nehta

Clarification on Messaging and CDA Packaging

1 Introduction

Clarification is required around Provider to Provider (P2P) Messaging and CDA Packaging (both P2P and Provider to PCEHR.

The current technical service specifications for eDischarge Summary, eReferral and Specialist Letter published on the Software Developers Resource Centre [SDRC]¹ use Secure Message Delivery (SMD) and deliver the CDA package (consisting of a root CDA document, signature file and optional packaged attachments) within a secure payload. This is the preferred method of messaging when both communicating parties use SMD-compliant messaging solutions. This method uses specific service categories published in the ELS by receiving organisations.

This FAQ describes an extension to these specifications that involves encapsulating the CDA package within an HL7 v2 MDM^T02 message (which covers the delivery of a document). Using this technique, the message payload can be transported through SMD messaging systems and other messaging networks designed to transport HL7 v2 messages.

Note that other MDM message types cover the full document management process, but these are out of scope for this FAQ.

2 CDA package

The CDA package SHALL conform to the specifications on the SDRC. These are the Clinical Package [CP] document (LSS), the CDA Package [CDAP] document (TSS) and the CDA Package profile specified for provider-to-provider messaging [P2PTSS], highlighting the conformance points T12, T13 and T14.

The CDA package SHALL be consistent for both provider-to-provider (using SMD or v2 – as per current specifications) and provider-to-PCEHR (using IHE XDS B2B Repository interface) as per the CDA package specification on the SDRC, with the exception that provider-to-provider supports a greater variety of attachments than provider-to-PCEHR.

Sections 2.1 and 2.2 summarise the *key* points in the specification.

2.1 CDA Package Creator

The creator of the CDA package SHALL follow the "Signed CDA package when eSignatures are mandatory" profile as specified in the CDA Package [CDAP], and use the XDM-ZIP representation for file naming, namely:

- A single mandatory root CDA XML document (called CDA_ROOT.XML)
- Optional and repeatable packaged attachments
- One eSignature file (called CDA_SIGN.XML)
- Under a directory structure (i.e. /<folder1>/<subset01>/)
- The METADATA.XML file SHALL not exist i.e. NO repository metadata (Concessions may be given to allow this file to be present, in local communities that require it when using SMD)
- The INDEX.HTM file SHALL not exist
- The README.TXT file SHALL not exist

For complete details, refer to the provider-to-provider messaging [P2PTSS] specification.

¹ <u>https://vendors.nehta.gov.au</u>

2.2 CDA Package Recipient

Follow the conformance points in the provider-to-provider messaging [P2PTSS] specification.

3 HL7 v2 MDM^T02 Message definition

The HL7 v2 MDM message fields shall follow in accordance with the HL7 2.3.1 Australian Standards (AS4700, parts 1, 2 and 6), or the HL7 2.3.1 International Standard, where the Australian Standards do not apply.

The HL7 v2 MDM^T02 v2 message SHALL only be used for transporting the CDA package using a single OBX segment, and SHALL NOT contain any other OBX segments that contain another format of the same data (i.e. RTF, PDF or Text). All relevant documents SHALL be contained inside the CDA package.

The HL7 v2 MDM^T02 message is made up of the common v2 Message segments: MSH, EVN, PID and PV1; and SHALL also include a single TXA and OBX segment, as defined below.

In the tables below, Elements in **bold** have been set to a fixed value. Further descriptions are given to certain elements where more information is required, or there is a deviation from the HL7 2.3.1 specification.

3.1 MSH – Message Header Segment

3.1.1 MSH Example

```
\texttt{MSH}|^{\sim} \ \texttt{Sending Facility}
```

Name|800362nnnnnnnnn^1.2.36.1.2001.1003.0.800362nnnnnnnnn^ISO|Receiving Facility Name|800362nnnnnnnnn^1.2.36.1.2001.1003.0.800362nnnnnnnnnNISO|20120527123345+1000||MDM^ T02^MDM_T02|urn:uuid:f498db3f-a64c-4c44-83b1-836c7728cc1e|P|2.3.1|||AL|NE|AUS

For HI numbers (IHI, HPI-I and HPI-O), the unique 10 digit part has been removed. Here (and in the examples below), nnnnnnnn SHALL be replaced by the correct Identifier.

MSH Element	Length	HL7 DT	Card	Element Name	Fixed values
MSH.1	1	ST	11	Field Separator	I
MSH.2	4	ST	11	Encoding Characters	^~\&
MSH.3	180	HD	01	Sending Application	
MSH.4	180	HD	11	Sending Facility	
MSH.5	180	HD	01	Receiving Application	
MSH.6	180	HD	11	Receiving Facility	
MSH.7	26	TS	11	Date/Time Message	
MSH.9	15	СМ	11	Message Type	MDM^T02^MDM_T02
MSH.10	199	ST	11	Message Control Id	
MSH.11	3	РТ	11	Processing Id – P=Production (for Testing use T)	Ρ
MSH.12	60	VID	11	Version Id	2.3.1
MSH.15	2	ID	01	Accept Acknowledgement Type	Recommend "NE"
MSH.16	2	ID	01	Application Acknowledgement Type	Recommend "AL"
MSH.17	3	ID	01	Country Code	Recommend "AUS"

3.1.2 MSH.3 – Sending Application

This should be an optional field (in HL7 2.3.1), and MAY be filled in with the sending facility name or the application and version the message is being sent from.

This could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:author/cda:assignedAuthor/cda:assignedPerson/ext:asEmployment /ext:employerOrganization/cda:asOrganizationPartOf/cda:wholeOrganization/cda:name

3.1.3 MSH.4 – Sending Facility

This should be an optional field (in HL7 2.3.1), but it SHALL be filled in with the sending facility HPI-O when using SMD. Other messaging schemes may require an alternate identifier, in which case, this required identifier may be substituted. The identifier is essentially used to locate the endpoint of the sending facility and will be used by the receiving facility to return an acknowledgement. The format SHALL be (for HPIO):

<hpio>^1.2.36.1.2001.1003.0.<hpio>^ISO where <hpio> is a 16-digit number.

This could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:author/cda:assignedAuthor/cda:assignedPerson/ext:asEmployment /ext:employerOrganization/cda:asOrganizationPartOf/cda:wholeOrganization/ext:asEntityIdent ifier[@classCode='IDENT']/ext:id[@assigningAuthorityName='HPI-O']/@root

3.1.4 MSH.5 – Receiving Application

This should be an optional field (in HL7 2.3.1), and MAY be filled in with the receiving facility name. This could be taken from the CDA document using this XPath, and loop through each intended recipient to create each new message sent.

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:informationRecipie nt/cda:receivedOrganization/cda:name

3.1.5 MSH.6 – Receiving Facility

This should be an optional field (in HL7 2.3.1), but it SHALL be filled in with the receiving facility HPI-O when using SMD. Other messaging schemes may require an alternate identifier; in which case, the required identifier may be substituted. This field is essentially used to locate the endpoint of receiving facility. The format shall be (for HPIO):

<hpio>^1.2.36.1.2001.1003.0.<hpio>^ISO where <hpio> is a 16 digit number.

This could be taken from the CDA document using this XPath, and loop through each intended recipient to create each new message sent.

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:receivedOrganizati on/ext:asEntityIdentifier[@classCode='IDENT']/ext:id[@assigningAuthorityName='HPI-O']/@root

3.1.6 MSH.7 – Date/Time Message

The date and time the message was created. If a time is entered, it is recommended to record the time zone as well. The format SHALL be:

CCYYMMDDHHNNSS+ZZZ

Example: 20120527121530+1000 which is 27th May 2012 at 12:15:30 in +1000 time zone.

3.1.7 MSH.10 – Message Control ID

This field should be of length 20 chars (in HL7 2.3.1), but has been extended to 199 chars (as per HL7 v2.6) to accommodate UUIDs (if used). This SHALL map into the InvocationId in an SMD message. This SHALL NOT be the same as the document ID of the CDA document (which goes in TXA.12).

Example: urn:uuid:f498db3f-a64c-4c44-83b1-836c7728cc1e

3.2 EVN – Event Type Segment

EVN Example:

EVN | T02 | 20110630123000

EVN Element	Length	HL7 DT	Card	Element Name	Fixed values
EVN.1	3	SI	11	Event Type Code	Т02
EVN.2	26	TS	11	Recorded Date/Time	

3.2.1 EVN.1 – Event Type Code

This should be an optional field (in HL7 2.3.1), but it SHALL be set to "T02".

3.2.2 EVN.2 – Recorded Date/Time

The date and time the event occurred. If a time is put in, it is recommended to put in the time zone as well.

The format SHALL be: CCYYMMDDHHNNSS+ZZZ

Example: **20120527121530+1000** this is 27th May 2012 at 12:15:30 in +1000 time zone.

This could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:effectiveTime/@value

3.3 PID – Patient ID Segment

PID Example:

PID|1||1234567890^^^AUSHIC^MC~800360nnnnnnnn^^^AUSHIC^NI

||FamilyName^GivenName^^^Prefix||19500527|M|||10 Browning Street^^West End^QLD^4101^AUS|

PID Element	Length	HL7 DT	Card	Element Name	Fixed values
PID.1	4	SI	01	Set Id	1
PID.3	20	СХ	1*	Patient Identifiers	
PID.5	48	XPN	1*	Patient Name	
PID.7	26	TS	01	Date/Time of Birth	
PID.8	1	IS	01	Sex (allowable M,F,A,O,U)	
PID.11	250	XAD	0n	Patient Address	

3.3.1 PID.1 - Set Id

This should be an optional field (in HL7 2.3.1), but it SHALL be set to "1".

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3.3.2 PID.3 – Patient Identifiers

This field contains the patient identifiers. It is recommended to place all known identifiers in this field.

The format SHALL be: <identifier>^^^<Assigning Authority>^<Identifier Type>

This is a repeating field (~).

Suggested values for <Assigning Authority> are "AUSHIC" (Medicare) and "AUSDVA" (Department of Veterans' Affairs)

Suggested values for <Identifier Type> are "MC" (Medicare card), "NI" (IHI Number), "DVW" (DVA Card White), "DVG" (DVA Card Gold) and "DVO" (DVA Card Orange).

Other codes might also be used to represent local or regional identifier types.

The IHI could be taken from the CDA document using this XPath, and stripping out the prefix OID (1.2.36.1.2001.1003.0.):

/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/ext:asEntityIdentifier[@c lassCode='IDENT']/ext:id[@assigningAuthorityName='IHI']/@root

The Medicare Number could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/ext:asEntityIdentifier[@c
lassCode='IDENT']/ext:id[root='1.2.36.1.5001.1.0.7.1']/@extension

Example:

1234567890^^^AUSHIC^MC~800360nnnnnnnn^^^AUSHIC^NI

For more information about the representation of patient identifiers, see the FAQ Vendor Advice Regarding OIDs [OIH]. These identifiers are documented in Standard Australia's handbook *HB 234 – Healthcare identifier HL7 implementation guide* [HB234].

3.3.3 PID.5 – Patient Name

This field contains the patient's name. The format SHALL be:

```
FamilyName^GivenName^^^Prefix
```

This is a repeating field (~).

These values could be taken from the CDA document using these XPath:

/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/cda:name/cda:family
/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/cda:name/cda:given[1]
/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/cda:name/cda:prefix

3.3.4 PID.7 – Date/Time of Birth

This field contains the patient's date of birth. This field is optional, but when sending an IHI, this field SHALL be provided, as it is required for validation. The format SHALL be:

CCYYMMDD

Example: 19700527

The date of birth could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/cda:birthTime/@value

3.3.5 PID.8 - Sex

This field contains the patient's sex. This field is optional, but when sending an IHI, this field SHALL be provided, as it is required for validation.

Example: M

The sex could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:patient/cda:administrativeGende rCode/@code

3.3.6 PID.11 – Patient Address

This field contains the patient's address. The format SHALL be:

<Address line 1>^<Address line 2>^<suburb>^<state>^<postcode>^<country>

And this is a repeating field (\sim) .

These values could be taken from the CDA document using these XPaths, although addresses can be represented in a number of ways within a CDA document:

/cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:addr/cda:streetAddressLine /cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:addr/cda:city /cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:addr/cda:state /cda:ClinicalDocument/cda:recordTarget/cda:patientRole/cda:addr/cda:postalCode

3.4 PV1 – Patient Visit Segment

PV1 Example:

PV1|1|N||||||00000000DrFamilyName^GivenName^^^Prefix^^^AUSHICPR

PV1 Element	Length	HL7 DT	Card	Element Name	Fixed values
PV1.1	4	SI	01	Set Id	1
PV1.2	1	IS	11	Patient Class	
PV1.9	250	XCN	1*	Consulting Doctor	

3.4.1 PV1.1 - Set Id

This should be an optional field (in HL7 2.3.1), but it SHALL be set to 1''.

3.4.2 PV1.2 – Patient Class

This field is used by hospitals to classify a patient's mode of treatment. Additional values shall be supported based on AS4700.1 (2005) 2.4 to include the following list:

Value*	Description
I	Inpatient/Overnight patient
S	Same day patient
0	Outpatient
E	Emergency patient
Y	Community client

Value*	Description
Р	Pre-admit
С	Commercial account
N	Not-applicable
U	Unknown

*Recommend to use "N" by default, if no data available.

3.4.3 PV1.9 - Consulting Doctor

The HL7 2.3.1 specification states this should be the consulting doctor.

As per the MSIA/AHML HL7 Industry interoperability Workgroup Report (Version 2.1, August 2011) it was agreed this SHALL instead be used for the Recipient Individual.

Example with a Provider Number or HPI-I Number or both, as it is a repeating field.

```
PV1|1|N||||||00000000^DrFamilyName^GivenName^^^Prefix^^AUSHICPR
PV1|1|N|||||800361nnnnnnnn^DrFamilyName^GivenName^^Prefix^^AUSHIC^^^NPI
PV1|1|N|||||00000000^DrFamilyName^GivenName^^^Prefix^^AUSHICPR~800361nnnnnnnn^DrFami
lyName^GivenName^^Prefix^^AUSHIC^^^NPI
```

These values could be taken from the CDA document using these XPaths, and loop through each intended recipient (as for MSH.5 and MSH.6):

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:informationRecipie nt/cda:name/cda:family

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:informationRecipie nt/cda:name/cda:given[1]

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:informationRecipie nt/cda:name/cda:title

For HPI-I:

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:informationRecipie nt/ext:asEntityIdentifier[@classCode='IDENT']/ext:id[@assigningAuthorityName='HPI-I']/@root

For Medicare Provider Number:

/cda:ClinicalDocument/cda:informationRecipient/cda:intendedRecipient/cda:informationRecipie nt/ext:asEntityIdentifier[@classCode='IDENT']/ext:id[@root='1.2.36.174030967.0.2']/@exten sion

For more information about the OIDs and identifiers, see the FAQ Vendor Advice Regarding OIDs [OIH]. These identifiers are documented in Standard Australia's handbook *HB 234 – Healthcare identifier HL7 implementation guide* [HB234].

3.5 TXA – Transcription Document Header Segment

TXA Example:

TXA|1|NEHTA|AP|20110630123000||||||||5974ff00-f26e-4afd-9848-1a906bd5bcb1||||PACKAGE.ZIP|LA

TXA Element	Length	HL7 DT	Card	Element Name	Fixed values
TXA.1	4	SI	11	Set ID	1
TXA.2	30	IS	11	Document Type – User Defined	NEHTA
TXA.3	2	ID	01	Document Content Presentation	АР
TXA.4	26	TS	01	Activity Date/Time	
TXA.12	427	EI	11	Unique Document Number	
TXA.16	22	ST	11	Unique Document File Name	PACKAGE.ZIP
TXA.17	30	ID	11	Document Completion Status	Recommend "LA"

3.5.1 TXA.3 – Document Content Presentation

This field is required when the message contains an OBX segment, and SHALL be set to "AP".

3.5.2 TXA.4 – Activity Date/Time

This field is optional (in HL7 2.3.1). The activity date/time could be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:effectiveTime/@value

3.5.3 TXA.12 – Unique Document Number

This field should be of length 30 chars (in HL7 2.3.1), but has been extended to 427 chars (as per HL7 v2.6) to contain a unique document number (UUID) assigned by the sending system. This SHALL be taken from the CDA document using this XPath:

/cda:ClinicalDocument/cda:id/@root

/cda:ClinicalDocument/cda:id/@root + /cda:ClinicalDocument/cda:id/@extension (if used)

3.5.4 TXA.16 – Unique Document File Name

This field is optional (in HL7 2.3.1) but SHALL be set to "PACKAGE.ZIP".

3.5.5 TXA.17 – Document Completion Status

This field identifies the current completion status of the document being sent. This is a required field and SHALL be set to one of the values in the below table.

Value*	Description
DI	Dictated
DO	Documented
IP	In Progress
IN	Incomplete

Value*	Description
PA	Pre-authenticated
AU	Authenticated
LA	Legally Authenticated

*For "Final" CDA documents use "LA"

3.6 OBX – Observation Segment

OBX Example:

OBX|1|ED|18842-5^Discharge Summarization Note^LN||^application^zip^Base64^<package>||||||F

OBX Element	Length	HL7 DT	Card	Element Name	Fixed values
OBX.1	4	SI	11	Set Id	1
OBX.2	3	ID	11	Value Type	ED
OBX.3	250	CE	11	Observation Identifier	
OBX.5	16777216	ED	11	Observation Value	
OBX.11	1	ID	11	Observation Result Status	F

Where <package> is a base64string of the cda package (zip file).

3.6.1 OBX.3 – Observation Identifier

This field contains a coded description of the package type. The format SHALL be:

<document code>^<document description>^<document code system>

These SHALL be taken from the CDA document using these XPaths:

/cda:ClinicalDocument/cda:code/@code /cda:ClinicalDocument/cda:code/@displayName							
Document type	Example:						
eDischarge Summary	18842-5 [^] Discharge Summarization Note [^] LN						
eReferral	57133-1^Referral Note^LN						
Specialist Letter	51852-2^Letter^LN						

3.6.2 OBX.5 – Observation Value

This field (type ED – Encapsulated Data) should be of length 6556 chars (in HL7 2.3.1), but has been extended to 16MB to support CDA packages (as per the MSIA/AHML HL7 Industry Interoperability Workgroup Report, Version 2.1, August 2011). The format SHALL be:

^application^zip^Base64^<cda package represented as a base64string>

MSA Element	Length	HL7 DT	Card	Element Name	Fixed values
MSA.1	2	SI	11	Acknowledgment Code	
MSA.2	199	ID	11	Message Control ID	
MSA.3	80	CE	01	Text Message	

3.7 MSA – Message Acknowledgement Segment

3.7.1 MSA.1 – Acknowledgement Code

This field informs the recipient whether the original message was processed successfully or not. See the processing rules in HL7 2.3.1 section 2.12 for more information and values for this field.

3.7.2 MSA.2 – Message Control ID

This field is the message control ID of the original message to which this message is a response. This field allows the sending system to relate the acknowledgement to the original message sent.

This field should be of length 20 chars (in HL7 2.3.1), but has been extended to 199 chars (as per HL7 v2.6) to accommodate UUIDs (if used).

Example:

urn:uuid:f498db3f-a64c-4c44-83b1-836c7728cc1e

3.8 ERR – Message Acknowledgement Segment

This is an optional segment that can be included to help resolve issues with the original message sent. See HL7 2.3.1 section 2.24.3 for more information.

ERR Element	Length	HL7 DT	Card	Element Name	Fixed values
ERR.1	80	СМ	1*	Error Code and Location	

Error messages can include reason for rejection, like a malformed CDA document (as this is part of the HL7 v2 message).

4 Transporting the Message/Package

4.1 Standards

There are three defined methods for transporting the CDA package:

- Via an SMD network service: CDA document package is contained within the SMD secure payload element with no additional wrapping.
- Via an SMD network service: CDA document package is encapsulated within an HL7 v2 message, which in turn is contained within the SMD secure payload element.
- Via an alternate messaging scheme: CDA document package is encapsulated within a HL7 v2 message. The messaging network is capable of routing HL7 v2 messages that adopt the format defined in this paper.

4.1.1 Target State

As stated in the introduction, only the CDA package is transported via SMD (based on the service category defined in the ELS). This is wrapped in the secure payload as shown below:

```
<q1:message xmlns:q1="http://ns.electronichealth.net.au/smd/xsd/Message/2010">
<q1:data> ... Base64-encoded CDA Package file... </q1:data>
</q1:message>
```

4.1.2 Alternate Method

Where this alternate method is used with SMD (i.e. HL7 MDM^T02 message), the HL7 message file is wrapped as shown below:

```
<ql:message xmlns:ql="http://ns.electronichealth.net.au/smd/xsd/Message/2010">
```

```
<q1:data> ... Base64-encoded HL7 v2 message file ... </q1:data>
```

</ql:message>

The messaging agent SHALL pull out certain information from the HL7 v2 message in order to deliver it. Some mapping may be required.

HL7 v2 Element	SMD Element	Description
	msg.metadata.creationTime	Creation time should be the current datetime
MSH.10	msg.metadata.invocationId	Unique Universal Identifier (UUID) from this segment
MSH.4.1	msg.metadata.senderOrganisation	Get the Sender Identifier (HPI-O) number from this segment
MSH.6.1	msg.metadata.receiverOrganisation	Get the Receiver Identifier (HPI-O) number from this segment
OBX3.1	msg.metadata.serviceCategory	Map the LOINC Code to the service category – See section below
	msg.metadata.serviceInterface	http://ns.electronichealth.net.au/smd/intf/SealedMess ageDelivery/TLS/2010 for SMD Deferred mode for example
	msg.metadata.routeRecord[]	SMD Client should know what to place in here or leave up to intermediary

The following table shows how to fill in the SMD Metadata from the HL7 v2 message:

The following table shows where the above payload goes in the SMD Message:

HL7 v2 Element	SMD Element	Description
OBX5.5	msg.encryptedPayload	Take base64string, wrap in <message> element and sign and encrypt as per XSP profile [ATS5821-2010]</message>

Note that SMD can only be supported if HPI-O numbers are used.

4.1.3 Existing Standard

Where other transports mechanisms are used, the HL7 message file is delivered using the current method.

4.2 Service Categories for SMD

The Service Category template URL (shown below) is also in the P2P Document Delivery TSS [P2PTSS]. It should be used and published by the receiving organisation in their ELS, to broadcast the receiving capability for each document type.

http://ns.electronichealth.net.au/<documentType>/sc/deliver/<payloadType>/2012

Where document type is:

Document Type description	<documenttype></documenttype>
Discharge Summary	ds
eReferral	er
Specialist Letter	sl
Event Summary	es
Acknowledgement (only for hl7Ack)	ack

Where payload type is:

Transaction	<payloadtype> Target State</payloadtype>	<payloadtype> Alternate Method</payloadtype>
Deliver	xdmZip	hl7Mdm
Application Acknowledgement	<not covered,="" only="" transport<br="" uses="">acknowledgments - TRD></not>	hl7Ack

4.3 Receiving Systems

The receiving system for any of the above standards SHALL support the following messaging formats when importing the data:

- a HL7 v2 MDM message (with the CDA Package in the OBX segment)
- a CDA Package

This could be in the format of a file drop or through an API.

4.4 Acknowledgements

Two defined levels of acknowledgements can be supported:

- Transport confirmation that the message has arrived at its destination.
- Application confirmation that the message has been received within the intended recipient's clinical system.

4.4.1 Transport Acknowledgements

SMD provides the mechanism for Transport acknowledgements through the Transport Response Deliver (TRD) message (see ATS5822-2010). This is a part of the SMD messaging process and SHALL be supported as directed in the specification.

4.4.2 Application Acknowledgements

Where an HL7 v2 message is sent, an Application Acknowledgment SHALL be sent back to the source system.

HL7 v2 supports this acknowledgement process in its workflow.

The Message Type should be:

MSH Element	Length	HL7 DT	Card	Element Name	Fixed values
MSH.9	15	СМ	11	Message Type	ACK^T02

See HL7 v2.3.1: section 2.24.2 and the AS4700.1 v2.3.1: section 6.3.

5 Definitions

5.1 Shortened Terms

Term	Description
HL7	Health Level 7
P2P	Provider to Provider
SMD	Secure Message Delivery
ELS	Endpoint Locator Service
LSS	Logical Service Specification
TSS	Technical Service Specification

5.2 References

[REF]	Document name/term
[ATS5820- 2010]	ATS_5820-2010_E-health_web_services_profiles.pdf https://infostore.saiglobal.com/
[ATS5821- 2010]	ATS_5821-2010_E-health_XML_secured_payload_profiles.pdf https://infostore.saiglobal.com/
[ATS5822- 2010]	ATS_5822-2010_E-health_secure_message_delivery.pdf https://infostore.saiglobal.com/
[CAI]	Representation of Common Australian Identifiers in v2 and CDA http://www.healthintersections.com.au/?p=721
[CDAP]	CDA Package v1.0.pdf SDRC>Clinical Documents>Common Specifications>
[CP]	Clinical Package v1.0.pdf SDRC>Clinical Documents>Common Specifications>
[HB234]	HB 234 – Healthcare identifier HL7 implementation guide <u>https://infostore.saiglobal.com/</u>
[OIH]	OIDs in HL7.pdf, which references [CAI] above. http://nehta.gov.au/vendors

[REF]	Document name/term
[P2PTSS]	P2P Document Delivery TSS V1.1.pdf SDRC>Clinical Documents>Common Specifications>
[SDRC]	Software Developers Resource Centre https://vendors.nehta.gov.au/public/index.cfm

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 ${\bf Revision}~{\bf 1},~16$ Apr 2012, Changed "eds" to "ds" for document type

Revision 2, 2 May 2012, Added ACK^T02 description

Revision 3, 28 Jan 2013, Changed "base64" to "Base64" in the OBX.5 Segment; Added Generic MDM Ack DocumentType; and added an extra service category for HL7 acknowledgements; Clarification that the payload is not Metadata; Updated to new format

Revision 4, 4 March 2013 Relaxed requirement for MSH 3 and MSH 5 segments from SHALL to MAY

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