Emergency department stay—additional diagnosis, code X(18)
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Emergency department stay—additional diagnosis, code X(18)

Identifying and definitional attributes

Metadata item type: Data Element

Short name: ED additional diagnosis code

METEOR identifier: 449798

Registration status: Independent Hospital Pricing Authority, Superseded 31/10/2012

Definition: The condition or complaint coexisting with the <u>emergency department</u> principal

diagnosis during a patient's attendance to the emergency department, as

represented by a code.

Data Element Concept: Emergency department stay—additional diagnosis

Value Domain: <u>Diagnosis code X(18)</u>

Value domain attributes

Representational attributes

Representation class: Code

Data type: String

Format: X(18)

Maximum character length: 18

Collection and usage attributes

Collection methods: The code set can be represented by the following:

ICD-10-AM - 1st edition to 7th edition

International Statistical Classification of Diseases and Related Health Problems - 10th Revision - Australian Modification. ICD-10-AM is a classification of diseases and health related problems. ICD-10-AM diagnoses codes contain three core character codes with some expansion to four and five character codes. The format for ICD-10-AM diagnoses codes is ANN{.N(N)}

ICD-9-CM - 2nd edition

International Classification of Diseases - 9th Revision - Clinical Modification. ICD-9-CM is a classification of diseases. ICD-9-CM diagnoses codes contain four character codes with some expansion to five character codes. The format for ICD-9-CM diagnoses codes is NNN.N(N)

EDRS-SNOMED CT-AU

Systematized Nomenclature of Medicine - Clinical Terms - Australian version (Emergency Department Reference Set). SNOMED CT-AU is a clinical terminal or within the case and traction of the control of t

terminology which uses a structured vocabulary to describe the care and treatment of patients. There is a subset for Emergency Department care. The format for

EDRS-SNOMED CT-AU diagnoses codes is NNNNNN(NNN).

Other term sets or code sets developed for use specifically to record diagnosis in an emergency department setting.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Data element attributes

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Relational attributes

Related metadata references:

Has been superseded by Emergency department stay—additional diagnosis, code

X[X(8)]

Health, Superseded 13/11/2014

Independent Hospital Pricing Authority, Standard 31/10/2012

See also Emergency department stay—diagnosis classification type, code N.N.

Independent Hospital Pricing Authority, Superseded 31/10/2012

Specifications:

Independent Hospital Pricing Authority, Superseded 31/10/2012

Implementation start date: 01/07/2012 Implementation end date: 30/06/2013

Conditional obligation: Only required to be reported when an additional

diagnosis was present for the emergency department stay.