Integrating the Healthcare Enterprise



IHE Patient Care Device

Technical Framework Supplement

10 Infusion Pump Event Communication (IPEC)

Trial Implementation

20Date:December 20, 2012Editor:IHE PCD Technical CommitteeEmail:pcd@ihe.net

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Foreword

25 This is a supplement to the IHE Patient Care Device Technical Framework 2.0. Each supplement undergoes a process of public comment and trial implementation before being incorporated into the volumes of the Technical Frameworks.

This supplement is submitted for Trial Implementation as of December 20, 2012 and will be available for testing at subsequent IHE Connectathons. The supplement may be amended based

30 on the results of testing. Following successful testing it will be incorporated into the Patient Care Device Technical Framework. Comments are invited and can be submitted at <u>http://www.ihe.net/pcd/pcdcomments.cfm</u> or by email to pcd@ihe.net.

This supplement describes changes to the existing technical framework documents and where indicated amends text by addition (**bold underline**) or removal (**bold strikethrough**), as well as

35 addition of large new sections introduced by editor's instructions to "add new text" or similar, which for readability are not bolded or underlined.

"Boxed" instructions like the sample below indicate to the Volume Editor how to integrate the relevant section(s) into the relevant Technical Framework volume:

40 General information about IHE can be found at: <u>www.ihe.net</u>

Information about the IHE Patient Care Device domain can be found at: <u>http://www.ihe.net/Domains/index.cfm</u>

Information about the structure of IHE Technical Frameworks and Supplements can be found at: <u>http://www.ihe.net/About/process.cfm</u> and <u>http://www.ihe.net/profiles/index.cfm</u>

45 The current version of the IHE Patient Care Device Technical Framework can be found at: http://www.ihe.net/Technical_Framework/index.cfm

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EDITORS NOTE: With the specification of Device Specialization – Infusion Pump profiles, it is anticipated that the pump-specific content of this IPEC profile will be migrated to these infusion pump content specifications. As a result, in a future cycle, this profile shall be generalized to Event Communication (EC) and will provide a general capability – using the defined PCD-10 transaction – to support all device EC

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Introduction

This Supplement adds sections to the PCD Technical Framework Volume 1 describing the content associated with communicating Infusion Pump device events, and to Volume 2 describing data content and constraints.

95 **Profile Abstract**

The Infusion Pump Event Communication (IPEC) Profile specifies methods for communicating significant clinical and technical events from a Patient Care Device such as infusion pump to an information system which may present it to a clinical user, acts on it in some way or records it. The information is communicated in a data format similar to that of Device Enterprise

- 100 Communications (DEC) Profile, but differs in that DEC is mainly used for sampled physiological and technical data at timed, equal intervals, while IPEC is used to communicate significant occurrences which happen at unscheduled times. Infusion Pump Event Communications is also related to Alarm Communications Management (ACM) Profile, except that ACM is designed for physiological alarms and technical alerts to a human actor via portable
- 105 devices, where IPEC is designed for system-to-system communication for automated recording or tracking occurrences which do not necessarily require urgent attention from a person.

Open Issues and Questions

- For future considerations:
- Include a unique event identifier in order to help in associating related events (delivery starts and delivery stops). Since there are many different use cases in pump operation, it may be that this is not feasible. Further analysis is needed. In the meantime this can be accomplished using patient, device and order identifiers that are present in the PCD-10 message.
 - Support for subscription option for event messages.
- Harmonize Patient ID Change event with the Point of Care Identity Management (PCIM) work group.
 - Determine Containment level for optional events.
 - Possible alignment with the Pharmacy domain through the use of the RAS^O17 message instead of ORU^R42

120 Closed Issues

None

Volume 1 – Content Profiles

1.7 History of Annual Changes

Add the following bullet to the end of the bullet list in section 1.7

• Added the Infusion Pump Event Communication profile which specifies the transmission of event information from infusion pumps to other information systems.

1.n Copyright Permission

<No new information>

2.1 Dependencies among Integration Profiles

130 *Add the following to Table 2-1*

Integration Profile	Depends On	Dependency Type	Purpose
Infusion Pump Event Communication	Consistent Time	Each actor implementing IPEC shall be grouped with the Time Client Actor	Required for consistent time-stamping of event data.

Add the following section to section 2.2

2.2.X Infusion Pump Event Communication Integration Profile

135 This document introduces a new profile - Infusion Pump Event Communication. This profile is based on the general observation reporting in Device Enterprise Communication (DEC) Profile. Infusion Pump Event Communication uses the same general form of interactions among Device Observation Reporter and Device Observation Consumer actors.

The principal intended uses of IHE Device Enterprise Communication in acute care are to communicate device data to enterprise information systems for:

- Reporting, charting and trending physiological data to assist clinicians in tracking the patients physiological state for situational awareness and care planning
- Near-real-time response to clinically or technically actionable events and situations
- Provision of information for an archival record of device observations, possibly including
- events, that are clinical, technical, or both

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Device Enterprise Communications (DEC) is chiefly designed for the first goal listed based on periodic observation reporting, but has always provided for episodic and event reporting as a subtype of general event reporting.

This Infusion Pump Event Communication Integration Profile is designed to address the second
 goal of reporting events, specifically infusion pumps events. It defines a means for
 communicating significant events in medication administration by infusion pumps.

Add section X

X Infusion Pump Event Communication (IPEC) Integration Profile

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 goal of reporting events, specifically infusion pumps events. It defines a means for
 communicating significant events in medication administration by infusion pumps.

Events in Medical Device Communications

An event, in the context of medical device communications, is an occurrence about which it is
 desired to communicate information between devices and information systems. Events are
 communicated as soon after their occurrence as is technically feasible, in contrast to other
 observation reporting in from devices to information systems which capture the trend of
 continuously-varying physiological characteristics indicating the patient's clinical status by
 communicating observations an even time interval characteristics. These characteristics are
 usually then displayed to clinical users in a spreadsheet-like grid or on a trend graph.

One special sort of event is an episodic measurement, that is, one that is not automatically initiated on a regular, timed basis, such as a spot blood pressure cuff reading, or a non-continuous cardiac output measurement. These are initiated manually and the receiving information system has no foreknowledge of when they will occur.

185 Another special case is an alert or alarm, where the key outcome of the event is meant to be some action by a person. The IHE PCD Alarm Communication Management (ACM) profile is focused on the human notification aspect of this.

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Relation of Infusion Pump Event Communication to Alarm Communication Management Profile

Alarm Communication Management has provided expanded formats with additional attributes for alarms, with emphasis on transmitting the information to specific individuals who need to be notified at the point of care via portable devices. This has been supplemented by Waveform Communication profiling work which allows associating waveform data with an alarm.

- 195 For purposes of this discussion, a distinction is made between events and alarms.
 - Events are operational milestones and key parameter changes. For example, during normal execution of an infusion therapy, non-alarm conditions such as start of delivery, change of rate, switchover from piggyback to primary drug, completion of delivery, transition to KVO, etc. are important to full recording or state awareness for the therapeutic process.
- Alarms are a subset of events which are intended to engage immediate response from the clinician, and are handled in the Alarm Communication Management profile.

Clinical information systems must communicate, for real-time high-reliability review and action, and record for documentation purposes:

- Exception Events physiological or technical, which may indicate conditions either in the patient or in the equipment in use by those caring for the patient, which need attention at stated levels of urgency. These include alarms, appropriately processed for human notification using the Alarm Communication Management profile, but may in addition need to be communicated to information systems for other purposes than immediate notification of persons, such as documentation.
- State transitions operationally significant changes between discrete states of physiological or technical conditions (for example, "modes" and "settings" for a device, "warning or alarm limit" or "action limit" for a measured physiological parameter).
 - Priority may be evaluated by the original sending device or by business rules and clinical protocols in downstream systems. Sources for raw and derived data and interpretations of priority must be documented for audit/forensic purposes, potentially by additions to content
- 215 priority must be documented for audit/forensic purposes, potentially by additions to content of message.

X.1 Actors/Transactions

Figure X.1-1 shows the actors directly involved in the Infusion Pump Event Communication Integration Profile and the relevant transactions between them. Other actors that may be indirectly involved due to their participation in Device Enterprise Communications (DEC) or Point-of-care Infusion Verification (PIV), etc., are not necessarily shown.

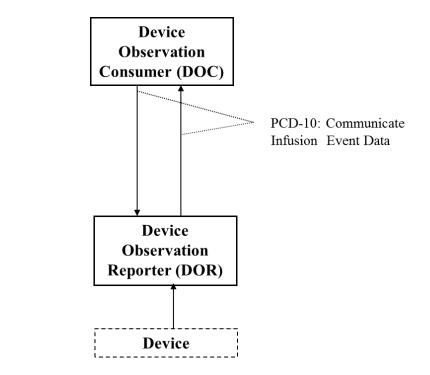


Figure X.1-1: Infusion Pump Event Communication Actor Diagram

Table X.1-1 lists the transactions for each actor directly involved in the Infusion Pump Event Communication Profile. In order to claim support of this Integration Profile, an implementation must perform the required transactions (labeled "R"). Transactions labeled "O" are optional.

 Table X.1-1: Infusion Pump Event Communication Integration Profile - Actors and Transactions

Actors	Transactions	Optionality	Section in Vol. 2
Device Observation Reporter	Communicate Infusion Event Data	R	Z.1
Device Observation Consumer	Communicate Infusion Event Data	R	Z.1

X.2 IPEC Options

235 The IHE PCD Infusion Pump Event Communication profile does not define any options.

X.3 IPEC Actor Groupings and Profile Interactions

None

X.4 Infusion Pump Event Communication Process Flow

X.4.1 Standard Use Cases

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240 X.4.1.1 Case IPEC-1: Communicate event data to EMR/EHR

Data from all of the patient care devices associated with a particular patient is communicated by a Gateway, Device or Clinical Information System (CIS) implementing the DOR actor to an EMR/EHR, implementing the DOC actor. This document only covers event data received from infusion pumps. Discrete parameters representing the device's state at or near the time of the event are included. The data is time stamped with a consistent time across the data from the respective patient care devices.

The primary intent is communication of structured data; however provisions are made for inclusion of unstructured data. The application provides facilities to bind an authoritative enterprise patient identifier required for inclusion of the PCD data in the patient record. The

250 workflow for associating the authoritative enterprise patient identifier to the PCD data is outside the scope of the current PCD TF.

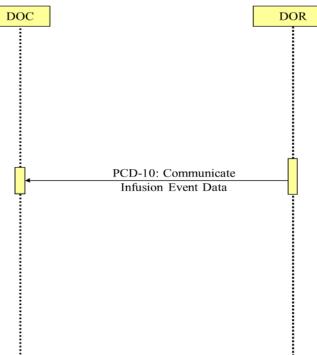


Figure X.4.1.1-1: Basic Process Flow in Infusion Pump Event Communication Profile

255 X.5 IPEC Security Considerations

The IPEC profile does not address issues of privacy, security, and confidentiality associated with cross-enterprise communication of PCD data. The assumption is made that the IPEC profile is implemented in a single enterprise on a secure network.

Appendix A Actor Summary Definitions

260 This integration profile will not add any new actors.

Appendix B Transaction Summary Definitions

Infusion Pump Event – An event, in the context of infusion pump device communications, is an occurrence about which it is desired to communicate information between Infusion Pump devices and Clinical Information Systems. For example, during normal execution of an infusion

265 therapy, non-alarm conditions such as start of delivery, change of rate, switchover from piggyback to primary drug, completion of delivery, transition to KVO, etc., are important to full documentation of the IV administration.

Glossary

270 *Add the following terms to the Glossary:*

Event: an occurrence about which it is desired to communicate information between devices and information systems. Events include operational milestones and key parameter changes. Alarms are considered to be a subset of events.

Program: Settings used to control the operation of the pump. A program typically initiated by
 the clinician and entered manually on the device. Once the settings are confirmed, the clinician can then start the infusion.

Auto Program: A pump program in which some or all settings are received from another system such as an eMAR or BCMA system. When an auto-program is received on the pump, the clinician will enter any additional required settings, confirm them, and start the infusion.

280 **Delivery:** The infusion pump mechanism for moving fluid into a patient is engaged.

KVO: Keep Vein Open. A fluid delivery mode that may occur once the programmed volume has been infused.

Volume 2 - Transactions

285 *Add section 3.Y*

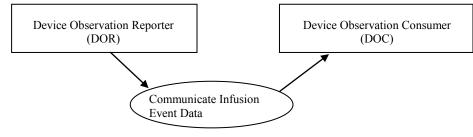
3.Y Communicate Infusion Event Data

This section corresponds to the Communicate Infusion Event Data transaction of the IHE Technical Framework. Communicate Infusion Event Data is used by the DOR and DOC actors.

3.Y.1 Scope

- 290 This transaction is used to communicate infusion event data from:
 - A Device Observation Reporter (DOR) to a Device Observation Consumer (DOC).

3.Y.2 Use Case Roles



295 Actor: Device Observation Reporter

Role: Sends infusion event data to DOC

Actor: Device Observation Consumer

Role: Receives infusion event data from DOR

300 3.Y.3 Referenced Standard

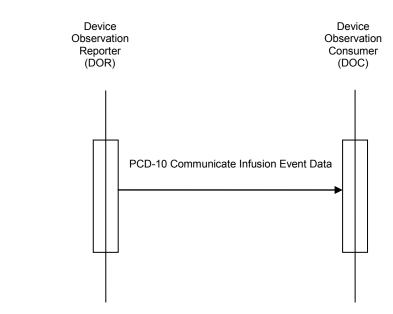
- HL7 Health Level 7 Version 2.6 Ch7 Observation Reporting
- ISO/IEEE 11073-10101 Nomenclature

3.Y.4 Interaction Diagram

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315 **3.Y.4.1 Communicate Infusion Event Data**

Event messages are generated by the infusion pump or Gateway during normal execution of an infusion therapy. Example of such events are start of infusion delivery, rate change or transition from piggyback to primary or transition to KVO. This information is sent from a DOR to a DOC.

Note that while a system is off-line, all events should be buffered and then communicated when communication is established again. Event time stamps should indicate when the event occurred, not when it was communicated.

3.Y.4.1.1 Trigger Events

The ORU^R42^ORU_R01 message is an unsolicited update initiated by the Device Observation Reporter. The ORU^R42 can be sent with or without a preceding order, since it is common in a clinical setting for device data to be reported without a specific order having been transacted in the information system (that is, the reporting is the result of a "standing order" for monitoring in a particular clinical situation).

3.Y.4.1.2 Message Semantics

Refer to the HL7 standard for the ORU message of HL7 2.6 Chapter 7 and the general message 330 semantics.

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The ORU^R42^ORU_R01 message structure provides the mechanisms for mapping the hierarchical structure of an IEEE 11073 containment tree to a series of OBX messages each of which is optionally qualified by a note which immediately follows the respective OBX. See the discussion of how the containment is represented using a "dotted notation" in field OBX-4 Observation Sub-ID in PCD Technical Framework Vol. 2 Rev. 1.2 Appendix B, Section B.8.

See PCD Technical Framework Vol. 2 Rev. 1.2 section 3.3 ISO/IEEE Nomenclature mapping to HL7 OBX-3 for further information on the mapping rules.

3.Y.4.1.3 Expected Actions

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The ORU^R42^ORU_R01 message is sent from the DOR to the DOC. Upon receipt the DOC validates the message and responds with an acknowledgement as defined in PCD Technical Framework Vol. 2 Rev. 1.2 Appendix G.1.1 Acknowledgment Modes.

Appendix X Infusion Pump Events

This appendix is intended to provide background information to support a mechanism for the transmission of event information for large volume (general purpose) infusion pumps. Common infusion modalities for these pumps may include continuous, piggyback, bolus, multi-step, and intermittent functionality. Support for patient-controlled analgesia (PCA) pumps and other types of pumps will be addressed at a later date.

A major challenge in reporting infusion pump events is that although pumps are able to report programmed and operational parameters, they are typically not "aware" of how or why they are

- 350 being used clinically. In medical environments there are an enormous number of use cases for administering an infusion using a pump. Even a routine delivery of an amount of fluid may involve several instances where the infusion is paused or stopped and then restarted (either within seconds or after several hours or more). The infusion rate may be changed, or an alarm may cause the infusion to stop until the alarm is addressed. For various practical and clinical
- 355 reasons, the values programmed on the pump by the clinician may not relate to the volume that the physician ordered, the actual volume of the fluid container that was hung, or the rate at which the infusion was ordered.

All current pump systems do not report event information the same way. The same information may be represented differently, or a different set of information may be reported. Information may be reported periodically or episodically, but not in accordance with a common specification.

As a result, a decision has been made to standardize a small number of basic operational events. In combination with pump mode and status information, these can be used to express the various key operational components of an infusion over time. Systems that receive event information, such as eMAR or BCMA systems, have the clinical/medication order information and will need to reconcile the reported operational events with this information.

X.1 Basic Infusion Events

It may be helpful to think of an infusion as a series of delivery segments, each of which is bounded by one of the following events:

- Delivery Start
- Delivery Stop

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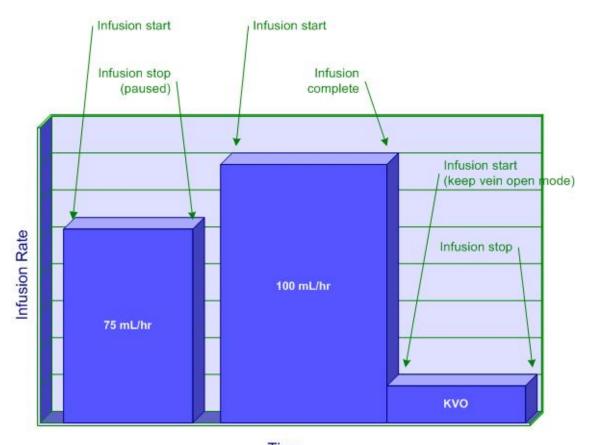
365

• Delivery Complete

There are also several other operational events not related to fluid delivery:

- Communication Status Change communication between pump and gateway is lost or resumed
- Program Cleared pump settings are cleared (indicating that a new program will be initiated)

- Auto-Program Cleared an auto-program was received on the pump but the programmed settings were cleared on the pump prior to starting delivery
- Patient ID Change
- Patient Weight Change
- 380 The following diagram illustrates a typical scenario where a bag of fluid is infused and a rate change is made:
 - An infusion is started at 75 mL/hr. A volume to be infused is programmed (not shown).
 - After a period of time the infusion is stopped (paused), perhaps in order to move the patient.
 - The infusion is resumed at 100 mL/hr.
- The programmed volume to be infused is met (delivery is complete).
 - Pump switches to KVO (keep vein open) mode.
 - Pump is stopped.



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Time Figure X.1-1: Infusion with a Rate Change

X.1.1 Event Message – PCD-10 Communicate Infusion Event Data

The structure of the message differs from the PCD-01 message (ORU^R01) in the following ways

- MSH-9 contains a new trigger event code assigned for infusion event data.
- MSH-21.3 contains the PCD-10 unique profile identifier. The OID identifier assigned to PCD-10 is "1.3.6.1.4.1.19376.1.6.1.10.1"

Each PCD-10 message contains only information relevant to the specific device and channel on which the event occurred. Each PCD-10 message contains a single event. Only information pertinent to the event is included.

400 X.1.2 Infusion Pump Events

Event **MDC Code** Required Containment by Profile Level Delivery Delivery Start MDCX_EVT_PUMP_DELIV_START Yes Channel* Delivery Delivery Stop MDCX EVT PUMP DELIV STOP Yes Channel Delivery **Delivery Complete** MDCX EVT PUMP DELIV COMP Yes Channel^{*} **Communication Status** MDCX EVT COMM STATUS CHANGE TBD No Change Program Cleared MDCX EVT PUMP PROG CLEARED TBD No MDCX_EVT_PUMP_AUTO_PROG_CLEARED TBD Auto-Program Cleared No Patient Change MDCX EVT PATIENT CHANGE No MDS Patient ID Change MDCX EVT PATIENT ID CHANGE TBD No Patient Weight Change MDCX EVT PATIENT WEIGHT CHANGE TBD No

Table X.1.2-1: Infusion Pump Events

*Note: Delivery channel MDC expressed notation is:

MDC_DEV_PUMP_INFUS_VMD / MDC_DEV_PUMP_INFUS_CHAN_DELIVERY

405 X.1.2.1 Infusion Event Parameters

The following parameters will be used when reporting infusion events.

Parameter	MDC Code	Notes
Drug Name	MDC_DRUG_NAME_TYPE	
Drug Concentration	MDC_CONC_DRUG	
Pump Mode	MDC_PUMP_MODE	
Pump Status	MDC_PUMP_STAT	
Pump Event	MDCX_ATTR_EVT_COND	Refer to table in section 1.2.1.2 for list of events
Rate	MDC_FLOW_FLUID_PUMP	Rate (source and delivery channel)
Dose Rate	MDC_RATE_DOSE	Dose (source channel only) Used when dosing is not in mL/hr
Volume Programmed	MDC_VOL_FLUID_TBI	Volume amount to be infused (VTBI); programmed manually by user or from PCD-03
Volume Remaining	MDC_VOL_FLUID_TBI_REMAIN	Amount of the programmed volume that is still to be infused
Volume Delivered	MDC_VOL_FLUID_DELIV	Fluid volume delivered over the last delivery segment (i.e. since the last DELIV_START)
		Note: This amount is associated to a single channel or line (i.e., drug) – no accumulation is made across channels or lines (e.g., a bolus on top of a continuous delivery on channel A will still have its own volume delivered amounts).
Cumulative Volume Delivered	MDC_VOL_FLUID_DELIV_TOTAL_SET	A counter for volume delivered tha can be reset differently depending on manufacturer and model. For example, it may be reset manually by the clinician ("Clear shift totals") or when a new patient and/or drug are selected.
		Note: each vendor will need to outline the conditions under which this value is reset, (e.g., manually, new patient, new drug, new care area) as well as how it is reported in various modes (bolus, multi- step). Because of current differences by vendor and model, this attribute is considered optional in all pump events.
Time Remaining	MDC_TIME_PD_REMAIN	
Patient Height	MDC_ATTR_PT_HEIGHT	
Patient Weight	MDC_ATTR_PT_WEIGHT	
BSA (Body Surface Area)	MDC_AREA_BODY_SURF_ACTUAL	

410 The following tables outlines the level of containment and the required and optional attributes for each event.

ATTRIBUTE	CHANNEL (S)ource, (D)elivery	MDCX_EVT_PU MP_DELIV_STA RT	MDCX_EVT_PU MP_DELIV_STO P	MDCX_EVT_P UMP_DELIV_C OMP
Drug Name	S	R	R	R
Concentration	S	0	0	0
Pump Mode	D	R	R	R
Pump Status	D	R	R	R
Rate	D	R	R	R
Kale	S	0	0	0
Dose Rate	S	0	0	0
Volume Programmed	S	0	0	0
Volume Remaining	S	R	R	R
Volume Delivered	S	0	R	R
Cumulative Volume Delivered	S	0	0	0
Time Remaining	S	0	0	0
Patient Height	S (or Device level)	0	0	0
Patient Weight	S (or Device level)	0	0	0
BSA (Body Surface Area)	S (or Device level)	0	0	0
<status enumeration: online, offline></status 	N/A	N/A	N/A	N/A
<event time<br="">stamp></event>	N/A	N/A	N/A	N/A

Table X.1.2.1-2: Infusion Pump Delivery Events Containment and Attributes

Table X.1.2.1-3: Infusion Pump Miscellaneous Events Containment and Attributes

ATTRIBUTE	CHANNEL (S)ource, (D)elivery	MDCX_EVT_ COMM_STATUS_ CHANGE	MDCX_EVT_PUMP_ PROG_CLEARED	MDCX_EVT_PUMP_ AUTO_PROG_ CLEARED
Drug Name	S	N/A	0	0
Concentration	S	N/A	0	0

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ATTRIBUTE	CHANNEL (S)ource, (D)elivery	MDCX_EVT_ COMM_STATUS_ CHANGE	MDCX_EVT_PUMP_ PROG_CLEARED	MDCX_EVT_PUMP_ AUTO_PROG_ CLEARED
Pump Mode	D	N/A	0	0
Pump Status	D	N/A	0	0
Rate	D	N/A	0	0
Kale	S	N/A	0	0
Dose Rate	S	N/A	0	0
Volume Programmed	S	N/A	0	0
Volume Remaining	S	N/A	N/A	0
Volume Delivered	S	N/A	N/A	0
Cumulative Volume Delivered	S	N/A	0	0
Time Remaining	S	N/A	0	0
Patient Height	S (or Device level)	N/A	0	0
Patient Weight	S (or Device level)	N/A	0	0
BSA (Body Surface Area)	S (or Device level)	N/A	0	0
<status enumeration: online, offline></status 	N/A	R	R	R
<event time<br="">stamp></event>	N/A	R	R	R

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The following table describes the mapping of clinical scenarios to pump events. The term "delivery segment" refers to the period between a MDCX_EVT_PUMP_DELIV_START event and the next MDCX_EVT_PUMP_DELIV_STOP or MDCX_EVT_PUMP_DELIV_COMP event.

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Note: Additional clinical scenarios will be added to this table as they are identified.

Clinical		_	
Scenario	PCD-10 Event	Parameters	Discussion
New	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	Depending on pump
infusion	START	Status=pump-status-infusing	make/model, Rate

Table X.1.2.1-4: Clinical Scenarios

Clinical Scenario	PCD-10 Event	Parameters	Discussion
start,		Rate(source)=programmed rate	may not be specific to KVO rate and volume
followed by eventual		Rate(delivery)=programmed rate	infused may continue to increase after the
transition to		Dose Rate=programmed dose rate	
KVO, followed by		Volume Programmed=volume programmed	transition to KVO even though the VTBI
transition		Volume Remaining=volume programmed	has been met
from KVO		Volume Delivered=0	
to paused		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
	COMP	Status=pump-status-vtbi-complete	
		Rate(source)=programmed rate	
		Rate(delivery)=0	
		Dose Rate=programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=0	
		Volume Delivered= volume programmed	
		Cumulative Volume Delivered= volume programmed	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-continuous	
	START	Status=pump-status-kvo	
		Rate(source)=KVO rate	
		Rate(delivery)=KVO rate	
		Dose Rate=n/a	
		Volume Programmed=0	
		Volume Remaining=0	
		Volume Delivered=0	
		Cumulative Volume Delivered=volume programmed	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-continuous	
	STOP	Status=pump-status-paused	
		Rate(source)=KVO rate	
		Rate(delivery)=0	
		Dose Rate=n/a	
		Volume Programmed=0	
		Volume Remaining=0	
		Volume Delivered= volume delivered since last DELIV_START	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		Cumulative Volume Delivered=volume programmed plus the amount delivered during KVO	
		Time Remaining=0	
Start/restart	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
an infusion,	START	Status=pump-status-infusing	
followed by pausing the		Rate(source)=programmed rate	
running	ng	Rate(delivery)=programmed rate	
infusion		Dose Rate=programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=volume remaining	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
	STOP	Status=pump-status-paused	
		Rate(source)=programmed rate	
		Rate(delivery)=0	
		Dose Rate=programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=volume remaining	
		Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
Rate	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
Change (NOTE:	STOP	Status=pump-status-paused	
events		Rate(source)=old programmed rate	
associated		Rate(delivery)=0	
with the start of the		Dose Rate=old programmed dose rate	
infusion at		Volume Programmed=volume programmed	
original rate and pausing		Volume Remaining=volume remaining	
or completion		Volume Delivered= volume delivered since last DELIV_START	
at the new rate are not		Cumulative Volume Delivered=sum of "Volume Delivered" values across all	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
shown)		segments for the delivery, including the one just completed	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
	START	Status=pump-status-infusing	
		Rate(source)=new programmed rate	
		Rate(delivery)=new programmed rate	
		Dose Rate=new programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=volume remaining	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
Piggyback	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	DELIV_STOP – Used if the pump is switching from primary to piggyback.
start,	STOP	Status=pump-status-paused	
followed by piggyback		Rate(source)=primary rate	
end,		Rate(delivery)=0	Not needed if starting
followed by resumption		Dose Rate=primary dose rate	piggyback from a pause or stop.
of the primary		Volume Programmed=primary volume programmed	pause of stop.
infusion (this		Volume Remaining=primary volume remaining	•
assumes the pump will revert to the		Volume Delivered= volume delivered since last DELIV_START	
primary rate once piggyback VTBI is		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the primary delivery, including the one just completed	
achieved)		Time Remaining=calculated from Volume Remaining and Rate(source)	
(NOTE:	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-piggyback]
events associated	START	Status=pump-status-infusing	
with the		Rate(source)=piggyback programmed rate	
start of the		Rate(delivery)=piggyback programmed rate	
primary infusion		Dose Rate=piggyback dose rate	
prior to the piggyback		Volume Programmed=piggyback volume programmed	
and completion		Volume Remaining=piggyback volume programmed	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
of the		Volume Delivered=0	
primary infusion		Cumulative Volume Delivered=0	
after the piggyback		Time Remaining=calculated from Volume Remaining and Rate(source)	
are not shown)	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-piggyback	
SHOWIT	COMP	Status=pump-status-vtbi-complete	
		Rate(source)=piggyback programmed rate	
		Rate(delivery)=0	
		Dose Rate=piggyback dose rate	
		Volume Programmed=piggyback volume programmed	
		Volume Remaining=0	
		Volume Delivered=volume delivered since last piggyback DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the piggyback delivery, including the one just completed	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_ START	Mode=pump-mode-*	
		Status=pump-status-infusing	
		Rate(source)=primary rate	
		Rate(delivery)=primary rate	
		Dose Rate=primary dose rate	
		Volume Programmed=primary volume programmed	
		Volume Remaining=primary volume remaining	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the primary delivery	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
Bolus start, followed by bolus end, followed by	MDCX_EVT_PUMP_DELIV_ STOP	Mode=pump-mode-*	DELIV_STOP – Used
		Status=pump-status-paused	if the pump is switching from
		Rate(source)=continuous rate	continuous to bolus.
resumption		Rate(delivery)=0	Not needed if starting
of continuous		Dose Rate=continuous dose rate	bolus from a pause or stop.
rate after the bolus (this		Volume Programmed=continuous volume programmed	
assumes the pump will		Volume Remaining=continuous volume remaining	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
revert to the continuous		Volume Delivered=continuous volume delivered since last DELIV_START	
rate once the bolus VTBI is achieved)		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the continuous delivery, including the one just completed	
(NOTE:		Time Remaining=calculated from Volume Remaining and Rate(source)	
events associated	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-bolus	
with the	START	Status=pump-status-infusing	
start of the continuous		Rate(source)=bolus programmed rate	
infusion		Rate(delivery)=bolus programmed rate	
prior to the		Dose Rate=bolus dose rate	
bolus and completion of the		Volume Programmed=bolus volume programmed	
continuous infusion		Volume Remaining=bolus volume programmed	
after the		Volume Delivered=0	
bolus completes are not shown)		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the continuous delivery and any previously completed boluses	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_ STOP	Mode=pump-mode-bolus	
		Status=pump-status-paused	
		Rate(source)=bolus programmed rate	
		Rate(delivery)=0	
		Dose Rate=bolus dose rate	
		Volume Programmed=bolus volume programmed	
		Volume Remaining=0	
		Volume Delivered=bolus volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the bolus, including the one just completed, plus the sum of the "Volume Delivered" values across all segments for the continuous delivery	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_ START	Mode=pump-mode-*	
		Status=pump-status-infusing	
		Rate(source)= continuous rate	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		Rate(delivery)= continuous rate	
		Dose Rate= continuous dose rate	
		Volume Programmed= continuous volume programmed	
		Volume Remaining= continuous volume remaining	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the continuous delivery and any boluses	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
Multi-step	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-multi-step	The transition is
start, followed by	START	Status=pump-status-infusing	handled like a rate
multi-step		Rate(source)=programmed rate for step 1	change
transition,		Rate(delivery)=programmed rate for step 1	
followed by multi-step		Dose Rate=programmed dose rate for step 1	
stop		Volume Programmed=volume programmed for step 1	
		Volume Remaining=volume programmed for step 1	
		Volume Delivered=0	
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-multi-step	
	STOP	Status=pump-status-paused	
		Rate(source)= programmed rate for step n	
		Rate(delivery)=0	
		Dose Rate= programmed dose rate for step n	
		Volume Programmed=volume programmed for step n	
		Volume Remaining=0	
		Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-multi-step	
	START	Status=pump-status-infusing	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		Rate(source)=programmed rate for step n+1	
		Rate(delivery)=programmed rate for step n+1	
		Dose Rate=programmed dose rate for step n+1	
		Volume Programmed=volume programmed for step n+1	
		Volume Remaining=volume programmed for step n+1	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-multi-step	
	STOP	Status=pump-status-paused	
		Rate(source)= programmed rate for current step	
		Rate(delivery)=0	
		Dose Rate= programmed dose rate for current step	
		Volume Programmed=volume programmed for current step	
		Volume Remaining=0	
		Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	
Intermittent	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-multi-dosing	
step start, followed by	START	Status=pump-status-infusing	
intermittent step stop		Rate(source)=programmed rate for step n	
		Rate(delivery)=programmed rate for step n	
		Dose Rate=programmed dose rate for step n	
		Volume Programmed=volume programmed for step n	
		Volume Remaining=volume programmed for step n	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-multi-dosing	
	STOP	Status=pump-status-paused	
		Rate(source)= programmed rate for current step	
		Rate(delivery)=0	
		Dose Rate= programmed dose rate for current step	
		Volume Programmed=volume programmed for current step	
		Volume Remaining=0	
		Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	
Loading	MDCX_EVT_PUMP_DELIV_ START	Mode=pump-mode-loading-dose	
dose start, followed by		Status=pump-status-infusing	
loading dose		Rate(source)=loading dose programmed rate	
end,		Rate(delivery)=loading dose programmed rate	
followed by start of		Dose Rate=loading dose dose rate	
continuous (this assumes the pump will start at the continuous rate once the loading dose VTBI is achieved) (NOTE: the event associated with the completion of the		Volume Programmed=loading dose volume programmed	
		Volume Remaining=loading dose volume programmed	
		Volume Delivered=0	
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_ STOP	Mode=pump-mode-loading-dose	
		Status=pump-status-paused	
		Rate(source)=loading dose programmed rate	
		Rate(delivery)=0	
		Dose Rate=loading dose dose rate	
continuous infusion after the	infusion after the polus	Volume Programmed=loading dose volume programmed	
bolus		Volume Remaining=0	
completes is not shown)		Volume Delivered=loading dose volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		segments for the loading dose, including the one just completed	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
	START	Status=pump-status-infusing	
		Rate(source)=continuous rate	
		Rate(delivery)=continuous rate	
		Dose Rate=continuous dose rate	
		Volume Programmed=continuous volume programmed	
		Volume Remaining=continuous volume remaining	
		Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the loading dose	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
Infusion Stopped Due to Alarm			Same as "Pause a running infusion" scenario
Auto-restart after alarm			e.g., occlusion resolved or AIL
resolved			Same as "Start/restart an infusion" scenario
Nurse restart after alarm resolved			Same as "Start/restart an infusion" scenario
Nurse changes VTBI			e.g., bag change, hourly check, etc.
			Same as "Pause a running infusion" case followed by "Start/restart an infusion" case
Ramp/taper	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-ramp-taper	
start, followed by	START	Status=pump-status-infusing	
ramp/taper rate change,		Rate(source)=programmed rate for step 1	
		Rate(delivery)=programmed rate for step 1	
followed by ramp/taper		Dose Rate=programmed dose rate for step 1	
stop		Volume Programmed=volume programmed for entire ramp/taper delivery	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		Volume Remaining=volume programmed for entire ramp/taper delivery	
		Volume Delivered=0	
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-ramp-taper	
	STOP	Status=pump-status-paused	
		Rate(source)= programmed rate for step n	
		Rate(delivery)=0	
		Dose Rate= programmed dose rate for step n	
		Volume Programmed=volume programmed for entire ramp/taper delivery	
		Volume Remaining=volume remaining for entire ramp/taper delivery	
		Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	
	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-ramp-taper	
	START	Status=pump-status-infusing	
		Rate(source)=programmed rate for step n+1	
		Rate(delivery)=programmed rate for step n+1	
		Dose Rate=programmed dose rate for step n+1	
		Volume Programmed=volume programmed for entire ramp/taper delivery	
		Volume Remaining=volume remaining for entire ramp/taper delivery	
	MDCX_EVT_PUMP_DELIV_ STOP	Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
		Mode=pump-mode-ramp-taper	
		Status=pump-status-paused	
		Rate(source)= programmed rate for step n	
		Rate(delivery)=0	
		Dose Rate= programmed dose rate for step n	
		Volume Programmed=volume programmed for	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		entire ramp/taper delivery	
		Volume Remaining=volume remaining for entire ramp/taper delivery	
		Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	
Patient ID Change	MDCX_EVT_PATIENT_ID_ CHANGE	New Patient ID=PID.3	
New Weight (same patient)	MDCX_EVT_PATIENT_ WEIGHT_CHANGE	Weight=New Patient Weight	e.g., when weight changed during an active weight-based infusion
Switch to	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	The library-based
library- based	STOP	Status=pump-status-paused	infusion is considered a new delivery
infusion		Rate(source)=rate of non-library infusion	a new derivery
(NOTE:		Rate(delivery)=0	
events		Dose Rate=dose rate of non-library infusion	
associated with the start of the		Volume Programmed=volume programmed for non-library infusion	
non-library infusion and		Volume Remaining=volume remaining of non- library infusion	
the completion		Volume Delivered= volume delivered since last DELIV_START	
of the library- based infusion are not shown)		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the non-library delivery, including the one just completed	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_ START	Mode=pump-mode-*	
		Status=pump-status-infusing	
		Rate(source)=rate of library-based infusion	
		Rate(delivery)=programmed rate of library- based infusion	
		Dose Rate=dose rate of library-based infusion	
		Volume Programmed=volume programmed for library-based infusion	
		Volume Remaining=volume programmed for library-based infusion	
		Volume Delivered=0	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(source)	
Switch from	MDCX_EVT_PUMP_DELIV_	Mode=pump-mode-*	
library- based	STOP	Status=pump-status-paused	
infusion		Rate(source)=rate of library infusion	
(NOTE:		Rate(delivery)=0	
events		Dose Rate=dose rate of library infusion	
associated with the start of the		Volume Programmed=volume programmed for library infusion	
library- based		Volume Remaining=volume remaining of library infusion	
infusion and the		Volume Delivered= volume delivered since last DELIV_START	
completion of the non- library- based infusion are		Cumulative Volume Delivered=sum of "Volume Delivered" values across all segments for the library delivery, including the one just completed	
not shown)		Time Remaining=calculated from Volume Remaining and Rate(source)	
	MDCX_EVT_PUMP_DELIV_ START	Mode=pump-mode-*	
		Status=pump-status-infusing	
		Rate(source)=rate of non-library-based infusion	
		Rate(delivery)=programmed rate of non- library-based infusion	
		Dose Rate=dose rate of non-library-based infusion	
		Volume Programmed=volume programmed for non-library-based infusion	
		Volume Remaining=volume programmed for non-library-based infusion	
		Volume Delivered=0	
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(source)	

X.1.2.2 Infusion Event Sample Messages

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Delivery Start Event

430	Derively Start Event MSH ^~\& PAT_DEVICE_PUMPVENDOR^0003B1000000001^EUI- 64 PAT_DEVICE_PUMPVENDOR^0003B1000000001^EUI-64 20100706154719- 0800 ORU^R42^ORU_R01 PCD10_20100706154719 P 2.6 NE AL EN^English^IS0659 ^^1.3.6.1.4.1.19376.1.6.1.10.1^IS0
	PID 1 HO60002^^^PAT_DEVICE_PUMPVENDOR^MR Darwin^Charles^^^^L 196201010000000000 M
	PV1 1 I 3 West ICU^3002^1
	OBR 1 AB12345^PCD-03 CD12345^HL7^ACDE48234567ABCD^EUI-64 2222^Dopamine 20100706154704-0800
435	OBX 1 CWE 0^MDCX_ATTR_EVT_COND^MDC 1.1.1.100 0^MDCX_EVT_PUMP_DELIV_START^MDC R 20100706154704-0800 20100706154704-0800
	OBX 2 69985^MDC_DEV_PUMP_INFUS_MDS^MDC 1.0.0.0 X Pump002^^0003B100000000 1^EUI-64
	OBX 3 69986^MDC_DEV_PUMP_INFUS_VMD^MDC 1.1.0.0 X
440	OBX 4 126978^MDC_DEV_PUMP_INFUS_CHAN_DELIVERY^MDC 1.1.1.0 X
	OBX 5 ST 184508^MDC_PUMP_STAT^MDC 1.1.1.101 ^pump-status- infusing R 20100706154704-0800 20100706154704-0800
	OBX 6 ST 184504^MDC_PUMP_MODE^MDC 1.1.1.102 ^pump-mode- continuous R 20100706154704-0800 20100706154704-0800
445	OBX 7 NM 157784^MDC_FLOW_FLUID_PUMP^MDC 1.1.1.103 24.9 265266^MDC_DIM_MILLI_L_PER_HR^M DC^mL/h^mL/h^UCUM R 20100706154704-0800 20100706154704-0800
	OBX 8 126977^MDC_DEV_PUMP_INFUS_CHAN_SOURCE^MDC 1.1.2.0 X
	OBX 9 ST 184330^MDC_DRUG_NAME_TYPE^MDC 1.1.2.201 Dopamine R 20100706154704- 0800 20100706154704-0800
450	OBX 10 NM 157760^MDC_CONC_DRUG^MDC 1.1.2.202 1.6 264306^MDC_DIM_MILLI_G_PER_ML^MDC^mg/ mL^mg/mL^UCUM R 20100706154704-0800 20100706154704-0800
	OBX 11 NM 157924^MDC_RATE_DOSE^MDC 1.1.2.203 7 265619^MDC_DIM_MICRO_G_PER_KG_PER_MIN^M DC^ug/kg/min^ug/kg/min^UCUM R 20100706154704-0800 20100706154704-0800
455	OBX 12 NM 157784^MDC_FLOW_FLUID_PUMP^MDC 1.1.2.204 24.9 265266^MDC_DIM_MILLI_L_PER_HR^ MDC^mL/h^mL/h^UCUM R 20100706154704-0800 20100706154704-0800
	OBX 13 NM 999999^MDC_VOL_FLUID_TBI^MDC 1.1.2.205 250 263762^MDC_DIM_MILLI_L^MDC^mL^mL^ UCUM R 20100706154704-0800 20100706154704-0800
	OBX 14 NM 157872^MDC_VOL_FLUID_TBI_REMAIN^MDC 1.1.2.206 250 263762^MDC_DIM_MILLI_L^MDC ^mL^mL^UCUM R 20100706154704-0800 20100706154704-0800
460	OBX 15 NM 157864^MDC_VOL_FLUID_DELIV^MDC 1.1.2.207 0 263762^MDC_DIM_MILLI_L^MDC^mL^mL^ UCUM R 20100706154704-0800 20100706154704-0800
	OBX 16 NM 157888^MDC_VOL_FLUID_DELIV_TOTAL_SET^MDC 1.1.2.208 0 263762^MDC_DIM_MILLI_L^ MDC^mL^mL^UCUM R 20100706154704-0800 20100706154704-0800
465	OBX 17 NM 68063^MDC_ATTR_PT_WEIGHT^MDC 1.1.2.209 95 263875^MDC_DIM_KILO_G^MDC^kg^kg^UC UM R 20100706154704-0800 20100706154704-0800

Delivery Stop Event

MSH|^~\&|PAT DEVICE PUMPVENDOR^0003B1000000001^EUI-64|PAT DEVICE PUMPVENDOR^0003B1000000001^EUI-64|||20100706163708-0800||ORU^R42^ORU R01|PCD10 20100706163708|P|2.6|||NE|AL|||EN^English^ISO659|| ^ 470 ^1.3.6.1.4.1.19376.1.6.1.10.1^1SO PID|1||HO60002^^^PAT DEVICE PUMPVENDOR^MR||Darwin^Charles^^^^L|196201010000000000|M PV1|1|I|3 West ICU^3002^1 OBR|1|AB12345^PCD-03|CD12345^HL7^ACDE48234567ABCD^EUI-64|2222^Dopamine |||20100706163629-0800 475 OBX|1|CWE|0^MDCX ATTR EVT COND^MDC|1.1.1.100| 0^MDCX EVT PUMP DELIV STOP^MDC|||||R||20100706163629-0800||||20100706163629-0800 OBX|2||69985^MDC DEV PUMP INFUS MDS^MDC|1.0.0.0||||||X|||||Pump002^^0003B100000000 1^EUI-64 OBX|3||69986^MDC DEV PUMP INFUS VMD^MDC|1.1.0.0||||||X 480 OBX|4||126978^MDC DEV PUMP INFUS CHAN DELIVERY^MDC|1.1.1.0|||||||X OBX|5|ST|184508^MDC PUMP STAT^MDC|1.1.1.101|^pump-statuspaused|||||R||20100706163629-0800||||20100706163629-0800 OBX | 6 | ST | 184504^MDC PUMP MODE^MDC | 1.1.1.102 | ^pump-modecontinuous||||||R||20100706163629-0800||||20100706163629-0800 485 OBX|7|NM|157784^MDC FLOW FLUID PUMP^MDC|1.1.1.103|0|265266^MDC DIM MILLI L PER HR^MDC^ mL/h^mL/h^UCUM|||||R||20100706163629-0800||||20100706163629-0800 OBX|8||126977^MDC_DEV_PUMP_INFUS_CHAN_SOURCE^MDC|1.1.2.0|||||||X OBX|9|ST|184330^MDC DRUG NAME TYPE^MDC|1.1.2.201|Dopamine|||||R|||20100706163629-0800|||||20100706163629-0800 490 OBX|10|NM|157760^MDC_CONC_DRUG^MDC|1.1.2.202|1.6|264306^MDC_DIM_MILLI G PER ML^MDC^mg/ mL^mg/mL^UCUM|||||R||20100706163629-0800||||20100706163629-0800 OBX|11|NM|157924^MDC RATE DOSE^MDC|1.1.2.203|7|265619^MDC DIM MICRO G PER KG PER MIN^M DC^ug/kg/min^ug/kg/min^UCUM||||R||20100706163629-0800||||20100706163629-0800 OBX|12|NM|157784^MDC FLOW FLUID PUMP^MDC|1.1.2.204|24.9|265266^MDC DIM MILLI L PER HR^ 495 MDC^mL/h^mL/h^UCUM||||||||||||||20100706163629-0800|||||20100706163629-0800 OBX|13|NM|999999^MDC VOL FLUID TBI^MDC|1.1.2.205|250|263762^MDC DIM MILLI L^MDC^mL^mL^ UCUM|||||R||20100706163629-0800||||20100706163629-0800 OBX|14|NM|157872^MDC VOL FLUID TBI REMAIN^MDC|1.1.2.206|224.4|263762^MDC DIM MILLI L^M DC^mL^mL^UCUM|||||R||20100706163629-0800||||20100706163629-0800 500 OBX|15|NM|157864^MDC VOL FLUID DELIV^MDC|1.1.2.207|25.6|263762^MDC DIM MILLI L^MDC^mL^ mL^UCUM|||||R||20100706163629-0800||||20100706163629-0800 OBX|16|NM|999999^MDC VOL FLUID DELIV TOTAL SET^MDC|1.1.2.208|25.6|263762^MDC DIM MILLI L^MDC^mL^mL^UCUM|||||R||20100706163629-0800||||20100706163629-0800 OBX|17|NM|68063^MDC ATTR PT WEIGHT^MDC|1.1.2.209|95|263875^MDC DIM KILO G^MDC^kg^kg^UC 505 UM||||R||20100706163629-0800||||20100706163629-0800

Delivery Complete Event

MSH|^~\&|PAT DEVICE PUMPVENDOR^0003B1000000001^EUI-510 64|PAT DEVICE PUMPVENDOR^0003B1000000001^EUI-64|||20100707023629-0800||ORU^R42^ORU R01|PCD10 20100706163708|P|2.6|||NE|AL|||EN^English^ISO659|| ^ ^1.3.6.1.4.1.19376.1.6.1.10.1^1SO PID|1||HO60002^^^PAT DEVICE PUMPVENDOR^MR||Darwin^Charles^^^^L|196201010000000000|M PV1|1|I|3 West ICU^3002^1 515 OBR|1|AB12345^PCD-03|CD12345^HL7^ACDE48234567ABCD^EUI-64|2222^Dopamine |||20100707023629-0800 OBX|1|CWE|0^MDCX ATTR EVT COND^MDC|1.1.1.100| 0^MDCX EVT PUMP DELIV COMP^MDC|||||R||20100707023629-0800||||20100707023629-0800 OBX|2||69985^MDC DEV PUMP INFUS MDS^MDC|1.0.0.0||||||X|||||Pump002^^0003B100000000 520 1^EUI-64 OBX|3||69986^MDC DEV PUMP INFUS VMD^MDC|1.1.0.0||||||X OBX|4||126978^MDC DEV PUMP INFUS CHAN DELIVERY^MDC|1.1.1.0|||||||X OBX|5|ST|184508^MDC PUMP STAT^MDC|1.1.1.101|^pump-status-vtbicomplete|||||R||20100707023629-0800||||20100707023629-0800 525 OBX | 6 | ST | 184504^MDC PUMP MODE^MDC | 1.1.1.102 | ^pump-modecontinuous||||||R||20100707023629-0800||||20100707023629-0800 OBX|7|NM|157784^MDC FLOW FLUID PUMP^MDC|1.1.1.103|0|265266^MDC DIM MILLI L PER HR^MDC^ mL/h^mL/h^UCUM|||||R||20100707023629-0800||||20100707023629-0800 OBX|8||126977^MDC DEV PUMP INFUS CHAN SOURCE^MDC|1.1.2.0|||||||X 530 OBX|9|ST|184330^MDC DRUG NAME TYPE^MDC|1.1.2.201|Dopamine|||||R||20100707023629-0800|||||20100707023629-0800 OBX|10|NM|157760^MDC_CONC_DRUG^MDC|1.1.2.202|1.6|264306^MDC DIM MILLI G PER ML^MDC^mg/ mL^mg/mL^UCUM|||||R||20100707023629-0800||||20100707023629-0800 OBX|11|NM|157924^MDC RATE DOSE^MDC|1.1.2.203|7|265619^MDC DIM MICRO G PER KG PER MIN^M 535 DC^ug/kg/min^ug/kg/min^UCUM||||R||20100707023629-0800||||20100707023629-0800 OBX|12|NM|157784^MDC FLOW FLUID PUMP^MDC|1.1.2.204|24.9|265266^MDC DIM MILLI L PER HR^ MDC^mL/h^mL/h^UCUM|||||R||20100707023629-0800||||20100707023629-0800 OBX|13|NM|999999^MDC VOL FLUID TBI^MDC|1.1.2.205|250|263762^MDC DIM MILLI L^MDC^mL^mL^ UCUM||||R||20100707023629-0800||||20100707023629-0800 540 OBX|14|NM|157872^MDC VOL FLUID TBI REMAIN^MDC|1.1.2.206|0.0|263762^MDC DIM MILLI L^MDC ^mL^mL^UCUM|||||R|||20100707023629-0800|||||20100707023629-0800 OBX|15|NM|157864^MDC VOL FLUID DELIV^MDC|1.1.2.207|224.4|263762^MDC DIM MILLI L^MDC^mL ^mL^UCUM|||||R|||20100707023629-0800|||||20100707023629-0800 OBX|16|NM|999999^MDC VOL FLUID DELIV TOTAL SET^MDC|1.1.2.208|250.0|263762^MDC DIM MILL 545 I L^MDC^mL^UCUM|||||R||20100707023629-0800||||20100707023629-0800 OBX|17|NM|68063^MDC ATTR PT WEIGHT^MDC|1.1.2.209|95|263875^MDC DIM KILO G^MDC^kg^kg^UC

UM||||R||20100707023629-0800||||20100707023629-0800