Episode of admitted patient care—intervention, code (ACHI Twelfth edition) NNNNN-NN

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# Episode of admitted patient care—intervention, code (ACHI Twelfth edition) NNNNN-NN

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element |
| Short name: | Intervention |
| Synonymous names: | Clinical intervention; Procedure; Surgical operation |
| METEOR identifier: | 746669 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 20/10/2021  [Tasmanian Health](https://meteor.aihw.gov.au/RegistrationAuthority/15), Standard 17/10/2023 |
| Definition: | A [**clinical intervention**](https://meteor.aihw.gov.au/content/327220) represented by a code that:   * is surgical in nature, and/or * carries a procedural risk, and/or * carries an anaesthetic risk, and/or * requires specialised training, and/or * requires special facilities or equipment only available in an admitted patient care setting. |
| Data Element Concept: | [Episode of admitted patient care—intervention](https://meteor.aihw.gov.au/content/746719) |
| Value Domain: | [Intervention code (ACHI Twelfth edition) NNNNN-NN](https://meteor.aihw.gov.au/content/746678) |

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| Value domain attributes | | |
| Representational attributes | | |
| Classification scheme: | [Australian Classification of Health Interventions (ACHI) Twelfth edition](https://meteor.aihw.gov.au/content/746653) | |
| Representation class: | Code | |
| Data type: | String | |
| Format: | NNNNN-NN | |
| Maximum character length: | 8 | |

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| Source and reference attributes | |
| Submitting organisation: | Independent Health and Aged Care Pricing Authority |

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| Data element attributes | |
| Collection and usage attributes | |
| Collection methods: | Interventions are classified from, and must be substantiated by, clinical documentation. |
| Source and reference attributes | |
| Submitting organisation: | Independent Health and Aged Care Pricing Authority |
| Origin: | Independent Hospital Pricing Authority |
| Relational attributes | |
| Related metadata references: | Supersedes [Episode of admitted patient care—procedure, code (ACHI 11th edn) NNNNN-NN](https://meteor.aihw.gov.au/content/699716)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 20/10/2021  [Tasmanian Health](https://meteor.aihw.gov.au/RegistrationAuthority/15), Superseded 17/10/2023 |
| Implementation in Data Set Specifications: | [Admitted patient care clinical related data elements (TDLU) cluster](https://meteor.aihw.gov.au/content/785707)  [Tasmanian Health](https://meteor.aihw.gov.au/RegistrationAuthority/15), Standard 10/11/2023  ***Implementation start date:*** 01/07/2023 ***Implementation end date:*** 30/06/2025 ***Conditional obligation:***  Required if episode of care meets the data elements criteria  [Admitted patient care clinical related data elements (TDLU) cluster (Private Hospitals)](https://meteor.aihw.gov.au/content/786795)  [Tasmanian Health](https://meteor.aihw.gov.au/RegistrationAuthority/15), Standard 21/11/2023  ***Implementation start date:*** 01/07/2023 ***Implementation end date:*** 30/06/2025 ***Conditional obligation:***  Required if episode of care meets the data elements criteria  [Admitted patient care NMDS 2022–23](https://meteor.aihw.gov.au/content/742173)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 20/12/2022  ***Implementation start date:*** 01/07/2022 ***Implementation end date:*** 30/06/2023 ***Conditional obligation:***  This data element is only to be reported if a health intervention is performed in the episode of care.  ***DSS specific information:***  As a minimum requirement intervention codes must be valid codes from the Australian Classification of Health Interventions (ACHI) codes. More extensive edit checking of codes may be utilised within individual hospitals and state and territory information systems.  An unlimited number of diagnosis and intervention codes should be able to be collected in hospital morbidity systems. Where this is not possible, a minimum of 20 codes should be able to be collected.  Classify interventions undertaken during an episode of care in accordance with the relevant Australian Coding Standards and National Coding Rules.  The order of codes should be determined using the following hierarchy:   * intervention(s) performed for treatment of the principal diagnosis * intervention(s) performed for the treatment of an additional diagnosis * diagnostic/exploratory intervention(s) related to the principal diagnosis * diagnostic/exploratory intervention(s) related to an additional diagnosis.   [Admitted patient care NMDS 2023–24](https://meteor.aihw.gov.au/content/756111)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 06/12/2023  ***Implementation start date:*** 01/07/2023 ***Implementation end date:*** 30/06/2024 ***Conditional obligation:***  This data element is only to be reported if a health intervention is performed in the episode of care.  ***DSS specific information:***  As a minimum requirement intervention codes must be valid codes from the Australian Classification of Health Interventions (ACHI) codes. More extensive edit checking of codes may be utilised within individual hospitals and state and territory information systems.  An unlimited number of diagnosis and intervention codes should be able to be collected in hospital morbidity systems. Where this is not possible, a minimum of 20 codes should be able to be collected.  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[Admitted patient care NMDS 2024–25](https://meteor.aihw.gov.au/content/775630)  [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 06/12/2023  ***Implementation start date:*** 01/07/2024 ***Implementation end date:*** 30/06/2025 ***Conditional obligation:***  This data element is only to be reported if a health intervention is performed in the episode of care.  ***DSS specific information:***  As a minimum requirement intervention codes must be valid codes from the Australian Classification of Health Interventions (ACHI) codes. More extensive edit checking of codes may be utilised within individual hospitals and state and territory information systems.  An unlimited number of diagnosis and intervention codes should be able to be collected in hospital morbidity systems. Where this is not possible, a minimum of 20 codes should be able to be collected.  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[Tasmanian Admitted Patient Data Set - 2022](https://meteor.aihw.gov.au/content/761036)  [Tasmanian Health](https://meteor.aihw.gov.au/RegistrationAuthority/15), Superseded 22/11/2023  ***Implementation start date:*** 01/07/2022 ***Implementation end date:*** 30/06/2023 ***Conditional obligation:***  If required  [Tasmanian Admitted Patient Data Set - 2023](https://meteor.aihw.gov.au/content/774449)  [Tasmanian Health](https://meteor.aihw.gov.au/RegistrationAuthority/15), Standard 22/11/2023  ***Implementation start date:*** 01/07/2023 ***Implementation end date:*** 30/06/2024 ***Conditional obligation:***  If required |