

## InfoRMS

Grouping: v1.1.0BlockVote5

Sorted by: Key descending

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Key	Summary	Description	Resolution	Resolution Description
ER-193	<a href="#">PractitionerRole.code: Clarify which binding strength to use for terminology binding</a>	<p>Clarify PractitionerRole.code binding</p> <ul style="list-style-type: none"> <li>in StructureDefinition is PractitionerRoleCode (<a href="https://hl7.org/fhir/R4/valueset-practitioner-role.html">https://hl7.org/fhir/R4/valueset-practitioner-role.html</a>) (example)</li> <li>in Terminology page is PractitionerRoleCode (Extensible)</li> </ul> <p>Existing Wording: PractitionerRole.code .code binding is PractitionerRoleCode Example in StructureDefinition but Extensible in Terminology page Submitted By: Mark Fernandes, CHI</p>	Persuasive	<ul style="list-style-type: none"> <li>Use of example bindings not recommended. Example valueSets are largely illustrative and not instructive.</li> <li>Pan-Canadian Value Set will be added in August that leverages SNOMED CT for CACDI. We should look to align: <b>HealthcareProviderRoleCode</b></li> </ul> <p>Scope of valueset = The role of a person in a health related occupation.</p> <p>It is intensionally (logically) defined SNOMED CT-CA valueSet and includes sub-types of the following hierarchies:</p> <ul style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>healthcare professional</li> <li>person in the healthcare environment</li> <li>worker in religion</li> <li>supporting services personnel</li> <li>researcher</li> <li>care coordinator</li> <li>study coordinator</li> </ul> </li> <li>Use <b>preferred</b> binding</li> </ul>
ER-192	<a href="#">PractitionerRole.specialty: Clarify which valueSet and binding strength to use for terminology binding</a>	<p>Clarify PractitionerRole.specialty binding</p> <ul style="list-style-type: none"> <li>In StructureDefinition is PracticeSettingCodeValueSet (<a href="http://hl7.org/fhir/ValueSet/c80-practice-codes">http://hl7.org/fhir/ValueSet/c80-practice-codes</a>) (Preferred)</li> <li>In Terminology page is PractitionerSpecialty (<a href="https://tgateway.infoway-inforoute.ca/singlesubset.html?id=2.16.840.1.113883.3.239.12.38&amp;versionid=20191129">https://tgateway.infoway-inforoute.ca/singlesubset.html?id=2.16.840.1.113883.3.239.12.38&amp;versionid=20191129</a>) (Extensible)</li> </ul> <p>Existing Wording: PractitionerRole.specialty binding is PracticeSettingCodeValueSet (preferred) in StructureDefinition but PractitionerSpecialty (Extensible) in Terminology page Submitted By: Mark Fernandes, CHI</p>	Persuasive with Modification	<ul style="list-style-type: none"> <li>Terminology binding should align.</li> <li>Note that PractitionerSpecialty is not a published pan-Canadian valueset on our national terminology server. Link should be removed from Terminology page.</li> <li>PracticeSettingCode Valueset is based on HITSP C80 which is US centric and more importantly is not maintained to align to the terminology standard.</li> <li><b>HealthcareProviderSpecialtyCode</b> is under development by CIHI for the CACDI: This is a logically defined Pan-Canadian valueset slated for development and publication on our national terminology server with the August release of the SNOMED CT CA Edition</li> </ul> <p>It is intensionally (logically) defined SNOMED CT-CA valueSet and includes all sub-types under the hierarchy: Medical Specialty</p> <ul style="list-style-type: none"> <li>Use <b>preferred</b> binding</li> <li>This binding should be used for HealthcareService.specialty, Appointment.specialty</li> </ul>

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ER-189	<a href="#">Communication.category: change binding to CommunicationCategory valueSet to be extensible</a>	CommunicationCategory is a valueSet defined in CA:eReC ( <a href="http://fhir.infoway-inforoute.ca/io/CA-eReC/ValueSet/communication-category">http://fhir.infoway-inforoute.ca/io/CA-eReC/ValueSet/communication-category</a> ), and these codes shall be used to populate Communication.category Existing Wording: Communication.category binding to CommunicationCategory valueSet is example Proposed Wording: Communication.category binding to CommunicationCategory valueSet is extensible Submitted By: Mark Fernandes, CHI	Persuasive	<ul style="list-style-type: none"> <li>The binding strength should be informed by business rules when not dictated by the base standard, when deciding to use preferred, extensible or required. It should be driven by implementation considerations for optimized outcomes. Agreed with strengthening to what is appropriate for eReC implementation across CA.</li> <li>Use <b>extensible</b> binding</li> <li>"Example" bindings are not recommended as our goal is data standardization and interoperability.</li> </ul>
ER-188	<a href="#">Patient.contact.relationship has two value sets listed</a>	The Patient.contact.relationship has two value sets listed (ContactRelationship, PatientContactRelationship). Neither is the recommended pan-Canadian value set. CIHI is recommending <a href="https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype">https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype</a> Submitted By: Joanie Harper, CIHI	Persuasive	<ul style="list-style-type: none"> <li>Persuasive to align to CACDI (<a href="https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype">https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype</a>)</li> <li>Fix the Terminology page to only reflect the chosen binding</li> <li>Maintain <b>extensible</b> binding strength</li> </ul>
ER-186	<a href="#">CIHI is recommending the CIHI Language Codes value set as the Pan-Canadian valueset for this element</a>	CIHI is recommending the CIHI Language Codes value set as the Pan-Canadian valueset for this element Submitted By: Joanie Harper, CIHI	Not Persuasive with Modification	<ul style="list-style-type: none"> <li>Issues have been raised with ISO 639-3 - CIHI Language Codes. Currently CA:eReC is incorrectly bound to a jurisdictional subset HumanLanguages, and the base FHIR R4 binding to <a href="#">CommonLanguages</a> is proposed instead.</li> <li>Maintain <b>preferred</b> binding.</li> <li>Practitioner.communication.language (Not a MS element) should have the same binding</li> </ul>
ER-185	<a href="#">personalrelationshipproleptype is based on v3-PersonalRelationshipRoleType and will be translated in the future. Patient-contactrelationship contains roles rather than relationships.</a>	CIHI is recommending <a href="https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype">https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype</a> as the Pan-Canadian valueset for this element Existing Wording: The valueset for ContactRelationship is noted as <a href="http://hl7.org/fhir/ValueSet/patient-contactrelationship">http://hl7.org/fhir/ValueSet/patient-contactrelationship</a> Proposed Wording: <a href="https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype">https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype</a> Submitted By: Joanie Harper, CIHI	Persuasive	<ul style="list-style-type: none"> <li>Align to pan-Canadian valueSet (<a href="https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype">https://fhir.infoway-inforoute.ca/ValueSet/personalrelationshipproleptype</a>)</li> <li>given the valueset is published for CACDI and will be translated for CA use cases.</li> <li>Maintain <b>extensible</b> binding</li> </ul>
ER-183	<a href="#">Add payload examples that follow route/chain/split workflow</a>	Consider including payload examples that follow a route, chain and split workflow. Received a lot of feedback from vendors implementing v0.12.x version of the ON eReC IG. Having each of these workflows with example payloads to show how the various fields could be populated is useful to implementers. Submitted By: Matt Wellhauser, Amplify Care	Persuasive	Will add payload examples for each splitting and chaining scenarios in addition to routing (that exists currently).
ER-182	<a href="#">Business Events - Add notify-add-service-record &amp; notify-update-service-record to state machine diagram</a>	Consider including the 2 new message events (notify-add-service-record & notify-update-service-record) into a state machine diagram. Or some information about how they fit in the diagram. Submitted By: Matt Wellhauser, Amplify Care	Persuasive	<p>Below the Sharing Service Requests and State table – include a footnote for the notify-add-service-record &amp; notify-update-service-records events:</p> <ul style="list-style-type: none"> <li>The notify-add-service-record ServiceRequest.status aligns with the L1: Send, Receive, Revoke state machine diagram.</li> </ul>

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				<ul style="list-style-type: none"> <li>The notify-update-service-record will align with either the L1: [  https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events/L1-Send-Receive-Revoke.page.md?version=current] Send, [  https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events/L1-Send-Receive-Revoke.page.md?version=current] Receive, [  https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events/L1-Send-Receive-Revoke.page.md?version=current] Revoke or the L2: Shared Workflow Status state machine diagram. This will vary depending on if the focus is on the ServiceRequest or Task.</li> </ul>
ER-181	<a href="#">Add guidance on Copied Participants to referrals</a>	<p>Add a section for copied participants to referrals. Currently, you can CC another provider either when sending a referral or after submission. Guidance to how this is done, and messages get to those CC'd providers would be beneficial as this workflow exists in current state. Existing Wording: N/A Proposed Wording: N/A Submitted By: Matt Wellhauser, Amplify Care</p>	<i>Unresolved</i>	<p>Recommend to defer this until OH work on the following can be used to inform decision on use of messaging:</p> <ul style="list-style-type: none"> <li>end-to-end workflow for copied participants</li> <li>expected use of Source System, Target System, Central System and any brokers (i.e. PCCG) to support end-to-end workflow</li> </ul>
ER-173	<a href="#">Clarify use of eReCm-11 notify-update-service-record with ServiceRequest, Appointment and Task payloads</a>	<p>eReCm-11 notify-update-service-record allows for ServiceRequest, Appointment, and Task payloads. It is unclear how this message would be used in situations where a Task or Appointment on a split/chained/routed referral has been added or updated or if it even appropriate to use this message to update a service record when there referral-related tasks or appointment are created/updated.</p> <p>Updating service records when referral-related tasks and appointment are created/updated seems like it is overloading interactions between the eReC Informer and eReC Recipient, and it may be more straightforward for these actors to communicate progress related to the overall state of the ServiceRequest and leave task and appointment updates to the eReC Requester and eReC Performer.</p> <p>If notify-update-service-record is to be used with Appointment and Task payloads, please provide clear examples illustrating how and when this would be used in those situations and how it differs from messages such as</p>	Persuasive with Modification	<p>Sequence Diagrams in the guide provide examples of flows that use eReCm-11 notify-update-service-record to transmit Appointment information and status updates through the Informer / Recipient integration.</p> <p>L3: Advanced Workflows provides discussion of Sharing Appointment Information from Central Systems subject to feedback on <del>ER-103</del>.</p> <p>Agree that additional information is needed to clarify:</p> <ul style="list-style-type: none"> <li>why the <b>Informer / Recipient integration SHOULD be used</b> to transmit status updates and Appointment information for a referral from a Central System to a Source System</li> <li>how the <b>Requester / Performer P2P integration MAY potentially be used</b> to transmit Appointment information to Source Systems that don't support the Informer / Recipient integration</li> </ul> <p>In addition to the changes proposed in <del>ER-103</del> we will:</p>

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		notify-add-appointment, notify-update-process-request, etc. Submitted By: OH Standards, Ontario Health		<ul style="list-style-type: none"> <li>rework the "Role of Technical Actors" section on Central Intake in Point-to-Point to: <ul style="list-style-type: none"> <li>mention Appointment and Task in Central System: eReC Informer / Source System: eReC Recipient</li> <li>provide a note with link to the L3: Appointment page (potentially other sections)</li> </ul> </li> <li>add clarifications above to L3: Appointments</li> </ul>
ER-158	<a href="#">Practitioner.qualification.code: Using HealthcareProviderRoleType</a>	The value set is PractitionerQualification(Practitioner.qualification.code) but the value set is HealthcareProviderRoleType, qualification examples are diploma, certification etc but the value set indicated the providers role type. Existing Wording: PractitionerQualification Submitted By: OH Standards, Ontario Health	Considered for Future Use	<ul style="list-style-type: none"> <li>Collaborate with CIHI on developing a new standardised valueSet for pan-Canadian practitioner qualification codes</li> <li>Terminology binding to HealthcareProviderRoleType does not align to intended use of data element. Remove the link to HealthcareProviderRoleType from the Terminology page</li> <li>Existing pan-Canadian valueSet <a href="https://fhir.infoway-inforoute.ca/ValueSet/qualifiedroletype">https://fhir.infoway-inforoute.ca/ValueSet/qualifiedroletype</a> (SCPQUAL) has issues where the concepts represented seem to conflate service category as well as credentials and is not standards based.</li> <li>Use <b>preferred</b> binding.</li> </ul>
ER-155	<a href="#">FHIR Messaging: Provide definitive guidance for Canadian context</a>	Recommend providing a more definitive guidance/specification as regards to use of FHIR messaging beyond simply directing implementers to HL7 pages. For example, which HTTP result codes must be supported (e.g. 200, 202, etc.) to ensure interoperability. Providing examples of HTTP POST request and response would also help. The messaging specificaiton may also be included in the CA:FeX. Submitted By: Finnie Flores, Alberta Health	Considered for Future Use	We will include pan-Canadian FHIR Messaging guidance in the Reference Architecture specification. The content will first be developed in the CA:eReC CI build after v1.1.0-DFT is released. Once this content is ready, we will move it to Reference Architecture and link to it from CA:eReC.
ER-152	<a href="#">Chaining- add guidance on how to include additional supporting information from the Central System in a chained referral</a>	I don't believe the IG speaks to whether a chained referral can contain content that was not a part of the original referral. For instance, the referral is submitted to a CAT with some info, but the CAT then appends new information and/or completes the specialists customized referral form in order to forward/chain the referral to the specialist. Is this permitted, and if so, what responsibilities are there from the Central System/CAT to share that new info back to the sender? One particular business scenario that a POS system receives a referral from Ocean and then the CI users gather a lot of additional info about the patient and services required and what to forward/chain that referral from their POS to a community service with all of the additional info? This could be modeled as a	Persuasive with Modification	<p>Where Route, Chain, Split takes place all .supportingInfo should be reference from the child referral (ServiceRequest) in MessageHeader.focus.</p> <p>We will add the following to the page content for Routing &amp; Splitting as well as Chaining:</p> <p>The specification does not <b>require</b> that the .supportingInfo on a child request be the same as the information received for any scenario other than forwarding although that <b>might</b> be a business requirement on some or possibly all integrations.</p>

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		second QR resource or a new QR resource in the chained referral, but there is no guidance to the actors if this is permitted and if so, how this should be packaged up in the bundle. Submitted By: Yaron Derman, OceanMD		
ER-151	<a href="#">DocumentReference: add guidance on which ServiceRequest identifier to use when chaining/splitting</a>	for chaining and splitting, the DocumentReferences may be associated with the SR2 and not necessarily SR1. There should be some guidance on this page as to which SR identifier to include Submitted By: Yaron Derman, OceanMD	Persuasive with Modification	Where Route, Chain, Split takes place all .supportingInfo should be reference from the child referral (ServiceRequest) in MessageHeader.focus.  We will add the following to the page content for Routing & Splitting as well as Chaining:  The specification does not <b>require</b> that the .supportingInfo on a child request be the same as the information received for any scenario other than forwarding although that <b>might</b> be a business requirement on some or possibly all integrations.
ER-146	<a href="#">Business Events - TaskBusinessStatus is not reflected in state diagram</a>	many of the statuses listed in the BusinessStatus value set ( <a href="https://simplifier.net/CA-eReC/task-business-status-duplicate-2/~overview">https://simplifier.net/CA-eReC/task-business-status-duplicate-2/~overview</a> ) are not reflected in the state diagram Submitted By: Yaron Derman, OceanMD	Not Persuasive	The Task state machine diagram refers to Task.status states and transitions. The Task.status values are fixed and required by FHIR.  Task.TaskBusinessStatus is meant to be more fine-grained and implementation-specific. It pulls from an extensible valueSet, where implementers can add codes if they are not available in the pan-Canadian valueSet, and it is up to implementers on how they choose to relate a Task.status to a Task.BusinessStatus.
ER-118	<a href="#">Clarify eReC Informer and eReC Recipient Maturity Level - L1 rather than L3</a>	I think the eReC Informer and eReC Recipient maturity level should be 'L1' rather than 'L3' since there aren't multiple levels for those actors Submitted By: Yaron Derman, OceanMD	Persuasive with Modification	Agree that there are not multiple levels of eReC Informer, eReC Recipient actors.  We will change from L3 to None to be consistent with Actor Options
ER-114	<a href="#">Business Events - Restructure eReferrals vs eConsults page</a>	this page would benefit from a new title (the page talks about eConsults, not ' eReferrals vs eConsults'). it is a collection of items related to eConsult, but could benefit from a more structure approach. It would also be helpful to include how to distinguish whether a payload belongs to an eReferral or eConsult on this page Submitted By: Yaron Derman, OceanMD	Persuasive with Modification	<ol style="list-style-type: none"> <li>1. Update title page title to eConsult</li> <li>2. Include another row in the Trigger Events &amp; Interactions table that covers the use case of a Requester indicating that the eConsult is completed</li> <li>3. Include hyperlinks to sections with other eConsult content: <ol style="list-style-type: none"> <li>1. Business Rules – eConsult [ <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Rules.page.md?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Rules.page.md?version=current</a>] Business [ <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Rules.page.md?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Rules.page.md?version=current</a>] Events</li> </ol> </li> </ol>

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				<p>2. Sequence Diagrams – Consultation Request</p> <p>From Ocean feedback: "It would also be helpful to include how to distinguish whether a payload belongs to an eReferral or eConsult on this page" this relates to ER-41.</p> <p>To defer distinguishing eConsult payloads feedback.</p>
ER-112	<a href="#">Business Rules - Requisition/Multiple Connected Referrals section difference from guidance on Splitting</a>	<p>is this different than splitting? if so please provide more info to explain the difference</p> <p>Submitted By: Yaron Derman, OceanMD</p>	Persuasive	<p>Remove the Requisition/Multiple Connected [ <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Rules.page.md?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Rules.page.md?version=current</a>] Referrals section</p> <p>This information is now outdated since the inclusion of Route/Chain/Split content.</p>
ER-110	<a href="#">Centralize Routing, Chaining, Splitting guidance within a single place</a>	<p>the guidance for routing, chaining, splitting should be centralized in a single place in the IG to ensure implementers don't miss anything, especially because it is so complex.</p> <p>Submitted By: Yaron Derman, OceanMD</p>	Not Persuasive with Modification	<p>This requires a complete restructuring of the IG and all it's related content. An alternative approach is to use hyperlinks to connect the content that is spread out in the IG about R/C/S content.</p> <p>I.e.,</p> <ul style="list-style-type: none"> <li>• The L3 Advanced Workflows page has hyperlinks to R/C/S Messaging and UC-03 Referral to a CI pages</li> <li>• R/C/S Message page has a hyperlink to L3 Advanced Workflows and UC-03 Referral to a CI pages</li> <li>• UC-03 Referral to a CI has hyperlinks to L3 Advanced Workflows and R/C/S Messaging pages</li> </ul>
ER-109	<a href="#">Remove duplicate 'source of truth' statements under Business Models and Business Rules</a>	<p>some of the 'source of truth' statements have been added to <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Models/Point-to-Point-Model.page.md?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Models/Point-to-Point-Model.page.md?version=current</a>. Suggestion to have a 'single source of truth' for this information in the iGuide 😊 likely on this page and remove from the other one.</p> <p>Submitted By: Yaron Derman, OceanMD</p>	Not Persuasive with Modification	<p>The content on the 2 pages is different. The Point to Point [ Model page <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Models/Point-to-Point-Model.page.md?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Models/Point-to-Point-Model.page.md?version=current</a>] has specific Source of Truth information that is more generalized than the content on the Business Rules – Source of Truth section. This information should be kept on the relevant page to highlight the differences.</p> <p>The Business Rules page – Source of Truth section should have a hyperlink to the Point to Point Source of Truth sections.</p>
ER-108	<a href="#">Remove "Handling Clinical Resources.." section from Business Rules</a>	<p>consider whether the "handling clinical resources" section is necessary since some of the guidance is now provided (duplicated?) in the <a a="" be="" can="" conformant="" fhir="" href="https://simplifier.net/guide/Pan-&lt;/a&gt;&lt;/p&gt; &lt;/td&gt; &lt;td&gt;Not Persuasive with Modification&lt;/td&gt; &lt;td&gt; &lt;p&gt;1. Remove " implementation="" implementation<="" more="" one="" p="" specific="" than="" with=""> </a></p>		

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		Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events/L1-Attaching-Supporting-Information.page.md?version=current page Submitted By: Yaron Derman, OceanMD		guide" at the start of the last paragraph of the section.  2. Update/reword: " The intention is that the clinical resources will be profiled in the future releases of eReferral implementation guide.  3. Add a hyperlink to L1: Attaching Supporting Information page
ER-95	<a href="#">Move events from L1: Attaching Supporting Information to L2/L3</a>	I find it confusing that there are two L1 page if both of them contain 'SHALL' components. Some of the 'supporting info' events seem to me to be 'advanced' and should be part of L2 or L3 e.g. changes content of the binary attachment and/or you should specify it is only for the CAT model implementers Submitted By: Yaron Derman, OceanMD	Persuasive	Add clarifying language on the "Detailed Capabilities by System Level" table (link), alongside adding the specific capability level within the sub-pages in the "Trigger Events & Interactions" table (link).  1. Add to the main Business Events Page: <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events?version=current</a> On the parent page for Business Events, modify the table "Detailed Capabilities by System Level" table by adding: Send, Receive, Revoke (L1) Attaching Supporting Information (L1+L2)  Rename "System Levels" column header to "Capability Levels".  2. Add to the sub-pages such as: <a href="https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events/L1-Attaching-Supporting-Information.page.md?version=current">https://simplifier.net/guide/Pan-Canadian-eReferral-eConsult-CA-eReC-iGuide/Index/Business-Context/Business-Events/L1-Attaching-Supporting-Information.page.md?version=current</a> Under the sub-pages, address the gap in the tables to include the capability level associated with the message event. add-service-request (L1)