# Test Criteria: 170.315.f.2 – Transmission to Public Health Agencies – Syndromic Surveillance

|  |  |
| --- | --- |
| **Testing Result** |  |
| Participant and Product-with-version |  |
| Setting (Ambulatory or Inpatient) |  |
| Test Proctor |  |
| Test Date |  |
| Test Result | Pass:  Fail:  No Attempt: |
| Error Description (if applicable) |  |
| Modifications to Product Under Test |  |
| Additional Software Used |  |
| Additional Proctor Notes |  |

### Overview

In this document you will find:

* [Test Data and Test Tools](#_Test_Data_and)
* [Standards Support](#_Demonstrate_Standards_Support)
* [Drummond Test Report (Instructions, Expected Results, Points to Remember)](#_170.315(f)(2)-Transmission_to_Publi)
* [Test Procedures](#_1.1_Create_syndromic)
* [Appendix A: Testing Guide](file:///C:\Drummond%20Group\2015%20Release\2015%20Proctor%20Sheets\2015E%20Proctor%20Sheets%20-%20Final%20Copies\170.315.a.14_ImplantableDeviceList_01-Feb-2016.docx#_Appendix_A:_Testing)
* [Appendix B: ONC Criteria](file:///C:\Drummond%20Group\2015%20Release\2015%20Proctor%20Sheets\2015E%20Proctor%20Sheets%20-%20Final%20Copies\170.315.a.14_ImplantableDeviceList_01-Feb-2016.docx#_Appendix_B:_ONC)

### Version of ONC Test Method

1.1

### Scope of Proctoring Sheet

The ONC test method associated with this criterion is the only approved test method for EHR Meaningful Use certification. This Proctoring Sheet is not a replacement test method but a test procedure document for performing the ONC test method and recording the results. Proctoring Sheet describe test data, test criteria and expected results. It is assumed the Health IT Developer or Participant under Test is familiar with the associated ONC test method.

# Robustness and Reliability Requirement

To satisfy the module criteria, it is expected that the Product-Under-Test is able to complete the testing requirements reliably, including repeat testing with the same result without error, and with a satisfactory level of robustness. This includes unexpected error messages produced through normal operation, multiple unintended restarts of the application or any other “buggy” facets of the product displayed while testing. These errors are record in the Additional Proctor Notes of the proctor sheet. Lack of reliability and robustness of design will result in failure of the module.

# Test Data and Tools

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| --- | --- |
| **Test Data Source:** | ONC-Supplied  DG-Supplied:  Developer-Supplied: |
| **Pre-Test Data Setup:**  Health IT developer pre-loads first test case from each of the four scenarios from the [NIST HL7v2 Syndromic Surveillance Test Suite](http://hl7v2-ss-r2-testing.nist.gov/ss-r2/#/cb):   * Urgent Care Visit; * ED Visit with Mortality; * ED Visit with Inpatient Admission; and * Inpatient Visit | |
| **Test Data:**  NIST-supplied test cases. | |
| **Test Tools:**  [NIST HL7v2 Syndromic Surveillance Test Suite](http://hl7v2-ss-r2-testing.nist.gov/ss-r2/#/cb) | |

# Demonstrate Standards Support

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| --- | --- |
| **Test Result:** | PASS:  FAIL:  No Attempt: |
| **Instructions:** Implement standards below for Syndromic Surveillance content. For additional references, click [here](https://www.healthit.gov/policy-researchers-implementers/meaningful-use-stage-2-0/standards-hub) for the ONC Standards Hub. | |

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| --- | --- | --- |
|  | **Standard** |  |
|  | §170.205(d)(4) | HL7 2.5.1 Implementation Specifications. [PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings, Release 2.0, April 21, 2015 and Erratum to the CDC PHIN 2.0 Implementation Guide, August 2015: Erratum to the CDC PHIN 2.0 Messaging Guide, April 2015 Release for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings](http://www.cdc.gov/nssp/mmg/index.html) |

# 170.315(f)(2)-Transmission to Public Health – Syndromic Surveillance

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| --- | --- |
| **Test Result:** | PASS:  FAIL:  No Attempt: |
| **Instructions:** Create syndromic surveillance information for electronic transmission. | |
| **Expected Test Result:**   * Health IT module must record syndromic surveillance content and generate the HL7 v2.5.1 ADT according to the §170.205(d)(4) HL7 v2.5.1 PHIN Messaging Guide and associated Erratum. | |
| **Points to Remember:**   * Certification to this module only applies only to emergency care, urgent care, and inpatient care settings. * Health IT module must demonstrate support for ICD-9, ICD-10, and SNOMED CT as required by PHIN messaging guide and associated Erratum. * Within the [NIST HL7v2 Syndromic Surveillance Test Suite](http://hl7v2-ss-r2-testing.nist.gov/ss-r2/#/cb): * Use the “[NIST Normative Test Process Document](http://hl7v2-ss-r2-testing.nist.gov/ss-r2/#/doc)” for test tool procedures * The “Context-based” tab should be used for testing and validation * See “Documentation” tab for test process document and additional resources * Vocabularies/value sets are accessible once a test step is loaded | |

**Test Procedures**

### 1.1 Create syndromic surveillance messages and visual inspection

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| --- | --- |
|  | User identifies patient records containing pre-loaded syndromic surveillance data or input syndromic surveillance in patient records. |
|  | As instructed in the [NIST Normative Test Process Document](http://hl7v2-ss-r2-testing.nist.gov/ss-r2/#/doc), user logs into health IT module and generate the syndromic surveillance message for Test Step 1 under Test Scenario 1 and provide a copy of the message to the Proctor. |
|  | Proctor uploads the message into the NIST syndromic surveillance tool and verifies compliance using the NIST validation report. |
|  | User enters test data for next test case under Test Scenario 1 and provides generated syndromic surveillance message to Proctor for validation. |
|  | Repeats steps as instructed within NIST Normative Test Process for each test step under all four (4) test scenarios. |
|  | Proctor selects a value set from the PHIN Messaging Guide and associated Erratum and visually inspects health IT module to verify conformance to the required standard. |

<INSERT SCREEN SHOTS>

<INSERT Test Tool Report for 1.SS-UC-1.1\_Registration\_A04>

<INSERT Test Tool Report for 2.SS-UC-1.2\_Discharge\_A03>

<INSERT Test Tool Report for 1.SS-ED-2.1\_Registration\_A04>

<INSERT Test Tool Report for 2.SS-ED-2.2\_Update\_A08>

<INSERT Test Tool Report for 3.SS-ED-2.3\_Discharge\_A03>

<INSERT Test Tool Report for 1.SS-ED-3.1\_Registration\_A04>

<INSERT Test Tool Report for 2.SS-ED-3.2\_Update\_A08>

<INSERT Test Tool Report for 3.SS-ED-3.3\_Discharge\_A03>

<INSERT Test Tool Report for 4.SS-ED-3.4\_Admission\_A01>

<INSERT Test Tool Report for 1.SS-IP-4.1\_Admission\_A01>

<INSERT Test Tool Report for 2.SS-IP-4.2\_Discharge\_A03>

<INSERT SCREENSHOTS – PHIN Messaging Guide Value Set Verification>

# Appendix A: Testing Guide

*This appendix contains more details and background on the testing requirements, including explanation on underlying standards, notable issues and best practice suggestions.*

Rev 01-Mar-2016 Additions

* Many data elements in the implementation profile guide are identified with an RE usage (Required-but may be empty if unknown). Per the interpretation of the test tool developers, RE usage indicates that EHR implementations must be capable of supporting such elements and must populate them if the information is known. As part of the test story/test data, ONC has made the elements known. Therefore, the EHRs are required to demonstrate that they support these elements and shall send such data when received/known. This is how the test tool validates messages in Context-based validations.
* The Health IT Module must demonstrate the ability to support ICD-9, ICD-10, and SNOMED CT codes as required in the PHIN Messaging Guide and associated Erratum; for example, Admit/Encounter Reason (PV2-3) and Primary Diagnosis and Additional Diagnoses (DG1-3) are Required data elements that use these codes; where a code from one of these coding systems is provided in the test data for the message associated with a given Test Step, the Module must be capable of supporting the code.
* If the Tester determines that the ICD-9, ICD-10, or SNOMED CT code in a message created by the Module is a valid code for a data item (e.g., diagnosis) even though it is different from the ICD-9, ICD-10, or SNOMED CT code provided for that data item in the test data for that message, the Tester shall allow an exception; for example, the Tool may accept five different ICD-9 codes for a given diagnosis (because all five codes are listed in the ICD-9 Value Set in the Tool), but the message created by the Module may be populated with an ICD-9 code that was not included by the subject matter experts who collaborated with NIST on the test data.

# Appendix B: ONC Criteria and Standards

*This appendix contains copy of the relevant ONC criteria and standards for this proctor sheet as a reference. In the event of a discrepancy with the ONC Final Rule, the ONC Final Rule takes precedence.*

**§170.315(f)(2) Transmission to Public Agencies – Syndromic Surveillance**

Technology must be able to create syndrome-based public health surveillance information for electronic transmission to public health agencies.

**§170.205(d)(4).** Standard. HL7 2.5.1 (incorporated by reference in §170.299). Implementation specifications. PHIN Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings, Release 2.0, April 2015 and Erratum to the CDC PHIN 2.0 Implementation Guide, August 2015; Erratum to the CDC PHIN 2.0 Messaging Guide, April 2015 Release for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings.

# Change Log

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| --- | --- |
| Revision | Change Description |
| 01-Mar-2016 | Initial Release |
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