

# Episode of care—principal diagnosis, code (ICD-10-AM 11th edn) ANN{.N[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](mailto: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](mailto:meteor@aihw.gov.au).

# Episode of care—principal diagnosis, code (ICD-10-AM 11th edn) ANN{.N[N]}

## Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Principal diagnosis
METEOR identifier:	699609
Registration status:	<a href="#">Health</a> , Superseded 20/10/2021 <a href="#">Tasmanian Health</a> , Superseded 17/10/2023
Definition:	The diagnosis established after study to be chiefly responsible for occasioning an episode of admitted patient care, an episode of residential care or an attendance at the health care establishment, as represented by a code.
Data Element Concept:	<a href="#">Episode of care—principal diagnosis</a>
Value Domain:	<a href="#">Diagnosis code (ICD-10-AM 11th edn) ANN{.N[N]}</a>

## Value domain attributes

## Representational attributes

Classification scheme:	<a href="#">International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification 11th edition</a>
Representation class:	Code
Data type:	String
Format:	ANN{.N[N]}
Maximum character length:	6

## Data element attributes

## Collection and usage attributes

Guide for use:	<p>The principal diagnosis must be determined in accordance with the Australian Coding Standards. Each episode of admitted patient care must have a principal diagnosis and may have additional diagnoses. The diagnosis can include a disease, condition, injury, poisoning, sign, symptom, abnormal finding, complaint, or other factor influencing health status.</p> <p>As a minimum requirement the Principal diagnosis code must be a valid code from the current edition of the <i>International statistical classification of diseases and related health problems, 10th revision, Australian modification</i> (ICD-10-AM).</p> <p>For episodes of admitted patient care, some diagnosis codes are too imprecise or inappropriate to be acceptable as a principal diagnosis and will group to an error DRG in the Australian Refined Diagnosis Related Groups.</p> <p>Diagnosis codes starting with a V, W, X or Y, describing the circumstances that cause an injury, rather than the nature of the injury, cannot be used as a principal diagnosis. Diagnosis codes which are morphology codes cannot be used as a principal diagnosis.</p>
Collection methods:	A principal diagnosis should be recorded and coded upon <a href="#">separation</a> , for each episode of admitted patient care or episode of residential care or attendance at a health-care establishment. The principal diagnosis is derived from and must be substantiated by clinical documentation.

**Comments:** The principal diagnosis is one of the most valuable health data elements. It is used for epidemiological research, casemix studies and planning purposes.

## Source and reference attributes

**Origin:** Australian Consortium for Classification Development  
National Data Standard for Injury Surveillance Advisory Group

## Relational attributes

**Related metadata references:** Supersedes [Episode of care—principal diagnosis, code \(ICD-10-AM 10th edn\) ANN{.N\[N\]}](#)  
[Health](#), Superseded 12/12/2018  
[Tasmanian Health](#), Superseded 08/04/2019

Has been superseded by [Episode of care—principal diagnosis, code \(ICD-10-AM Twelfth edition\) ANN{.N\[N\]}](#)  
[Health](#), Standard 20/10/2021  
[Tasmanian Health](#), Standard 17/10/2023

Is used in the formation of [Episode of admitted patient care—diagnosis related group, code \(AR-DRG v 10.0\) ANNA](#)  
[Tasmanian Health](#), Superseded 16/10/2023

Is used in the formation of [Episode of admitted patient care—diagnosis related group, code \(AR-DRG v 11.0\) ANNA](#)  
[Tasmanian Health](#), Standard 16/10/2023

See also [Episode of care—additional diagnosis, code \(ICD-10-AM 11th edn\) ANN{.N\[N\]}](#)  
[Health](#), Superseded 20/10/2021  
[Tasmanian Health](#), Superseded 17/10/2023

**Implementation in Data Set Specifications:** [Activity based funding: Mental health care NBEDS 2019-20](#)  
[Health](#), Superseded 17/01/2020  
**Implementation start date:** 01/07/2019  
**Implementation end date:** 30/06/2020

[Activity based funding: Mental health care NBEDS 2020-21](#)  
[Health](#), Superseded 23/12/2020  
**Implementation start date:** 01/07/2020  
**Implementation end date:** 30/06/2021

[Activity based funding: Mental health care NBEDS 2021-22](#)  
[Health](#), Superseded 17/12/2021  
**Implementation start date:** 01/07/2021  
**Implementation end date:** 30/06/2022

[Admitted patient care clinical related data elements \(TDLU\) cluster](#)  
[Tasmanian Health](#), Superseded 10/11/2023

[Admitted patient care NMDS 2019-20](#)  
[Health](#), Superseded 18/12/2019  
**Implementation start date:** 01/07/2019  
**Implementation end date:** 30/06/2020  
**Conditional obligation:**

The principal diagnosis is a major determinant in the classification of Australian Refined Diagnosis Related Groups and Major Diagnostic Categories.

Where the principal diagnosis is recorded prior to discharge (as in the annual census of public psychiatric hospital patients), it is the current provisional principal diagnosis. Only use the admission diagnosis when no other diagnostic information is available. The current provisional diagnosis may be the same as the admission diagnosis.

[Admitted patient care NMDS 2020-21](#)  
[Health](#), Superseded 05/02/2021  
**Implementation start date:** 01/07/2020  
**Implementation end date:** 30/06/2021  
**Conditional obligation:**

The principal diagnosis is a major determinant in the classification of Australian Refined Diagnosis Related Groups and Major Diagnostic Categories.

Where the principal diagnosis is recorded prior to discharge (as in the annual census of public psychiatric hospital patients), it is the current provisional principal diagnosis. Only use the admission diagnosis when no other diagnostic information is available. The current provisional diagnosis may be the same as the admission diagnosis.

[Admitted patient care NMDS 2021–22](#)

[Health](#), Superseded 20/10/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**Conditional obligation:**

The principal diagnosis is a major determinant in the classification of Australian Refined Diagnosis Related Groups and Major Diagnostic Categories.

Where the principal diagnosis is recorded prior to discharge (as in the annual census of public psychiatric hospital patients), it is the current provisional principal diagnosis. Only use the admission diagnosis when no other diagnostic information is available. The current provisional diagnosis may be the same as the admission diagnosis.

[Allied health admitted patient care NBPDS](#)

[Health](#), Standard 12/12/2018

[Community mental health care NMDS 2019–20](#)

[Health](#), Superseded 16/01/2020

**Implementation start date:** 01/07/2019

**Implementation end date:** 30/06/2020

[Community mental health care NMDS 2020–21](#)

[Health](#), Superseded 20/01/2021

**Implementation start date:** 01/07/2020

**Implementation end date:** 30/06/2021

[Community mental health care NMDS 2021–22](#)

[Health](#), Superseded 17/12/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

[Residential mental health care NMDS 2019–20](#)

[Health](#), Superseded 16/01/2020

**Implementation start date:** 01/07/2019

**Implementation end date:** 30/06/2020

**DSS specific information:**

Codes can be used from ICD-10-AM or from The ICD-10-AM Mental Health Manual: An Integrated Classification and Diagnostic Tool for Community-Based Mental Health Services, published by the National Centre for Classification in Health 2002.

The principal diagnosis should be recorded and coded upon the end of an episode of residential care (i.e. annually for continuing residential care).

[Residential mental health care NMDS 2020–21](#)

[Health](#), Superseded 20/01/2021

**Implementation start date:** 01/07/2020

**Implementation end date:** 30/06/2021

**DSS specific information:**

Codes can be used from ICD-10-AM or from The ICD-10-AM Mental Health Manual: An Integrated Classification and Diagnostic Tool for Community-Based Mental Health Services, published by the National Centre for Classification in Health 2002.

The principal diagnosis should be recorded and coded upon the end of an episode of residential care (i.e. annually for continuing residential care).

[Residential mental health care NMDS 2021–22](#)

[Health](#), Superseded 17/12/2021

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**DSS specific information:**

Codes can be used from ICD-10-AM or from The ICD-10-AM Mental Health Manual: An Integrated Classification and Diagnostic Tool for Community-Based Mental Health Services, published by the National Centre for Classification in Health 2002.

The principal diagnosis should be recorded and coded upon the end of an episode of residential care (i.e. annually for continuing residential care).

[Tasmanian Admitted Patient Data Set - 2019](#)

[Tasmanian Health](#), Superseded 17/06/2020

**Implementation start date:** 01/07/2019

**Implementation end date:** 30/06/2020

[Tasmanian Admitted Patient Data Set - 2020](#)

[Tasmanian Health](#), Superseded 22/11/2023

**Implementation start date:** 01/07/2020

**Implementation end date:** 30/06/2021

[Tasmanian Admitted Patient Data Set - 2021](#)

[Tasmanian Health](#), Superseded 22/11/2023

**Implementation start date:** 01/07/2021

**Implementation end date:** 30/06/2022

**Implementation in  
Indicators:**

**Used as Numerator**

[Australian Health Performance Framework: PI 3.1.1–Incidence of heart attacks \(acute coronary events\), 2021](#)

[Health](#), Standard 07/09/2023

[Australian Health Performance Framework: PI 3.1.1–Incidence of heart attacks \(acute coronary events\), 2021](#)

[Health](#), Standard 07/09/2023

[Australian Health Performance Framework: PI 3.1.5–Hospitalisation for injury and poisoning, 2021](#)

[Health](#), Standard 07/09/2023

[Australian Health Performance Framework: PI 3.1.5–Hospitalisation for injury and poisoning, 2022](#)

[Health](#), Qualified 09/04/2024

[National Healthcare Agreement: PB f–By 2014–15, improve the provision of primary care and reduce the proportion of potentially preventable hospital admissions by 7.6 per cent over the 2006–07 baseline to 8.5 per cent of total hospital admissions, 2022](#)

[Health](#), Standard 24/09/2021

[National Healthcare Agreement: PI 09–Incidence of heart attacks \(acute coronary events\), 2022](#)

[Health](#), Standard 24/09/2021

[National Healthcare Agreement: PI 18–Selected potentially preventable hospitalisations, 2022](#)

[Health](#), Standard 24/09/2021

[National Healthcare Agreement: PI 27–Number of hospital patient days used by those eligible and waiting for residential aged care, 2022](#)

[Health](#), Standard 24/09/2021