

**Centers for Disease Control and Prevention**

**Dated: February 13, 2007**

# **Pandemic Influenza Aggregate Vaccine Doses Data Exchange Requirements**

## Revision History

Version	Revision Date	Revised By	Changes
1.0	05/09/2006	Cindy Vinion	Initial implementation
1.1	05/16/2006	Cindy Vinion	Updated section 1 and 2 text
1.2	06/08/2006	Cindy Vinion	Eliminated the Organization section; added other updates
1.3	06/14/2006	Cindy Vinion	Updated to support ease of importing into CRA online
1.4	06/28/2006	Cindy Vinion	Updated to latest design of input file
1.5	07/10/2006	Cindy Vinion	Updated to reflect requirements gathering from NIP
Edits to 1.5	08/14/2006	Warren Williams/Ed Brink	Updated based on call with stakeholders
Edits to 1.5	08/23/2006	Warren Williams/Ed Brink	Updated based on call with stakeholders
Edits to 1.5	08/29/2006	Warren Williams	Updated based on discussion and call with stakeholders
1.9	09/12/2006	Cindy Vinion	Updated table format
1.9a	09/13/2006	Warren Williams	Added CVX codes
1.9b	10/25/2006	Warren Williams	Added CV examples of transmission layouts
2.0	01/18/2007	Warren Williams/Cindy Vinion	Updated to include HL7 mapping and enhanced examples
2.1	02/05/2007	Cindy Vinion	Updated MSH segment of the HL7 example
2.2	02/06/07	Jeanne Tropper	Minor edits to fix typos and grammar; improve clarity

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## **1 Introduction**

### **1.1 Purpose**

The purpose of this document is to provide detailed specifications for the format, composition, data definition, business rules, and process for submitting aggregate reports on vaccinations used during a Pandemic Influenza Public Health Event to the Centers for Disease Control and Prevention (CDC) Countermeasure and Response Administration (CRA) system. This document provides detailed specifications and data definitions required for the upload to be successful.

This document is designed to be used by any Public Health partner that:

1. Is certified to use their own information technology system to collect aggregate data about the administration of vaccine during a Pandemic Flu Public Health Event and
2. Will submit that electronic data file to CRA for reporting purposes

Terms referenced throughout the document include:

1. Public Health Event - An act or series of acts used to prepare for, counteract, or offset a possible (preparedness) or actual (response) agent release or disease outbreak
2. Product - A manufactured substance, generally a pharmaceutical
3. CVX codes –Standardized vaccine codes promulgated by HL7 to support interoperability and data exchange

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## **2 Description**

### **2.1 Sending Files to CRA for Reporting of Aggregate Data on Pandemic Influenza Doses**

CDC will provide an Upload Utility user interface as part of CDC's Countermeasure and Response Administration System (CRA). This will facilitate the upload of import files for any Public Health Partner administering or dispensing countermeasures for a Public Health Event. Each partner must be certified to use their own information technology system to collect data and to send a data file containing the collected data to CRA for reporting purposes. CRA resides on the CDC's Secure Data Network (SDN), which is only accessible from a computer that has the appropriate security certificate. Access to the Import Utility will require accessing the CRA application through the CDC's SDN; in addition, the Upload Utility will only be accessible by those users with the appropriate user role designation. The user-selected partner jurisdiction, organization, event, and countermeasure must match the corresponding fields in the upload file in order for the upload to be successful. In other words, the security structure of the SDN, CRA, and the Import Utility is a 3-level security structure; the Import Utility is only accessible by a user accessing CRA from a computer with a valid SDN digital certificate, access to the CRA application, and the appropriate CRA user role designation with appropriate selections.

To upload the file, the user accesses the CRA system, navigates to the Aggregate module, selects the required fields, and selects the "Upload Aggregate Report" control. The user then finds the upload file and selects the file to upload. (See the CRA OnLine Help Link for more specific information.) The CRA system will validate, parse, and load the file. Since the upload utility has been implemented within the Aggregate module of the CRA on-line system, each import file can only contain data for one and only one partner/organization/event/countermeasure combination.

### **2.2 File Validation and Upload**

Validation and upload of the import file is a 3-step process. The first step verifies that the user-selected fields in the CRA application match the corresponding fields in the upload. The second step validates the file format and performs some of the field validation. Finally, the third step validates that the imported data loads into the CRA database correctly.

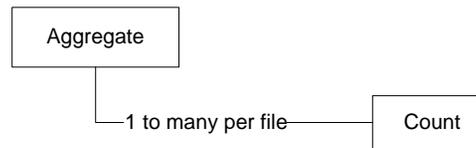
### **2.3 Communication**

The CRA system will notify the user if the user-selected options do not match the information in the import file, if the fields in the file do not contain an expected value or if the file does not contain the correct format. In addition, upon successful load of a file, the CRA system will provide notification of a successful transfer and load and will notify the user of the availability of the data.

### 3 Data Exchange Format Requirements

#### 3.1 Import File Description

The import file's data elements are described below. The Aggregate section of the import file will repeat for each reporting period (start date and end date) for which the partner jurisdiction is submitting aggregate counts. The Count section of the import file will be nested below the Aggregate section and will be present for each count category for each Pandemic Influenza vaccine (countermeasure) used within the partner jurisdiction



**Figure 1 - Aggregate File Layout**

#### 3.2 Data Set

The data set, detailed below, defines the sections and the fields within each section that must be included in every upload file. This layout supports uploading data for collecting aggregate count information about vaccines administered to counteract Pandemic Influenza.

##### 3.2.1 Aggregate Section Data Set

The data elements for the Aggregate section are listed in the table below. Any and all format, uniqueness, and valid value requirements must be followed and will be validated during upload and/or transformation to the CRA database.

#	Data Element Name	Description	Data type	Size	Format?	Unique?	Req'd?	Valid Values?	Notes
1	Partner	The Partner abbreviation that sent the extract and to which the data contained in the extract belongs.	Alphanumeric	80			Yes	See Sender	Provides context to the upload file user. Validated against selections made within the CRA system. Max of 60(states, DC, LA, CHI, NYC, PR+ territories)

#	Data Element Name	Description	Data type	Size	Format?	Unique?	Req'd?	Valid Values?	Notes
2	Event	Identifies the Public Health Event under which the aggregate information has been collected. For pandemic flu reporting this field will always be NPIP. For other events it will have other names. See table 4.3	Alphanumeric	40			Yes	See Event	Provides context to the upload file user. Validated against selections made within the CRA system.
3	Start Date	Identifies the start date (it will always be a Sunday) for the week the vaccine counts begin. This is the beginning period of when the first dose of a vaccine was administered in a partner jurisdiction	Date	10	yyyy-mm-dd		Yes		The expected time frame of reporting will be one week. Sunday through Saturday. If administration of vaccine starts mid week, the reporting period will still begin on the preceding Sunday and continue through the next Saturday. For example if the vaccine administration for pan flu is initiated on August 16, 2006. The start date field will be August 13, 2006. The end date field will be Saturday August 19, 2006. Subsequent weeks will start from the next Sunday after the first vaccine was administered.
4	End Date	Identifies the end date (it will always be a Saturday) for the week the vaccine counts are administered. This is the ending period for the doses administered during that week in a partners jurisdiction	Date	10	yyyy-mm-dd		Yes		See above for start and end date notes. This end date will always be a Saturday.

#	Data Element Name	Description	Data type	Size	Format?	Unique?	Req'd?	Valid Values?	Notes
5	Countermeasure Name	Identifies the treatment (vaccine, substance, etc) to which the counts apply. For pandemic flu reporting this field will always be a CVX code.	Numeric				Yes	See Countermeasure section 4.2	Note: For immunization registries etc, will be reporting a vaccine type code (a CVX code) See <a href="http://www.cdc.gov/nip/registry/st_terr/tech/stds/hl7-cvx.htm">http://www.cdc.gov/nip/registry/st_terr/tech/stds/hl7-cvx.htm</a> for the most up to date list. For testing purposes use xyz
6	Total Count	The total number of vaccines administered.	Integer			Yes	Yes		For example if the total number of vaccines is 45 then the reported number is 45. This count will be validated against a subtotal of the count categories; for example, all age group categories will be subtotaled and matched against this total.

### 3.2.2 Counts Section Data Set

The data elements for the Count section are listed in the table below; any and all format, uniqueness, and valid value requirements must be followed and will be validated during upload and/or transformation to the CRA database. There may be one or more Count sections in the file.

#	Data Element Name	Description	Data type	Size	Format?	Unique?	Req'd?	Valid Values?	Notes
1	Category Code	Identifies the counts being collected.	Alphanumeric	20			Yes	See Count Category	Minimum size is 3; the maximum size of 20 is provided for implementation purposes.
2	Number Treated	The total number of patients treated with the countermeasure in the partners' jurisdiction that correspond to the classification listed in section 4.1	Integer	10			Yes		

## 4 Valid Value Lists

### 4.1 Count Category

Count category may change for each event and countermeasure combination. The event and countermeasure information for pandemic influenza reporting is used to group the categories in the table below.

Code	Label	Short Name	Valid Date Range	Description	Business rule notes
<b>AGE groups</b>					<p>All age responses should sum to the total number of vaccines which also corresponds to number reported in the total count field.</p> <p>See Section 6.1 below for additional information on age groups.</p>
256	AG1	6-23 m	08/2006-	Ages 6 through 23 Months	
124	AG2	2-18 y	08/2006-	Ages 2 through 18 Years	
369	AG3	19-49 y	08/2006-	Ages 19 through 49 Years	
671	AG4	50-64 y	08/2006-	Ages 50 through 64 Years	
851	AG5	65+y	08/2006-	Ages 65 years and above	
<b>Dose number category</b>					<p>All dose categories should sum to the total number of vaccines which also corresponds to number reported in the total count field.</p> <p>See Section 6.1 below for additional information on valid doses.</p>
721	DS1	1st	08/2006-	First Flu shot	
365	DS2	2nd	08/2006-	Second Flu shot	
243	DS3	unk	08/2006-	Flu shot – Unknown, Other (i.e. a dose was given but it's unknown if it was the first or second dose, or if it was another dose such as the 3 <sup>rd</sup> dose.)	

Code	Label	Short Name	Valid Date Range	Description	Business rule notes
<b>Risk group category</b>					All risk group categories should sum to the total number of vaccines which also corresponds to number reported in the total count field. If a vaccinated person corresponds to more than one priority group then he/she should be counted in the higher ranking group. (for example if someone belongs to a risk group 5 and risk group 1 then they are counted in risk group 1.)
221	RG1	1-A	08/2006-	1. Medical, public health, and health support services with direct patient contact or care. 2. Vaccine/antiviral manufacturers and others essential to manufacturing and critical support.	
110	RG2	1-B	08/2006-	1. Persons 65+ years with 1 or more influenza high risk conditions, not including essential hypertension. 2. Persons 6 months through 64 years with 2 or more influenza high risk conditions, not including essential hypertension. 3. Persons 6 months or older with history of hospitalization for pneumonia or influenza or other influenza high risk condition in the past year.	
190	RG3	1-C	08/2006-	1. Household contacts of severely immunocompromised persons who would not be vaccinated due to likely poor response to vaccine. 2. Household contacts of children <6 months. 3. Pregnant women.	
632	RG4	1-D	08/2006-	1. Public health emergency response workers critical to pandemic response (1/3 of public health workforce). 2. Key government leaders.	
430	RG5	2-A	08/2006-	1. Healthy 65 years and older. 2. 6-month through 64 years with 1 influenza high-risk condition. 3. 6-23 months and healthy.	

Code	Label	Short Name	Valid Date Range	Description	Business rule notes
102	RG6	2-B	08/2006-	1. Other public health emergency responders (remaining 2/3s of public health force). 2. Public safety workers (including fire, police, 911, and jail). 3. Utility workers essential for power, water, sewage system functioning. 4. Transportation workers (fuel, water, food, and medical supplies and ground public transportation). 5. Telecommunications/IT for essential network operation and maintenance	
333	RG7	3 and 4	08/2006-	1. Key government health decision makers. 2. Funeral directors/embalmers. 3. Healthy persons 2-64 years not included in any of the above conditions	

#### 4.2 Countermeasure

(Pandemic Influenza vaccine reporting codes CVX table has complete list of other vaccines.)

Will contain applicable CVX codes - initial codes are listed below; additional codes will be accepted as they become available.

Value	Name	Notes
123	Influenza, 1203 influenza virus vaccine, H5N1, A/Vietnam/1203/200	
124	Influenza, 1203, w/adjuvant influenza virus vaccine, H5N1, A/Vietnam/1203/2004, w/adjuvant	
125	Influenza (TBD) Influenza virus vaccine	
126	Influenza (TBD) Influenza virus vaccine	
127	Influenza (TBD) Influenza virus vaccine	Primary code for IIS pandemic use
128	Influenza (TBD) Influenza virus vaccine	
129	Influenza (TBD) Influenza virus vaccine	

#### 4.3 Event

Value	Name	Notes
NPIP	National Pandemic Influenza Preparedness	

#### 4.4 Partner

Value	Description
AK	Alaska
AL	Alabama
AR	Arkansas
AS	American Samoa
AZ	Arizona
CA	California
CHI	Chicago
CO	Colorado
CT	Connecticut
DC	District of Columbia
DE	Delaware
FL	Florida
FM	Micronesia
GA	Georgia
GU	Guam
HI	Hawaii
IA	Iowa
ID	Idaho
IL	Illinois
IN	Indiana
KS	Kansas
KY	Kentucky
LA	Louisiana
LOS	Los Angeles
MA	Massachusetts
MD	Maryland
ME	Maine
MH	Marshall Islands
MI	Michigan
MN	Minnesota
MO	Missouri
MP	Northern Mariana Islands

Value	Description
MS	Mississippi
MT	Montana
NC	North Carolina
ND	North Dakota
NE	Nebraska
NH	New Hampshire
NJ	New Jersey
NM	New Mexico
NV	Nevada
NY	New York
NYC	New York City
OH	Ohio
OK	Oklahoma
OR	Oregon
PA	Pennsylvania
PR	Puerto Rico
PW	Palau
RI	Rhode Island
SC	South Carolina
SD	South Dakota
TN	Tennessee
TX	Texas
UT	Utah
VA	Virginia
VI	Virgin Islands
VT	Vermont
WA	Washington
WI	Wisconsin
WV	West Virginia
WY	Wyoming

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## 5 File Encoding

The aggregate data exchange for transmitting data to CDC's CRA system supports the following three file formats:

- ORU R01 version 2.5 HL7 Message following the PHIN Messaging Standard Aggregate Reporting Message Implementation Guide. See appendix a1 for the HL7 version.
- Pipe-delimited. See appendix a2 for the pipe-delimited file version.
- XML encoding. See appendix a3 for the XML version Note: The schema (xsd) file is available.

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## 6 Event/Countermeasure Specific Information

### 6.1 Relevant Notes on Reporting Aggregate Data for National Pandemic Influenza Preparedness/Avian Flu Vaccine

- The Event name (National Pandemic Influenza Preparedness) and Countermeasure name have not been finalized; however, the countermeasure name will be the CVX code.
- Due to the anticipated size and scope of vaccine administration activities in support of the Pandemic Influenza event, each partner jurisdiction uploading data to the CRA online system is assumed to be submitting one set of counts for each reporting period. This will allow for complete reporting of the partner's administration data while keeping the size of the CRA system manageable for the event.
- Reporting updates: For each reporting period - defined as Saturday to Sunday (see start date/end date), report all information for that time frame. If new information comes in for that reporting period, use a full replace of the data already submitted along with the new data.
- These guidelines only include information pertinent to public health at the federal level. Jurisdictions using immunization information or other automated applications to collect individual level data will likely capture much more detail about the encounter. These may include clinical information on the shot as well as data for jurisdictional analysis and tracking purposes.
- Screening in this situation is extremely important. Every effort should be taken to ensure the proper procedures are followed and vaccines are administered to persons meeting appropriate priority, age, and time between dose groupings.

#### Invalid Dose Business Rule:

- Every effort should be made to avoid administering invalid doses. Doses are deemed invalid if the second dose is administered before the minimum time interval between dose one and dose two has passed. All invalid doses should be counted as a second dose for the purposes of the minimum data set to be aggregated and exchanged with CDC-CRA.
- Partial doses are expected to occur very infrequently. Regardless of whether one chose to repeat the dose or not, all partial doses are to be considered as one dose for the purposes of the minimum data set to be aggregated and exchanged with CDC-CRA

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Age Group Business Rule:

- The screening phase should ensure that age has been correctly determined. If it is determined after vaccination that a child was less than 6 months of age he/she should be counted in the 6-23 month age group for purposes of the minimum data set to be aggregated and exchanged with CDC-CRA.

Doses Administered to Patients Who Live in Partner Jurisdiction Different From Where They Receive a Vaccine:

- If a patient receives a pandemic influenza vaccine dose in a jurisdiction different from the jurisdiction where they reside, the system should aggregate and report to CDC-CRA the dose based on where the vaccine was administered. Subsequently the system may report the vaccination to the partner jurisdiction where the patient resides for future tracking purposes.

## Appendix A1 The Health Level 7 Reporting Formats

The purpose of this appendix is to describe the transmission formats for the use of the Health Level 7 reporting formats for sending aggregate Pandemic flu reporting data to the CDC-CRA system. The example below contains data for 2 reporting periods; each reporting period begins with the OBR segment.

### Aggregate Section Mapping to HL7 Message

#	Data Element Name	HL7 Message Segment & Field	HL7 Message Field Name	Notes
1	Partner	MSH.4	Sending Facility	
2	Event	CTI.1	Sponsor Study ID	
3	Start Date	OBR.7	Observation Date/Time	
4	End Date	OBR.8	Observation End Date/Time	
5	Countermeasure Name	OBR.4	Universal Service Identifier	
6	Total Count	OBX.5	Observation Value	OBX.3 = "TOTAL" (see example)

### Counts Section Mapping to HL7 Message

#	Data Element Name	HL7 Message Segment & Field	HL7 Message Field Name	Notes
1	Category Code	OBX.3	Observation Identifier	
2	Number Treated	OBX.5	Observation Value	

Example - multiple reports:

```
MSH|^~\&||GA^2.16.840.1.114222.4.3.2^ISO||CDC^2.16.840.1.114222.4.3.2^ISO|20061008||ORU^R01^ORU_R01|200610080045|P|2.5||||||^PHIN^2.16.840.1.114222.4^ISO<CR>
```

```
OBR|1|||127^Influenza (TBD) Influenza virus vaccine^2.16.840.1.114222.4.3.2||20061001|20061007<CR>
```

```
OBX|1|NM|TOTAL^Total Administrations^2.16.840.1.114222.4.3.2||150||||F<CR>
```

```
OBX|2|NM|256^AG1^2.16.840.1.114222.4.3.2||10||||F<CR>
```

```
OBX|3|NM|124^AG2^2.16.840.1.114222.4.3.2||15||||F<CR>
```

```
OBX|4|NM|369^AG3^2.16.840.1.114222.4.3.2||50||||F<CR>
```

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OBX|5|NM|671^AG4^2.16.840.1.114222.4.3.2||25||||F<CR>  
 OBX|6|NM|851^AG5^2.16.840.1.114222.4.3.2||50||||F<CR>  
 OBX|7|NM|721^DS1^2.16.840.1.114222.4.3.2||100||||F<CR>  
 OBX|8|NM|365^DS2^2.16.840.1.114222.4.3.2||25||||F<CR>  
 OBX|9|NM|243^DS3^2.16.840.1.114222.4.3.2||25||||F<CR>  
 OBX|10|NM|221^RG1^2.16.840.1.114222.4.3.2||75||||F<CR>  
 OBX|11|NM|110^RG2^2.16.840.1.114222.4.3.2||20||||F<CR>  
 OBX|12|NM|190^RG3^2.16.840.1.114222.4.3.2||25||||F<CR>  
 OBX|13|NM|632^RG4^2.16.840.1.114222.4.3.2||5||||F<CR>  
 OBX|14|NM|430^RG5^2.16.840.1.114222.4.3.2||10||||F<CR>  
 OBX|15|NM|102^RG6^2.16.840.1.114222.4.3.2||5||||F<CR>  
 OBX|16|NM|333^RG7^2.16.840.1.114222.4.3.2||10||||F<CR>  
 CTI|NPIP^2.16.840.1.114222.4.3.2^ISO<CR>  
 OBR|1||127^Influenza (TBD) Influenza virus vaccine^2.16.840.1.114222.4.3.2||20060924|20060930<CR>  
 OBX|1|NM|TOTAL^Total Administrations^2.16.840.1.114222.4.3.2||100||||F<CR>  
 OBX|2|NM|256^AG1^2.16.840.1.114222.4.3.2||10||||F<CR>  
 OBX|3|NM|124^AG2^2.16.840.1.114222.4.3.2||15||||F<CR>  
 OBX|5|NM|671^AG4^2.16.840.1.114222.4.3.2||25||||F<CR>  
 OBX|6|NM|851^AG5^2.16.840.1.114222.4.3.2||50||||F<CR>  
 OBX|7|NM|721^DS1^2.16.840.1.114222.4.3.2||100||||F<CR>  
 OBX|8|NM|365^DS2^2.16.840.1.114222.4.3.2||0||||F<CR>  
 OBX|9|NM|243^DS3^2.16.840.1.114222.4.3.2||0||||F<CR>  
 OBX|10|NM|221^RG1^2.16.840.1.114222.4.3.2||75||||F<CR>

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OBX|12|NM|190^RG3^2.16.840.1.114222.4.3.2||25|||||F<CR>

CTI|NPIP^2.16.840.1.114222.4.3.2^ISO<CR>

Requirements to message:

- The Sending Facility (MSH 4) needs to have an Object Identifier (OID) and to have the OID registered with the CDC PHIN OID Registry
- OIDs for the receiving application (CRA) and the receiving facility (CDC) will be provided. These values are needed for MSH 5 and MSH 6
- An OID for the Event (CTI 1) will be provided

Contact the PHIN Help Desk ([PHINTech@cdc.gov](mailto:PHINTech@cdc.gov)) for messaging assistance

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## Appendix A2 The Flat File Reporting Formats

The purpose of this appendix A2 is to describe the transmission formats for the use of ASCII flat file reporting formats for sending aggregate Pandemic flu reporting data to the CDC-CRA system.

In general it follows a pipe-delimited format with number id to identify variables.

Each row corresponds to the counts for a reporting period for a partner site and CVX code.

### Syntax description

Partner site|event name-always NPIP|Start date|End date|CVX code||total number treated|agegroup1 code^##|agegroup 2 code^##| agegroup3 code^##| agegroup4 code^##|agegroup5 code^##|Dose number1 code^##|Dose number2 code^##|Dose number3 code^##|risk group code1^##| risk group code2^##| risk group code3^##| risk group code4^##| risk group code5^##| risk group code6^##| risk group code7^##|

### Example - Single Report:

```
GA|NPIP|10/1/2006|10/7/2006|127|150|256^10|124^15|369^50|671^25|851^50|721^100|365^25|243^25|221^75|110^20|190^25|632^5|430^10|102^5|333^10<cr>
```

### Example - Multiple Report:

```
GA|NPIP|10/1/2006|10/7/2006|127|150|256^10|124^15|369^50|671^25|851^50|721^100|365^25|243^25|221^75|110^20|190^25|632^5|430^10|102^5|333^10<cr>
```

```
GA|NPIP|10/1/2006|10/7/2006|127|150|256^10|124^15|369^50|671^25|851^50|721^100|365^25|243^25|221^75|110^20|190^25|632^5|430^10|102^5|333^10<cr>
```

## Appendix A3 The XML File Reporting Guidelines

The purpose of this appendix is to describe the transmission formats for the use of XML reporting formats for sending aggregate Pandemic flu reporting data to the CDC-CRA system.

```
<?xml version="1.0" encoding="UTF-8" ?>
<upload>
<aggregate sending="AL" event="NPIP" start_date="2006-05-27" end_date="2006-06-02"
  countermeasure_name="XYZ" total_count="180"/>
  <count category_code="AG1" number_treated="20" />
  <count category_code="AG2" number_treated="20" />
  <count category_code="AG3" number_treated="50" />
  <count category_code="AG4" number_treated="40" />
  <count category_code="AG5" number_treated="50" />
  <count category_code="RG1" number_treated="50" />
  <count category_code="RG2" number_treated="20" />
  <count category_code="RG3" number_treated="10" />
  <count category_code="RG4" number_treated="20" />
  <count category_code="RG5" number_treated="20" />
  <count category_code="RG6" number_treated="40" />
  <count category_code="RG7" number_treated="20" />
  <count category_code="DS1" number_treated="40" />
  <count category_code="DS2" number_treated="40" />
  <count category_code="DS3" number_treated="100" />
</aggregate>
</upload>
```

Figure 2 - XML Example - Single Report

```

<?xml version="1.0" encoding="UTF-8" ?>
<upload>
<aggregate sending="AL" event="NPIP" start_date="2006-05-27" end_date="2006-06-02"
  countermeasure_name="XYZ" total_count="180"/>
  <count category_code="AG1" number_treated="20" />
  <count category_code="AG2" number_treated="20" />
  <count category_code="AG3" number_treated="50" />
  <count category_code="AG4" number_treated="40" />
  <count category_code="AG5" number_treated="50" />
  <count category_code="RG1" number_treated="50" />
  <count category_code="RG2" number_treated="20" />
  <count category_code="RG3" number_treated="10" />
  <count category_code="RG4" number_treated="20" />
  <count category_code="RG5" number_treated="20" />
  <count category_code="RG6" number_treated="40" />
  <count category_code="RG7" number_treated="20" />
  <count category_code="DS1" number_treated="40" />
  <count category_code="DS2" number_treated="40" />
  <count category_code="DS3" number_treated="100" />
</aggregate>
<aggregate sending="AL" event="NPIP" start_date="2006-06-03" end_date="2006-06-09"
  countermeasure_name="XYZ" total_count="180"/>
  <count category_code="AG2" number_treated="20" />
  <count category_code="AG3" number_treated="70" />
  <count category_code="RG1" number_treated="50" />
  <count category_code="RG5" number_treated="40" />
  <count category_code="DS1" number_treated="40" />
  <count category_code="DS2" number_treated="50" />
</aggregate>
</upload>

```

Figure 3 - XML Example - Multiple Reports