Use of the Suggested Clinical Data Elements is Voluntary / Optional

Parenteral Nutritional Therapy Laboratory Test Results
Suggested Clinical Data Elements

Version R1.0d (5/20/2018)

Note: If these CDEs are used:
1) CDEs in black Calibri are required
2) CDEs in *burnt orange Italics Calibri* are required if the condition is met
3) CDEs in *blue Times New Roman* are recommended but not required

**Beneficiary Information CDEs**

PBD: Patient/Beneficiary Demographics

- **PBD1**: Patient’s first name, last name, and middle initial (text)
- **PBD2**: Patient’s date of birth (date: MM/DD/YYYY)
- **PBD3**: Patient’s gender (Single selection from the value set: M, F, Other)
- **PBD4**: Patient’s Medicare ID (Medicare ID format and check digit)

**F2F Encounter CDEs**

PND: Provider/NPP Demographics

- **PND1**: Provider or allowed NPP first name, last name, middle initial, and suffix (text).
- **PND2**: Provider NPI (Numeric with check digit)

ENC: Encounter

- **ENC1**: Date of encounter (date: MM/DD/YYYY)

**Testing Information CDEs**

PPT: Person Performing Testing

- **PPT1**: Laboratory (text)
- **PPT2**: Laboratory NPI (Numeric with check digit)
- **PPT3**: Name of tester (text)
- **PPT4**: Tester credentials (text)

**Date of Testing**

DOT: Date of Testing

- **DOT1**: Date of testing (date: MM/DD/YYYY)
Parenteral Nutritional Therapy Laboratory Tests and Results CDEs

PNTTST: Parenteral Nutritional Therapy Laboratory Testing Information

PNTTST1: Fecal fat: (numeric, g)

PNTTST1a: Time period (single selection from value set 24H, 72H)

PNTTST2: Serum albumen: (numeric, g/dl)

Provider Signature CDEs

SIGPNP: Physician/NPP Signature Elements

SIGPNP1: Physician/NPP signature (image, electronic, or digital)

SIGPNP2: Physician/NPP name (printed) (text)

SIGPNP5: Date of signature (MM/DD/YYYY)

SIGPNP4: Physician/NPP NPI (NPI format)