Screenings and Assessments File Specification

Field Names	Field Descriptions	Example Output
practice_id	Practice ID	1111
create_timestamp	Date and time the item was created	2021-04-16 00:00:00
modify_timestamp	Last modified date and time	
	UUID of HealthMaintenance entry. Unique ID for Risk Assessments and Medication Reconiliations, but these are not UUIDs. Other types of Assessments where we are	
	pulling a component include the UUID of the Document	
	for which the Assessment came from with a prefix added	SmCes4f7026c3-35a5-4327-
assessment_id	to it (noted in the manual).	9514-e3cf21dcc91f
		MRN.1111.1df9ea01-5c42-4414-
patient_mrn	Patient MRN	8e2f-556fcd4c07c6
MEDENT_id	Patient's MEDENT account number	51
encounter_id	e-Superbill# If same date/dr/location as screening entry	1297
oncounter_id	Type of preventative documentation - types and items	1277
assessment_type	included listed below	Tobacco Use
	Further description of the preventative type. Component name, Risk Assessment Type or blank for items pulling	PCDM-SMOKING COUNSELING
assessment_name	from the Hx	YES
	If the component is a selection or a checkbox total, the results can be displayed here. If item is from the Hx, this field is the screening or exam completed.	
assessment_result	For Risk Assessments, this is the "Risk Score:Risk Tier"	Cessation Counseling
acceptant data	Date of the document in the route box or the date of the	4/1//2021
assessment_date	Hx item selected SNOMED code as listed below OR SNOMED code from Hx	4/16/2021
snomed_ct_code	entry	711028002
LOINC_code	LOINC code as noted below	711020002
LOHVO_code	Lonvo code as noted below	
comments	Comments within Hx entries, Date and document name for anything that is pulled from a Document	
custodian_name	This is only used for Advance Directives. It represents the custodian name of the document.	
custodian_address	This is only used for Advance Directives. It represents the custodian address of the document.	
custodian_phone	This is only used for Advance Directives. It represents the custodian phone of the document. Phone# should follow this format: H: 315-255-0900 W: 315-255-0900 C: 315-255-0900	

	This is only used for Advance Directives. It represents the	
custodian_relationship	custodian relationship of the document.	

Note: This feed sends data from multiple documentation areas and includes dated hx items from the patient's PFSH > Health Maintenance. Additional data points beyond the Health Maintenance are listed below with details on how they are included in the export.

Assessment Type	Document Code to Search within	Assessment Name	Code to Send	Assessment ID Prefix
Advance Directive	This does not pull from a document, but instead should be captured from the Patient Info Screen.		SNOMED code based on which Advance Directive type is selected.	
Alcohol Counseling	NOTE*	PC-ALCOHOL COUNSELING YES	413473000 Counseling about alcohol consumption (procedure)	Aco
Alcohol Screening	PCS-AUDIT, MP-AUDIT	PCS-AUDIT TOTAL SCORE	75624-7 Total Score [AUDIT]	Aud
Alcohol Screening	PCS-AUDITC, MP- AUDITC	PCS-AUDIT TOTAL SCORE	75626-2 Total Score [AUDIT-C]	AudC
Alcohol Screening	PCS-SBIRT	PCS-SBIRT QUEST 6- 8 TOTAL AND PCS-SBIRT AUDIT	75624-7 Total Score [AUDIT]	Sbirt
Alcohol Screening	NOTE*	PC-ALCOHOL USE DRINKS IN A DAY	68517-2 How many times in the past year have you have X or more drinks in a day	SQ
Alcohol Screening	PCS-CAGE, MP-CAGE, PCS-CAGEAD, MP- CAGEAD	PCS-CAGE QUESTIONNAIRE TOTAL; CAGEAD TOTAL	273347006 Cage questionnaire (assessment scale)	Cage
Anticipatory Guidance	NOTE*, OBGNU- NURS, UROLNU-NOT, NOB, NOF, NFP, NFF, NU1, & NU2	INFANT-GUIDANCE NUTRITION/FEEDIN G > Discussed Healthy eating	370847001	
Anticipatory Guidance	NOTE*, OBGNU- NURS, UROLNU-NOT, NOB, NOF, NFP, NFF, NU1, & NU2	INFANT-GUIDANCE HEALTH > Discussed Exercise	304507003	
Anticipatory Guidance	NOTE*, OBGNU- NURS, UROLNU-NOT, NOB, NOF, NFP, NFF, NU1, & NU2	ADOLESCENT GUIDANCE > Any selection	> Selection(s) "adequate calcium", "healthy eating", or "folic acid" send "370847001" > Selection(s) "limiting TV" or "exercise" send "304507003"	
Anxiety Screening	PCS-GAD7, MP-GAD7	PCS-GAD7 TOTAL SCORE	445455005 Generalized anxiety disorder 7 item score (observable entity)	GAD7
Asthma Control Test	PCS-ACTC, PCS-ACT	ASTHMA TEST CHILD TOTAL	82674-3 Asthma Control Test [ACT]	ACT

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		SCORE; ASTHMA		
		CONTROL TEST		
		TOTAL		
Cessation	NOTE*	PCDM-SMOKING	711028002 Counseling about	SmCes
Counseling		COUNSELING YES	tobacco use (procedure)	
CRAFFT	PCS-CRAFFS; PCS-	CRAFFT TOTAL	71942-7 Car, Relax, Alone, Forget,	Craf
	CRAFFT	SCORE	Friends, Trouble Screening Test	
CRAFFT	PCS-CFNINT	PCS-CFNINT TOTAL	71942-7 Car, Relax, Alone, Forget,	Craf
			Friends, Trouble Screening Test	
CRAFFT	PCS-CFNQUE	CRAFFT+N TOTAL	71942-7 Car, Relax, Alone, Forget,	Craf
			Friends, Trouble Screening Test	
Cup/Disc Ratio	NOTE*	OPT-DISC	247225001 Cup/Disc ratio	CDR
'		SIZE/RATIO	'	
Depression	PEDSS-17Y; MP-17Y	PSC17 YOUTH		PCS17
Screening	,	GRAND TOTAL		
Depression	PEDSS-17P; PEDSS-	PSC17 PARENT		PCS17
Screening	17PS; MP-17P	GRAND TOTAL		
Diabetic Foot Exam	NOTE*	PE-MUSCULO FEET	401191002 Diabetic foot	These will
		INSP/PALP	examination	need to be
		PE-DIAB FOOT		broken out:
		EXAM INSP/PALP		PE-
		PE-DIAB FOOT		MUSCULO
		EXAM PINPRICK		FEET
		PE-DIAB FOOT		INSP/PALP >
		EXAM		DFInPa
		MONOFILAMENT		PE-DIAB
		LOCATION		FOOT EXAM
		PE-DIAB FOOT		INSP/PALP >
		EXAM PEDAL		DFInPa
		PULSES		PE-DIAB
		PE-DIAB FOOT		FOOT EXAM
		EXAM INSP/PALP		PINPRICK >
		PE-NEURO SENSE		DFPin
		LIGHT TOUCH		PE-DIAB
		GLOVE/STOCKING		FOOT EXAM
		DISTRIB		MONOFILA
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		LIGHT TOUCH		LOCATION >
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		GLOVE/STOCKING		PEDAL
		DISTRIB		PULSES >
		PE-NEURO SENSE		DFPed
		PINPRICK LOCATION		PE-NEURO
		PE-NEURO SENSE		SENSE
		TEMPERATURE		LIGHT
		LOCATION		TOUCH
		PE-NEURO SENSE		GLOVE/STO
		VIBRATION		CKING
		LOCATION		DISTRIB >
		PE-CARDIO PEDAL		DFLTG

	1	DILLOGO	T	DE MEURO
		PULSES		PE-NEURO SENSE LIGHT TOUCH LOCATION > DFLTL PE-NEURO SENSE PINPRICK GLOVE/STO CKING DISTRIB > DFPING PE-NEURO SENSE PINPRICK LOCATION > DFPINL PE-NEURO SENSE TEMPERATU RE LOCATION > DFTL PE-NEURO SENSE VIBRATION LOCATION > DFVIb PE-CARDIO PEDAL PULSES >
Dietary education	NOTE*	INFANT-GUIDANCE NUTRITION/FEEDIN	370847001 Dietary needs education	DFPed InfNut
Dietary education	NOTE*	G ADOLESCENT GUIDANCE > Selection(s) "adequate calcium", "healthy eating", or "folic acid"	370847001 Dietary needs education	AdNut
Dietary education	NOTE*	ADOLESCENT GUIDANCE > Selection "exercise"	304507003 Exercise education	AdEx
Dietary education	NOTE*	INFANT-GUIDANCE HEALTH	304507003 Exercise education	InfEx
Dilation eye eyes	NOTE*	OPT-DILATION OPT-FUNDUS DILATION	424986007 Instillation of dilating eye drops to eye (procedure)	Dila
Drug Abuse Screening	PCS-DAST, MP- DAST10, PCS-DAST10, MP-DAST20, PCS-	DAST- QUESTIONNAIRE; PCS-DAST10 SCORE;	273426006 Drug abuse screening test (assessment scale)	Dast

		EYES PCS-RFFAUI UNABLE TO STAND PCS-RFFAUI VISUAL ACUITY PCS-RFFAUI VITAMIN D LEVEL CHECK PCS-RFFAUI WAS INJURED		
Fall Risk Assessment Note: Only one Fall Risk Assessment per document identified will be captured.	PCS-MORSE	PC-MORSE HX FALLING NO 0 PC-MORSE HX FALLING YES 25 PC-MORSE HX FALLING	73830-2	FR
Fall Risk Assessment Note: Only one Fall Risk Assessment per document identified will be captured.	PCS-MAHC10	MAHC10- COGNITIVE IMPAIRMENT MAHC10- ENVIRONMENTAL HAZARDS MAHC10-IMPAIRED FUNCTIONAL MOBILITY MAHC10-PAIN MAHC10-POLY PHARMACY MAHC10-PRIOR HISTORY FALLS IMPAIRMENT	73830-2	FR

Fall Risk Assessment	CCMHW-FRS	PCS-RFFAUI CANE	73830-2	FR
Note: Only one Fall		PCS-RFFAUI FELL	-	
Risk Assessment per		TWO OR MORE		
document identified		TIMES		
will be captured.		PCS-RFFAUI FOUND		
'		IT HARD TO CLIMB		
		PCS-RFFAUI HOLD		
		FURNITURE		
		PCS-RFFAUI LOST		
		FEELING IN FEET		
		PCS-RFFAUI MEDS		
		SLEEP		
		PCS-RFFAUI RUSH		
		TOILET		
		PCS-RFFAUI		
		TROUBLE CURB		
		PCS-RFFAUI		
		TROUBLE GETTING		
		UP		
		PCS-RFFAUI		
		WORRIED		
Fall Risk Assessment	COI-MA or COI-	PCS-FALLRISK	73830-2	FR
Note: Only one Fall	OTINEV	NUMBER OF FALLS		
Risk Assessment per		PCS-FALLRISK 1 FALL		
document identified		WITH INJURY		
will be captured.		PCS-FALLRISK 1 FALL		
		WITHOUT INJURY		

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Fall Risk Assessment	NOTE*	PCS-FALLRISK 1 FALL	73830-2	FR
Note: Only one Fall		W/O INJURY		
Risk Assessment per		PCS-FALLRISK 1 FALL		
document identified		WITH INJURY		
will be captured.		PCS-FALLRISK 1 FALL		
·		WITHOUT INJURY		
		PCS-FALLRISK		
		ASSESSMENT		
		PCS-FALLRISK CARE		
		PLAN PROVIDED		
		PCS-FALLRISK FALLS		
		ASSESSMENT		
		PCS-FALLRISK FELL 2		
		TIMES		
		PCS-FALLRISK		
		NUMBER OF FALLS		
		PCS-RFFAUI FALLEN		
		IN PAST YEAR NO		
		PCS-RFFAUI FALLEN		
		IN PAST YEAR YES		
		PCS-RFFAUI		
		UNSTEADY		
		WALKING NO		
		PCS-RFFAUI		
		UNSTEADY		
		WALKING YES		
		PCS-RFFAUI		
		WORRIED NO		
		PCS-RFFAUI		
		WORRIED YES		
		PT-FALLS PLAN OF		
		CARE		
		PT-FALLS RISK		
		ASSESSMENT		
		PT-MECHANISM OF		
		INJURY OF FALLS		
		PT-NUMBER OF		
		FALLS		
		PT-PLAN GENERAL		
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		PT-PLAN		
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		PT-TREATMENT		
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		OD At 1		
		OR At least one of		
		the following		
		checkboxes must be		
		checked (either Yes		

or No): Fall Risk Template Button Yes/No: PCS-RFFAUI **ANNUAL** DOCUMENTATION PCS-RFFAUL **ASSESSMENT** COGNITION PCS-RFFAUI BONE **DENSITY** PCS-RFFAUI **CALCIUM** PCS-RFFAUI CANCER **TREATMENT** PCS-RFFAUI FALL **HISTORY** PCS-RFFAUI GAIT AND BALANCE PCS-RFFAUI HOME **EVALUATION** PCS-RFFAUI MED REGIMEN PCS-RFFAUI MED **RELATED RISKS** PCS-RFFAUI **ORTHOSTATIC** PCS-RFFAUI VISUAL **ACUITY** MAHC10 Fall Risk Assessment Button: At least one of the following checkbox or selection components must be answered: MAHC10 Template Button: PCS-MAHC10 AFRAID OF FALLING NO PCS-MAHC10 AFRAID OF FALLING YES PCS-MAHC10 FALLS **AMOUNT** PCS-MAHC10 RISK FOR FALLING PCS-RFFAUI FALL HISTORY NO PCS-RFFAUI FALL HISTORY YES

		PCS-RFFAUI GAIT AND BALANCE NO PCS-RFFAUI GAIT AND BALANCE YES PCS-RFFAUI WAS INJURED		
Health Maintenance	N/A	Description of selection	SNOMED code attached to entry	N/A
Macular Exam	NOTE*	OPT-EYE MACULA	32451-7	ME
Medication Reconciliation & Medicaion Review	N/A - Med Summary		430193006 Medication Reconciliation	N/A
Nerve Fiber Layer	NOTE*	OPT-NERVE FIBER LAYER	280671003 Entire nerve fiber layer of retina (body structure)	NervFL
Optic Nerve	NOTE*	OPT-CUP/DISC APPEARANCE	18234004 Optic nerve structure (body structure)	ONS
PHQ2	NOTE*,PCS-PHQ2,MP- PHQ2	PHQ2 TOTAL SCORE; PCS-PHQ2 TOTAL	58120-7	PHQ2
PHQ9	NOTE*,PCS-PHQ9,MP- PHQ9,PCS-PHQ9SP	PHQ9 TOTAL	44261-6	PHQ9
PHQ9 for Teens	MP-PHQ9M,PCS- PHQ9MT,PCS-PHQ9TS	PHQ9MT TOTAL	89204-2	PHQ9
Risk Assessment	N/A - Risk Assessment Chart Area		225338004 Risk assessment	N/A
Smoking Queried	NOTE*	PC-SMOKING BEHAVIOR QUERIED YES	39240-7 Tobacco use status CPHS	SmQ

Screening	ubstance Use	PCS-CFNQUE, PCS-	CRAFFT+N TOTAL;	71942-7 Car, Relax, Alone,	Craf
SCORE				l .	
Triages		PCS-CFINTV	CRAFFT TOTAL		
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