

OUTSIDE USE REPORT  
(PATIENTS WITH SIGNED CONSENT)  
All groups exempt HSO, GHC, CSA  
PCR60R1-C

Report	
REPORT-ID	CHAR(10)
REPORT-DATE	CHAR(10)
REPORT-NAME	CHAR(50)
REPORT-PERIOD-START	CHAR(10)
REPORT-PERIOD-END	CHAR(10)

GROUP	
GROUP-ID	CHAR(4)
GROUP-TYPE	CHAR(3)
GROUP-NAME	CHAR(75)

PROVIDER	
PROVIDER-NUMBER	CHAR(6)
PROVIDER-LAST-NAME	CHAR(30)
PROVIDER-FIRST-NAME	CHAR(20)
PROVIDER-MIDDLE-NAME	CHAR(20)

PATIENT	
PATIENT-HEALTH-NUMBER	CHAR(10)
PATIENT-LAST-NAME	CHAR(30)
PATIENT-FIRST-NAME	CHAR(20)
PATIENT-BIRTHDATE	CHAR(10)
PATIENT-SEX	CHAR(01)

SERVICE	
SERVICE-DATE	CHAR(10)
SERVICE-CODE	CHAR(5)
SERVICE-DESCRIPTION	CHAR(39)
SERVICE-AMT	DECIMAL(9,2)