

Integrating the Healthcare Enterprise



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**IHE Pharmacy  
Technical Framework Supplement**

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**Community Medication Administration  
(CMA)**

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**Rev. 1.2 – Trial Implementation**

20      Date:        February 17, 2022  
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**Please verify you have the most recent version of this document. See [here](#) for Trial Implementation and Final Text versions and [here](#) for Public Comment versions.**

## Foreword

30 This is a supplement to the forthcoming IHE Pharmacy Technical Framework. Each supplement undergoes a process of public comment and trial implementation before being incorporated into the volumes of the Technical Frameworks.

35 This supplement is published on February 17, 2022 for trial implementation and may be available for testing at subsequent IHE Connectathons. The supplement may be amended based on the results of testing. Following successful testing it will be incorporated into the forthcoming Pharmacy Technical Framework. Comments are invited and may be submitted at [Pharmacy 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 [IHE](#).

Information about the IHE Pharmacy domain can be found at [IHE Domains](#).

Information about the organization of IHE Technical Frameworks and Supplements and the process used to create them can be found at [Profiles](#) and [IHE Process](#)

50 The current versions of the Pharmacy Technical Framework supplements can be found at [Pharmacy Technical Framework](#).

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## Introduction to this Supplement

The Community Medication Administration (CMA) is a Content Module Profile describing the content and format of an administration document generated during the process in which a health care professional (physician, pharmacist, nurse, etc.) administers a medication to a patient. The  
155 process may also be performed by the patient him- or herself (self-administrations) or others (e.g., relatives, etc.).

Depending on the nature of the medication, the administration event may take place at a **single point of time** (e.g., intake of tablets) or may take place as an **interval** process having a start and end time (e.g., infusion).

160 The interval process can be divided into a “simple interval” variant, where only one interval is documented and “complex interval” variant, where multiple, related intervals are documented (e.g., because the parameters of the administration, such as medication, dose, drop-rate, etc., changed during the timespan of the overall administration process). The scope of this profile is to cover all of the characteristics of administrations.

165 Documents created according to this profile are intended to be used in the context of the “Community Medication Prescription and Dispense” Integration Profile (CMPD). This supplement also references other documents<sup>1</sup>. The reader should have already read and understood these documents:

1. [PHARM Common parts document](#)
2. [PHARM Community Medication Prescription and Dispense Integration Profile \(CMPD\)](#)
3. [PCC Technical Framework Volume 1](#)
4. [PCC Technical Framework Volume 2](#)
5. [IT Infrastructure Technical Framework Volume 1](#)
6. [IT Infrastructure Technical Framework Volume 2](#)
7. [IT Infrastructure Technical Framework Volume 3](#)
8. HL7 and other standards documents referenced in this document<sup>2</sup>
9. [IHE Pharmacy White Paper](#)

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<sup>1</sup> The first four documents are located on the IHE Website at [https://www.ihe.net/resources/technical\\_frameworks/](https://www.ihe.net/resources/technical_frameworks/). The ITI Technical Framework can be found at <https://profiles.ihe.net/ITI/TF/index.html>. The remaining documents can be obtained from their respective publishers.

<sup>2</sup> See Table 6.3.1.D1.3-1: “CMA - Referenced Standards”

## Open Issues and Questions

- 180
- Shall the document also contain information regarding the workflow of administration (e.g., “complications during this administration lead to a change of the appointed next administration” or “next intake shall be skipped”, etc.)?
    - If yes, does that have implications on current or future workflow profiles which utilize this profile

## Closed Issues

- 185
- Is each administration resulting in a single document?
    - Yes, every administration results in a single Administration document, including administrations of medicines be done in parallel (e.g., two different infusions at a time)
    - But, if you have to take e.g., 2 pills of one medicine to reach your dose at this administration, this results in just one document.
  - Shall we record information to the case that the patient actually got the medicine administered, but for some reason (e.g., vomiting) could not digest it? Shall we record it in “Allergies and Adverse Reaction”?
    - Yes. Issues recognized until the creation of the CMA report are documented in the CMA Item. Issues recognized after the creation of the CMA report are documented in PADVs related to the CMA.
  - Shall non-administration events be recorded too?
    - Yes. They are reported by setting “Amount of units of the consumable administered” is set to zero.
- 190
- 195

200 **IHE Technical Frameworks General Introduction**

The [IHE Technical Frameworks General Introduction](#) is shared by all of the IHE domain technical frameworks. Each technical framework volume contains links to this document where appropriate.

**9 Copyright Licenses**

205 IHE technical documents refer to, and make use of, a number of standards developed and published by several standards development organizations. Please refer to the IHE Technical Frameworks General Introduction, [Section 9 - Copyright Licenses](#) for copyright license information for frequently referenced base standards. Information pertaining to the use of IHE International copyrighted materials is also available there.

210 **10 Trademark**

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## IHE Technical Frameworks General Introduction Appendices

The [IHE Technical Framework General Introduction Appendices](#) are components shared by all of the IHE domain technical frameworks. Each technical framework volume contains links to these documents where appropriate.

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*Update the following appendices to the General Introduction as indicated below. Note that these are **not** appendices to this domain's Technical Framework (TF-1, TF-2, TF-3 or TF-4) but rather, they are appendices to the IHE Technical Frameworks General Introduction located [here](#).*

225

### Appendix A – Actors

*Add the following **new or modified** actors to the [IHE Technical Frameworks General Introduction Appendix A](#):*

230

New (or modified) Actor Name	Description
No new actors	

### Appendix B – Transactions

235

*Add the following **new or modified** transactions to the [IHE Technical Frameworks General Introduction Appendix B](#):*

New (or modified) Transaction Name and Number	Definition
No new transactions	

240

## **Appendix D – Glossary**

*Add the following **new or modified** glossary terms to the [IHE Technical Frameworks General Introduction Appendix D](#):*

245

New (or modified) Glossary Term	Definition	Synonyms	Acronym/Abbreviation
Medication Administration	Medication Administration is the act of applying a medication to a patient (e.g., intake of tablet, injecting a syringe, applying an infusion, etc.), whether performed by the patient him- or herself or another person, such as a health care professional.		
Medication Administration Item	A Medication Administration Item belongs to a Medication Administration and represents one administered medication. It contains the administered medicinal product including information such as product code, brand name, lot number as well as all other parameters describing the administering process, such as dose, drop-rate, etc.		

# Volume 1 – Profiles

250

*Add the following to Section 1.10*

## 1.10 History of Annual Changes

- In the 2016-2017 cycle of the IHE Pharmacy initiative, the first version of the profile has been released.
- 255        • In the 2022 cycle, the supplement was updated due to CP-PHARM-147.

*Add the following to Section 2.5*

## 2.5 Dependencies of the Pharmacy Integration Profiles

Community Medication Administration (CMA)	PCC	Content definition	This profile includes Section and Entry Content Modules of the Patient Care Coordination (PCC) domain.
-------------------------------------------	-----	--------------------	--------------------------------------------------------------------------------------------------------

260 **X Community Medication Administration (CMA) Profile**

The Community Medication Administration (CMA) is a Content Module Profile describing the content and format of an administration document generated during the process in which a health care professional (physician, pharmacist, nurse, etc.) administers a medication to a patient. The process may also be performed by the patient him- or herself (self-administrations) or others (e.g., relatives, etc.).

265 Depending on the nature of the medication, the administration event may take place at a **single point of time** (e.g., intake of tablets) or may take place as an **interval** process having a start and end time (e.g., infusion).

270 The interval process can be divided into a “simple interval” variant, where only one interval is documented and “complex interval” variant, where multiple, related intervals are documented (e.g., because the parameters of the administration, such as medication, dose, drop-rate, etc., changed during the timespan of the overall administration process). The scope of this profile is to cover all of the characteristics of administrations.

275 Documents created according to this profile are intended to be used in the context of the “Community Medication Prescription and Dispense” Integration Profile (CMPD).

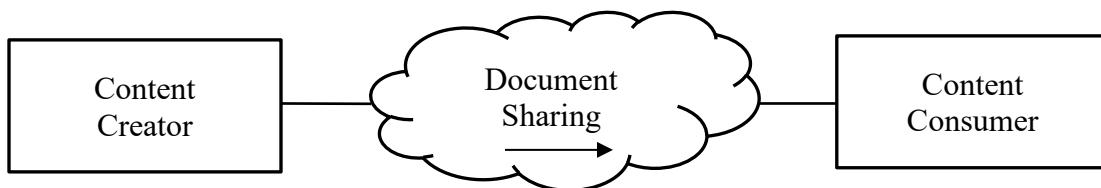
For a detailed overview on the whole Pharmacy domain business processes, please refer to the “Common parts” document, which is accompanying this profile.

## X.1 CMA Actors, Transactions, and Content Modules

280 This section defines the actors, transactions, and/or content modules in this profile. General definitions of actors are given in the Technical Frameworks General Introduction Appendix A. IHE Transactions can be found in the Technical Frameworks General Introduction Appendix B. Both appendices are located at <https://profiles.ihe.net/GeneralIntro/index.html>.

285 Figure X.1-1 shows the actors directly involved in the CMA Profile and the direction that the content is exchanged.

CMA product implementations using this profile must group actors from this profile with actors from a workflow or transport profile to be functional. The grouping of the content module described in this profile to specific actors is described in more detail in the “Required Actor Groupings” section below.



290

**Figure X.1-1: CMA Actor Diagram**

Table X.1-1 lists the content module(s) defined in the CMA Profile. To claim support with this profile, an actor shall support all required content modules (labeled “R”) and may support optional content modules (labeled “O”).

**Table X.1-1: CMA Profile - Actors and Content Modules**

Actors	Content Modules	Optionality	Reference
Content Creator	Community Medication Administration Content Module 1.3.6.1.4.1.19376.1.9.1.1.4	R	TF-3: 6.3.1.D1
Content Consumer	Community Medication Administration Content Module 1.3.6.1.4.1.19376.1.9.1.1.4	R	TF-3: 6.3.1.D1

295

### X.1.1 Actor Descriptions and Actor Profile Requirements

Most requirements are documented in Transactions (Volume 2) and Content Modules (Volume 3). This section documents any additional requirements on profile’s actors.

### X.2 CMA Actor Options

300 Options that may be selected for each actor in this profile, if any, are listed in the Table X.2-1. Dependencies between options when applicable are specified in notes.

**Table X.2-1: Community Medication Administration - Actors and Options**

Actor	Option Name	Reference
Content Consumer	View Option (see Note 1)	PCC TF-2: 3.1.1
	Document Import Option (see Note 1)	PCC TF-2: 3.1.2
	Section Import Option (see Note 1)	PCC TF-2: 3.1.3
	Discrete Data Import Option (see Note 1)	PCC TF-2: 3.1.4
Content Creator	No options defined	

Note 1: The actor shall support at least one of these options.

### X.3 CMA Required Actor Groupings

An actor from this profile (Column 1) shall implement all of the required transactions and/or content modules in this profile **in addition to all** of the transactions required for the grouped actor (Column 2).

- 310 If this is a content profile, and actors from this profile are grouped with actors from a workflow or transport profile, the Reference column references any specifications for mapping data from the content module into data elements from the workflow or transport transactions.
- In some cases, required groupings are defined as at least one of an enumerated set of possible actors; this is designated by merging column one into a single cell spanning multiple potential grouped actors. Notes are used to highlight this situation.
- 315 Section X.5 describes some optional groupings that may be of interest for security considerations and Section X.6 describes some optional groupings in other related profiles.
- Actors from the Pharmacy CMPD Profile embody the Content Creator and Content Consumer sharing function of this profile. A Content Creator or Content Consumer may be grouped with appropriate actors from the XDS, XDM or XDR Profiles to exchange the content described therein. The metadata sent in the document sharing or interchange messages has specific relationships or dependencies (which we call bindings) to the content of the clinical document described in the content profile.
- The Patient Care Coordination Technical Framework defines the bindings to use when grouping the Content Creator of this profile with actors from the Pharmacy CMPD Integration Profiles.

325 **Table X.3-1: Community Medication Administration - Required Actor Groupings**

CMA Actor	Actor to be grouped with	Reference	Content Bindings Reference
Content Consumer	ITI XDS.b Document Consumer	ITI TF-1: 10.1	PCC TF-2: 4.1
	ITI XDR Document Recipient	ITI TF-1: 15.1	PCC TF-2: 4.1
	ITI XDM Portable Media Importer	ITI TF-1: 16.1	PCC TF-2: 4.1
Content Consumer	ITI Consistent Time Client	ITI TF-1: 7.1	--
Content Creator	None		

## X.4 CMA Overview

- 330 The CMA describes all information of an administration event, which are generated during the process in which a health care professional (physician, pharmacist, nurse, etc.) administers a medication to a patient. The process may also be performed by the patient him- or herself (self-administrations) or others (e.g., relatives, etc.).
- Depending on the nature of the medication, the administration event may take place at a **single point of time** (e.g., intake of tablets) or may take place as an **interval** process having a start and end time (e.g., infusion).

- 335 The interval process can be divided into a “simple interval” variant, where only one interval is documented and “complex interval” variant, where multiple, related intervals are documented (e.g., because the parameters of the administration, such as medication, dose, drop-rate, etc., changed during the timespan of the overall administration process). The scope of this profile is to cover all of the characteristics of administrations.
- 340 Documents created according to this profile are intended to be used in the context of the “Community Medication Prescription and Dispense” Integration Profile (CMPD).

#### X.4.1 Concepts

The Community Medication Prescription and Dispense workflow includes the stage of administering medication by a health care professional (physician, pharmacist, nurse, etc.) to the patient.

345 A Community Medication Administration document is the documentation of the performed administration act. It contains the administered medication and other additional information concerning the administration act and may reference an underlying plan, prescription and/or dispense (if available).

350 This profile defines the content and format of such a Community Medication Administration document.

For a detailed overview on the whole Pharmacy domain business processes, please refer to the “Common parts” document, which is accompanying this profile.

#### X.4.2 Use Cases

355 In the Community Pharmacy setting most of the medication administrations are performed by the patient at home and are usually not electronically documented. The last point, where a healthcare professional may electronically document a medication-related interaction with the patient is at the point of medication dispense, where the medication is handed over to the patient in the pharmacy. Whether or not the patient is actually taking the medication is often unknown and the care-taking healthcare professionals have to rely on the word of the patient.

360 However, there are cases the administration of medication to the patient might be recordable in electronic form by a healthcare professional even in Community Pharmacy setting.

Some cases where medication administrations might be recorded electronically by a healthcare professional in the Community Pharmacy setting:

- 365     • Drug-substitution intakes in front of the pharmacist
- The patient enters the pharmacy and wants to get its prescribed drug-substitution medicine dispensed. The pharmacist dispenses the medication to the patient, but legal requirements enforce that the patient performs the intake of the medicine in front of the pharmacist.
- 370             Thus witness of the actual intake the pharmacist enters the administration information

in its software system, which creates and publishes an administration record according to the CMA Profile.

- The administration of vaccinations by the primary care physician
  - The patient enters the physician office and requests a vaccination. The physician performs the immunization and enters the administration information in its software system, which creates and publishes an administration record according to the CMA Profile.
- Chemotherapy administration
  - The medicine for the Chemotherapy treatment, e.g., ambulatory at a hospital, is administered to the patient in a controlled environment by healthcare professionals. After the administration act is completed, the healthcare professional enters the administration information in its software system, which creates and publishes an administration record according to the CMA Profile.
- Administration of contrast agents at a radiologic examination
  - The patient is referred to a specialist for radiology to get an examination performed, which requires the use of contrast agents. The healthcare professional administers contrast agents to the patient before or during the radiology examination. Contrast agents can be administered more than one time during the examination. After the radiology examination is completed, the healthcare professional enters all administration information in its software system, which creates and publishes one or more administration records according to the CMA Profile.

Medication administrations divide into the following characteristics:

- **“Single point of time” administration**
  - The administration act takes place at one point of time (e.g., intake of tablets)
- **“Simple interval” administration**
  - The administration act takes place as an interval process having a start and end time (e.g., infusion) documenting a single set of parameters (medication, dose, drop-rate, etc.) for the whole interval (even if parameters changed during the interval, the changes are not recorded).
- **“Complex interval” administration**
  - The administration act takes place as an interval process having a start and end time (e.g., infusion), but is documented as multiple “simple interval” administrations, which are related to each other, because e.g., the parameters (medication, dose, drop-rate, etc.) changed during the process or for other reasons, e.g., the administering personnel changed during the process, etc.

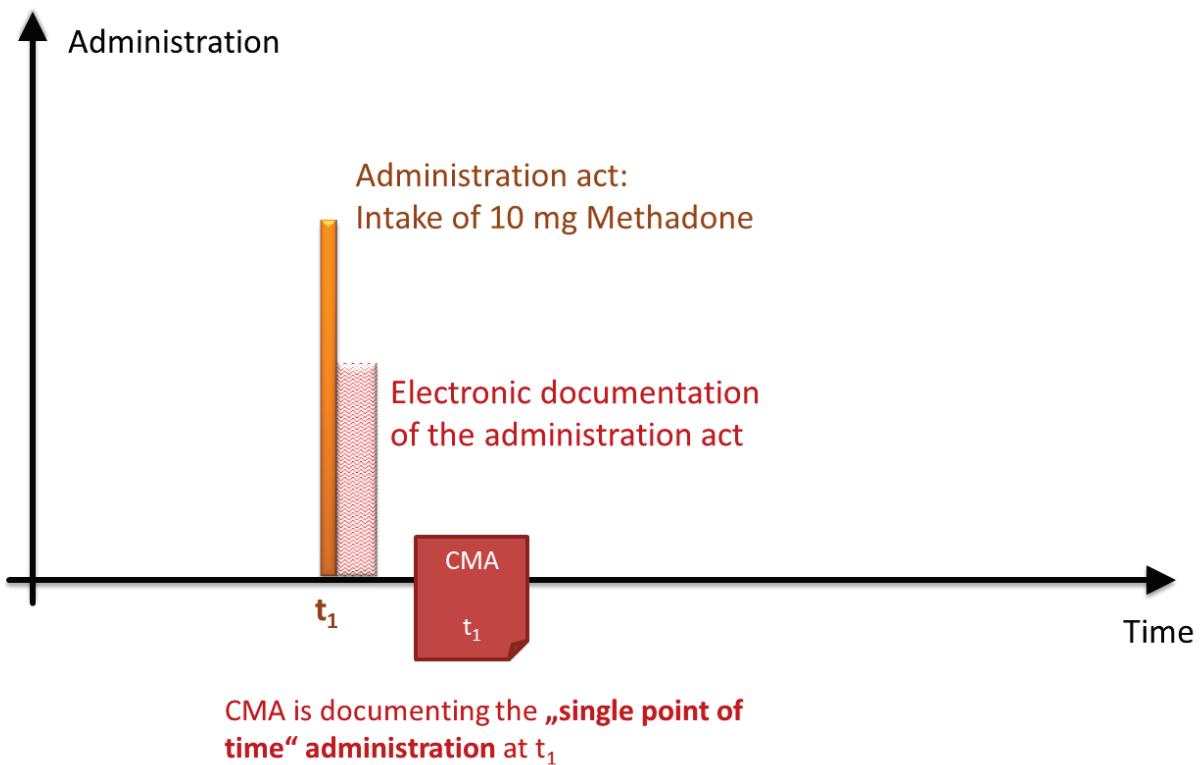
#### X.4.2.1 Use Case #1: “Single Point of time” administration of a medication

This is the most simple use case for administration. The administration act takes place at an exact point of time and after its completion all information related to it is documented.

- 410 An example for “single point of time” administrations is the “drug-substitution intakes in front of the pharmacist” example from the list above:

A patient is subject of a drug-substitution therapy and possesses valid prescriptions for 10mg Methadone. Regulations according to the drug-substitution therapy require the medication to be taken by the patient directly in the dispensing pharmacy so that the pharmacist witnesses the intake and is able to electronically document the administration.

- 415 After the patient is entering the pharmacy and hands out the prescription to the pharmacist, the pharmacist dispenses the medication to the patient in a “ready-to-be-taken” form.



**Figure X.4.2.1-1: “Single point of time” administration of a medication**

- 420  $t_1$ : The patient drinks the Methadone solution in front of the pharmacist and the pharmacist documents the administration act in the system.

The administration act is documented by one Community Medication Administration document, containing one Medication Administration Item, which includes the medication, dosage and other attributes of the administration act taking place at time  $t_1$ .

#### X.4.2.2 Use Case #2: “Simple interval” administration of a medication

- 425 This is the second simple use case for administration. The administration act takes place as an interval process having a start and end time and after its completion all information related to it is documented.
- An example for a “simple interval” administration is the “Chemotherapy administration” example from the list above:
- 430 A cancer patient is subject of chemotherapy and visits the outpatient department of a hospital for its scheduled administration of the chemotherapy medication. After the patient is entering the outpatient department of the hospital the nurse prepares the patient for the administration.

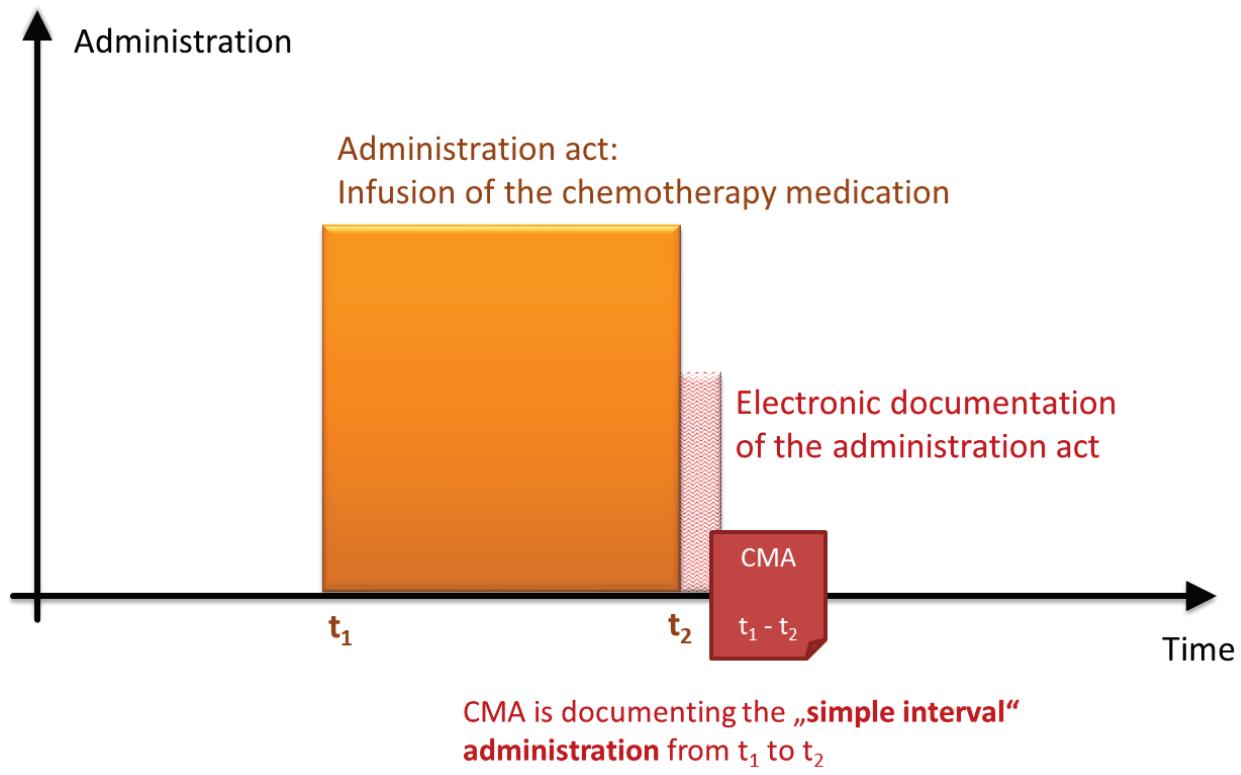


Figure X.4.2.2-1: “Simple interval” administration of a medication

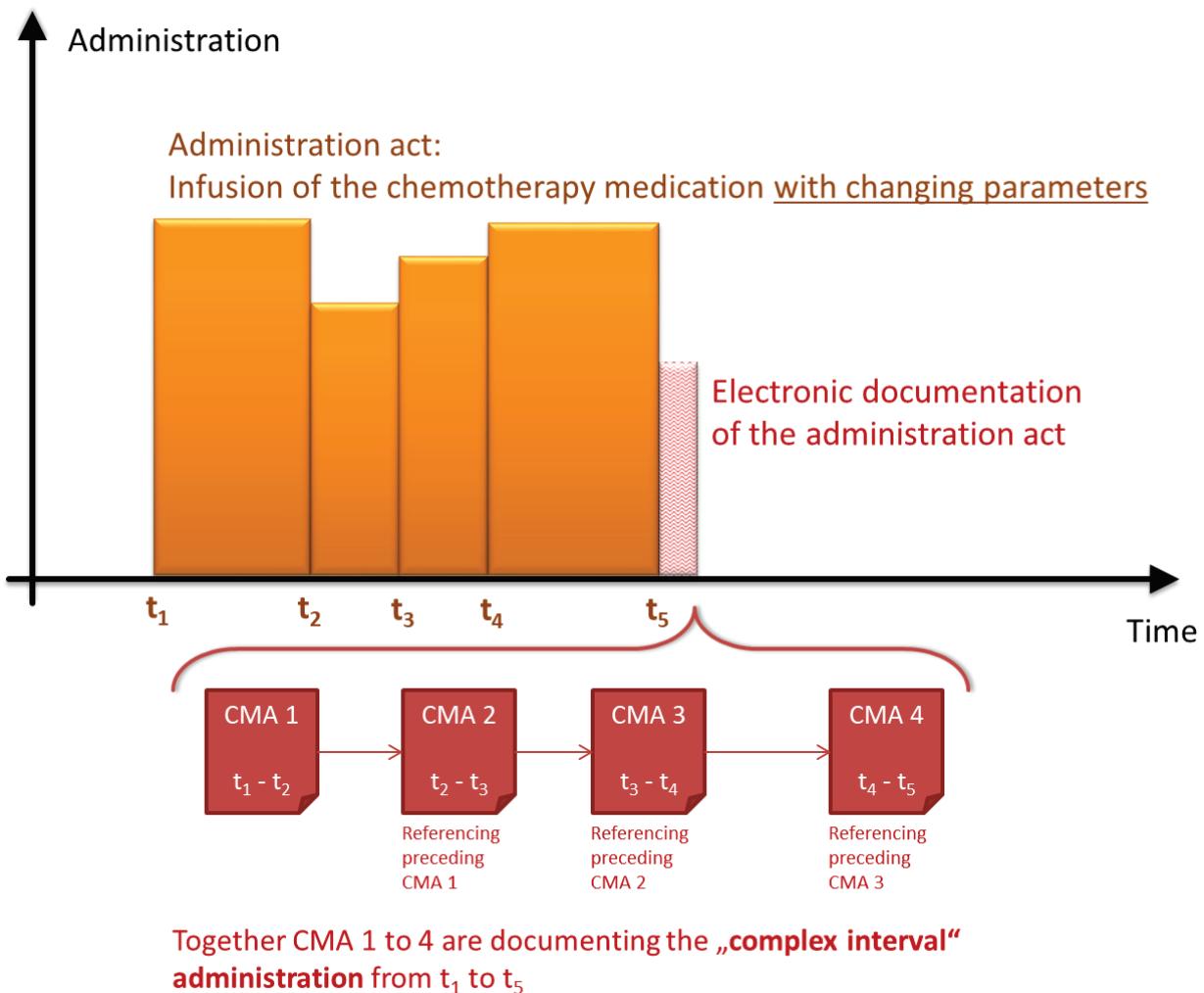
- 435  $t_1$ : The nurse starts the infusion of the chemotherapy medication with the prescribed drop-rate, etc.
- $t_2$ : After the medication has been administered into the patient’s body the nurse documents the administration act in the system.
- 440 The administration act is documented by one Community Medication Administration document, containing one Medication Administration Item, which includes the medication, dosage, drop-rate and other attributes of the administration act taking place in the time interval from  $t_1$  to  $t_2$ .

#### X.4.2.3 Use Case #3: “Complex interval” administration of a medication

445 This is the most complex use case for administration. The administration act takes place as an interval process having a start and end time, but is documented as multiple “simple interval” administrations, which are related to each other, because e.g., the parameters (medication, dose, drop-rate, etc.) changed during the process or for other reasons, e.g., the administering personnel changed during the process, etc.

450 An example for a “complex interval” administration is the “Chemotherapy administration” example from the list above, with the addition that the nurse adjusts the drop-rate during the administration depending on the patient’s condition:

A cancer patient is subject of chemotherapy and visits the outpatient department of a hospital for its scheduled administration of the chemotherapy medication. After the patient is entering the outpatient department of the hospital the nurse prepares the patient for the administration.



455

Figure X.4.2.3-1: “Complex interval” administration of a medication

- t<sub>1</sub>: The nurse starts the infusion of the chemotherapy medication with the prescribed drop-rate, etc.
- 460 t<sub>2</sub>: The patient feels nausea and tells the nurse about her bad condition. As reaction, the nurse reduces the drop-rate of the chemotherapy medication
- t<sub>3</sub>: The patient notifies the nurse that she feels much better now, so the nurse decides to try a slightly higher drop-rate of the medication
- 465 t<sub>4</sub>: The nurse looks after the patient and recognizes that the patient still feels good, so she raises the drop-rate again on the prescribed level and the administration continues to the end with those parameters
- t<sub>5</sub>: After the medication has been administered into the patient's body the nurse documents the administration act in the system.
- 470 The administration act is documented by multiple Community Medication Administration documents, each containing one Medication Administration Item, which includes the medication, dosage, drop-rate and other attributes of the administration act taking place in the given time interval.
- Together all Community Medication Administration documents are documenting the overall “complex interval” administration from t<sub>1</sub> to t<sub>5</sub>.
- ## X.5 CMA Security Considerations
- 475 The security considerations for a content module are dependent upon the security provisions defined by the grouped actor(s).
- The CMA Integration Profile assumes that a minimum security and privacy environment has been established across all participants. There must exist security policies regarding the use of training, agreements, risk management, business continuity and network security that need to be 480 already in place prior to the implementation of CMA.
- The ITI ATNA Integration Profile is required of the actors involved in the IHE transactions specified in this profile to protect node-to-node communication and to produce an audit trail of the PHI related actions when they exchange messages.
- In addition, the ITI DSG Integration Profiles can be applied to the actors involved in the 485 transactions specified in this profile to securely identify individuals involved in transactions and verify document integrity and authorizations (DSG).
- Interested parties should also read the detailed Security Considerations sections provided for each of the aforementioned profiles in the IHE ITI Technical Framework and its supplements.
- The CMA Profile does have a few security considerations of its own.
- 490 Pharmacy systems should be thoughtfully designed so that providers are able to review and verify information before it is imported into their Pharmacy system, and that positive user acknowledgements are made before import, and audit trails are recorded when imports occur.

Imported information should be traceable both to the source Pharmacy system, and the receiver  
that accepted it into the Pharmacy system. XDS Affinity domain policies should support policies  
and procedures for tracing information flows between Pharmacy systems.

Because the information being transferred is in XML, it will be common that different Pharmacy  
systems utilize different transformations to render the contents into human readable form. A  
Content Creator should make available the transforms used by the sending provider to review the  
documents, and a Content Consumer must support rendering the information as seen by the  
sending provider, allowing both providers to see what was sent in its original rendered form.

## X.6 CMA Cross Profile Considerations

Section not applicable.

## Appendices to Volume 1

None.

505

## Volume 2 – Transactions

Section not applicable.

## **Volume 3 – Content Modules**

## Namespaces and Vocabularies

*Add to Section 5 Namespaces and Vocabularies*

510

codeSystem	codeSystemName	Description
1.3.6.1.4.1.19376.1.9	IHE Pharmacy Object Identifiers	This is the root OID for all IHE Pharmacy objects
1.3.6.1.4.1.19376.1.5.3.4		Namespace OID used for IHE Extensions to CDA Release 2.0

See also the Namespaces and Vocabularies of the IHE PCC Technical Framework on the IHE Wiki at [PCC-TF-2/Namespaces and Vocabularies](#).

515

*Add to Section 5.1.1 IHE Format Codes*

Profile	Format Code	Media Type	Template ID
<b>2017 Profiles</b>			
Community Medication Administration (CMA)	urn:ihe:pharm:cma:2017	text/xml	1.3.6.1.4.1.19376.1.9.1.1.4

*Add to Section 5.1.2 IHE ActCode Vocabulary*

Section not applicable.

520

*Add to Section 5.1.3 IHE RoleCode Vocabulary*

Section not applicable.

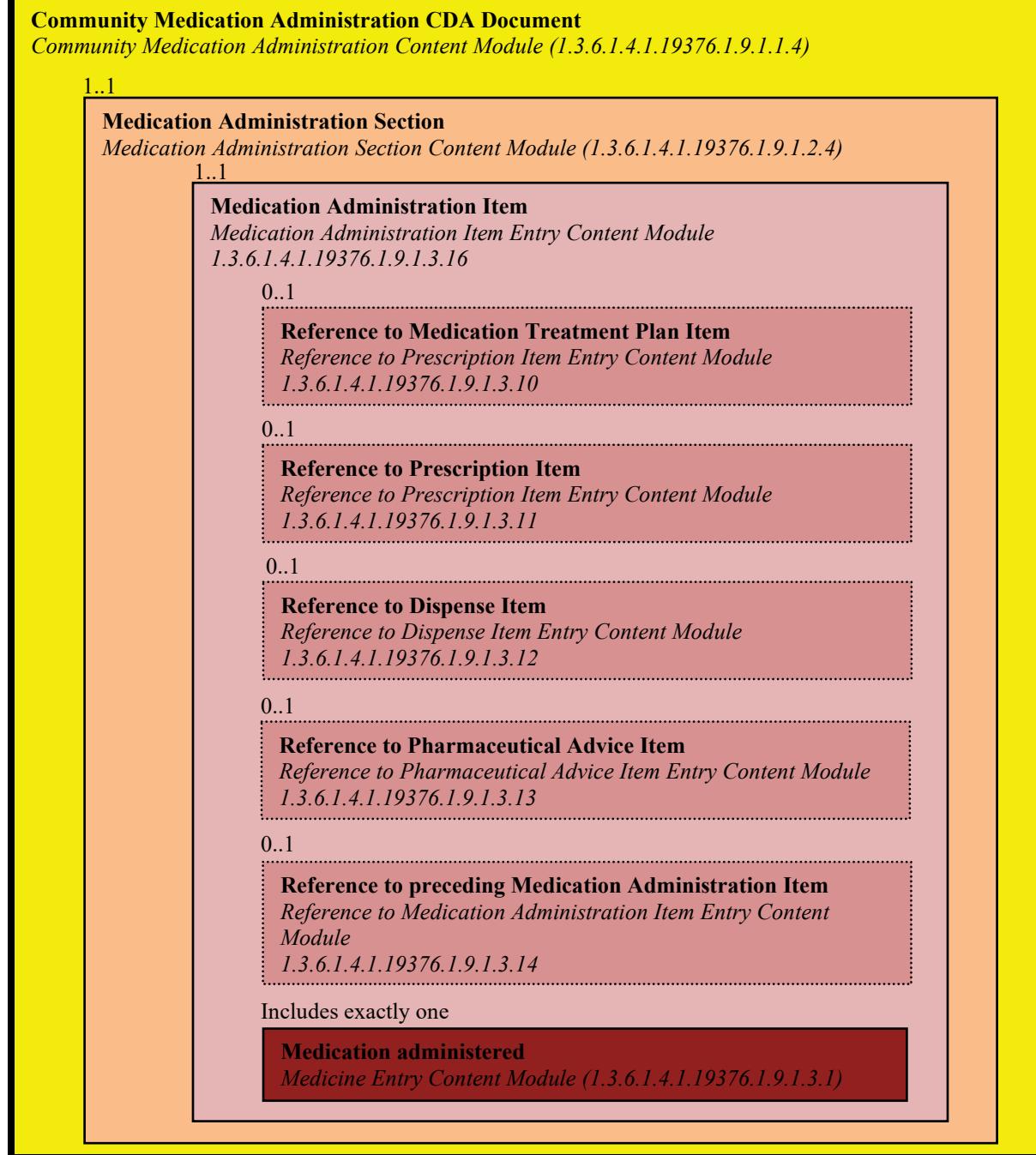
## 6 Content Modules

### 525 6.3.1 CDA Document Content Modules

*Add to Section 6.3.1.D Document Content Modules*

#### 6.3.1.D1 Community Medication Administration (CMA) Document Content Module

530 Structure of a Pharmacy Administration Document



### 6.3.1.D1.1 Format Code

The XDSDocumentEntry format code for this content is **urn:ihe:pharm:cma:2017**.

535 **6.3.1.D1.2 Parent Template**

This document is an instance of the [Medical Document](#) template.

**6.3.1.D1.3 Referenced Standards**

All standards which are reference in this document are listed below with their common abbreviation, full title, and link to the standard.

540

**Table 6.3.1.D1.3-1: CMA - Referenced Standards**

Abbreviation	Title	URL
HL7V3 NE2009	HL7 V3 2009 Normative Edition	<a href="#">HL7 V3 2009 Normative Edition</a>
CDAR2	HL7 CDA Release 2.0	<a href="#">HL7 CDA Release 2.0</a>
IHE PCC	IHE PCC Medical Documents Specification (1.3.6.1.4.1.19376.1.5.3.1.1.1)	<a href="#">Medical Documents Specification (1.3.6.1.4.1.19376.1.5.3.1.1.1)</a>
XMLXSL	Associating Style Sheets with XML documents	<a href="#">Associating Style Sheets with XML documents</a>

**6.3.1.D1.4 Data Element Requirement Mappings to CDA**

This section identifies the mapping of data between referenced standards into the CDA implementation guide.

545

**Table 6.3.1.D1.4-1: CMA - Data Element Requirement Mappings to CDA**

Clinical Data Element	CDA Release 2.0
<b>Patient Information</b>	recordTarget/patientRole
Patient Administrative Identifiers	recordTarget/patientRole/id
Patient Name	recordTarget/patientRole/patient/name
Patient Gender	recordTarget/patientRole/patient/administrativeGenderCode
Patient Birth Date	recordTarget/patientRole/patient/birthTime
Patient Address	recordTarget/patientRole/addr
Patient Telecom	recordTarget/patientRole/telecom
<b>HCP Person Information</b>	author
HCP ID(s)	author/assignedAuthor/id
HCP Profession	author/functionCode
HCP Name	author/assignedAuthor/assignedPerson/name
HCP Telecom	author/assignedAuthor/telecom
HCP Specialty	author/assignedAuthor/code
<b>HCP Organization</b>	author/assignedAuthor/representedOrganization
HCP Organization Name	author/assignedAuthor/representedOrganization/name
HCP Organization Address	author/assignedAuthor/representedOrganization/addr

Clinical Data Element	CDA Release 2.0
HCP Organization Telecom	author/assignedAuthor/representedOrganization/telecom
<b>Service Event<sup>3</sup></b>	documentationOf/serviceEvent
Date of Service Event	documentationOf/serviceEvent/effectiveTime
Service Event Code	documentationOf/serviceEvent/code
<b>Encounter in the healthcare institution<sup>4</sup></b>	componentOf/encompassingEncounter
ID of the encounter	componentOf/encompassingEncounter/id
Date of Admission/Encounter start date	componentOf/encompassingEncounter/effectiveTime/low
Date of Discharge/Encounter end date	componentOf/encompassingEncounter/effectiveTime/high
Authorization	authorization/consent
Patient contacts	guardian
Payers	PAYMENT SOURCES
General Medical Information Height, Weight	VITAL SIGNS
Allergies and Drug Sensitivities	ALLERGIES, ADVERSE REACTIONS, ALERTS
Active Problems	PROBLEM LIST
Resolved Problems	HISTORY OF PAST ILLNESS
Immunizations	HISTORY OF IMMUNIZATIONS
Pregnancy History	HISTORY OF PREGNANCIES
Medication Administration	MEDICATION ADMINISTRATION

### 6.3.1.D1.5 Community Medication Administration (CMA) Document Content Module Specification

This section specifies the header, section, and entry content modules which comprise the Community Medication Administration (CMA) Document Content Module, using the Template ID as the key identifier.

Sections that are used according to the definitions in other specifications are identified with the relevant specification document. Additional constraints on vocabulary value sets, not specifically constrained within the section template, are also identified.

---

<sup>3</sup> Service Event is optional and may contain service event information of the medical event in which context the inclusion in the medication treatment plan has been taken.

<sup>4</sup> Encounter is optional and shall contain encounter information if applicable.

555

**Table 6.3.1.D1.5-1: Community Medication Administration Document Content Module Specification**

<b>Template Name</b>		Community Medication Administration			
<b>Template ID</b>		1.3.6.1.4.1.19376.1.9.1.1.4			
<b>Parent Template</b>		1.3.6.1.4.1.19376.1.5.3.1.1 [PCC]			
<b>General Description</b>		A document containing one Medication Administration Item representing one medication included in the global treatment plan of the patient.			
<b>Document Code</b>		SHALL be 87231-7 LOINC, “Medication administration.extended”			
Opt and Card	Condition	<b>Header Element or Section Name</b>	<b>Template ID</b>	<b>Specification Document</b>	<b>Vocabulary Constraint</b>
<b>Header Elements</b>					
M [1..1]		Patient Information	1.3.6.1.4.1.19376.1.9.1.4.1	PHARM TF-3: 6.3.1.D1.4	
M [1..1]		Healthcare Provider Information	1.3.6.1.4.1.19376.1.9.1.4.2	PHARM TF-3: 6.3.1.D1.4	
R2 [1..1]		Authorizations	1.3.6.1.4.1.19376.1.5.3.1.2.5	PCC TF-2:6.3.2.7	
<b>Sections</b>					
R2 [1..1]		Payers	1.3.6.1.4.1.19376.1.5.3.1.1.5.3.7	PCC TF-2:6.3.3.7.1	
O [0..1]		General Medical Information (Height, Weight)	1.3.6.1.4.1.19376.1.5.3.1.1.5.3.2	PCC TF-2:6.3.3.4.5	
O [0..1]		Allergies and Drug Sensitivities	1.3.6.1.4.1.19376.1.5.3.1.3.13	PCC TF-2:6.3.3.2.11	
O [0..1]		Active Problems	1.3.6.1.4.1.19376.1.5.3.1.3.6	PCC TF-2:6.3.3.2.3	
O [0..1]		Resolved Problems	1.3.6.1.4.1.19376.1.5.3.1.3.8	PCC TF-2:6.3.3.2.5	
O [0..1]		Immunizations	1.3.6.1.4.1.19376.1.5.3.1.3.23	PCC TF-2:6.3.3.3.5	
O <sup>5</sup> [0..1]		Pregnancy History	1.3.6.1.4.1.19376.1.5.3.1.1.5.3.4	PCC TF-2:6.3.3.2.18	
M [1..1]		Medication Administration	1.3.6.1.4.1.19376.1.9.1.2.6	PHARM TF-3: 6.3.3.10.S1	

Additional explanation:

<sup>5</sup> In case the patient is currently pregnant, this element is R and shall contain information about the current pregnancy. It shall not be used to document past pregnancies.

560 The sections “General Medical Information (Height, Weight)”, “Allergies and Drug Sensitivities”, “Active Problems”, “Resolved Problems”, “Immunizations”, “Pregnancy History” are considered as sections containing medical information of the patient.

Although real-world projects may require some of these information, no stricter constraints as optional (O) could been applied to these sections in the profile due to the large degree of diversity in business requirements and privacy issues among different current.

### **6.3.1.D1.6 CMA Conformance and Example**

565 CDA Release 2.0 documents that conform to the requirements of this document content module shall indicate their conformance by the inclusion of the 1.3.6.1.4.1.19376.1.9.1.1.4 XML elements in the header of the document.

570 A CDA Document may conform to more than one template. This content module inherits from the PCC TF Medical Document, 1.3.6.1.4.1.19376.1.5.3.1.1.1, content modules and so must conform to the requirements of those templates as well as this document specification, Community Medication Administration template, 1.3.6.1.4.1.19376.1.9.1.1.4.

A complete example of the Community Medication Administration (CMA) Document Content Module is available on the IHE Google Drive.

575 Note that this is an example and is meant to be informative and not normative. This example shows the <templateId (OIDs)> elements for all of the specified templates.

```
<ClinicalDocument xmlns='urn:hl7-org:v3'>
  <typeId extension="POCD_HD000040" root="2.16.840.1.113883.1.3"/>
  <templateId root='1.3.6.1.4.1.19376.1.5.3.1.1.1' />
  <templateId root='1.3.6.1.4.1.19376.1.9.1.1.4' />
  <id root=' ' extension=' '/>
  <code code='87231-7' displayName='Medication administration.extended'
    codeSystem='2.16.840.1.113883.6.1' codeSystemName='LOINC' />
  <title>Medication Administration</title>
  <effectiveTime value='20150219012005' />
  <confidentialityCode code='N' displayName='Normal'
    codeSystem='2.16.840.1.113883.5.25' codeSystemName='Confidentiality' />
  <languageCode code='en-US' />
  :
  <component>
    <structuredBody>
      :
      </structuredBody>
    </component>
  </ClinicalDocument>
```

*Add to Section 6.3.2 Header Content Modules*

### **6.3.2 CDA Header Content Modules**

Section not applicable.

600 **6.3.3 CDA Section Content Modules**

*Add to Section 6.3.3.10 Section Content Modules*

**6.3.3.10.S1 Medication Administration Section Content Module  
(1.3.6.1.4.1.19376.1.9.1.2.4)**

605

<b>Template ID</b>	1.3.6.1.4.1.19376.1.9.1.2.4	
<b>Parent Template</b>	-	
<b>General Description</b>	The Medication Administration Section contains a description of the medications administered to the patient. It includes exactly one Medication Administration Item entry as described in the Medication Administration Item Entry Content Module.	
<b>LOINC Code</b>	<b>Opt</b>	<b>Description</b>
87232-5	R	Medication administration.brief
<b>Entries</b>	<b>Opt</b>	<b>Description</b>
1.3.6.1.4.1.19376.1.9.1.3.16	R	Medication Administration Item Entry Content Module

610

```
<component>
  <section>
    <templateId root='1.3.6.1.4.1.19376.1.9.1.2.4' />
    <id root=' ' extension=' ' />
    <code code='87232-5' displayName='Medication administration.brief'
      codeSystem='2.16.840.1.113883.6.1' codeSystemName='LOINC' />
    <title>Medication Administration</title>
    <text>
      Text as described above
    </text>
    <author>
      :
    </author>
    <!-- exactly one Medication Administration Item -->
    <entry>
      <substanceAdministration classCode='SBADM' moodCode='EVN'>
        <templateId root='1.3.6.1.4.1.19376.1.9.1.3.16' />
        :
        </substanceAdministration>
      </entry>
    </section>
  </component>
```

615

620

625

630 **6.3.3.10.S1.1 Parent Templates**

This section has no parent structure. The value for ‘section/code’ SHALL be “87232-5” “Medication administration.brief”.

### 6.3.3.10.S1.2 Medication Administration Section ID

<id root=' ' extension=' '/>

- 635 A Medication Administration Section identifier SHALL be represented in the section <id> Element. The data type of the ID is II.

### 6.3.3.10.S1.3 Medication Administration Author

<author>...</author>

- 640 In the case where the CMA author or the timestamp of a Medication Administration Item is different from the author and timestamp of the Community Medication Administration document, the CMA author and timestamp of the medication treatment plan shall be represented by the <author> element of the section.

Data element	HL7 V3 Data Type	CDA Body position (relative XPath expression)
CMA Author Profession	CE	<i>author/functionCode</i>
Timestamp of administration	TS	<i>author/time</i>
CMA Author ID	II	<i>author/assignedAuthor/id</i>
CMA Author Specialty	CE	<i>author/assignedAuthor/code</i>
CMA Author Name	PN	<i>author/assignedAuthor/assignedPerson/name</i>
CMA Author Organization Identifier	II	<i>author/assignedAuthor/representedOrganization/id</i>
CMA Author Organization Name	ON	<i>author/assignedAuthor/representedOrganization/name</i>
CMA Author Organization Address	AD	<i>author/assignedAuthor/representedOrganization/addr</i>

645 **6.3.4 CDA Entry Content Modules**

*Add to Section 6.3.4.E Entry Content Modules*

### 6.3.4.E1 Medication Administration Item Entry Content Module (1.3.6.1.4.1.19376.1.9.1.3.16)

- 650 Medication Administration Item belongs to one Community Medication Administration and represents one administered medication. It may be associated with one or more observations. Medication Administration Item describes the medicine and dosage information as well as other information.

#### **6.3.4.E1.1 Standards**

- 655 This part describes the general structure for a Medication Administration Item. It is based on the following standards:

<b>HL7V3 NE2009</b>	<a href="#">HL7 V3 2009 Normative Edition</a>
<b>CCD</b>	<a href="#">ASTM/HL7 Continuity of Care Document</a>
<b>IHE PCC</b>	<a href="#">Medications Entry (1.3.6.1.4.1.19376.1.5.3.1.4.7)</a>

#### **6.3.4.E1.2 Parent Template**

- 660 This entry content module is based on the HL7 CCD template medication activity 2.16.840.1.113883.10.20.1.24 and inherits the structure of the Medication Entry Content Module, 1.3.6.1.4.1.19376.1.5.3.1.4.7.

#### **6.3.4.E1.3 Specification**

This section makes use of the medicine and other entry content modules.

665

This specification relies on the PCC Medication Entry Content Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification and only describes additional constraints.

- 670 The sections below identify and describe these fields, and indicate the constraints on whether or not they are required to be sent. The fields are listed in the order that they appear in the CDA XML content.

```

675 <substanceAdministration classCode='SBADM' moodCode='EVN'>
676   <templateId root='2.16.840.1.113883.10.20.1.24' />
677   <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.7' />
678   <templateId root='1.3.6.1.4.1.19376.1.9.1.3.16' />
679   <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.7.1' />
680   <id root=' ' extension=' ' />
681   <code code=' ' codeSystem=' ' displayName=' ' codeSystemName=' ' />
682   <text><reference value="#med-1"/></text>
683   <statusCode code='completed' />
684   <effectiveTime xsi:type='IVL_TS'>
685     <low value=' '/>
686     <high value=' '/>
687   </effectiveTime>
688   <effectiveTime operator='A' xsi:type='TS|PIVL_TS|EIVL_TS|PIVL_PPD_TS|SXPR_TS'>
689     :
690   </effectiveTime>
691   <routeCode code=' ' codeSystem=' ' displayName=' ' codeSystemName=' ' />
692   <approachSiteCode code=' ' codeSystem=' ' displayName=' ' codeSystemName=' ' />
693   <doseQuantity value=' ' unit=' ' />
694   <rateQuantity value=' ' unit=' ' />
695   <consumable>
696     <manufacturedProduct classCode="MANU">
697       <templateId root="1.3.6.1.4.1.19376.1.5.3.1.4.7.2" />
698       <templateId root="2.16.840.1.113883.10.20.1.53" />
699       <manufacturedMaterial classCode="MMAT" determinerCode="KIND" >
700         :
701         <!-- Medicine Entry Content Module (1.3.6.1.4.1.19376.1.9.1.3.1) -->
702         :
703       </manufacturedMaterial>
704     </manufacturedProduct>
705   </consumable>
706   <!--
707     Author(s) in case of usage elsewhere as in a CMA document
708   -->
709   <author>...</author>
710   <author>...</author>
711   <!-- 0..* entries describing the components -->
712   <entryRelationship typeCode='COMP' >
713     <sequenceNumber value=' ' />
714     :
715   </entryRelationship>
716   <!-- An optional entry relationship that indicates the reason for use -->
717   <entryRelationship typeCode='RSON' >
718     <act classCode='ACT' moodCode='EVN' >
719       <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.4.1' />
720       <id root=' ' extension=' ' />
721     </act>
722   </entryRelationship>
723   <!-- Reference to a related prescription activity (supply) -->
724   <entryRelationship typeCode='REFR' >
725     <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.7.3' />
726     :
727   </entryRelationship>
728   <!-- Optional Fulfillment Notes -->
729   <entryRelationship typeCode='SUBJ' inversionInd='true' >
730     <act classCode='ACT' moodCode='INT' >
731       <templateId root='2.16.840.1.113883.10.20.1.43' />
732       <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.3.1' />
733       <code code='FINSTRUCT' codeSystem='1.3.6.1.4.1.19376.1.5.3.2' >
734         codeSystemName='IHEActCode' />
735       :
736     </act>
737   </entryRelationship>
738   <!-- Amount of units of the consumable administered -->
739   <entryRelationship typeCode='COMP' >
740     <supply classCode='SPLY' moodCode='RQO' >
741       <templateId root='1.3.6.1.4.1.19376.1.9.1.3.8' /> <!-- PHARM -->

```

```
740      <independentInd value='false' />
    <quantity value=' ' unit=' '/>
  </supply>
</entryRelationship>
<!-- Reference(s) to other items -->
745  <entryRelationship typeCode='REFR'>
    <substanceAdministration classCode='SBADM' moodCode='INT|EVN'>
        <templateId root=' ' />
        ...
    </substanceAdministration>
  </entryRelationship>
750  :
<!-- ID of parent container -->
<reference typeCode='XCRPT'>
    <externalDocument>
        <id root=' ' extension=' ' />
    </externalDocument>
  </reference>
<!-- Precondition -->
755  <precondition>
    <criterion>
        <text><reference value=' '></text>
    </criterion>
  </precondition>
</substanceAdministration>
```

765 **6.3.4.E1.3.1 Medication Administration Item Entry General Specification**

```
<substanceAdministration classCode='SBADM' moodCode='EVN'>
...
</substanceAdministration>
```

The moodCode SHALL be set to EVN.

770 See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

**6.3.4.E1.3.2 Medication Administration Item Entry TemplateID**

```
<templateId root='2.16.840.1.113883.10.20.1.24' />          <!-- CCD -->
<templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.7' />          <!-- PCC -->
<templateId root='1.3.6.1.4.1.19376.1.9.1.3.16' />          <!-- PHARM -->
```

775 A templateId of '1.3.6.1.4.1.19376.1.9.1.3.16' SHALL be present to indicate that this entry is conforming to the Medication Administration Item Entry Content Module.

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

**6.3.4.E1.3.3 Medication Administration Item Entry Additional Template ID**

```
<templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.7.1' />
```

780 The <templateId> element identifies this <entry> as a particular type of medication event, allowing for validation of the content.

The templateId SHALL be set to the value for “normal dosing” (1.3.6.1.4.1.19376.1.5.3.1.4.7.1).

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

#### **6.3.4.E1.3.4 Medication Administration Item ID**

785   <id root=' ' extension=' '/>

This ID represents the Medication Administration Item ID and SHALL be present.

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

#### **6.3.4.E1.3.5 Administration Status Code**

<code code="" displayName="" codesystem='2.16.840.1.113883.4.642.1.101'

790    codeSystemName='HL7 EventStatus' />

This <code> element is used to indicate the overall status of the administration event documented. It SHALL be set to a value out of the HL7 code system “EventStatus” (2.16.840.1.113883.4.642.1.101), according to the following rules:

795   In case this administration is the only documented administration of a “single point of time” or “simple interval” administration or the last documented administration of a “complex interval” administration chain, it SHALL be set to “**completed**” or “**aborted**”, depending on the course of the administration.

In all other cases it SHALL be set to “**in-progress**”.

#### **6.3.4.E1.3.6 Narrative Text**

800   <text><reference value=' '/></text>

This element SHALL be present. The URI given in the value attribute of the <reference> element points to an element in the narrative content that contains the complete text describing the medication included in the plan.

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

805   **6.3.4.E1.3.7 Status Code**

<statusCode code='completed' />

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

810   Please note that this element does NOT represent the status of the Medication Administration Item. There is no dedicated data element to record such a status, please refer to the Community Medication Prescription and Dispense (CMPD) Profile for more information.

#### **6.3.4.E1.3.8 effectiveTime (Time of administration)**

The first <effectiveTime> element, indicating the start and stop time of the medication regimen according to the parent IHE PCC Medications template (1.3.6.1.4.1.19376.1.5.3.1.4.7), SHALL be present and represent the time of the administration depending on the administration type:

- 815
  - “Single point of time” administration
  - “Simple interval” administration
  - “Complex interval” administration

Note: See Volume 1 of this profile for further information on administration types.

820   In case of “single point of time” administrations, the <low> element and <high> element SHALL equally be set to the date/time of the administration.

In case of “interval” administrations (simple or complex), the <low> and <high> element indicate the start and stop date/time of the administration interval documented.

Note: In case of „Complex interval administrations“, this element contains the start and stop date/time of the current “partial interval” of the overall “Complex interval administration”.

825   **6.3.4.E1.3.9 Medication frequency**

A second <effectiveTime> element, indicating the medication frequency according to the parent IHE PCC Medications template (1.3.6.1.4.1.19376.1.5.3.1.4.7), SHALL NOT be present, because it's not applicable to the documentation of administration events.

**6.3.4.E1.3.10 Route of Administration**

830   <routeCode code=' ' displayName=' ' codeSystem=' ' codeSystemName=' '/>

This element SHALL be present IF KNOWN.

Note: In case of „Complex interval administrations“, this element contains the route code of the current “partial interval” of the overall “Complex interval administration”.

835   The constraints defined for this element in PCC TF2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification apply to this element.

**6.3.4.E1.3.11 Approach Site Code**

<approachSiteCode code=' ' displayName=' ' codeSystem=' ' codeSystemName=' '/>

This element MAY be present.

840   Note: In case of „Complex interval administrations“, this element contains the approach site code of the current “partial interval” of the overall “Complex interval administration”.

The constraints defined for this element in PCC TF2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification apply to this element.

**6.3.4.E1.3.12 Dose Quantity**

<doseQuantity value=' ' unit=' '/>

845   This element SHALL be present IF KNOWN.

Note: In case of „Complex interval administrations“, this element contains the dose quantity of the current “partial interval” of the overall “Complex interval administration”.

The constraints defined for this element in PCC TF2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification apply to this element.

850 **6.3.4.E1.3.13 Rate Quantity**

<rateQuantity value=' ' unit=' '/>

This element SHALL be present IF KNOWN.

Note: In case of „Complex interval administrations“, this element contains the rate quantity of the current “partial interval” of the overall “Complex interval administration”.

855 The constraints defined for this element in PCC TF2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification apply to this element.

**6.3.4.E1.3.14 Consumable**

<consumable>

<manufacturedProduct" classCode="MANU">

860 <templateId root="1.3.6.1.4.1.19376.1.5.3.1.4.7.2"/>

<templateId root="2.16.840.1.113883.10.20.1.53"/>

<manufacturedMaterial classCode="MMAT" determinerCode="KIND">

:

<!-- Medicine Entry Content Module (1.3.6.1.4.1.19376.1.9.1.3.1) -->

865 :

</manufacturedMaterial>

</manufacturedProduct>

</consumable>

870 The <consumable> element SHALL be present, and shall contain a medication entry, conforming to the Medicine Entry template (1.3.6.1.4.1.19376.1.9.1.3.1).

The <consumable> element of a Community Medication Administration describes the medication that is administered to the patient.

See PHARM TF-3, Medicine Entry Module (1.3.6.1.4.1.19376.1.9.1.3.1) specification.

#### 6.3.4.E1.3.15 Medication Administration Author

875 <author>...</author>

In the case that the Medication Administration Item is used within a Community Medication Administration document according to the “Community Medication Administration” (CMA) Profile this element SHALL NOT be present.

880 In all other cases (e.g., when used in a “Community Medication List” document according to the PML Profile or in medication sections of other documents as for example Discharge Summaries, etc.) this element SHOULD be present and represent the author and timestamp of the Medication Administration Item.

This first author element SHALL be present in case that the “Community Medication Administration document author” is present (see Section 6.3.4.E1.3.16).

885 The table below shows the meaning of the data elements of this <author> element. It SHOULD be corresponding to the <author> element of the Community Medication Administration document or, if given, the <author> element of the Medication Administration section within the Community Medication Administration document.

Data element	HL7 V3 Data Type	CDA Body position (relative XPath expression)
CMA Author Profession	CE	<i>author/functionCode</i>
Timestamp of creation	TS	<i>author/time</i>
CMA Author ID	II	<i>author/assignedAuthor/id</i>
CMA Author Specialty	CE	<i>author/assignedAuthor/code</i>
CMA Author Name	PN	<i>author/assignedAuthor/assignedPerson/name</i>
CMA Author Organization Identifier	II	<i>author/assignedAuthor/representedOrganization/id</i>
CMA Author Organization Name	ON	<i>author/assignedAuthor/representedOrganization/name</i>
CMA Author Organization Address	AD	<i>author/assignedAuthor/representedOrganization/addr</i>

890

#### **6.3.4.E1.3.16 Community Medication Administration document author**

**<author>...</author>**

In the case that the Medication Administration Item is used within a Community Medication Administration document according to the “Community Medication Administration” (CMA) Profile this element SHALL NOT be present.

If the author of the Community Medication Administration document is already present in the “Medication Administration Author” element (see section above) this element SHALL NOT be present.

In all other cases (e.g., when used in a “Community Medication List” document according to the PML Profile or in medication sections of other documents as for example Discharge Summaries, etc.) this element MAY be present and represent the author and timestamp of the Community Medication Administration document.

The table below shows the meaning of the data elements of this <author> element. It SHALL be corresponding to the <author> element of the Community Medication Administration document header.

<b>Data element</b>	<b>HL7 V3 Data Type</b>	<b>CDA Body position (relative XPath expression)</b>
CMA document author Profession	CE	<i>author/functionCode</i>
Timestamp of document creation	TS	<i>author/time</i>
CMA document author ID	II	<i>author/assignedAuthor/id</i>
CMA document author Specialty	CE	<i>author/assignedAuthor/code</i>
CMA document author Name	PN	<i>author/assignedAuthor/assignedPerson/name</i>
CMA document author Organization Identifier	II	<i>author/assignedAuthor/representedOrganization/id</i>
CMA document author Organization Name	ON	<i>author/assignedAuthor/representedOrganization/name</i>
CMA document author Organization Address	AD	<i>author/assignedAuthor/representedOrganization/addr</i>

910    **6.3.4.E1.3.17 Reason**

```
<entryRelationship typeCode='RSON'>
  <act classCode='ACT' moodCode='EVN'>
    <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.4.1'>
      <id root=' ' extension=' '/>
    </act>
</entryRelationship>
```

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

**6.3.4.E1.3.18 Reference to a related prescription activity (supply)**

```
<entryRelationship typeCode='REFR'>
  <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.7.3'>
  ...
</entryRelationship>
```

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

This element SHALL NOT be present.

925    **6.3.4.E1.3.19 <Reserved>**

**6.3.4.E1.3.20 Fulfillment Notes**

```
<entryRelationship typeCode='SUBJ' inversionInd='true'>
  <act classCode='ACT' moodCode='INT'>
    <templateId root='2.16.840.1.113883.10.20.1.43'>
    <templateId root='1.3.6.1.4.1.19376.1.5.3.1.4.3.1'>
    <code code='FINSTRUCT' codeSystem='1.3.6.1.4.1.19376.1.5.3.2'
      codeSystemName='IHEActCode' />
    ...
</entryRelationship>
```

935    At most one fulfillment note MAY be provided for each <substanceAdministration> entry.-When present, this entry relationship SHALL contain a [Medication Fulfillment Instructions](#) (1.3.6.1.4.1.19376.1.5.3.1.4.3.1) entry.

940    Fulfillment Notes (used in a Medication Administration Item) are comments from the administering person regarding issues happened during the administration act or up until the creation of the CMA report. Due to the nature of the Medication Fulfillment Instructions

(1.3.6.1.4.1.19376.1.5.3.1.4.3.1) Content Module, these comments are limited to narrative text only.

Examples:

- The patient reacted on the administration by fainting
- 945     • The infusion device had a minor malfunction, but was repaired without influencing the administration

Note: Comments regarding the administration act about issues happening after the creation of the CMA report (e.g., an allergy to the medication recognized after the administration act, etc.) should be documented by a Pharmaceutical Advice (PADV) related to this administration.

950     PADV may also be used for comments regarding the administration act happened during the administration act or up until the creation of the CMA report, e.g., in case narrative description of the issue is not sufficient.

#### **6.3.4.E1.3.21 Amount of units of the consumable administered**

```
<entryRelationship typeCode='COMP'>  
955     <supply classCode='SPLY' moodCode='RQO'>  
         ...  
         </supply>  
</entryRelationship>
```

This element SHALL be present and describes the amount of units administered. If present, it SHALL contain a quantity conforming to the Amount of units of the consumable Entry template (1.3.6.1.4.1.19376.1.9.1.3.8). See PHARM TF-3, Amount of units of the consumable Entry Module (1.3.6.1.4.1.19376.1.9.1.3.8) specification.

Note: If no medication has been administered for any reason, but the act is still considered as completed (non-administration) this SHALL be recorded with the value of quantity set to zero and unit being not present. Reasons for the non-administration can be described in Fulfillment Notes.

#### **6.3.4.E1.3.22 Reference to Medication Treatment Plan Item**

```
<entryRelationship typeCode='REFR'>  
     <substanceAdministration classCode='SBADM' moodCode='INT|EVN'>  
970         <templateId root='1.3.6.1.4.1.19376.1.9.1.3.10' /> <!-- PHARM -->  
         ...  
         </substanceAdministration>  
</entryRelationship>
```

975 The reference to a related Medication Treatment Plan Item SHALL be present IF KNOWN and SHALL contain a reference to a Medication Treatment Plan Item, conforming to the Reference to Medication Treatment Plan Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.10).

See PHARM TF-3, Reference to Medication Treatment Plan Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.10) specification.

#### **6.3.4.E1.3.23 Reference to Prescription Item**

980 <entryRelationship typeCode='REFR'>  
    <substanceAdministration classCode='SBADM' moodCode='INT'>  
        <templateId root='1.3.6.1.4.1.19376.1.9.1.3.11' /> <!-- PHARM -->  
        ...  
    </substanceAdministration>

985 </entryRelationship>  
The reference to the Prescription Item this administration is related to SHALL be present IF KNOWN and SHALL contain a reference to a Prescription Item Entry, conforming to the Reference to Prescription Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.11).

990 See PHARM TF-3, Reference to Prescription Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.11) specification.

#### **6.3.4.E1.3.24 Reference to Dispense Item**

995 <entryRelationship typeCode='REFR'>  
    <supply classCode='SPLY' moodCode='EVN'>  
        <templateId root='1.3.6.1.4.1.19376.1.9.1.3.12' />  
        ...  
    </supply>

1000 </entryRelationship>  
The reference to the Dispense Item this administration is related to SHALL be present IF KNOWN and SHALL contain a reference to a Dispense Item, conforming to the Reference to Dispense Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.12).

See PHARM TF-3, Reference to Dispense Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.12) specification.

#### **6.3.4.E1.3.25 Reference to Pharmaceutical Advice Item**

1005 <entryRelationship typeCode='REFR'>  
    <observation classCode='OBS' moodCode='EVN'>

```
<templateId root='1.3.6.1.4.1.19376.1.9.1.3.13'>
```

```
...
```

```
</observation>
```

```
</entryRelationship>
```

- 1010 An administration may be related to a Pharmaceutical Advice, which was given on one of the items on higher (e.g., PADV on underlying prescription or dispense) or equal (e.g., PADVs on previous administrations) steps of this administration act.  
Example: a Pharmaceutical Advice to the underlying dispense of this administration, indicating that the dosage instructions have changed since the last administration of the dispensed medication.
- 1015 The reference to a Pharmaceutical Advice Item this administration is related to SHOULD be present IF KNOWN and SHALL contain a reference to a Pharmaceutical Advice Item, conforming to the Reference to Pharmaceutical Advice Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.13).
- 1020 See PHARM TF-3, Reference to Pharmaceutical Advice Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.13) specification.

#### **6.3.4.E1.3.26 Reference to preceding Medication Administration Item**

```
<entryRelationship typeCode='REFR'>
```

```
<substanceAdministration classCode='SBADM' moodCode='EVN'>
```

- 1025 

```
<templateId root='1.3.6.1.4.1.19376.1.9.1.3.14'>
```

```
...
```

```
</substanceAdministration>
```

```
</entryRelationship>
```

- 1030 An administration may be related to a preceding Medication Administration Item to indicate that this “chain of administrations” shall be seen as one „**complex interval**” administration.  
For more information on the usage of this element see Use-case section of Volume 1 of this profile.

- 1035 The reference to a preceding Medication Administration Item this administration is related to SHALL be present IF KNOWN and SHALL contain a reference to a Medication Administration Item, conforming to the Reference to Medication Administration Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.14).

See PHARM TF-3, Reference to Medication Administration Item Content Module (1.3.6.1.4.1.19376.1.9.1.3.14) specification.

**6.3.4.E1.3.27 ID of parent container (Community Medication Administration document)**

1040    <reference typeCode='XCRPT'>  
      <externalDocument>  
         <id root=' ' extension=' '/>  
      </externalDocument>  
1045    </reference>

In the case that the Medication Administration Item is used within a Community Medication Administration document according to the “Community Medication Administration” (CMA) Profile this element SHALL NOT be present.

1050    In all other cases (e.g., when used in a “Community Medication List” document according to the PML Profile or in medication sections of other documents as for example Discharge Summaries, etc.) this element SHOULD be present and contain the identifier of the Community Medication Administration document, the Medication Administration Item initially has been created.

**6.3.4.E1.3.28 Precondition Criterion**

1055    <precondition>  
      <criterion>  
         <text><reference value=' '></text>  
      </criterion>  
   </precondition>

1060    In a CDA document, the preconditions for use of the medication are recorded in the <precondition> element. The value attribute of the <reference> element is a URL that points to the CDA narrative describing those preconditions.

This element MAY be present.

See PCC TF-2, Medication Entry Module (1.3.6.1.4.1.19376.1.5.3.1.4.7) specification.

**6.4 Section not applicable**

1065    This heading is not currently used in a CDA document.

<i>Add to Section 6.5 Value Sets</i>
--------------------------------------

## 6.5 CMA Value Sets

1070

*Add value to IHE Pharmacy Item Type List*

### 6.5.2 IHE Pharmacy Item Type List

Add the following value to the **IHE Pharmacy Item Type List (1.3.6.1.4.1.19376.1.9.2.2)**:

Code	Display Name
CMAItem	Medication Administration Item

1075

## Appendices to Volume 3

### Appendix A – Validating CDA Documents using the Framework

#### A.1 Validating Documents

For validation of document content modules please refer to PCC TF-2: B.1.

#### A.2 Validating Sections

1080 For validation of section content modules please refer to PCC TF-2: B.2.

#### A.3 Phases of Validation and Types of Errors

For the phases of validation and types of errors please refer to PCC TF-2: B.3.

## **Appendix B – Extensions to CDA Release 2**

- 1085 See extensions to CDA Release 2 described in Section “Appendix B – Extensions to CDA Release 2” of the Community Prescription (PRE) Profile.

## Volume 3 Namespace Additions

1090 *Add the following terms to the IHE Namespace:*

- Community Medication Administration (CMA) Document Content Module
  - 1.3.6.1.4.1.19376.1.9.1.1.4
- Medication Administration Section Content Module
  - 1.3.6.1.4.1.19376.1.9.1.2.4
- Medication Administration Entry Content Module
  - 1.3.6.1.4.1.19376.1.9.1.3.16

1095

1100

## Volume 4 – National Extensions

*Add appropriate Country section*

Not applicable