

Category	English Story	Data Tab
1	Jennifer Junipero presents today at Hometown Clinic complaining of trouble breathing and significant fatigue. Ongoing problems that are currently being monitored include Alzheimer's Disease. Chest x-ray performed in the office shows irregular nodules in the left upper lobe of the lung. These findings represent metastatic malignant melanoma. Examination of the patient's skin reveals only a small pigmented nevus. Patient is referred for further definitive workup with Dr. Robert Plast.	Cat1 Case3

## Category 1 Case 3

templateID	Data Element	Code/Value	Display Name	Code System OID	Code System Name	Conformance
<b>2.16.840.1.11 3883.10.20.3</b>	<b>Header</b>					
2.16.840.1.113 883.10.20.3	Date Case Report Exported	8/15/2012				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Last Name	JUNIPERO				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Name Suffix					<b>SHOULD</b>
2.16.840.1.113 883.10.20.3	Patient First Name	JENNIFER				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Middle Name	JOAN				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Maiden Name	VALDEZ				<b>SHOULD</b>
2.16.840.1.113 883.10.20.3	Patient Name Alias					<b>SHOULD</b>
	<b>Patient Address</b>					<b>SHALL</b>
	Patient Street Address	123 Quarterpole Drive				<b>SHALL</b>
	City	Hallandale				<b>SHALL</b>
	State	FL		2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
	Postal Code	33008		2.16.840.1.1 13883.6.231	US Postal Codes	<b>SHALL</b>
	Country	USA	United States	1.0.3166.1	ISO 3166-1	<b>SHALL</b>
	Start Date	6/23/1972				<b>SHALL</b>
	End Date	1/3/2012				<b>SHALL</b>
	Patient Street Address	333 3rd Street North				<b>SHALL</b>
	City	Altoona				<b>SHALL</b>
	State	IA		2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>

	Postal Code	50009		2.16.840.1.1 13883.6.231	US Postal Codes	<b>SHALL</b>
	Country	USA	United States	1.0.3166.1	ISO 3166-1	<b>SHALL</b>
	Address History: Start Date	1/4/2012				<b>SHALL</b>
	Address History: End Date	NA	Not applicable. Known to have no proper value			<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Telephone	5156971333				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Sex/Gender	F	Female	2.16.840.1.1 13883.5.1	HL7 Administrative Gender	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Date of Birth	4/3/1943				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Medical Record Number	99- 374862355				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Social Security Number	268-84-9635		2.16.840.1.1 13883.4.1	United States Social Security Administration (SSA)	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Race	2058-6	African American	2.16.840.1.1 13883.6.238	Race & Ethnicity - CDC	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Race (multiple)	2072-7	Jamaican	2.16.840.1.1 13883.6.238	Race and Ethnicity - CDC	<b>MAY</b>
2.16.840.1.113 883.10.20.3	Patient Ethnicity	2186-5	Not Hispanic or Latino	2.16.840.1.1 13883.6.238	Race and Ethnicity - CDC	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.1.14. 1	Patient Birth Place	ARG	Argentina	2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Patient Marital Status	W	Widowed	2.16.840.1.1 13883.5.2	HL7 Marital Status	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Physician Name	Roderigo Manuez				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Physician ID (NPI)	6278355599		2.16.840.1.1 13883.4.6	NPI	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Physician Street Address	7932 Willfred Blvd.				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	City	Altoona		2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	State	IA		2.16.840.1.1 13883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Postal Code	50009				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Country	USA	United States	1.0.3166.1	ISO 3166-1	<b>SHALL</b>

2.16.840.1.113 883.10.20.3	Physician email					<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Physician Telephone	5155371838				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Physician specialty	207Q00000X	Family Medicine	2.16.840.1.1 13883.6.101	NUCC Health Care Provider Taxonomy	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Organization ID	3434343434		2.16.840.1.1 13883.4.6	NPI	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Organization Name	Hometown Clinic				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Organization Street Address	7932 Willfred Blvd.				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	City	Altoona				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	State	IA		2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Postal Code	50009		2.16.840.1.1 13883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Country	USA	United States			<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Organization Telephone	5155371838				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.4.1.3.1	<b>[Encompassin g Encounter]</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.4.1.3.1	Provider Referred From ID (NPI)					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.4.1.3.1	Provider Referred From Name					<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Referred From Street Address					<b>SHALL</b>
2.16.840.1.113 883.10.20.3	City					<b>SHALL</b>
2.16.840.1.113 883.10.20.3	State			2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Postal Code			2.16.840.1.1 13883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Country					<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Referred From Telephone					<b>SHALL</b>

<b>1.3.6.1.4.1.19 376.1.5.3.1.3. 16.1</b>	<b>Coded Social History Section</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13. 4	Usual Occupation	2720	Athletes, coaches, umpires, and related workers	2.16.840.1.1 13883.6.240	U.S. Census Occupation Code	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13. 4	Usual Industry	7870	Colleges and universities, including junior colleges	2.16.840.1.1 13883.6.310	U.S. Census Industry Code	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13. 4	Smoking Status	4280410001 24106	Current some day smoker	2.16.840.1.1 13883.6.96	SNOMEDCT	<b>SHALL</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.1. 5.3.7</b>	<b>Payers Section</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.17	Primary Payer at Diagnosis	61	Medicare Other	2.16.840.1.1 13883.3.221. 5	Source of Payment Typology (PHDSC)	<b>SHOULD</b>
		MP	Medicare Primary	2.16.840.1.1 13883.6.255	X12 Data Element 1336	<b>SHOULD</b>
<b>1.3.6.1.4.1.19 376.1.7.3.1.3. 14.1</b>	<b>Cancer Diagnosis Section</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.3.14. 1	Narrative	Stage 4 Malignant melanoma of the back				<b>SHALL</b>
<b>1.3.6.1.4.1.193 76.1.7.3.1.4.14 .1</b>	<b>Cancer Diagnosis Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1	Diagnosis Date	2/25/2011				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1	Histologic Type	8720	Malignant Melanoma	2.16.840.1.1 13883.6.43.1	ICD-O-3	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1		M8720/3	Malignant Melanoma, NOS	2.16.840.1.1 13883.6.103	ICD-9-CM	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1		2092003	Malignant Melanoma	2.16.840.1.1 13883.6.96	SNOMEDCT	<b>SHALL</b>

1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1	Behavior	3	Malignant, Primary	2.16.840.1.1 13883.3.520. 3.14	NAACCR Behavior Code	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1	Diagnostic confirmation	1	Positive Histology	2.16.840.1.1 13883.3.520. 3.3	NAACCR Diagnostic Confirmation	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1	Primary Site	172.5	Malignant Melanoma of the trunk, except scrotum	2.16.840.1.1 13883.6.103	ICD-9CM (diagnoses)	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1		181492002	Entire skin of back (body structure)	2.16.840.1.1 13883.6.96	Body Site (SNOMEDCT)	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 1	Laterality	1	Right	2.16.840.1.1 13883.3.520. 3.1	NAACCR Laterality at Diagnosis	<b>SHALL</b>
<b>1.3.6.1.4.1.193 76.1.7.3.1.4.14 .2</b>	<b>TNM Clinical Stage Entry</b>					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Clinical Stage Group	IV		2.16.840.1.1 13883.15.6	TNM 7th Edition	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Clinical Stage Descriptor	0	None	2.16.840.1.1 13883.3.520. 3.10	NAACCR TNM Clinical Stage Descriptor	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Edition	7	AJCC Staging Manual, 7th Edition	2.16.840.1.1 13883.3.520. 3.5	NAACCR TNM Edition Number	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Clinical Staged By	1	Managing physician	2.16.840.1.1 13883.3.520. 3.4	NAACCR TNM Clinical Staged By	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Clinical T	T4		2.16.840.1.1 13883.3.520. 3.6	NAACCR TNM Clinical Tumor	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	Date/Time	8/15/2012				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Clinical N	N0		2.16.840.1.1 13883.3.520. 3.7	NAACCR TNM Clinical Node	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	Date/Time	8/15/2012				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	TNM Clinical M	M1		2.16.840.1.1 13883.3.520. 3.8	NAACCR TNM Clinical Metastasis	<b>SHALL</b>

1.3.6.1.4.1.193 76.1.7.3.1.4.14. 2	Date/Time	8/15/2012					<b>SHALL</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.3. 6</b>	<b>Active Problems Section</b>						<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	problem start date	5/18/2008					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	problem stop date						<b>SHALL (when Problem Status=complete d or aborted) SHALL NOT (when Problem Status does not = completed or aborted)</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	Problem	331.0	Alzheimer's disease	2.16.840.1.1 13883.6.103	ICD-9CM (diagnoses)		<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2		26929004	Alzheimer's disease	2.16.840.1.1 13883.6.96	SNOMEDCT		<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	Problem Status	ACTIVE					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	problem start date	2/25/2011					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	problem stop date						<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	Problem	172.5	Malignant Melanoma of the trunk, except scrotum	2.16.840.1.1 13883.6.103	ICD-9CM (diagnoses)		<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2		93651008	Malignant melanoma of skin of trunk	2.16.840.1.1 13883.6.96	SNOMEDCT		<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.5.2	Problem Status	ACTIVE					<b>SHALL</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.1. 13.2.7</b>	<b>Progress Note Section</b>						<b>SHALL</b>

	Progress Notes Narrative	Patient complains of trouble breathing and significant fatigue. Chest x-ray showed an irregular mass in the left upper lobe of the lung. These findings represent metastatic malignant melanoma. Physical exam of patients entire skin surface indicated only a small pigmented nevus. Patient is referred for excisional biopsy and further definitive workup with Dr. Robert Plast.				<b>SHALL</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.3. 28</b>	<b>Coded Results Section</b>					<b>SHALL</b>
<b>1.3.6.1.4.1.193 76.1.5.3.1.4.19</b>	<b>Procedure Entry</b>					<b>SHALL</b>
	Procedure Code	399208008	plain chest X-ray	2.16.840.1.1 13883.6.96	SNOMEDCT	<b>SHALL</b>
		71020	Chest; 2 Views	2.16.840.1.1 13883.6.12	CPT-4	<b>SHALL</b>
				2.16.840.1.1 13883.6.104	ICD-9-CM Procedures	<b>SHALL</b>

1.3.6.1.4.1.193 76.1.5.3.1.4.19		30745-4	Chest X-ray	2.16.840.1.1 13883.6.1	LOINC	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.19	Procedure Date	8/15/2012				<b>SHOULD</b>
<b>1.3.6.1.4.1.193 76.1.5.3.1.4.13</b>	<b>Simple Observation Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13	Code (Lab Test Name)	30745-4	Chest X-ray	2.16.840.1.1 13883.6.1	LOINC	<b>SHALL</b>
	Value data type (xsi:type)	ST				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13	Value	Irregular nodules in the left upper lobe of the lung - metastatic melanoma				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13	Result Units					<b>SHALL (when Value@xsi:type="PQ")</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13	Result Date/Time	8/15/2012				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13	Diagnosing Facility	Hometown Clinic				<b>MAY</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.13	Diagnostic facility ID	3434343434		2.16.840.1.1 13883.4.6	NPI	<b>MAY</b>
<b>2.16.840.1.11 3883.10.20.1. 12</b>	<b>Procedures Section</b>					<b>SHALL</b>
	<b>Procedure Activity Entry</b>					<b>SHALL</b>
2.16.840.1.113 883.10.20.1.29	Procedure			2.16.840.1.1 13883.6.1	LOINC	<b>SHALL</b>
2.16.840.1.113 883.10.20.1.29				2.16.840.1.1 13883.6.96	SNOMEDCT	<b>SHALL</b>
2.16.840.1.113 883.10.20.1.29				2.16.840.1.1 13883.6.12	CPT-4	<b>SHALL</b>
2.16.840.1.113 883.10.20.1.29				2.16.840.1.1 13883.6.104	ICD-9-CM Procedures	<b>SHALL</b>
2.16.840.1.113 883.10.20.1.29	Site of procedure			2.16.840.1.1 13883.6.96	SNOMEDCT	<b>MAY</b>
2.16.840.1.113 883.10.20.1.29	Date of procedure					<b>SHOULD</b>
<b>1.3.6.1.4.1.19 376.1.7.3.1.3. 14.2</b>	<b>Procedure Section - Radiation Oncology</b>					<b>SHALL</b>



	Narrative					<b>SHALL</b>
<b>1.3.6.1.4.1.19</b> <b>376.1.5.3.1.3.</b> <b>19</b>	<b>Medications Section</b>					<b>SHALL</b>
<b>1.3.6.1.4.1.193</b> <b>76.1.5.3.1.4.7</b>	<b>Medications Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Start Date	1/12/2010				<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Stop Date					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Timing (Frequency)	bid	Twice daily			<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Route	C38288	Oral	2.16.840.1.1 13883.3.26.1 .1	NCI Thesaurus	<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Dose	8				<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Dose Unit	mg		2.16.840.1.1 13883.11.12 839	UnitsOfMeasureCase Sensitive	<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Site			2.16.840.1.1 13883.12.16 3	Body Site (HL7)	<b>MAY</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Rate					<b>MAY</b>
<b>1.3.6.1.4.1.193</b> <b>76.1.5.3.1.4.7.</b> <b>2</b>	<b>Product Entry</b>					<b>SHALL</b>
	<b>manufactured Material</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Code (of Product Name)	583132	Galantamine 8 MG Extended Release Capsule	2.16.840.1.1 13883.6.88	RxNorm	<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Name	Razadyne				<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Strength (original text)					<b>SHOULD</b>
<b>1.3.6.1.4.1.19</b> <b>376.1.5.3.1.3.</b> <b>21</b>	<b>Medications Administered Section</b> (medications that are administered during the encounter)					<b>SHALL</b>
<b>1.3.6.1.4.1.193</b> <b>76.1.5.3.1.4.7</b>	<b>Medications Entry</b>					<b>SHALL</b>

1.3.6.1.4.1.193 76.1.5.3.1.4.7	Start Date					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Stop Date					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Frequency					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Route			2.16.840.1.1 13883.3.26.1 .1	NCI Thesaurus	<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Dose					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Dose Unit			2.16.840.1.1 13883.11.12 839	UnitsOfMeasureCase Sensitive	<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Site			2.16.840.1.1 13883.12.16 3	Body Site (HL7)	<b>MAY</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Rate					<b>MAY</b>
<b>1.3.6.1.4.1.193 76.1.5.3.1.4.7. 2</b>	<b>Product Entry</b>					<b>SHALL</b>
	<b>manufactured Material</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Code (of Product Name)			2.16.840.1.1 13883.6.88	RxNorm	<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Name					<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.7	Strength (original text)					<b>SHOULD</b>
<b>1.3.6.1.4.1.19 376.1.5.3.1.3. 31</b>	<b>Care Plan Section</b>					<b>SHALL</b>
<b>1.3.6.1.4.1.193 76.1.5.3.1.4.14</b>	<b>Encounters Entry</b>					<b>SHALL</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.14	Provider Referred to (NPI) (APT Mood)	2222266666		2.16.840.1.1 13883.4.6	NPI	<b>SHOULD</b>
1.3.6.1.4.1.193 76.1.5.3.1.4.14	Provider Referred to Name	Robert Plast				<b>SHOULD</b>
2.16.840.1.113 883.10.20.3	Provider Referred to Street Address	1719 Omaha Street				<b>SHALL</b>
2.16.840.1.113 883.10.20.3	City	Altoona				<b>SHALL</b>

2.16.840.1.113 883.10.20.3	State	IA		2.16.840.1.1 13883.6.92	FIPS 5-2 (State)	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Postal Code	50009		2.16.840.1.1 13883.6.231	US Postal Codes	<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Country	USA	United States			<b>SHALL</b>
2.16.840.1.113 883.10.20.3	Provider Referred to Telephone	5153759856				<b>SHALL</b>