HEALTH INFORMATION STANDARDS COMMITTEE FOR ALBERTA

IMMUNIZATION MINIMUM DATA SET

Status: Approved
Version 1.5
Status Date: February 23, 2017

Revision History

Version	Revision Date	Summary of Changes
0.0	JAN 19, 2000	Draft presented to HISCA
0.1	FEB 10, 2000	Draft version distributed to Regional Health Authorities
0.2	MAR 15, 2002	Accepted in Draft
1.0	JUN 04, 2002	Approved
1.1	JAN 17, 2006	Amendment, Approved
1.2	FEB 09, 2010	Amendment, Approved
1.3	MAY 31, 2013	Amendment, Approved
1.4	DEC 3, 2013	Amendment, Approved
1.5	FEB 23, 2017	Amendment, Approved Added permissible values - Manufacture, Submitter Prefix, Delivery Organization of Service, Delivery Management Sites, Vaccine, Antigen, Administering Method and Dosage Codes

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Introduction

The Immunization Data Set was approved as a provincial standard by the Health Information Standards Committee for Alberta (HISCA) back in June of 2002. As part of the HISCA process, all approved standards are reviewed on a predetermined schedule (or sooner if industry changes deem it necessary). This review determines whether an approved standard should be confirmed, revised or withdrawn. If revisions are required, an amendment is prepared and resubmitted to HISCA for Approval. This document has been updated with the changes that have occurred in the past.
The purpose of this document is to define the reporting requirements for the collection of detailed, client-based immunization data. The elements included in the immunization minimum data set identify the immunization service recipient (stakeholder) and describe the immunization event.

Requirement for Amendment

As data is reported sequentially, gaps in the Immunization Data set become apparent. To improve the quality of the data, new fields were introduced to add value to the analysis. Some changes include vaccine manufacturers as new vaccine programs were introduced. In response, Alberta Health's application was modified so that data collected is current and meets Alberta Health and Alberta Heath Services' needs. This information directly impacts funding decisions, vaccine distribution, and supports policy decisions.

Immunization Subject Area

In late 1997, as part of phase one of the Public Health Information System (PHIS) Project, Alberta Health and Wellness[1] conducted a review of the data that was currently being reported in several public health areas including immunization. The intent of the review was to ensure that the data being requested from the Regional Health Authorities[2] (RHAs) supported Alberta Health and Wellness' current mandate. The review also looked at alternatives that would support a move towards electronic submission of the required public health data.

The first step in the review was to work with members of the Disease Control and Prevention Branch, the Health Surveillance Branch and the Population Health Strategies Branch to define the data and information required to meet their needs. That step resulted in a draft list of required data elements, data definitions and proposed uses of the data. The next step was to explore with other areas within Alberta Health and Wellness their requirement for additional data in the specific public health areas under review. Based on the feedback received from Disease Control and Prevention and Health Surveillance of Alberta Health and Wellness, the list of required data was updated.

The final step in the review process was to meet with representatives from all stakeholders including the RHAs and the First Nations & Inuit Health Branch to obtain their feedback on the list of required data and the data definitions. The review with the stakeholders was conducted through a one-day work session held February 23, 1998. In regards to immunization, the purpose of the session was to:

1. Review the immunization data required by Alberta Health and Wellness. This involved outlining the immunization data Alberta Health and Wellness required, the reasons why the data was needed and how the data was to be used. The review was used to confirm with the stakeholder representatives that the data being requested:
    - was either already being collected by the stakeholders or needed to be collected;
    - had the broadest possible use for both Alberta Health and Wellness and the RHAs; and
    - was clearly understood and could reliably be collected.

2. *Prepare for implementation.* Prior to submission of the required immunization data, Alberta Health and Wellness wanted to work with the stakeholder representatives to determine
    - if there were any issues associated with collection of the required data; and

[1] Current name at the time.
[2] Current name at the time.

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- viable alternatives for supplying the required data to Alberta Health and Wellness in an electronic format.

The results of this one day work session were documented in the April 30, 1998 Public Health Information System – Reporting Requirements External Review – Final Report which was distributed to all of the stakeholders. The Immunization Minimum Data Set documented all of the immunization fields agreed upon by the stakeholders. The report also provided the definition, the allowable values, the rationale for the reporting requirement, the business rules and the format of each field.

In mid 1999, Alberta Health and Wellness developed a draft Immunization Data Submission Guideline. The draft Immunization Data Submission Guideline defined the required file layout, record structure and field lengths for the submission of detailed immunization data. The guideline was meant to serve as a technical guide for stakeholder technical staff required to develop an extract of immunization data for submission to the Department. This draft was produced primarily for the three Alberta we*//*net Common Opportunities vendors who had started building components of their immunization module for RHA information systems. A copy of this draft version was distributed for review within Alberta Health and Wellness, to the Alberta we//net Common Opportunities Team Leader, and business representatives from Calgary Regional Health Authority, Headwaters Health Authority, Lakeland Regional Health Authority, and Chinook Regional Health Authority.

In January 2000, the proposed draft data standards were presented to the Health Information Standards Committee for Alberta (HISCA). At that time, HISCA gave Alberta Health and Wellness authorization to distribute these standards via Alberta we//net Common Opportunities to the Regional Health Authorities for information purposes. It was noted that these standards were not yet an “Approved Draft Standard”, pending the completion of the following:

1. HISCA had the opportunity to review the proposed draft standard.
2. The Privacy Impact Assessments (PIA) for the Immunization/ARI project was completed and accepted by the Office of Information and Privacy Commissioner.

In November 2001, the Office of Information and Privacy Commissioner accepted the PIA for Immunization/ARI[3]. In January 2003, the Immunization/ARI application was moved into production and began accepting electronic submissions from the Regional Health Authorities.

Results of the Literature Review

The Immunization Reporting Requirements and the draft Immunization Data Submission Guideline were used to develop the draft Immunization Minimum Data Set. Both documents were beneficial in developing the proposed standard. It was useful having the fields identified and defined by the stakeholders. As well, it was helpful having the rationale for the requirement to understand why the field had been requested to become part of the Immunization Minimum Data Set.

Existing provincial data standards were also reviewed and used where applicable. This included utilizing HISCA data standards and data standards from other Alberta government departments. The HISCA data standard is based on the approved Stakeholder Basic Demographic Data Standard and the documented changes in the draft version from November 28, 2000.

At the time the minimum data set was approved by HISCA, there were no national Immunization Minimum Data Sets. However, an initiative to establish a national immunization records network is being pursued by the Health Canada, Laboratory Centre for Disease Control, Division of Immunization. The national working group for the initiative has surveyed the provinces, territories and other stakeholder groups in regards to the required immunization data elements. The survey and the immunization data elements it proposed were also considered during the preparation of the Immunization Minimum Data Set. Today, Canada Health Infoway has an Immunization Standard; however it’s in a Canadian Draft for Use status. The standard has been developed but it may or may not be implemented or be in use. The standard is

[3] ARI – Adverse Reaction to Immunization

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considered ready to be used by early adopters: however, change is probable as stakeholders begin using the standard in implementations.

Business Case for the Alberta Health Application

Alberta Health requires immunization data to assess the health status of the population, the impact of immunization programs, as well as the communicable disease control efforts. Currently, immunization information is reported to Alberta Health from Alberta Health Services (AHS) electronically. Detailed information about immunization events are recorded by the service providers within the public health service of each AHS Zone, in both paper and electronic format. By receiving identifiable immunization data in a consistent and pre-defined format, the Department can more readily monitor the effectiveness of immunization programs throughout the province and perform epidemiological analysis.

The benefits to the public as a result of this initiative include:

- Better access by the individual to his or her own immunization record by having a consolidated record available in one place. This application will especially assist former Albertans in finding their records. AHS is the responsible custodian of the record; however Alberta Health will be able to better assist in directing an individual to the correct AHS Zone for their information.
- Better information for the Chief Medical Officer of Health who is responsible for setting appropriate and beneficial public health policy to assist in creating effective immunization and communicable disease control programs for the population.
- Improved epidemiological analysis and descriptions of previous communicable disease issues in Alberta, especially with the view of evaluating the impact of previous immunization programs.
- Identifying immediate communicable disease control trends (such as identifying where previous programs did not work causing outbreaks of vaccine preventable disease) to define guiding action to control the burden of disease on the population.

Feasibility and Ease or Difficulty of Implementation

Overall, it should be relatively feasible to implement the proposed immunization standard across the health system. AHS has implemented new information systems to capture and report immunization data- the standards are included as part of their system requirements.

Impact on Privacy, Confidentiality and Security

Alberta Health has conducted a Privacy Impact Assessment (PIA) regarding their requirement to receive detailed immunization data in accordance with the proposed standard. The Office of the Privacy Commissioner accepted the PIA in November 2001.

Relationship to Existing Standards and/or Legislation

Currently, AHS is required to report client based immunization events to Alberta Healthcare in an electronic format.

As part of the Privacy Impact Review for immunization, all related legislation was identified and reviewed for its potential impact on the proposed standard and its implementation. As mentioned in the Results of the Literature Review section, existing HISCA data standards and data standards from other Alberta government departments were used in the development of the Immunization Minimum Data Set where applicable.

Summary of Consensus to Date

As described in the Immunization Subject Area section, all stakeholders were engaged to develop the Immunization Reporting Requirements in April 1998. The stakeholders included representatives from each of the 17 regions, the First Nations & Inuit Health Branch and the Department of Alberta Health. Feedback and input from each stakeholder group was actively sought through a one-day workshop and through subsequent draft versions of the requirements.

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The active involvement of the stakeholders helped to formulate the final reporting requirements. Consensus regarding the Immunization Reporting Requirements was reached among all of the representative stakeholders. While some issues were raised regarding the subsequent implementation of the requirements, there were no major disagreements resulting from the discussion. All stakeholders agreed upon the immunization data to be collected and reported.

Users/Sharers and Usage of the Standard

The following key stakeholder groups use the Immunization Reporting Requirements:

- AHS Zones
- the Department of Alberta Health the First Nations & Inuit Health Branch (FNIHB) – longer term
- Siksika First Nation
- Other First Nation Communities as the information sharing agreements are completed
- Other Community Providers – longer term

Within AHS, Public Health provides the immunization services. Therefore, they will be responsible for capturing and reporting the immunization events to the Department using the standard. Similarly, on reserves throughout the province, FNIHB provides immunization services and likewise will be responsible for capturing and reporting the immunization events to the Department.

When a service recipient receives immunization services in a zone other than the one in which they reside, the zone of service has a responsibility to record and report the immunization event to the Department. For service recipients of common jurisdiction, AHS and the First Nations & Inuit Health Branch should report the immunization events to the Department and to each other. Alberta Health is the recipient of reported immunization events from AHS and the FNIHB. The Department will use this data to monitor, analyze and report on the effectiveness of immunization programs within the province. To ensure that all data is reported in a consistent and uniform manner, the Department will only accept data that meets the proposed standard.

Affected Systems

Currently AHS uses their own information systems to collect and record detailed immunization data. Vendors should conform to the Immunization Minimum Data Sets defined at that time.

Alberta Health developed IMM/ARI, an immunization information system that is able to electronically receive, validate and store immunization data from AHS and FNIHB. The system established an automated mechanism for receiving detailed immunization data from AHS and FNIHB and generates data into a provincial registry of immunization data. The immunization system captures service recipient information as well as the details of each immunization event. The system was developed to conform to the Immunization Minimum Data Set.

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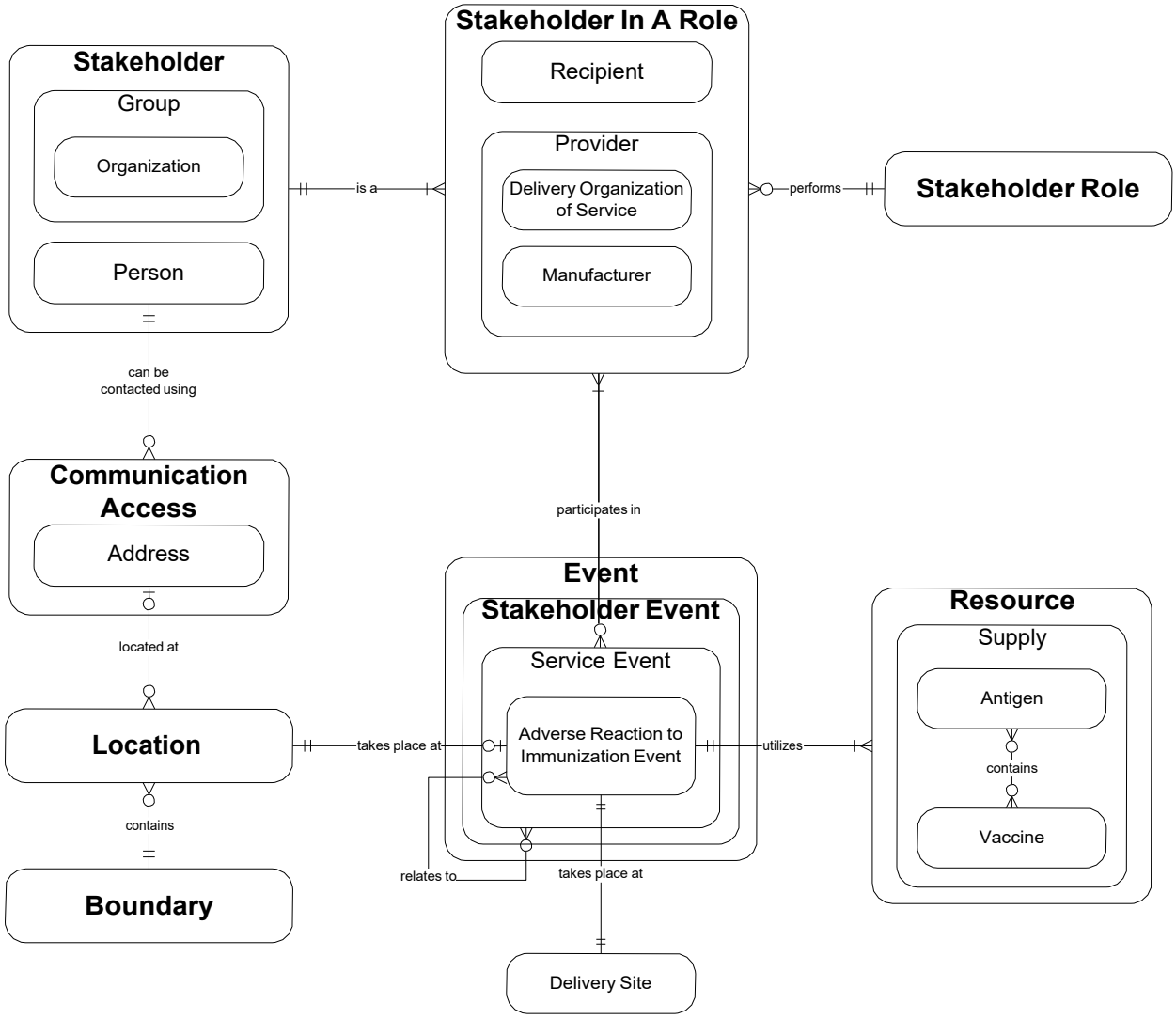
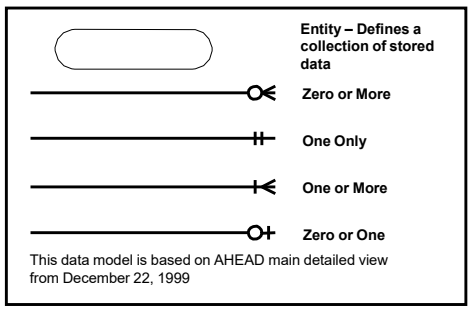
Conceptual Data Model



Legend



This data model is based on AHEAD main detailed view from December 22, 1999

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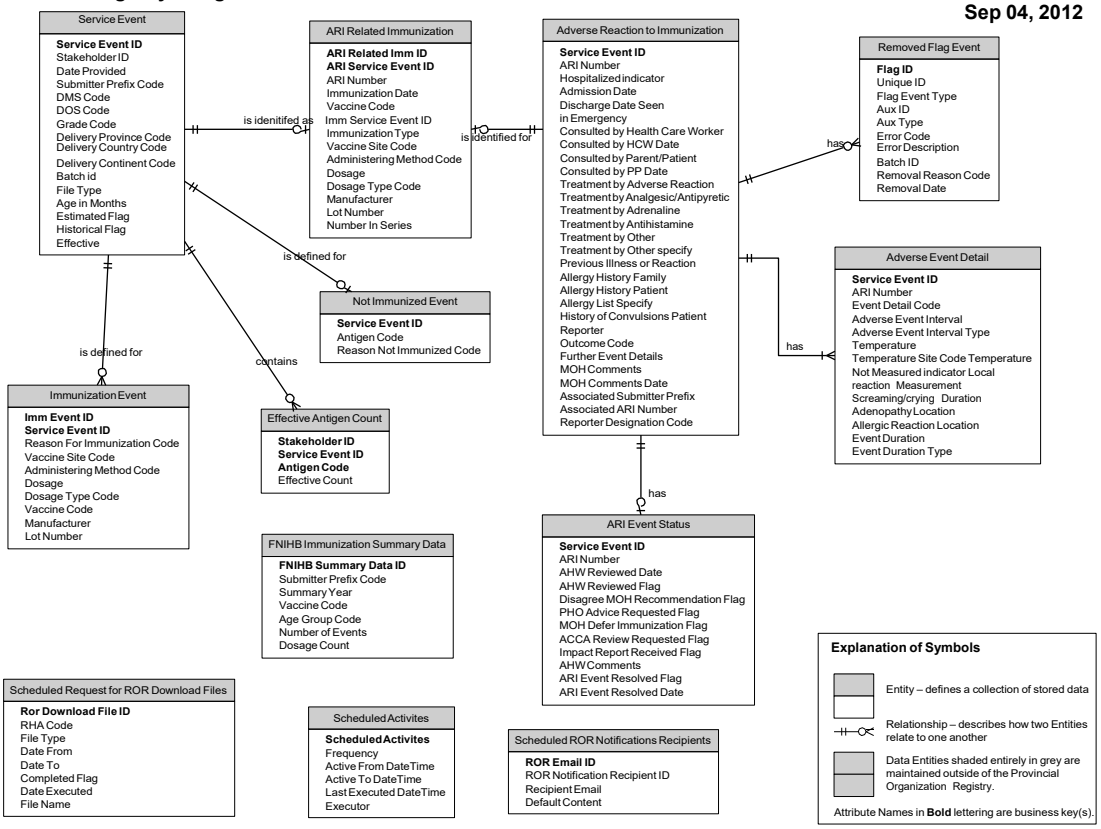
Logical Data Model

The following logical data model was produced for two HISCA datasets - the Immunization and Adverse Event Following Immunization. Therefore, the same logical data model is used in both HISCA documents. Implementers can ignore the extra information when working with the respective dataset. In order to better fit in the printing format of this document, the data model is broken into four subject areas - Event Registry, Geographic Registry, Program/Service Registry, and Stakeholder Registry.

Event Registry

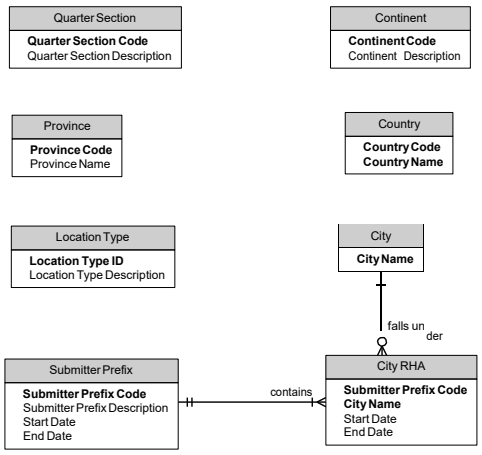
ImmARI Event Registry – Logical Data Model **Version 3.4**
Sep 04, 2012

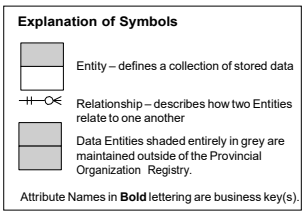


Geographic Registry

ImmARI Geographic Registry – Logical Data Model

Version 3.3
Jan 13, 2012





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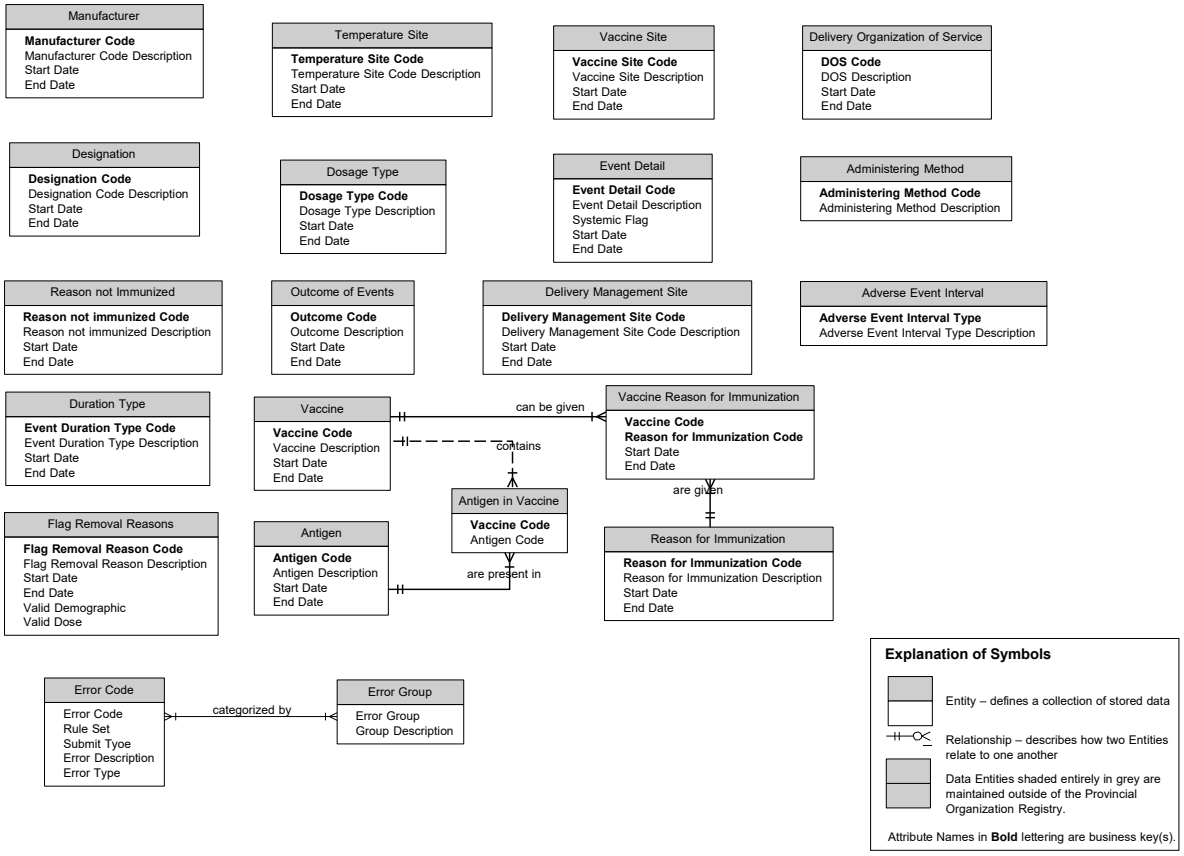
Program/Service Registry

ImmARI Service/Program Registry – Logical Data Model

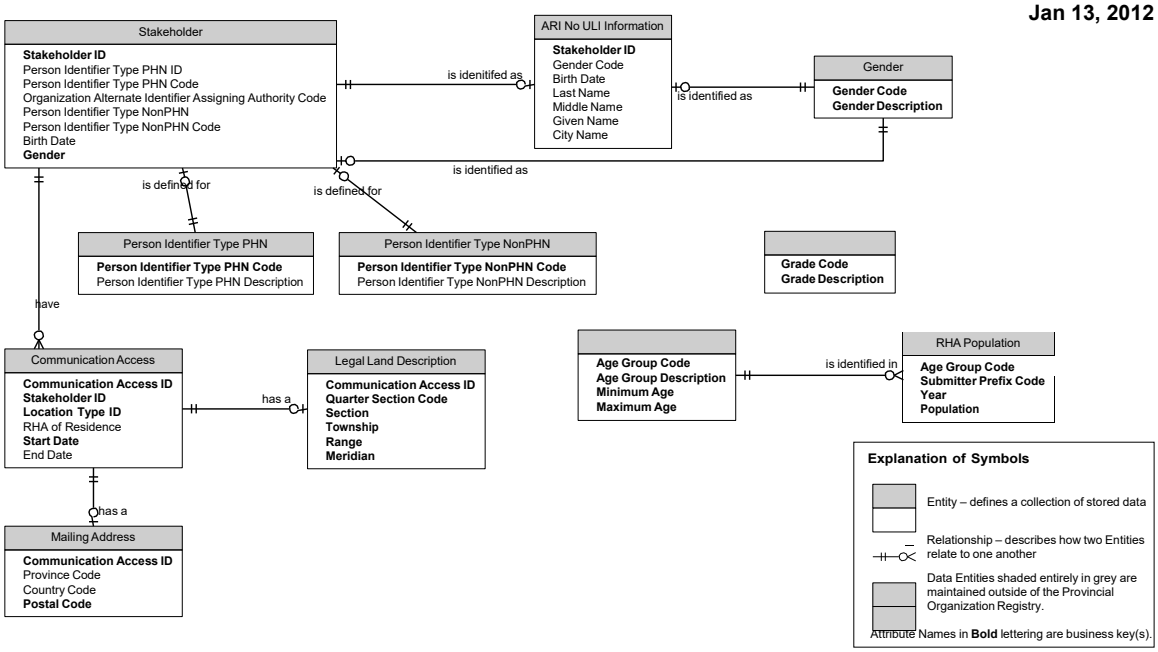
Version 3.4
Sep 5, 2012



Stakeholder Registry

ImmARI Stakeholder Registry – Logical Data Model

Version 3.3
Jan 13, 2012



Data Standards

Compound Name	Immunization Minimum Data Set
Parent Compound Name	
Component Name	Immunization Stakeholder Information Immunization Service Event
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	Alberta Health requires immunization data to assess the health status of the population, the impact of immunization programs, as well as the communicable disease control efforts. The benefits to the public as a result of this of this initiative include: • Better access by the individual to his or her own immunization record by having a consolidated record available in one place. This application will especially assist former Albertans in finding their records. RHAs are the responsible custodian of the record, however Alberta Health will be able to better assist in directing an individual to the correct RHA for their information. • Better information for the Provincial Health Officers who are responsible for setting appropriate and beneficial public health policy to assist in creating effective immunization and communicable disease control programs for the population. • Improved epidemiological analysis and descriptions of previous communicable disease issues in Alberta, especially with the view of evaluating the impact of previous immunization programs. • Identifying immediate communicable disease control trends (such as identifying where previous programs did not work causing outbreaks of vaccine preventable disease) to define guiding action to control the burden of disease on the population.
Business Rule/Coding Guideline	

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Compound Name	Immunization Stakeholder Information
Parent Compound Name	Immunization Minimum Data Set
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	Stakeholder identification information provides a means to uniquely identify each stakeholder.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	A stakeholder is a person or group of interest to the health system of Alberta or the business of Alberta's health system. A stakeholder can assume many roles in the health system including the role of a recipient and a provider.
Business Rule/Coding Guideline	

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Data Element Name	Stakeholder Unique Lifetime Identifier (ULI)
HISCA Alias	
Compound Name	Immunization Stakeholder Information
Submission	Immunization Minimum Data Set
Requirement for the Standard	The ULI is the means by which clients/stakeholders (persons and organizations) are identified. Rigorous standards on the definition and use of the ULI will improve the quality of the data in the stakeholder registry and other applications. The ULI will improve the accuracy and efficiency of stakeholder identification.
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	A Unique Lifetime Identifier (ULI) is a unique and permanent number assigned to all persons and organizations with a vested interest in the health system of Alberta. This includes all Alberta residents, residents of other provinces who receive health services in Alberta, service providers (in province and out of province or country) who provide health services and in some cases non-Alberta residents.
Information Exchange Format Type	N
Information Exchange Length	9
Information Exchange Format Mask	99999-9999
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid ULI on the Alberta Health Central Stakeholder Registry. Must be a Primary ULI on the Alberta Health Central Stakeholder Registry.
Implementation Consideration	Regional Health Authorities require a timely and efficient process for looking up, verifying and/or obtaining immunization service recipient ULIs.
Permissible Data Element Value	

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Compound Name	Public Health Person Identification
Parent Compound Name	Immunization Stakeholder Information
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	The provincial health number is a primary means by which individuals are identified, but in the absence of such a unique identifier, personal identification information such as name, birth date and gender are sufficient to provide accurate and positive identification.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	A person is a human being, alive or not, of interest to the health system. Each person has personal identification information, which helps to uniquely identify him or her. Person identification information is required to identify the immunization service recipient.
Business Rule/Coding Guideline	

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Data Element Name	Provincial Health Number Type
HISCA Alias	
Compound Name	Public Health Person Identification
Submission	Immunization Minimum Data Set
Requirement for the Standard	This is required to distinguish Provincial Health Numbers from different provinces.
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Provincial Health Number Type is a code that identifies the province that assigned the provincial health number to the person.
Information Exchange Format Type	C
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if a Provincial Health Number is submitted. Must be a valid Provincial Health Number Type Code.
Implementation Consideration	Since this standard is from a health system perspective, it was decided to keep provincial health number data elements separate from other person identifiers.
Permissible Data Element Value	Provincial Health Number Type Code Table

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Data Element Name	Provincial Health Number
HISCA Alias	
Compound Name	Public Health Person Identification
Submission	Immunization Minimum Data Set
Requirement for the Standard	Since inter-provincial exchange of health services (Medical-Reciprocal billing services) is an integral part of the health system, it is important that representation of provincial health numbers be standardized.
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Provincial Health Number is the identifier assigned to a person by a province. It presumes eligibility for basic health services for the person from the designated province.
Information Exchange Format Type	C
Information Exchange Length	15
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if a Provincial Health Number Type is submitted. If the Provincial Health Number Type equals 'AB' – Alberta, the Provincial Health Number must equal the ULI.
Implementation Consideration	For Alberta, valid Provincial Health Numbers are the set of ULIs that have been assigned to stakeholder persons upon registration in Alberta Health' Central Stakeholder Registry. For all other Provincial Health Numbers, the valid set of identifiers are not available, however, their authenticity can be verified using the specific provincial health number validation algorithms. Different provincial health jurisdictions have different algorithms for assigning unique identification for clients in their health systems. The procedures for validating these provincial health numbers will be maintained centrally.
Permissible Data Element Value	

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Data Element Name	Alternate Person Identifier Type
HISCA Alias	
Compound Name	Public Health Person Identification
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	A code that identifies the purpose or jurisdiction of the Alternate Person Identifier.
Information Exchange Format Type	C
Information Exchange Length	4
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if an Alternate Person Identifier is submitted. Must be a valid Alternate Person Identifier Type Code.
Implementation Consideration	This data element permissible values set includes value ABC. This value is a known deviation from the HISCA values list that contains value TPIP - Third Party Insurance Plan Number that would supplant value 'Alberta Blue Cross'.
Permissible Data Element Value	Alternate Person Identifier Type Code Table

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Data Element Name	Alternate Person Identifier
HISCA Alias	
Compound Name	Public Health Person Identification
Submission	Immunization Minimum Data Set
Requirement for the Standard	Other identifiers are used to support specific elements of business within the health system.
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	Alternate Person Identifiers are personal identification codes assigned by jurisdictions other than the provincial health ministries.
Information Exchange Format Type	C
Information Exchange Length	15
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if an Alternate Person Identifier Type is submitted.
Implementation Consideration	
Permissible Data Element Value	

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Data Element Name	Homeless/Indigent Flag
HISCA Alias	
Compound Name	Public Health Person Identification
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Homeless flag identifies clients with no fixed address
Information Exchange Format Type	C
Information Exchange Length	1
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	If Client has a fixed address default the Homeless/Indigent Flag to "N". If client has no fixed address set Homeless/Indigent Flag to "Y"
Implementation Consideration	
Permissible Data Element Value	Y/N

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Compound Name	Public Health Person Name
Parent Compound Name	Immunization Stakeholder Information
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Person Name is the label by which a person is known and spoken to. A person may be known by more than one name at the same time or over time. The various person name types include: • Alias – A personal name which an individual is using or has used. • Preferred Name – The name a person prefers to use in communicating with other health system stakeholders. • Legal Name • Professional Name
Business Rule/Coding Guideline	

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Data Element Name	Last Name
HISCA Alias	
Compound Name	Public Health Person Name
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Last Name is the full surname or family name of a person.
Information Exchange Format Type	C
Information Exchange Length	50
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Hyphens (-), apostrophes (‘), periods (.), and spaces are allowed
Implementation Consideration	Hyphens are also commonly known as ‘dashes’.
Permissible Data Element Value	

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Data Element Name	Given Name
HISCA Alias	
Compound Name	Public Health Person Name
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Given Name is the first name of a person.
Information Exchange Format Type	C
Information Exchange Length	50
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Hyphens (-), apostrophes (‘), periods (.), and spaces are allowed
Implementation Consideration	Hyphens are also commonly known as ‘dashes’.
Permissible Data Element Value	

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Data Element Name	Middle Name
HISCA Alias	
Compound Name	Public Health Person Name
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Middle Name is the other given name of a person.
Information Exchange Format Type	C
Information Exchange Length	50
Information Exchange Format Mask	
Obligation	O
Cardinality	0:1
Business Rule / Coding Guideline	Non-mandatory Hyphens (-), apostrophes (‘), period (.), and spaces are allowed
Implementation Consideration	Hyphens are also commonly known as ‘dashes’.
Permissible Data Element Value	

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Data Element Name	Gender Code
HISCA Alias	
Compound Name	Immunization Stakeholder Information
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	Gender Code is code depicting the biological sex of the person as reported upon registration.
Information Exchange Format Type	C
Information Exchange Length	1
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Gender Code
Implementation Consideration	A system does not need to implement all four possible values defined for the gender, as long as the value for a gender code in any data/report to be exchanged takes on one of the four values defined above. This is based on Health Level Seven (HL7) standards.
Permissible Data Element Value	Gender Code Table

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Data Element Name	Birth Date
HISCA Alias	
Compound Name	Immunization Stakeholder Information
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Birth Date is the calendar date on which a person was born as reported upon registration.
Information Exchange Format Type	C
Information Exchange Length	8
Information Exchange Format Mask	YYYYMMDD
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be less than or equal to today's date. Must be greater than or equal to 18700101
Implementation Consideration	This is based on HL7 standards.
Permissible Data Element Value	

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Compound Name	Stakeholder Location
Parent Compound Name	Immunization Stakeholder Information
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	Communication with stakeholders is a vital process in the health system. Therefore, a consistent and standard way of specifying an address is not only necessary, but also required.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	A location is a name and set of coordinates, which allows any point or area to be represented in space, that is of interest to the health system. A location identifies a place where a person or organization can be located or communicated with via postal services. The location is the address at which the notifiable disease patient receives mail and/or the location where the immunization service recipient normally resides.
Business Rule/Coding Guideline	

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Data Element Name	Address Type
HISCA Alias	
Compound Name	Stakeholder Location
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Address Type is a code that identifies the type of address or location reported for a person.
Information Exchange Format Type	C
Information Exchange Length	4
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Address Type Code. If Quarter Section Code, Section, Township, Range and Meridian are reported, Address Type must be 'PHYS' – Physical Address
Implementation Consideration	
Permissible Data Element Value	Address Type Code Table

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Compound Name	Mailing Address
Parent Compound Name	Stakeholder Location
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	A mailing address is a place where a person can be located and/or communicated with via postal services. The person is the immunization service recipient. The total length of an address exceeds the 106 characters specified by HL7 for data interchange across systems, especially given that the 106 characters include a total of 5 separators. In reality, fields are almost always truncated (taking out trailing blanks) before being transmitted, and the likelihood of the total length of the truncated components of the address exceeding 106 characters is extremely low. HL7's address structure is being proposed here with the exception of a Country Code as opposed to a Country Name as specified by HL7.
Business Rule/Coding Guideline	HL7's address structure is being proposed here with the exception of a Country Code as opposed to a Country Name as specified by HL7. The total length of an address exceeds the 106 characters specified by HL7 for data interchange across systems, especially given that the 106 characters include a total of 5 separators. In reality, fields are almost always truncated (taking out trailing blanks) before being transmitted, and the likelihood of the total length of the truncated components of the address exceeding 106 characters is extremely low.

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Data Element Name	Street Address
HISCA Alias	
Compound Name	Mailing Address
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	Street Address is a description of location within a community or municipality, which specifies the destination for mail delivery, and/or the location of a stakeholder.
Information Exchange Format Type	C
Information Exchange Length	140
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Either Street Address or Quarter Section Code, Section, Township, Range and Meridian must be reported.
Implementation Consideration	
Permissible Data Element Value	

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Data Element Name	City Name
HISCA Alias	
Compound Name	Mailing Address
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	City Name is a geographical location that has a name and operates as a community of stakeholders. They may or may not be legally incorporated locations and may or may not be Canada Post delivery destinations.
Information Exchange Format Type	C
Information Exchange Length	60
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if Province Code equals 'AB' – Alberta.
Implementation Consideration	The Alberta Government employs a 60 character standard for City Name rather than the 30 character limit used by Canada Post to accommodate all municipal names approved by Alberta's Geographic Names Board. These municipal names are published in the Alberta Gazette.
Permissible Data Element Value	

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Data Element Name	Province Code
HISCA Alias	
Compound Name	Mailing Address
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Province Code is a standard abbreviation for a Canadian province or territory.
Information Exchange Format Type	C
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if Country Code equals 'CA' – Canada. Must be a valid Province Code.
Implementation Consideration	Valid values are taken from Canada Post standards.
Permissible Data Element Value	Province Code Table

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Data Element Name	Country Code
HISCA Alias	
Compound Name	Mailing Address
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Country Code is a code that identifies the full name of the country associated with the address.
Information Exchange Format Type	C
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Country Code – A detailed listing of valid values for 2 character alpha codes can be found in the International Country Codes table complied by the International Organization for Standardization (ISO) at the web site: http://www.iso.org/iso/country_codes/iso_3166_code_lists.htm
Implementation Consideration	ISO 3166 is the international standard for the representation of country names. It is also the standard used by the Alberta Government Integrated Management Information System (IMAGIS) and the Information Technology Advisory Committee (ITAC). The two-character country code has been chosen over the three-character code for compatibility with IP Host Name and Domain Name schemas and the Internet Engineering Task Force RFCs (Request For Comments).
Permissible Data Element Value	ISO 3166 2-character alpha codes

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Data Element Name	Postal Code
HISCA Alias	
Compound Name	Mailing Address
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	HISCA: Stakeholder Basic Demographic Data Set
Definition	The Postal Code is a code defined by Canada Post (and other national postal services) used to expedite the delivery of mail.
Information Exchange Format Type	C
Information Exchange Length	12
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Must be reported if Province Code equals 'AB' – Alberta and must match Postal Code for the reported ULI on the Alberta Health Central Stakeholder Registry. If Country Code equals 'CA' – Canada, the postal code format will be validated as ANANAN and verified against information provided by Canada Post to ensure it is a valid Alberta Postal Code. If Homeless/Indigent flag is set to "Y" the Postal Code must be blank.
Implementation Consideration	The 12 character standard for Postal Code is compatible with the IMAGIS standard.
Permissible Data Element Value	

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Compound Name	Legal Land Description
Parent Compound Name	Stakeholder Location
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Legal Land Description is the method by which a parcel of land is measured and located by the reference to meridian, range, township, etc. For people who live in rural areas, the Legal Land Description provides more information about their physical location than a mailing address (post office box number). The Legal Land Description identifies the legal land description where the immunization service recipient physically resided at the time of the immunization event. The Legal Land Description should not include the plan, block or lot for city, town or village settings. The Legal Land Description should be displayed as follows: Quarter Section Code – Section – Township – Range – Meridian NW – 16 – 126 – 15 – 4 Land surveying in Alberta is based upon the Third System of Township Surveys. Land is designated as being west of either the fourth, fifth or sixth meridian. Townships are numbered from the south of the province at the Alberta / United States border, starting at 1 and proceeding to 126 at the northern border of the province. Sections are numbered starting at the southeast corner of a township. Legal subdivision allows a section to be divided into parts for land patenting purposes.
Business Rule/Coding Guideline	

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Data Element Name	Quarter Section Code
HISCA Alias	
Compound Name	Legal Land Description
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Quarter Section Code is a code that describes one quarter of a Section.
Information Exchange Format Type	C
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Either Street Address or Quarter Section Code, Section, Township, Range and Meridian must be reported. Must be a valid Quarter Section Code.
Implementation Consideration	Although the standard for the Legal Land Description has been taken from Government of Alberta data standards, Alberta Health will utilize the above compound element order for reporting and displaying the Legal Land Description.
Permissible Data Element Value	SE = South East SW = South West NE = North East NW = North West

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Data Element Name	Section
HISCA Alias	
Compound Name	Legal Land Description
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	A Section is one thirty-sixth of a Township.
Information Exchange Format Type	N
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Either Street Address or Quarter Section Code, Section, Township, Range and Meridian must be reported. Must be a valid Section value.
Implementation Consideration	Although the standard for the Legal Land Description has been taken from Government of Alberta data standards, Alberta Health will utilize the above compound element order for reporting and displaying the Legal Land Description.
Permissible Data Element Value	1 - 36

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Data Element Name	Township
HISCA Alias	
Compound Name	Legal Land Description
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Township is a row which crosses both Meridians and Ranges.
Information Exchange Format Type	N
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Either Street Address or Quarter Section Code, Section, Township, Range and Meridian must be reported. Must be a valid Township value.
Implementation Consideration	Although the standard for the Legal Land Description has been taken from Government of Alberta data standards, Alberta Health will utilize the above compound element order for reporting and displaying the Legal Land Description.
Permissible Data Element Value	1 - 126

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Data Element Name	Range
HISCA Alias	
Compound Name	Legal Land Description
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Range is a numbered column which falls between an identified Meridian.
Information Exchange Format Type	N
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Either Street Address or Quarter Section Code, Section, Township, Range and Meridian must be reported. Must be a valid Range value.
Implementation Consideration	Although the standard for the Legal Land Description has been taken from Government of Alberta data standards, Alberta Health will utilize the above compound element order for reporting and displaying the Legal Land Description.
Permissible Data Element Value	1 - 30

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Data Element Name	Meridian
HISCA Alias	
Compound Name	Legal Land Description
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Meridian is a north-south line used for longitudinal orientation.
Information Exchange Format Type	N
Information Exchange Length	1
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	Either Street Address or Quarter Section Code, Section, Township, Range and Meridian must be reported. Must be a valid Meridian value.
Implementation Consideration	Although the standard for the Legal Land Description has been taken from Government of Alberta data standards, Alberta Health will utilize the above compound element order for reporting and displaying the Legal Land Description.
Permissible Data Element Value	4, 5, 6

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Compound Name	Immunization Stakeholder Evaluation
Parent Compound Name	Immunization Stakeholder Information
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	A consistent and standard way of reporting the immunization history of a service recipient is required.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Person Immunization Evaluation describes the immunization history of the service recipient.
Business Rule/Coding Guideline	

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Data Element Name	Antigen Count
HISCA Alias	
Compound Name	Immunization Stakeholder Evaluation
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Antigen Count is the number of valid doses of the antigen administered to date for the immunization service recipient. The count includes any valid doses previously administered.
Information Exchange Format Type	N
Information Exchange Length	2
Information Exchange Format Mask	0 – 99
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	
Implementation Consideration	
Permissible Data Element Value	

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Compound Name	Immunization Service Event
Parent Compound Name	Immunization Minimum Data Set
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	Immunization services are administered throughout the province through Alberta Health Services public health offices. A consistent and standard way of reporting immunization service events to the Department is required.
Business Rule/Coding Guideline	

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Compound Name	Antigen Not Administered
Parent Compound Name	Immunization Service Event
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	A consistent and standard way of reporting to the Department antigens not administered is required.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The antigen not administered event records when an immunization service was offered to a recipient by a provider at a given time, but for some reason was not administered. Antigen not administered information will be captured at the service recipient level by antigen.
Business Rule/Coding Guideline	

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Data Element Name	Antigen Not Administered Code
HISCA Alias	
Compound Name	Antigen Not Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Antigen Not Administered Code is the antigen that has not been administered to the immunization service recipient.
Information Exchange Format Type	C
Information Exchange Length	15
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Antigen Code
Implementation Consideration	
Permissible Data Element Value	Antigen Code Table

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Data Element Name	Interview Date
HISCA Alias	
Compound Name	Antigen Not Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Interview Date is the date the antigen was not administered to the immunization service recipient.
Information Exchange Format Type	N
Information Exchange Length	8
Information Exchange Format Mask	YYYYMMDD
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be greater than or equal to the patient's Birth Date. Must be less than or equal to today's date. Must be less than or equal to patient's Date of Death in the Alberta Health Central Stakeholder Registry.
Implementation Consideration	
Permissible Data Element Value	

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Data Element Name	Reason Not Immunized Code
HISCA Alias	
Compound Name	Antigen Not Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Reason Not Immunized Code is the explanation as to why the antigen was not administered to the immunization service recipient. A Reason for Immunization is required for all Vaccine Codes.
Information Exchange Format Type	C
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Reason Not Immunized Code. Must be a valid code within the reported Vaccine Code
Implementation Consideration	
Permissible Data Element Value	Reason Not Immunized Code Table

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Compound Name	Immunization Delivery Site
Parent Compound Name	Immunization Service Event
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	A consistent and standard way of reporting the geographical location where the immunization was administered is required.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	An Immunization Delivery Site identifies the geographical location where the immunization was administered.
Business Rule/Coding Guideline	

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Data Element Name	Delivery Province Code
HISCA Alias	
Compound Name	Immunization Delivery Site
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Delivery Province Code is the province where the immunization is administered to the immunization service recipient if it was administered in Canada, but outside of Alberta.
Information Exchange Format Type	C
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	One of the following must be reported: Delivery Organization of Service and Delivery Management Site, or Delivery Province Code, or Delivery Country Code, or Delivery Continent Code. Must be reported if Delivery Country Code equals 'CA' – Canada. Must be a valid Province Code.
Implementation Consideration	
Permissible Data Element Value	Province Code Table

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Data Element Name	Delivery Country Code
HISCA Alias	
Compound Name	Immunization Delivery Site
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Delivery Country Code is the country where the immunization was administered to the immunization service recipient if it was administered outside of Canada.
Information Exchange Format Type	C
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	One of the following must be reported: Delivery Organization of Service and Delivery Management Site, or Delivery Province Code, or Delivery Country Code, or Delivery Continent Code. Must be 'CA' – Canada if Delivery Province Code is reported. Must be a valid Country Code. Must be a valid Country Code – A detailed listing of valid values for 2 character alpha codes can be found in the International Country Codes table complied by the International Organization for Standardization (ISO) at the web site: http://www.iso.org/iso/country_codes/iso_3166_code_lists.htm
Implementation Consideration	
Permissible Data Element Value	ISO 3166 2-character alpha codes

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Data Element Name	Delivery Continent Code
HISCA Alias	
Compound Name	Immunization Delivery Site
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Delivery Continent Code identifies other geographical regions (continents) to describe where the immunization was administered if the delivery country is unknown and the immunization was administered to the immunization service recipient outside of Canada.
Information Exchange Format Type	C
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	One of the following must be reported: Delivery Organization of Service and Delivery Management Site, or Delivery Province Code, or Delivery Country Code, or Delivery Continent Code. Must be a valid Delivery Continent Code.
Implementation Consideration	
Permissible Data Element Value	Delivery Continent Code Table

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Compound Name	Immunization Service Provider
Parent Compound Name	Immunization Service Event
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	A provider provides services for a pre-defined geographic area. For comparison purposes, information about who is providing the service must be consistently reported.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	A provider is a person or organization in a role that provides goods or services in (to or on behalf of) the health system. The provider information captured is specific to each immunization event.
Business Rule/Coding Guideline	

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Data Element Name	Delivery Organization of Service
HISCA Alias	
Compound Name	Immunization Service Provider
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Stakeholder Demographic Data Set v2.2
Definition	The Delivery Organization of Service is service provider (Alberta Health Services or the First Nations & Inuit Health Branch) that provided the immunization service.
Information Exchange Format Type	N
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	One of the following must be reported: Delivery Organization of Service and Delivery Management Site, or Delivery Province Code, or Delivery Country Code, or Delivery Continent Code. Must be reported if Delivery Management Site is reported. Must be reported if Delivery Province Code equals 'AB' – Alberta. Must be a valid Delivery Organization of Service Code.
Implementation Consideration	
Permissible Data Element Value	Delivery Organization of Service Code Table

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Data Element Name	Delivery Management Site
HISCA Alias	
Compound Name	Immunization Service Provider
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Delivery Management Site is a public health office that administers immunization services for a geographic region. It is the public health office within the Delivery Organization of Service that administered the immunization service to the immunization service recipient.
Information Exchange Format Type	N
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	One of the following must be reported: Delivery Organization of Service and Delivery Management Site, or Delivery Province Code, or Delivery Country Code, or Delivery Continent Code. Must be reported if Delivery Organization of Service is reported. Must be reported if Delivery Province Code equals 'AB' – Alberta. Must be a valid Delivery Management Site Code.
Implementation Consideration	Delivery Management Sites Codes will be changed to the Canadian Institute for Health Information (CIHI) standardized delivery site codes once they become available.
Permissible Data Element Value	Delivery Management Site Code Table

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Compound Name	Immunization Event
Parent Compound Name	Immunization Service Event
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	Immunization services are administered throughout the province through Alberta Health Services public health offices. A consistent and standard way of reporting immunization service events to the Department is required.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	An immunization event is the provision of an immunization service to a recipient by a provider at a given time.
Business Rule/Coding Guideline	

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Data Element Name	Historical Flag
HISCA Alias	
Compound Name	Immunization Event
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Historical Flag is a code field identifying that the immunization event occurred outside of the region or the province.
Information Exchange Format Type	C
Information Exchange Length	1
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	If a client reports an immunization event given outside of the region or province the historical indicator must be reported.
Implementation Consideration	
Permissible Data Element Value	H - Historical Immunization Null - No value

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Data Element Name	Immunization Date
HISCA Alias	
Compound Name	Immunization Event
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Immunization Date is the date the immunization event occurred.
Information Exchange Format Type	C
Information Exchange Length	8
Information Exchange Format Mask	YYYYMMDD
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be greater than or equal to the immunization service recipient's Birth Date. Must be less than or equal to today's date. Must be less than or equal to the immunization service recipient's Date of Death in the Alberta Health Central Stakeholder Registry.
Implementation Consideration	• The Immunization Date is the equivalent of the Service Event Start Date. • For immunization events, the Service Event End Date is the same date as the Service Event Start Date.
Permissible Data Element Value	

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Data Element Name	Estimated Flag
HISCA Alias	
Compound Name	Immunization Event
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Estimated Flag is a code field identifying that an immunization date was reported with inadequate immunization documentation. The immunization date will be submitted as a complete date following Alberta Health Services “Standards for Individuals Presenting with Inadequate Immunization Documentation Policy”
Information Exchange Format Type	C
Information Exchange Length	1
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	If a client presents with inadequate immunization documentation the Partial/Estimated date flag must be reported.
Implementation Consideration	
Permissible Data Element Value	E - Partial /Estimated Date Null - No value

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Data Element Name	Submitter Prefix
HISCA Alias	
Compound Name	Immunization Event
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Submitter Prefix is the delivery organization who submitted the immunization event to the Department.
Information Exchange Format Type	N
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Submitter Prefix Code
Implementation Consideration	For situations where a stakeholder receives immunization services in a region other than the one in which they reside, the region of residence should submit the immunization event to the Department.
Permissible Data Element Value	Submitter Prefix Code Table

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Data Element Name	Grade Code
HISCA Alias	
Compound Name	Immunization Event
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	Alberta Learning
Definition	The Grade Code is a code depicting a class organized for a particular year of school courses. The Grade Code identifies the grade the immunization service recipient was in when they received the immunization or when they were not administered the antigen.
Information Exchange Format Type	C
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	If a vaccine has been administered, the Grade Code must be reported if the Vaccine Code is 'HBV' – Hepatitis B and the Reason for Immunization Code is '16' – Universal School Program. Must be a valid Grade Code.
Implementation Consideration	
Permissible Data Element Value	Grade Code Table

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Compound Name	Immunization Vaccine Administered
Parent Compound Name	Immunization Event
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	Immunization services are administered throughout the province through Alberta Health Services public health offices. A consistent and standard way of reporting immunization service events to the Department is required.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The vaccine administered records which vaccines were administered for a particular immunization service event. It also records how the vaccine was administered.
Business Rule/Coding Guideline	

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Data Element Name	Reason For Immunization Code
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Reason For Immunization Code is the reason why the vaccine is administered into the immunization service recipient. A Reason For Immunization is required for selected Vaccine Codes.
Information Exchange Format Type	N
Information Exchange Length	2
Information Exchange Format Mask	
Obligation	C
Cardinality	0:1
Business Rule / Coding Guideline	A reason for Immunization is required for all vaccine Codes • Must be reported for all vaccine Codes (see Table 16) If the Vaccine Code reported is "FLU", the valid codes are: 01, 02, 03, 14, 18, 19, 22, 39, 44, 45, 46, 47, 59, 98, 99. If the Vaccine Code reported is "H1N1-09-AD", the valid codes are: 01, 02, 03, 39, 46, 59. If the Vaccine Code reported is "H1N1-09", the valid codes are: 01, 02, 03, 39, 46, 59.
Implementation Consideration	
Permissible Data Element Value	Reason For Immunization Code Table

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Data Element Name	Vaccine Site Code
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Vaccine Site Code is the anatomical site into which the vaccine is administered into the immunization service recipient.
Information Exchange Format Type	C
Information Exchange Length	4
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Vaccine Site Code. Must be reported if Administering Method Code is reported. If Administering Method Code equals 'PO' – Oral, Vaccine Site Code must be 'MO' – Mouth. If Administering Method Code equals 'IN' – Intranasal, Vaccine Site Code must be 'NO' – Nose.
Implementation Consideration	
Permissible Data Element Value	Vaccine Site Code Table

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Data Element Name	Administering Method Code
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Administering Method Code is the route of administration of the vaccine into the immunization service recipient.
Information Exchange Format Type	C
Information Exchange Length	3
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Administering Method Code. Must be reported if Vaccine Site Code is reported. If Administering Method Cod equals 'PO' – Oral, Vaccine Site Code must be 'MO' – Mouth. If Administering Method Code equals 'IN' – Intranasal, Vaccine Site Code must be 'NO' – Nose.
Implementation Consideration	
Permissible Data Element Value	Administering Method Code Table

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Data Element Name	Dosage
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Dosage is the amount of the vaccine administered into the immunization service recipient.
Information Exchange Format Type	N
Information Exchange Length	8
Information Exchange Format Mask	999999.99
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be reported if Dosage Type Code is reported.
Implementation Consideration	
Permissible Data Element Value	0 – 999999.99

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Data Element Name	Dosage Type Code
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Dosage Type Code is the unit in which the dosage of the vaccine is administered into the immunization service recipient.
Information Exchange Format Type	C
Information Exchange Length	4
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be reported if Dosage is reported. Must be a valid Dosage Type Code.
Implementation Consideration	
Permissible Data Element Value	Dosage Type Code Table

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Data Element Name	Manufacturer
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Manufacturer is the company that makes the vaccine that was administered into the immunization service recipient.
Information Exchange Format Type	C
Information Exchange Length	4
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Manufacturer Code.
Implementation Consideration	
Permissible Data Element Value	Manufacturer Code Table

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Data Element Name	Lot Number
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Lot Number is the manufacturer's lot number for the vaccine administered into the immunization service recipient. It represents a code assigned to a package of several individual doses of a particular vaccine comprising a manufacturer's unit of production.
Information Exchange Format Type	C
Information Exchange Length	20
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Include dashes (-) in the Lot Number where appropriate.
Implementation Consideration	
Permissible Data Element Value	

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Data Element Name	Comment
HISCA Alias	
Compound Name	Immunization Vaccine Administered
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Comment is specific to the Immunization event or a particular antigen. Where the vaccine (or antigen) does not meet the guidelines the reason for administration can be entered and sent to Alberta Health to assist in removing the flag on the event.
Information Exchange Format Type	C
Information Exchange Length	1600
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Spaces and the following special characters are allowed: ~ ` ! @ # $ % ^ & * ( ) _ - + = \ { } [ ] : ; " ' ? / > . < ,1
Implementation Consideration	
Permissible Data Element Value	

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Compound Name	Vaccine
Parent Compound Name	Immunization Vaccine Administered
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	To facilitate analysis and subsequent follow up, vaccines administered to immunization service recipients must be consistently captured and reported.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	A Vaccine is a preparation of killed microorganisms, living attenuated organisms, or living fully virulent organisms that is administered to produce or artificially increase immunity to a particular disease.
Business Rule/Coding Guideline	

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Data Element Name	Vaccine Code
HISCA Alias	
Compound Name	Vaccine
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Vaccine Code identifies the vaccine administered to the immunization service recipient.
Information Exchange Format Type	C
Information Exchange Length	15
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Vaccine Code. Must be an active Vaccine Code for the reported Immunization Date. The same description may apply to multiple codes for historical vaccines. These codes are implemented with a start and end date. See Data Submission Guide for Program Validation Rules.
Implementation Consideration	
Permissible Data Element Value	Vaccine Code Table

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Compound Name	Antigen
Parent Compound Name	Vaccine
Component Name	
Submission	Immunization Minimum Data Set
Requirement for the Standard	To facilitate analysis and subsequent follow up, antigens administered to immunization service recipients within vaccines must be consistently captured and reported.
Obligation	
Cardinality	
Submitting Organization	Alberta Health
Standard Reference	
Definition	An antigen is a usually protein or carbohydrate substance found within a vaccine capable of stimulating an immune response.
Business Rule/Coding Guideline	The antigen information captured is specific to each immunization event.

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Data Element Name	Antigen Code
HISCA Alias	
Compound Name	Antigen
Submission	Immunization Minimum Data Set
Requirement for the Standard	
Submitting Organization	Alberta Health
Standard Reference	
Definition	The Antigen Code is the antigen(s) administered to the immunization service recipient within the vaccine.
Information Exchange Format Type	C
Information Exchange Length	15
Information Exchange Format Mask	
Obligation	M
Cardinality	1:1
Business Rule / Coding Guideline	Must be a valid Antigen Code. Must be an active Antigen Code within the reported Vaccine Code. See Data Submission Guide for Program Validation Rules. Antigen Code must be "PFLU" if Vaccine Code is "H1N1-09-AD" or "H1N1-09".
Implementation Consideration	
Permissible Data Element Value	Antigen Code Table

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Permissible Values

Provincial Health Number Type Table			
Code	**Description**	**Start Date**	**End Date**
AB	Alberta Health Number		
BC	British Columbia Health Number		
MB	Manitoba Health Number		
NB	New Brunswick Health Number		
NL	Newfoundland and Labrador Health Number		
NS	Nova Scotia Health Number		
NT	Northwest Territories Health Number		
NU	Nunavut Health Number		
ON	Ontario Health Number		
PE	Prince Edward Island Health Number		
QC	Quebec Health Number		
SK	Saskatchewan Health Number		
YT	Yukon Territory Health Number		

Alternate Person Identifier Type Table			
Code	**Description**	**Start Date**	**End Date**
ABC	Alberta Blue Cross		
CF	Canadian Armed Forces		
FP	Federal Penitentiary		
RCMP	RCMP Collator Regional Number		
TRTY	Treaty Number		
VAC	Veteran Affairs Canada		
WCB	Workers Compensation Board		

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Gender Code Table

Code	Description	Start Date	End Date
F	Female		
M	Male		
O	Other		
U	Unknown		

Address Type Table

Code	Description	Start Date	End Date
MAIL	Mailing Address		
PHYS	Physical Address		

Province Code Table

Code	Description	Start Date	End Date
AB	Alberta		
BC	British Columbia		
MB	Manitoba		
NB	New Brunswick		
NL	Newfoundland and Labrador		
NS	Nova Scotia		
NT	Northwest Territories		
NU	Nunavut		
ON	Ontario		
PE	Prince Edward Island		
QC	Quebec		
SK	Saskatchewan		
YT	Yukon		

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Reason Not Immunized Code Table			
Code	**Description**	**Start Date**	**End Date**
AR	Adverse Reaction – Previous		
CF	Consent Form Not Returned		
HD	History of Disease		
NR	Not Recommended		
REF	Refusal (Reason not known)		
VNA	Vaccine not Available		
MC	Medical Contraindication		2009-09-17
NS	No Show/Cancellation (Reason other than illness)		2009-09-17
OTH	Other		2009-09-17
PE	Philisophical Exemption (Against Immunization for reasons other than religious)		2009-09-17
PS	Positive Serology		2009-09-17
PVR	Previous Vaccine Recipient		2009-09-17
REL	Religious Objection		2009-09-17
RSP	Receiving Services Out of Province		2009-09-17
RSR	Receiving Services Out of Region		2009-09-17
TI	Temporary Illness deferring Immunization		2009-09-17
UC	Unable to Contact (preschool)		2009-09-17

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Delivery Continent Code Table

Code	Description	Start Date	End Date
AFR	Africa		
AS	Asia		
EUR	Europe		
NA	North America (including Central America & Caribbean)		
SA	South America		
OC	Oceania (including Australia)		

Submitter Prefix Table

Code	Description	Start Date	End Date
20	First Nations & Inuit Health Branch		
21	Chinook Regional Health Authority		
22	Palliser Health Region		
23	Calgary Health Region		
24	David Thompson Regional Health Authority		
25	East Central Health		
26	Capital Health		
27	Aspen Regional Health Authority		
28	Peace Country Health		
29	Northern Lights Health Region		
30	Pharmacies		
31	University of Alberta		
50	Nunee Health Board Society		
51	Paul First Nation		
52	Dene Tha'- Chateh		
53	Driftpile First Nation		
54	Athabasca Chipewyan First Nation		
56	Saddle Lake Cree Nation		

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57	Sunchild First Nation		
58	Alexander First Nation		
59	Enoch Cree Nation		
60	Beaver Lake Cree Nation		
61	Little Red River Cree Nation - John D'or Prairie		
62	Little Red River Cree Nation - Fox Lake		
63	Little Red River Cree Nation - Garden River		
64	Duncan's First Nation		
65	Wesley First Nation-Bighorn		
66	Maskwacis Health Services		
67	Whitefish Lake First Nation - Atikameg		
68	Woodland Cree First Nation		
69	Loon River First Nation		
70	Tallcree First Nation		
71	Heart Lake First Nation		
72	Blood Tribe Department of Health		
73	Sturgeon Lake Cree Nation		
74	Sucker Creek First Nation		
75	Kapawe'no First Nation		
76	Dene Tha'- Bushe River		
77	Dene Tha'- Meander River		
78	O'Chiese First Nation		
79	Tsuu Tina Nation		
80	Goodfish Lake Health Centre - Goodfish		
81	Aakom Kiyii Health Services - Pikani		
82	Bigstone Health Commission - Calling Lake		

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83	Bigstone Health Commission - Bigstone		
84	Cold Lake First Nations		
85	Stoney Trail Wellness Centre - Eden Valley		
86	Morning Sky Health & Wellness Society - Frog Lake		
87	Kehewin Cree Nation		
88	Stoney Health Services - Morley		
89	Siksika Health Services		

Grade Code Table

Code	Description	Start Date	End Date
01	Grade 1		
02	Grade 2		
03	Grade 3		
04	Grade 4		
05	Grade 5		
06	Grade 6		
07	Grade 7		
08	Grade 8		
09	Grade 9		
10	Grade 10		
11	Grade 11		
12	Grade 12		
13	Grade 13		
HS	Home School		
NG	Not Graded		
EC	Early Childhood		
PK	Pre Kindergarten		

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Delivery Organization of Service Table

Code	Description	Start Date	End Date
20	First Nations & Inuit Health Branch		
21	Chinook Regional Health Authority		
22	Palliser Health Region		
23	Calgary Health Region		
24	David Thompson Regional Health Authority		
25	East Central Health		
26	Capital Health		
27	Aspen Regional Health Authority		
28	Peace Country Health		
29	Northern Lights Health Region		
30	Pharmacies		
31	University of Alberta		
50	Nunee Health Board Society		
51	Paul First Nation		
52	Dene Tha'- Chateh		
53	Driftpile First Nation		
54	Athabasca Chipewyan First Nation		
56	Saddle Lake Cree Nation		
57	Sunchild First Nation		
58	Alexander First Nation		
59	Enoch Cree Nation		
60	Beaver Lake Cree Nation		
61	Little Red River Cree Nation - John D'or Prairie		
62	Little Red River Cree Nation - Fox Lake		
63	Little Red River Cree Nation - Garden River		
64	Duncan's First Nation		

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65	Wesley First Nation-Bighorn		
66	Maskwacis Health Services		
67	Whitefish Lake First Nation - Atikameg		
68	Woodland Cree First Nation		
69	Loon River First Nation		
70	Tallcree First Nation		
71	Heart Lake First Nation		
72	Blood Tribe Department of Health		
73	Sturgeon Lake Cree Nation		
74	Sucker Creek First Nation		
75	Kapawe'no First Nation		
76	Dene Tha'- Bushe River		
77	Dene Tha'- Meander River		
78	O'Chiese First Nation		
79	Tsuu Tina Nation		
80	Whitefish Lake First Nation - Goodfish		
81	Aakom Kiyii Health Services - Pikani		
82	Bigstone Health Commission - Calling Lake		
83	Bigstone Health Commission - Bigstone		
84	Cold Lake First Nations		
85	Stoney Trail Wellness Centre - Eden Valley		
86	Morning Sky Health & Wellness Society - Frog Lake		
87	Kehewin Cree Nation		
88	Stoney Health Services - Morley		
89	Siksika Health Services		

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Delivery Management Site Table

Code	Description	Start Date	End Date
001	Fort McLeod		
002	Pincher Creek		
003	Crowsnest Pass		
004	Cardston		
005	Magrath		
006	Coaldale		
007	Taber		
008	Vauxhall		
009	Picture Butte		
010	Milk River		
011	Raymond		
012	Lethbridge		
013	Brooks		
014	Bow Island		
015	Medicine Hat		
016	Oyen/Empress		
017	High River		
018	Black Diamond		
019	Okotoks		
020	Vulcan		
021	Nanton		
022	Claresholm		
023	Canmore		
024	Banff		
025	North Hill CHC		
026	Thorhill CHC		
027	Northwest CHC		
028	8th & 8th Health Centre		

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029	Communicable Disease		
030	East Edmonton CHC		
031	Forest Lawn CHC		2010-05-22
032	Acadia CHC		
033	South CHC		
034	Scarboro CHC		
035	Shaganappi CHC		
036	Village Square CHC		
037	Airdrie Regional CHC		
038	Cochrane CHC		
039	Millican Ogden Sub Office		2007-12-01
040	Drumheller		
041	Three Hills		
042	Strathmore		
043	Hanna		
044	Didsbury		
045	Red Deer Bremner CHC		
046	Innisfail		
047	Rocky Mountain House		
048	Lacombe		
049	Olds		
050	Eckville		
051	Ponoka		
052	Sylvan Lake		
053	Rimbey		
054	Elnora/Delburne		
055	Sundre		
056	Camrose HLTH		
057	Sedgewick HLTH		
058	Tofield HLTH		

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059	Holden/Viking HLTH		
060	Vermilion HLTH		
061	Wainwright HLTH		
062	Kitscoty HLTH		
063	Provost HLTH		
064	Stettler HLTH		
065	Castor HLTH		
066	Coronation HLTH		
067	Consort HLTH		
068	Stony Plain		
069	Hinton		
070	Edson		
071	Jasper		
072	Evansburg		
073	Devon		
074	Spruce Grove		
075	Wetaskiwin		
076	Winfield		
077	Drayton Valley		
078	Travellers		
079	Woodcroft		
080	Eastwood		2010-01-28
081	Bonnie Doon		
082	West Jasper Place		
083	Twinbrooks		
084	Millwoods		
085	Castledowns		2009-04-23
086	Northeast Community		
087	St. Albert		
088	North Central		2009-04-23

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089	Strathcona County		
090	Beaumont		
091	Thorsby		
092	Leduc		
093	Athabasca		
094	Calling Lake		
095	Whitecourt		
096	Fox Creek		
097	Swan Hills		
098	Morinville		
099	Smith		
100	Boyle		
101	Flatbush		
102	Barrhead		
103	Westlock		
104	Mayerthorpe		
105	Onoway		
106	Redwater		
107	Fort Saskatchewan		
108	Lac La Biche		
109	St. Paul		
110	Smoky Lake		
111	Bonnyville		
112	Elk Point		
113	Cold Lake		
114	Lamont		
115	Two Hills		
116	Vegreville		
117	Grande Prairie		
118	Beaverlodge		

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119	Spirit River		
120	Valleyview		
121	Fairview		
122	Worsley		
123	Grande Cache		
124	Grimshaw		
125	Peace River		
126	McLennan		
127	Manning		
128	Cadotte Lake		
129	High Prairie		
130	Kinuso		
131	Slave Lake		
132	Wabasca		
133	Gift Lake		
134	Northern Communities		
135	Fort McMurray		
136	Anzac		
137	Conklin		
138	Ft. McKay		
139	High Level		
140	LaCrete		
141	Fort Vermillion		
142	Rainbow Lake		
143	Paddle Prairie		
144	Gibbons		
145	Thorhild		
146	Mannville		
147	Elizabeth		
148	Fishing Lake		

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149	Kikino		
150	Buffalo Lake		
151	Red Deer 49 Street Community Health Centre		
152	Occupational Health and Safety		
153	Lloydminster		
154	Boyle McCauley		
155	STD Clinic Edmonton		
156	Birth Control Clinic Edmonton		
157	IBU (Immunization Business Unit) Edmonton		
158	TB Clinic Edmonton		
159	Sacred Heart CHC		
160	Traveler's – St Albert		
161	Traveler's - Strathcona		
162	New Canadian's Clinic		
163	Red Deer Johnstone Crossing CHC		
164	South Urgent Care Health Centre		
165	Sheldon M Chumir Urgent Care Health Centre		
166	Community Outreach		
167	Clinical Trial		
168	Northgate Health Centre		
169	Rutherford Health Centre		
170	East Calgary CHC		
171	Westend Seniors Activity Centre		
172	Jewish Community Centre		
173	CDI College South Campus		
174	Grandin Park Plaza (St Albert)		
175	Westmount Shopping Centre		
176	Millborne Market Mall		

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177	Avenida Village		
178	Brentwood Village Mall		
179	EMS Whitehorn, North Side Entrance		
180	Richmond Road Diagnostic Treatment Centre		
181	Stampede Park		
182	Bonnie Doon Shopping Centre		
183	Airdrie Urgent Care		
184	Cochrane Urgent Care		
185	Okotoks Urgent Care		
186	Calgary International Travel Clinic		
187	Vaccine Depot Edmonton		
188	Chinook Regional Hospital		
189	University of Alberta Clinic		
190	Chestermere CHC		
191	SMCHC		
192	Red Earth Creek		
193	Peerless/Trout Lake		
300	Shoppers 2413 Evergreen Village (Calgary)		
301	Winters Pharmacy (Drayton Valley)		
302	Safeway 291 Dalhousie Station (Calgary)		
303	Safeway 887 Windermere (Edmonton)		
304	Safeway 2243 Thorncliffe (Calgary)		
305	Shoppers 2335 Sunpark (Calgary)		
306	Winters Pharmacy North (Drayton Valley)		
307	University of Alberta Pharmacy		
308	Safeway 8898 Bonnie Doon		

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	(Edmonton)		
309	Pharmasave 367 Heritage Pointe (De Winton)		
310	Sobeys 1129 Royal Oak (Calgary)		
311	Sobeys 5191 Nolan Hill (Calgary)		
312	Safeway 8903 Aspen (Calgary)		
313	Sobeys 3194 Lewis Estates (Edmonton)		
314	Sobeys 3143 Millwoods (Edmonton)		
315	Sobeys 1110 Tuscany (Calgary)		
316	Rita's Apothecary & Home Healthcare Ltd. (Barrhead)		
317	Polaris Travel Clinic & Pharamcy (Airdrie)		
318	Safeway 8857 (Leduc)		
861	Nunee Health & Wellness Centre		
862	Chateh Health Centre		
863	Maggie Willier Wellness - Driftpile		
864	Fort Chipewyan Health & Wellness Centre		
865	Paul Band Health Centre		
866	Saddle Lake Health Care Centre		
867	Sunchild Health Centre		
868	Alexander Health Services		
869	Enoch Health Services		
870	Beaver Lake Health Services		
871	John D'or Prairie Health Centre		
872	Fox Lake Nursing Station		
873	Garden River Health Centre		
874	Duncan's FN Health Centre		
875	Kiska Waptin Health Centre - Bighorn		

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876	Maskwacis Health Services		
877	Atikameg Health Centre		
878	Woodland Cree Health Centre		
879	Loon River Health Centre		
880	Tallcree Health Services		
881	Heart Lake Health Centre		
882	Blood Tribe Department of Health		
883	Sturgeon Lake Heath Centre		
884	Sucker Creek Health Centre		
885	Kapawe'no First Nation Health Centre		
886	Four Chiefs Complex - Bushe River		
887	Meander River Health Centre		
888	O'Chiese Health Centre		
889	Tsuu Tina Health and Wellness Centre		
890	Goodfish Lake Health Centre		
891	Aakom Kiyii Health Services - Pikani		
892	Calling Lake Health Centre		
893	Bigstone Health Centre		
894	Cold Lake First Nations Health Centre		
895	Stoney Trail Wellness Centre - Eden Valley		
896	Morning Sky Health & Wellness Centre - Frog Lake		
897	Kehewin Health Services		
898	Stoney Health Services - Morley		
899	Siksika Health & Welness Centre		
996	Rapid Response		
997	Non AHS Immunizers		

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998	Unknown		

Reason for Immunization Code Table

Code	Description	Start Date	End Date
01	Less Than 65 Years With an Eligible Chronic Condition		2015-09-01
02	Greater Than or Equal to 65 Years		
03	Health Care Workers		
04	Hemophilia		2008-09-30
05	Outbreak Control		2008-09-30
06	Infant Born to HBsAg Positive Mother		2008-09-30
07	Infant With a HBsAg Positive Caregiver		2008-09-30
08	Post Exposure Management – Non-responder to Vaccine		2008-09-30
09	Post Exposure Management – Community Needlestick/Sexual Assault		2008-09-30
10	Post Exposure Management – Unimmunized/Partially Immunized		2008-09-30
11	From Endemic Area		2008-09-30
13	Household &/or Sexual Contacts of Cases/Carriers		2008-09-30
14	Eligible Adults		2012-03-31
15	Dialysis Patients		2008-09-30
16	Universal School Program		2008-09-30
17	Laboratory Workers		2008-09-30
18	Health Care Students		2012-03-31
19	Other Eligible Children/Adolescents		2012-03-31
20	Asplenia		2008-09-30
21	Medically at Risk		2008-09-30
22	Resident in Long Term Care Facility		2014-10-01

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23	Pre-exposure Primary Series – Animal Health		2008-09-30
24	Pre-exposure Primary Series – Animal Control		2008-09-30
25	Pre-exposure Primary Series – Wildlife Worker		2008-09-30
26	Pre-exposure Primary Series – Animal Research		2008-09-30
27	Pre-exposure Primary Series – Spelunker		2008-09-30
28	Pre-exposure Booster – Animal Health		2008-09-30
29	Pre-exposure Booster – Animal Control		2008-09-30
30	Pre-exposure Booster – Wildlife Worker		2008-09-30
31	Pre-exposure Booster – Animal Research		2008-09-30
32	Post Exposure – Series		2008-09-30
33	Post Exposure – Booster (previously immunized)		2008-09-30
34	Pre-exposure Booster – Spelunker		2008-09-30
35	Post Exposure		2008-09-30
36	Universal Immunization Program (including persons born in 1981 or later)		2008-09-30
37	Post-natal		2008-09-30
38	Other Unique Cases		2008-09-30
39	Household/Close Contact of Immunocompromised/High Risk		2012-03-31
40	Pre-schoolers		2008-09-30
41	Alternate Vaccine Preparation Contraindicated		2008-09-30
42	Risk Behavior		2008-09-30
43	Student in Dormitory/Residence Accommodation		2008-09-30
44	Long Term Care Staff		

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45	Children 6-23 months		
46	Eligible Pregnant Women		
47	Workers Directly Involved in Culling Operations		2012-03-31
48	Transplant Candidate/Recipient – HSCT (Hematopoietic Stem Cell Transplant)		2008-09-30
49	Transplant Candidate/Recipient – SOT (Solid Organ Transplant)		2008-09-30
50	Routine Recommended Immunization		
51	Post Exposure		
52	Outbreak		
53	Post-natal		
54	Occupational		
55	Medically at Risk		
56	High Risk Behavior		2015-09-30
57	High Risk Setting		
58	Treatment		
59	Healthy Less than 65 years old		2015-09-01
60	Children 24-59 months		
61	Refugees Less than 50 Years Old		
62	Recently Immigrated 6 months to 20 Year Olds		
63	5 years to 8 years		
64	9 years to 64 years		
98	Research		
99	Non Provincially Funded		

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Vaccine Site Code Table

Code	Description	Start Date	End Date
LA	Left Arm (left deltoid area)		
LAF	Left Arm - Forearm		
LAL	Left Arm – Lower (the lower site of two injections given in the left deltoid)		
LAU	Left Arm – Upper (the upper site of two injections given in the left deltoid)		
LL	Left Leg (left vastus lateralus)		
LLL	Left Leg – Lower (the lower site of two injections given in the left vastus lateralus)		
LLU	Left Leg – Upper (the upper site of two injections given in the left vastus lateralus)		
RA	Right Arm (right deltoid area)		
RAF	Right Arm – Forearm		
RAL	Right Arm – Lower (the lower site of two injections given in the left right deltoid)		
RAU	Right Arm – Upper (the upper site of two injections given in the left deltoid)		
RL	Right Leg (right vastus lateralus)		
RLL	Right Leg – Lower (the lower site of two injections given in the right vastus lateralus)		
RLU	Right Leg – Upper (the upper site of two injections given in the right vastus lateralus)		
LG	Left Gluteal		
RG	Right Gluteal		
MO	Mouth		
MS	Multiple Sites (for IG products)		
NO	Nose		

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OTH	Other		
UNK	Unknown		

Administering Method Code Table

Code	Description	Start Date	End Date
ID	Intradermal		
IM	Intramuscular		
IN	Intranasal		
IV	Intravenous Infusion		
PO	Oral		
OTH	Other		
SC	Subcutaneous		

Dosage Type Code Table

Code	Description	Start Date	End Date
CAP	Capsules		
GTTS	Drops		2015-12-01
DROP	Drops		2015-12-01
IU	International Units		2015-12-01
UNIT	Units		
MCG	Micrograms		2015-12-01
MG	Milligrams		2015-12-01
ML	Millitres		
PKG	Package		
UNK	Unknown		

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Manufacturer Table

Code	Description	Start Date	End Date
ABV	AbbVie Corporation		
AL	Abbott Laboratories		
AZC	AstraZeneca		
BAX	Baxter		
BP	Berna Biotech		
CBS	Canadian Blood Services		
CHI	Chiron		
CSL	CSL Limited		
GSK	Glaxo-SmithKline		
GRF	Grifols		
IDB	ID Biomedical		
IIC	Institute of Immunology Inc. , Croatia		
INB	Instituto Butantan		
MF	Merck Frosst		
MYL	Mylan		
NB	Nuron Biotech		
NOV	Novartis		
SF	Sanofi Pasteur		
SP	Solvay Pharma		
WA	Wyeth-Ayerst		
TAL	Talecris		
AP	Aventis Pasteur (historical)		2008-01-01
BA	Bayer (historical)		2008-01-01
BC	Biochem Pharma Inc (historical)		2008-01-01
CGC	Cangene Corporation		
CON	Connaught (historical)		2008-01-01
SH	Shire Biologies (historical)		2008-01-01

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SKB	SmithKline Beecham (historical)		2008-01-01
PFZ	Pfizer		
SEQ	Seqirus		
CRU	Crucell		
VAL	Valneva		
VIN	ViNS Bioproducts Limited		
UNK	Unknown		

Vaccine Code Table

Code	Description	Start Date	End Date
aP	Accellular Pertusiis	1997-07-01	2001-10-31
Anth	Anthrax	1996-01-01	
BA	Botulism Antitoxin	1962-06-12	
BA-7	Botulism Antitoxin Heptavalent	2016-12-15	
BAIg	Botulism Antitoxin Immune Globulin	2013-05-27	
BCG	Bacillus Calmette Guerin (TB)	1956-01-01	
CH	Cholera (unspecified)	1899-12-31	
CHI	Cholera – Injectable	1970-01-01	1999-01-01
CHO	Cholera – Oral	1997-01-01	2010-09-23
Chol-Ecol-O	Cholera - E.coli - Oral	2003-02-21	
D	Diphtheria Toxoid (fluid)	1954-04-01	1994-08-01
DA	Diphtheria Antitoxin	1895-01-01	
DD	Diphtheria Toxoid (fluid-diluted)	1954-04-01	1994-08-01
DPT	Diphtheria/whole cell Pertussis/ Tetanus	1948-01-01	1997-06-30
DPTP	Diphtheria/whole cell Pertussis/ Tetanus/ IPV	1994-08-02	1997-06-30
DPTPHib	Diphtheria/whole cell Pertussis/ Tetanus/ IPV/Hib	1994-08-02	1997-06-30
DRT	Diphtheria Reaction Test	1923-01-01	1996-01-01

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DT	Diphtheria/Tetanus toxoids (pediatric)	1948-01-01	1998-12-31
DTaP	Diphtheria/Tetanus/Acellular Pertussis	1997-07-01	1999-01-01
dTap	Diphtheria/Tetanus/Acellular Pertussis	2004-02-01	
DTaP-HB-IPV	Diphtheria/Tetanus/Acellular Pertussis/Hepatitis B/IPV	2008-08-13	
dTaP-IPV	Diphtheria/Tetanus/Acellular Pertussis/IPV	1997-07-01	
DTaP-IPV	Diphtheria/Tetanus/Acellular Pertussis/IPV	1997-07-01	
DTaP-IPV-Hib	Diphtheria/Tetanus/Acellular Pertussis/IPV/Hib	1997-07-01	
DTaP-IPV-Hib-HB	Diphtheria/Tetanus/Acellular Pertussis/IPV/Hib/Hepatitis B	2004-05-28	
DT-IPV	Diphtheria/Tetanus/IPV (pediatric)	1996-07-01	2005-10-31
EZM	E/Z Measles	1969-01-01	1971-01-01
FLU	Influenza	1939-01-01	
HABV	Hepatitis A and B	1997-01-01	
HA-Typh-I	Hepatitis A and Typhoid	2003-10-29	
HAV	Hepatitis A	1994-01-01	
HBIG	Hepatitis B Immune Globulin	1971-01-01	
HbOC	Haemophilus influenza b	1992-05-19	1993-02-01
HBTmf	Hepatitis B Thimerosal Free	2003-04-16	2011-05-01
HBV	Hepatitis B	1983-01-01	
HBVD	Hepatitis B for Dialysis	1983-01-01	
Hib	Haemophilus influenza b	1993-02-01	
Hib-MenC	Haemophilus influenza b/Meningococcal Conjugate	2010-08-01	
HPV	Human Papillomavirus (Quadravalent)	2006-07-11	
HPV-2	Human Papillomavirus (Bivalent)	2010-02-09	
HPV-9	Human Papillomavirus-(Nonavalent)	2015-02-05	

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HPV-U	Human Papillomavirus - (unspecified)	1899-12-31	
H1N1-09-AD	Adjuvanted Pandemic 2009 Influenza	2009-10-19	2010-10-01
H1N1-09	Non-Adjuvanted Pandemic 2009 Influenza	2009-10-19	2010-10-01
IG	Immune Globulin (human, intramuscular)	1987-02-18	
IPV	Inactivated Polio	1956-01-01	
JEV	Japanese Encephalitis	1990-01-01	
KMEA	Killed red measles	1963-01-01	1970-12-31
Lym	Lymerix	1998-12-02	2002-07-30
MEA	Measles (Red)	1971-01-01	1998-12-31
MenACs	Meningococcal, polysaccharide, bivalent (A, C) (single dose)	2001-01-01	2002-03-01
MenC-ACYW	Meningococcal - Conjugate (A, C, Y, W-135)	2006-05-03	
MenconC	Meningococcal, conjugate, monovalent (C)	2001-06-15	
MeninAC	Meningococcal, polysaccharide, bivalent (A, C) (multidose)	2001-01-01	2002-03-01
MENING	Meningococcal, polysaccharide, quadrivalent (A, C, Y, W-135) (single dose)	1983-05-04	
Men-B	Meningococcal B (recombinant, absorbed)	2013-12-09	
MENING-C	Meningococcal Conjugate (unspecified)	1899-12-31	
MENING-P	Meningococcal Polysaccharide (unspecified)	1899-12-31	
MENOTET	Meningococcal, polysaccharide, quadrivalent (A, C, Y, W-135)	1983-05-04	2000-11-01
MMR	Measles/Mumps/Rubella	1982-01-01	
MMR-Var	MMR and Varicella	2007-07-30	
MONM	Measles (Red) (multidose)	1997-04-01	1998-06-30
MR	Measles/Rubella	1997-01-01	1999-12-31
MU	Mumps	1982-01-01	2004-02-08

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OMP	Haemophilus influenza b	1990-01-01	1994-08-02
OPV	Oral Polio	1962-01-01	1994-07-31
P	Whole Cell Pertussis	1939-01-01	1997-06-30
PNEUMO-P	Pneumococcal (23 – polysaccharide)	1983-01-01	
POL	Polio	1994-08-02	1998-12-31
PPD	Purified Protein Derivative 5TU (Mantoux – TB Test)	1960-01-05	
PNEU-C	Pneumococcal (7 – conjugate)	2001-01-06	2010-07-01
PNEU-CON	Pneumococcal Conjugate (unspecified)	1899-12-31	
PNEU-C10	Pneumococcal (10 – conjugate)	2008-12-11	
PNEU-C13	Pneumococcal (13 – conjugate)	2009-12-21	
PRPD	Haemophilus influenza b	1988-03-16	1992-05-18
RAB	Rabies	1980-01-01	
RIG	Rabies Immune Globulin	1983-09-16	
Rot	Rotavirus	2006-08-16	
Rot-5	Rotavirus - Pentavalent	2006-08-01	
Rot-U	Rotavirus - Unspecified	1899-12-31	
RSVIg	Respiratory Syncytial Virus Immune Globulin	2002-06-01	
RUB	Rubella	1971-01-01	1998-10-01
Sma	Smallpox	1870-01-01	2015-06-01
SNAKE	Snakebite antivenom	1980-01-01	2002-02-03
TBEV	Tick-Borne Encephalitis Virus	1995-06-01	2014-03-03
Td	Tetanus/Diphtheria toxoids (adult)	1980-07-09	
TdP	Tetanus/Diphtheria/IPV (adult)	1984-01-10	2015-03-01
Td-IPV	Tetanus/Diphtheria/IPV	1984-01-10	
TIG	Tetanus Immune Globulin	1963-12-09	
TP	Tetanus Polio	1959-01-01	1994-08-01
TT	Tetanus Toxoid	1947-01-01	2000-12-31
TY	Typhoid (unspecified)	1899-12-31	

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TYO	Typhoid Ty21a – Oral	1992-01-01	
TYVI	Typhoid – Injectable	1993-11-01	
Var-S	Varicella Zoster - Shingles	2008-08-22	
VZ	Varicella Zoster	1998-12-01	
VZU	Varicella Zoster (unspecified)	1899-12-31	
VZIG	Varicella Zoster Immune Globulin	1985-01-01	
YF	Yellow Fever	1935-01-01	

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Antigen Code Table

Code	Description	Start Date	End Date
aP	Acellular Pertussis		2008-09-30
ANTH	Anthrax		
BA	Botulism Antitoxin		
BAIG	Botulism Antitoxin Immune Globulin		
BCG	Bacillus Calmette Guerin (TB)		
CH	Cholera		
D	Diphtheria Toxoid		
DA	Diphtheria Antitoxin		
DD	Diphtheria Toxoid (fluid-diluted)		2008-09-30
DRT	Diphtheria Reaction Test		1996-01-01
ECOLI	Ecoli		
FLU	Influenza		
HAV	Hepatitis A		
HBIG	Hepatitis B Immune Globulin		
HBV	Hepatitis B		
HBVD	Hepatitis B for Dialysis		2008-03-05
Hib	Haemophilus influenza type b		
HPV	Human Pappilomavirus		
IG	Immune Globulin (human, intramuscular)		
IPV	Polio (inactivated)		2008-09-30
JEV	Japanese Encephalitis Virus		
KMEA	Killed red measles		1970-12-31
LYM	Lymerix		2002-07-30
MEA	Measles		
MENING	Meningococcal		
MENING-B	Meningococcal Recombinant		

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MENING-C	Meningococcal Conjugate		
MU	Mumps		
OPV	Polio (oral)		2008-09-30
P	Pertussis		
PFLU	Pandemic Influenza		2010-10-01
PNEUMO-C	Pneumococcal (conjugate)		
PNEUMO-P	Pneumococcal (polysaccharide – 23)		
POL	Polio		
PPD	Purified Protein Derivative 5TU– TB Test		
RAB	Rabies		
RIG	Rabies Immune Globulin		
ROT	Rotavirus		
RSV	Respiratory Syncytial Virus		
RUB	Rubella		
SMA	Smallpox		2015-06-01
SNAKE	Snakebite antivenin		2002-02-03
T	Tetanus Toxoid		
TIG	Tetanus Immune Globulin		
TBEV	Tick-Borne Encephalitis Virus		2015-03-03
TY	Typhoid		
VZ	Varicella Zoster		
VZIG	Varicella Zoster Immune Globulin		
YF	Yellow Fever		

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