

VERMONT DEPARTMENT OF HEALTH
DATA SET REQUIREMENTS FOR PARTICIPATION IN BIOSENSE 2.0

The following are the data set requirements for participation in the BioSense 2.0 syndromic surveillance program through the Vermont Department of Health (VDH). Only data from certified electronic health record systems that meet meaningful use standards will be accepted by VDH for BioSense 2.0.

Providers should consult the Public Health Information Network (PHIN) Messaging Guide For Syndromic Surveillance: Emergency Department And Urgent Care Data (Release 1.1, August 2012) for further data set details. The requirements found below are subject to change.

1. Data Format

Data for the ongoing submission to BioSense 2.0 will only be accepted in HL7 format, version 2.5.1. Retrospective data from the time prior to the Provider's adoption of BioSense 2.0 may be accepted in a format other than HL7 (CSV, flat file).

2. Data Type

At this time, only data from emergency room visits should be submitted to BioSense 2.0. Data from hospital-affiliated walk-in care or urgent care clinics is also accepted.

3. Data Submission Frequency

Data must be submitted in batches, anywhere from 1 to 24 hours apart. High frequency batches (hourly) are preferred.

4. Data Fields

Below is a list of the data elements required for submission to BioSense 2.0 by the Vermont Department of Health. Please refer to the PHIN Messaging Guide For Syndromic Surveillance: Emergency Department And Urgent Care Data (Release 1.1, August 2012) for details on the format and content of each field. Do not transmit any fields not listed under this section.

REQUIRED DATA ELEMENTS

The following data fields must be included in syndromic messages and a value must be present in the field for the message to be accepted.

Data Element Name	Description
<i>Treatment Facility Identifiers</i>	
Facility Identifier	Unique facility identifier of facility where patient originally presented. NPI is the preferred value, but OID may be used if an NPI is not available (refer to PHIN Guide, page 94).
Facility/Visit Type	Type of facility that the patient visited for treatment (refer to the PHIN Guide, page 97). The preferred concept name for emergency room facilities is "Emergency Care". For urgent care and walk-in clinics, the preferred concept name is "Urgent Care".
Report Date/Time	Date and time of report transmission from original source (refer to PHIN Guide, page 98).
<i>Patient Demographics</i>	
Unique Patient Identifier	Unique identifier for the patient (refer to PHIN Guide, page 99). Do not use the social security number for the patient. The identifier chosen must be one that can be used for communicating with the clinical staff at the facility in the event that patient follow-up is required. The data submitted in this field must not be identical to the data submitted in the Unique Visiting ID field. The medical record number can be used in this field.
Age	Numeric value of patient age (refer to PHIN Guide, page 100).
Age Units	Unit corresponding to numeric value of patient age (refer to PHIN Guide, page 101). Please use only "Years" or "Months".
Gender	Gender of patient (refer to PHIN Guide, page 102).
City/Town	City/town of patient residence (refer to PHIN Guide, page 102).
ZIP Code	Zip code of patient residence (refer to PHIN Guide, page 102).
State	State of patient residence (refer to PHIN Guide, page 102).

REQUIRED DATA ELEMENTS (CONTINUED)

<i>Patient Health Indicators</i>	
Unique Visiting ID	Unique identifier for a patient visit (refer to PHIN Guide, page 103). The data submitted in this field must not be identical to the data submitted in the Unique Patient Identifier field.
Visit Date/Time	Date and time of patient presentation (refer to PHIN Guide, page 104)
Patient Class	Patient classification within facility (refer to PHIN Guide, page 105). Do not restrict data transmissions based upon the value in this field. The Patient Class values for a particular patient should be permitted to change if that patient moves from the emergency room to another location with hospital (“I” for inpatient status, “O” for outpatient status, etc.).
Admission Type	This field contains information on the patient’s origin within the hospital. For patients who came to the hospital through the emergency room, their Admission Type would be “E”. If an emergency room patient is subsequently admitted to the hospital as an inpatient, their admission type would remain “E”. Only messages where the “Admission Type” is “E” should be sent to BioSense 2.0 for syndromic surveillance. This field belongs in PV1-4 (see page 51 of the PHIN Guide).
Chief Complaint/Reason For Visit	Short description of the chief complaint or reason of patient’s visit, recorded when seeking care (refer to PHIN Guide, page 106).

REQUIRED DATA ELEMENTS, BUT FIELDS MAY BE EMPTY

The following data fields must be included in syndromic messages but a value does not have to be present in the field for the message to be accepted.

<i>Patient Demographics</i>	
Race	Race of patient (refer to PHIN Guide, page 103). Send both the concept code and concept name.
Ethnicity	Ethnicity of patient (refer to PHIN Guide, page 103). Send both the concept code and concept name.

REQUIRED DATA ELEMENTS, BUT FIELDS MAY BE EMPTY (CONTINUED)

<i>Patient Demographics</i>	
County	County code (refer to PHIN Guide, page 103). The county code submitted must adhere to the FIPS standard for all patients who are residents of the United States. Fixed values are not permitted.
Country	Country of patient (refer to PHIN Guide, page 102). Only use the ISO 3166-1 alpha-3 codes to denote patient country of residence.
<i>Patient Health Indicators</i>	
Diagnosis/Injury Code	Diagnosis or injury code of patient condition, using the ICD-9 system (refer to PHIN Guide, page 109)
Diagnosis Type	Qualifier for diagnosis/injury code specifying type of diagnosis (refer to PHIN Guide, page 109).
Discharge Disposition	Patient's anticipated location or status following their visit (refer to PHIN Guide, page 109).

OPTIONAL DATA ELEMENTS

The following data fields are requested, but optional for inclusion in syndromic messages.

Data Element Name	Description
<i>Patient Health Indicators</i>	
Triage Notes	Triage notes for the patient's visit (refer to PHIN Guide, page 107)
Clinical Impression	Free text field for clinical impression of the diagnosis (refer to PHIN Guide, page 108)
Hospital Service	This field belongs in PV1-10 (see page 52 of the PHIN Guide).
Admit Source	This field belongs in PV1-14 (see page 52 of the PHIN Guide).