Urgency of admission

Identifying and Definitional Attributes

Data Dictionary: NHDD

Knowledgebase ID: 000425   Version number: 1

Metadata type: DATA ELEMENT

Registration Authority: NHIMG   Admin status: SUPERSEDED

Effective date: 01-MAR-05

Definition: Whether the admission has an urgency status assigned and, if so, whether admission occurred on an emergency basis.
An emergency admission is an admission of a patient for care or treatment which, in the opinion of the treating clinician, is necessary and admission for which should occur within 24 hours.
An elective admission is an admission of a patient for care or treatment which, in the opinion of the treating clinician, is necessary and admission for which can be delayed for at least 24 hours.
Admissions for which an urgency status is usually not assigned are:
- admissions for normal delivery (obstetric)
- admissions which begin with the birth of the patient, or when it was intended that the birth occur in the hospital, commence shortly after the birth of the patient
- statistical admissions
- planned readmissions for the patient to receive limited care or treatment for a current condition, for example dialysis or chemotherapy.

Context: Admitted patient care.

Relational and Representational Attributes

Datatype: Numeric

Representational form: CODE

Representation layout: N(.N)

Minimum Size: 1

Maximum Size: 3

Data Domain:
1	Urgency status assigned - emergency
2	Urgency status assigned - elective

3   Urgency status not assigned
9   Not known/not reported

Guide For Use: Emergency admission:
The following guidelines may be used by health professionals, hospitals and health insurers in determining whether an emergency admission has occurred. These guidelines should not be considered definitive.

An emergency admission occurs if one or more of the following clinical conditions are applicable such that the patient required admission within 24 hours.

Such a patient would be:
- at risk of serious morbidity or mortality and requiring urgent assessment and/or resuscitation; or
- suffering from suspected acute organ or system failure; or
- suffering from an illness or injury where the viability or function of a body part or organ is acutely threatened; or
- suffering from a drug overdoes, toxic substance or toxin effect; or
- experiencing severe psychiatric disturbance whereby the health of the patient or other people is at immediate risk; or
- suffering severe pain where the viability or function of a body part or organ is suspected to be acutely threatened; or
- suffering acute significant haemorrhage and requiring urgent assessment and treatment; or
- suffering gynaecological or obstetric complications; or
- suffering an acute condition which represents a significant threat to the patient's physical or psychological wellbeing; or
- suffering a condition which represents a significant threat to public health.
If an admission meets the definition of emergency above, it is categorised as emergency, regardless of whether the admission occurred within 24 hours of such a categorisation being made, or after 24 hours or more.

Elective admissions:
If an admission meets the definition of elective above, it is categorised as elective, regardless of whether the admission actually occurred after 24 hours or more, or it occurred within 24 hours. The distinguishing characteristic is that the admission could be delayed by at least 24 hours.

Scheduled admissions:
A patient who expects to have an elective admission will often

have that admission scheduled in advance. Whether or not the admission has been scheduled does not affect the categorisation of the admission as emergency or elective, which depends only on whether it meets the definitions above. That is, patients both with and without a scheduled admission can be admitted on either an emergency or elective basis.

Admissions from elective surgery waiting lists:
Patients on waiting lists for elective surgery are assigned a Clinical urgency status which indicates the clinical assessment of the urgency with which a patient requires elective hospital care. On admission, they will also be assigned an Urgency of admission category, which may or may not be elective:
- Patients who are removed from elective surgery waiting lists on admission as an elective patient for the procedure for which they were waiting (see data domain value 1 in data element Reason for removal) will be assigned an Urgency of admission code of 2. In that case, their Clinical urgency category could be regarded as further detail on how urgent their admission was.
- Patients who are removed from elective surgery waiting lists on admission as an emergency patient for the procedure for which they were waiting (see data domain value 2 in data element Reason for removal), will be assigned an Urgency of admission code of 1.

Admissions for which an urgency status is usually not assigned:
An urgency status can be assigned for admissions of the types listed above for which an urgency status is not usually assigned. For example, a patient who is to have an obstetric admission may have one or more of the clinical conditions listed above and be admitted on an emergency basis.

Use of code 9:
The Not known/not reported category is to be used when it is not known whether or not an urgency status has been assigned, or when an urgency status has been assigned but is not known.

Related metadata: relates to the data element concept Elective care version 1
relates to the data element Clinical urgency version 2

Administrative Attributes

Source Document:

Source Organisation: Emergency Definition Working Party
National Health Data Committee

Data Element Links

Information Model Entities linked to this Data Element

NHIM   Assessment event

Data Agreements which include this Data Element

NMDS - Admitted patient care   From 01-Jul-00 to