

## **Attachment 9**

**NEDSS Data Elements 11-4-05**

**Required Fields.xls**

**Case Notification  
Generic Data Elements**

**Attachment 9**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
DEM197	NEDSS 1.1.3	LocalID	The local ID of the patient/entity.	ID	1	1	
INV107	NEDSS 1.1.3	Case Jurisdiction Code	Identifier for the physical site from which the report is being submitted. This is a required field.	CE	1	1	Local coding scheme
INV108	NEDSS 1.1.3	Case Program Area Code	The organizational ownership of the investigation. Program areas(e.g. Immunization, STD) are defined at the state-level by the conditions for which they provide primary prevention and control. This is a required field.	CE	1	1	Local coding scheme
INV109	NEDSS 1.1.3	Case Investigation Status Code	The status of the investigation. For example, open or closed. This is a required field.	CE	1	1	PHVS_ActStatus_HL7_V3
INV165	NEDSS 1.1.3	MMWR Week	MMWR Week for which case information is to be counted for MMWR publication. This is a required field.	INT	1	1	
INV166	NEDSS 1.1.3	MMWR Year	MMWR Year (YYYY) for which case information is to be counted for MMWR publication. This is a required field.	DATE	1	1	
INV169	NEDSS 1.1.3	Condition Code	Code for disease or condition being reported e.g. for Measles notification, code will be code for Measles (10140). This is a required field.	CE	1	1	PHVS_PHC_TYPE
LAB101	NEDSS 1.1.3	Lab Test Identifier	The identifier for the lab test that was performed.	CE	1	1	PHVS_LAB_TEST
NOT109	NEDSS 1.1.3	NND Reporting State	State reporting the notification	CE	1	1	PHVS_State_FIPS_5-2
NOT110	NEDSS 1.1.3	Record Type	The type of record reported (e.g. Condition notification, summary notification, change/retraction of prior notification.)	CE	1	1	PHVS_NotificationType_CDC
VAC101	NEDSS 1.1.3	Vaccine Administered	The code for the vaccine that was administered	CE	1	1	PHVS_VAC_NM

**Case Notification  
Generic BMIRD**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Streptococcus Group A Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Haemophilus influenzae Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Neisseria Meningitidis Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Streptococcus Pneumoniae Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Animal Rabies Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Congenital Rubella Syndrome Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Measles Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Mumps Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Pertussis Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Rubella Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Tetanus Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Hepatitis Generic Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Hepatitis A Acute Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Hepatitis B Acute Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Hepatitis C Acute Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Hepatitis C Virus Infection Chronic or Resolved Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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**Case Notification  
Perinatal Hepatitis B Data Elements**

UID	AppVer	Label	Description	Fmt	Min	Max	VSName
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UID	AppVer	Label	Description
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Fmt	Min	Max	VSName
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UID	AppVer	Label	Description
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Fmt	Min	Max	VSName
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UID	AppVer	Label	Description
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Fmt	Min	Max	VSName
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