Annex 2 Section 3 of version 6.0 of the Diagnostic Imaging Dataset: Guidance Document, which can be found at
https://did.hscic.gov.uk/Main/Guidance

3 Diagnostic Imaging Dataset formatting guide

Guidance for formatting of DID data items for .csv upload, Please refer back to page 9 for an explanation of M, M* and R.

NOTE: PLEASE DO NOT INCLUDE A HEADER ROW IN THE DATA

Table 1 – DID data items (for .csv format)

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
NHS Number	**NHS NUMBER**	M*	The patient's unique NHS code, it is 10 numeric digits in length and an unbroken sequence **iSOFT RIS** users note the following field should be used: Patient NHS Number	Must pass the Modulus 11 Algorithm check digit test NOT ALLOWED 123 456 7890 n0000000000n
NHS Number Status	**NHS NUMBER STATUS INDICATOR CODE**	R	Permitted National Codes: 01 Number present and verified 02 Number present but not traced 03 Trace required 04 Trace attempted – No match or multiple match found 05 Trace needs to be resolved – (NHS Number or patient detail conflict) 06 Trace in progress 07 Number not present and trace not required 08 Trace postponed (baby under six weeks old) Note that when this is not present the DID will not reject the submission. **Agfa RIS** users note : Referred as NHS number in RIS but in Cognos is mapped through to SIS code found in patient folder.	permitted national codes Must include Leading Zero Note to users creating .csv format in Excel, this column should be formatted as text to retain the leading zero

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Date of Birth	**PERSON BIRTH DATE**	M*	This is the patient's date of birth Format: CCYY-MM-DD **Agfa RIS** users note : Birthday in the patient record in RIS. In Cognos it is the same as Birthdate and can be found within patient folder. **iSOFT RIS** users note the following field should be used: Demog DoB The format of date is compliant with the NHS Data Model and Dictionary and means that it is machine readable. If you open a .csv with dates in this format in Excel, Excel will convert the dates back to the Excel default format for dates DD/MM/CCYY. These will need converting back to the correct format for submission.	Cannot be after date of examination: **<= "Date of test"** Cannot be after date of submission: **<= Today** Cannot be after date of report issue **<= "Date test report issued"** NOT ALLOWED any other date format
Ethnicity	**ETHNIC CATEGORY**	M*	Ethnic Category is the classification used for the 2001 census. http://www.datadictionary.nhs.uk/data_dictionary/attributes/e/end/ethnic_category _code_de.asp?shownav=1 It is a 1 letter code (A,B,C,D,E,F,G,H,J,K,L,M,N,P,R,S,Z) **Agfa RIS** users note This is held in PAS but can be mapped through. In the patient record in RIS it is held in the tab EXTRA called ethnic group. In Cognos this is found under patient, supplementary information, value. **iSOFT RIS** users note the following field should be used: Demog Ethnic Origin Code.	Must be from defined values 99 = Not Known ONLY 1 LETTER ALLOWED NOT ALLOWED leading and trailing blanks

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Patient Gender	PERSON GENDER CODE CURRENT	M*	Permitted National Codes: 0 = Not known 1 = Male 2 = Female 9 = Not specified Note that "0 Not Known" means that the sex of the patient has not been recorded. "9 Not Specified" means indeterminate, i.e. unable to be classified as either male or female. **iSOFT RIS** users note the following field should be used: Demog Sex	Must be one of the defined national codes NOT ALLOWED M or F
Patient Home Postcode	POSTCODE OF USUAL ADDRESS	M*	**Agfa RIS** users note : In the RIS this is detailed as town in the patient demographic area. In Cognos this is found under Patient, Zip Code **iSOFT RIS** users note the following field should be used: Address Postcode	Must only have 1 space between 2 parts of post code. Postcode must be in a valid format NOT ALLOWED partial postcodes
Patient Registered GP Practice	GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION)	M*	Default Codes V81997 Not Registered V81998 Not Applicable V81999 Not Known **Agfa RIS** users note : Found in the RIS under GP in the patient demographic area. The GP details are then found in **Cognos** under the patient folder, Physician and Physician Code. **iSOFT RIS** users note the following field should be used: Attendance reg. Practice code or in some cases the RIS may be configured so that this information is held in Demog Reg. Practice Code. Care should be taken to ascertain which field to extract.	Must be one of the defined national codes For a GP practice we would expect a 6 digit code e.g. A12345, B78945 Not a branch surgery e.g. A12345001. The system will reject branch surgery codes

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Patient Type	**PATIENT SOURCE SETTING TYPE (DIAGNOSTIC IMAGING)**	M	Setting that the patient has come from **National Codes:** 01 = Admitted Patient Care - Inpatient (this Health Care Provider) * 02= Admitted Patient Care - Day case (this Health Care Provider) * 03 = Out-patient (this Health Care Provider) 04 = GP Direct Access 05 = Accident and Emergency Department (this Health Care Provider) 06 = Other Health Care Provider 07 = Other Note: these values are based on intended management at the time of the diagnostic test request. **Agfa RIS** users note: Found in the RIS under Patient Status but this needs to be mapped through from PAS in this field. In the Cognos this is found under Request and is Patient Status (1) **iSOFT RIS** users note the following field should be used: Attendance Patient Group. The Attendance site code = local individual ward/area code within site. Care should be taken to ensure that this data should relate to the National codes as described above and not a local reference to individual areas.	Must be one of the defined national codes NOT ALLOWED to drop the leading zero Note to users creating .csv format in Excel, this column should be formatted as text to retain the leading zero

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Referrer	**REFERRER CODE**	R	This field is the code of the person making the referral. This will normally be a health care professional - a general medical practitioner or a consultant (so will be a number preceded by either a G or C respectively) or a Physiotherapist / Emergency Nurse practitioner in which case this would be the HPC registration number. Default codes: C9999998 = Consultant code not known CD999998 = Dental Consultant: General Medical Council (GMC) number/ General Dental Council (GDC) number not known D9999998 = Dentist code not known G9999998 = General Medical Practitioner (GMP) code not known H9999998 = Other health care professional (from 1 April 2006) M9999998 = Midwife (from 1 April 2006) N9999998 = Nurse (from 1 April 2006) R9999981 = Referrer other than General Medical Practitioner (GMP), General Dental Practitioner (GDP) or Consultant Other GP Codes A9999998 = Ministry of Defence Doctor P9999981 = Prison doctor X9999998 = Not Applicable, not known **Agfa RIS** users note: In the RIS this is Requesting Physician, in Cognos this is found under Request and requesting physician, physician code. **iSOFT RIS** users note the following field should be used: Attendance Ref. Doctor Code **Cerner RIS** users note**:** Due to the fact that this is a module of an EPR rather than a dedicated RIS, it would be possible to select the clinician who originally referred a patient to a hospital. This field should include the details of the clinician who is requesting the diagnostic procedure.	It is important for referrer code to be accurate when linking DID data to cancer registration data. Must be in one of the following formats. **C** followed by up to **7 digits** (consultant) **CH** followed by up to **6 digits** (chiropodist) **D** followed by up to **7 digits** (dentist) **DT** followed by up to **6 digits** (dietician) **CD** followed by up to **6 digits** (dental consultant) **G** followed by up to **7 digits** (GP England and Wales) **PH** followed by up to **6 digits** (Physiotherapist) **S** followed by up to **7 digits** (GP Scotland) **SL** followed by up to **6 digits** (speech language therapist) [**Z** as 1st character], [E,N,S or W as 2nd character], followed by up to **6 digits** (GP N.Ireland) 2 digits, followed by one letter, followed by 4 digits, followed by one letter [NNLNNNNL] (Nurse) **NOTE:** Referrer Code for a GP <u>must </u>be their GMP (General Medical Practitioner) code and <u>not </u>their GMC (General Medical Council) code. A GP may have more than one GMP code if they operate from multiple practices. **Please note:** invalid codes are currently accepted by the system and are changed to "99" to represent an invalid code. In the near future additional validation will be introduced to prevent the submission of invalid values.

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Referring Organisation	**REFERRING ORGANISATION CODE**	R	Referring organisation code is the organisation code of the organisation from which the referral is made, such as a GP practice or NHS Trust. This should be the nationally recognised ODS code. It is important that local codes are not used. Format: min an3 max an6. Note: Only organisation codes which have been notified to and issued by the Organisation Data Service (ODS) may be used. Look for the ets.zip file under **NHS Trusts and Sites** – second section on the page Please remember that PCTs were never classed as referring organisations and were accepted erroneously by the system. PCTs were no longer accepted by the system as valid Referring Org Codes from April 2013 Trusts should be aware that in many cases the referring organisation will be the actual trust itself (for example in the case of ward and clinic requests). When this is a request from a GP then the referring organisation will be the site code of the GP practice, which is different to the referrer. (The actual referrer is an individual, identified by their own number, as explained in REFERRERCODE, and is personal rather than describing an organisation). ODS Default Codes: X99998 - Referring organisation code not applicable X99999 - Referring organisation code not known **Agfa RIS** users note: This is Requesting hospital in the RIS **iSOFT RIS** users note the following field should be used: REFPRACTICE-> PCGKEY	Must be from defined values A 3 digit code for the organisation that is referring the patient (e.g. RXD, RDV) not a site code (e.g. RXD45, RDV01) For a GP practice we would expect a 6 digit code e.g. A12345, B78945 Not a branch surgery e.g. A12345001. The system will reject branch surgery codes

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Date of Test Request	**DIAGNOSTIC TEST REQUEST DATE**	R	Date the referrer made the referral request Format:CCYY-MM-DD **Agfa RIS** users note: This is a user definable property and is set up by the site **iSOFT RIS** users note: Date of Test Request = Attendance Request Date **Cerner RIS** users note**:** It may not be possible to capture this field The format of date is compliant with the NHS Data Model and Dictionary and means that it is machine readable. If you open a .csv with dates in this format in Excel, Excel will convert the dates back to the Excel default format for dates DD/MM/CCYY. These will need converting back to the correct format for submission.	Cannot be before the date the request was received: **<=”Date test request received”** Alert if more than one year before “Date of test”: **>” Date of Test” + 1 year** NOT ALLOWED any other date format
Date Test Request Received	**DIAGNOSTIC TEST REQUEST RECEIVED DATE**	R	Date that the diagnostic provider received the referral request Format:CCYY-MM-DD **Agfa RIS** users note: This is a user definable property and is set up by the site. **iSOFT RIS** users note: this field may be the same as the Attendance Request Date The format of date is compliant with the NHS Data Model and Dictionary and means that it is machine readable. If you open a .csv with dates in this format in Excel, Excel will convert the dates back to the Excel default format for dates DD/MM/CCYY. These will need converting back to the correct format for submission.	Cannot be before the date that the test request was received: **>= “Date of test request”** Alert if more than one year before “Date of test” **>”Date of Test” + 1 year** NOT ALLOWED any other date format

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Date of Test	**DIAGNOSTIC TEST DATE**	M	Date the test took place Format: CCYY-MM-DD **Agfa RIS** users note: In RIS this is called Date but from the browser field is the request date **iSOFT RIS** users note the following field should be used: DATACONFIRM ->CONFDATE. If CONFDATE is not available then SORTDATE will be picked from DATAEXAM The format of date is compliant with the NHS Data Model and Dictionary and means that it is machine readable. If you open a .csv with dates in this format in Excel, Excel will convert the dates back to the Excel default format for dates DD/MM/CCYY. These will need converting back to the correct format for submission.	Cannot be before the date that the test was requested **>="Date of test request"** Cannot be before the date that the test request was received: **>="Date test request received"** Cannot be after the date of the report issue **<="Date test report issued"** Cannot be more than 3 months from beginning of submission month **< 3 months from beginning of submission month** (i.e. if you are submitting a file to the DID system in December 2014, Date of Test cannot be before 1st September 2014) NOT ALLOWED any other date format
Imaging Code (NICIP)	**IMAGING CODE (NICIP)**	M	NICIP: National Interim Clinical Imaging Procedure code, which enables identification of both the test modality and body site of test. Further Details can be found at: http://systems.digital.nhs.uk/data/uktc/imaging	Must be from defined values

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Imaging Code (SNOMED CT)	*Or* **IMAGING CODE (SNOMED CT)**	M	SNOMED CT: Systematized Nomenclature of Medicine Clinical Terms code, which enables identification of both the test modality and body site of test. SNOMED CT is due to take over from NICIP codes in April 2015 Further details can be found at: http://systems.digital.nhs.uk/data/uktc/snomed Note: This may be called the "Exam Code" within HSS CRIS and within Agfa RIS **iSOFT RIS users note** the following field should be used: Exam Examination Code. iSOFT are in the process of adding new fields to differentiate between NICIP and SNOMED CT fields	Must be from defined values If SNOMED CT codes are not being provided, please leave this field blank.
Date Test Report Issued	**SERVICE REPORT ISSUE DATE**	R	Date the diagnostic provider issued the test report Format: CCYY-MM-DD **Agfa RIS** users note: In the RIS this is called the creation date and can be found under report, again this is configurable to each individual site. **iSOFT RIS** users note the following field should be used: Section Authorised Date. However it should be noted that this functionality is limited within the current release. For example, in the attendance if there are two exams Ex1 and Ex2. For the Ex1, there are 2 report sections created then the latest report section authorised date will be taken. The format of date is compliant with the NHS Data Model and Dictionary and means that it is machine readable. If you open a .csv with dates in this format in Excel, Excel will convert the dates back to the Excel default format for dates DD/MM/CCYY. These will need converting back to the correct format for submission	Alert if more than month after "Date of test" **> "date of test" + 1 month** NOT ALLOWED any other date format

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
Provider Site Code	**SITE CODE (OF IMAGING)**	M	Site code (of imaging) is the organisation site code of the organisation at which the imaging took place, for example: Example NHS Trust Site = RH802 ODS Default Codes: 89999 - Non-NHS UK Provider where no organisation site code has been issued 89997 - Non-UK Provider where no organisation site code has been issued Note: Only organisation codes which have been notified to and issued by the Organisation Data Service (ODS) may be used. Look for the ets.zip file under **NHS Trusts and Sites** – second section on the page. **iSOFT RIS** users note the following field should be used : DATAATTEND-> SITEKEY It is worth noting that in trusts where there are more than one site of imaging, it is important that the RIS is able to capture which of these sites has actually performed the procedure, so a 3 digit site code would be rejected by DID	Must be from defined values

Name	NHS Data Model and Dictionary Reference	M/R	Comments	Validation
RIS Accession Number	**RADIOLOGICAL ACCESSION NUMBER**	M	Unique RIS record number for the exam. **iSOFT RIS** users note the following field should be used: Accession Number. Note: Care should be taken to ensure that the study number within RIS (attendance number) is not extracted here. **Cerner RIS** users note: This number should be unique to the specific examination. This is required so that a differentiation can be made between multiple body parts examined at the same attendance.	Each accession number must be unique within the site code. They should refer to the exam, not to the patient. From September 2013 duplicate accession numbers will not pass validation. Care should be taken not to reuse accession numbers that have been provided in previous years, even where the same patient is undergoing the same test at a different point in time. This would cause your previous submitted record to be moved from LIVE data into the DID ARCHIVE, which is not accessible through iView and not included in any DID Publications or other data uses.