NUCC Health Care Provider Taxonomy	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Provider Organization ID	3579512846 0		2.16.840.1.11 3883.4.6	NPI	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Provider Organization Name	Manor Creek Clinic				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Provider Organization Street Address	3579 63rd Circle				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	City	Madison				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	State	WI		2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Postal Code	53705		2.16.840.1.11 3883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Country	USA	United States			<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Provider Organization Telephone	6089793288				<b>SHALL</b>
	<b>[Encompassing Encounter]</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.4.1.3.1	Provider Referred From ID (NPI)					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.4.1.3.1	Provider Referred From Name					<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Provider Referred From Street Address					<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	City					<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	State			2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Postal Code			2.16.840.1.11 3883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Country					<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Provider Referred From Telephone					<b>SHALL</b>

<b>1.3.6.1.4.1.1</b> <b>9376.1.5.3.1.</b> <b>3.16.1</b>	<b>Coded Social History Section</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 13.4	Usual Occupation	9620	Laborers and freight, stock, and material movers, hand	2.16.840.1.11 3883.6.240	U.S. Census Occupation Code	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 13.4	Usual Industry	4870	Building material and supplies dealers	2.16.840.1.11 3883.6.310	U.S. Census Industry Code	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 13.4	Smoking Status	266919005	Never Smoker	2.16.840.1.11 3883.6.96	SNOMEDCT	<b>SHALL</b>
<b>1.3.6.1.4.1.1</b> <b>9376.1.5.3.1.</b> <b>1.5.3.7</b>	<b>Payers Section</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 17	Primary Payer at Diagnosis	52	Private Health Insurance - Indemnity	2.16.840.1.11 3883.3.221.5	Source of Payment Typology (PHDSC)	<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 17		IN	Indemnity	2.16.840.1.11 3883.6.255	X12 Data Element 1336	<b>SHOULD</b>
<b>1.3.6.1.4.1.1</b> <b>9376.1.7.3.1.</b> <b>3.14.1</b>	<b>Cancer Diagnosis Section</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.3. 14.1	Narrative	Stage 0 Malignant Melanoma of upper limb, including shoulder				<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	<b>Cancer Diagnosis Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	Diagnosis Date	2/25/2012				<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	Histologic Type	8742	Lentigo Maligna	2.16.840.1.11 3883.6.43.1	ICD-O-3	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1		M8742/2	Hutchinson's melanotic freckle	2.16.840.1.11 3883.6.103	ICD-9-CM	<b>SHALL</b>

1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1		302836005	Lentigo Maligna	2.16.840.1.11 3883.6.96	SNOMEDCT	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	Behavior	2	In situ; non- invasive	2.16.840.1.11 3883.3.520.3. 14	NAACCR Behavior Code	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	Diagnostic confirmation	1	Positive Histology	2.16.840.1.11 3883.3.520.3. 3	NAACCR Diagnostic Confirmation	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	Primary Site	172.6	Malignant Melanoma of upper limb, including shoulder	2.16.840.1.11 3883.6.103	ICD-9CM (diagnoses)	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1		416433004	Skin and subcutaneous tissue structure of forearm (body structure)	2.16.840.1.11 3883.6.96	Body Site (SNOMEDCT)	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.1	Laterality	2	Left	2.16.840.1.11 3883.3.520.3. 1	NAACCR Laterality at Diagnosis	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	<b>TNM Clinical Stage Entry</b>					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Clinical Stage Group	0		2.16.840.1.11 3883.15.6	TNM 7th Edition	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Clinical Stage Descriptor	0	None	2.16.840.1.11 3883.3.520.3. 10	NAACCR TNM Clinical Stage Descriptor	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Edition	7	AJCC Staging Manual, 7th Edition	2.16.840.1.11 3883.3.520.3. 5	NAACCR TNM Edition Number	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Clinical Staged By	2	Pathologist	2.16.840.1.11 3883.3.520.3. 4	NAACCR TNM Clinical Staged By	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Clinical T	Tis		2.16.840.1.11 3883.3.520.3. 6	NAACCR TNM Clinical Tumor	<b>SHALL</b>
	Date/Time	2/25/2012				<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Clinical N	N0		2.16.840.1.11 3883.3.520.3. 7	NAACCR TNM Clinical Node	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	Date/Time	2/25/2012				<b>SHALL</b>

1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	TNM Clinical M	M0		2.16.840.1.11 3883.3.520.3. 8	NAACCR TNM Clinical Metastasis	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.7.3.1.4. 14.2	Date/Time	2/25/2012				<b>SHALL</b>
<b>1.3.6.1.4.1.1 9376.1.5.3.1. 3.6</b>	<b>Active Problems Section</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	problem start date	4/20/1998				<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	problem stop date					<b>SHALL (when Problem Status=completed or aborted) SHALL NOT (when Problem Status does not = completed or aborted)</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	Problem	401.9	Unspecified hypertension	2.16.840.1.11 3883.6.103	ICD-9CM (diagnoses)	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2		38341003	Hypertensive disorder	2.16.840.1.11 3883.6.96	SNOMEDCT	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	Problem Status	Active	Active			<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	problem start date	2/25/2012				<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	problem stop date	NA	Not applicable. Known to have no proper value			<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	Problem	172.6	Malignant Melanoma of upper limb, including shoulder	2.16.840.1.11 3883.6.103	ICD-9CM (diagnoses)	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2		302836005	Lentigo Maligna	2.16.840.1.11 3883.6.96	SNOMEDCT	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 5.2	Problem Status	Active				<b>SHALL</b>
<b>1.3.6.1.4.1.1 9376.1.5.3.1. 1.13.2.7</b>	<b>Progress Note Section</b>					<b>SHALL</b>

	Progress Notes Narrative		Discussed results of biopsy of 0.75 cm lesion on left forearm. Because the pathology report indicated a lentigo maligna, the patient is referred to Dr. Edward Ferguson of UW Dermatology Associates for wide excision.				<b>SHALL</b>
<b>1.3.6.1.4.1.1 9376.1.5.3.1. 3.28</b>	<b>Coded Results Section</b>						<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4.19	<b>Procedure Entry</b>						<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4.19	Procedure Code	312968005	Excision biopsy of skin lesion	2.16.840.1.11 3883.6.96	SNOMEDCT		<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4.19		11100	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed; single lesion	2.16.840.1.11 3883.6.12	CPT-4		<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4.19		86.11	Biopsy of skin and subcutaneous tissue	2.16.840.1.11 3883.6.104	ICD-9-CM Procedures		<b>SHALL</b>

1.3.6.1.4.1.19 376.1.5.3.1.4.19				2.16.840.1.11 3883.6.1	LOINC	SHALL
1.3.6.1.4.1.19 376.1.5.3.1.4.19	Procedure Date	2/25/2012				SHOULD
1.3.6.1.4.1.19 376.1.5.3.1.4.13	<b>Simple Observation Entry</b>					SHALL
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Code (Lab Test Name)	22637-3	Path report.final diagnosis	2.16.840.1.11 3883.6.1	LOINC	SHALL
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Value data type (xsi:type)	ST				SHALL
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Value	The overall morphology and immunohistochemical profile are consistent with lentigo maligna melanoma.				SHALL
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Result Units					SHALL (when Value@xsi:type="PQ")
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Result Date/Time	2/25/2012				SHALL
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Diagnosing Facility	Manor Creek Path Laboratory				MAY
1.3.6.1.4.1.19 376.1.5.3.1.4.13	Diagnostic facility ID	12D2123212		2.16.840.1.11 3883.4.7	CLIA	MAY
<b>2.16.840.1.1 13883.10.20.1.12</b>	<b>Procedures Section</b>					SHALL
2.16.840.1.11 3883.10.20.1.29	<b>Procedure Activity Entry</b>					SHALL
2.16.840.1.11 3883.10.20.1.29	Procedure			2.16.840.1.11 3883.6.1	LOINC	SHALL
2.16.840.1.11 3883.10.20.1.29		312968005	Excision biopsy of skin lesion	2.16.840.1.11 3883.6.96	SNOMEDCT	SHALL



2.16.840.1.11 3883.10.20.1. 29		11100	Biopsy of skin, subcutaneous tissue and/or mucous membrane (including simple closure), unless otherwise listed; single lesion	2.16.840.1.11 3883.6.12	CPT-4	<b>SHALL</b>
2.16.840.1.11 3883.10.20.1. 29		86.11	Biopsy of skin and subcutaneous tissue	2.16.840.1.11 3883.6.104	ICD-9-CM Procedures	<b>SHALL</b>
2.16.840.1.11 3883.10.20.1. 29	Site of procedure			2.16.840.1.11 3883.6.96	SNOMEDCT	<b>MAY</b>
2.16.840.1.11 3883.10.20.1. 29	Date of procedure	2/25/2012				<b>SHOULD</b>
<b>1.3.6.1.4.1.1 9376.1.7.3.1. 3.14.2</b>	<b>Procedure Section - Radiation Oncology</b>					<b>SHALL</b>
	Narrative					<b>SHALL</b>
<b>1.3.6.1.4.1.1 9376.1.5.3.1. 3.19</b>	<b>Medications Section</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	<b>Medications Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Start Date	4/20/1998				<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Stop Date					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Timing (Frequency)	qd	Daily			<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Route	C38288	Oral	2.16.840.1.11 3883.3.26.1.1	NCI Thesaurus	<b>SHOULD</b>

1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Dose	100				<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Dose Unit	mg		2.16.840.1.11 3883.11.1283 9	UnitsOfMeasureCaseSensitivity	<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Site			2.16.840.1.11 3883.12.163	Body Site (HL7)	<b>MAY</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Rate					<b>MAY</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.4. 7.2</b>	<b>Product Entry</b>					<b>SHALL</b>
	<b>manufacturedMaterial</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Code (of Product Name)	197379	Atenolol	2.16.840.1.11 3883.6.88	RxNorm	<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Name	Atenolol				<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Strength (original text)	Atenolol 100 mg tablet				<b>SHOULD</b>
<b>1.3.6.1.4.1.1 9376.1.5.3.1. 3.21</b>	<b>Medications Administered Section</b> (medications that are administered during the encounter)					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	<b>Medications Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Start Date					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Stop Date					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Frequency					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Route			2.16.840.1.11 3883.3.26.1.1	NCI Thesaurus	<b>SHOULD</b>

1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Dose					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Dose Unit			2.16.840.1.11 3883.11.1283 9	UnitsOfMeasureCaseSensitivity	<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Site			2.16.840.1.11 3883.12.163	Body Site (HL7)	<b>MAY</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Rate					<b>MAY</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.4. 7.2</b>	<b>Product Entry</b>					<b>SHALL</b>
	<b>manufacturedMaterial</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Code (of Product Name)			2.16.840.1.11 3883.6.88	RxNorm	<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Name					<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 7	Strength (original text)					<b>SHOULD</b>
<b>1.3.6.1.4.1.1 9376.1.5.3.1. 3.31</b>	<b>Care Plan Section</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 14	<b>Encounters Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 14	Provider Referred to (NPI) (APT Mood)	1144667700		2.16.840.1.11 3883.4.6	NPI	<b>SHOULD</b>
1.3.6.1.4.1.19 376.1.5.3.1.4. 14	Provider Referred to Name	Edward Ferguson				<b>SHOULD</b>
2.16.840.1.11 3883.10.20.3	Provider Referred to Street Address	1122 BLAGIE BLVD				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	City	MIDDLETON				<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	State	WI		2.16.840.1.11 3883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Postal Code	56562-5531		2.16.840.1.11 3883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.11 3883.10.20.3	Country	USA	United States			<b>SHALL</b>

2.16.840.1.11	Provider					
3883.10.20.3	Referred to Telephone	6088295485				<b>SHALL</b>