Type of admitted patient care for same-day patients

Identifying and Definitional Attributes

Data Dictionary: NHDD

Knowledgebase ID: 000232   Version number: 3

Metadata type: DERIVED DATA ELEMENT

Registration Authority: NHIMG   Admin status: RETIRED

Effective date: 01-JUL-01

Definition: The number of admitted patients separated on the day of admission totalled for specified programs within an institution.

Context: Public hospital establishments: this variable is required to describe adequately which broad programs of health care are provided in the establishment. Although this classificatory variable can be derived from the person-level data, a detailed description of the desired categories has been included in the National Health Data Dictionary to facilitate the routine production of a set of descriptive statistics for each establishment.

Relational and Representational Attributes

Datatype: Numeric

Representational form: CODE

Representation layout: NNNNNNN

Minimum Size: 1

Maximum Size: 7

Data Domain: NOVAL   Count the number of separations for each of the following categories.

Guide For Use: A8.1 Mental health: all episodes with principal diagnosis of F00-F09, F20-F54, F56-F69 and F80-F99.
A8.2 Alcohol and drug: all episodes with a principal diagnosis of F10-F19 and F55.
A8.3 Nursing home type: all episodes for admitted patients staying 35 days or more for whom an acute care certificate has not been provided at the time of discharge.

A8.4 Rehabilitation: all episodes for admitted patients being admitted to designated rehabilitation units within an establishment.

A8.5 Intellectual handicap and developmental disability: all episodes with a principal diagnosis of F70-F79.

A8.6 Dental: all episodes with a principal diagnosis of K00-K08.

A8.7 Non-medical and social support: all episodes with a principal diagnosis of Z55-Z65, Z73-Z76 and Z02.

A8.8 Dialysis: all episodes with a principal diagnosis of Z49. Some variation may be required due to differences in State coding practices, for example, Z49.2 or the relevant procedure.

A8.9 Endoscopy and related diagnostic procedures: all episodes, regardless of principal diagnosis, with a ICD-10-AM principal procedure of:
- cystoscopy (36812-00 36860-00 36860-01 36836-00 36821-0037215-00 36806-00 36821-02 36818-00 36818-01 36812-01),
- gastroscopy (30473-00 30473-01 30478-00 3047801 30478-02 30478-03 30478-04),
- oesophagoscopy (30473-03 30473-04 41822-00 30478-11 41825-0030478-10 30478-13 41816-00 41822-00 41825-00 41816-00),
- duodenoscopy (30473-00 30473-01 32095-00 30569-00 30478-0430478-00 30468-00),
- colonoscopy (32090-00 32090-01 90315-00 32093-00 32084-00 32084-01 32087-00 30375-23),
- sigmoidoscopy (32084-00 32084-01 32087-00 32075-00 32075-01 32078-00 32081-0032072-01 30375-23),
- bronchoscopy (41889-00 41892-00 41892-01 41901-00 41895-00), and laryngoscopy (41849-00 41855-00 41867-00 41864-00 41858-00 41861-00 41852-00 41846-00 41764-03).

A8.10 Perinatal: all episodes with a principal diagnosis of P00-P96 with age less than 29 days. Multiple births are to be included.

A8.11 Medical/surgical/obstetrics: balance of episodes.

Note: For Public Psychiatric and Drug and Alcohol hospitals there is no requirement for the information by categories other than A8.1, A8.2 and A8.11.

Related metadata: supersedes previous data element Type of admitted patient care for same day patients - ICD-9-CM code version 2

Administrative Attributes

Source Document: International Statistical Classification of Diseases and Related health Problems - 10th Revision, Australian Modification (1998) National Centre for Classification in Health, Sydney.

Source Organisation:

Data Element Links

Information Model Entities linked to this Data Element

NHIM   Performance indicator

Data Agreements which include this Data Element