Calterio ID	Conditional	Bertie	Trota	Davidation	Postalla	Profession scontinue editoris
Infrastructure	Tensiona	Process	I IIO	1 Metally (1991)		Tomornia aceptains unem
	1 NO	Infrastructure	Time synchronization	It is mandatory to have a time synchronization mechanism (e.g. NTP, Chrony,) installed on hosts which access the backen sendres of Baimburgement/BID	d The participant shall describe and sign a statement that either within the software, or on each OS/computer where the software is or will be installed, a time synchronization system is used.	Time-synchronisation on systems connecting to the backend services shall be in place. Participant need to be provide valid evidences as requested in test plan Reimbursement/PID.
	2 NO	Infrastructure	Management of etealthid	ethealthid identifier storage and assignment in the application. The application must ensure the appropriate linkage between the user of the costern and his health renfectional identifier.		Secure management of ethealthiD shall be ensured. Participant need to provide valid evidences as requested in test plan Neimbursement/PID.
	3 NO	Intrastructure		the user of the system and his health professional identifier.	The participant shall describe how the application is dealing with the second user ensuring management. The participant shall describe how the security of the private key and keystore are managed on the system and within the application.	Secure management or enterating small de ensured. Participant need to provide valid experious as requested in test plan membrusement/PID. Secure management and access to private key and keystore shall be ensured. Participant need to be provide valid evidences as requested in test plan Reimbursement and PID.
Authentication	3 NO	Infrastructure	Secure storage and restricted access to private key	The storage and access to the private key for the signature and mTLS (where requested) must be restricted	application.	
	4 NO	Authentication	Secure authentication using eSanté platform IdP service	Authentication of health professional at the eSanté Platform backend.	The participant need to provide evidences to securely authenticate health professionals at the eSanté platform backend.	Successful implementation of the authentication process following the specification "Reimbursement-PID MySecu Integration Guide" and provision of relevant evidences
	5 NO	Authentication	WS-Security Authentication MySecu	Authentication to MySecu platform backend in order to access business services.	The participant need to provide evidences to securely authenticate users using eSanté platform token at the MySecu platform harbond.	Successful implementation of the authentication process following the specification "Reimbursement-PID MySecu Integration Guide" and provision of relevant evidences
	6 NO	Authentication	GP Code verification	As a professional healthcare you should have a GP code	backing.	Secondal implementation of the unherication process following the sportfaction "Neinburners PD Mylacu Integration Guide" and provision of relevant evidences reposted in that juli herinburners (PD to prod. Secondal implementation of the submersioning process following the sportfaction "Neinburners PD Mylacu Integration Guide" and provision of relevant evidences reposted in that juli herinburners (PD There are QD Code, part all her facility.
Reimbursement	7 NO	Baimhursamant	Transfer of a paid Memoire d'honoraires to CNS	The system shall be able to transfer structured MH document to CNS. This case concerns a paid MH.		It make a now Cook, open with previous. Successful implementation of the transmission of the Memoire d'honoraines, following the specification provided by CNS for Reimbursement and provision of relevant evidences recounted in test claim Reimbursement/DD.
						requested in test plan Reimbursement/PID.
	8 NO	Reimbursement	Transfer of an unpaid Memoire d'honoraires to CNS	The system shall be able to transfer structured MH document to CNS. This case concerns an unpaid MH.		Successful implementation of the transmission of the Mamoire Chomossine, following the sponfactor provided by CMS for Reimbursoment and provision of relevant evidences requested in total plan fembursoment (PIC).
	9 NO	Reimbursement	Transfer of a 2-pages Memoire of honoraines to CNS	The system shall be able to transfer structured MH document to CHS. This case concerns a MH consisting of at least 2 pages		Successful implementation of the transmission of the Memore d'honories, following the specification provided by CDG for Reimbursment and provision of relevant evidences requested in total plan Reimbursment/PD.
	10 YES	Reimbursement	Transfer of a dentick's Memoire d'honoraines to CKS, with dental position and suffix (for dentict solution only	The system shall be able to tourier structured Mri document to CNS. This case concerns a Mri containing at least a code with durint position and a code with suffix.		Sociated inglimentation of the transmission of the Memore chances to be specification provided by CNS for Reinbursones and provises of releast evidence respected in lost july North-Learnes (PC).
	11 NO	Reimbursement	Transfer of a Mémoire d'honoraires to CNS, for a patient <u>without</u> a Luxembourgish registration number (matricule)	The system shall be able to transfer structured Mrf document to CNS. This case concerns a Mrf for a patient who doesn't have a Luxembourgish registration number.		Successful implementation of the transmission of the Memoire channelses, following the specification provided by COS for Reimbursment and provision of relevant evidences requested in total plan Reimbursment/P.D.
	12 NO	Reimbursement	Transfer of a Mémoire d'honoraires to Clid, containing an additional information (code 000)	The system shall be able to brander structured Mrl document to CKS. This case concerns a MR that contains an additional information (complement d'information) with code COS.		Successful implementation of the transmission of the Memoire d'Amoraine, following the specification provided by COS for fainburnment and provision of relevant evidences requested in test plan Namionarement,Pro.
	13 NO	Reimbursement	Integrate the webservices responses	The system shall be able to integrate the eventual errors (anomalies) returned by CNS and display them to the user (health professional)		Participant needs to provide evidence to prove the implementation of the requested functionality (e.g. print screens, logs, sent and received XMLs)
	14 NO	Reimbursement	Cancelation of the MH formerly uploaded (type 1)	The system shall implement functionality to allow the cancelation of MH document which was uploaded formerly, without submission of a replacement document.		Successful implementation/provision of the requested functionality, following the specification provided by CNS for Reimbursement and provision of relevant evidences requested in test plan Reimbursement/PID.
					Conditionally the participant may provide this functionality, where a new MH is provided and a formation and a	
	15 YES	Reimbursement	Cancelation of the formerly uploaded MH with submission of new MH (type 2)	reference of the replacement document included in the cancelation request.	Conditionally the participant may provide this functionality, where a new MH is provided and a formerly provided MH will be canceled. The reference of the new MH is included in the cancelation request.	If implemented, participant shall successfully implement this functionality by following the specification provided by CNS for Reimbursement and provision of relevant evidences requested in test plan Reimbursement/PD.
	16 NO	Reimbursement	Provide MH transfer reporting	Provide periodically to the health professional, in a reliable and traceable way, an overview about how many Mft have been exchanged electronically with the CNS over a certain time interval (e.g. monthly)	The participant shall provide to the user (health professional) any mean/functionality which will allow him to regularly get an own-view (e.g. Dashboard/reportineg) about the numbers of MRI being exchanged with the CNS, within a time interval (e.g. monthly); The way/find of implementation provided, is participants decision.	Purisipant exects to provide salid evidences as requested in test plan flaminuments (PIC), to proof implementation/provides of the requested functionality.
	17 NO	Reimbursement	PDF management	The system shall be able to manage the generated PDF returned from eConnector		Participant needs to provide evidence to prove the implementation of the pdf functionality (pdf generated by the eConnector, print screens)
PID						
	18 NO	PID	Transfer of Memoire d'honoraires to CNS for simulation	The system shall provide functionality in compliance to specification to transfer MH to perform simulation and process the simulation response.		Successful implementation of the MM transfer for simulation following the specification "PID - Documentation technique pour les industriels" and provision of relevant evidences requested in test plan Reimbursement/PID.
	19 YES	PID	Transfer of a dentist's Memoire d'honoraires to CNS for simulation, with dental position and suffix (for dentist	The system shall provide functionality in compliance to specification to transfer MH to perform simulation and process the		Successful implementation of the MH transfer for simulation following the specification "PID - Documentation technique pour les industriels" and provision of relevant evidences requested in test of an Reimbursement/PID.
			Send validation for simulation response of transferred MH, with a reference of payment from the health	ammuseum response. The system shall provide functionality in compliance to specification to send a validation request related to the simulation.		requested in teaching management of the Mrt wildation process following the specification "PID - Documentation technique pour les industriels" and provision of relevant evidences
	20 NO	PID	professional	response, in case the simulation response is accepted by the health professional.		requested in test plan Reimbursement/PID
	21 NO	PID	Display rejection reasons ("motif anomalie") sent by the simulation response at line level ("LigneUTARetour")	In case of a rejected simulation, the system shall display to the user (health professional) the details of the rejection reasons sent by CNS in the simulation response (at the line level)	If the simulation was rejected, the user (health professional) needs to see the reasons behind the rejection, that are detailed line by line (for each code).	Participant needs to provide evidence to prove the implementaion of the requested functionality (e.g. print screens, logs, sent and received XMLs)
	22 NO	PID	Receive error code after trying to send the validation of an expired simulation response	The system should not be able to send the validation for an expired simulation response (10 min timeout). An error should appear on the screen of the user.		Participant needs to provide evidence to prove the implementation of the requested functionality (e.g. print screens, logs, sent and received XMLs)
	23 NO	PID	Send challenge request for simulation response of transferred MH	The system shall provide functionality in compliance to specification to send a challenge request related to the simulation response, in case the simulation response is not accepted by the health professional.		Successful implementation of the challenge process following the specification "PID - Documentation technique pour les industriels" and provision of relevant evidences requested in test plan fielindurisment/PID.
	24 NO	PID	Provide MM transfer reporting	Provide periodically to the health professional, in a reliable and traceable way, an overview about how many MH have been exchanged electronically via PID with the CNS over a certain time interval (e.g. monthly)		Participant need to provide valid evidences as requested in test plan Rembursement/RD, to proof implementation/provision of the requested functionality.
0	25 NO	PID	Print MH layout including a personal convenience code (CP)	The system shall be able to print the MH in compliance to the PID layout specification and include in the test at least one Of (personal convenience) code.		Participant needs to provide evidence to prove the implementation of the requested functionality (e.g. generated pdf of the MH)
Executoric 2/dustrie	26 NO	Electronic Signature	Integration of the electronic signature on standardized formulas	The mandatory electronic signature aims to uniquely identify the M/MD who performed the act or service or issued a	The industrial needs to provide evidences of a secure and digital signature of the standardized formula in order to identify the M/MO.	Successful Implementation of the electronic signature on standardized formulas as required in the DSR. (cf. page 16 Point 3.4)
	dical d'incapacité de trav		discriment du travail (DMCMAL)*	standardized formula.	M/MD.	A series and a ser
	27 NO	CIT / DMCMAL	Transfer of a CIT to CNS with a two digits diagnostic code.	The eyotem shall be able to transfer a disochard CTI document to CKI. This case concerns a CTI with a two digits diagnostic code.	The system shall be able to transfer a triustand CTI discounter to CHI, including weapper component. It is pass the Visit following instructions must be requested: """""""""""""""""""""""""""""""""""	Secondal information of the transmission of the CT, following the specification provided by CDS. Solive provision of relevant evidences is requested: - While that information: - Constant ADE Lowershold () of the implemented input science()
	28 NO	CIT / DMCMAL	Transfer of a CIT to CNS with an KID-30 code.	The system shall be able to transfer a structured CIT document to CNS. This case concerns a CT with an KD-10 code of the current KD-10 romenclature used as diagnostic.	The years will be able to traceler an abstracted CR document LOCK, including wapper component. To you are from the (including wappers component.) warpper components. "Materialized" and "priesed" must be completed components. "Materialized" and "priesed" must be completed components. "Including "must be completed components "Indicating" must be completed CR Dock must be commissed; prieses used has whan "DT-S" ("codencitity")	Successful implementation of the transmission of the CT, following the specification provided by CMS. Below provision of relevant evidences is requested: - New worth of Committee: - received MS, - re
	29 NO	CIT / DMCMAL	Transfer of a CIT to CNS for a patient <u>without</u> a Lovenbourgish registration number (matricular).	The system shall be able to trender a discribured CTI document to CKS. This case concerns a CTI for a partner <u>watching</u> a Leaembourgish registration number (metricula).	The plane wall be able to some or account OT document to CMs, including wagger component. The part of the loss (intermed) improvements and the composite of th	Secondal implementation of the transmission of the CT, following the specification provided by CMS. Below provision of interest evidences is requested: - White will be a secondary of the contract of the co
	30 NO	CIT / DMCMAL	Transfer of a CIT to CNS with an accident number.	The system shall be able to trainfer a dructured CF document to CVS. This case concerns a CT related to an accident whose accident's number is known.	The system had be able to transfer a structured CII document to CNI, including wapper component. To pas the fate, following instructions must be respected: weaper components: "festimatains" and "plaster" must be completed document content. "Journal plaster" and "plaster" must be completed document content. "Journal plaster" and "plaster" must be completed document content. "Including was be completed document "humanizacionis" must be completed document "humanizacionis" must be completed document to the complete document to the complete document to the complete document to CNI, including wapper component.	Sozzada inglementation of the transmission of the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, what is Advancated: - XNA, what is Advancated: - XNA, which is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, what is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, what is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, which is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, which is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, which is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested: - XNA, which is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested XNA, which is Advancated in the CT, following the specification provided by CNS. Below provision of relevant evidences is requested XNA, which is Advancated by CNS. Below provision of relevant evidences in the CNS XNA, which is Advancated by CNS XNA, which
	31 NO	CIT / DMCMAL	Transfer of a CIT to CNS with an accident date.	The system shall be able to transfer a structured CIT document to CKS. This case concerns a CIT related to an accident whose accident's number is writness.	To pass the test, following instructions must be respected:	Secondal implementation of the transmission of the CT, following the specification provided by CXS, below provision of relevant evidences is requested: review SMS, of the implemented input covere(s) review SMS, of the implemented input covere(s)
	32 NO	CIT / DMCMAL	Transfer of a CTI to CMS related to a specific case.	The system shall be able to transfer a structured CIT document to CVG. This case concerns a CIT related to a specific case: CLest 1: Convention disordensing or demonstraping progress. CLest 2: Conput transjeart (plane manner transjeart lests than 3 months ago CLest 3: Depart transjeart (plane manner transjeart lests than 3 months ago CLest 3: Pattern (hospital continuous) of 7 or select on the date of the certificate	The system shall be able to transfer a structured CIT document to CNS, including wrapper component. To pass the text, Globiewing instructions must be respected: - wrapper components "destination" and "patient" must be completed - document content. "document, direnal" must be completed	Successful inspirementation of the transmission of the CT, following the specification provided by OSS below provision of relevant evidences is requested: - MAN, with the discensaries - Constant MAI. - successful MAI. - successful MAI. - successful MAI.
	33 NO	CIT / DMCMAL	Transfer of a CIT to CNS related to the intervention of a third party.	The system shall be able to transfer a structured CII document to CNS. This case concerns a CIT related to the intervention of a third party (e.g. physical violence, traffic accident, deg bits, etc.).	-composers "indicat" must be completed commonant "indicat" must be completed commonant "indicat" must be completed for pass the Net, following instruction must be registred: for pass the Net, following instruction must be registred: -composer composers indicated and passing the route be completed -discount content forcement, element must be completed -discount content forcement, element must be completed -discount content forcement, element must be completed	Successful implementation of the transmission of the CT, following the specification provided by CMS. Indice provision of relevant evidences is requested: - 2004, settle st-Commission - received DMS. - received DMS. - received DMS.

	34 NO	CIT / DMCMAL	Cancelation of the CIT formerly uploaded (type 1).	The system shall implement functionality to allow the cancelation of CIT document, which was uploaded formerly, without submission of a replacement document.		Science for implementation of the transmission of the CT, following the specification provided by CHS. Below provision of relevant evidences in requested: - Review Man Common C
	35 YES	CIT / DMCMAL	Cancelation of the formerly uploaded CIT, type DMCMAL, with submission of new CIT (type 2).		Conditionally the participant may provide this functionality, where a new CIT is provided and a formerly provided CIT will be canceled. The reference of the new CIT is included in the cancelation request.	If implements, participant shall successfully implement this functionality by following the specification provided by CNS and provision of relevant eudences requested: - No. Mark and Laconomies - reviewed MAI - revi
	36 YES	CIT / DMCMAL	Provide the ability to enter any ICD-10 code as a diagnostic.	The system shall give the ability to the user (health professional) to enter any ICD-10 code as a diagnostic.		Successful implementation of the transmission of the CTI, following the specification provided by CNS. Below provision of relevant evidences is requested: -screenshot(s) of the implemented input screen(s) / search engine
	37 NO	CIT / DMCMAL	Provide the ability to define a number of diagnostic codes as favorites	The system shall give the ability to the user (health professional) to define a number of diagnostic codes, two digits codes or ICD-30 codes, as fevorites.	The participant shall provide to the user (health professional) any mean/functionality which will allow him to define a number of diagnostic codes, two digits codes or KCD-ID codes, as favorities to that he can easily and quickly find the diagnostic codes he uses most often when resting a CTL him way light of implementation provided is participant decided in participant decided.	Participant needs to provide valid evidences to proof implementation/provision of the requested functionality (print screens).
	38 YES	CIT / DMCMAL	Prohibit sending a CIT with an incapacity for work end date prior to the incapacity for work start date.	The system shall prohibit sending inconsistent data.		Successful implementation of the transmission of the CTT, following the specification provided by CNS. Below provision of relevant evidences is requested: - screenshot(s) of the implemented input screen(s)
CIT - Requirements specific to type "Certificat méd	lical de consé pour raison	s familiales (DMCRFI*				
	39 NO	CIT / DMCRF	Transfer of a CIT to CNS for a patient (minor child) with a Luxembourgish registration number (matricule).	The system shall be able to transfer a structured CIT document to CNS. This case concerns a CTT for a minor child patient <u>with</u> a Luxembourgish registration number (matricule).	The system shall be able to transfer a structured CT document to COC, including wapper component. To pass the best, (blobing instructions must be recepted as) are responsed and as	Successful implementation of the transmission of the CT, following the specification provided by CNS. Moles provision of relevant evidences is requested: - 2004, set for the Commentor - received SNS. - covered SNS. - covered following the implemented input screen(s)
	40 NO	CIT / DMCRF	Transfer of a CT to CNS for a patient (minor child) without a Luxembourgish registration number (matricule).	The system shall be able to transfer a structured CIT document to CNC. This case concerns a CIT for a minor child patient <u>settloud</u> a Luxembourguin registration number (matricule).	The system shall be able to transfer a structured CT document for CK, richarding wargeer component. To great the task, Globing instructions must be recepted to; are reported to; are reported to the component described with a recepted to the component of the co	Suzzanda implementation of the transmission of the CT, following the specification provided by CNS, Solver provision of relevant evidences is requested: - NAS, with the Accimentation - reviewed SNS - covered-body (of the implemented input sciences)
	41 NO	CIT / DMCRF	Transfer of a CIT to CNS intented for a parent <u>with</u> a kasenthourigish registration number (matricula).	The system shall be able to transfer a structured CIT document to CNS. This case concerns a CIT intented for a parent with a Luxembourgish registration number (matricule).	The system what has add to strongle as contained CT document to CK, whiching wapper component. To pass to these, following controlscens tends the represent placement's personnel data wapper component "destination" must be completed with parently personnel data and provided the component to the completed of the personnel data chapter document component "destinationing" must be completed with the Leuenbourghin registration number (materials) of the parent. Lead into the same are destinated, after must be completed.	Successful implementation of the presentation of the CT, following the specification provided by OCS, below provision of relevant evidences is requested: - Note: We the Comments - content SNS. - content SNS. - content SNS.
	42 NO	CIT / DMCHF	Transfer of a CIT to CNS intented for a panent <u>without</u> a Luxembourgish registration number (matricule).	The system shall be able to transfer a structured CT document to CNS. This case concerns a CT intented for a parent <u>authors</u> a Learnthouspik registration number (protoscale).	The system half be able to trout's a structured of Securines to A. education support component. To grave the set, following intervention and the completed of the property of the structure and the securine and the completed with parenty parented data. "support component" prefer from the completed with parenty in three childly parented data. "deciment content" structured from the Completed of the structure of the structure and the structured of the structure of the structured of the structure	Sociated implementation of the transmission of the CT, following the specification provided by CMS, Solive provision of relevant evidences is requested: - NAML with the Commission Commission CT Commiss
	43 NO	CIT / DMCRF	Transfer of a CIT to CNS related to an extension (proregation).	The system shall be able to transfer a structured CIT document to CNS. This case concerns a CIT related to an extension (pronogation).	The system shall be able to transfer a structured Cff document to CKS, including wapper component. To pask the feet, following instructions must be recepted:	Sociated implementation of the transmission of the CTI, following the specification provided by CRS. Solves provision of interior evidences is requested. - recorded to CRS. - recorded to CRS recorded to purchase depart covered to
CIT - Recurrements specific to type "Certificat midd	44 NO	CIT / DMCRF	Transfer of a CIT to CNS related to an hospitalization (hospitalization).	The system shall be able to transfer a structured CIT document to CNS. This case concerns a CIT related to an hospitalisation [hospitalisation].	The system shall be able to transfer a snuctured CT document to CO, including warpper component. To pass the test, Globing instructions must be respected ; warpper component "destinatarie" must be completed with perent's personal data warpper component "posterin" must be completed with minor child's personal data document content "document, direct" must be completed document content if document, direct" must be roughleted	Successful implementation of the transmission of the CT, following the specification provided by CXS. Notice provision of relevant evidences is requested: - 2004. set for Accimentar - received XMS. - convenient of the implemented input screen(s)
CIT - Requirements specific to type "Certificat med	tical de conge maternite (l	DMCMAT)*			The system shall be able to transfer a structured CIT document to CNS, including wrapper component.	
	45 NO	CIT / DMCMAT	Transfer of a CIT to CNS for a patient with a Luxembourgish registration number (matricule).	The system shall be able to transfer a structured CII document to CNS. This case concerns a CIT for a partient with a Luxembourgish registration number (matricule).	To pass the text, following instructions must be respected: wasper components "destinative" and "patient" must be completed bed document component "destinative" and "patient" must be completed becument content "document, informati" must be completed becument content "document, informati" must be completed becument content "document, informati" must be completed	Sociated implementation of the transmission of the CTI, following the specification provided by CHI. Below provision of relevant endersors in requested: - Received DMI. - Rec
CIT Garante Bansinsmants	46 NO	CIT / DMCMAT	Transfer of a CIT to CNS for a patient <u>without</u> a Luxembourgish registration number (matricule).	The system shall be able to transfer a structured CIf document to CNS. This case concerns a CIT for a parises <u>without</u> a Learnbourgeh negativation number (instricted).	The system shall be shift to troutine a forticated CR document to CR, including vargaer component. To grave the said, following inclinations must be reprinted — surprise components. "surprise components "discinitation" and "prisent" must be compited — —agent document components "featurisations" and as territy —discinitation ("common discinitation" can be compited — —discinitation ("common discinitation" can be compited — —discinitation ("common discinitation" can be compited or —discinitation ("common discinitation" can be compited or —discinitation ("common discinitation" can be compited or —discinitation ("common discinitation") can be composed to —discinitation ("common discinitation") can be composed to —discinitation ("common discinitation") can be composed to —discinitation ("common discinitation") can be considered to —discinitation ("common discinitation") can be considered to —discinitation ("common discinitation") can be considered to —discinitation ("common discinitation") can be —discinitation (Socience of implementation of the transmission of the CT, following the specification provided by CMS. Below provision of relevant evidences is requested: - ARIS, we first a Commention - Provided SMS. - Prov
				Provide periodically to the health professional, in a reliable and traceable way, an overview about CIT(s) that have been	The participant shall provide to the user (health professional) any mean/functionality which will allow him to regularly get an	
	47 NO	CIT	Provide CIT transfer reporting to the user.	Provide periodically to the health professional, in a reliable and traceate way, an overview about CIT(s) that have been exchanged electronically with the CNS over a certain time interval (e.g. monthly). Provide to the health professional, in a reliable way, an information about CIT that have been successfully exchanged.	overview (e.g., Dashboard/reporting) about the CI's being exchanged with the CNS, within a time interval (e.g. monthly). The waw filled of irrobiementation croxided, is cardioaants decision. The cardioaant hall crowde to the user flexibility contributional and mean/functionality which will allow him to verify that the CIT.	Participant needs to provide valid evidences to proof implementation/provision of the requested functionality (sent / received XMS, print screens).
	48 NO	сіт	Provide an information to the user in case of a CIT successfull transfer.	electronically with the CNS.	is being exchanged properly with the CNS. The way/kind of implementation provided, is participants decision.	Participant needs to provide valid evidences to proof implementation/provision of the requested functionality (sent / received XXMLS, print screens).
	49 NO	CIT	Provide an information to the user in case of a CT transfer failure. Provide a warning message to the user asking him to print and give the PDF version of the CIT to the patient.		The participant shall provide to the user (health professional) any mean/functionality which will allow him to notice that the CTI is not being exchanged properly with the CNS. The way/fain of implementation provided, is participants decision. The participant shall provide to the user (health professional) any mean/functionality which will allow him to notice that the	Participant needs to provide valid evidences to proof implementation/provision of the requested functionality (sent / received XMLS, print screens of the error message).
	50 NO	сіт	Provide a warming missage to the user asking him to print and give the PDF version of the CIT to the patient, (or parent in case of CRF) when the recipient of the CIT doesn't have a Luxembourgish registration number (matricule).	Provide to the health professional, in a reliable way, the need to print and give to the patient (or parent in case of CRF) the PDF version of the CT when the recipient of the CT doesn't have a Luxembourgish registration number (matricule).	The participant shall provide to the user (health professional) any mainryfunctionality which will allow him to notice that the PDF version of the CT has to be printed and give the patient (or parent in case of CRF) when the recipient of the CT doesn't have a Luxemboursish resistation number (matricule).	Participant needs to provide valid evidences to proof implementation/provision of the requested functionality.