

— CHAPTER 02 · FOUNDATIONS · BEAT 1 — OPEN THE BOX

# Every FHIR resource has the same *skeleton*.

By the end of this chapter you will name the six anatomical parts every FHIR resource shares, tell extension apart from modifierExtension — and know why one of those can break clinical safety — and never again confuse id with identifier.

## Learning goals

- Six anatomical parts
- extension vs modifierExtension
- id vs identifier

## — CONCEPT · ANATOMY

# Six anatomical parts — then the clinical content.

Every FHIR R4 resource — Patient, Observation, Encounter, all hundred and fifty of them — opens with the same six fields. Memorize these and you can read any FHIR resource on first sight.

## ● 1 · IDENTITY

**resourceType**

The type tag. Patient, Observation, Encounter — tells every parser what shape to expect.

## ● 2 · IDENTITY

**id**

Server-assigned logical key. Opaque. Lives in the URL: /Patient/abc-123.

## ● 3 · PROVENANCE

**meta**

versionId, lastUpdated, profile, security, tag — metadata about the resource itself.

## ● 4 · HUMAN

**text**

XHTML narrative. The human-readable safety net every clinician trusts.

## ● 5 · EXTENSIBILITY

**extension**

Adds locale, specialty, payer fields the core spec deliberately omits.

## ● 6 · MUST-UNDERSTAND

**modifierExtension**

Same shape — but CHANGES meaning. Ignore one you do not understand and you misread the resource.

## ● THEN · DOMAIN

**name, gender, birthDate ...**

The actual clinical content. Different per resource type. Patient has name; Observation has value.

## ● MENTAL MODEL

**Skeleton + organs**

Six bones are universal. Organs are domain-specific. Same skeleton; different organs.

— CONCEPT · NARRATIVE · TEXT

# Every resource carries a clinician-readable paragraph.

The text element is a chunk of XHTML — wrapped in `<div xmlns="http://www.w3.org/1999/xhtml">` — that renders the resource as prose a doctor can scan. If the structured data and the narrative disagree, that is a patient-safety incident.

— PATIENT.TEXT · EXCERPT

```
"text": {  
  "status": "generated",  
  "div": "<div xmlns=\"http://www.w3.org/1999/xhtml\"><p><b>Peter James  
Chalmers</b>, male, born 1974-12-25, MRN 12345.</p></div>"  
}
```

Servers render the div; clients display it verbatim. Always render the narrative — clinicians trust it before they trust your structured fields.

## text.status — four values

● generated — derived from structured data

● extensions — includes extension data

● additional — info NOT in structured

● empty — no narrative

— CONCEPT · CONTAINED · THE EXCEPTION

# Inline a whole resource — only when it has no independent life.

contained[] holds resources that have no independent existence on the server. No URL of their own. Referenced locally with a #fragment. The rule of thumb — almost never use it.

— CAN-BE · INLINE VIA CONTAINED

## One-off context · no independent existence

A visiting consultant Practitioner attached to a single Observation. Not in your directory. Will never be referenced again.

```
"contained": [{ "resourceType":  
"Practitioner", "id": "prac1", "name": [...] }],  
"performer": [{ "reference": "#prac1" }]
```

● contained can't be searched

● contained can't be referenced elsewhere

— SHOULD-BE · USE A REFERENCE

## Anything with a chance of independent existence

Real Practitioners, Organizations, Locations — make them first-class server resources and reference by URL.

```
"performer": [{ "reference":  
"Practitioner/abc-123" }]
```

● Reference — deep dive in Ch 3

— CONCEPT · EXTENSION · THE ESCAPE HATCH

# Core stays minimal. Everything country-specific lives in extensions.

FHIR core resources cover what the whole world agrees on. Everything country-specific, specialty-specific, payer-specific goes here. Each extension has two parts — a url that is the contract, and a value[x] that is the data.

— PATIENT.EXTENSION · US CORE RACE

```
"extension": [{  
  "url": "http://hl7.org/fhir/us-core/StructureDefinition/us-core-race",  
  "extension": [{  
    "url": "ombCategory",  
    "valueCoding": {  
      "system": "urn:oid:2.16.840.1.113883.6.238",  
      "code": "2106-3",  
      "display": "White"  
    }  
  }  
}]
```

That is how a US Patient declares race — without the core Patient spec needing a race field. The OMB category code is the canonical US race vocabulary.

— CONCEPT · MODIFIEREXTENSION · THE DANGEROUS COUSIN

# Some extensions don't add — they *change meaning*.

## MUST

### REJECT IF YOU DON'T UNDERSTAND IT

A processor that encounters a modifierExtension it does not recognize MUST reject the resource. Not warn. Reject.

## 1

### RULE THAT SEPARATES SAFE FROM UNSAFE

This is the single hardest rule in FHIR — and the line between a safe client and a clinical-safety bug.

## mg/dL

### EXAMPLE · ISO21090-PQ-TRANSLATION

A Quantity carries a translated unit. Ignore the modifierExtension and you ship the wrong unit downstream.



Ava



Marcus · production scar

## — CONCEPT · META · FOUR FACETS

# Where did this come from, what does it claim to be, who can see it, how do I find it?

meta is the resource's metadata about itself. Four facets — provenance, conformance, security, indexing. Every FHIR server populates these, every client should read them.

## ● PROVENANCE

**versionId** ·  
**lastUpdated** · **source**

versionId increments on every write.  
lastUpdated is the server timestamp.  
source says where the data originated.

## ● CONFORMANCE

**profile[]**

Array of profile URLs this resource claims to conform to — US Core Patient, IPS Patient, your custom profile.

## ● SECURITY

**security[]**

Security labels — confidentiality, sensitivity, break-the-glass markers that gate access decisions.

## ● INDEXING

**tag[]**

Free-form labels you use for workflow, filtering, batch operations. Server-side or client-side conventions.

● **"meta.versionId": "3"**

● **"meta.profile": ["http://hl7.org/fhir/us-core/StructureDefinition/us-core-patient"]**

● **"meta.security": [{ "code": "R" }]**

● **"meta.tag": [{ "code": "needs-review" }]**

— CONCEPT · THE ROOKIE TRAP

# id is for the database. identifier is for the real world.

They sound the same. They are not the same. id is singular, lower-case, server-assigned, opaque. identifier is a plural array of business identifiers — MRN, SSN, NPI — each with system, value, use, period.

— ID · SERVER LOGICAL KEY

**"id": "abc-123"**

Singular. Lower-case. Server-assigned. Opaque.  
Appears in the URL path — /Patient/abc-123.  
Has no meaning outside that one server.

● One per resource

● Lives in the URL

— IDENTIFIER · BUSINESS KEYS

```
"identifier": [{  
  "system":  
  "http://hospital.example.org/mrn",  
  "value": "MRN-44721",  
  "use": "official",  
  "period": { "start": "2018-03-01" }  
}]
```

Plural array. Each entry has a system (namespace), value, use (official · usual · temp · old), and optional period of validity.

● MRN

● SSN

● NPI

— WALKTHROUGH · [HAPI.FHIR.ORG/BASER4/PATIENT/EXAMPLE](https://hapi.fhir.org/baser4/patient/example)

# Six anatomical parts, then the clinical content — in one real document.

— PATIENT/EXAMPLE · TRIMMED

```
{
  "resourceType": "Patient", // 1
  "id": "example", // 2
  "meta": {
    "versionId": "1",
    "lastUpdated": "2024-09-12T08:14:22Z",
    "profile": ["http://hl7.org/fhir/us-core/StructureDefinition/us-core-patient"]
  }, // 3
  "text": {
    "status": "generated",
    "div": "<div xmlns=\"http://www.w3.org/1999/xhtml\">Peter Chalmers, male,
b.1974</div>"
  }, // 4
  "extension": [{ "url": "...us-core-race", "extension": [...] }], // 5
  // no modifierExtension on this Patient — but the slot is always there // 6
  "identifier": [{ "system": "urn:oid:1.2.36.146.595...", "value": "12345", "use": "usual" }],
  "name": [{ "family": "Chalmers", "given": ["Peter", "James"] }],
  "gender": "male",
}
```

— TRY IT YOURSELF · 60 SECONDS

## Slice the anatomy out of a real Patient.

Hit the public HAPI sandbox, pull Patient/example, and project just the anatomical parts — id, identifier, meta, narrative status, and how many extensions and modifierExtensions the resource carries.

— RUN THIS IN YOUR TERMINAL

```
curl https://hapi.fhir.org/baseR4/Patient/example | jq '{id, identifier, meta, narrative_status: .text.status, extension_count: (.extension // [] | length), modifier_extension_count: (.modifierExtension // [] | length)}'
```

You will see the logical id, the business identifiers, the meta block, the narrative status, and counts of both extension flavors. Then go hunt — find a Patient on the sandbox that has a modifierExtension and tell yourself in one sentence what semantic it flips.

— NEXT CHAPTER

**Chapter 03 — Datatypes & References: CodeableConcept, Reference, Quantity, Period, Identifier. The building blocks inside the building blocks.**

● [hapi.fhir.org](https://hapi.fhir.org) · public R4 sandbox

● Hunt a modifierExtension in the wild

● Next · Ch 3 · Datatypes & References