Episode of care—additional diagnosis, code (ICD-10-AM 5th edn) ANN{.N[N]}

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# Episode of care—additional diagnosis, code (ICD-10-AM 5th edn) ANN{.N[N]}

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| Identifying and definitional attributes |
| Metadata item type: | Data Element |
| Short name: | Additional diagnosis |
| METEOR identifier: | 333832 |
| Registration status: | [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 05/02/2008 |
| Definition: | A condition or complaint either coexisting with the principal diagnosis or arising during the episode of admitted patient care, episode of residential care or attendance at a health care establishment, as represented by a code. |
| Data Element Concept: | [Episode of care—additional diagnosis](https://meteor.aihw.gov.au/content/269656) |
| Value Domain: | [Diagnosis code (ICD-10-AM 5th edn) ANN{.N[N]}](https://meteor.aihw.gov.au/content/333683) |

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| Value domain attributes |
| Representational attributes |
| Classification scheme: | [International Statistical Classification of Diseases and Related Health Problems, Tenth Revision, Australian Modification 5th edition](https://meteor.aihw.gov.au/content/325389) |
| Representation class: | Code |
| Data type: | String |
| Format: | ANN{.N[N]} |
| Maximum character length: | 6 |

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| Data element attributes  |
| Collection and usage attributes |
| Guide for use: | Record each additional diagnosis relevant to the episode of care in accordance with the ICD-10-AM Australian Coding Standards. Generally, external cause, place of occurrence and activity codes will be included in the string of additional diagnosis codes. In some data collections these codes may also be copied into specific fields.The diagnosis can include a disease, condition, injury, poisoning, sign, symptom, abnormal finding, complaint, or other factor influencing health status. |
| Collection methods: | An additional diagnosis should be recorded and coded where appropriate upon separation of an episode of admitted patient care or the end of an episode of residential care. The additional diagnosis is derived from and must be substantiated by clinical documentation. |
| Comments: | Additional diagnoses are significant for the allocation of Australian Refined Diagnosis Related Groups. The allocation of patient to major problem or complication and co-morbidity Diagnosis Related Groups is made on the basis of the presence of certain specified additional diagnoses. Additional diagnoses should be recorded when relevant to the patient's episode of care and not restricted by the number of fields on the morbidity form or computer screen.External cause codes, although not diagnosis of condition codes, should be sequenced together with the additional diagnosis codes so that meaning is given to the data for use in injury surveillance and other monitoring activities. |
| Source and reference attributes |
| Origin: | National Centre for Classification in Health |
| Relational attributes |
| Related metadata references: | Supersedes [Episode of care—additional diagnosis, code (ICD-10-AM 4th edn) ANN{.N[N]}](https://meteor.aihw.gov.au/content/333830)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 07/12/2005Has been superseded by [Episode of care—additional diagnosis, code (ICD-10-AM 6th edn) ANN{.N[N]}](https://meteor.aihw.gov.au/content/356587)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 22/12/2009Is used in the formation of [Episode of admitted patient care—major diagnostic category, code (AR-DRG v5.1) NN](https://meteor.aihw.gov.au/content/270400)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 22/12/2009 |
| Implementation in Data Set Specifications: | [Admitted patient care NMDS 2006-07](https://meteor.aihw.gov.au/content/334023)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 23/10/2006***Implementation start date:*** 01/07/2006***Implementation end date:*** 30/06/2007***DSS specific information:*** An unlimited number of diagnosis and procedure 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.Effective for collection from 01/07/2006[Admitted patient care NMDS 2007-08](https://meteor.aihw.gov.au/content/339089)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 05/02/2008***Implementation start date:*** 01/07/2007***Implementation end date:*** 30/06/2008***DSS specific information:*** An unlimited number of diagnosis and procedure 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.Effective for collection from 01/07/2006[Admitted patient mental health care NMDS](https://meteor.aihw.gov.au/content/334031)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 23/10/2006***Implementation start date:*** 01/07/2006***Implementation end date:*** 30/06/2007***DSS specific information:*** An unlimited number of diagnosis and procedure 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.[Admitted patient mental health care NMDS 2007-08](https://meteor.aihw.gov.au/content/345110)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 05/02/2008***Implementation start date:*** 01/07/2007***Implementation end date:*** 30/06/2008***DSS specific information:*** An unlimited number of diagnosis and procedure 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.[Admitted patient palliative care NMDS 2006-07](https://meteor.aihw.gov.au/content/334050)        [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 23/10/2006***Implementation start date:*** 01/07/2006***Implementation end date:*** 30/06/2007***DSS specific information:*** An unlimited number of diagnosis and procedure 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.Effective for collection from 01/07/2006[Admitted patient palliative care NMDS 2007-08](https://meteor.aihw.gov.au/content/339098)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 05/02/2008***Implementation start date:*** 01/07/2007***Implementation end date:*** 30/06/2008***DSS specific information:*** An unlimited number of diagnosis and procedure 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.Effective for collection from 01/07/2006[Residential mental health care NMDS 2006-07](https://meteor.aihw.gov.au/content/334067)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 23/10/2006***Implementation start date:*** 01/07/2006***Implementation end date:*** 30/06/2007***DSS specific information:*** Effective for collection from 01/07/2006[Residential mental health care NMDS 2007-08](https://meteor.aihw.gov.au/content/345122)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 05/02/2008***Implementation start date:*** 01/07/2007***Implementation end date:*** 30/06/2008 |
| Implementation in Indicators: | **Used as Numerator**[National Healthcare Agreement: P22-Selected potentially preventable hospitalisations, 2010](https://meteor.aihw.gov.au/content/394719)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 08/06/2011[National Healthcare Agreement: P41-Falls resulting in patient harm in hospitals, 2010](https://meteor.aihw.gov.au/content/395076)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 08/06/2011[National Healthcare Agreement: P42-Intentional self-harm in hospitals, 2010](https://meteor.aihw.gov.au/content/395079)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Superseded 08/06/2011 |