Emergency service stay—type of visit to emergency service, code N

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Emergency service stay—type of visit to emergency service, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Type of visit to emergency service
METEOR identifier:	721956
Registration status:	Health, Superseded 20/10/2021
Definition:	The reason a patient presents to an **emergency service**, as represented by a code.
Context:	Emergency service care.
Data Element Concept:	Emergency service stay—type of visit to emergency service
Value Domain:	Emergency service visit type code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	**Meaning**
Permissible values:	1	Emergency presentation
	2	Return visit, planned
	3	Pre-arranged admission
	5	Dead on arrival

Collection and usage attributes

Guide for use:

CODE 1 Emergency presentation

This code includes attendance at the emergency service for an actual or suspected condition which is sufficiently serious to require acute unscheduled care.

This includes patients awaiting transit to another facility who receive clinical care in the emergency service, and patients for whom resuscitation is attempted.

Exclusion: Where patients are awaiting transit to another facility and do not receive clinical care in the emergency service, the patient should not be recorded.

CODE 2 Return visit, planned

This code includes a planned return to the emergency service as a result of a previous emergency service presentation (Code 1) or return visit (Code 2). The return visit may be for planned follow-up treatment, as a consequence of test results becoming available indicating the need for further treatment, or as a result of a care plan initiated at discharge.

Exclusion: Where a visit follows general advice to return if feeling unwell, this should not be recorded as a planned visit.

CODE 3 Pre-arranged admission

Where a patient presents to the emergency service for an admission to either a non-emergency service ward or other admitted patient care unit that has been arranged prior to the patient's arrival, and the patient receives clinical care in the emergency service.

Exclusion: Where a patient presents for a pre-arranged admission and only clerical services are provided by the emergency service, the patient should not be recorded.

CODE 5 Dead on arrival

This code should only be used for patients who are dead on arrival and an emergency service clinician certifies the death of the patient. This includes where the clinician certifies the death outside the emergency service (e.g. in an ambulance outside the emergency service).

Exclusion: Where resuscitation of the patient is attempted, this should be recorded as an emergency presentation (Code 1).

Note: Where Code 5 is recorded for a patient, an Episode end status Code 7 (Dead on arrival) should also be recorded.

Source and reference attributes

Submitting organisation: Independent Hospital Pricing Authority

Data element attributes

Collection and usage attributes

Comments: Required for analysis of emergency services.

Source and reference attributes

Submitting organisation: National Institution Based Ambulatory Model Reference Group

Origin: National Health Data Information Standards Committee

Relational attributes

Related metadata references:

Supersedes Emergency service stay—type of visit to emergency service, code N
Health, Superseded 18/12/2019

Has been superseded by Emergency service stay—type of visit to emergency service, code N
Health, Standard 20/10/2021

See also Emergency department stay—type of visit to emergency department, code N
Health, Superseded 20/10/2021

See also Emergency service stay—episode end status, code N
Health, Superseded 20/10/2021

Implementation in Data Set Specifications:

Emergency service care NBEDS 2020-21
Health, Superseded 05/02/2021
Implementation start date: 01/07/2020
Implementation end date: 30/06/2021

Emergency service care NBEDS 2021-22
Health, Superseded 20/10/2021
Implementation start date: 01/07/2021
Implementation end date: 30/06/2022