

Emergency department stay—type of visit to emergency department, code N

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Emergency department stay—type of visit to emergency department, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Type of visit to emergency department
METEOR identifier:	495958
Registration status:	Health , Superseded 11/04/2014
Definition:	The reason the patient presents to an emergency department , as represented by a code.
Context:	Emergency department care.
Data Element Concept:	Emergency department stay—type of visit to emergency department
Value Domain:	Emergency department visit type code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
Permissible values:	Value	Meaning
	1	Emergency presentation
	2	Return visit, planned
	3	Pre-arranged admission
	4	Patient in transit
	5	Dead on arrival

Collection and usage attributes

Guide for use:**CODE 1 Emergency presentation**

This code includes attendance at the emergency department for an actual or suspected condition which is sufficiently serious to require acute unscheduled care.

CODE 2 Return visit, planned

This code includes a planned return to the emergency department as a result of a previous emergency department presentation (Code 1) or return visit (Code 2). The return visit may be for planned follow-up treatment, as a consequence of test results becoming available indicating the need for further treatment, or as a result of a care plan initiated at discharge.

Exclusion: Where a visit follows general advice to return if feeling unwell, this should not be recorded as a planned visit.

CODE 3 Pre-arranged admission

This code includes presentation by a patient at the emergency department for either clerical, nursing or medical processes to be undertaken, and admission has been pre-arranged by the referring medical officer and a bed allocated.

CODE 4 Patient in transit

This code includes where the emergency department is responsible for care and treatment of a patient awaiting transport to another facility.

CODE 5 Dead on arrival

This code includes where a patient is dead on arrival and an emergency department clinician certifies the death of the patient.

Data element attributes

Collection and usage attributes

Comments: Required for analysis of emergency department services.

Source and reference attributes

Submitting organisation: National Institution Based Ambulatory Model Reference Group

Origin: National Health Data Committee

Relational attributes

Related metadata references: Supersedes [Emergency department stay—type of visit to emergency department, code N](#)

[Health](#), Superseded 21/11/2013

[Independent Hospital Pricing Authority](#), Standard 31/10/2012

[National Health Performance Authority \(retired\)](#), Retired 01/07/2016

Has been superseded by [Emergency department stay—type of visit to emergency department, code N](#)

[Health](#), Superseded 25/01/2018

See also [Emergency service stay—type of visit to emergency service, code N](#)

[Health](#), Superseded 25/01/2018

Implementation in Data Set Specifications:

[Activity based funding: Emergency service care DSS 2014-15](#)
[Independent Hospital Pricing Authority](#), Standard 14/01/2015
Implementation start date: 01/07/2014
Implementation end date: 30/06/2015

[Activity based funding: Emergency service care DSS 2015-16](#)
[Health](#), Superseded 19/11/2015
Implementation start date: 01/07/2015
Implementation end date: 30/06/2016

[Activity based funding: Emergency service care NBEDS 2016-17](#)
[Health](#), Superseded 05/10/2016
Implementation start date: 01/07/2016
Implementation end date: 30/06/2017

[Non-admitted patient emergency department care NMDS 2014-15](#)
[Health](#), Superseded 13/11/2014
Implementation start date: 01/07/2014
Implementation end date: 30/06/2015

[Non-admitted patient emergency department care NMDS 2015-16](#)
[Health](#), Superseded 19/11/2015
Implementation start date: 01/07/2015
Implementation end date: 30/06/2016

[Non-admitted patient emergency department care NMDS 2016-17](#)
[Health](#), Superseded 05/10/2016
Implementation start date: 01/07/2016
Implementation end date: 30/06/2017

[Non-admitted patient emergency department care NMDS 2017-18](#)
[Health](#), Superseded 25/01/2018
Implementation start date: 01/07/2017
Implementation end date: 30/06/2018

**Implementation in
Indicators:**

[National Healthcare Agreement: PI 19—Selected potentially avoidable GP-type presentations to emergency departments, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 19—Selected potentially avoidable GP-type presentations to emergency departments, 2017](#)

[Health](#), Superseded 30/01/2018

[National Healthcare Agreement: PI 19—Selected potentially avoidable GP-type presentations to emergency departments, 2018](#)

[Health](#), Superseded 19/06/2019

[National Healthcare Agreement: PI 19—Selected potentially avoidable GP-type presentations to emergency departments, 2019](#)

[Health](#), Superseded 13/03/2020

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2017](#)

[Health](#), Superseded 30/01/2018

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2018](#)

[Health](#), Superseded 19/06/2019

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2019](#)

[Health](#), Superseded 13/03/2020

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2016](#)

[Health](#), Superseded 31/01/2017

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2017](#)

[Health](#), Superseded 30/01/2018

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2018](#)

[Health](#), Superseded 19/06/2019

[National Healthcare Agreement: PI 21a—Waiting times for emergency hospital care: Proportion seen on time, 2019](#)

[Health](#), Superseded 13/03/2020