



Service Referral Information Requirements

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Table of contents

| | | |
|-----------|---|-----------|
| 1 | Introduction | 6 |
| 1.1 | Purpose | 6 |
| 1.2 | Intended audience | 6 |
| 1.3 | Scope..... | 7 |
| 1.4 | Context..... | 7 |
| 1.5 | Document map | 7 |
| 2 | Service referral detail | 8 |
| 2.1 | Current services | 11 |
| 3 | Individual | 12 |
| 3.1 | Entitlements..... | 15 |
| 4 | Nominated contacts | 16 |
| 4.1 | Nominated contact - person | 16 |
| 4.2 | Nominated contact - organisation | 18 |
| 5 | Document author | 19 |
| 6 | Primary care provider | 22 |
| 6.1 | Primary care provider - person | 23 |
| 6.2 | Primary care provider - organisation | 25 |
| 7 | Referral receiver | 27 |
| 7.1 | Referral receiver - person | 27 |
| 7.2 | Referral receiver - organisation | 30 |
| 8 | Interested parties to receive correspondence | 31 |
| 8.1 | Interested parties - person | 32 |
| 8.2 | Interested parties - organisation | 34 |
| 9 | Alerts | 36 |
| 10 | Current and past medical history | 37 |
| 10.1 | Problems/Diagnoses | 37 |
| 10.2 | Procedure..... | 38 |
| 11 | Current medications | 40 |
| 11.1 | Exclusion statement..... | 40 |
| 11.2 | Medications | 41 |
| 12 | Adverse reactions | 43 |
| 12.1 | Exclusion statement..... | 43 |
| 12.2 | Adverse reactions | 44 |
| 13 | Diagnostic investigations | 46 |
| 14 | Attachments..... | 47 |

| | | |
|-----------|------------------------------|-----------|
| 15 | Document control..... | 48 |
| 16 | Known Issues..... | 49 |
| | Acronyms | 50 |
| | Glossary..... | 51 |
| | References..... | 53 |

1 Introduction

1.1 Purpose

This document presents the information requirements for the content of a service referral, as recommended for use in Australian eHealth systems. It is therefore recommended to be implemented in any system that creates or transfers referrals. Note that it does not cover the content of communication exchanges between organisations related to workflow.

These information requirements are a logical set of data items for exchange, and are therefore independent of any particular platform, technology, exchange format, or presentation format.

They are the minimum set of data items that are recommended for implementation in any system that creates and transfers electronic referrals, to support the delivery of quality collaborative care. The inclusion of data in this minimum set is determined by two criteria:

- 1 the relevancy of the data to a referral process; and
- 2 the potential for the data to improve an individual's care and well-being in a collaborative care environment.

Additionally, they define the information needs for information sharing between healthcare providers in Australia, independent of exchange or presentation formats.

It is anticipated that these information requirements will:

- promote a common understanding of the requirements for the construction and use of service referrals;
- provide a common framework for the development and use of semantically interoperable information components to be exchanged between applications, providers and jurisdictions;
- provide a common framework for defining queries using these information requirements at logical levels, which may be adopted for implementations in local, jurisdictional, or national electronic health record environments; and
- provide a common framework for nationally defined mappings to specific exchange formats.

1.2 Intended audience

This document is intended for all interested stakeholders including:

- healthcare and human service providers;
- hospitals and health departments in the process of planning, implementing, or upgrading eHealth systems;
- software vendors developing eHealth system products;
- early adopter desktop software vendors;

- senior managers and policy makers, clinical experts, health information managers, IT operations and support teams, and system integrators;
- stakeholders associated with the development and use of upcoming eHealth initiatives relating to “continuity of care”;
- community health organisations; and
- consumers and consumer representatives.

1.3 Scope

This document is limited to discussing information requirements for a service referral that will be exchanged point-to-point.

It does not discuss the content or presentation of any document that is attached to the service referral.

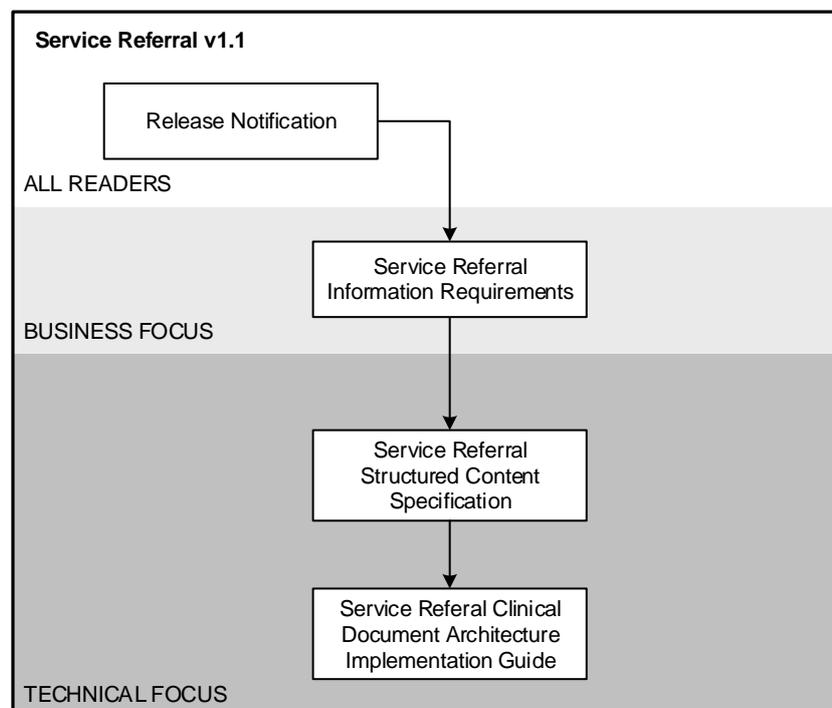
1.4 Context

This document will supersede the first release of the eReferral Core Information Components [NEHTA2011], which was designed to cater for the GP to specialist referral domain.

From a design perspective, this service referral can be used in a broader context of patient care to encompass the traditional clinical referral, as well as the human services related field of care. To support this broader context, some clinical data requirements have been made optional.

1.5 Document map

The following diagram represents the relationship between this document and others within the eReferral end product.



2 Service referral detail

This section includes information about the service referral which states its intent and purpose.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|--|
| Service referral detail section (mandatory) | 027394 | The document SHALL contain a Service referral detail section. | To ensure that referral always contains information to help the referral receiver understand the nature and purpose of the referral. |
| Service requested (optional) | 026867 | The document SHOULD contain the category of service requested by the referral sender to be carried out by the referral receiver. For example, "Home medicine review", "Bereavement counselling", "Podiatry", "Disability supported accommodation" or "Cardiology" etc. | Naming the category of requested service helps service providers and others to locate referrals in a list of referrals. |
| | 026905 | The values for requested service SHALL be derived from a standard reference set. | |
| Referral reason (optional) | 027397 | The document SHOULD contain a narrative of the reasons for the referral, including the presenting problems, presentation, history or any another information deemed relevant to the request. Additional Notes The content in this data item may vary from a single line in simple cases to many paragraphs for more complex circumstances. | To enable the author to supply free text information, in addition to other structured content, at their discretion. |

| Data item | Req No. | Requirement statement | Rationale |
|---------------------------------------|---------|---|--|
| Urgency (optional) | 026868 | <p>When it is known that the referral is urgent, then the document SHOULD contain a flag to indicate that the referral is urgent, as determined by the referral sender.</p> <p>This is the relative urgency of this individual in relation to other individuals who require the same service. Urgent is a recommendation that the individual will have priority over others being seen routinely from a waiting list.</p> <p>Additional Notes</p> <p>Urgency is usually determined through initial needs identification or assessment and it is the view of the referral sender at the time of document creation.</p> <p>The referral receiver will often consider this urgency attribute when doing their assessment, but is not obliged to use, or agree with, the sender's perception of urgency. The service receiving the referral may change the urgency rating based on their program priority criteria. The referral is not to be updated if the perceived urgency changes over time.</p> <p>Note that the absence of this urgency flag should not be equated with the referral not being urgent and thus no assumptions should be made.</p> | The perceived urgency of the referral can help the referral receiver prioritise the evaluation of referral requests and expedite confirmation of their capacity to deliver the service within an expected timeframe. |
| Urgency notes (optional) | 026869 | The document SHOULD contain additional notes describing the nature or reasons for an urgent referral. | To provide additional details to help the referral receiver determine their priority for service provision. |
| Referral validity duration (optional) | 026668 | <p>The document SHOULD contain the length of time the referral is valid from the date of the first individual or specialist encounter, if it is deemed appropriate to include.</p> <p>Additional Notes</p> <p>Captures the valid duration of the referral which may be constrained by, e.g. Medicare funding policy.</p> | To ensure that the period of validity of the referral is clear. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|---|
| Need for interpreter services (optional) | 026928 | When it is known that the individual requires an interpreter to aid communication, the document SHOULD contain a flag to indicate that interpreter services are required. | Lets the referral receiver know whether an interpreter should be organised to help communicate with the individual. |
| Preferred language (conditional) | 026850 | When a need for an interpreter has been identified, the document SHALL contain the individual's preferred language. | Identifies the language spoken by the individual to assist organising the interpreter services. |
| | 026930 | The values for preferred language SHALL be derived from a nationally agreed data set, such as the Australian Standard Classification of Languages (ABS Cat. No. 1267.0). | Provides standard identification. |
| | 027102 | The document MAY contain more than one preferred language. | In some cases an individual may speak multiple languages which gives more options for organising translation services. |
| Date and time attested (optional) | 027437 | The document SHOULD contain the date and time that the document author, authoriser or approver confirms that a document is complete and genuine. Additional Notes In the context of a clinical referral it is expected that the date time attested will be included. | To ensure that the reader knows exactly when the document was considered complete. |
| Request Date and time (mandatory) | 027463 | The document SHALL contain the date and time (time if available) that the service request was made. | This provides a time reference within the document that the clinician may refer to, and may offer a time reference for associating subsequent documents to this document. |

2.1 Current services

This section records any health and community services that the individual has used in the last twelve months.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|---|
| Current services section (optional) | 026903 | The document MAY contain additional detail of any health or human services that have been provided to the individual in the last twelve months. Multiple services can be listed. | Provides details of concurrent services relevant to referral. |
| Current service agency name (mandatory) | 026884 | Each current service SHALL contain the name of the agency providing the service. | Identifies the agency providing the service. |
| Current service, service type (mandatory) | 026882 | Each current service SHALL include the type of the provided service. | Identifies what service is being provided. |
| | 026934 | The values for service type SHALL be derived from a standard reference set. | Standard identification of the service. |
| Current service comment (optional) | 026888 | Each current service MAY contain a free text description to record any other information as appropriate, for example key contacts. | Any other additional information, as required. |

3 Individual

Identifies the person who is the healthcare recipient and the subject of the referral.

Different healthcare communities use different terms for a healthcare recipient, such as “patient”, “subject of care” or “consumer”. For consistency in this document, the term “individual” is adopted.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|--|
| Individual section (mandatory) | 026788 | The document SHALL contain details about the individual. | To ensure that a referral always contains information about the individual, since a referral without the individual is meaningless. |
| Individual identifier (mandatory) | 027133 | The document SHALL contain at least one identifier for the individual. Additional Notes An example of an identifier for healthcare referrals is the national Individual Healthcare Identifier (IHI). An example of an identifier in a non-healthcare context would be a local record number. | To facilitate record matching between organisations. |
| Individual identifier Issuer (mandatory) | 027136 | The document SHALL contain the identifier of the organisation that issued or assigned the individual's identifier. | It is important to know the domain or context in which the individual's identifier was issued or assigned, so that the receiver can compare identifiers confidently. |
| Individual's title (optional) | 022081 | The document SHOULD contain at least one title for the individual. | Titles such as 'Mrs', 'Mr', 'Dr' etc. are useful when communicating with the individual. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|---|
| Individual's given name (optional) | 023056 | The document SHOULD contain at least one given name for the individual. Additional Notes This is an optional requirement because some people do not have a given name. | To enable consistent and correct identification of the individual's document. Assists in verifying that the document relates to the individual. |
| Individual's family name (mandatory) | 023058 | The document SHALL contain the individual's family name. | To enable consistent and correct identification of the individual. This is a required field when validating IHLs against the Healthcare Identifiers (HI) Service. |
| Individual's name suffix (optional) | 023059 | The document SHOULD contain the individual's name suffix where applicable. | Suffixes such as 'Snr', 'Jnr' etc. can be useful to correctly identify the individual. |
| Individual's preferred name(s) (optional) | 026840 | The document SHOULD contain the preferred name of the individual, if known. | Facilitates interactions with the individual. |
| Individual's sex (mandatory) | 024032 | The document SHALL contain the individual's sex. | To enable consistent and correct identification of the individual. This is a required field when validating IHLs against the HI Service. The individual's sex is also useful in clinical decision making. |
| | 027859 | The sex attribute SHALL be restricted to the Australian Institute of Health and Welfare Person METeOR id 270807. | |
| Individual's date of birth (mandatory) | 023060 | The document SHALL contain the individual's date and time (time is optional) of birth. Additional Notes Time of birth may be recorded during care immediately following birth. | To enable consistent and correct identification of the individual. This is a required field when validating IHLs against the HI Service. Date of birth is also useful in clinical decision making. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|---|
| Date of birth accuracy indicator (optional) | 024026 | The document SHOULD contain a date of birth accuracy indicator. | To assist in the correct identification of the individual. It is important for clinicians to know when a provided date of birth is an approximation to assist in clinical decision making. |
| | 027005 | The values for date of birth accuracy indicator SHALL be derived from the Australian Standard "Person and provider identification in healthcare" AS 4846-2014 [SA2014]. | To enable consistent and correct identification of standard values. |
| Individual's address (mandatory) | 024041 | The document SHALL contain at least one address for the individual. Additional Notes Indicating that an individual has no fixed address may be achieved through the provision of a nullflavor (e.g. NA). | To enable consistent and correct identification of the individual. |
| | 026640 | The document SHALL permit the author to suppress (i.e. not include) the individual's residential address through the use of an "absent value", flag, indicator, or similar. | The individual may have no fixed address, or the address is unknown, or there may be privacy, legal or patient safety reasons (e.g. for child safety). |
| Individual's' postal address (optional) | 026841 | Postal address SHOULD be provided if different from residential address. | To ensure delivery and assist in the identification of the individual. |
| Individual's electronic communication details (optional) | 024042 | The document SHOULD contain at least one set of electronic communication details for the individual. These include (but are not limited to) telephone number, mobile phone number, email address etc. | To enable electronic communication with the individual. |
| Indigenous status (mandatory) | 024033 | The document SHALL state whether a person identifies as being of Aboriginal and/or Torres Strait Islander origin, or give a clear indication that their indigenous status was not stated. | Members of the Indigenous community may have specific health needs and be eligible for a range of specific services. Access to this information may contribute to improved Indigenous health. |
| Individual's country of birth (optional) | 026847 | The document SHOULD contain the individual's country of birth. | Provides additional information for the individual. |

| Data item | Req No. | Requirement statement | Rationale |
|-----------|---------|---|---------------------------|
| | 026927 | The values for the individual's country of birth SHALL be derived from a nationally agreed data set. | Standardised information. |

3.1 Entitlements

Details about entitlements held by the individual – such as benefits cards – where applicable. For example, Medicare Number, health care cards, compensable funding sources, government benefits, or Department of Veterans' Affairs (DVA) membership.

One or more entitlements may be included in a referral.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|--|
| Entitlement data (optional) | 026802 | One or more entitlement SHOULD be included in a referral, when it is deemed relevant by the author to do so. Additional Notes Entitlements may be included for an individual on a case by case basis, as required. | Facilitates access to appropriate health and other care services according to the individual's entitlements. For example, a DVA card holder would be entitled to a range of services. |
| Entitlement Type (mandatory) | 026781 | The document SHALL contain the type of entitlement that makes the individual eligible to receive benefits. Additional Notes Examples include (but are not limited to) Medicare Benefits, Commonwealth Seniors Health Concession or Repatriation Health Gold Benefits. | Clearly identifies the entitlement scope, may determine an exclusion or priority to service and can also indicate income level. |
| Entitlement Number (mandatory) | 026782 | The document SHALL contain the entitlement number or code. | Helps identify an individual's entitlement eligibility. |
| Entitlement validity duration (optional) | 026783 | The document MAY contain the validity duration for the entitlement (i.e. the time during which an entitlement is valid). | Helps identify an individual's entitlement eligibility. |

4 Nominated contacts

Details about the organisation or individual(s) nominated to act as the contact to receive information about the individual receiving healthcare. The healthcare recipient individual may not be the primary point of contact (e.g. in paediatrics or an individual with dementia).

Note that contact details for the individual are not included here, but in the section titled “Individual”.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|--|
| Nominated contacts section (optional) | 026789 | The document SHOULD contain details about one or more nominated contacts, when it is deemed relevant by the author to do so. | To allow an author to include details about an individual's nominated contact, when appropriate. |
| Nominated contact - person or organisation (mandatory) | 026828 | A nominated contact SHALL either be a named person or an organisation. | Provides the option to nominate a named person as a contact, or an organisation if a person cannot be named. |

4.1 Nominated contact - person

When a nominated contact is recorded as an individual, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|------------------------------------|---------|--|---|
| Individual's title (optional) | 022081 | The document SHOULD contain at least one title for the individual. | Titles such as 'Mrs', 'Mr', 'Dr' etc. are useful when communicating with the individual. |
| Individual's given name (optional) | 023056 | The document SHOULD contain at least one given name for the individual. Additional Notes This is an optional requirement because some people do not have a given name. | To enable consistent and correct identification of the individual's document. Assists in verifying that the document relates to the individual. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Individual's family name (mandatory) | 023058 | The document SHALL contain the individual's family name. | To enable consistent and correct identification of the individual. This is a required field when validating IHI's against the Healthcare Identifiers (HI) Service. |
| Individual's name suffix (optional) | 023059 | The document SHOULD contain the individual's name suffix where applicable. | Suffixes such as 'Snr', 'Jnr' etc. can be useful to correctly identify the individual. |
| Relationship to individual (optional) | 026773 | The document SHOULD contain the nominated contact's relationship to the individual, when it is deemed appropriate to do so. Additional Notes For example, 'husband', 'mother', 'daughter', 'friend' or 'carer'. | Provides context for any communications with the nominated contact. |
| Nominated contact's means of contacting (mandatory) | 026803 | A document SHALL contain the nominated contact's address or electronic communication details or both. | In order to facilitate communication with the individual's nominated contact, at least one means of contacting them must be provided. |
| Nominated contact address (optional) | 026774 | The document SHOULD contain an address for the nominated contact. | A nominated contact would be included on the basis that they may be contacted by a healthcare provider. |
| Nominated contact electronic communication details (optional) | 026775 | The document SHOULD contain at least one electronic communication detail for the nominated contact. These include (but are not limited to) telephone number, mobile phone number, email address etc. | A nominated contact would be included on the basis that they may be contacted by a healthcare provider. |
| Nominated contact role (optional) | 026784 | The document MAY contain a role for the nominated contact. | A nominated contact is generally someone who is acting in a non-healthcare related capacity. The data item 'relationship to individual' adequately covers this requirement. |
| Nominated contact person identifier (mandatory) | 026785 | The document SHALL NOT contain a person identifier for the nominated contact. | A nominated contact is generally someone who is acting in a non-healthcare related capacity. Therefore, it is not appropriate to include any identifiers for this person. |

| Data item | Req No. | Requirement statement | Rationale |
|------------------------------|---------|--|--|
| Organisation name (optional) | 027155 | The document SHOULD contain the name of the organisation if one is present, when it is deemed appropriate to do so. | Ensures that the name of the organisation is clear when appropriate. |

4.2 Nominated contact - organisation

When a nominated contact is recorded as an organisation, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|---|
| Organisation name (mandatory) | 026776 | The document SHALL contain the name of the organisation. | Ensures that the name of the organisation is clear. |
| Organisation department / unit (optional) | 026777 | The document SHOULD contain the name by which a department or unit within a larger organisation is known or called. | In the case of a larger organisation, this ensures that the relevant part of the organisation is clear. |
| Organisation identifier (optional) | 026778 | The document SHOULD contain the nominated contact organisational identifier, when it is known. | To enable consistent and correct identification of the organisation. |
| Nominated contact address (optional) | 026774 | The document SHOULD contain an address for the nominated contact. | A nominated contact would be included on the basis that they may be contacted by a healthcare provider. |
| Nominated contact electronic communication details (optional) | 026775 | The document SHOULD contain at least one electronic communication detail for the nominated contact. These include (but are not limited to) telephone number, mobile phone number, email address etc. | A nominated contact would be included on the basis that they may be contacted by a healthcare provider. |
| Nominated contact's means of contacting (mandatory) | 026803 | A document SHALL contain the nominated contact's address or electronic communication details or both. | In order to facilitate communication with the individual's nominated contact, at least one means of contacting them must be provided. |

5 Document author

The health care or human services provider who has made the referral.

This equates to the referral sender, who is responsible for the content of the letter, even if someone else physically authored or composed the referral.

Note that the following elements include the term “healthcare” but they are intended to apply equally to providers from the human services domain.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Document author section (mandatory) | 026790 | The document SHALL contain details about the provider who instigated the referral. | To ensure that a referral always contains information about the provider who is making the request. |
| Healthcare provider identifier (mandatory) | 027110 | The document SHALL contain at least one identifier for the provider individual. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier-Individual identifier (HPI-I), the Practitioner Provider Number or the Medicare Provider Number. An example of an identifier in a non-healthcare context would be a local record number. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider identifier issuer (mandatory) | 027141 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's individual identifier. | It is important to know the domain or context in which the provider's individual identifier was issued or assigned, so that the receiver can confidently compare identifiers. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|--|
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare provider's title (optional) | 023061 | The document SHOULD contain at least one title for the healthcare provider. | Titles such as 'Mrs', 'Mr', 'Dr' etc. are useful when communicating with the healthcare provider. |
| Healthcare provider given name (optional) | 023062 | The document SHOULD contain at least one given name for the healthcare provider. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider family name (mandatory) | 023064 | The document SHALL contain the healthcare provider's family name. | To enable consistent and correct identification of the healthcare provider. This is a required field when validating HPI-Is against the Healthcare Identifiers Service. |
| Healthcare provider name suffix (optional) | 023065 | The document SHOULD contain the healthcare provider's name suffix where applicable. | To enable consistent and correct identification of the healthcare provider. Suffixes such as 'Snr', 'Jnr' etc. can be a useful aid in the correct and unique identification of the healthcare provider. |
| Healthcare provider organisation name (mandatory) | 023070 | The document SHALL contain the name of the organisation that the healthcare provider is representing. | To enable consistent and correct identification of the healthcare provider organisation. This is a required field when validating HPI-Os against the Healthcare Identifiers Service. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|---|
| Healthcare provider individual's workplace address (optional) | 024035 | The document SHOULD contain the healthcare provider individual's Australian workplace address. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider individual's workplace electronic communication details (optional) | 024036 | The document SHOULD contain at least one set of electronic communication details for the workplace of the individual. For example, telephone numbers, mobile phone numbers, email addresses etc. Additional Notes A healthcare provider may work for more than one organisation. These are the workplace communication details of the individual, not the organisation. | To enable electronic communication with the healthcare provider. |
| Healthcare provider employer organisation electronic communication detail (mandatory) | 026805 | The document SHALL contain the healthcare provider employer organisation's electronic communication detail. | To ensure that contact details are always provided for the author's organisation. |
| Healthcare provider professional role (mandatory) | 024040 | The document SHALL contain the healthcare provider's professional role (e.g. General Practitioner). This data item MAY carry an absent value. | Describing the professional role that a healthcare provider is performing can provide context and assist in interactions between healthcare providers to the benefit of individuals receiving healthcare. |
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |

6 Primary care provider

The named healthcare practitioner or practice nominated by the individual as their primary care provider.

In most cases, the individual's primary care provider will be their usual GP. In other cases, an individual's primary care is managed by community nursing staff, nurse practitioners, Aboriginal health workers, or specialists.

Note that the primary care provider may or may not also be the referral sender. When the primary care provider is not the referral sender, it would still be expected that correspondence regarding the referral be copied to them, unless the individual elects for this not to occur.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|--|
| Primary care provider section (optional) | 026792 | The document SHOULD contain details about the individual's primary care provider, when it is deemed relevant by the author to do so. Additional Notes There may be circumstances where an individual may elect to be managed for a condition by a different clinician from their primary care provider. Allowance is therefore given to only include the primary care provider details when it is deemed appropriate to do so. | To allow an author to include details about an individual's primary care provider when it would be appropriate to do so. |
| | 026829 | The primary care provider SHALL either be a named person at an organisation or just an organisation. | An individual may elect a named healthcare practitioner as their primary care provider. Alternatively, an individual may regularly visit a GP practice without nominating one of the individual GPs there as their 'usual GP'. That is, the individual has chosen to be managed by any GP at that particular practice, in which case the usual GP is the GP practice organisation. |

6.1 Primary care provider - person

When a primary care provider is recorded as an individual person, the following requirements apply.

Note that when the primary care provider is different from the referral sender, their healthcare identifiers may not be known by the system generating the referral.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Healthcare provider identifier (mandatory) | 027110 | The document SHALL contain at least one identifier for the provider individual. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier-Individual identifier (HPI-I), the Practitioner Provider Number or the Medicare Provider Number. An example of an identifier in a non-healthcare context would be a local record number. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider identifier issuer (mandatory) | 027141 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's individual identifier. | It is important to know the domain or context in which the provider's individual identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|--|
| Healthcare provider's title (optional) | 023061 | The document SHOULD contain at least one title for the healthcare provider. | Titles such as 'Mrs', 'Mr', 'Dr' etc. are useful when communicating with the healthcare provider. |
| Healthcare provider given name (optional) | 023062 | The document SHOULD contain at least one given name for the healthcare provider. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider family name (mandatory) | 023064 | The document SHALL contain the healthcare provider's family name. | To enable consistent and correct identification of the healthcare provider. This is a required field when validating HPI-Is against the Healthcare Identifiers Service. |
| Healthcare provider name suffix (optional) | 023065 | The document SHOULD contain the healthcare provider's name suffix where applicable. | To enable consistent and correct identification of the healthcare provider. Suffixes such as 'Snr', 'Jnr' etc. can be a useful aid in the correct and unique identification of the healthcare provider. |
| Healthcare provider organisation name (mandatory) | 023070 | The document SHALL contain the name of the organisation that the healthcare provider is representing. | To enable consistent and correct identification of the healthcare provider organisation. This is a required field when validating HPI-Os against the Healthcare Identifiers Service. |
| Healthcare provider individual's workplace address (optional) | 024035 | The document SHOULD contain the healthcare provider individual's Australian workplace address. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider individual's workplace electronic communication details (optional) | 024036 | The document SHOULD contain at least one set of electronic communication details for the workplace of the individual. For example, telephone numbers, mobile phone numbers, email addresses etc. Additional Notes A healthcare provider may work for more than one organisation. These are the workplace communication details of the individual, not the organisation. | To enable electronic communication with the healthcare provider. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|---|
| Healthcare provider professional role (mandatory) | 024040 | The document SHALL contain the healthcare provider's professional role (e.g. General Practitioner). This data item MAY carry an absent value. | Describing the professional role that a healthcare provider is performing can provide context and assist in interactions between healthcare providers to the benefit of individuals receiving healthcare. |
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |
| Healthcare organisation electronic communication details (optional) | 026798 | The document SHOULD contain at least one set of electronic communication details for the organisation's communication details. For example, telephone numbers, mobile phone numbers, email addresses etc. | To enable electronic communication with the healthcare organisation. |

6.2 Primary care provider - organisation

When a primary care provider is recorded as an organisation, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Organisation name (mandatory) | 026776 | The document SHALL contain the name of the organisation. | Ensures that the name of the organisation is clear. |
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |

| | | | |
|---|--------|--|---|
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |
| Healthcare organisation electronic communication details (optional) | 026798 | The document SHOULD contain at least one set of electronic communication details for the organisation's communication details. For example, telephone numbers, mobile phone numbers, email addresses etc. | To enable electronic communication with the healthcare organisation. |

7 Referral receiver

The provider or service to whom the individual is being referred.

Note that the following elements include the term “healthcare” but they are intended to apply equally to providers from the human services domain.

| Data item | Req No. | Requirement statement | Rationale |
|--------------------------------------|---------|--|---|
| Referral receiver section (optional) | 028076 | The document MAY contain details about the referral receiver. | If the referral receiver is known then the receiver's details may be included. |
| | 028077 | If the document contains a referral receiver then the referral receiver SHALL either be a named person or a service at an organisation. | Provides the option to send a referral to a named provider or a service where an individual provider is unknown at the point of referral. |

7.1 Referral receiver - person

When a referral receiver is recorded as an individual person, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|---|
| Healthcare provider identifier (mandatory) | 027110 | <p>The document SHALL contain at least one identifier for the provider individual.</p> <p>Additional Notes</p> <p>An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier-Individual identifier (HPI-I), the Practitioner Provider Number or the Medicare Provider Number. An example of an identifier in a non-healthcare context would be a local record number.</p> | To enable consistent and correct identification of the healthcare provider. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|--|
| Healthcare provider identifier issuer (mandatory) | 027141 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's individual identifier. | It is important to know the domain or context in which the provider's individual identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare provider's title (optional) | 023061 | The document SHOULD contain at least one title for the healthcare provider. | Titles such as 'Mrs', 'Mr', 'Dr' etc. are useful when communicating with the healthcare provider. |
| Healthcare provider given name (optional) | 023062 | The document SHOULD contain at least one given name for the healthcare provider. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider family name (mandatory) | 023064 | The document SHALL contain the healthcare provider's family name. | To enable consistent and correct identification of the healthcare provider. This is a required field when validating HPI-Is against the Healthcare Identifiers Service. |
| Healthcare provider name suffix (optional) | 023065 | The document SHOULD contain the healthcare provider's name suffix where applicable. | To enable consistent and correct identification of the healthcare provider. Suffixes such as 'Snr', 'Jnr' etc. can be a useful aid in the correct and unique identification of the healthcare provider. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|---|
| Healthcare provider organisation name (mandatory) | 023070 | The document SHALL contain the name of the organisation that the healthcare provider is representing. | To enable consistent and correct identification of the healthcare provider organisation. This is a required field when validating HPI-Os against the Healthcare Identifiers Service. |
| Healthcare provider individual's workplace address (optional) | 024035 | The document SHOULD contain the healthcare provider individual's Australian workplace address. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider individual's workplace electronic communication details (optional) | 024036 | The document SHOULD contain at least one set of electronic communication details for the workplace of the individual. For example, telephone numbers, mobile phone numbers, email addresses etc. Additional Notes A healthcare provider may work for more than one organisation. These are the workplace communication details of the individual, not the organisation. | To enable electronic communication with the healthcare provider. |
| Healthcare provider employer organisation electronic communication detail (mandatory) | 026805 | The document SHALL contain the healthcare provider employer organisation's electronic communication detail. | To ensure that contact details are always provided for the author's organisation. |
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |
| Healthcare provider professional role (mandatory) | 024040 | The document SHALL contain the healthcare provider's professional role (e.g. General Practitioner). This data item MAY carry an absent value. | Describing the professional role that a healthcare provider is performing can provide context and assist in interactions between healthcare providers to the benefit of individuals receiving healthcare. |

7.2 Referral receiver - organisation

When a referral receiver is recorded as an organisation, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|---|
| Organisation name (mandatory) | 026776 | The document SHALL contain the name of the organisation. | Ensures that the name of the organisation is clear. |
| Organisation department / unit (optional) | 026777 | The document SHOULD contain the name by which a department or unit within a larger organisation is known or called. | In the case of a larger organisation, this ensures that the relevant part of the organisation is clear. |
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |
| Healthcare organisation electronic communication details (mandatory) | 026800 | The document SHALL contain at least one set of electronic communication details for the organisation's communication details. For example telephone numbers, mobile phone numbers, email addresses etc. | To enable electronic communication with the healthcare organisation. |

8 Interested parties to receive correspondence

Correspondence regarding a given referral will always be sent back to the original referral sender as a matter of course.

It is also likely that other health or human service providers would also benefit from receiving such correspondence. This section allows these additional “interested parties” to be recorded.

Note that it is not necessary to record the original referral sender in this section unless the referral was on-referred to additional healthcare providers and the original referral sender should be informed of that action.

Also note that the following elements include the term “healthcare”, but they are intended to apply equally to providers from the human services domain.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|--|
| Interested parties section (optional) | 027103 | The document SHOULD contain details about one or more interested parties, when it is deemed relevant by the author to do so. | To allow an author to include details about a health or human service provider or organisation who should receive correspondence from the referral receiver. |
| Interested parties - person or organisation (mandatory) | 027104 | An interested party SHALL either be a named person or an organisation. | Provides the option to nominate a named person or an organisation where an individual person cannot be named. |

8.1 Interested parties - person

When an interested party is recorded as an individual, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Healthcare provider identifier (mandatory) | 027110 | The document SHALL contain at least one identifier for the provider individual. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier-Individual identifier (HPI-I), the Practitioner Provider Number or the Medicare Provider Number. An example of an identifier in a non-healthcare context would be a local record number. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider identifier issuer (mandatory) | 027141 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's individual identifier. | It is important to know the domain or context in which the provider's individual identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare provider's title (optional) | 023061 | The document SHOULD contain at least one title for the healthcare provider. | Titles such as 'Mrs', 'Mr', 'Dr' etc. are useful when communicating with the healthcare provider. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|--|
| Healthcare provider given name (optional) | 023062 | The document SHOULD contain at least one given name for the healthcare provider. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider family name (mandatory) | 023064 | The document SHALL contain the healthcare provider's family name. | To enable consistent and correct identification of the healthcare provider. This is a required field when validating HPI-Is against the Healthcare Identifiers Service. |
| Healthcare provider name suffix (optional) | 023065 | The document SHOULD contain the healthcare provider's name suffix where applicable. | To enable consistent and correct identification of the healthcare provider. Suffixes such as 'Snr', 'Jnr' etc. can be a useful aid in the correct and unique identification of the healthcare provider. |
| Healthcare provider organisation name (mandatory) | 023070 | The document SHALL contain the name of the organisation that the healthcare provider is representing. | To enable consistent and correct identification of the healthcare provider organisation. This is a required field when validating HPI-Os against the Healthcare Identifiers Service. |
| Healthcare provider individual's workplace address (optional) | 024035 | The document SHOULD contain the healthcare provider individual's Australian workplace address. | To enable consistent and correct identification of the healthcare provider. |
| Healthcare provider individual's workplace electronic communication details (optional) | 024036 | The document SHOULD contain at least one set of electronic communication details for the workplace of the individual. For example, telephone numbers, mobile phone numbers, email addresses etc. Additional Notes A healthcare provider may work for more than one organisation. These are the workplace communication details of the individual, not the organisation. | To enable electronic communication with the healthcare provider. |
| Healthcare provider employer organisation electronic communication detail (mandatory) | 026805 | The document SHALL contain the healthcare provider employer organisation's electronic communication detail. | To ensure that contact details are always provided for the author's organisation. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|---|
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |
| Healthcare provider professional role (mandatory) | 024040 | The document SHALL contain the healthcare provider's professional role (e.g. General Practitioner). This data item MAY carry an absent value. | Describing the professional role that a healthcare provider is performing can provide context and assist in interactions between healthcare providers to the benefit of individuals receiving healthcare. |

8.2 Interested parties - organisation

When an interested party is recorded as an organisation, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Organisation name (mandatory) | 026776 | The document SHALL contain the name of the organisation. | Ensures that the name of the organisation is clear. |
| Healthcare organisation identifier (mandatory) | 027111 | The document SHALL contain at least one identifier for the provider organisation. Additional Notes An example of an identifier for healthcare referrals is the national Healthcare Provider Identifier- Organisation identifier (HPI-O). An example of an identifier in a non-healthcare context would be the organisation's Australian Business Number (ABN), Australian Company Number (ACN) or a local identifier. | To enable consistent and correct identification of the organisation or practice that the healthcare provider is representing at the time of document creation. |
| Healthcare organisation identifier issuer (mandatory) | 027144 | The document SHALL contain the identifier of the organisation that issued or assigned the provider's organisational identifier. | It is important to know the domain or context in which the provider's organisational identifier was issued or assigned, so that the receiver can confidently compare identifiers. |
| Healthcare organisation address (optional) | 026799 | The document SHOULD contain the healthcare organisation's workplace address. | To enable consistent and correct identification of the healthcare organisation. |

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|--|
| Healthcare organisation electronic communication details (mandatory) | 026800 | The document SHALL contain at least one set of electronic communication details for the organisation's communication details. For example telephone numbers, mobile phone numbers, email addresses etc. | To enable electronic communication with the healthcare organisation. |

9 Alerts

This section allows the collection of information about an individual that may:

- need special consideration by a care provider to avoid an unfavourable event;
- need consideration and action by a care provider or facility in relation to the care and safety of the individual, staff or other people; or
- notify the care provider of special circumstances that may be relevant to the care provider when delivering care or interacting with the individual.

| Data item | Req No. | Requirement statement | Rationale |
|-------------------------------|---------|---|---|
| Alert section (optional) | 027114 | The document SHOULD contain details about one or more alerts, when it is deemed relevant by the author to do so. | To allow an author to include details about any matters they believe the referral receiver should be made aware of, at the most appropriate time. |
| Alert type (mandatory) | 027115 | Each alert included SHALL contain a description of the type of alert. Additional Notes Examples of alert types may be 'infection risk', 'special needs', 'clinical', 'discharge circumstances', 'vulnerable families', 'psychosocial alerts' etc. | Allows categorisation of alerts. |
| Alert description (mandatory) | 027116 | Each alert included SHALL contain a description of the alert itself. Additional Notes Examples may include 'infection control warning', 'only communicates via sign language', 'injecting drug user', 'custody proceedings', 'AVO in place' or 'risk of aggression from | Allows the referral receiver to understand the nature of the alert. |

10 Current and past medical history

The medical history section allows for any relevant problems, diagnoses and procedures to be recorded.

| Data item | Req No. | Requirement statement | Rationale |
|------------------------------------|---------|---|---|
| Medical History section (optional) | 027402 | The document SHOULD contain details about the individual's medical history, which may include information about problems, diagnoses and any relevant procedures. | To provide the opportunity to include information about medical history, when it is deemed relevant to do so. |

10.1 Problems/Diagnoses

The medical history section includes the problems or diagnoses (or both) that form part of the individual's past and current medical history, as deemed relevant to be included in the referral.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|--|
| Problem/Diagnosis (optional) | 026823 | The medical history section SHOULD contain one or more problems/diagnoses, as assessed by the referral sender as relevant. | Inclusion of problems and diagnoses allows recipients to understand the nature and range of issues being experienced by the individual. This is optional since it may be relevant to include only a procedure. |
| Problem/Diagnosis description (mandatory) | 026818 | The document SHALL contain the description of the problems and diagnoses. | This provides the content for the problems, diagnoses, or both. |
| | 026820 | The description of problems and diagnoses SHALL be derived from a SNOMED CT-AU reference set, while allowing an option for free text. | Allows for the electronic transmission of clinical information and future decision-support capability. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|--|
| Date of onset (optional) | 026609 | The document SHOULD contain the actual or approximate date the problem/diagnosis began, in the opinion of the author, when it is deemed relevant by the author to do so. The time SHALL NOT be permitted. | Knowledge of the timing and status of problems and diagnoses assists the decision making process. |
| Date of resolution/remission (optional) | 026610 | The document SHOULD contain the date or estimated date that the problem/diagnosis resolved or went into remission, as indicated or identified by the author, when it is deemed relevant by the author. Where a resolution or remission date is not known, the document MAY support a 'resolved flag' or similar to indicate resolution or remission. The time SHALL NOT be permitted. | Knowledge of problem / diagnosis timing and status assists decision making process. |
| Problem/diagnosis comment (optional) | 026669 | The document SHOULD contain additional narrative about any problem or diagnosis not captured in other fields, when it is deemed relevant by the author. | Allows the capture of any other information about any problems and diagnoses not represented in other data elements. |

10.2 Procedure

The medical history section may include any procedures performed on the individual that are deemed relevant to be included in the referral.

| Data item | Req No. | Requirement statement | Rationale |
|----------------------------|---------|---|--|
| Procedure (optional) | 026821 | The medical history section SHOULD contain one or more procedures, if the author thinks it is relevant for the referral. | Allows information about relevant procedures to be included at the discretion of the referral sender. |
| Procedure name (mandatory) | 026822 | The document SHALL contain the description of the procedure. | This provides the content for the procedure information. |
| | 026824 | The procedure name SHALL be derived from a SNOMED CT-AU reference set, while allowing an option for free text. | Allows for the electronic transmission of clinical information and future decision-support capability. |

| Data item | Req No. | Requirement statement | Rationale |
|----------------------------------|---------|---|---|
| Date and time started (optional) | 026672 | The document SHOULD contain the start date and time (where time is available) for the procedure, when it is deemed relevant by the author. | Knowledge of procedure timing assists the decision making process. |
| Procedure comment (optional) | 026671 | The document SHOULD contain additional narrative about the procedure not captured in other attributes, when it is deemed relevant by the author. | Allows the capture of any other information about the procedure not represented in other data elements. |

11 Current medications

Medications (including prescribed and over-the-counter medicines) that the individual is currently taking.

| Data item | Req No. | Requirement statement | Rationale |
|---------------------------------------|---------|--|---|
| Current medication section (optional) | 027403 | The document SHOULD contain information about medications, when relevant. | To allow inclusion of relevant information about medications. |

11.1 Exclusion statement

When an exclusion statement is present for current medications, the following requirement applies.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|--|
| Exclusion statement - medications (mandatory) | 027431 | If the medication section is present and contains no information about medications then the document SHALL contain an exclusion statement specifying why this information is not available in the document. | An exclusion statement makes it explicitly clear that the question about medicines has been asked and the response recorded. |

| Data item | Req No. | Requirement statement | Rationale |
|-----------|---------|--|---------------------------------------|
| | 027432 | <p>Values for the medication exclusion statement SHALL be one of the following:</p> <ul style="list-style-type: none"> • none known • not asked • none supplied • unknown <p>Additional Notes</p> <p>“None known” is only to be used when the authoring provider has made a positive statement that there are no known items.</p> <p>“Not asked” is to be used when the individual has not yet been assessed for medication information.</p> <p>“None supplied” is to be used when no items have been selected for inclusion in the referral, and the author has not explicitly chosen “none known”. This may be because the individual has elected not to share any of the given items.</p> <p>In circumstances where medications are not relevant for the referral, “unknown” can be used.</p> | Facilitates clarity of understanding. |

11.2 Medications

When one or more current medications are present, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|---|
| Therapeutic good identification (mandatory) | 025175 | Every medicine listed in the document SHALL include details that fully describe it, including the name of the medication, strength, route, and dose form, where appropriate. | Allows interoperability, eliminates ambiguity, and is vital to support high quality safe clinical care. |
| | 027901 | The medication recorded in the document SHOULD be an AMT concept. | AMT concepts help remove ambiguity and confusion when there are references to similar medicines. |

| Data item | Req No. | Requirement statement | Rationale |
|---|----------------|--|---|
| Medication directions (mandatory) | 027416 | The document SHALL contain a complete narrative description of how much, when, and how to use the medication, vaccine, or other therapeutic good. | Vital to support high quality, safe clinical care. |
| Reason for therapeutic good/clinical indication (optional) | 026588 | The document SHOULD include the reason (indication) for the individual to be taking the medicine. A reason for therapeutic good or clinical indication value for a given medication SHALL only be included when it is either relevant or appropriate to do so (i.e. optional to include a value). | It is important to understand the rationale for medicines, particularly given that some medicines may have multiple purposes. |
| Additional comments/medication instruction comment (optional) | 026589 | The document SHOULD contain additional information that may be needed to ensure the continuity of supply, continued proper use, or appropriate medication management, when it is deemed relevant by the author to do so. This may include comments regarding medication duration. | To allow the provision of additional medicine information if the author considers that it will contribute to the future care of the individual. |

12 Adverse reactions

Information about adverse reactions of the individual (including allergies and intolerances), and any relevant reaction details.

Includes allergies and adverse reactions to all substances which might include food allergies, bee sting allergies, as well as prescription and non-prescription medicines.

| Data item | Req No. | Requirement statement | Rationale |
|--------------------------------------|---------|---|---|
| Adverse reactions section (optional) | 026780 | The document SHOULD contain information about adverse reactions when it is deemed relevant to do so. | To provide the opportunity to include information about adverse reactions, when it is relevant. |

12.1 Exclusion statement

When an exclusion statement is present for adverse reactions, the following requirement applies.

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|--|--|
| Exclusion statement - adverse reactions (mandatory) | 027433 | If the adverse reaction section is present and contains no information about adverse reactions then the document SHALL contain an exclusion statement specifying why this information is not available in the document. | An exclusion statement makes it explicitly clear that the question about allergies and adverse reactions has been asked and the response recorded. |

| Data item | Req No. | Requirement statement | Rationale |
|-----------|---------|--|---------------------------------------|
| | 027434 | <p>Values for the adverse reaction exclusion statement SHALL be one of the following:</p> <ul style="list-style-type: none"> • none known • not asked • none supplied • unknown <p>Additional Notes</p> <p>“None known” is only to be used when the authoring provider has made a positive statement that there are no known items.</p> <p>“Not asked” is to be used when the individual has not yet been assessed for adverse reaction information.</p> <p>“None supplied” is to be used when no items have been selected for inclusion in the referral, and the author has not explicitly chosen “none known”. This may be because the individual has elected not to share any of the given items.</p> <p>In circumstances where adverse reactions are not relevant for the referral, “unknown” can be used.</p> | Facilitates clarity of understanding. |

12.2 Adverse reactions

When one or more adverse reaction(s) are present, the following requirements apply.

| Data item | Req No. | Requirement statement | Rationale |
|-----------------------------|---------|---|--|
| Substance/agent (mandatory) | 026594 | The document SHALL contain the identification of a substance, agent, or a class of substance that is considered to be responsible for the adverse reaction. | Supports the safe delivery of healthcare. |
| | 026584 | Values for the description of the adverse reaction substance/agent SHOULD be derived from a SNOMED CT-AU, or Australian Medicines Terminology (AMT) reference set. | Allows for electronic transmission of clinical information and future decision-support capability. |

| Data item | Req No. | Requirement statement | Rationale |
|---|---------|---|--|
| Reaction description/ Manifestation (optional) | 026607 | Each adverse reaction SHOULD contain the reaction description(s) that was caused by or related to the exposed agent. There MAY be more than one reaction descriptions for a single agent. | To support safe clinical care. |
| | 026565 | Description(s) of the reaction/manifestation SHOULD be derived from a SNOMED CT-AU refset. | Allows for electronic transmission of clinical information and future decision-support capability. |
| Adverse reaction type (optional) | 026595 | For each adverse reaction stored in the document, the document MAY contain an adverse reaction type. Additional Notes It is optional to provide a value. | When determining a treatment plan, it is often necessary to consider the individual's response to a known allergen. For example, in a medical emergency it might be appropriate to administer a medication where a minor intolerance exists; however, if the response is anaphylaxis, an alternative protocol would be sought. |
| | 026593 | The value choices for the reaction type SHOULD be limited to a SNOMED CT-AU reference set. | A constrained vocabulary results in better consistency and encourages higher quality data entry. |

13 Diagnostic investigations

Describes any diagnostic investigations performed on, or requested for, the individual, relevant to the event.

Pending results can be indicated using a result status of 'pending'.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|--|--|
| Diagnostic investigations section (optional) | 026813 | The document SHOULD contain one or more diagnostic investigations, when it is deemed relevant at the discretion of the author to do so. | The inclusion of diagnostic investigation results can provide recipients with important and relevant supporting information to the assessment and plans. |
| Investigation type (mandatory) | 026814 | Each investigation included SHALL contain designation of the "investigation type". Additional Notes Examples include pathology, diagnostic imaging, or other (which may contain tests such as spirometry or ECG traces). | This allows software at either end to group like investigation types together, thereby aiding readability. |
| Investigation name (mandatory) | 026815 | Each included investigation SHALL contain the name of that investigation. | To support safe clinical care. Supports the easy identification of investigations. |
| Result status (mandatory) | 026816 | Each included investigation SHALL contain the status of that investigation. Additional Notes For example, 'final', 'pending'. | To support safe clinical care. |
| Result content (optional) | 026817 | The document SHOULD contain a diagnostic investigation report as embedded text, an attachment, or structured data, when it is deemed relevant by the author to do so. | Inclusion of the report can allow immediate viewing for the document reader. This is optional on the basis that a pending report would have nothing to include. |

14 Attachments

Additional documents can be attached to the referral (either as a link or as data), because they are relevant to the ongoing care of the individual. For example, additional referral forms or templates, reports, care plans, and assessments etc.

| Data item | Req No. | Requirement statement | Rationale |
|-------------------------------------|---------|---|---|
| Attachments section (optional) | 027007 | The document MAY contain one or more attachments, when it is deemed relevant by the author to do so. Additional Notes Please refer to the glossary for the definition of an attachment. | To allow the author to include any additional information that is relevant to the referral. |
| Attachment name (mandatory) | 027008 | The document SHALL contain a descriptive name for every included attachment. Additional Notes For example, “care plan”. | Allows the reader to know at a glance what documents are attached before opening them. |
| Attachment document type (optional) | 027435 | The document SHOULD contain an associated document type for the included attachment. | Facilitates document management by virtue of a predictable document type. |
| Attachment identifier (optional) | 027436 | The document SHOULD contain a unique identifier for the included attachment. | Required to uniquely identify a document attachment. |

15 Document control

This section describes technical metadata about the document.

| Data item | Req No. | Requirement statement | Rationale |
|--|---------|---|--|
| Document instance identifier (mandatory) | 023067 | The document SHALL contain a globally unique identifier for each document instance. | Required to uniquely identify a document instance. |
| Document version number (mandatory) | 023068 | The document SHALL contain the document version number. Additional Notes This is the CDA document version number that is recognised by the My Health Record system. | The version number differentiates each instance of a document from its predecessors and successors. |
| Date and time of document creation (mandatory) | 024025 | The document SHALL contain the date and time the CDA document instance was generated. | The date and time a document was created helps identify document provenance and helps with document management. |
| Document type (mandatory) | 024027 | The document SHALL contain a unique identifier that specifies the document type. | The identification of the document type (e.g. a unique identifier referencing 'Discharge Summary') may be of value in categorising the various document types for display in the My Health Record system portals, views, and clinical information systems. |

16 Known Issues

The following may be addressed in future revisions of this document.

| Topic | Issue |
|----------------------------|---|
| Individual's sex or gender | It is recognised that the inclusion of the data item for the individual's sex is solely the physiological or biological distinction as defined by the clinician, for the benefit of clinical care. The additional social and cultural gender role that an individual identifies with is not captured, but is a consideration for future releases. |

Acronyms

| Acronym | Description |
|----------------|--|
| AMT | Australian Medicines Terminology |
| CDA | Clinical Document Architecture |
| DVA | Department of Veterans' Affairs |
| HI Service | healthcare identifiers service |
| HPI-I | healthcare provider identifier - individual |
| HPI-O | healthcare provider identifier - organisation |
| SNOMED CT | Systematized Nomenclature of Medicine - Clinical Terms |
| SNOMED CT-AU | Systematized Nomenclature of Medicine - Clinical Terms - Australia |

Glossary

| Term | Meaning |
|---|---|
| Australian Medicines Terminology (AMT) | AMT is systemised collection of medicines terminology that offers a standard national approach for the identification and naming of medicines which includes: medicinal product, unit of use, product pack, trade product, trade product unit of use, product pack and contains trade product pack information. |
| Clinical Document Architecture (CDA) | An HL7 standard intended to specify the encoding, structure and semantics of clinical documents for exchange. |
| Department of Veterans' Affairs (DVA) | An Australian Government department. The Department of Veteran Affairs provides support to war veterans, their war widow(s) and dependents through programs of care, compensation and commemoration. |
| exclusion statement | This provides the means of identifying the reason why clinical data has been omitted. For example, immunisations may be absent because the clinician has assessed the individual as having had none, i.e. none known. |
| healthcare identifiers service (HI Service) | A national system for uniquely identifying eligible healthcare providers and individuals (patients). |
| healthcare provider identifier - individual (HPI-I) | The healthcare provider identifier for individuals (HPI-I) is a 16-digit unique number used to identify providers who deliver healthcare in the Australian healthcare setting. |
| healthcare provider identifier - organisation (HPI-O) | A unique 16-digit number used to identify organisations who deliver care in the Australian healthcare setting. |
| jurisdictions | Australian state and territory government health departments. |
| MAY | <p>This word, or the term OPTIONAL, means that an item is truly optional. One implementer may choose to include the item because a particular implementation requires it, or because the implementer determines that it enhances the implementation while another implementer may omit the same item. An implementation which does not include a particular option must be prepared to interoperate with another implementation which does include the option, perhaps with reduced functionality. In the same vein, an implementation which does include a particular option must be prepared to interoperate with another implementation which does not include the option (except of course, for the feature the option provides).</p> <p>Source: Network Working Group, 1997, RFC2119 - Key words for use in RFCs to Indicate Requirement Levels</p> |
| nullflavor | A collection of codes specifying why a valid value is not present. |
| referral | <p>Referral is the communication, with the intention of initiating care transfer, from the provider making the referral to the receiver.</p> <p>Source: Australian Standard [AS4700.6-2004]</p> |
| semantic interoperability | <p>The ability for information shared by systems to be understood at the level of formally defined domain concepts.</p> <p>[AS/ISO18308]</p> |

| Term | Meaning |
|---|--|
| SHALL | <p>This word, or the term REQUIRED, means that the statement is an absolute requirement of the specification.</p> <p>Source: Network Working Group, 1997, RFC2119 - Key words for use in RFCs to Indicate Requirement Levels.</p> |
| SHALL NOT | <p>This phrase means that the statement is an absolute prohibition of the specification.</p> <p>Source: Network Working Group, 1997, RFC2119 - Key words for use in RFCs to Indicate Requirement Levels.</p> |
| SHOULD | <p>This word, or the term RECOMMENDED, means that there may exist valid reasons in particular circumstances to ignore a particular item, but the full implications must be understood and carefully weighed before choosing a different course.</p> <p>Source: Network Working Group, 1997, RFC2119 - Key words for use in RFCs to Indicate Requirement Levels.</p> |
| <p>Systematized Nomenclature of Medicine - Clinical Terms - Australia (SNOMED CT-AU)</p> | <p>SNOMED CT-AU is the Australian extension to SNOMED CT; the integrated national release of SNOMED CT for implementation in Australian deployed clinical IT systems.</p> <p>SNOMED CT-AU will be the principal source of clinical coded data Australian clinical IT systems will use to allow clinicians to record, retrieve and process information in an electronic health record at the point of care.</p> |
| <p>Systematized Nomenclature of Medicine - Clinical Terms (SNOMED CT)</p> | <p>Systematized Nomenclature of Medicine -- Clinical Terms is a systematically organised computer processable collection of medical terminology covering most areas of clinical information such as diseases, findings, procedures, micro-organisms, pharmaceuticals etc. It allows a consistent way to index, store, retrieve, and aggregate clinical data across specialties and sites of care. It also helps in organising the content of medical records, reducing the variability in the way data is captured, encoded and used for clinical care of patients and research.</p> |

References

- [NEHTA2011] NEHTA, *e-Referrals Core Information Components*, Version 1.1.3, 12 December 2011, available from <https://www.digitalhealth.gov.au/implementation-resources/clinical-documents/ereferral/NEHTA-0968-2011>
- [SA2014] Standards Australia, 2014, AS 4841 (2014) *Person and Provider Identification in Healthcare*, accessed 18 Dec 2015. <http://infostore.saiglobal.com/store/Details.aspx?ProductID=1753860>