



Office of
Population Affairs

OFFICE OF POPULATION AFFAIRS FPAR 2.0 Data Elements

These are the final FPAR 2.0 data elements and associated lab panels. Additional tools are being developed. Please refer to the implementation guidance. Please direct questions to your project officer.

Version: 12/15/2021

- Update to #4 'Patient Identifier': Removed text indicating that implementation guidance is being developed to maximize interoperability. Implementation guidance is now posted to the OPA website on 10/8

<https://opa.hhs.gov/sites/default/files/2021-10/fpar-2.0-implementation-guide-oct-2021.pdf>

- Added #8: Added data element 'Gender Identity' to align with United States Core Data for Interoperability (USCDI) standard
- Added #9: Added data element 'Sexual Orientation' to align with United States Core Data for Interoperability (USCDI) standard
- Renumbered data elements based on addition of #8 and #9

- Update to #43 'Do you want to talk about contraception or pregnancy prevention during your visit today':

 - Removed 'Term Description' in Column C due to lack of alignment with newly available LOINC code 98076-3

 - Corrected 'Response Descriptions' in Column G to align with LOINC code 98076-3

 - Corrected 'Expected Codes/Values' in Column H to reflect correct LOINC code LL5991-6

 - Updated 'Notes' in Column J to include an explanation of the data element, as well as to remove text indicating that the data element is being developed

Version: 10/1/2021



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- Addition of 'READ ME' tab containing instructions for how to utilize the data contained within this Excel spreadsheet
- Removed data element 'Pap test performed in last 5 years'
- Changed column F from 'Answer List Name/Description' to 'Value Set/Answer List Name'
- Changed column G from 'Answer List/Result Values' to 'Response Descriptions'
- Changed column H from 'Answer List/Result Values Code (if available)' to 'Expected Codes/Values'
- Removed column 'Binding to Answer List/Result Values'. We anticipate grantees submitting codes for all data elements, e
- Added Column I: 'Value Set OID (If Applicable)' to include the OID (object identifier), where available, for select value sets
- Update to #41: Added newly available LOINC code to Column C (98076-3) and updated data element name in Column B to 'Prevention during your visit today'
- Added 'Answer Lists/Results Values' and 'Answer Lists/Results Values Codes' to the codes in the Pap Smear Tests Panel (8
- Removed line 2 in the 'FPAR 2.0 Data Elements' tab: 'Family Planning Annual Report PANEL.' This was removed as a result of 'Family Planning Annual Report PANEL (86636-8) will no longer be supported or updated.'
- Removed column C in the 'FPAR 2.0 Data Elements' tab: 'In FPAR Panel?' This was removed as a result of LOINC no longer supporting 'In FPAR Panel?' (86636-8) will no longer be supported or updated.
- Added new tab 'Syphilis Tests Panel' tab containing the LOINC codes and links to the 57 identified Syphilis tests for possible use-cases and therefore this collection of Syphilis tests (collections structured under a LOINC panel code) for a specific use-cases and therefore this collection of Syphilis tests
- Update to #9: Updated 'Ethnicity' to 'Ethnicity OMB.1997' to align with LOINC
- Update to #21: Updated 'How Birth Control Method was Provided' to 'How Contraception Method was Provided' to align with LOINC



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- Removed term descriptions from #24 'Systolic Blood Pressure', #25: 'Diastolic Blood Pressure', #26: 'Body Height', #27: 'Body Weight'
- Added hyperlinks to all test LOINC codes across the six panels (86662-4, 86658-2, 86659-0, 86660-8, 86661-6, 86657-4)
- Update to FPAR 2.0 Data Element (Long Common Name) in 'Pap Smear Tests Panel' (86662-4) to align with LOINC
- Added available answer list/result values and answer list/result codes to the 'PAP Smear Tests Panel' (86662-4)
- Update to use of 'Not Applicable' and '-' throughout. 'Not Applicable' is utilized in instances where it is not possible to have an answer list; some are open responses). A '-' is utilized in instances where that information could be made available (not all have one available in LOINC)

Version: 12/1/2021

- Update to #7: Revised data element 'Sex' (LOINC 46098-0) to 'Sex assigned at birth' (76689-9) to align with United States Core Data for Interoperability (USCDI) standard. Response options have been added: 'Unknown', 'Other', 'Asked, but Unknown', and 'Not Asked'
- Added #8: Added data element 'Gender Identity' to align with United States Core Data for Interoperability (USCDI) standard
- Added #9: Added data element 'Sexual Orientation' to align with United States Core Data for Interoperability (USCDI) standard
- Renumbered data elements based on addition of #8 and #9

12/15/2021

Introduction

The Family Planning Annual Report (FPAR) 2.0 Data Elements Excel table contains all data elements that have been identified and proposed as part of FPAR 2.0. OPA will consider best practices for family planning, feedback from grantees, and reporting burden when making future updates on each tab in the Data Elements Excel table, and instructions for using this document to facilitate FPAR 2.0 data collection and reporting.

Visit OPA's site at: Family Planning Annual Report | HHS Office of Population Affairs for additional information about FPAR 2.0 as needed.

<https://opa.hhs.gov/research-evaluation/title-x-services-research/family-planning-annual-report/fpar2>

Background

Data Elements

There are 43 data elements for the calendar year 2022 reporting period. The tabs in this file display the data elements, accompanied by LOINC and SNOMED codes where available. OPA is limited in its ability to make edits to this standard terminology as they are often used by many other systems (EHR) vendors and IT departments standard codes to support precise data identification and reporting.

Standard Terminologies

The two most commonly utilized standard terminologies to support reporting of the FPAR 2.0 data set are Logical Observation Identifiers Names and Codes (LOINC) and Systematic Nomenclature of Medicine Clinical Terms (SNOMED CT). LOINC and SNOMED work together to provide a common framework for identifying and exchanging FPAR 2.0 data.

- Logical Observation Identifiers Names and Codes (LOINC) - Consists of codes for observations made on patients and populations.
- Systematic Nomenclature of Medicine Clinical Terms (SNOMED CT) - Consists of concepts, terms, and relationships that enable effective data exchange.

In summary, LOINC codes ask the questions (what is it that you are observing?) and SNOMED CT codes provide the potential answer or classification for the data element set. For a quantitative data element, such as 'Systolic Blood Pressure', a numerical value is to be reported.

Description of Data Element Tabs

The information below explains content within each tab of the Data Element file

FPAR 2.0 Data Elements

FPAR 2.0 Data Element (Long Common Name) (Column B)

This column identifies and names each of the elements to be reported. The names directly correspond to the LOINC Long Common Name (LCN) for the following data elements, the data element name used in the FPAR 2.0 data element file are different from the LCN of the LOINC code to apply user friendly terms applicable to family planning encounters.

Data Element Number	LOINC Code - LCN	Data Element Name used in FPAR 2.0 Data Element File
13	87520-3 Coverage Type	Insurance Coverage Type
14	52556-8 Payment Sources	Payer for Visit
16	86645-9 Pregnancy intention in the next year – Reported	Pregnancy Intention
17	86649-1 Birth control method at intake – Reported – at intake	Contraceptive method at intake reported – at intake
18	86650-9 Reason for no birth control use – Reported – at intake	Reason for no contraceptive method use Reported – at intake
19	86651-7 Birth control method at exit Reported – at exit	Contraceptive method at exit reported – at exit
20	86653-3 LCN Reason for no birth control use - Reported -- at exit	Reason for no contraceptive method use reported –at exit
21	86652-5 LCN How birth control method was provided	How Contraceptive Method was Provided

More specific information about the term is available through its multi-part LOINC Fully-Specified Name (FSN), found on the webpage [https://www.loinc.org/](#). We use the LCN because it is more easily understood by a wider audience. Often, the FSN is harder to interpret but provides much more detail.

Data Element Code (If Available) (Column C)

Where available, the codes listed and linked to in this column correspond to the data elements named in Column B. Report these codes to avoid ambiguity when producing the annual reports.

Standard Terminology Code System (Column D)

This column lists the standard terminology system to which the listed data element and code are located. For more information, refer to the [LOINC Terminology System](#).

Term Description (Column E)

Where available, this column provides a description for each data element. This description has been pulled directly from the published LOINC code. For further information regarding the intended use of the code in data collection and reporting.

Value Set/Answer List Name (Column F)

This column contains the name of the value set or answer list that contains the possible coded result values/answers/response options. The Name/Description exactly as it is listed in LOINC. This is the human readable name that accompanies each answer list.

Response Descriptions (Column G)

This column lists descriptions for acceptable answers/result values contained within the selected answer list. As previously described, an answer list element may be quantitative and will have a numerical value reported. In this case, 'Not applicable' is listed. Additionally, answer lists may represent the possible answers/result values for more than one data element. For example, the example answer list for 'HIV tests' includes 'HIV tests' and 'HIV tests -> HIV tests' elements.

Expected Codes/Values (Column H)

Where available, entries in this column provide a link to codes for expected responses for each data element listed in column B.

Value Set OID (If applicable) (Column I)

An OID is utilized by ISO (International Organization for Standardization) and is a string of numbers that uniquely identifies the object. It is useful to reference the value set OID in the Value Set Authority Center to identify the response options and codes within the value set.

Panels for Laboratory Tests

Panels are also utilized to identify potential results of performed lab tests. These panels are listed on the main tab (FPAR 2.0 Data Element Panels) (e.g. HIV tests, Chlamydia tests, Gonorrhea tests, HIV tests, and Syphilis tests). There is also a panel for Chlamydia Trachomatis and Neisseria Gonorrethae (to identify the specific test ordered) and the 'Expected Codes/Values' (to identify the result) associated with each test.

A Note on 'Not Applicable' and '-' Throughout

'Not Applicable' is utilized in instances where it is not possible to have that information made available (i.e. Answer Lists: not all terms have an answer list; Term Descriptions: not all terms have a description). '-' is utilized where information could be made available but is not (i.e. Term Descriptions: all terms could have a description but not all have one available).

FHIR 7.0 Data								
Data Element #	Element (Long Common Name)	Data Element Code (if available)	Standard Terminology Code System	Term Description	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values	Value Set OID (if applicable)
1	Facility Identifier	25524-9	LOINC	A code that identifies a hospital or clinic. The facility ID may be a true identifier (e.g. Facility NPI) or a pseudo-identifier.	Not applicable	Not applicable	Not applicable	-
2	Attending physician NPI Provider	68468-8	LOINC	-	NPI / National Provider Identifier - NPI	Not applicable (However, answer list code provided because code is normative)	U512-5	-
3	Provider Role	86637-4	LOINC	The role of the clinical provider (e.g. doctor, registered nurse) that provided services at the encounter.	Provider role / Example list of provider role types	Doctor Registered Nurse Midwife Nurse Practitioner Physician Assistant Physical Therapist Physical Therapist Assistant Other Student Physical therapist Student Physical therapy assistant	U4575-8	2.16.840.1.113762.1.4.1166.24
4	Patient Identifier	76435-7	LOINC	The patient identifier is a unique alphanumeric string that identifies a specific patient and is assigned by a specific organization (the assigning authority) that should be reported using (LOINC: 76698-0). In HL7 v2 messages, the patient identifier is reported in PID-3.1 and the assigning authority in PID-3.4. Examples of patient identifiers are medical record number, driver's license number and Social Security number, and their corresponding assigning authorities are the appropriate healthcare facility, state motor vehicle administration and the Social Security Administration, respectively.	Not applicable	Not applicable	Not applicable	-
5	Visit Date	25427-4	LOINC	-	Not applicable	Not applicable	Not applicable	-
6	Birth Date	21112-8	LOINC	-	Not applicable	Not applicable	Not applicable	-
7	Sex	46028-0	LOINC	In LOINC, sex refers to the biological sex of an organism, which is most commonly determined based on anatomy and physiology or genetic (chromosomal) analysis. Our definition is based on the World Health Organization's definition of sex and gender: sex (male, female) refers to biological and physiological characteristics, and gender (masculine, feminine) refers to socially constructed roles, behaviors, activities, and attributes.	Gender_M/F / Male=1, Female=2	Male Female	U11-9	2.16.840.1.113883.1.11.1
8	Gender Identity	76621-5	LOINC	This term was created for the U.S. Department of Health and Human Services (HHS) 2015 Edition Health Information Technology (Health IT) Certification Criteria final rule. [https://www.federalregister.gov/articles/2015/10/16/2015-25597/2015-edition-health-information-technology-health-it-certification-criteria-2015-edition-base]	Not applicable	Male Female Female-to-Male (FTM)/Transgender Male/Trans Male Male-to-female (MTF)/Transgender Female/Trans Woman Other Identifies as neither exclusively male nor female Choose not to disclose Unknown	446151000124109 - SNOMEDCT 446141000124107 - SNOMEDCT 407377005 - SNOMEDCT 407376001 - SNOMEDCT OTH 446131000124102 - SNOMEDCT ASKU UNK	1.3.6.1.4.1.12009.10.1.2156 2.16.840.1.114222.4.11.875
9	Sexual Orientation	76690-7	LOINC	This term was created for the U.S. Department of Health and Human Services (HHS) 2015 Edition Health Information Technology (Health IT) Certification Criteria final rule. [https://www.federalregister.gov/articles/2015/10/16/2015-25597/2015-edition-health-information-technology-health-it-certification-criteria-2015-edition-base]	Sexual orientation	Bisexual Lesbian, gay, or homosexual Straight or heterosexual Other, Something else Unknown Asked, but unknown	42035005 - SNOMEDCT 38628009 - SNOMEDCT 20430005 - SNOMEDCT OTH UNK ASKU	2.16.840.1.113762.1.4.1021.03 2.16.840.1.114222.4.11.875
10	Limited English Proficiency	86640-0	LOINC	This concept indicates whether the patient has limited English proficiency and may require care delivery in a language other than the English.	Proficient in English/Not proficient in English / Proficient or not proficient in English	Proficient in English Not Proficient in English	U4682-2	2.16.840.1.113762.1.4.1166.31
11	Ethnicity OMB.1997	64990-1	LOINC	This term is used for reporting the ethnicity based on classifications provided by the Office of Management and Budget (OMB). Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity (Oct. 30, 1997).	Ethnicity OMB 1997 / Answer list for ethnicity based on OMB 1997 Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity	Hispanic or Latino Not Hispanic or Latino	U12361-5	2.16.840.1.114222.4.11.837
12	Race	22624-9	LOINC	Race as defined by the Office of Management and Budget (OMB).	Race or Unknown / OMB 1997 race categories plus Unknown	American Indian or Alaska Native Asian Black or African American Native Hawaiian or Other Pacific Islander White Unknown	U12858-0	2.16.840.1.113883.3.2074.1.1.3
13	Annual Household Income	63586-2	LOINC	Estimate of gross family income in the past year	-	-	-	-
14	Household size (#)	86632-2	LOINC	Number in household; family is a person or 2 or more persons living together as a household.	Not applicable	Not applicable	Not applicable	-
15	Insurance Coverage Type	87520-3	LOINC	A high level description of a patient's health coverage type, including various categories of insurance (public, private, etc.) and self-pay. To report the specific source(s) of payment for a health care product or service, use Payment sources (LOINC: 52556-8).	Coverage Type and Self-Pay Codes / A value set includes Coverage Type codes	mandatory health program mental health program safety net clinic program substance use program subsidized health program subsidized managed care program subsidized supplemental health program worker's compensation dental care policy disease specific policy drug policy health insurance plan policy long term care policy managed care policy point of service policy health maintenance organization policy preferred provider organization policy mental health policy substance use policy vision care policy disability insurance policy employees welfare benefit plan policy flexible benefit plan policy life insurance policy annuity policy term life insurance policy universal life insurance policy property and casualty insurance policy reinsurance policy	U4668-1	2.16.840.1.113762.1.4.1166.29
16	Payer for visit	52556-8	LOINC	-	Coverage Type and Self-Pay Codes / A value set includes Coverage Type codes	surplus line insurance policy None (no charge for current services) Medicare (traditional fee-for-service) Medicare (HMO/managed care) Medicaid (traditional fee-for-service) Medicaid (HMO/managed care) Workers' compensation Title programs (e.g. Title III, V, or XX) Other government (e.g., TRICARE, VA, etc.) Private insurance/Medigap Private HMO/managed care Self-pay Other (specify) Unknown	U1544-8	2.16.840.1.114222.4.11.3591

Data Element #	Notes	eCOM	Modified Contraceptive Care Measures
1	OPA intends to collect NPI 2, when possible. Further guidance to be developed	x	x
2	-	x	x
3	-	-	x
4	OPA will NOT collect identifiers such as social security number or driver's license number.	x	x
5	-	x	x
6	-	x	x
7	-	x	x
8	<p>responses:</p> <ul style="list-style-type: none"> - 'Identifies as a male'; 'Identifies as a female'; 'Female-to-male transsexual'; 'Male-to-female transsexual'; 'Identifies as non-conforming' <p>OID 2.16.840.1.114222.4.11.875- NULLFlavor (HL7 V3) includes the following responses:</p> <ul style="list-style-type: none"> - 'Other'; 'Asked, but Unknown' <p>NOTE: OID 1.3.6.1.4.1.12009.10.1.2156 corresponds to the answer list for LOINC 76691-5</p> <p>See also United States Core Data for Interoperability (USCDI) for additional information about response options for Patient Demographics: https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi OID 2.16.840.1.113762.1.4.1021.33 - Sexual Orientation, includes the following responses:</p>	-	-
9	<p>responses:</p> <ul style="list-style-type: none"> - 'Bisexual'; 'Heterosexual'; 'Homosexual'; 'Sexually attracted to neither male nor female sex' <p>OID 2.16.840.1.114222.4.11.875- NULLFlavor (HL7 V3) includes the following responses:</p> <ul style="list-style-type: none"> - 'Other'; 'Asked, but Unknown'; 'Unknown' <p>See also United States Core Data for Interoperability (USCDI) for additional information about response options for Patient Demographics: https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi</p>	-	-
10	-	-	-
11	-	x	x
12	-	x	x
13	A discrete value is expected. Do not report an income range.	-	x
14	-	-	x
15	-	-	x
16	-	-	x

FPAR 2.0 Data									
Data Element #	Element (Long/ Common Name)	Data Element Code (if Available)	Standard Terminology Code System	Term Description	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values	Value Set OID (if applicable)	
17	Pregnancy Status	82810-3	LOINC	This term should be used to indicate that the patient is currently pregnant, not pregnant, or that the pregnancy status is unknown at this time. Depending on the context in which this term is used, there may be a need to capture more granular information. For example, further information such as whether the pregnancy is planned or unplanned and whether the status is patient reported or not confirmed may be necessary.	Pregnant/Not pregnant/Unknown / Answers: 3; Scale: Nom; Code: -; Score: -	Pregnant Not Pregnant Unknown	U4129-4	2.16.840.1.113762.1.4.1166.1	
18	Pregnancy Intention	86645-9	LOINC	Prevent a future pregnancy. This includes male patients seeking pregnancy with a female partner. Pregnancy intention may be used to help improve preconception health screenings and decisions, such as determining an appropriate contraceptive method, taking folic acid, or avoiding toxic exposures such as alcohol, tobacco and certain medications.	Yes/DK either way/No/Unsure / Answers: 4; Scale: Nom; Code: -; Score: -	Yes, I want to become pregnant I'm OK either way No, I don't want to become pregnant Unsure	U4053-4		
19	Contraceptive method at intake reported - at intake	86649-1	LOINC	At intake of patient encounter, their reported contraceptive method(s) used in the last sexual encounter.	Birth control methods / List of contraceptive methods	Implantable rod IUD with Progestin IUD copper IUD unspecified Female sterilization Vasectomy Injectables Combined oral contraceptive pills Progestin only contraceptive pills Contraceptive patch Vaginal ring Male condom Diaphragm or cervical cap Female condom Withdrawal Spermicide Sponge Fertility awareness-based methods Lactational amenorrhea method Male relying on female method Emergency contraception Decline to answer None	U4578-2	2.16.840.1.113762.1.4.1166.17	
20	Reason for no contraceptive method use Reported - at intake	86650-9	LOINC	At intake of patient encounter, the reason the patient reported no contraceptive method used.	Reason for no birth control / Example list of reasons for why birth control (contraceptive methods) is not used	Abstinence Same sex partner Other Sterile for non-contraceptive reasons Seeking pregnancy	U4579-0	2.16.840.1.113762.1.4.1166.18	
21	Contraceptive method at exit reported - at exit	86651-7	LOINC	The contraceptive method(s) provided to or in use by the patient at the end of their visit after counseling and assessment by provider.	Birth control methods / List of contraceptive methods	Implantable rod IUD with Progestin IUD copper IUD unspecified Female sterilization Vasectomy Injectables Combined oral contraceptive pills Progestin only contraceptive pills Contraceptive patch Vaginal ring Male condom Diaphragm or cervical cap Female condom Withdrawal Spermicide Sponge Fertility awareness-based methods Lactational amenorrhea method Male relying on female method Emergency contraception Decline to answer None	U4578-2	2.16.840.1.113762.1.4.1166.17	
22	Reason for no contraceptive method use reported - at exit	86653-3	LOINC	The reported reason at the end of the patient's visit for not using a contraceptive method(s).	Reason for no birth control / Example list of reasons for why birth control (contraceptive methods) is not used	Abstinence Same sex partner Other Sterile for non-contraceptive reasons Seeking pregnancy	U4579-0	2.16.840.1.113762.1.4.1166.18	
23	How contraceptive method was provided	86652-5	LOINC	The method for how the birth control was provided (e.g. on site, referral, prescription) to the patient at end of an encounter.	Method for providing birth control / Example for how birth control method was provided to the patient	Provided on site Referral Prescription	U4580-8	2.16.840.1.113762.1.4.1166.21	
24	Contraceptive counseling was provided	86654-1	LOINC	Contraceptive counseling is an interaction in which provider spends time (5-10 minutes) during an encounter discussing the patient's choice of contraceptive method and available options.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8		
25	Provider to achieve pregnancy was	86655-8	LOINC	Contraceptive counseling is an interaction in which provider spends time during an encounter discussing any services and/or provides counseling related to achieving pregnancy or addressing infertility.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8		
26	Pressure blood	8480-6	LOINC	-	Not applicable	Not applicable	Not applicable	-	
27	Pressure blood	8462-4	LOINC	-	Not applicable	Not applicable	Not applicable	-	
28	Body Weight	8302-2	LOINC	-	Not applicable	Not applicable	Not applicable	-	
29	Body Weight	29363-7	LOINC	-	Not applicable	Not applicable	Not applicable	-	
30	Tobacco Smoking Status	72166-2	LOINC	Tobacco smoking status represents a person's smoking behavior. Smoking statuses can be classified as current every day smoker, current some day smoker, former smoker, never smoker, smoker - current status unknown, unknown if ever smoked, current heavy tobacco smoker, and current light tobacco smoker. These statuses represent CDC's preferred (sometimes required) responses for recording smoking status.	Smoking Status - HL7 Value Set / Value Set based on HL7 Vocab TC and Structured Doc consensus (per CDC submission 7/12/2012 for smoking status term)	Current every day smoker Current some day smoker Former smoker Never smoker Smoker, current status unknown Unknown if ever smoked Heavy tobacco smoker Light tobacco smoker	U2201-3	2.16.840.1.113883.11.20.9.38	
31	Pap test performed at this visit	-	-	A pap test was performed during the visit.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8	-	
32	Pap smear tests - FPAR 2.0 set (PANEL)	86662-4	LOINC	Set of lab terms that may be used to gather Pap smear test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).	See corresponding tab	-	-	2.16.840.1.113762.1.4.1166.10	
33	HPV test performed at this visit	-	-	An HPV test was performed during the visit.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8	-	
34	HPV tests - FPAR 2.0 set (PANEL)	86658-2	LOINC	Set of lab terms that may be used to gather HPV test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).	See corresponding tab	-	-	2.16.840.1.113762.1.4.1166.12	
35	Chlamydia sp test performed at this visit	-	-	A Chlamydia test was performed during the visit.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8	-	
36	Chlamydia sp tests - FPAR 2.0 set (PANEL)	86659-0	LOINC	Set of lab terms that may be used to gather Chlamydia trachomatis test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).	See corresponding tab	-	-	2.16.840.1.113762.1.4.1166.13	
37	Neisseria gonorrhoeae test performed at this visit	-	-	A Neisseria gonorrhoeae test was performed during the visit.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8	-	
38	Neisseria gonorrhoeae tests - FPAR 2.0 set (PANEL)	86660-8	LOINC	Set of lab terms that may be used to gather Neisseria gonorrhoeae test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).	See corresponding tab	-	-	2.16.840.1.113762.1.4.1166.14	
39	HIV test performed at this visit	-	-	An HIV test was performed during the visit.	HL7-0136 Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8	-	
40	HIV 1 and 2 tests - FPAR 2.0 set (PANEL)	86657-4	LOINC	Set of lab terms that may be used to gather HIV 1 & 2 test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).	See corresponding tab	-	-	2.16.840.1.113762.1.4.1166.11	

Data Element #	Notes	eCOM	Modified Contraceptive Care Measures
17	-	x	x
18	-	-	x
19	Used for electronic clinical quality measure and modified contraceptive care measure calculations. More guidance to follow.	x	x
20	Used for modified contraceptive care measure calculations. More guidance to follow.	-	x
21	Similar to Table 7 in FPAR 1.0, continue to be reported in FPAR 2.0. Also used for the modified contraceptive care measure calculations.	x	x
22	Similar to Table 7 in FPAR 1.0, continue to be reported in FPAR 2.0. Also used for the modified contraceptive care measure calculations.	-	x
23	Used for modified contraceptive care measure calculations. More guidance to follow.	-	x
24	Used for modified contraceptive care measure calculations. More guidance to follow.	-	x
25	Used for modified contraceptive care measure calculations. More guidance to follow.	-	x
26	-	-	-
27	-	-	-
28	-	-	-
29	-	-	-
30	-	-	-
31	-	-	-
32	This data element is a panel set - see TAB 86662-4	-	-
33	-	-	-
34	This data element is a panel set - see TAB 86658-2	-	-
35	-	-	-
36	This data element is a panel set - see TAB 86659-0 See TAB 86661-6 for panel of Chlamydia Trachomatis and Neisseria Gonorrhoeae combined tests	-	-
37	-	-	-
38	This data element is a panel set - see TAB 86660-8 See TAB 86661-6 for panel of Chlamydia Trachomatis and Neisseria Gonorrhoeae combined tests	-	-
39	-	-	-
40	This data element is a panel set - see TAB 86657-4	-	-

FPAR 7.0 Data								
Data Element #	Element (Long Common Name)	Data Element Code (if Available)	Standard Terminology Code System	Term Description	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values	Value Set OID (if applicable)
41	Syphilis test performed at this visit			A Syphilis test was performed during the visit.	[HL7-0136] Yes/No / Answers: 2; Scale: Ord; Code: Y-N; Score: -	Yes No	U365-8	
42	Syphilis Test Result					Yes No - I do not want to talk about contraception today because I am here for something else No - This question does not apply to me/I prefer not to answer No - I am already using contraception No - I am unsure or don't want to use contraception No - I am hoping to become pregnant in the near future		2.16.840.1.113762.1.4.1166-117
43	Do you want to talk about contraception or pregnancy prevention during your visit today	28076-3	LOINC				U3921-6	

Data Element #	Notes	eCOM	Modified Contraceptive Care Measures
41	-	-	-
42	This data element is a panel set - see TAB Syphilis Tests Panel	-	-
43	<p>OPTIONAL for reporting. Used for the electronic clinical quality measure (eCOM) calculation in development at UCSF under a grant from OPA (Self-identified need for contraception).</p> <p>A patient's self-reported desire to discuss contraception at their visit. Can be asked to a person of any gender and should be asked minimum once per year. Can be asked alongside a patient's intention or desire in the next year to become pregnant.</p>	x	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
-	Pap smear tests - FPAR 2.0 set (PANEL)	Y	86662-4
1	Microscopic observation [Identifier] in Cervix by Cyto stain	Y	10524-7

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
-	LOINC	Set of lab terms that may be used to gather Pap smear test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).
1	LOINC	Microscopy is a technique that uses microscopes to examine very small objects, not seen by the naked eye. There are three well-known branches of microscopy: optical, electron and scanning probe microscopy.

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
-	-	-
1	-	ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
-	-	<p>LOINC Panels are collections of LOINC terms that represent specific sets of information, such as a laboratory battery of tests, a group of findings from a procedure such as an EKG, and forms or assessments related to health that are completed by patients and/or providers.</p> <p>LOINC Panels contain a specific structure, and depending on the type of panel, can include attributes such as form coding instructions, skip logic, and nested panels.</p>
1	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
2	Microscopic observation [Identifier] in Cervix by Cyto stain.thin prep	Y	18500-9

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
2	LOINC	Thin prep is an automated method of preparing the smear; cells are first treated/lysed to diminish obstructions such as blood, then spread very thinly by the machine.

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
2		ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
2	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
3	Microscopic observation [Identifier] in Cervical or vaginal smear or scraping by Cyto stain	Y	19765-7
4	Microscopic observation [Identifier] in Cervical or vaginal smear or scraping by Cyto stain Narrative	Y	19766-5

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
3	LOINC	Microscopy is a technique that uses microscopes to examine very small objects, not seen by the naked eye. There are three well-known branches of microscopy: optical, electron and scanning probe microscopy.
4	LOINC	Microscopy is a technique that uses microscopes to examine very small objects, not seen by the naked eye. There are three well-known branches of microscopy: optical, electron and scanning probe microscopy.

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
3	-	ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion
4	-	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
3	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	-
4	-	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
5	Cytology study comment Cervical or vaginal smear or scraping Cyto stain	Y	19774-9
6	Cytology Cervical or vaginal smear or scraping study	Y	33717-0

Table 2.
Pap
Smear
Tests
Panel

Data Element #	Standard Terminology Code System	Term Description
5	LOINC	-
6	LOINC	Document that is generated in response to a request.

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
5	-	ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion
6	-	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
5	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	-
6	-	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
7	Cytology report of Cervical or vaginal smear or scraping Cyto stain.thin prep	Y	47527-7

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
7	LOINC	

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
7		ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
7	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
8	Cytology report of Cervical or vaginal smear or scraping Cyto stain	Y	47528-5

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
8	LOINC	

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
8		ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
8	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
9	General categories [Interpretation] of Cervical or vaginal smear or scraping by Cyto stain	Y	19762-4
10	Statement of adequacy [Interpretation] of Cervical or vaginal smear or scraping by Cyto stain	Y	19764-0

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
9	LOINC	-
10	LOINC	-

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions
9	-	ASCUS Atypical Squamous cells of undetermined significance, cannot exclude HGSIL ASCUS Atypical Squamous cells of undetermined significance Low Grade SIL High Grade SIL Squamous cell carcinoma Atypical glandular cells NOS Atypical glandular cells suspicious for cancer Adenocarcinoma in-situ negative for interepithelial lesion Speciman satisfactory for
10	-	evaluation Speciman Unsatisfactory for evaluation

**Table 2.
Pap
Smear
Tests
Panel**

Data Element #	Expected Codes/Values	Notes
9	373878001 - SNOMEDCT 103637006 - SNOMEDCT 112662005 - SNOMEDCT 22725004 - SNOMEDCT 28899001 - SNOMEDCT 441219009 - SNOMEDCT 373883009 - SNOMEDCT 51642000 - SNOMEDCT 373887005 - SNOMEDCT	
10	125152006 - SNOMEDCT 125154007 - SNOMEDCT	

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
-	HPV tests - FPAR 2.0 set (PANEL)	Y	86658-2
1	Human papilloma virus 16+18+31+33+35+39+45+51+52+56+58+59+66+68 DNA [Presence] in Cervix by Probe with signal amplification	Y	59420-0
2	Human papilloma virus 16+18+31+33+35+45+51+52+56 DNA [Presence] in Cervix by Probe	Y	21440-3
3	Human papilloma virus 16+18+31+33+35+39+45+51+52+56+58+59+68 DNA [Presence] in Cervix by Probe with signal amplification	Y	30167-1
4	Human papilloma virus 6+11+16+18+31+33+35+39+42+43+44+45+51+52+56+58+59+68 DNA [Presence] in Cervix by Probe with signal amplification	Y	38372-9

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Standard Terminology Code System	Term Description
-	LOINC	Set of lab terms that may be used to gather HPV test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).
1	LOINC	Common high-risk HPV genotypes associated with cervical neoplasia can be detected by genomic probes. This code is based on, but not limited in use to, the submitter's assay INFORM HPV III Family 16 Probe (B), which contains a cocktail of HPV genomic probes targeting DNA from 12 high-risk genotypes (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, and 66).
2	LOINC	HPV 6 11 42 43 & 44=Low Risk; HPV 16 18 31 33 35 45 51 52 & 56= Intermediate/High Risk
3	LOINC	-
4	LOINC	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
-	-	-	-
1	Human papilloma virus 16+18+31+33+35+39+45+51+52+56+58+59+66+68 DNA [Presence] in Cervix by Probe with signal amplification	Detected (qualifier value) Not detected (qualifier value)	LL744-4 260373001 - SNOMEDCT 260415000 - SNOMEDCT
2	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT
3	-	Positive (qualifier value) Negative (qualifier value)	10828004 - SNOMEDCT 260385009 - SNOMEDCT
4	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Notes
-	<p>represent specific sets of information, such as a laboratory battery of tests, a group of findings from a procedure such as an EKG, and forms or assessments related to health that are completed by patients and/or providers.</p> <p>LOINC Panels contain a specific structure, and depending on the type of panel, can include attributes such as form coding instructions, skip logic, and nested</p>
1	-
2	-
3	-
4	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
5	Human papilloma virus 16+18+31+33+35+39+45+51+52+56+58+59+68 DNA [Presence] in Unspecified specimen by NAA with probe detection	Y	49896-4
6	Human papilloma virus E6+E7 mRNA [Presence] in Cervix by NAA with probe detection	Y	69002-4
7	Human papilloma virus 16+18+31+33+35+39+45+51+52+56+58+66 DNA [Presence] in Tissue by Probe	Y	73959-9
8	Human papilloma virus identified in Cervix	Y	11083-3

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Standard Terminology Code System	Term Description
5	LOINC	-
6	LOINC	<p>This term was created for (but not limited to) Gen-Probe's Aptima HPV assay (Cat No. 302610) that detects the E6 and E7 polycistronic mRNA from 14 high-risk HPV genotypes (16,18,31,33,35,39,45,51,52,56,58,59,66,and 68) that can lead to cervical cancer. E6/E7 genes in high-risk HPV genotypes are known as oncogenes because of their continuous expression, which leads to disruption of cell-cycle check points and cell genome instability through alteration of cellular p53 and retinoblastoma protein functions. This test is similar to LOINC 69358-0, which measures cells containing E6+E7 mRNA via flow cytometry.</p>
7	LOINC	<p>Common high-risk HPV genotypes associated with cervical neoplasia can be detected by genomic probes. This code is based on, but not limited in use to, the submitter's assay INFORM HPV III Family 16 Probe (B), which contains a cocktail of HPV genomic probes targeting DNA from 12 high-risk genotypes (16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, and 66).</p>
8	LOINC	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
5	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT
6	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT
7	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT
8	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Notes
5	-
6	-
7	-
8	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
9	Human papilloma virus 16+18 Ag [Presence] in Genital specimen	Y	12223-4
10	Human papilloma virus 16+18 Ag [Presence] in Cervix	Y	14503-7
11	Human papilloma virus 16+18 Ag [Presence] in Vaginal fluid	Y	14504-5
12	Human papilloma virus 16+18 Ag [Presence] in Urethra	Y	14506-0

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Standard Terminology Code System	Term Description
9	LOINC	-
10	LOINC	-
11	LOINC	-
12	LOINC	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
9	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
10	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
11	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
12	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Notes
9	-
10	-
11	-
12	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
13	Human papilloma virus 16+18 Ag [Presence] in Specimen	Y	17400-3
14	Human papilloma virus DNA [Presence] in Cervix by Probe	Y	44550-2
15	Human papilloma virus rRNA [Presence] in Genital specimen by NAA with probe detection	Y	6514-4
16	Human papilloma virus rRNA [Presence] in Specimen by NAA with probe detection	Y	6516-9

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Standard Terminology Code System	Term Description
13	LOINC	-
14	LOINC	-
15	LOINC	-
16	LOINC	-

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
13	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
14	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
15	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
16	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 3.
HPV
Tests
Panel
(86658-**

Data Element #	Notes
13	-
14	-
15	-
16	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
-	Chlamydia sp tests - FPAR 2.0 set (PANEL)	Y	86659-0
1	Chlamydia trachomatis DNA [Units/volume] in Specimen by NAA with probe detection	Y	49096-1
2	Chlamydia trachomatis rRNA [Presence] in Unspecified specimen by NAA with probe detection	Y	43304-5
3	Chlamydia trachomatis DNA [Presence] in Urethra by NAA with probe detection	Y	21191-2
4	Chlamydia trachomatis rRNA [Presence] in Unspecified specimen by Probe	Y	4993-2

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Standard Terminology Code System	Term Description
-	LOINC	Set of lab terms that may be used to gather Chlamydia trachomatis test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).
1	LOINC	-
2	LOINC	-
3	LOINC	-
4	LOINC	3 subspecies cause LGV

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
-	-	-	-
1	-	Not applicable Quantitative lab	Not applicable
2	Chlamydia trachomatis rRNA [Presence] in Specimen by NAA with probe detection	Detected (qualifer value) Not Detected (qualifer value) Inconclusive (qualifer value) Equivocal (qualifer value)	LL956-4 260373001 - SNOMEDCT 260415000 - SNOMEDCT 419984006 - SNOMEDCT 42425007 - SNOMEDCT
3	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT
4	-	Positive (qualifier value) Negative (qualifier value)	10828004 - SNOMEDCT 260385009 - SNOMEDCT

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Notes
-	<p>LOINC Panels are collections of LOINC terms that represent specific sets of information, such as a laboratory battery of tests, a group of findings from a procedure such as an EKG, and forms or assessments related to health that are completed by patients and/or providers.</p> <p>LOINC Panels contain a specific structure, and depending on the type of panel, can include attributes such as form coding instructions, skip logic, and nested panels.</p>
1	-
2	-
3	-
4	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
5	Chlamydia trachomatis rRNA [Presence] in Genital specimen by Probe	Y	16600-9
6	Chlamydia trachomatis rRNA [Presence] in Urine by Probe	Y	16601-7
7	Chlamydia trachomatis DNA [Presence] in Cervical mucus by NAA with probe detection	Y	21189-6
8	Chlamydia trachomatis DNA [Presence] in Cervix by NAA with probe detection	Y	21190-4

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Standard Terminology Code System	Term Description
5	LOINC	-
6	LOINC	-
7	LOINC	-
8	LOINC	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
5		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
6		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
7		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
8		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 4.
Chlamydi
a Tests
Panel
(86659-

Data Element #	Notes
5	-
6	-
7	-
8	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
9	Chlamydia trachomatis rRNA [Presence] in Urethra by Probe	Y	21192-0
10	Chlamydia trachomatis DNA [Presence] in Unspecified specimen by NAA with probe detection	Y	21613-5
11	Chlamydia trachomatis rRNA [Presence] in Genital fluid by Probe	Y	23838-6
12	Chlamydia sp DNA [Presence] in Unspecified specimen by NAA with probe detection	Y	35729-3

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Standard Terminology Code System	Term Description
9	LOINC	-
10	LOINC	-
11	LOINC	-
12	LOINC	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
9		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
10		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
11		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
12		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 4.
Chlamydi
a Tests
Panel
(86659-

Data Element #	Notes
9	-
10	-
11	-
12	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
13	Chlamydia trachomatis rRNA [Presence] in Urine by NAA with probe detection	Y	42931-6
14	Chlamydia trachomatis DNA [Presence] in Unspecified specimen by Probe with signal amplification	Y	43404-3
15	Chlamydia trachomatis rRNA [Presence] in Cervix by Probe	Y	45078-3
16	Chlamydia trachomatis rRNA [Presence] in Vaginal fluid by Probe	Y	45080-9

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Standard Terminology Code System	Term Description
13	LOINC	-
14	LOINC	-
15	LOINC	-
16	LOINC	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
13		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
14		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
15		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
16		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 4.
Chlamydi
a Tests
Panel
(86659-

Data Element #	Notes
13	-
14	-
15	-
16	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
17	Chlamydia trachomatis DNA [Presence] in Vaginal fluid by NAA with probe detection	Y	45084-1
18	Chlamydia trachomatis L2 DNA [Presence] in Unspecified specimen by NAA with probe detection	Y	47211-8
19	Chlamydia trachomatis DNA [Identifier] in Unspecified specimen by NAA with probe detection	Y	47212-6
20	Chlamydia trachomatis rRNA [Presence] in Cervix by NAA with probe detection	Y	50387-0

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Standard Terminology Code System	Term Description
17	LOINC	-
18	LOINC	-
19	LOINC	-
20	LOINC	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
17		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
18		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
19		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
20		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 4.
Chlamydi
a Tests
Panel
(86659-

Data Element #	Notes
17	-
18	-
19	-
20	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
21	Chlamydia trachomatis rRNA [Presence] in Urethra by NAA with probe detection	Y	53925-4
22	Chlamydia trachomatis rRNA [Presence] in Vaginal fluid by NAA with probe detection	Y	53926-2
23	Chlamydia trachomatis DNA [Presence] in Genital specimen by NAA with probe detection	Y	6356-0
24	Chlamydia trachomatis DNA [Presence] in Urine by NAA with probe detection	Y	6357-8

**Table 4.
Chlamydi
a Tests
Panel
(86659-**

Data Element #	Standard Terminology Code System	Term Description
21	LOINC	-
22	LOINC	-
23	LOINC	3 subspecies cause LGV
24	LOINC	3 subspecies cause LGV

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
21		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
22		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
23		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
24		Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 4.
Chlamydi
a Tests
Panel
(86659-

Data Element #	Notes
21	-
22	-
23	-
24	-

**Table 4.
Chlamydia Tests
Panel
(86659-**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
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Table 5.
 Neis.
 Gonorrhoea
 Panel
 (86660-8)

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
-	Neisseria Gonorrhoeae Tests - FPAR 2.0 set	Y	86660-8

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Standard Terminology Code System	Term Description
-	LOINC	Set of lab terms that may be used to gather Neisseria gonorrhoeae test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
-	-	-

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	Expected Codes/Values	Notes
-	-	-

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
1	Neisseria gonorrhoeae rRNA [Presence] in Unspecified specimen by NAA with probe detection	Y	43305-2

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Standard Terminology Code System	Term Description
1	LOINC	<p>pairs with the adjacent sides flattened. Pili, filament-like appendages, extend from the cell surface and have a role in adherence. Gonorrhea is usually acquired by sexual contact. Men and women aged 15-29 have the highest incidence of gonorrhea. Number of sexual partners, sexual practices and preference, condom use and population mobility contribute to disease incidence. The most frequent sites are the cervix, urethra, rectum, pharynx and conjunctiva. The most common symptom in men is discharge that may be scanty and clear or cloudy to copious and purulent, and often dysuria. Asymptomatic men are an important reservoir for transmission. Endocervical infection is the most common form of infection in women. Ocular infections occur most commonly in newborns who are exposed in the birth canal and can lead to corneal scarring or perforation. Gonococcal bacteremia may lead to disseminated infection including pelvic inflammatory disease in as many as 15 percent of women, leading to an increased probability of infertility and ectopic pregnancy. While antibiotics have successfully treated gonorrhea for decades, <i>N. gonorrhoeae</i> has developed antimicrobial resistance to every drug used for treatment. The Centers for Disease Control and Prevention recommends combination therapy using two antimicrobials with different mechanisms of action (e.g., a cephalosporin plus azithromycin) to improve treatment efficacy and potentially slow the spread of resistance to cephalosporins.</p>

Table 5.
 Neis.
 Gonorrhea
 Panel
 (86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
1	Detected Not det Equiv Inconcl / Answers: 4; Scale: Ord; Code: -; Score: -	Detected (qualifer value) Not Detected (qualifer value) Inconclusive (qualifer value) Equivocal (qualifer value)

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Expected Codes/Values	Notes
1	LL956-4 260373001 - SNOMEDCT 260415000 - SNOMEDCT 419984006 - SNOMEDCT 42425007 - SNOMEDCT	-

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
2	Neisseria gonorrhoeae DNA [Presence] in Urethra by NAA with probe detection	Y	21415-5
3	Neisseria gonorrhoeae DNA [Presence] in Genital specimen by NAA with probe detection	Y	47387-6
4	Neisseria gonorrhoeae rRNA [Presence] in Cervix by NAA with probe detection	Y	50388-8
5	Neisseria gonorrhoeae DNA [Presence] in Cervical mucus by NAA with probe detection	Y	21414-8
6	Neisseria gonorrhoeae DNA [Presence] in Urine by NAA with probe detection	Y	21416-3

Table 5.
 Neis.
 Gonorrhea
 Panel
 (86660-8)

Data Element #	Standard Terminology Code System	Term Description
2	LOINC	-
3	LOINC	-
4	LOINC	-
5	LOINC	-
6	LOINC	-

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
2	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)
3	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)
4	Pos Neg / Answers: 2; Scale: Ord; Code: -; Score: -	Positive (qualifier value) Negative (qualifier value)
5	-	Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)
6	-	Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Expected Codes/Values	Notes
2	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT	-
3	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT	-
4	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT	-
5	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
6	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
7	Neisseria gonorrhoeae DNA [Presence] in Unspecified specimen by NAA with probe detection	Y	24111-7
8	Neisseria gonorrhoeae rRNA [Presence] in Cervix by Probe	Y	32198-4
9	Neisseria gonorrhoeae rRNA [Presence] in Urethra by Probe	Y	32199-2

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	Standard Terminology Code System	Term Description
7	LOINC	-
8	LOINC	-
9	LOINC	-

Table 5.
Neis.
Gonorrhoea
Panel
(86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
7	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
8	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
9	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)

Table 5.
Neis.
Gonorrhea
Panel
(86660-8)

Data Element #	Expected Codes/Values	Notes
7	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
8	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
9	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
10	Neisseria gonorrhoeae DNA [Presence] in Vaginal fluid by NAA with probe detection	Y	32705-6
11	Neisseria gonorrhoeae DNA [Presence] in Unspecified specimen by Probe with signal amplification	Y	43403-5
12	Neisseria gonorrhoeae rRNA [Presence] in Unspecified specimen by Probe	Y	5028-6

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Standard Terminology Code System	Term Description
10	LOINC	-
11	LOINC	-
12	LOINC	-

Table 5.
 Neis.
 Gonorrhea
 Panel
 (86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
10	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
11	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
12	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)

**Table 5.
Neis.
Gonorrhoea
Panel
(86660-8)**

Data Element #	Expected Codes/Values	Notes
10	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
11	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
12	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
13	Neisseria gonorrhoeae rRNA [Presence] in Vaginal fluid by NAA with probe detection	Y	53879-3
14	Neisseria gonorrhoeae rRNA [Presence] in Urethra by NAA with probe detection	Y	53927-0
15	Neisseria gonorrhoeae Ag [Presence] in Genital specimen by Immunoassay	Y	6487-3

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Standard Terminology Code System	Term Description
13	LOINC	-
14	LOINC	-
15	LOINC	-

Table 5.
Neis.
Gonorrhoea
Panel
(86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
13	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
14	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
15	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)

**Table 5.
Neis.
Gonorrhoea
Panel
(86660-8)**

Data Element #	Expected Codes/Values	Notes
13	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
14	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
15	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
16	Neisseria gonorrhoeae [Presence] in Cervix by Organism specific culture	Y	688-2
17	Neisseria gonorrhoeae [Presence] in Genital specimen by Organism specific culture	Y	691-6
18	Neisseria gonorrhoeae [Presence] in Genital lochia by Organism specific culture	Y	692-4

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Standard Terminology Code System	Term Description
16	LOINC	-
17	LOINC	-
18	LOINC	-

Table 5.
 Neis.
 Gonorrhoea
 Panel
 (86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
16	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
17	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
18	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)

**Table 5.
Neis.
Gonorrhoea
Panel
(86660-8)**

Data Element #	Expected Codes/Values	Notes
16	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
17	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
18	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
19	Neisseria gonorrhoeae [Presence] in Vaginal fluid by Organism specific culture	Y	693-2
20	Neisseria gonorrhoeae [Presence] in Unspecified specimen by Organism specific culture	Y	698-1

End of worksheet

Table 5.
 Neis.
 Gonorrhea
 Panel
 (86660-8)

Data Element #	Standard Terminology Code System	Term Description
19	LOINC	-
20	LOINC	-

End of worksh

Table 5.
 Neis.
 Gonorrhoea
 Panel
 (86660-8)

Data Element #	Value Set/Answer List Name	Response Descriptions
19	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)
20	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)

End of worksh

**Table 5.
Neis.
Gonorrhea
Panel
(86660-8)**

Data Element #	Expected Codes/Values	Notes
19	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-
20	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT	-

End of workst

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
-	Chlamydia trachomatis+Neisseria gonorrhoeae tests - FPA	Y	86661-6
1	Chlamydia trachomatis+Neisseria gonorrhoeae DNA [Presence] in Unspecified specimen by NAA with probe detection	Y	36902-5

Table 6.
 CT+NG Com
 Tests Panel
 (86661-6)

Data Element #	Standard Terminology Code System	Term Description
-	LOINC	Set of lab terms that may be used to gather Chlamydia trachomatis and Neisseria gonorrhoeae combined test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).
1	LOINC	-

Table 6.
 CT+NG Com
 Tests Panel
 (86661-6)

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
-	-	-	-
1	Detected Not det / Answers: 2; Scale: Ord; Code: -; Score: -	Detected (qualifier value) Not detected (qualifier value)	LL744-4 260373001 - SNOMEDCT 260415000 - SNOMEDCT

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Notes
-	<p>LOINC Panels are collections of LOINC terms that represent specific sets of information, such as a laboratory battery of tests, a group of findings from a procedure such as an EKG, and forms or assessments related to health that are completed by patients and/or providers.</p> <p>LOINC Panels contain a specific structure, and depending on the type of panel, can include attributes such as form coding instructions, skip logic, and nested panels.</p>
1	-

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
2	Chlamydia trachomatis and Neisseria gonorrhoeae DNA [Identifier] in Unspecified specimen by NAA with probe detection	Y	36903-3
3	Chlamydia trachomatis+Neisseria gonorrhoeae DNA [Presence] in Unspecified specimen by Probe with signal amplification	Y	43406-8

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Standard Terminology Code System	Term Description
2	LOINC	
3	LOINC	

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
2	CT&GC probe / Clamydia trachomatis & Neisseria probe	detected Chlamydia trachomatis inconclusive Chlamydia trachomatis equivocal Neisseria gonorrhoeae detected Neisseria gonorrhoeae not detected Neisseria gonorrhoeae inconclusive Neisseria gonorrhoeae equivocal Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value)	LL1501-7 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
3	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Notes
2	
3	

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
4	Chlamydia trachomatis+Neisseria gonorrhoeae DNA [Presence] in Urine by NAA with probe detection	Y	6357-8
5	Chlamydia trachomatis+Neisseria gonorrhoeae DNA [Presence] in Urine by NAA with probe detection	Y	44807-6
6	Chlamydia trachomatis+Neisseria gonorrhoeae rRNA [Presence] in Cervix by Probe	Y	45067-6

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Standard Terminology Code System	Term Description
4	LOINC	-
5	LOINC	-
6	LOINC	-

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
4	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
5	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
6	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Notes
4	
5	
6	

**Table 6.
CT+NG Com
Tests Panel
(86661-6)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
7	Chlamydia trachomatis+Neisseria gonorrhoeae DNA [Presence] in Cervix by NAA with probe detection	Y	45068-4
8	Chlamydia trachomatis+Neisseria gonorrhoeae rRNA [Presence] in Genital specimen by Probe	Y	45069-2
9	Chlamydia trachomatis+Neisseria gonorrhoeae rRNA [Presence] in Vaginal fluid by Probe	Y	45070-0

Table 6.
 CT+NG Com
 Tests Panel
 (86661-6)

Data Element #	Standard Terminology Code System	Term Description
7	LOINC	-
8	LOINC	-
9	LOINC	-

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
7	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
8	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
9	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Notes
7	
8	
9	

**Table 6.
CT+NG Com
Tests Panel
(86661-6)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
10	Chlamydia trachomatis+Neisseria gonorrhoeae rRNA [Presence] in Urine by Probe	Y	45074-2
11	Chlamydia trachomatis+Neisseria gonorrhoeae rRNA [Presence] in Unspecified specimen by Probe	Y	45076-7

End of worksheet

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Standard Terminology Code System	Term Description
10	LOINC	-
11	LOINC	-

End of works

**Table 6.
CT+NG Com
Tests Panel
(86661-6)**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
10	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
11	-	Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

End of works

Table 6.
CT+NG Com
Tests Panel
(86661-6)

Data Element #	Notes
10	
11	

End of works

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	HIV Test Type
-	HIV 1 and 2 tests - FPAR 2.0 set (PANEL)	-
1	HIV 1 RNA [Presence] in Unspecified specimen by NAA with probe detection	Supplemental/Confirmatory HIV test
2	HIV 1 Ab [Presence] in Serum by Immunoblot (IB)	Supplemental/Confirmatory HIV test
3	HIV 1 Ab [Presence] in Serum, Plasma or Blood by Rapid immunoassay	Rapid/Screening HIV test

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	In FPAR Panel?	Data Element Code (If Available)	Standard Terminology Code System
-	Y	86657-4	LOINC
1	Y	5018-7	LOINC
2	Y	5221-7	LOINC
3	Y	68961-2	LOINC

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	Term Description	Value Set/Answer List Name
-	Set of lab terms that may be used to gather HIV 1 & 2 test results at time of the patient encounter as specified by the Family Planning Annual Report (FPAR).	-
1	-	-
2	-	-
3	This term is intended to encode test results obtained within minutes. An example is the bioLytical INSTI HIV-1 kit, which can be used on serum, plasma, or whole blood, including fingerstick. At the time of creation, only the HIV-1 test is approved for use in the US, although an HIV-2 test is available.	Reac/Non-reac/Indet/Invalid / Reactive, Non-reactive, Indeterminate, Invalid

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	Response Descriptions	Expected Codes/Values	Binding to Answer List/Result Values
-	-	-	-
1	Detected (qualifier value) Not detected (qualifier value) Indeterminate (qualifier value)	260373001 - SNOMEDCT 260415000 - SNOMEDCT 82334004 - SNOMEDCT	-
2	Positive (qualifier value) Negative (qualifier value) Inconclusive (qualifier value) Equivocal (qualifier value)	10828004 - SNOMEDCT 260385009 - SNOMEDCT 419984006 - SNOMEDCT 42425007 - SNOMEDCT	-
3	Reactive Non-Reactive Indeterminate Invalid Reactive (qualifier value) Non-Reactive (qualifier value) Indeterminate (qualifier value)	LL1909-2 11214006 - SNOMEDCT 131194007 - SNOMEDCT 82334004 - SNOMEDCT	Example

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	Notes
-	<p>LOINC Panels are collections of LOINC terms that represent specific sets of information, such as a laboratory battery of tests, a group of findings from a procedure such as an EKG, and forms or assessments related to health that are completed by patients and/or providers.</p> <p>LOINC Panels contain a specific structure, and depending on the type of panel, can include attributes such as form coding instructions, skip logic, and nested panels.</p>
1	-
2	-
3	-

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	HIV Test Type
4	HIV 2 Ab [Presence] in Serum or Plasma by Immunoassay	Rapid/Screening HIV test
5	HIV 1+2 Ab [Presence] in Serum or Plasma by Immunoassay	Rapid/Screening HIV test
6	HIV 1 RNA [Log #/volume] (viral load) in Serum or Plasma by Probe and target amplification method detection limit = 1.7 log copies/mL	Supplemental/Confirmatory HIV test
7	HIV 1 RNA [#/volume] (viral load) in Serum or Plasma by Probe and target amplification method detection limit = 50 copies/mL	Supplemental/Confirmatory HIV test

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	In FPAR Panel?	Data Element Code (If Available)	Standard Terminology Code System
4	Y	30361-0	LOINC
5	Y	31201-7	LOINC
6	Y	48510-2	LOINC
7	Y	48511-0	LOINC

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	Term Description	Value Set/Answer List Name
4	-	Reactive w indet (3 answers, ord) / Whether an analyte is present or whether the result is indeterminate.
5	-	-
6	-	-
7	-	

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	Response Descriptions	Expected Codes/Values	Binding to Answer List/Result Values
4	Indeterminate Reactive Non-Reactive Reactive (qualifer value) Non-Reactive (qualifer value) Indeterminate (qualifer value)	LL2017-3 11214006 - SNOMEDCT 131194007 - SNOMEDCT 82334004 - SNOMEDCT	Example
5	Positive (qualifier value) Negative (qualifier value)	10828004 - SNOMEDCT 260385009 - SNOMEDCT	-
6	Not applicable Quantitative lab	Not applicable	Not applicable
7	Not applicable Quantitative lab	Not applicable	Not applicable

**Table 7.
HIV 1 & 2
Tests
Panel
(86657-4)**

Data Element #	Notes
4	-
5	-
6	-
7	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
1	Reagin Ab [Titer] in Serum	N	11084-1
2	Reagin Ab [Presence] in Specimen by VDRL	N	14904-7
3	Reagin Ab [Presence] in Serum by RPR	N	20507-0
4	Reagin Ab [Units/volume] in Serum or Plasma by RPR	N	20508-8

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
1	LOINC	-
2	LOINC	-
3	LOINC	-
4	LOINC	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
1	-	Not applicable Quantitative lab (Titer)	Not applicable
2	-	Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
3	-	Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
4	-	Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
1	Not applicable	-
2	-	-
3	-	-
4	-	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
5	Reagin Ab [Presence] in Serum	N	22461-8
6	Reagin Ab [Units/volume] in Serum	N	22462-6
7	Reagin Ab [Presence] in Specimen	N	22464-2
8	Reagin Ab [Titer] in Serum by RPR	N	31147-2
9	Reagin Ab [Titer] in Specimen by VDRL	N	47235-7
10	Reagin Ab [Titer] in Specimen	N	47476-7
11	Reagin Ab [Titer] in Serum by VDRL	N	50690-7

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
5	LOINC	-
6	LOINC	-
7	LOINC	-
8	LOINC	-
9	LOINC	-
10	LOINC	-
11	LOINC	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
5	-	Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
6	-	Not applicable Quantitative lab ([arb'U]/mL)	Not applicable
7	-	Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
8	-	Not applicable Quantitative lab (Titer)	Not applicable
9	-	Not applicable Quantitative lab (Titer)	Not applicable
10	-	Not applicable Quantitative lab (Titer)	Not applicable
11	-	Not applicable Quantitative lab (Titer)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
5	-	-
6	Not applicable	-
7	-	-
8	Not applicable	-
9	Not applicable	-
10	Not applicable	-
11	Not applicable	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
12	Reagin Ab [Units/volume] in Serum by VDRL	N	5291-0
13	Reagin Ab [Presence] in Serum by VDRL	N	5292-8
14	Reagin and Treponema pallidum IgG and IgM [Interpretation] in Serum or Plasma	N	73752-8

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
12	LOINC	-
13	LOINC	-
14	LOINC	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
12	-	Not applicable Quantitative lab ([arb'U]/mL)	Not applicable
13	-	Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT
14	-	No serological evidence of current or past infection Biological false positive Early primary syphilis Treated syphilis Person from a country endemic for yaws, pinta or bejel May represent a biological false positive May be infectious syphilis if no previous history of syphilis Consistent with active infectious syphilis	LL2467-0

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
12	Not applicable	-
13	-	-
14	-	-

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
15	Treponema pallidum Ab [Units/volume] in Serum	N	<u>11597-2</u>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
15	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
15		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
15	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
16	Treponema pallidum Ab [Units/volume] in Blood by Immunofluorescence	N	13288-6

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
16	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
16		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
16	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
17	Treponema pallidum Ab [Presence] in Serum by Immobilization	N	17723-8

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
17	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
17		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
17		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
18	Treponema pallidum Ab [Units/volume] in Serum by Immunofluorescence	N	17724-6

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
18	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

Table 8.
Syphilis
Tests
Panel

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
18		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
18	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
19	Treponema pallidum Ab [Units/volume] in Serum by Latex agglutination	N	17725-3

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
19	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
19		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
19	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
20	Treponema pallidum IgG Ab [Presence] in Serum by Immunofluorescence	N	17726-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
20	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
20		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
20		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
21	Treponema pallidum IgG Ab [Units/volume] in Serum by Immunofluorescence	N	17727-9

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
21	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
21		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
21	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
22	Treponema pallidum IgM Ab [Units/volume] in Serum by Immunofluorescence	N	17728-7

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
22	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
22		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
22	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
23	Treponema pallidum IgM Ab [Presence] in Serum by Immunofluorescence	N	17729-5

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
23	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
23		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
23		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
24	Treponema pallidum Ab [Units/volume] in Blood	N	22585-4

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
24	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
24		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
24	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
25	Treponema pallidum Ab [Presence] in Serum	N	22587-0

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
25	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
25		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
25		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
26	Treponema pallidum Ab [Titer] in Serum	N	22590-4

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
26	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
26		Not applicable Quantitative lab (Titer)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
26	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
27	Treponema pallidum IgG Ab [Units/volume] in Serum	N	22592-0

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
27	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
27		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

Table 8.
Syphilis
Tests
Panel

Data Element #	Binding to Answer List/Result Values	Notes
27	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
28	Treponema pallidum IgM Ab [Units/volume] in Serum	N	22594-6

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
28	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
28		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
28	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
29	Treponema pallidum Ab [Presence] in Serum by Immunoassay	N	24110-9

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
29	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
29		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
29		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
30	Treponema pallidum Ab [Presence] in Serum by Agglutination	N	24312-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
30	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
30		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
30		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
31	Treponema pallidum Ab [Titer] in Serum by Hemagglutination	N	26009-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
31	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

Table 8.
Syphilis
Tests
Panel

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
31		Not applicable Quantitative lab	Not applicable

Table 8.
Syphilis
Tests
Panel

Data Element #	Binding to Answer List/Result Values	Notes
31	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
32	Treponema pallidum [Presence] in Specimen by Immunofluorescence	N	29310-0

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
32	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
32		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
32		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
33	Treponema pallidum IgG+IgM Ab [Presence] in Serum	N	34147-9

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
33	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
33		Reactive (qualifer value) Non-Reactive (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
33		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
34	Treponema pallidum Ab [Titer] in Serum by Immunofluorescence	N	34382-2

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
34	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
34		Not applicable Quantitative lab (Titer)	Not applicable

Table 8.
Syphilis
Tests
Panel

Data Element #	Binding to Answer List/Result Values	Notes
34	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
35	Treponema pallidum Ab [Units/volume] in Body fluid by Hemagglutination	N	39015-3

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
35	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
35		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
35	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
36	Treponema pallidum IgG Ab [Presence] in Serum by Immunoblot	N	40679-3

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
36	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
36		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
36		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
37	Treponema pallidum IgM Ab [Presence] in Serum by Immunoblot	N	40680-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
37	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
37		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
37		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
38	Treponema pallidum Ab [Units/volume] in Specimen	N	41122-3

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
38	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
38		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
38	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
39	Treponema pallidum DNA [Presence] in Specimen by NAA with probe detection	N	41163-7

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
39	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
39		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
39		91134-7 Sexually transmitted pathogens panel - Specimen by NAA with probe detection 96611-9 Treponema pallidum and Haemophilus ducreyi and Herpes simplex virus DNA panel - Specimen by NAA with probe detection

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
40	Treponema pallidum IgG+IgM Ab [Presence] in Serum by Immunoassay	N	47236-5

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
40	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
40		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
40		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
41	Treponema pallidum IgM Ab [Presence] in Serum by Immunoassay	N	47237-3

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
41	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
41		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
41		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
42	Treponema pallidum IgG Ab [Presence] in Serum by Immunoassay	N	47238-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
42	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
42		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
42		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
43	Treponema pallidum Ab [Units/volume] in Body fluid	N	47511-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
43	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
43		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
43	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
44	Treponema pallidum IgG Ab [Units/volume] in Serum by Immunoassay	N	51838-1

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
44	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
44		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
44	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
45	Treponema pallidum IgM Ab [Units/volume] in Serum by Immunoassay	N	51839-9

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
45	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
45		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

Table 8.
Syphilis
Tests
Panel

Data Element #	Binding to Answer List/Result Values	Notes
45	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
46	Treponema pallidum DNA [Presence] in Blood by NAA with probe detection	N	53605-2

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
46	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
46		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

Table 8.
Syphilis
Tests
Panel

Data Element #	Binding to Answer List/Result Values	Notes
46		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
47	Treponema pallidum Ab [Units/volume] in Serum by Immobilization	N	5392-6

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
47	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
47		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
47	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
48	Treponema pallidum Ab [Presence] in Serum by Immunofluorescence	N	5393-4

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
48	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
48		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
48		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
49	Treponema pallidum Ab [Titer] in Serum by Latex agglutination	N	5394-2

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
49	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
49		Not applicable Quantitative lab (Titer)	Not applicable

Table 8.
Syphilis
Tests
Panel

Data Element #	Binding to Answer List/Result Values	Notes
49	Not applicable	

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
50	Treponema pallidum Ab [Presence] in Serum by Immunoblot	N	57032-5

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
50	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
50		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
50		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
51	Treponema pallidum Ab [Units/volume] in Serum by Immunoassay	N	63464-2

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
51	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
51		Not applicable Quantitative lab ([arb'U]/mL)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
51		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
52	Treponema pallidum IgG Ab [Presence] in Serum	N	6561-5

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
52	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
52		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifer value) Negative (qualifier value) Not detected (qualifer value) Equivocal (qualifer value) Indeterminate (qualifer value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
52		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
53	Treponema pallidum IgM Ab [Presence] in Serum	N	6562-3

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
53	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
53		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
53		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
54	Treponema pallidum Ab [Titer] in Serum or Plasma by Agglutination	N	71793-4

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
54	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
54		Not applicable Quantitative lab (Titer)	Not applicable

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
54		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
55	Treponema pallidum poA gene [Presence] in Genital specimen by NAA with probe detection	N	76766-5

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
55	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
55		Positive (qualifier value) Negative (qualifier value)	LL360-9 10828004 - SNOMEDCT 260385009 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
55		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
56	Treponema pallidum Ab [Presence] in Serum by Hemagglutination	N	8041-6

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
56	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
56		Reactive (qualifier value) Non-reactive (qualifier value) Positive (qualifier value) Detected (qualifier value) Negative (qualifier value) Not detected (qualifier value) Equivocal (qualifier value) Indeterminate (qualifier value)	11214006 - SNOMEDCT 131194007 - SNOMEDCT 10828004 - SNOMEDCT 260373001 - SNOMEDCT 260385009 - SNOMEDCT 260415000 - SNOMEDCT 42425007 - SNOMEDCT 82334004 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
56		

**Table 8.
Syphilis
Tests
Panel**

Data Element #	FPAR 2.0 Data Element (Long Common Name)	In FPAR Panel?	Data Element Code (If Available)
57	Treponema pallidum DNA [Presence] in Genital specimen by NAA with probe detection	N	91846-6

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Standard Terminology Code System	Term Description
57	LOINC	<p>treponemes are classified based upon their clinical manifestations in humans: venereal syphilis, yaws, endemic syphilis and pinta. Nonpathogenic treponemes are often part of the normal flora of the genital tract, oral cavity or intestinal tract. Treponemal infections exhibit diverse clinical manifestations which are characterized by distinct clinical stages. Multiplication of the bacterium at the entry point causes the primary stage. Dissemination of treponemes to other tissues produces the second stage. After a latency period (up to 20 to 30 years), the tertiary stage develops. <i>T. pallidum</i> subsp <i>pallidum</i> (venereal syphilis) is the most destructive subspecies and produces lesions in many bodily tissues including the central nervous system. Congenital syphilis may result in birth defects or fetal death. Venereal syphilis is sexually acquired except for congenital syphilis, which is transmitted to the fetus during the later stages of pregnancy. The other treponemes are acquired by close nonvenereal contact. Control of both venereal and nonvenereal disease is based upon surveillance and antibiotic treatment of contacts. [NCBI</p>

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Value Set/Answer List Name	Response Descriptions	Expected Codes/Values
57		Detected Not detected	260373001 - SNOMEDCT 260415000 - SNOMEDCT

**Table 8.
Syphilis
Tests
Panel**

Data Element #	Binding to Answer List/Result Values	Notes
57		