

STN	Zdravotnícka informatika Údaje na zdravotnej karte pacienta Časť 5: Identifikačné údaje (ISO 21549-5: 2023)	STN EN ISO 21549-5 84 8018
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Health informatics - Patient healthcard data - Part 5: Identification data (ISO 21549-5:2023)

Táto norma obsahuje anglickú verziu európskej normy.
This standard includes the English version of the European Standard.

Táto norma bola oznámená vo Vestníku ÚNMS SR č. 01/24

Obsahuje: EN ISO 21549-5:2023, ISO 21549-5:2023

Oznámením tejto normy sa ruší
STN EN ISO 21549-5 (84 8018) z októbra 2016

EUROPEAN STANDARD
NORME EUROPÉENNE
EUROPÄISCHE NORM

EN ISO 21549-5

November 2023

ICS 35.240.80

Supersedes EN ISO 21549-5:2016

English Version

**Health informatics - Patient healthcard data - Part 5:
Identification data (ISO 21549-5:2023)**

Informatique de santé - Données relatives aux cartes
de santé des patients ; Partie 5: Données
d'identification (ISO 21549-5:2023)

Medizinische Informatik - Patientendaten auf Karten
im Gesundheitswesen - Teil 5: Identifikationsdaten
(ISO 21549-5:2023)

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COMITÉ EUROPÉEN DE NORMALISATION
EUROPÄISCHES KOMITEE FÜR NORMUNG

CEN-CENELEC Management Centre: Rue de la Science 23, B-1040 Brussels

EN ISO 21549-5:2023 (E)

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European foreword

This document (EN ISO 21549-5:2023) has been prepared by Technical Committee ISO/TC 215 "Health informatics" in collaboration with Technical Committee CEN/TC 251 "Health informatics" the secretariat of which is held by NEN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by May 2024, and conflicting national standards shall be withdrawn at the latest by May 2024.

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Endorsement notice

The text of ISO 21549-5:2023 has been approved by CEN as EN ISO 21549-5:2023 without any modification.

INTERNATIONAL STANDARD

ISO
21549-5

Third edition
2023-10

Health informatics — Patient healthcard data —

Part 5: Identification data

*Informatique de santé — Données relatives aux cartes de santé des
patients —*

Partie 5: Données d'identification



Reference number
ISO 21549-5:2023(E)

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CP 401 • Ch. de Blandonnet 8
CH-1214 Vernier, Geneva
Phone: +41 22 749 01 11
Email: copyright@iso.org
Website: www.iso.org

Published in Switzerland

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Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular, the different approval criteria needed for the different types of ISO document should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

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This document was prepared by Technical Committee ISO/TC 215, *Health Informatics*, in collaboration with the European Committee for Standardization (CEN) Technical Committee CEN/TC 251, *Medical informatics*, in accordance with the Agreement on technical cooperation between ISO and CEN (Vienna Agreement).

This third edition cancels and replaces the second edition (ISO 21549-5:2015), of which it constitutes a minor revision. The changes are as follows:

- normative references have been updated;
- errors have been corrected in [Annex A](#).

A list of all parts in the ISO 21549 series can be found on the ISO website.

Any feedback or questions on this document should be directed to the user's national standards body. A complete listing of these bodies can be found at www.iso.org/members.html.

Introduction

With a more mobile population, greater healthcare delivery in the community and at patients' homes, together with a growing demand for improved quality of ambulatory care, portable information systems and stores have increasingly been developed and used. Such devices are used for tasks ranging from identification, through portable medical record files, and on to patient-transportable monitoring systems.

The functions of such devices are to carry and to transmit person-identifiable information between themselves and other systems; therefore, during their operational lifetime, they can share information with many technologically different systems which differ greatly in their functions and capabilities.

Healthcare administration increasingly relies upon similar automated identification systems. For instance, prescriptions can be automated and data exchange carried out at a number of sites using patient transportable computer readable devices. Healthcare funding institutions and providers are increasingly involved in cross-region care, where reimbursement can require automated data exchange between dissimilar healthcare systems. Administrative data objects can require linkage to external parties responsible for their own domains which are not within the scope of this document. For instance, cross-border reimbursement of healthcare services are usually regulated by law and intergovernmental agreements which are not subject to standardization.

The advent of remotely accessible databases and support systems has led to the development and use of "Healthcare Person" identification devices that are also able to perform security functions and transmit digital signatures to remote systems via networks.

With the growing use of data cards for practical everyday healthcare delivery, the need has arisen for a standardized data format for interchange.

The person-related data carried by a data card can be categorised in three broad types: identification (of the device itself and the individual to whom the data it carries relates), administrative and clinical. It is important to realize that a given healthcare data card "de facto" contains device data and identification data and can in addition contain administrative, clinical, medication and linkage data.

Device data are defined to include:

- identification of the device itself;
- identification of the functions and functioning capabilities of the device.

Identification data are defined to include unique identification of the device holder (and not information of other persons).

Administrative data can include:

- complementary person(s) related data;
- identification of the funding of healthcare, whether public or private, and their relationships, i.e. insurer(s), contract(s) and policy(ies) or types of benefits;
- identification of other persons as a part of the insurance contract (e.g. a family contract);
- other data (distinguishable from clinical data) that are necessary for the purpose of healthcare delivery.

Clinical data can include:

- items that provide information about health and health events;
- their appraisal and labelling by a healthcare provider;
- related actions planned requested or performed.

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Medication data can include:

- a record of medications received or taken by the patient;
- copies of prescriptions including the authority to dispense records of dispensed medication;
- records of medication bought by the patient;
- pointers to other systems that contain information that makes up an electronic prescription and the authority to dispense.

As a data card essentially provides specific answers to definite queries while having at the same time a need to optimize the use of memory by avoiding redundancies, “high level” object modelling technique (OMT) has been applied with respect to the definition of healthcare data card data structures.

This document describes and defines the basic structure of the identification data objects held on healthcare data cards using UML, plain text and Abstract Syntax Notation (ASN.1).

This document does not establish the common objects defined within ISO 21549-2 even though they are referenced and utilized within this document.

Health informatics — Patient healthcard data —

Part 5: Identification data

1 Scope

This document describes and defines the basic structure of the identification data objects held on healthcare data cards, but it does not specify particular data sets for storage on devices.

This document does not apply to the detailed functions and mechanisms of the following services (although its structures can accommodate suitable data objects elsewhere specified):

- security functions and related services that are likely to be specified by users for data cards depending on their specific application, e.g. confidentiality protection, data integrity protection and authentication of persons and devices related to these functions;
- access control services;
- the initialization and issuing process (which begins the operating lifetime of an individual data card, and by which the data card is prepared for the data to be subsequently communicated to it according to this document).

Therefore, this document does not cover:

- physical or logical solutions for the practical functioning of particular types of data card;
- the forms that data take for use outside the data card, or the way in which such data are visibly represented on the data card or elsewhere.

2 Normative references

The following documents are referred to in the text in such a way that some or all of their content constitutes requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO/IEC 5218, *Information technology — Codes for the representation of human sexes*

ISO 21549-1, *Health informatics — Patient healthcard data — Part 1: General structure*

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