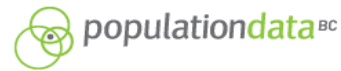


Discharge Abstracts Database (Hospital Separations)



Date range: April 1, 1985 onward

Includes discharges, transfers and deaths of in-patients from acute care hospitals in BC, including day surgeries. Fields are available in all years unless otherwise noted. Note: Files are grouped into fiscal years by separation date, not the date of admission.

Core vs. Non-Core Data

Core Data: Some BC Ministry of Health data sets available through PopData and HDPBC are called 'Core Data'. A Core Data set is a standardized 'bundle' of commonly requested variables. A Core Data set may not include ALL the variables available in the data set. For example, some Core Data variables, such as geography or organisational codes, are suppressed to meet privacy legislation requirements.

Non-Core Data: Non-Core Data are variables that are **NOT** included in the standardized Core Data set. Non-Core Data is available for request as an **addition** to the Core Data set.

For the majority of DARs, requesting access to Core Data ONLY may make the data access approval process quicker and may expedite data provision. Data requests that include Non-Core Data will be subject to regular rather than expedited processes, both for application review and data provisioning.

ALL AVAILABLE VARIABLES

Name	Core vs Non-Core	Description
FILEYEAR	Core	Fiscal Year of Discharge
BATPD	Core	Fiscal Period of Discharge.
HOSPPROV	Core	Province Code (Location of Hospital) identifies the province or territory of patient hospitalization.
HOSP	Core	BC hospital number is a unique three-digit number identifying the facility submitting the abstract.
OOPHOSP	Core	Institution Number for Out of Province (OOP) Facilities.
FROMPROV	Core	Identifies the province in which the from hospital is located. _x000D_
HOSPFROM	Core	BC Hospital Number Transferred From. Identifies the hospital a patient was transferred from when they require further treatment.
TOPROV	Core	Identifies the province in which the "to" hospital is located. _x000D_
HOSPSTO	Core	The Transferred to Hospital Code identifies the hospital a patient was transferred to when they require further treatment.
PRIV_HOSP	Core	The Private Hospital Number field is a facility identifier for BC private clinics.
CARE_LEVEL	Core	Level of Care indicates the level of care provided to the patient (e.g., Acute Care, Day Surgery).
BCLVLFRM	Core	BC Care Level Transferred From. BC transfer level codes indicating the care level transferred from.
BCLVLTO	Core	BC Care Level Transferred To. BC transfer level codes indicating the level of care a patient was transferred to.
A_INSTTP	Core	Analytical Institution Type. A code identifying the level of care of the facility for analytical purposes.
ADMIT	Core	Admission Category indicates the urgency of the admission (e.g., elective, emergency).
ENTRY	Core	Entry Code indicates the patient's type or mode of entry to a facility.
ADDATE	Core	Admission Date. The calendar date that the patient was formally admitted as a patient to the facility.
ADTIME	Core	Admission Time. The time of day the patient was admitted to the facility.
AMBULANC	Core	Ambulance Type/Code indicates whether or not a patient was brought to the facility by ambulance and the type of ambulance used.
EDREGDATE	Core	Emergency Department Registration Date indicates the calendar date that the patient was registered in the Emergency Department.
EDREGTIME	Core	Emergency Department Registration Time indicates the time that the patient was registered in the Emergency Department.
LEFTERDT	Core	Left Emergency Room (ER) Date.
LEFTERTM	Core	Left Emergency Room (ER) Time.
NACRS_CASE_ID	Core	NACRS Record ID for related record.
SEPDISP	Core	Discharge (Separation) Disposition refers to the status of patient upon leaving hospital (includes death status).
SEPDATE	Core	Discharge (Separation) Date. The date that the patient was discharged (separated) from the hospital or facility.
SEPTIME	Core	Discharge (Separation) Time. Represents the time of day the patient was discharged from the facility.
DAD_CASE_ID	Core	Discharge Record ID.
POPDATA_ID*	Core	*For PopData internal use*
PATNUM	Core	Patient identification assigned by each facility
HCNPROV	Core	Province issuing Health Care Number (HCN). This field denotes the province (or territory) issuing the patient HCN.
GENDER	Core	Sex Code indicates the patient's gender.
DOB	Core	Birth date of patient (Year and Month only).
AGEYRS	Core	Age in Years. This field represents the patient's age in years.

AGEMTH	Core	Age in months and is used for patients less than 1 year old_x000D_
AGE10	Core	Age Group 10 is a grouping of 21- 5 year age groups and is the grouping most commonly used for reporting_x000D_
LHA3	Core	The Local Health Area (LHA) is the smallest geographical unit of analysis and is based on the postal code of the patient. The LHA is derived from the Translation Master File (TMF) for valid BC postals codes only.
POSTAL	Core	Patient Postal Code. First 3 digits only.
RFP	Core	The Responsibility for Payment field indicates the party responsible for a patient's hospitalization payment.
CLNT_WEIGHT	Core	Client's Weight in kilograms_x000D_
TDAYS	Core	Total Length of Stay represents the total number of days the patient was hospitalized from admission to discharge.
DAY_SURG_HRS	Core	Day Surgery Hours (from Grouper)
AR_DAYS	Core	Acute/Rehab Days is a BC Ministry of Health calculated value for the number of days spent in Acute and Rehab levels only.
ALCDAYS	Core	Alternate Level of Care (ALC) Days identifies the number of ALC days as a portion of the total days of a patient's hospitalization. An ALC patient is one who has finished the acute care phase of treatment but remains in an acute care bed waiting placement in an extended care unit, nursing home, home care program, etc.
REHABDAY	Core	Rehabilitation Days indicates the number of days a patient spent in the rehabilitation care unit in an Acute Care Hospital.
BURNDAYS	Core	Burn ICU Days. Number of days spent in a Burn Intensive Care Nursing Unit.
CARDDAYS	Core	Cardiac ICU Days. Number of days spent in a Cardiac Intensive Care Nursing Unit.
CBDDAYS	Core	Chronic Behaviour Disorder (CBD) Unit Days. The number of days associated with a CBD Unit.
COMBDAYS	Core	Combined Medical/Surgical Intensive Care Nursing Unit Days. The number of days spent in combined Medical/Surgical Intensive Care Nursing Unit.
COMBSDUDAYS	Core	Combined Medical/Surgical Step Down Unit Days.
CCUDAYS	Core	Coronary Intensive Care Unit (CCU) Days. Indicates the number of days spent in the Coronary Intensive Care Nursing Unit (CCU).
ICUDAYS	Core	Intensive Care Unit (ICU) Days indicates the total number of days spent in all Special Care Units (SCU) during the patients hospital stay.
MEDDAYS	Core	Medical Intensive Care Unit (ICU) Days indicates the number of days spent in a medical intensive care nursing unit.
NEONDAYS	Core	Neonatal Intensive Care Unit (ICU) Days represents the number of days spent in the neonatal intensive care nursing unit.
NEURDAYS	Core	Neurosurgery ICU Days. Indicates the number of days spent in the Neurosurgery Intensive Care Nursing Unit.
NICUL1DAYS	Core	Number of days spent in Neonatal Intensive Care Unit (NICU), Level I.
NICUL2DAYS	Core	Neonatal Intensive Care Nursing Unit (NICU) Level 2 days. The number of days spent in a Level 2 NICU.
NICUL3DAYS	Core	Neonatal Intensive Care Nursing Unit (NICU) Level 3 days. The number of days spent in a Level 3 NICU.
PEDIDAYS	Core	Paediatric Intensive Care Unit (ICU) Days indicates the number of days spent in the pediatric intensive care nursing unit.
RESPDAYS	Core	The Respiriology Intensive Care Unit (ICU) Days field indicates the number of days spent in Respiriology Intensive Care Nursing Unit.
SURGDAYS	Core	Surgical Intensive Care Unit (ICU) Days indicates the number of days spent in the Surgical Intensive Care Nursing Unit.
TRAUDAYS	Core	Trauma Intensive Care Unit (ICU) days indicates the number of days spent in the Trauma Intensive Care Nursing Unit.
SMEDDAYS	Core	Step-down Medical Unit Days indicates the number of days spent in the Step-down Medical Unit.
SSRGDAYS	Core	Number of days spent in the Step-down Surgical Unit
ERTIME	Core	Time spent in Emergency (in hours) from the time the decision to admit was made until the patient left for an inpatient bed.
PATSERV	Core	Main Patient Service indicates the hospital-assigned service most responsible for the care of the patient. It is based on the most responsible diagnosis code and is not necessarily the first service that the patient was assigned to.
PATSUBSV	Core	A code which further defines the Main Patient Service or differentiates between types of Patients treated within the Main Patient Service.
SERV1	Core	A Patient Service where the patient spent part of his/her hospital stay in addition to the main patient service (patserv). The service transfer field provides a means of recording another patient service at the same level of care (level).
SERV2	Core	Second service transfer service. An additional Patient Service where the patient spent part of his/her hospital stay.
SERV3	Core	Third service transfer service. An additional Patient Service where the patient spent part of his/her hospital stay.
SUBSRV1	Core	A code which further defines the Patient Service Transfer.
SUBSRV2	Core	Second service transfer sub-service. A code which further defines the Patient Service Transfer.
SUBSRV3	Core	Third service transfer sub-service. A code which further defines the Patient Service Transfer.
DAYS1	Core	The Number of days associated with a patient service which is not determined to be the main patient service.
DAYS2	Core	Second service transfer days. The # of days associated with the additional patient service.
DAYS3	Core	Third service transfer days. The # of days associated with the additional patient service.
SURGCASE2	Core	Surgical Case Flag, Version 2. A flag to indicate surgical cases (version 2).

CHARLSON_INDEX	Core	The Charlson Index is an overall comorbidity score that has been shown to be highly associated with mortality and has been widely used in clinical research.
DSC	Core	Diagnostic Short Codes (DSC) are a diagnostic grouping system based on the primary ICD10-CA diagnostic code.
DIAGX1	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX2	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX3	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX4	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX5	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX6	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX7	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX8	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX9	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX10	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX11	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX12	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX13	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX14	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX15	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX16	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX17	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX18	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX19	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX20	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX21	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX22	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX23	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX24	Core	Diagnosis codes (ICD-10-CA)[1-25].
DIAGX25	Core	Diagnosis codes (ICD-10-CA)[1-25].
DTYPX1	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX2	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX3	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX4	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX5	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX6	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX7	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX8	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX9	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX10	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX11	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX12	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX13	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX14	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX15	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX16	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX17	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX18	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX19	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX20	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX21	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX22	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX23	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX24	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DTYPX25	Core	Diagnosis Type is a code which determines the relationship of the Diagnosis (ICD10-CA Diagnosis) to the patient's hospitalization.
DPREFX1	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility defined expansion.
DPREFX2	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility defined expansion.

DPREFX3	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX4	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX5	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX6	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX7	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX8	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX9	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX10	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX11	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX12	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX13	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX14	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX15	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX16	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX17	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX18	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX19	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX20	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX21	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX22	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX23	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX24	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
DPREFX25	Core	A code which further distinguishes the Most Responsible ICD Diagnosis or refers to a facility <u>defined expansion</u> .
CDS00T98	Core	Injury code (ICD-10-CA ; S00 to T98). Identifies the first ICD10-CA injury code on a record (if applicable) in the range S00 to T98.
ECODEX1	Core	First ICD10-CA E-Code (Cause of Injury). The first occurrence of an ICD-10-CA Diagnostic Code (DIAGX1-25) that is an E-code (i.e., indicating a cause of injury).
INJPLACE	Core	The Place of Injury field is the first occurrence of an ICD10-CA diagnostic code (DIAGX1-25) indicating a place of injury.
RESPPHYS	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM2	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM3	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM4	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM5	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM6	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM7	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
PROVNUM8	Core	Provider (fee-for-service physician, surgeon, dentist, oral surgeon, midwife or nurse practitioner) who provided care for the patient's care during hospitalization. Up to 8 recorded.
DOC_SPEC	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVSRV2	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVSRV3	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVSRV4	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVSRV5	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVSRV6	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.

PROVSRV7	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVSRV8	Core	A code which identifies the Training or Specialty of the health care professional who provided care to the patient during hospitalization.
PROVTYP1	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP2	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP3	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP4	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP5	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP6	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP7	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
PROVTYP8	Core	A code which identifies the role of the Provider responsible for the care of the patient during hospitalization.
ISL	Core	Intervention Short List represents groupings based on primary Canadian Classification of Health Interventions (CCI) codes.
ICODE1	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE2	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE3	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE4	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE5	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE6	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE7	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE8	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE9	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE10	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE11	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE12	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE13	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE14	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE15	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE16	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE17	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE18	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE19	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ICODE20	Core	Intervention Code (CCI). Identifies an intervention that is performed during the patient's stay. Must be a valid Canadian Classification of Health Interventions (CCI) code.
ISTAT1	Core	Intervention Status Attribute (CCI) denotes the circumstances under which the intervention was performed (e.g., revision, abandoned after onset, delayed, staged, initial, routine).
ISTAT2	Core	Intervention Status Attribute (CCI) denotes the circumstances under which the intervention was performed (e.g., revision, abandoned after onset, delayed, staged, initial, routine).

MNPATNUM	Core	Maternal/newborn chart/register number. Mother's Chart or Register # on Newborn abstract /Newborn's Chart # on Mother's abstract.
GESTDEL	Core	Clinical gestation weeks at delivery. Applicable to delivered and newborn cases only.
MHIADMIT	Core	MH Involuntary Admission Flag indicates involuntary Mental Health admission.
MHIA4	Core	Mental Health (MH) Project Field 1 Flag. A flag to indicate that a MH Involuntary Admission Form 4 is present on patient's record.
MHIAPOL	Core	Mental Health (MH) Project Field 2 Flag. MH involuntary admission in which the patient apprehended by the police.
MHIA10	Core	Mental Health Project Field 4 Flag. Indicates MH Involuntary Admission Form 10 (Warrant) is on the patient's record.
MHIA20	Core	Mental Health (MH) Project Field 5 Flag. MH Involuntary Admission Form 20 (placed on extended leave) is on the patient's record.
MHIA21	Core	Mental Health (MH) Project Field 3 Flag. Indicates that MH Involuntary Admission Form 21 (Recalled from extended leave) is on the patient's record.
ED_ARRIVAL_LEGAL_STATUS	Core	The status of the patient at the time of arrival to the ED of the reporting facility
ADMISSION_LEGAL_STATUS	Core	The legal status of the patient upon admission to hospital.
MHLEGAL	Core	A code which describes the outcome of any application for Psychiatric Assessment and to identify involuntary patients at any period during the admission._x000D_
RESTRAINT_TYPE1	Core	Identifies the use of control interventions to restrain a patient during the first 3 days of their inpatient stay
RESTRAINT_TYPE2	Core	Identifies the use of control interventions to restrain a patient during the first 3 days of their inpatient stay
RESTRAINT_TYPE3	Core	Identifies the use of control interventions to restrain a patient during the first 3 days of their inpatient stay
RESTRAINT_TYPE4	Core	Identifies the use of control interventions to restrain a patient during the first 3 days of their inpatient stay
RESTRAINT_FREQ1	Core	Identifies the amount of time restraints were used during the first 3 days of the inpatient stay
RESTRAINT_FREQ2	Core	Identifies the amount of time restraints were used during the first 3 days of the inpatient stay
RESTRAINT_FREQ3	Core	Identifies the amount of time restraints were used during the first 3 days of the inpatient stay
RESTRAINT_FREQ4	Core	Identifies the amount of time restraints were used during the first 3 days of the inpatient stay
GRPR_MTHD_LABEL	Core	Case Mix Group (CMG) Plus Grouper Methodology Year (from CMG/+ Grouper).
CMG_MCC_LABEL	Core	Major Clinical Category (MCC+). This field is based on a list of 20 major clinical categories relating to particular systems in the body. It is assigned on the basis of the Most Responsible Diagnosis, in each case.
CMG_CMG_LABEL	Core	Canadian Institute for Health Information (CIHI) Case Mix Group (CMG+). Categorizes a group of ICD10-CA codes or diagnoses that have an anticipated similar clinical course and resource requirements.
CMG_EXPCT_STAY_DAYS	Core	Canadian Institute of Health Information (CIHI) Expected Length of Stay (ELOS) Days.
GRPR_RIW	Core	Canadian Institute for Health Information (CIHI) Resource Intensity Weighting (RIW)_x000D_
CACS_MAC_LABEL	Core	CACS MAC code
CACS_CD_LABEL	Core	CACS code_x000D_
CMGP_RIW_ATPCL_LABEL	Core	Canadian Institute of Health Information (CIHI) Inpatient Resource Intensity Weighting (RIW) Atypical Code.
CREATE_DATE	Core	Create Date
CREATE_TIME	Core	Create Time
UPDATE_DATE	Core	Update Date
UPDATE_TIME	Core	Update Time
SOURCE_CREATE_DATE	Core	Source Create Date
SOURCE_CREATE_TIME	Core	Source Create Time
SOURCE_UPDATE_DATE	Core	Source Update Date
SOURCE_UPDATE_TIME	Core	Source Update Time

last updated: April 10th 2024