## **Integrating the Healthcare Enterprise**



# IHE Patient Care Device Technical Framework Supplement

# Infusion Pump Event Communication (IPEC)

# Trial Implementation

20 Date: June 26, 2014

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**Please verify you have the most recent version of this document.** See <a href="here">here</a> for Trial Implementation and Final Text versions and <a href="here">here</a> for Public Comment versions.

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## **Foreword**

This is a supplement to the IHE Patient Care Device Technical Framework 3.0. Each supplement undergoes a process of public comment and trial implementation before being incorporated into the volumes of the Technical Frameworks.

This supplement is published on June 26, 2014 for trial implementation and may be available for testing at subsequent IHE Connectations. The supplement may be amended based 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

http://www.ihe.net/PCD\_Public\_Comments.

This supplement describes changes to the existing technical framework documents.

"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 *Amend section X.X by the following:* 

Where the amendment adds text, make the added text **bold underline**. Where the amendment removes text, make the removed text **bold strikethrough**. When entire new sections are added, introduce with editor's instructions to "add new text" or similar, which for readability are not bolded or underlined.

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General information about IHE can be found at: www.ihe.net.

Information about the IHE Patient Care Device domain can be found at: <a href="mailto:ihe.net/IHE\_Domains">ihe.net/IHE\_Domains</a>.

Information about the organization of IHE Technical Frameworks and Supplements and the process used to create them can be found at: <a href="http://ihe.net/IHE\_Process">http://ihe.net/IHE\_Process</a> and

50 http://ihe.net/Profiles.

The current version of the IHE Patient Care Device Technical Framework can be found at: http://ihe.net/Technical\_Frameworks.

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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

## Introduction

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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.

## **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 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 the Alert Communication Management (ACM) Profile, except that ACM is designed to communicate alarms (physiological and technical) and advisories to a human actor via portable 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 consideration:
  - 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.
  - Possible alignment with the Pharmacy domain through the use of the RAS^O17 message instead of ORU^R42

IHE Patient Care Device Technical Framework Supplement – Infusion Pump Event Communication (IPEC)

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Containment level defined for all events.

# **Volume 1 – Content Profiles**

# 1.7 History of Annual Changes

135 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.
- November 2013 updated profile to reflect the revisions to the 11073-10101a infusion pump model; additional corrections and clarifications made.

# 140 1.n Copyright Permission

No new information.

## 2.1 Dependencies among Integration Profiles

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.

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Add the following section to Section 2.2

## 2.2.X Infusion Pump Event Communication Integration Profile

This document introduces a new profile - Infusion Pump Event Communication. This profile is based on the general observation reporting in the 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

IHE Patient Care Device Technical Framework Supplement – Infusion Pump Event Communication (IPEC)

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.

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Add section X

# X Infusion Pump Event Communication (IPEC) Integration Profile

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#### **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 from devices to information systems which capture the trend of continuously-varying physiological characteristics indicating the patient's clinical status by communicating observations at regular time intervals. 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.

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

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# **Relation of Infusion Pump Event Communication to Alert Communication Management** (ACM) **Profile**

See the Glossary in Volume 1 of the PCD Technical Framework (PCD TF-1) for definitions of the terms Advisory, Alarm, and Alert.

Alert Communication Management has provided expanded formats with additional attributes for alarms and advisories, with emphasis on transmitting the information to specific individuals who need to be notified at the point of care via portable devices. For purposes of this discussion, a distinction is made between events and alerts.

- 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.
- Alerts, which are distinct from events and are intended to engage a response from the clinician, are supported by the Alert 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 Alert 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 of message.

## X.1 Actors/Transactions

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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.

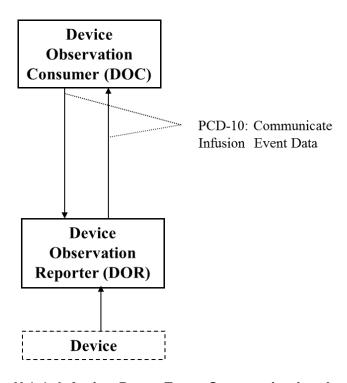


Figure X.1-1: Infusion Pump Event Communication Actor Diagram

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**

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

# X.3 IPEC Actor Groupings and Profile Interactions

None

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## X.4 Infusion Pump Event Communication Process Flow

### X.4.1 Standard Use Cases

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

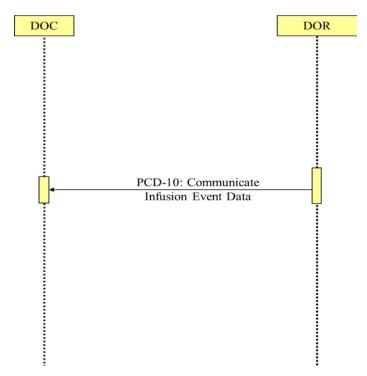


Figure X.4.1.1-1: Basic Process Flow in Infusion Pump Event Communication Profile

# **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**

This integration profile will not add any new actors.

# 275 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 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

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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.

**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**

Add Section 3.10

## 300 3.10 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.

## 3.10.1 Scope

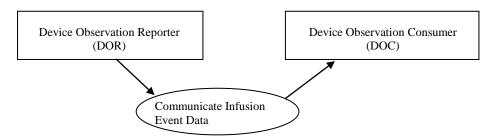
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This transaction is used to communicate infusion event data from:

• A Device Observation Reporter (DOR) to a Device Observation Consumer (DOC).

### 3.10.2 Use Case Roles



**Actor:** Device Observation Reporter

310 **Role:** Sends infusion event data to DOC

**Actor:** Device Observation Consumer

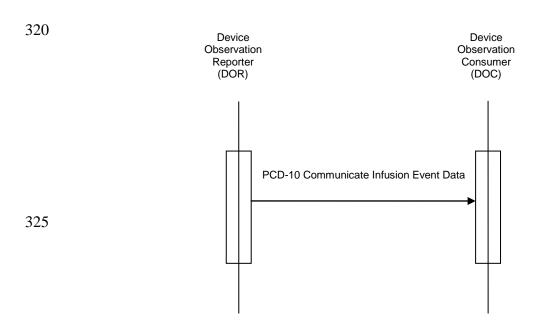
Role: Receives infusion event data from DOR

### 3.10.3 Referenced Standard

• HL7 - Health Level 7 Version 2.6 Ch7 Observation Reporting

• ISO/IEEE 11073-10101 Nomenclature

## 3.10.4 Interaction Diagram



## 3.10.4.1 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.

### 3.10.4.1.1 Trigger Events

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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).

## 3.10.4.1.2 Message Semantics

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

- The ORU^R42^ORU\_R01 message structure provides the mechanism for mapping the hierarchical structure of an IEEE 11073 containment tree to a series of OBX segments. See the discussion of how the containment is represented using a "dotted notation" in field OBX-4 Observation Sub-ID in the PCD Technical Framework Vol. 2 Rev. 3.0 Appendix B, Section B.8.
- See "ISO/IEEE Nomenclature mapping to HL7 OBX-3" in the PCD Technical Framework Vol. 2 Rev. 3.0, Appendix A, Section A.1 for further information on the mapping rules.

## 3.10.4.1.3 Expected Actions

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. 3.0 Appendix G.1.1 Acknowledgment Modes.

# 355 Appendix X Infusion Pump Events

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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 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 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
  - Delivery Complete
- 385 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

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.

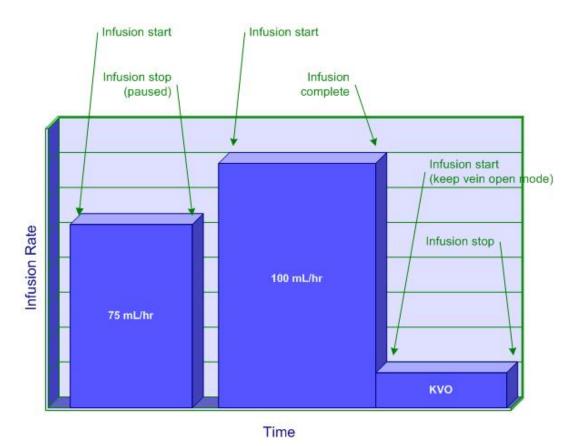


Figure X.1-1: Infusion with a Rate Change

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Rev. 1.4 - 2014-06-26

# 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-9.2 contains a new trigger event code (R42) 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.

## 415 X.1.2 Infusion Pump Events

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**Table X.1.2-1: Infusion Pump Events** 

Event	MDC Code	Required by Profile
Delivery Start	MDC_EVT_PUMP_DELIV_START	Yes
Delivery Stop	MDC_EVT_PUMP_DELIV_STOP	Yes
Delivery Complete	MDC_EVT_PUMP_DELIV_COMP	Yes
Communication Status Change	MDC_EVT_COMM_STATUS_CHANGE	No
Program Cleared	MDC_EVT_PUMP_PROG_CLEARED	No
Auto-Program Cleared	MDC_EVT_PUMP_AUTO_PROG_CLEARED	No
Patient Change	MDC_EVT_PATIENT_CHANGE	No
Patient ID Change	MDC_EVT_PATIENT_ID_CHANGE	No
Patient Weight Change	MDC_EVT_PATIENT_WEIGHT_CHANGE	No

### X.1.2.1 Infusion Event Parameters

Infusion Event Parameters are defined in separate Infusion Pump Model and Infusion Pump Terms documents. Current versions of these documents can be found on the IHE Patient Care

Devices Wiki page entitled "PCD Reference Pages" (http://wiki.ihe.net/index.php?title=Category:PCD\_Reference\_Pages).

The following tables outline the required and optional attributes for each event.

**Table X.1.2.1-1: Infusion Pump Delivery Event Attributes** 

ATTRIBUTE	MDC_EVT_PUMP_ DELIV_START	MDC_EVT_PUMP_ DELIV_STOP	MDC_EVT_PUMP_ DELIV_COMP
Drug Name	R	R	R
Concentration	0	0	0
Current Mode	R	R	R
Pump Status	R	R	R
Rate (delivery)	R	R	R
Rate (non-delivery)	0	0	0
Dose Rate	0	0	0
Volume Programmed	О	О	0
Volume Remaining	$R^1$	$R^1$	$\mathbb{R}^1$
Current Segment Volume Delivered	0	$\mathbb{R}^2$	$R^2$
Cumulative Volume Delivered	0	$R^2$	$R^2$
Time Remaining	0	0	0
Patient Height	0	0	0
Patient Weight	0	0	0
BSA (Body Surface Area)	0	0	0

<sup>&</sup>lt;sup>1</sup>Volume Remaining is Optional when Volume to be infused is not programmed by the user; e.g., for certain infusions using a syringe pump

430 <sup>2</sup>Either Current Segment Volume Delivered or Cumulative Volume Delivered is required

**Table X.1.2.1-2: Infusion Pump Miscellaneous Events Attributes** 

ATTRIBUTE	MDC_EVT_ COMM_STATUS_ CHANGE	MDC_EVT_PUMP_ PROG_CLEARED	MDC_EVT_PUMP_ AUTO_PROG_ CLEARED
Drug Name	N/A	0	0
Concentration	N/A	0	0

ATTRIBUTE	MDC_EVT_ COMM_STATUS_ CHANGE	MDC_EVT_PUMP_ PROG_CLEARED	MDC_EVT_PUMP_ AUTO_PROG_ CLEARED
Pump Mode	N/A	0	0
Pump Status	N/A	0	0
Rate (delivery)	N/A	0	0
Rate (non-delivery)	N/A	0	0
Dose Rate	N/A	0	0
Volume Programmed	N/A	0	0
Volume Remaining	N/A	0	0
Current Segment Volume Delivered	N/A	0	0
Cumulative Volume Delivered	N/A	0	0
Time Remaining	N/A	0	0
Patient Height	N/A	0	0
Patient Weight	N/A	0	0
BSA (Body Surface Area)	N/A	0	0
Communication Status	R	N/A	N/A

The following table describes the mapping of clinical scenarios to pump events. The term "delivery segment" refers to the period between a MDC\_EVT\_PUMP\_DELIV\_START event and the next MDC\_EVT\_PUMP\_DELIV\_STOP or MDC\_EVT\_PUMP\_DELIV\_COMP event.

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

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**Table X.1.2.1-3: Clinical Scenarios** 

Clinical	Clinical BOD 40 Front Borometers			
Scenario	PCD-10 Event	Parameters	Discussion	
New infusion	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	Depending on pump	
start, followed by eventual		Status=pump-status-infusing	make/model, Rate may not be specific to KVO rate and volume infused may continue to increase after the transition to KVO	
transition to		Rate(non-delivery)=programmed rate		
KVO,		Rate(delivery)=programmed rate		
followed by transition from		Dose Rate=programmed dose rate		
KVO to		Volume Programmed=volume programmed	even though the VTBI	
paused		Volume Remaining=volume programmed	has been met	
		Current Segment Volume Delivered=0		
		Cumulative Volume Delivered=0		
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)		
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*		
	COMP	Status=pump-status-not-infusing		
		Rate(non-delivery)=programmed rate		
		Rate(delivery)=0		
		Dose Rate=programmed dose rate		
		Volume Programmed=volume programmed		
		Volume Remaining=0		
		Current Segment Volume Delivered= volume programmed		
		Cumulative Volume Delivered= volume programmed		
		Time Remaining=0		
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-kvo		
	START	Status=pump-status-infusing		
		Rate(non-delivery)=KVO rate		
		Rate(delivery)=KVO rate		
		Dose Rate=n/a		
		Volume Programmed=0		
		Volume Remaining=0		
		Current Segment Volume Delivered=0		
		Cumulative Volume Delivered=volume programmed		
		Time Remaining=0		

Clinical Scenario	PCD-10 Event	Parameters	Discussion
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-kvo	
	STOP	Status=pump-status-not-infusing	
		Rate(non-delivery)=KVO rate	
		Rate(delivery)=0	
		Dose Rate=n/a	
		Volume Programmed=0	
		Volume Remaining=0	
		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=volume programmed plus the amount delivered during KVO	
		Time Remaining=0	
Start/restart an	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	
infusion,	START	Status=pump-status-infusing	
followed by pausing the		Rate(non-delivery)=programmed rate	
running		Rate(delivery)=programmed rate	
infusion		Dose Rate=programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=volume remaining	
		Current Segment Volume Delivered=0	
	MDC_EVT_PUMP_DELIV_ STOP	Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
		Current Mode=pump-mode-*	
		Status=pump-status-not-infusing	
		Rate(non-delivery)=programmed rate	
		Rate(delivery)=0	
		Dose Rate=programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=volume remaining	
		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
Rate Change	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	
(NOTE: events	STOP	Status=pump-status-not-infusing	
associated		Rate(non-delivery)=old programmed rate	
with the start		Rate(delivery)=0	
of the infusion at original rate		Dose Rate=old programmed dose rate	
and pausing or		Volume Programmed=volume programmed	
completion at the new rate		Volume Remaining=volume remaining	
are not shown)		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	
	START	Status=pump-status-infusing	
		Rate(non-delivery)=new programmed rate	
		Rate(delivery)=new programmed rate	
		Dose Rate=new programmed dose rate	
		Volume Programmed=volume programmed	
		Volume Remaining=volume remaining	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	

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

Clinical Scenario	PCD-10 Event	Parameters	Discussion
	MDC_EVT_PUMP_DELIV_ COMP	Current Mode=pump-mode-piggyback	
		Status=pump-status- not-infusing	
		Rate(non-delivery)=piggyback programmed rate	
		Rate(delivery)=0	
		Dose Rate=piggyback dose rate	
		Volume Programmed=piggyback volume programmed	
		Volume Remaining=0	
		Current Segment Volume Delivered=volume delivered since last piggyback DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the piggyback delivery, including the one just completed	
		Time Remaining=0	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	
	START	Status=pump-status-infusing	
		Rate(non-delivery)=primary rate	
		Rate(delivery)=primary rate	
		Dose Rate=primary dose rate	
		Volume Programmed=primary volume programmed	
		Volume Remaining=primary volume remaining	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the primary delivery	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
Bolus start,	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	DELIV_STOP – Used
followed by bolus end,	STOP	Status=pump-status-not-infusing	if the pump is switching from
followed by		Rate(non-delivery)=continuous rate	continuous to bolus.
resumption of		Rate(delivery)=0	Not needed if starting bolus from a pause or stop.
continuous rate after the		Dose Rate=continuous dose rate	
bolus (this assumes the		Volume Programmed=continuous volume programmed	зюр.
pump will revert to the		Volume Remaining=continuous volume remaining	
continuous rate once the bolus VTBI is achieved)		Current Segment Volume Delivered=continuous volume delivered since last DELIV_START	
(NOTE: events associated		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the continuous delivery, including the one just completed	
with the start of the continuous		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
infusion prior	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-clinician-dose	
to the bolus	START	Status=pump-status-infusing	
completion of		Rate(non-delivery)=bolus programmed rate	
the continuous infusion after		Rate(delivery)=bolus programmed rate	
the bolus	e bolus ompletes are  Dose Rate=bolus dose rate Volume Programmed=bolus volume		
completes are not shown)			
		Volume Remaining=bolus volume programmed	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the continuous delivery and any previously completed boluses	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
	MDC_EVT_PUMP_DELIV_ STOP	Current Mode=pump-mode-clinician-dose	
		Status=pump-status-not-infusing	
		Rate(non-delivery)=bolus programmed rate	
		Rate(delivery)=0	
		Dose Rate=bolus dose rate	
		Volume Programmed=bolus volume programmed	
		Volume Remaining=0	
		Current Segment Volume Delivered=bolus volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the bolus, including the one just completed, plus the sum of the "Current Segment Volume Delivered" values across all segments for the continuous delivery	
		Time Remaining=0	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	
	START	Status=pump-status-infusing	
		Rate(non-delivery)= continuous rate	
		Rate(delivery)= continuous rate	
		Dose Rate= continuous dose rate	
		Volume Programmed= continuous volume programmed	
		Volume Remaining= continuous volume remaining	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the continuous delivery and any boluses	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
Multi-step start, followed by multi-step transition, followed by	MDC_EVT_PUMP_DELIV_ START	Current Mode=pump-mode-multi-step	The transition is
		Status=pump-status-infusing	handled like a rate
		Rate(non-delivery)=programmed rate for step 1	change
multi-step stop		Rate(delivery)=programmed rate for step 1	
		Dose Rate=programmed dose rate for step 1	
		Volume Programmed=volume programmed for step 1	
		Volume Remaining=volume programmed for step 1	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-multi-step	
	STOP	Status=pump-status-not-infusing	
		Rate(non-delivery)= 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	
	Current Segment Volume Delivered= volume delivered since last DELIV_START		
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
	MDC_EVT_PUMP_DELIV_ START	Current Mode=pump-mode-multi-step	
		Status=pump-status-infusing	
		Rate(non-delivery)=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	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-multi-step	
	STOP	Status=pump-status-not-infusing	
		Rate(non-delivery)= 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	
		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
Intermittent	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-multi-dosing	
step start, followed by	START	Status=pump-status-infusing	
intermittent step stop		Rate(non-delivery)=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	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-multi-dosing	
	STOP	Status=pump-status-not-infusing	
		Rate(non-delivery)= 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	
		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	

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

Clinical Scenario	PCD-10 Event	Parameters	Discussion
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-*	
	START	Status=pump-status-infusing	
		Rate(non-delivery)=continuous rate	
		Rate(delivery)=continuous rate	
		Dose Rate=continuous dose rate	
		Volume Programmed=continuous volume programmed	
		Volume Remaining=continuous volume remaining	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the loading dose	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
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

Clinical Scenario	PCD-10 Event	Parameters	Discussion
Ramp/taper	MDC_EVT_PUMP_DELIV_ START	Current Mode=pump-mode-ramp-taper	
start, followed by ramp/taper		Status=pump-status-infusing	
rate change,		Rate(non-delivery)=programmed rate for step 1	
ramp/taper		Rate(delivery)=programmed rate for step 1	
stop		Dose Rate=programmed dose rate for step 1	
		Volume Programmed=volume programmed for entire ramp/taper delivery	
		Volume Remaining=volume programmed for entire ramp/taper delivery	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=0	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-ramp-taper	
	STOP	Status=pump-status-not-infusing	
		Rate(non-delivery)= 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	
		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	

Clinical Scenario	PCD-10 Event	Parameters	Discussion
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-ramp-taper	
	START	Status=pump-status-infusing	
		Rate(non-delivery)=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	
		Current Segment Volume Delivered=0	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery prior to this one	
		Time Remaining=calculated from Volume Remaining and Rate(non-delivery)	
	MDC_EVT_PUMP_DELIV_	Current Mode=pump-mode-ramp-taper	
	STOP	Status=pump-status-not-infusing	
		Rate(non-delivery)= 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	
		Current Segment Volume Delivered= volume delivered since last DELIV_START	
		Cumulative Volume Delivered=sum of "Current Segment Volume Delivered" values across all segments for the delivery, including the one just completed	
		Time Remaining=0	
Patient ID Change	MDC_EVT_PATIENT_ID_ CHANGE	New Patient ID=PID.3	
New Weight (same patient)	MDC_EVT_PATIENT_ WEIGHT_CHANGE	Weight=New Patient Weight	e.g., when weight changed during an active weight-based infusion

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

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

# X.1.2.2 Infusion Event Sample Message

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# **Delivery Start Event**

	MSH ^~\& PAT_DEVICE_PUMPVENDOR^0003B10000000001^EUI-64 PAT_DEVICE_PUMPVENDOR^0003B1000000001^EUI-
	64  20100706154719-0800  ORU^R42^ORU_R01 PCD10_20100706154719 P 2.6   AL NE   en^English^ISO639  IHE_PCD_010^IHE
455	PCD^1.3.6.1.4.1.19376.1.6.1.10.1^ISO
	PID   HO60002^^^PAT_DEVICE_PUMPVENDOR^MR  Darwin^Charles^^^^L  19620101000000+0000 M
	PV1  I 3 West ICU^3002^1
	OBR 1 AB12345^PCD-03 CD12345^HL7^ACDE48234567ABCD^EUI-64 2222^Dopamine   20100706154704-0800
	OBX 1 CWE 188773^MDC_DEV_EVENT_COND^MDC 1.1.1.100 680^MDC_EVT_PUMP_DELIV_START^MDC     R
460	OBX 2  69985^MDC_DEV_PUMP_INFUS_MDS^MDC 1.0.0.0      X      Pump002^^0003B10000000001^EUI-64
	OBX 3  70050^MDC_DEV_PUMP_INFUS_LVP_VMD^MDC 1.11.01.0
	OBX 4  70067^MDC_DEV_PUMP_INFUS_CHAN_DELIVERY^MDC  1.1.1.0       X
	OBX 5 CWE 184508^MDC_PUMP_STAT^MDC 1.1.1.101 ^pump-status-infusing     R
	OBX 6 CWE 184512^MDC_PUMP_MODE_CURRENT^MDC 1.1.1.102 ^pump-mode-drug-dosing      R
465	OBX 7 NM 157784^MDC_FLOW_FLUID_PUMP^MDC 1.1.1.103 24.9 265266^MDC_DIM_MILLI_L_PER_HR^MDC^mL/h^mL/h^UCUM     R
	OBX 8  70071^MDC_DEV_PUMP_INFUS_CHAN_PRIMARY^MDC 1.1.2.0      X
	OBX 9 ST 184514^MDC_DRUG_NAME_LABEL^MDC 1.1.2.201 Dopamine      R
	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
470	OBX 11 NM 157924^MDC_RATE_DOSE^MDC 1.1.2.203 7 265619^MDC_DIM_MICRO_G_PER_KG_PER_MIN^MDC^ug/kg/min^ug/kg/min^U
470	CUM    R
	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
	OBX 13 NM 157884^MDC_VOL_FLUID_TBI^MDC 1.1.2.205 250 263762^MDC_DIM_MILLI_L^MDC^mL^ML^UCUM     R
	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
475	OBX 15 NM 157992^MDC_VOL_FLUID_DELIV_SEGMENT^MDC 1.1.2.207 0 263762^MDC_DIM_MILLI_L^MDC^mL^mL^UCUM     R
4/3	OBX 16 NM 157993^MDC_VOL_FLUID_DELIV_TOTAL^MDC 1.1.2.208 0 263762^MDC_DIM_MILLI_L^MDC^mL^mL^UCUM     R  OBX 17 NM 68063^MDC_ATTR_PT_WEIGHT^MDC 1.1.2.209 95 263875^MDC_DIM_KILO_G^MDC^kg^kg^UCUM     R
	OBX 18 NM 157916^MDC_TIME_PD_REMAIN^MDC 1.1.2.210 602 264352^MDC_DIM_MIN^MDC^min^min^UCUM     R