Acute coronary syndrome related medical history code NN



meteor@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at

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Identifying and definitional attributes

Metadata item type: Value Domain

METEOR identifier: 356600

Health, Standard 01/10/2008 Registration status:

Definition: A code set describing medical conditions pertinent to the risk stratification and

treatment of acute coronary syndrome.

Representational attributes

Representation class: Code Data type: Number Format: NN

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Value	Meaning
11	Angina (excluding unstable angina): prior existing
12	Angina (excluding unstable angina): new onset
13	Unstable angina
21	Chronic lung disease
31	Heart failure
41	Hypertension
51	Ischaemic: non-haemorrhagic cerebral infarction
52	Haemorrhagic: intracerebral haemorrhage
61	Peripheral artery disease
62	Aortic aneurysm
63	Renal artery stenosis
71	Sleep apnoea
81	Previous myocardial infarction
91	Atrial fibrillation
92	Other dysrhythmia or conductive disorder
93	Left ventricular hypertrophy
99	Not stated/inadequately described
	Value 11 12 13 21 31 41 51 52 61 62 63 71 81 91 92 93

Collection and usage attributes

Guide for use: Angina:

> Angina (excluding unstable angina): prior existing CODE 11

This code is used where there are symptoms, which can be described as chest pain or pain in either or both shoulders, the back, neck or jaw, or other equivalent discomfort (such as tightness, gripping or squeezing) suggestive of cardiac

ischaemia, the onset of which occured more than two weeks ago.

CODE 12 Angina (excluding unstable angina): new onset

This code is used where there are symptoms which can be described as chest pain or pain in either or both shoulders, the back, neck or jaw, or other equivalent discomfort (such as tightness, gripping or squeezing) suggestive of cardiac ischaemia; the onset of which occured two or less weeks ago.

CODE 13 Unstable angina

This code is used where a person has experienced new onset or prior existing angina (described as chest pain or pain in either or both shoulders, the back, neck or jaw, or other equivalent discomfort (such as tightness, gripping or squeezing)), which is increasing in severity, duration or frequency.

Chronic lung disease:

CODE 21 Chronic lung disease

This code is used where there is a history or symptoms suggestive of chronic lung disease.

Heart failure:

CODE 31 Heart failure

This code is used where a person has past or current symptoms of heart failure (typically breathlessness or fatigue), either at rest or during physical activity and/or signs of pulmonary or peripheral congestion suggestive of cardiac dysfunction.

Hypertension:

CODE 41 Hypertension

This code is used where there is current use of pharmacotherapy for hypertension and/or clinical evidence of high blood pressure.

CODE 51 Ischaemic: non-haemorrhagic cerebral infarction

This code is used if there is history of stroke or cerebrovascular accident (CVA) resulting from an ischaemic event where the patient suffered a loss of neurological function with residual symptoms remaining for at least 24 hours.

CODE 52 Haemorrhagic: intracerebral haemorrhage

This code is used if there is history of stroke or cerebrovascular accident (CVA) resulting from a haemorrhagic event where the patient suffered a loss of neurological function with residual symptoms remaining for at least 24 hours.

Peripheral arterial disease:

CODE 61 Peripheral artery disease

This code is used where there is history of either chronic or acute occlusion or narrowing of the arterial lumen in the aorta or extremities.

CODE 62 Aortic aneurysm

This code is used where there is a history of aneurysmal dilatation of the aorta (thoracic and or abdominal).

CODE 63 Renal artery stenosis

This code is used where there is a history of functional stenosis of one or both renal arteries.

Sleep apnoea syndrome:

CODE 71 Sleep apnoea

This code is used where there is evidence of sleep apnoea syndrome (SAS) on history.

Myocardial infarction:

CODE 81 Previous myocardial infarction

This code is used where a person has previously experienced a myocardial infarction, excluding the current event that prompted this presentation to hospital. This may be supported by clinical documentation and evidenced by ECG changes or serum cardiac biomarker changes.

Other vascular conditions:

CODE 91 Atrial fibrillation

This code is used where there is a history or symptoms suggestive of atrial fibrillation.

CODE 92 Other cardiac arrhythmias or conductive disorders

This code is used where there is a history of other cardiac arrhythmias or conductive disorders.

CODE 93 Left ventricular hypertrophy

This code is used where there is a history or symptoms suggestive of left ventricular hypertrophy.

Relational attributes

Related metadata references:

Supersedes Concurrent acute coronary syndrome clinical condition code NN Health, Superseded 01/10/2008

Data elements implementing this value domain:

Person—acute coronary syndrome related medical history, code NN

Health, Standard 01/10/2008