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AGFA HEALTHCARE HL7 Conformance Statement

- XERO Portal 2.x

Document No. 001651 - Revision 5

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INTRODUCTION

1.1 **Revision Record**

HL7 Conformance Statement Template, Livelink Node ID: 19565451		
Revision Number Date Reason for Change		
8	March 2019	New structure for better quality communication with external parties

HL7 Conformance	HL7 Conformance Statement Xero Portal 2.x		
Revision Number	Date Reason for Change		
2-3-4	March 1 to May 2, 2022	First Version and corrections made in review cycle	
5	November 3 rd 2022	Change title and content of the document to XERO Portal 2.x because this document is valid for versions 2.0 and 2.1. Minor changes throughout the document	

1.2 **Purpose and Intended Audience of this Document**

This document is a HL7 Conformance Statement for the HL7 Services of XERO Portal 2.x.

The user of this document is involved with system integration and/or software design. We assume that the reader is familiar with the terminology and concepts that are used in the HL7 standard and the IHE Technical Framework.

Readers not familiar with HL7 terminology should first read the appropriate parts of the HL7 standard itself, prior to reading this conformance statement.

Although the use of this conformance statement in conjunction with the HL7 standard is intended to facilitate communication with XERO Portal 2.x, it is not sufficient to quarantee. by itself, the inter-operation of the connection between XERO Portal 2.x and the 3rd party HL7-based system.

The integration of any device into a system of interconnected devices goes beyond the scope of the HL7 standard and this conformance statement when interoperability is desired. The responsibility for analyzing the applications requirements and developing a solution that integrates the Agfa equipment with other vendors' systems is the user's responsibility and should not be underestimated.

1.3 **Acronyms and Abbreviations**

Definitions, terms and abbreviations used in this document, many of which are defined within the HL7 standard. Abbreviations and terms are as follows:

ACK General Acknowledgement message ADT Admission, Discharge, and Transfer message

ERR Error segment

EVN Event Type segment

Health Level 7 HL7

IHE Integrating the Healthcare Enterprise

MFE Master File Entry segment



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MFI Master File Identification segment MFN Master Files Notification message MSA Message Acknowledgment segment **MSH** Message Header segment **OBR** Observation Request segment **OBX** Observation/Result segment OF Order Filler – Device that sends filled orders (ORM) OP Order Placer ORC Common Order segment ORM Order Request Message ORU Observation Results - Unsolicited message PID Patient ID segment **PRA** Practitioner Detail segment PV1 Patient Visit segment RIS Radiology Information System STF Staff Identification segment **ZDS** Custom Segment to convey Study Instance UID ΖPΙ Custom Segment to convey user password information

1.4 Related Documents

- > HL7 Standard v2.3.1; 2.4; 2.5
- ➤ IHE Radiology Technical Framework
- > IHE IT Infrastructure Technical Framework



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2 INBOUND MESSAGES

2.1 XERO Portal supported Trigger Events

HL7 Message shall comply with the EI conformance statement, with some exceptions like variance on mandatory fields or Mandatory Segment for EI that will not be used by Portal and vice versa.

2.1.1 Supported ACK Events

For more information about the processed segments and supported fields, refer to the document specified in the 'Conformance profile document' column or to chapter 2.1.1.1 and 2.2.

Table 2-1 Supported ACK Events

	Event Code	ACK Trigger Event Description	Conformance profile document
ACK	ALL	General ACK Message	See sections 2.1.1.1 and 2.2

2.1.1.1 Supported ACK segments

The following segments are supported when Xero Portal receives an ACK message:

Segments without brackets are mandatory. Segment with square brackets are optional and segments with curly brackets (braces) are repeating.

Table 2-2 Supported ACK segments

HL7 ACK Event Code	Supported ACK segments
All	MSH MSA [ERR]

2.1.2 Supported ADT Events

For more information about the processed segments and supported fields, refer to chapter 2.1.2.1 and 2.2.

In case the source system is not capable to limit the Event type, it might be possible to filter out *non-listed trigger event* in the Portal. *This requires a thorough analysis by Agfa Healthcare Professional Services that ultimately determine whether or not it will be feasible.*

Table 2-3 Supported ADT Events

Func Area	Event Code	ADT Trigger Event Description	Conformance profile document
ADT	A01	Admit / Visit notification	
ADT	A04	Register a patient	0
ADT	A08	Update patient information	See sections 2.1.2.1 and 2.2
ADT	A28	Add person information	
ADT	A31	Update person information	



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2.1.2.1 Supported ADT segments

The following segments are supported when Xero Portal receives an ADT message:

Segments without brackets are mandatory. Segments with square brackets are optional and segments with curly brackets (braces) are repeating.

Table 2-4 Supported ADT segments

HL7 ADT Event Code	Supported ADT segments
A01;A04; A08; A28, A31	MSH EVN PID ZPI

2.1.3 Supported MFN Events

For more information about the processed segments and supported fields, refer to chapter 2.1.3.1 and 2.2.

Table 2-5 Supported MFN Events

Func Area	Event Code	MFN Trigger Event Description	Conformance profile document
MFN	M02	Staff/Practitioner master file	See sections 2.1.3.1 and 2.2

2.1.3.1 Supported MFN segments

The following segments are supported when Xero Portal receives an MFN message:

Segments without brackets are mandatory. Segments with square brackets are optional and segments with curly brackets (braces) are repeating.

Table 2-6 Supported MFN segments

HL7 MFN Event Code	Supported MFN segments
M02	MSH MFI { MFE STF [PRA] }

2.1.4 Supported ORM Events

For more information about the processed segments and supported fields, refer to chapter 2.1.4.1 and 2.2.

Table 2-7 Supported ORM Events

	Func Area	Event Code	ORM Trigger Event Description	Conformance profile document
Ī	ORM	O01	Order message	See sections 2.1.4.1 and 2.2

2.1.4.1 Supported ORM segments

The following segments are supported when Xero Portal receives an ORM message:



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Segments without brackets are mandatory. Segments with square brackets are optional and segments with curly brackets (braces) are repeating.

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Table 2-8 Supported ORM segments

HL7 ORM Event Code	Supported ORM segments
001	MSH PID [PV1] ORC OBR { [OBX] } [ZDS]

2.1.5 Supported ORU Events

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For more information about the processed segments and supported fields, refer to chapter 2.1.5.1 and 2.2.

Table 2-9 Supported ORU Events

Func Area		ORU Trigger Event Description	Conformance profile document
ORU	R01	Unsolicited observation Message	See sections 2.1.5.1 and 2.2

2.1.5.1 Supported ORU segments

The following segments are supported when Xero Portal receives an ORU message:

Segments without brackets are mandatory. Segments with square brackets are optional and segments with curly brackets (braces) are repeating.

Table 2-10 Supported ORU segments

HL7 ORU Event Code	Supported ORU segments
	MSH PID [PV1] { [ORC] OBR [ZDS] { Only the segments of the last iteration ORDER_OBSERVATION group will be implemented. OBX } }

2.2 XERO Portal supported fields in Inbound segments

The following sub-chapters will indicate what are the Required and optional fields supported by Xero Portal for each segment.

The supported segments per message types are listed in the chapter 2.1

2.2.1 MSH Segment

Table 2-11 MSH Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Field Separator	R	Usually " "
2	Encoding Characters	R	Usually "^~\&"
3	Sending Application	0	



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Seq	HL7 Field Name	Option	Comments
3.1	>Namespace ID	0	
4	Sending Facility	0	
4.1	>Namespace ID	0	
7	Date/time of Message	0	
7.1	>Date/Time	0	YYYYMMDD[HHMM[SS]][+-ZZZZ]
			If timezone information is present, it is taken into account for all date/time fields in the message. If timezone information is present also in other datetime fields, it overrules the timezone information in this field.
9	Message Type	R	
9.1	>Message type	R	ADT or ORM or ORU or MFN of ACK
9.2	>Trigger event	R	See supported "event codes" in sections 2.1.1, 2.1.2, 2.3.2, 2.4.2, 2.5.2
9.3	>Message structure	0	
10	Message Control ID	R	
11	Processing ID	0	
11.1	>Processing ID	0	
12	Version ID	R	Supported versions: 2.3 - 2.3.1 - 2.4 - 2.5.
12.1	>Version ID	R	
18	Character Set	0	

2.2.2 MSA Segment

Table 2-12 MSA Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Acknowledgment Code	R	Supported values: AA, AR, AE
2	Message Control ID	R	The message control id of the original message
3	Text Message	R	AA:Message is Compliant with HL7 Conformance Statement
			AE:Message is not Compliant with HL7 Conformance Statement

2.2.3 ERR Segment

Table 2-13 ERR Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Error Code and Location	0	Indicates the position in the message which caused the processing problem

2.2.4 EVN Segment

Table 2-14 EVN Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
2	Recorded Date/Time	R	



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Seq	HL7 Field Name	Option	Comments
2.1	>Date/Time	R	YYYYMMDD[HHHMM[SS]][+-ZZZZ] If timezone information is present it overrules the timezone information if available in MSH-7

2.2.5 PID Segment

Table 2-15 PID Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
3	Patient Identifier List	R	
3.1	>ID	R	Identification number or code of the patient
3.4	>Assigning Authority	0	The "Assigning authority" aka "Issuer of Patient ID" can consist of the following three parts:
			- Namespace ID // Issuer of Patient ID
			- Universal ID // Universal Entity ID
			- Universal ID Type // Universal Entity ID Type
			Namespace ID, or combination of Universal ID and Universal ID Type, unique define the issuer.
			Either only Namespace is specified, or only Universal ID and Universal ID Type are specified, or all three components are specified.
			The combination of "Namespace ID" - "Universal ID" - "Universal ID Type" must be unique in EI!
			Though the component is not required, it is strongly advised to provide a value.
3.4.1	>>namespace ID	0	Identifier of the Assigning Authority that issued the patient id.
			If not available the default patient assigning authority for the system will be used
3.4.2	>> universal ID	0	Universal Entity ID.
			This ID must be unique in EI and must be in the correct format, i.e. containing only digits and dots.
3.4.3	>>universal ID type	0	Universal Entity ID Type.
			Only supported value :
			- ISO
3.5	> Identifier Type code (ID)	0	Supported values:
			PI = Patient Primary Identifier
			SS = Social Security number
			If empty PI will be used by default
3.6	>Assigning facility	0	
3.6.1	>>namespace ID	0	
5	Patient Name	R	
5.1	>family name	R	Defends to the control of the contro
5.1.1	>>surname	R	Patient's last name
5.1.2	>>own surname prefix	0	For alphabetic name / maiden name, if PID.5.1.1 is empty, PID.5.1.2 and PID.5.1.3 are concatenated
		_	as last name
5.1.3	>>own surname	0	For alphabetic name / maiden name, if PID.5.1.1 is empty, PID.5.1.2 and PID.5.1.3 are concatenated
			as last name
5.2	>given name	0	Patient's first name



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Seq	HL7 Field Name	Option	Comments
5.3	>second and further given name or initials thereof	0	Patient Middle Name
5.4	>suffix	0	Patient's suffix (eg: JR or III)
5.5	>prefix	0	Patient's prefix (eg: DR)
5.7	>name type code	0	M = maiden name, only support storing last name for maiden name.
5.8	>name representation code	0	Supported are : A or empty = Alphabetic I = Ideographic P = Phonetic
7	Date/Time of Birth	0	
7.1	Date/Time	0	YYYYMMDD[HHHMM[SS]]
8	Administrative Sex	0	M (Male), F (Female), O (Other) The DICOM Patient's Sex (0010,0040) attribute can have only the values M, F or O (for other). So when EI receives other values than the one indicated above, it will convert it to O
13	Phone Number – Home	R	This field is used for all home communication. Only the number in the first repetition will be used as primary home communication channel Mandatory for TFA/SMS notification
13.1	>telephone number	R	In case of telephone number/fax number/cellular number, the phone number is put in this field [(999)] 999-9999 [X999999][C any text] For Mobile numbers the phone number must be sent without country code prefix
13.2	>telecommunication use code	R	If this is empty the communication cannot be registered. Supported are: - Primary Residence Number (PRN) - Work Number (WPN) - Network (email) Address (NET) Conditional: NET mandatory for email PRN mandatory for mobile
13.3	>telecommunication equipment type (ID)	R	If this is empty the communication cannot be registered. Supported are: - Telephone (PH) - Fax (FX) - Cellular Phone(CP) - Internet Address (Internet) Conditional: CP mandatory to validate Mobile number Internet mandatory for Email Notifications
13.4	>Email address	R	Conditional:In case of Network Email Address, this needs to be filled in Mandatory for Notifications First one is the primary email communication channel
13.5	>Country Code	R	In case of telecommunication equipment type (ID) CP, this need to be filled in Mandatory to manage Mobile phone



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Seq	HL7 Field Name	Option	Comments
			A string whose characters are limited to "+" and/or the decimal digits 0 through 9. As a string, leading zeros are always considered significant.
19	SSN Number – Patient	С	Social Security number of the patient
			Mandatory if SSN will be the username for the portal
23	Birth Place	0	
29	Patient Death Date/Time	С	Condition Predicate:If PID.30 has a value Y, this field also needs a value.
29.1	Date/Time	R	YYYYMMDD[HHMM[SS]][+-ZZZ Z] or "" If timezone information is present it overrules the timezone information available in MSH-7
30	Patient Death Indicator	0	Y or N

PV1 Segment 2.2.6

Table 2-16 PV1 Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Set ID – PV1	0	
2	Patient Class	R	Required for: A01, A04, A05, A06, A07
			I (Inpatient), O (Outpatient), E (Emergency), P (Preadmit), R (Recurring), B (Obstetrics), N (Not applicable)
		0	Optional for A02, A03, A08, A11, A12, A13, A28, A31, A38
3	Assigned Patient Location		
		0	Optional for: A01, A03, A04, A05, A06, A07, A08, A11, A13, A28, A31, A38, ORM, ORU
3.1	>Point of care	0	Patient's location department code. When an unexisting department code is used, the department will be autocreated
3.2	>Room	0	Room in the department
3.3	>Bed	0	Bed in the room
3.4	>Facility (HD)	0	
3.4.1	>>Namespace ID	0	Patient's location facility code. When an unexisting facility code is used, the facility will be autocreated
3.11	>Assigning Authority for location	0	
3.11.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the department/facility code.
			If empty, the default assigning authority will be taken.
4	Admission Type	0	Type of admission, the circumstances under which the patient was or will be admitted
7	Attending Doctor	0	Attending Physician information
7.1	>ID number (ST)	0	physician identifier
7.2	>Family name	0	
7.2.1	>>Surname	0	Family name of the physician
7.3	>Given name	0	Given name of the physician
7.4	>Second and further given names or initials thereof	0	Middle name of the physician.
7.5	>Suffix (e.g., JR or III)	0	Name suffix, like SR
7.6	>Prefix (e.g., DR)	0	Name prefix, like Prof



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Seq	HL7 Field Name	Option	Comments
7.9	>Assigning authority	0	Assigning Authority of attending physician code.
7.9.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the attending physician code. If empty, the default assigning authority will be taken.
8	Referring Doctor	0	Referring physician information (see detailed component description in PV1-7)
8.1	>ID number (ST)	0	
8.2	>Family name	0	
8.2.1	>>Surname	0	
8.3	>Given name	0	
8.4	> Second and further given names or initials thereof	0	
8.5	>Suffix	0	e.g: JR or III
8.6	>Prefix	0	e.g: DR
8.9	>Assigning authority	0	Assigning Authority of referring physician code.
8.9.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the referring physician code.
15	Ambulatory Status	0	If empty, the default assigning authority will be taken. Code indicating any permanent or transient handicapped
	•		conditions
16	VIP Indicator	0	This field identifies the type of VIP 1, set VIP or personnel as yes
			- 0, set as no
17	Admitting Doctor	0	Admitting physician information (see detailed component description in PV1-7)
17.1	>ID number (ST)	0	
17.2	>Family name	0	
17.2.1	>>Surname	0	
17.3	>Given name	0	
17.4	> Second and further given names or initials thereof	0	
17.5	>Suffix	0	e.g: JR or III
17.6	>Prefix	0	e.g: DR
17.9	>Assigning authority	0	Assigning Authority of admitting physician code.
17.9.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the admitting physician code.
			If empty, the default assigning authority will be taken.
18	Patient Type	0	Site-specific values that identify the patient type
19	Visit Number	R	Required for A01, A02, A03, A04, A05, A06, A07, A11, A12, A13, A38
		0	Optional for: A08, A28, A31, ORM, ORU
19.1	>ID	R	Unique number identifying the admission.
19.4	>Assigning authority	0	
19.4.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the admission number. If empty, the default assigning authority will be taken.
44	Admit Date/Time	0	When no admit date/time is present in the message, a fallback is done to EVN-2.
44.1	>Date/time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z]



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Seq	HL7 Field Name	Option	Comments
			If timezone information is present it overrules the timezone information if available in MSH-7
45	Discharge Date/Time	0	When no discharge date/time is present in the message, a fallback is done to EVN-2
45.1	>Date/time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z] If timezone information is present it overrules the timezone information if available in MSH-7

ORC Segment 2.2.7

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Table 2-17 ORC Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Order Control	R	Supported in ORM:
			- NW (New order)
			- SC/XO/XX(Change Order)
			- CA (Cancel Order)
			- DC (Discontinue order)
			Supported in ORU
			SC (status changed)
2	Placer Order number	0	, ,
2.1	>Entity identifier	R	Unique identifier for the order, defined by the order placer
2.2	>Namespace ID	0	Identifier of the Assigning Authority that issued the placer order number.
			If empty, the default assigning authority will be taken
3	Filler Order number	R	Required for ORM
		0	Optional for ORU
3.1	>Entity identifier	R	Unique identifier for the order, defined by the order filler
3.2	>Namespace ID	0	Identifier of the Assigning Authority that issued the filler order number. If empty, the default assigning authority will be taken
5	Order Status	R	Required for ORU.
			-IP (In Progress)
			-CM (Completed)
			-DC (Discontinued)
			-CA (Cancelled)
			-SC (Scheduled)
		0	Optional for ORM
			- empty, when updating an existing order no status change when creating a new oder set SPS status as Scheduled
			- IP, set SPS status as STARTED
			- CM set SPS status as COMPLETED
			- DC, set SPS status as DISCONTINUED
			- CA set SPS status as CANCELLED
			- SC, set SPS status as Ordered/Scheduled
			- PA, set SPS status as Ordered/Scheduled + set patient arrived flag to True
7	Quantity/Timing	0	Identical to the Quantity/Timing in OBR-Segment.



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Seq	HL7 Field Name	Option	Comments
			If values provided in these fields differ, EI will consider value provided in OBR-27.
7.4	>Start date/time	0	
7.4.1	>>Date/time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z]
			If timezone information is present it overrules the timezone information if available in MSH-7
7.5	>End date/time	0	
7.5.1	>>Date/time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z] If timezone information is present it overrules the timezone information if available in MSH-7
7.6	>Priority	0	1) For existing sites (migration) - High Priority codes: A, T - Normal Priority codes: S, Unknown* - Low Priority Codes: C, P, R 2) For new installations - STAT priority code: S - Urgent priority codes: A, T - High Priority codes: C - Normal Priority codes: P, Unknown* - Routine Priority Code: R These values are configurable.
9	Date/Time of Transaction	0	* A value for which no mapping is applicable. Fall back for ORC-15 being empty. Used as order creation date/time. When empty, the Date/Time of processing the
0.4	5.1.11		message is taken
9.1	>Date/time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z] If timezone information is present it overrules the timezone information if available in MSH-7
12	Ordering Provider	0	Requesting Physician. If this is not filled in OBR-16 is processed instead
12.1	>ID number	0	Unique code identifying the requesting physician
12.2	>Family name	0	
12.2.1	>>Surname	0	Requesting physician last name
12.3	>Given name	0	Requesting physician first name
12.4	>Second and further given names or initials thereof	0	Middle name
12.5	>Suffix	0	e.g: JR or III
12.6	>Prefix	0	e.g: DR
12.9	>Assigning authority	0	-
12.9.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the physician id
15	Order Effective Date/Time	0	Fall back for OBR-6 being empty. Used as order creation date/time. When empty, ORC.9 is taken.
15.1	>Date/Time	0	YYYYMMDD[HHHMM[SS[.SSSS]]][+-ZZZ Z]
17	Entering Organization	0	Requesting department
17.1	>Identifier	0	Code of the department



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Seq	HL7 Field Name	Option	Comments
17.2	>Text	0	Name of the department. If empty, the identifier will be taken as name.
17.3	>Name of Coding system	0	Identifier of the Assigning Authority that issued the department id. If empty, the default system assigning authority will be taken.
21	Ordering facility name	0	Requesting Hospital
21.1	>Organization name	0	Name of the hospital. If empty, the identifier of the requesting facility will be taken as name
21.3	>ID number (NM)	0	Identifier of the hospital
21.6	>assigning authority	0	
21.6.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the requesting hospital id.
			If empty, the default assigning authority will be taken.
25	Order Status Modifier	0	Order Status Modifier only supported when property on ORM inbound pipeline. Delete requested procedure upon ORM cancel with ORC-25 = DELETE, is true.
25.1	>identifier (ST)	0	Only supported value : DELETE.
			For a procedure where no reading workflow or QC workflow is started and no images are available the following applies depending on the ORM inbound pipeline property setting:
			- property true: When ORM message is sent to cancel a procedure (Order control, ORC.1=CA and Order status, ORC.5=CA)and value of this field is "DELETE", the procedure will be deleted.
			-property false : A status update to procedure canceled is performed.
			In all other cases only status update to procedure canceled will be performed.

2.2.8 **OBR Segment**

Table 2-18 OBR Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Set ID - Observation Request	0	Set to 1,2,3
2	Placer Order number	0	Identical to ORC-2
2.1	>Entity identifier	R	
2.2	>Namespace ID	0	
3	Filler Order number	R	Identical to ORC-3
3.1	>Entity identifier	R	
3.2	>Namespace ID	0	
4	Universal Service Identifier	R	
4.1	>Identifier	R	The code of the requested procedure definition
4.2	>Text	0	The description of the requested procedure definition



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Seq	HL7 Field Name	Option	Comments
4.3	>Name of coding system	0	Code of the performing department. Any value in OBR-43 will overrule this value. Department will be created if not existing in El. The combination of OBR-4.3 and the default assigning
			authority is used in the lookup
4.4	>Alternate Identifier	0	The code of the scheduled procedure step definition
4.5	>Alternate text	0	The description of the scheduled procedure step definition
4.6	>Name of alternate coding system	0	Coding system providing the code. If empty use issuer of order filler number. If there is no issuer for order filler number, use the default assigning authority.
6	Requested Date/Time	0	Used as order creation date/time. When empty a fall back on ORC-15 and ORC-9 is done. If both empty the Date/Time of processing the message is taken
6.1	>Date/Time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z]
			If timezone information is present it overrules the timezone information if available in MSH-7
13	Relevant Clinical Info	0	
16	Ordering Provider	R	The ordering provider should be the same as ORC-12.
			If ORC-12 is filled in, this will not be processed.
16.1	>ID number (ID)	R	Physician Identifier
16.2	>Family name	0	
16.2.1	>>Surname	0	Physician lastname
16.3	>Given name	0	Physician firstname
16.9	>Assigning authority	0	
16.9.1	>>Namespace ID	0	Identifier of the Assigning Authority that issued the physician code.
			If empty, the default assigning authority will be taken.
18	Placer Field 1	R	Required for ORU. Accession number of the requested procedure.
		С	Conditional for ORM. Accession number of the requested procedure
			Condition Predicate: Field is required when the message has no StudyInstanceUid specified. (no ZDS segment)
19	Placer Field 2	R	Required for ORM. Requested procedure ID
		0	Optional for ORU. Requested procedure ID
20	Filler Field 1	R	Required for ORM. Scheduled Procedure Step ID
		0	Optional for ORU. Scheduled Procedure Step ID
22	Result Rpt/Status Change - Date/Time	0	ORU only.
			Report Modification Date or Addendum Modification Date
22.1	>Date/Time	R	The modification date of the report
24	Diagnostic Serv Sect Id	0	Modality Type (Used when Procedure Definition is created on the fly)
25	Result Status	0	ORU only. Report status
			Default values (property 'ORU controlled reporting workflow' is set to false)
			- P preliminary report
			- F signed report
			- C correction to results



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	HL7 Field Name	Option	Comments
			- D report deleted
			- X no results available, order cancelled
			ORU controlled reporting workflow (property 'ORU controlled reporting workflow' is set to true)
			- UP unapproved preliminary report
			- P approved preliminary report
			- F signed report
			- W wet read report
			- PA preliminary addendum
			- A final addendum
			- D report deleted
27	Quantity/Timing	R	Identical to the Quantity/Timing in ORC-7 Segment.
			If values provided in these fields differ, El will consider value provided in OBR- 27
27.4	>Start date/time	R	Used as the requested procedure scheduled study date/ time and the scheduled procedure step start date/ time. When the value is empty, the value of OBR-36 is taken as requested procedure study date/time and scheduled procedure step start date/time
27.4.1	>>Date/Time	0	YYYYMMDD[HHMM[SS]][+-ZZZ Z]
			If timezone information is present it overrules the timezone information if available in MSH-7
27.5	>End date/time	0	Used as scheduled procedure step end date/time
27.5.1	>>Date/Time	0	YYYYMMDD[HHMM[SS]][+-ZZZ Z]
			If timezone information is present it overrules the timezone information if available in MSH-7
27.6	>Priority	0	1) For existing sites (migration)
			- High Priority codes: A, T
			- Normal Priority codes: S, Unknown*
			- Low Priority Codes: C, P, R
			2) For new installations
			- STAT priority code: S
			- Urgent priority codes: A, T
			- High Priority code: C
			- Normal Priority codes: P, Unknown*
			- Routine Priority Code: R
			These values are configurable.
			* A value for which no mapping is applicable
28	Result Copies To	0	5
28.1	>ID number (ST)	0	code of the physician
28.2	>family name	0	
28.2.1	>>surname	0	family name of the physician
28.3	>given name	0	given name of the physician (optional)



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Seq	HL7 Field Name	Option	Comments
28.9	>assigning authority	0	
28.9.1	>>namespace ID	0	Identifier of the Assigning Authority that issued the physician code.
			If empty, the default assigning authority will be taken.
31	Reason For Study	0	
31.2	>Text	0	Text containing clinical information for the study.
32	Principal Result Interpreter	0	For ORU 1) Default behaviour (property 'ORU controlled reporting workflow' is set to false). Final report: Physician that validated the report - if first iteration of OBR-33 is empty, this physician will also handled as author of the report. Preliminary report: - physician will be handled as author of the report. 2) ORU controlled reporting workflow (property 'ORU controlled reporting workflow' is set to true) - The physician specified in this field, will always be the attending physician which will get assigned to the signoff task in case the report is preliminary If no entry is specified, the first physician in OBR-33 will get the task assigned.
			This field can be used to fill in the "reading physician". Some RIS want to indicate already to which radiologist the reading task should be assigned to. So when they send the ORM,EI stores the reading physician and when a reading task is created, it can be assigned to the already filled in "reading physician".
32.1	>Name	R	
32.1.1	>>ID number (ST)	R	Code identifying the physician
32.1.2	>>Family name	R	Last name of the Physician
32.1.3	>>Given name	R	Firstname of the physician
32.1.9	>>Assigning authority	0	Identifier of the Assigning Authority that issued the principle result interpreter code.
33	Assistant Result Interpreter	0	If empty, the default assigning authority will be taken. ORU only. 1) Default behaviour (property 'ORU controlled reporting workflow' is set to false) Final report: - the first iteration will be handled as the author of the report. - All the other iterations are reviewers. Preliminary report: - all the iterations are handled as reviewers. 2) ORU controlled reporting workflow (property 'ORU controlled reporting workflow' is set to true) - The physician specified in the first field, will always be the author of the report. If no entry is specified in OBR-32, the first physician in OBR-33 is assigned the created signoff task in case the report is preliminary.



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Seq	HL7 Field Name	Option	Comments
			- All the other iterations are reviewers.
33.1	>Name	R	
33.1.1	>>ID number (ST)	R	Code identifying the physician
33.1.2	>>Family name	R	Last name of the Physician
33.1.3	>>Given name	R	Firstname of the physician
33.1.9	>>Assigning authority	0	
34	Technician	0	
34.1	>Name	0	
34.1.1	>>ID number (ST)	R	Code of the technician
34.1.2	>> family name	0	Family name of the technician.
34.1.3	>>given name	0	First name of the technician
34.1.9	>>Assigning authority	0	Identifier of the Assigning Authority that issued the technician code.
			If empty, the default assigning authority will be taken.
34.5	>Room	0	Acquisition room
35	Transcriptionist	0	ORU only.
		_	Transcriptionist of the report
35.1	>name	R	
35.1.1	>>ID number (ST)	R	
35.1.2	>>Family name	R	
35.1.3	>>Given name	0	
36	Scheduled Date/Time	0	Used for requested procedure scheduled study date/time and scheduled procedure step date/time when OBR-27.4 is empty.
36.1	>Date/Time	0	YYYYMMDD[HHHMM[SS]][+-ZZZ Z]
			If timezone information is present it overrules the timezone information if available in MSH-7
43	Planned Patient Transport	0	This field can be used to provide performing department.
	Comment		When the performing department code provided in OBR-43.1 (with or without an issuer in OBR-43.3) is not found in the system, it will be created. When no name is present, the department code is used as the department name. Another way to provide the performing department is by means of OBR-4.3 (universal service identifier). If present the value will be used in combination with the default
			assigning authority in the lookup.
43.1	>Identifier	0	performing department code
43.2	>Text	0	performing department name
43.3	>Name of coding system	0	issuer of performing department code

2.2.9 OBX Segment

Table 2-19 OBX Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Set ID – OBX	0	Set to 1,2,3



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Seq	HL7 Field Name	Option	Comments
2	Value Type	R	Supported values For ADT: - TX (For Text Attachment type or Pregnancy information) - FT (For Text Attachment type) Supported values for ORM: - RP (For PDF/Image Attachment type) - TX (For Text Attachment type or Pregnancy information) - ED (For Attachment type PDF/Image - Base64 encoded encapsulated data) Supported values for ORU: In case of reports: - FT - RP (For reports send as PDF with reference pointer) - ED (For reports send as Base64 encoded data) In case of attachments: - TX (For Text attachment type) - RP (For PDF/Image attachment type) In case of pregnancy information: - TX
3	Observation identifier	R	
3.1	>Identifier	R	For ADT: Must correspond with an attachment code that is setup as a "Patient level" attachment as defined in the Administrator desktop. For Pregnancy: PREGNANT to indicate Pregnancy information



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Seq	HL7 Field Name	Option	Comments
			For ORM:
			1) OBX segment with attachment information:
			Value of this field must correspond with an attachment code as defined in the Administrator desktop. The following attachment codes are already delivered in dedicated HL7 fields and therefore should not be processed as attachments in OBX-segments:
			- REASONFORSTUDY (OBR(31))
			- PROCEDURECOMMENT (NTE(3))
			- CLINICALINFO (OBR(13) or NTE(3))
			Remark :
			If the attachment code is not setup as a 'Study level' or 'Order level' or 'Report level' attachment in the Administrator Desktop, the attachment will not be processed.
			The reception of multiple attachments with the same attachment code OBX(3.1) is supported:
			- PDF/Image type attachments:
			when multiple attachments with the same attachment code are present, a new document/image is added per attachment.
			- Single value Text attachment:
			when multiple attachments with the same attachment code are present, the text from all these attachments is concatenated. A newline character is used to separate the texts from the different attachments.
			- Message board Text attachment:
			when multiple attachments with the same attachment code are present, a separate text item is added to the message board per attachment.
			2)OBX segment with Patient Arrived information:
			Value of OBX-3 is PATIENT_ARRIVED. See following details:
			The combination (OBX-2 = TX, OBX-3 = PATIENT_ARRIVED, OBX-5 = YES) indicates the
			patient's arrived status is true; whereas the combination (OBX-2 = TX, OBX-3 =
			PATIENT_ARRIVED, OBX-5 = NO) indicates the patient's arrived status is false.
			3) OBX segment holding Pregnancy information
			- PREGNANT indicate pregnancy information



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Seq	HL7 Field Name	Option	Comments
			For ORU:
			In case of reports:
			- This field should contain &GDT for specifying general report.
			- It should contain &ADT for specifying addendum report.
			- When report type is FT (OBX-2) only 1 OBX segment with general report is allowed and multiple addendum OBX are allowed.
			- When report type is RP or ED (OBX-2) only 1 OBX segment is allowed. The OBX should specify a general report. When addendum is present, it is supposed to be included in the general report.
			In case of attachments:
			-Must correspond with an attachment code as defined in the administrator desktop.
			-The following attachment codes are already delivered in dedicated HL7 fields and therefore should not be processed as attachments in OBX-segments:
			- REASONFORSTUDY (OBR(31))
			- PROCEDURECOMMENT (NTE(3))
			- CLINICALINFO (OBR(13) or NTE(3))
			Remark:
			If the attachment code is not setup as a 'Study level', 'Order level' or 'Report level' attachment in the
			Administrator Desktop, the attachment will not be processed. The reception of multiple attachments
			with the same attachment code OBX-3.1) is supported:
			- PDF/Image type attachments: when multiple attachments with the same attachment code are present, a new document/image is added per attachment.
			- Single value Text attachment: when multiple attachments with the same attachment code are present, the text from all these attachments is concatenated. A newline character is used to separate the texts from the different attachments.
			- Message board Text attachment: when multiple attachments with the same attachment code are present, a separate text item is added to the message board per attachment.
			For Pregnancy : PREGNANT to indicate Pregnancy information
3.2	>Text	0	Description of the observation



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Seq	HL7 Field Name	Option	Comments
3.4	>Alternate identifier	0	For ORU only: Used in case of attachments: Should contain the accession number where the attachment belongs to
			(in case of study level attachment) or empty (In case of order/report level attachment).
			When no accession number is passed in this component, the requested procedure/study level attachments are to be added to all requested procedures this report is linked to.
			Example: An ORU message is sent containing two requested procedures belonging to the same service request and it contains two OBX-segments with attachments: - one attachment with code STDAT20 is a 'Study-level'
			attachment for requested procedure with accession number ACC123.
			- the other attachment with code SCANNEDREQUEST is an 'Order-level' attachment which applies to both requested procedures.
			OBX 1 RP STDAT20^^^ACC123 \ \attachmentserver\foldername \attachmentfilename1.pdf OBX 2 RP SCANNEDREQUEST \ \attachmentserver\foldername \attachmentfilename2.pdf
			Attachment with code STDAT20 is linked to requested procedure with accession number ACC123 and attachment with code SCANNEDREQUEST is linked to the service request.
4	Observation Sub-ID	0	sub identifier for this observation
5	Observation Value	R	For ADT: - Plain text (in case of Text attachment type) - YES/NO/UNKNOWN (in case of Pregnancy information)
			For ORM:
			If OBX-2 = RP
			- OBX-5 = path + file name for PDF/Image type attachment with Reference pointer
			If OBX-2 = TX + OBX-3 = PATIENT_ARRIVED - OBX-5 = YES/NO
			If OBX-2 = TX + OBX-3 = PREGNANT - OBX-5 = YES/NO/UNKNOWN
			If OBX-2 = ED
			- OBX-5.1 = AGILITY - OBX-5.2 = TEXT (in case of PDF) / IM (in case of Image)
			- OBX-5.3 = PDF (in case of PDF) / JPEG, TIFF, GIF, PNG, BMP, JPG, TIF (in case of image: the
			type of the image) - OBX-5.4 = Base64
			- OBX-5.5 = The encoded attachment as one PDF in Base64 encoding



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Seq	HL7 Field Name	Option	Comments
Joy		Option	For ORU: In case of reports: - plain text(OBX-2=FT) - path + file name (in case of report send as PDF with reference pointer OBX-2=RP) - ^TEXT^PDF^BASE64^base64-encoded string of binary PDF data (OBX-2=ED) In case of attachments: - plain text (in case of Text attachment type) - path + file name (in case of PDF/Image attachment type) - "" (delete all attachments with code present in OBX-3.1) If empty, this OBX segment will not be processed.
			In case of pregnancy information : - YES/NO/UNKNOWN
11	Observation Result Status	R	for ORU only: Only required when ORU controlled reporting workflow is set to False (disabled). If value is not present a fall back is done to OBR-25. supported values: - F (final results) - P (preliminary) - C (correction) - X (report body no longer found - overwrite) Report gets final status D (deleted)
14	Date/Time of the Observation	0	- The creation date of the report - YYYYMMDD (date/time of last menstrual period - in case of pregnancy information)
14.1	>Date/Time	R	YYYYMMDD[HHHMM[SS]][+-ZZZ Z] If timezone information is present it overrules the timezone information if available in MSH-7. If no date time is filled in, the report will be saved with the datetime of saving/updating.

2.2.10 ZDS Segment

Table 2-20 ZDS Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Study Instance UID	R	ORM and ORU only
1.1	Reference pointer	R	DICOM Study Instance UID (0020,000D)



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2.2.11 ZPI Segment

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Table 2-21 ZPI Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
3	Event Type	R	ADT only
3.1	>Event Type Text	R	C for create U for Update
5	Password	R	ADT only
5.1	>Password Text	R	Password to create or update user account

2.2.12 MFI Segment

Table 2-22 MFI Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Master File Identifier	R	
1.1	>Identifier	R	Only values PRA/STF supported
1.2	>Text	0	
3	File-Level Event Code	R	Only value UPD supported
6	Response Level Code	R	Only value NE supported

2.2.13 MFE Segment

Table 2-23 MFE Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Record-Level Event Code	R	
2	MFN Control ID	С	
3	Effective Date/Time	0	
3.1	>Date/Time	0	The date of the validate of the MFN Event
4	Primary Key Value - MFE	R	Same value as STF-1-1
5	Primary Key Value Type	R	Only value CE supported

2.2.14 STF Segment

Table 2-24 STF Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
1	Primary Key Value - STF	R	
1.1	>Identifier	R	The same value as MFE-4 / Primary doctor id like NPI ID
1.3	>Name of coding system	0	The Primary doctor id issuer (AA) like NPI AA
2	Staff ID Code	0	
2.1	>ID	0	The other doctor id
2.4	>Assigning Authority	0	
2.4.1	>>Namespace ID	0	The other doctor id issuer (AA)



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Seq	HL7 Field Name	Option	Comments
2.5	>Type Code	0	
2.5.1	>> Identifier Type code (ID)	0	The other doctor id type code (TC)
3	Staff name	0	
3.1	>Family name	0	
3.1.1	>>Surname	0	
3.2	>Given name		
3.3	>Second and further given names or initials thereof	0	Middle name
3.4	>Suffix (e.g., JR or III)	0	
3.5	>Prefix (e.g., DR)	0	
4	Staff Type	0	Used as professional-department relationship type. Default = EMPLOYEE
5	Administrative Sex	0	
7	Active/Inactive	R	Active / Inactive Flag
7.1	>value	0	0=Inactive,1=Active
			By default 0,No Physician User Creation (Onboarding Physician flow) will be trig
8	Department	0	Will be added as department relationship to the professional
8.1	>Identifier	0	Department id
8.3	>Name of coding system	0	The department id issuer (AA)
9	Hospital service	0	Will be used as the facility in the department-relationship
9.1	>Identifier	0	Facility id
9.2	>Text	0	Facility Name
9.3	>Name of coding system	0	
10	Phone	0	
10.1	>Telephone number	0	In case of telephone number/fax number/cellular number, the phone number is put in this field. [(999)] 999-9999 [X99999][C any text] Conditional: For Mobile numbers the phone number must be sent without country code prefix
10.2	>Telecommunication use code	R	If this is empty the communication cannot be registered. Supported are: - Primary Residence Number (PRN) - Work Number (WPN) - Network (email) Address (NET) Conditional: NET mandatory for email PRN mandatory for mobile
10.3	>Telecommunication equipment type (ID)	R	If this is empty the communication cannot be registered. Supported are: - Telephone (PH) - Fax (FX) - Cellular Phone(CP) - Internet Address (Internet) Conditional: CP mandatory to validate Mobile number Internet mandatory for Email Notifications



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Seq	HL7 Field Name	Option	Comments
10.4	>Email address	С	Conditional:In case of Network Email Address, this needs to be filled in
			Mandatory for Notifications, in case 15.1 is filled value on this field will be ignored
			Email address on first repetition will be used as the primary email communication channel/username
10.5	>Country Code	R	In case of telecommunication equipment type (ID) CP, this need to be filled in
			Mandatory to manage Mobile phone,if empty will be set the default value
			A string whose characters are limited to "+" and/or the decimal digits 0 through 9. As a string, leading zeros are always considered significant.
11	Office/Home Address	0	
11.1	>Street Address (SAD)	0	This component specifies the street or mailing address of a person or institution.
11.1.1	>>Street or mailing address	0	communication_channel.Street (if STF-11.1.2 is empty)
11.1.2	>>Street name	0	communication_channel.Street
11.1.3	>>Dwelling number	0	communication_channel.Streetnr
11.2	>other designation	0	communication_channel.Address_Line1
11.3	>City	0	municipality.name (if empty -> Unknown is used)
11.4	>State or province	0	communication_channel.Address_Line3
11.5	>Zip or postal code	0	municipality.zip (if empty -> code UKW is used - mapping to name = Unknown)
11.6	>Country	0	communication_channel.country (3 digit code - if empty: code UKW - mapping to name = Unknown)
11.7	>Address type	0	communciation_channel.communication_type (H - for home address / O - for office address / L maps
			to O / other codes map to H)
11.8	>other geographic designation	0	communication_channel.Address_Line2
11.9	>county/parish code	0	communication_channel.Address_Line4
12	Institution Activation Date	0	Begin date of the professional/department relationship
12.1	>Date	0	
12.1.1	>>Date/Time	0	
13	Institution Inactivation date	0	End date of the professional/department relationship
13.1	>Date	0	
13.1.1	>>Date/Time	0	
15	Email Address	R	If Filled the system will ignore data on 10.4 and it will use this value as Primary email



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PRA Segment 2.2.15

Table 2-25 PRA Fields Support in Xero Portal

Seq	HL7 Field Name	Option	Comments
3	Practitioner Category	0	Corresponds with professional's position in El.
			Possible values:
			- RAD / PHYSICIAN
			- PHYS / PHYSICIAN
			- TECH / TECHNOLOGIST
			- TRANS / TRANSCRIPTIONIST
			- SYSADM / SYSTEM ADMINISTRATOR
			- MAN / MANAGER
			- AGFA / AGFA SERVICE
			- REC / RECEPTIONIST
			If another value is present in this field this will not be added as a position of the professional
7	Privileges	0	
7.1	>Privilege	0	
7.1.1	>>Identifier	R	Supported value(s):
			- INT,Y,INTERNAL
			- EXT,N,EXTERNAL
			Use to set if Physician is Internal or External (Referring)
			By Default set to N in case no value is sent
9	Institution	0	Will be used if STF-9 is empty
9.1	>Identifier	0	
9.2	>Text	0	
9.3	>Name of coding system	0	

