

Person—family name, text X[X(39)]

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Family name
Synonymous names:	Surname; Last name
METEOR identifier:	613331
Registration status:	<ul style="list-style-type: none">• Health, Standard 05/10/2016• Tasmanian Health, Standard 27/06/2017
Definition:	<p>The name a person has in common with some other members of their family, as represented by text.</p> <p>It is often hereditary, and is distinguished from that person's first given name.</p>
Data Element Concept:	Person—family name

Value domain attributes

Representational attributes

Representation class:	Text
Data type:	String
Format:	X[X(39)]
Maximum character length:	40

Data element attributes

Collection and usage attributes

Guide for use:	<p>A person's family name is one of the following:</p> <ul style="list-style-type: none">• the hereditary or tribal surname of a person's family• acquired by a person in accordance with a due process defined in a state or territory Act relating to the registration of births, deaths, marriages and changes of name and sex, and for related purposes• any other name distinguished from a person's given name. <p>The agency or establishment should record the person's full family name on their information systems.</p>
Collection methods:	<p>Family name should be recorded in the format preferred by the person. The format should be the same as that written by the person on a (pre) registration form or in the same format as that printed on an identification card, such as a Medicare card, to ensure consistent collection of name data.</p> <p>Punctuation</p> <p>If special characters (such as hyphens, umlauts or commas) form part of the family name they should be included without spaces. For example, hyphenated names should be entered with a hyphen without spaces.</p> <p>Hyphenated family names should only be recorded using this data element, and not Person—family name prefix, text A[A(29)].</p> <p>Apostrophe—for example O'Brien, D'Agostino</p>

No space should be left before or after the apostrophe; for example, for the name 'O'Brien', there should not be a space between the 'O' and the apostrophe, or between the apostrophe and 'Brien'.

Family names with apostrophes should only be recorded using this data element, and not [Person—family name prefix, text A\[A\(29\)\]](#).

Full stop—for example, St. John or St. George.

No space should be left before a full stop; for example, for the name 'St. John' there should not be a space between 'St' and the full stop. A space should be left between the full stop and the next name; for example, for the name 'St. John' there should be a space between the full stop and 'John'. In this example, it would be incorrect to enter 'St .John' or 'St . John'.

Space—for example, Van Der Humm, Le Brun (examples which should be entered using the provision for family name prefix).

If the person has recorded their family name as more than one word, displaying spaces in between the words, record their family name in the same way leaving one space between each word. When it is displayed there should be a space between each family name in the same sequence as collected.

Person with only a single name

Some people do not have a family name and a given name, but have only a single name by which they are known. For such individuals the name should be recorded in the Family name field and the Given name field left blank.

Registering a pseudonym

This process may be required in order to mask the identity of an individual—for example, in the case of HIV testing—where the subject of care has the right of anonymity in many jurisdictions. In this case a pseudonym (fictitious or partial name) will be entered in lieu of the person's full or actual name. It is recommended that the subject be asked to record both the pseudonym (other name) as well as a legally known name (for example, identity card name).

Registering a pseudonym requires the local system to be able to identify which name is to be used or displayed as the preferred name for the purpose of the test. This might require the temporary change of the pseudonym name to preferred name, which is then changed back to the normal preferred name after the pseudonym use is over.

This issue also arises when those working in health care are being treated. It is a common requirement in relation to staff of an organisation or people in a comparatively small community.

Registered unnamed newborn babies

When registering a newborn, the mother's family name should be used as the baby's family name unless instructed otherwise by the mother. Unnamed babies should be recorded with a name usage value of Newborn name. This is a name that is not expected to persist but, unlike most temporary names, no follow-up is required during the birth episode of care to find the correct longer term name.

Registering an unidentified person

The default for unknown family name should be 'unknown' in all instances, and the name recorded as a name usage type of Other name (note: the name conditional use flag should be used to indicate that this is not a reliable name). A 'fictitious' family name such as 'Doe' shall not be created, as this is an actual family name. When the subject's name becomes known, it shall be recorded as the 'preferred' name and the other name of 'unknown' shall not be overwritten.

Registering individuals from disaster sites

People from disaster sites being treated should be recorded with a name usage of 'other name'. Local business rules should be developed for consistent recording of disaster site patient details. Care should be taken not to use identical dummy data (family name, given name, date of birth, sex) for two or more subjects from a

Comments:

disaster site. For example, use of the surname 'Unknown1', 'Unknown2' in the family name can clearly differentiate between individuals. Some organisations use an injury description in the given name field to assist in identification. The use of a standard start to the name supports the use of search strategies to assist in finding individuals, especially when a large number of people need to be managed in a disaster. These names have restricted use as they are relevant only for the current episode of care and purpose and should be updated with the individual's real name as soon as possible. Often people use a variety of names, including legal names, married/maiden names, nicknames, assumed names, traditional names, and so forth. Even small differences in recording—such as the difference between MacIntosh and McIntosh—can make record linkage impossible.

To minimise discrepancies in the recording and reporting of name information, agencies or establishments should ask the person for their full (formal) 'Given name' and 'Family name'. These may be different from the name that the person may prefer the agency or establishment workers to use in personal dealings. Agencies or establishments may choose to separately record the preferred name that the person wishes to be used by agency or establishment workers.

In some cultures it is traditional to state the family name first. To overcome discrepancies in recording/reporting that may arise as a result of this practice, agencies or establishments should always ask the person to specify their first given name and their family name or surname separately. These should then be recorded as 'Given name' and 'Family name' as appropriate, regardless of the order in which they may be traditionally given.

Source and reference attributes

Submitting organisation: Australian Institute of Health and Welfare

Reference documents: Standards Australia 2014. AS 4846:2014 Person and provider identification in healthcare. Sydney: Standards Australia.

Relational attributes

Related metadata references:

Supersedes [Person \(name\)—family name, text X\[X\(39\)\]](#)

- [Community Services \(retired\)](#), Superseded 06/02/2012
- [Health](#), Superseded 05/10/2016
- [Housing assistance](#), Standard 20/06/2005
- [Tasmanian Health](#), Standard 01/09/2016

See also [Person—family name prefix, text A\[A\(29\)\]](#)

- [Health](#), Standard 05/10/2016

See also [Person—family name sequence number, code N\[N\]](#)

- [Health](#), Standard 05/10/2016

See also [Person—given name, text X\[X\(39\)\]](#)

- [ACT Health \(retired\)](#), Candidate 02/01/2019
- [Health](#), Standard 05/10/2016
- [Indigenous](#), Candidate 30/05/2018
- [Tasmanian Health](#), Standard 27/06/2017

See also [Person—mother's original family name, text X\[X\(39\)\]](#)

- [Health](#), Standard 05/10/2016

See also [Person—name usage type end date, DDMMYYYY](#)

- [Community Services \(retired\)](#), Standard 06/02/2012
- [Disability](#), Standard 13/08/2015
- [Health](#), Not progressed 28/07/2016

See also [Person—name usage type start date, DDMMYYYY](#)

- [Community Services \(retired\)](#), Standard 06/02/2012
- [Disability](#), Standard 13/08/2015
- [Health](#), Not progressed 28/07/2016

See also [Person—name usage type, code X](#)

- [Health](#), Standard 05/10/2016

See also [Person—preferred name indicator, yes/no code X](#)

- [Health](#), Standard 05/10/2016

See also [Person—single name only flag, code A](#)

- [Health](#), Standard 05/10/2016

Implementation in Data Set Specifications:

[Individual name clusterHealth](#), Standard 05/10/2016

DSS specific information:

Any person shall have at least one family name.

[Name cluster \(Tasmania\) - 2017Tasmanian Health](#), Standard 27/06/2017

Implementation start date: 01/07/2017

[National Bowel Cancer Screening Program NBEDS 2018–19Health](#), Superseded 12/12/2018

Implementation start date: 01/07/2018

Implementation end date: 30/06/2019

[National Bowel Cancer Screening Program NBEDS 2019–20Health](#),
Superseded 16/01/2020

Implementation start date: 01/07/2019

Implementation end date: 30/06/2020

[National Bowel Cancer Screening Program NBEDS 2020–21Health](#),
Superseded 05/02/2021

Implementation start date: 01/07/2020

Implementation end date: 30/06/2021

[National Bowel Cancer Screening Program NBEDS 2021–22Health](#),
Superseded 17/12/2021

Implementation start date: 01/07/2021

Implementation end date: 30/06/2022

[National Bowel Cancer Screening Program NBEDS 2022–23Health](#), Standard
17/12/2021

Implementation start date: 01/07/2022

Implementation end date: 30/06/2023

[National Bowel Cancer Screening Program NBEDS 2023–24Health](#), Recorded
09/08/2022

Implementation start date: 01/07/2023

Implementation end date: 30/06/2024

[Surveillance of healthcare associated infection: Staphylococcus aureus
bloodstream infection NBPDSHealth](#), Qualified 18/07/2022