Episode of admitted patient care—clinical assessment only indicator, yes/no/unknown code N

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# Episode of admitted patient care—clinical assessment only indicator, yes/no/unknown code N

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| Identifying and definitional attributes |
| Metadata item type: | Data Element |
| Short name: | Clinical assessment only indicator |
| Synonymous names: | Assessment only indicator |
| METEOR identifier: | 471807 |
| Registration status: | [Independent Hospital Pricing Authority](https://meteor.aihw.gov.au/RegistrationAuthority/3), Standard 31/10/2012 |
| Definition: | An indicator of whether an episode of admitted patient care resulted in the patient undergoing a clinical assessment only, as represented by a code. |
| Data Element Concept: | [Episode of admitted patient care—clinical assessment only indicator](https://meteor.aihw.gov.au/content/471805)  |
| Value Domain: | [Yes/no/unknown/not stated/inadequately described code N](https://meteor.aihw.gov.au/content/306322) |

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| Value domain attributes |
| Representational attributes |
| Representation class: | Code |
| Data type: | Number |
| Format: | N |
| Maximum character length: | 1 |
|   | **Value** | **Meaning** |
| Permissible values: | 1 | Yes |
|   | 2 | No |
| Supplementary values: | 3 | Unknown |
|   | 9  | Not stated/inadequately described  |

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| Source and reference attributes |
| Submitting organisation: | Australian Institute of Health and Welfare |

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| Data element attributes  |
| Collection and usage attributes |
| Guide for use: | An episode of care is regarded as ‘assessment only’ if a patient was seen for clinical assessment only and no treatment or further intervention was planned by the assessing clinical team.CODE 1   YesThis code is used when the patient was assessed by a clinical team but received no treatment during an episode. These episodes are usually of short duration, normally less than 3 days.CODE 2   NoThis code is used when the patient was assessed and then goes on to receive treatment.CODE 3   UnknownThis code is used when it is unknown whether the patient was seen for assessment only.CODE 9   Not stated/inadequately describedThis code is used when it is has not been reported whether the patient was seen for assessment only. |
| Source and reference attributes |
| Submitting organisation: | Independent Hospital Pricing Authority |
| Relational attributes |
| Related metadata references: | Has been superseded by [Episode of admitted patient care—clinical assessment only indicator, yes/no/unknown/not stated/inadequately described code N](https://meteor.aihw.gov.au/content/550492)       [Health](https://meteor.aihw.gov.au/RegistrationAuthority/12), Standard 11/04/2014 |
| Implementation in Data Set Specifications: | [Activity based funding: Admitted sub-acute and non-acute hospital care DSS 2013-2014](https://meteor.aihw.gov.au/content/496358)       [Independent Hospital Pricing Authority](https://meteor.aihw.gov.au/RegistrationAuthority/3), Standard 11/10/2012***Implementation start date:*** 01/07/2013***Implementation end date:*** 30/06/2014***Conditional obligation:*** Only required to be reported for episodes of admitted patient care with hospital service-care type, code N[N].N recorded as:* 2.0 rehabilitation care;
* 3.0 palliative care;
* 4.0 geriatric evaluation and management;
* 5.0 psychogeriatric care; or
* 6.0 maintenance care.

[Admitted sub-acute and non-acute care activity based funding DSS 2012-2013](https://meteor.aihw.gov.au/content/444303)       [Independent Hospital Pricing Authority](https://meteor.aihw.gov.au/RegistrationAuthority/3), Superseded 11/10/2012***Implementation start date:*** 01/07/2012***Implementation end date:*** 30/06/2013***Conditional obligation:*** Only required to be reported for episodes of care for patients with a care type of rehabilitation care, palliative care, geriatric evaluation and management, psychogeriatric care or maintenance care. |