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## Sex

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### Identifying and definitional attributes

**Knowledgebase ID:** 002024      **Version number:** 4  
**Metadata type:** Data element

**Definition:** Sex is the biological distinction between male and female. Where there is an inconsistency between anatomical and chromosomal characteristics, sex is based on anatomical characteristics.

**Context:** Sex is a core data element in a wide range of social, labour and demographic statistics.

### Relational and representational attributes

**Data type:** Numeric      **Maximum field size:** 1  
**Representational class:** Code      **Format:** N

<b>Data domain:</b>	1	Male
	2	Female
	3	Intersex or indeterminate
	9	Not stated/inadequately described

**Guide for use:** Code 3 Intersex or indeterminate, refers to a person, who because of a genetic condition, was born with reproductive organs or sex chromosomes that are not exclusively male or female or whose sex has not yet been determined for whatever reason.

**Verification rules:** Code 3 should be confirmed if reported for people aged 90 days or greater.  
 Diagnosis and procedure codes should be checked against the national ICD-10-AM sex edits, unless the person is undergoing, or has undergone a sex change as detailed in collection methods or has a genetic condition resulting in a conflict between sex and ICD-10-AM code.

**Collection methods:** Operationally, sex is the distinction between male and female, as reported by a person or as determined by an interviewer.  
 When collecting data on sex by personal interview, asking the sex of the respondent is usually unnecessary and may be inappropriate, or even offensive. It is usually a simple matter to infer the sex of the respondent through observation, or from other cues such as the relationship of the person(s) accompanying the respondent, or first name. The interviewer may ask whether persons not present at the interview are male or female.  
 A person's sex may change during their lifetime as a result of procedures known alternatively as Sex change, Gender reassignment, Transsexual surgery, Transgender reassignment or Sexual reassignment. Throughout this process, which may be over a considerable period of time, sex could be recorded as either Male or Female.  
 In data collections that use the ICD-10-AM classification, where sex change is the reason for admission, diagnoses should include the appropriate ICD-10-AM code(s) that clearly identify that the person is

undergoing such a process. This code(s) would also be applicable after the person has completed such a process, if they have a procedure involving an organ(s) specific to their previous sex (e.g. where the patient has prostate or ovarian cancer).

Code 3 Intersex or indeterminate, is normally used for babies for whom sex has not been determined for whatever reason; should not generally be used on data collection forms completed by the respondent; and should only be used if the person or respondent volunteers that the person is intersex or where it otherwise becomes clear during the collection process that the individual is neither male nor female.

Code 9 is not to be used on primary collection forms. It is primarily for use in administrative collections when transferring data from data sets where the item has not been collected.

**Related metadata:** Supersedes previous data element Sex, version 3.  
Is used in the derivation of Diagnosis related group, version 1.

**Information model link:** NHIM Demographic characteristic

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
NMDS – Admitted patient care	01/07/2004	
NMDS – Admitted patient mental health care	01/07/2004	
NMDS – Admitted patient palliative care	01/07/2004	
NMDS – Alcohol and other drug treatment services	01/07/2004	
NMDS – Community mental health care	01/07/2004	
NMDS – Non-admitted patient emergency department care	01/07/2004	
NMDS – Perinatal	01/07/2004	
NMDS – Residential mental health care	01/07/2004	
DSS – Acute coronary syndrome (clinical)	04/06/2004	
DSS – Cancer (clinical)	04/06/2004	
DSS – Cardiovascular disease (clinical)	02/09/2003	
DSS – Diabetes (clinical)	02/09/2003	
DSS – Health care client identification	02/09/2003	

## Administrative attributes

**Admin. status:** CURRENT **Effective Date:** 02/09/2003

**Source organisation:** Australian Bureau of Statistics.

**Source document:** The ABS standards for the collection of Sex appear on the ABS website.  
Reference:  
<<http://www.abs.gov.au/Ausstats/abs@.nsf/StatsLibrary>>.  
Select: Other ABS Statistical Standards/Standards for Social, Labour and Demographic Variables/Demographic Variables/Sex.

**Registration authority:** National Health Information Group.  
National Community Services Information Management Group.

**Steward:**

**Comments:**

This metadata item is common to both the *National Health Data Dictionary* and the *National Community Services Data Dictionary*.

The definition for Intersex in Guide for use is sourced from the ACT Legislation (Gay, Lesbian and Transgender) Amendment Act 2003.

DSS – Diabetes (clinical):

Referring to the National Diabetes Register Statistical profile (December 2000), the sex ratio varied with age. For ages less than 25 years, numbers of males and females were similar. At ages 25–44 years, females strongly outnumbered males, reflecting the effect of gestational diabetes in women from this group. For older age groups (45–74 years), males strongly outnumber females and in the group of 75 and over, the ratio of males to females was reversed, with a substantially lower proportion of males in the population in this age group due to the higher female life expectancy. (AIHW National Mortality Database 1997/98; National Diabetes Register; Statistical Profile, December 2000).

## Source of referral to alcohol and other drug treatment service

### Identifying and definitional attributes

**Knowledgebase ID:** 000444 **Version number:** 3

**Metadata type:** Data element

**Definition:** The source from which the person was transferred or referred to the alcohol and other drug treatment service.

**Context:** Alcohol and other drug treatment services. Source of referral is important in assisting in the analyses of inter-sectoral patient/client flow and for health care planning.

### Relational and representational attributes

**Data type:** Numeric **Maximum field size:** 2

**Representational class:** Code **Format:** NN

<b>Data domain:</b>	01	Self
	02	Family member/friend
	03	Medical practitioner
	04	Hospital
	05	Mental health care service
	06	Alcohol and other drug treatment service
	07	Other community/health care service
	08	Correctional service
	09	Police diversion
	10	Court diversion
	98	Other
	99	Not stated/inadequately described

**Guide for use:**

Code 03 Medical practitioner, includes medical specialists, vocationally registered general practitioners, vocationally registered general practitioner trainees and other primary-care medical practitioners in private practice.

Code 04 Hospital, includes public and private hospitals, hospitals specialising in dental, ophthalmic aids and other specialised medical or surgical care, satellite units managed and staffed by a hospital, emergency departments of hospitals, and mothercraft hospitals. Excludes psychiatric hospitals, psychiatric units and drug and alcohol units located within or operating from hospitals, and outpatient clinics (see codes 05-07).

Code 05 Mental health care service, includes both residential and non-residential services. Includes psychiatric hospitals and psychiatric units within and outside of hospitals.

- Code 06 Alcohol and other drug treatment service, includes both residential and non-residential services. Includes drug and alcohol units within and outside of hospitals.
- Code 07 Other community/health care service, includes outpatient clinics and aged care facilities.
- Code 09 Police diversion, this code should be used when a person detained for a minor drug offence is formally referred to treatment by the police in order to divert the offender from the criminal justice pathway.
- Code 10 Court diversion, this code refers to the diversion of an offender into drug education, assessment and treatment at the discretion of a magistrate. This may occur at the point of bail or prior to sentencing.
- Code 98 Other, includes persons referred under a legislative act (other than Drug Diversion Act) e.g. Mental Health Act.

**Verification rules:****Collection methods:**

**Related metadata:** Supersedes previous data element Source of referral to alcohol and other drug treatment service, version 2.

**Information model link:** NHIM Request for/entry into service event

**Data set specifications:**

NMDS – Alcohol and other drug treatment services

**Start date**      **End date**

01/07/2004

**Administrative attributes**

**Admin. status:** CURRENT      **Effective Date:** 14/11/2003

**Source organisation:**

**Source document:**

**Registration authority:** National Health Information Group.

**Steward:**

**Comments:**

## Status of the baby

### Identifying and definitional attributes

**Knowledgebase ID:** 000159      **Version number:** 1  
**Metadata type:** Data element

<b>Definition:</b>	Status of the baby at birth.
<b>Context:</b>	Perinatal statistics: essential to analyse outcome of pregnancy.

### Relational and representational attributes

**Data type:** Numeric      **Maximum field size:** 1  
**Representational class:** Code      **Format:** N

<b>Data domain:</b>	1	Live birth
	2	Stillbirth (fetal death)
	9	Not stated

**Guide for use:**

Live birth is the complete expulsion or extraction from its mother of a product of conception, irrespective of the duration of the pregnancy which, after such separation, breathes or shows any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles, whether or not the umbilical cord has been cut or the placenta is attached; each product of such a birth is considered liveborn (World Health Organization, 1992 definition).

Stillbirth is a fetal death prior to the complete expulsion or extraction from its mother of a product of conception of 20 or more completed weeks of gestation or of 400 g or more birthweight; the death is indicated by the fact that after such separation the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles. (This is the same as the WHO definition of fetal death, except that there are no limits of gestational age or birthweight for the WHO definition.)

**Verification rules:**

**Collection methods:**

**Related metadata:**

- Relates to the data element concept Live birth, version 1.
- Relates to the data element concept Stillbirth (fetal death), version 1.
- Is qualified by the data element Apgar score at 1 minute, version 1.
- Is used in conjunction with the data element Resuscitation of baby, version 2.

**Information model link:** NHIM      Physical wellbeing

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
NMDS – Perinatal	01/07/1997	

## **Administrative attributes**

*Admin. status:* CURRENT *Effective Date:* 01/07/1996

*Source organisation:* National Perinatal Data Development Committee.

*Source document:*

*Registration authority:* National Health Information Group.

*Steward:*

*Comments:*

## Stillbirth (fetal death)

### Identifying and definitional attributes

**Knowledgebase ID:** 000160      **Version number:** 1

**Metadata type:** Data element concept

**Definition:** A fetal death prior to the complete expulsion or extraction from its mother of a product of conception of 20 or more completed weeks of gestation or of 400 g or more birthweight; the death is indicated by the fact that after such separation the fetus does not breathe or show any other evidence of life, such as beating of the heart, pulsation of the umbilical cord, or definite movement of voluntary muscles.

**Context:** Perinatal.

### Relational and representational attributes

**Data type:**      **Maximum field size:**

**Representational class:**      **Format:**

**Data domain:**

**Guide for use:**

**Verification rules:**

**Collection methods:**

**Related metadata:**

**Information model link:** NHIM      Death event

### Administrative attributes

**Admin. status:** CURRENT      **Effective Date:** 01/07/1996

**Source organisation:** National Perinatal Data Development Committee.

**Source document:**

**Registration authority:** National Health Information Group.

**Steward:**

**Comments:** The World Health Organization definition of live birth, and the legal definition used in Australian states and Territories, do not specify any lower limit for gestational age or birthweight. In practice, liveborn fetuses of less than 20 weeks' gestation are infrequently registered as live births. In analysing data from the perinatal collections, it is recommended that the same criteria of gestational age and birthweight should be used for live births and stillbirths. Births for which gestational age and birthweight have not been recorded (usually occurring outside hospitals) should be included in the perinatal collections if it seems likely

that the criteria have been met.

Terminations of pregnancy performed at gestational ages of 20 or more weeks should be included in perinatal collections and should be recorded either as stillbirths or, in the unlikely event of showing evidence of life, as live births.

## Suburb/town/locality name

### Identifying and definitional attributes

**Knowledgebase ID:** 002026      **Version number:** 2  
**Metadata type:** Data element

<b>Definition:</b>	The full name of the general locality containing the specific address.
<b>Context:</b>	In conjunction with the data element Postcode – Australia, the data element Suburb/town/locality name is included as an alternative means of reporting information about the geographic location of the residence of a client, or an agency/establishment or where an event occurred. The preferred standard for reporting this information is by using a statistical local area (SLA) in conjunction with a state/territory code. However, as some agencies may have difficulty allocating SLA codes to the residential locations of their clients without more computerised assistance than is currently available to them, agencies may be given the option of reporting this information by using Postcode – Australian plus Suburb/town/locality name.  Suburb/town/locality name may also be a component of a postal address.

### Relational and representational attributes

**Data type:** Alphabetic      **Maximum field size:** 50  
**Representational class:** Text      **Format:** A(50)

<b>Data domain:</b>	Suburb/Town/Locality, which may be a town, city, suburb or commonly used location name such as a large agricultural property or Aboriginal community.
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**Guide for use:** The Australian Bureau of Statistics has suggested that a maximum field length of 50 characters should be sufficient to record the vast majority of locality names.

This item may be used to describe the location of person, organisation or event. It can be a component of a street or postal address.

#### Verification rules:

**Collection methods:** Enter 'Unknown' when the locality name or geographic area for a person or event is not known.  
Enter 'No fixed address' when a person has no fixed address or is homeless.

**Related metadata:** Supersedes previous data element Suburb/town/locality, version 1.  
Is used in the derivation of Postal delivery point identifier, version 2.

**Information model link:** NHIM      Address element

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
DSS – Health care client identification	02/09/2003	

## Administrative attributes

<b><i>Admin. status:</i></b>	CURRENT	<b><i>Effective Date:</i></b>	02/09/2003
<b><i>Source organisation:</i></b>	Health Data Standards Committee. National Community Services Data Committee.		
<b><i>Source document:</i></b>	Standards Australia 2002. Australian Standard AS5017 – 2002 Health Care Client Identification. Sydney: Standards Australia.		
<b><i>Registration authority:</i></b>	National Health Information Group. National Community Services Information Management Group.		
<b><i>Steward:</i></b>			
<b><i>Comments:</i></b>	This metadata item is common to both the <i>National Health Data Dictionary</i> and the <i>National Community Services Data Dictionary</i> .		

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## Telephone number

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### Identifying and definitional attributes

**Knowledgebase ID:** 002027      **Version number:** 2  
**Metadata type:** Data element

<b>Definition:</b>	Person or organisation contact telephone number.
<b>Context:</b>	Concerned with the use of person identification data. For organisations that create, use or maintain records on people. Organisations should use this standard, where appropriate, for collecting data when registering people. The positive and unique identification of people is a critical event in service delivery, with direct implications for the safety and quality of care delivered by health and community services.

### Relational and representational attributes

**Data type:** Alphanumeric      **Maximum field size:** 40  
**Representational class:** Text      **Format:** AN(40)

<b>Data domain:</b>	Numbers and spaces only.
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**Guide for use:** More than one phone number may be recorded as required. Each phone number should have an appropriate 'Telephone number type' code assigned.

Record the full phone number (including any prefixes) with no punctuation (hyphens or brackets).

**Verification rules:** Numbers and spaces only.

**Collection methods:** Prefix plus telephone number:  
Record the prefix plus telephone number. The default should be the local prefix with an ability to overtyping with a different prefix.  
For example, 08 8226 6000 or 0417 123456.

**Punctuation:**

Do not record punctuation.

For example, (08) 8226 6000 or 08-8226 6000 would not be correct.

**Unknown:**

Leave the field blank.

**Related metadata:** Supersedes previous data element Telephone number, version 1.  
Is qualified by data element Telephone number type, version 2.

**Information model link:** NHIM      Address element

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
DSS – Health care client identification	02/09/2003	

## Administrative attributes

<b><i>Admin. status:</i></b>	CURRENT	<b><i>Effective Date:</i></b>	02/09/2003
<b><i>Source organisation:</i></b>	Standards Australia. Health Data Standards Committee. National Community Services Data Committee.		
<b><i>Source document:</i></b>	Standards Australia 2002. Australian Standard AS5017 – 2002 Health Care Client Identification. Sydney: Standards Australia.		
<b><i>Registration authority:</i></b>	National Health Information Group. National Community Services Information Management Group.		
<b><i>Steward:</i></b>			
<b><i>Comments:</i></b>	This metadata item is common to both the <i>National Health Data Dictionary</i> and the <i>National Community Services Data Dictionary</i> .		

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## Telephone number type

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### Identifying and definitional attributes

**Knowledgebase ID:** 002028      **Version number:** 2  
**Metadata type:** Data element

<b>Definition:</b>	A code representing a type of telephone number.
<b>Context:</b>	Concerned with the use of person identification data. For organisations that create, use or maintain records on people. Organisations should use this standard, where appropriate, for collecting data when registering people. The positive and unique identification of people is a critical event in service delivery, with direct implications for the safety and quality of care delivered by health and community services.

### Relational and representational attributes

**Data type:** Alphabetic      **Maximum field size:** 1  
**Representational class:** Code      **Format:** A

<b>Data domain:</b>	B	Business or work
	H	Home
	M	Personal mobile
	N	Contact number (not own)
	O	Business or work mobile
	T	Temporary

**Guide for use:** Where more than one telephone number has been recorded, then each telephone number should have the appropriate Telephone number type code assigned.

**Verification rules:**

**Collection methods:**

**Related metadata:** Supersedes the previous data element Telephone number type, version 1.

**Information model link:** NHIM      Address element

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
DSS – Health care client identification	02/09/2003	

### Administrative attributes

**Admin. status:** CURRENT      **Effective Date:** 02/09/2003

**Source organisation:** Standards Australia.  
 Health Data Standards Committee.  
 National Community Services Data Committee.

- Source document:** Standards Australia 2002. Australian Standard AS5017 – 2002 Health Care Client Identification. Sydney: Standards Australia.
- Registration authority:** National Health Information Group.  
National Community Services Information Management Group.
- Steward:**
- Comments:** This metadata item is common to both the *National Health Data Dictionary* and the *National Community Services Data Dictionary*.

## Treatment delivery setting for alcohol and other drugs

### Identifying and definitional attributes

**Knowledgebase ID:** 000646      **Version number:** 2  
**Metadata type:** Data element

<b>Definition:</b>	The main physical setting in which the type of treatment that is the principal focus of their alcohol and other drug treatment episode is actually delivered to a client, irrespective of whether or not this is the same as the usual location of the service provider.
<b>Context:</b>	Alcohol and other drug treatment services. Required to identify the settings in which treatment is occurring, allowing for trends in treatment patterns to be monitored.

### Relational and representational attributes

**Data type:** Numeric      **Maximum field size:** 1  
**Representational class:** Code      **Format:** N

<b>Data domain:</b>	1	Non-residential treatment facility
	2	Residential treatment facility
	3	Home
	4	Outreach setting
	8	Other

**Guide for use:** Only one code to be selected at the end of the alcohol and other drug treatment episode. Agencies should report the setting in which most of the main type of treatment (as reported in Main treatment type for alcohol and other drugs) was received by the client during the treatment episode.

Code 1 Non-residential treatment facility, refers to any non-residential centre that provides alcohol and other drug treatment services, including hospital outpatient services and community health centres.

Code 2 Residential treatment facility, refers to community-based settings in which clients reside either temporarily or long-term in a facility that is not their home or usual place of residence to receive alcohol and other drug treatment. This does not include ambulatory situations, but does include therapeutic community settings.

Code 3 Home, refers to the client's own home or usual place of residence.

Code 4 Outreach setting, refers to an outreach environment, excluding a client's home or usual place of residence, where treatment is provided. An outreach environment may be any public or private location that is not covered by codes 1-3. Mobile/outreach alcohol and other drug treatment service providers would usually provide treatment within this setting.

**Verification rules:****Collection methods:**

**Related metadata:** Supersedes the previous data element Treatment delivery setting for alcohol and other drugs, version 1.  
Related to the data element Main treatment type for alcohol and other drugs, version 1.

**Information model link:** NHIM      Address element

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
NMDS – Alcohol and other drug treatment services	01/07/2004	

**Administrative attributes**

**Admin. status:** CURRENT      **Effective Date:** 14/11/2003

**Source organisation:** Intergovernmental Committee on Drugs National Minimum Data Set Working Group.

**Source document:**

**Registration authority:** National Health Information Group.

**Steward:**

**Comments:**

## Treatment episode for alcohol and other drugs

### Identifying and definitional attributes

**Knowledgebase ID:** 000647      **Version number:** 2

**Metadata type:** Data element concept

**Definition:** The period of contact, with defined dates of commencement and cessation, between a client and a treatment provider or team of providers in which there is no change in the Main treatment type or Principal drug of concern, and there has not been a non-planned absence of contact for greater than three months.

**Context:** Alcohol and drug treatment services. This concept is required to provide the basis for a standard approach to recording and monitoring patterns of service utilisation by clients.

### Relational and representational attributes

**Data type:**      **Maximum field size:**

**Representational class:**      **Format:**

**Data domain:**

**Guide for use:** A treatment episode must have a defined Date of commencement of treatment episode for alcohol and other drugs and a Date of cessation of treatment episode for alcohol and other drugs.

A treatment episode can have only one Main treatment type for alcohol and other drugs and only one Principal drug of concern. If the Main treatment or Principal drug changes then the treatment episode is closed and a new treatment episode is opened.

A treatment episode may also be considered closed (ceased) if there is a change in the treatment delivery setting or the service delivery outlet. Where the change reflects a substantial alteration in the nature of the treatment episode, for instance where an agency operates in more than one treatment setting (or outlet) they may consider that a change from one setting (or outlet), to another necessitates closure of one episode and commencement of a new one.

**Verification rules:**

**Collection methods:** Is taken as the period starting from the date of commencement of treatment and ending at the date of cessation of treatment episode.

**Related metadata:** Supersedes the previous data element Treatment episode for alcohol and other drugs, version 1.

Relates to the data element Main treatment type for alcohol and other drugs, version 1.

Relates to the data element Treatment delivery setting for alcohol and other drugs, version 2.

Relates to the data element Date of commencement of treatment episode for alcohol and other drugs, version 1.

Relates to the data element Date of cessation of treatment episode for a alcohol and other drugs, version 2.

Relates to the data element concept Commencement of treatment episode for alcohol and other drugs, version 2.

Relates to the data element concept Cessation of treatment episode for alcohol and other drugs, version 2.

**Information model link:** NHIM Address element

## Administrative attributes

**Admin. status:** CURRENT **Effective Date:** 14/11/2003

**Source organisation:** Intergovernmental Committee on Drugs National Minimum Data Set Working Group.

**Source document:**

**Registration authority:** National Health Information Group.

**Steward:**

**Comments:**

## Vascular history

### Identifying and definitional attributes

**Knowledgebase ID:** 000676      **Version number:** 1  
**Metadata type:** Data element

**Definition:** Describes the vascular history of the person.

**Context:** Public health, health care and clinical settings:  
 The vascular history of the patient is important as an element in defining future risk for a cardiovascular event and as a factor in determining best practice management for various cardiovascular risk factor(s).  
 It may be used to map vascular conditions, assist in risk stratification and link to best practice management.

### Relational and representational attributes

**Data type:** Numeric      **Maximum field size:** 2  
**Representational class:** Code      **Format:** NN

**Data domain:**

01	Myocardial infarction
02	Unstable angina pectoris
03	Angina
04	Heart failure
05	Atrial fibrillation
06	Other dysrhythmia or conductive disorder
07	Rheumatic heart disease
08	Non-rheumatic valvular heart disease
09	Left ventricular hypertrophy
10	Stroke
11	Transient ischaemic attack
12	Hypertension
13	Peripheral vascular disease (includes abdominal aortic aneurism)
14	Deep vein thrombosis
15	Other atherosclerotic disease
16	Carotid stenosis
17	Vascular renal disease
18	Vascular retinopathy (hypertensive)
19	Vascular retinopathy (diabetic)
97	Other vascular
98	No vascular history
99	Unknown/ not stated / not specified

**Guide for use:** More than one code can be recorded.

**Verification rules:**

<b>Collection methods:</b>	Ideally, Vascular history information is derived from and substantiated by clinical documentation.
<b>Related metadata:</b>	Relates to the data element Service contact date, version 1. Is used in conjunction with the data element Date of diagnosis, version 1.
<b>Information model link:</b>	NHIM      Physical wellbeing

<b>Data set specifications:</b>	<b>Start date</b>	<b>End date</b>
DSS – Acute coronary syndrome (clinical)	04/06/2004	
DSS – Cardiovascular disease (clinical)	01/01/2003	

## Administrative attributes

<b>Admin. status:</b>	CURRENT	<b>Effective Date:</b>	01/01/2003
<b>Source organisation:</b>	Cardiovascular Data Working Group. National Centre for Classification in Health. National Data Standards for Injury Surveillance Advisory Group.		
<b>Source document:</b>	Current edition of <i>International Classification of Diseases – Tenth Revision – Australian Modification</i> . National Centre for Classification in Health, Sydney.		
<b>Registration authority:</b>	National Health Information Group.		
<b>Steward:</b>			
<b>Comments:</b>	Further work needs to be undertaken to ensure that the values in the data domain can be mapped to the current version of ICD-10-AM.		

## Waiting list category

### Identifying and definitional attributes

<b>Knowledgebase ID:</b>	000176	<b>Version number:</b>	3
<b>Metadata type:</b>	Data element		

<b>Definition:</b>	The type of elective hospital care that a patient requires.
<b>Context:</b>	<p>Admitted patients:</p> <p>Hospitals maintain waiting lists which may include patients awaiting hospital care other than elective surgery – for example, dental surgery and oncology treatments. This item is necessary to distinguish patients awaiting elective surgery (code 1) from those awaiting other types of elective hospital care (code 2).</p> <p>The waiting period for patients awaiting transplant or obstetric procedures is largely independent of system resource factors.</p>

### Relational and representational attributes

<b>Data type:</b>	Numeric	<b>Maximum field size:</b>	1
<b>Representational class:</b>	Code	<b>Format:</b>	N

<b>Data domain:</b>	1	Elective surgery
	2	Other

<b>Guide for use:</b>	<p>Elective surgery comprises elective care where the procedures required by patients are listed in the surgical operations section of the Medicare Benefits Schedule, with the exclusion of specific procedures frequently done by non-surgical clinicians.</p> <p>Elective care is care that, in the opinion of the treating clinician, is necessary and admission for which can be delayed for at least twenty-four hours.</p> <p>Patients awaiting the following procedures should be classified as Code 2, Other:</p> <ul style="list-style-type: none"> <li>- organ or tissue transplant procedures</li> <li>- procedures associated with obstetrics (e.g. elective caesarean section, cervical suture)</li> <li>- cosmetic surgery, i.e. when the procedure will not attract a Medicare rebate</li> <li>- biopsy of:             <ul style="list-style-type: none"> <li>• kidney (needle only)</li> <li>• lung (needle only)</li> <li>• liver and gall bladder (needle only)</li> </ul> </li> <li>- bronchoscopy (including fibre-optic bronchoscopy)</li> <li>- peritoneal renal dialysis; haemodialysis</li> <li>- colonoscopy</li> <li>- endoscopic retrograde cholangio-pancreatography (ERCP)</li> </ul>
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- endoscopy of:
  - biliary tract
  - oesophagus
  - small intestine
  - stomach
- endovascular interventional procedures
- gastroscopy
- miscellaneous cardiac procedures
- oesophagoscopy
- panendoscopy (except when involving the bladder)
- proctosigmoidoscopy
- sigmoidoscopy
- anoscopy
- urethroscopy and associated procedures
- dental procedures not attracting a Medicare rebate
- other diagnostic and non-surgical procedures.

These procedure terms are also defined by the current edition of ICD-10-AM (*International Classification of Diseases – Tenth Revision – Australian Modification*, National Centre for Classification in Health, Sydney) codes which are listed under Comments below. This coded list is the recommended, but optional, method for determining whether a patient is classified as requiring elective surgery or other care.

All other elective surgery should be included in waiting list Code 1 – elective surgery.

**Verification rules:**

**Collection methods:**

**Related metadata:**

Supersedes previous data element Waiting list category – ICD-9-CM code, version 2.

Relates to the data element concept Elective care, version 1.

Is used in conjunction with the data element Patient listing status, version 3.

Is supplemented by the data element Indicator procedure, version 3.

**Information model link:**

NHIM Request for/entry into service event

**Data set specifications:**

NMDS – Elective surgery waiting times

**Start date**      **End date**

01/07/1999

## Administrative attributes

**Admin. status:**

CURRENT

**Effective Date:** 01/01/1995

**Source organisation:**

Hospital Access Program Waiting Lists Working Group.  
Waiting Times Working Group.  
Health Data Standards Committee.

<b>Source document:</b>	Current edition of the <i>International Classification of Diseases – Tenth Revision – Australian Modification</i> . National Centre for Classification in Health, Sydney.
<b>Registration authority:</b>	National Health Information Group.
<b>Steward:</b>	
<b>Comments:</b>	<p>The table of ICD-10-AM procedure codes was prepared by the National Centre for Classification in Health. Some codes were excluded from the list on the basis that they are usually performed by non-surgeon clinicians. A more extensive and detailed listing of procedure descriptors is under development. This will replace the list in the Guide for use above, to facilitate more readily the identification of the exclusions when the list of codes is not used.</p> <p>ICD-10-AM CODES FOR THE EXCLUDED PROCEDURES:</p> <p>Organ or tissue transplant:</p> <p>90172-00 [555] 90172-01 [555] 90204-00 [659] 90204-01 [659] 90205-00 [660] 90205-01 [660] 13700-00 [801] 13706-08 [802] 13706-00 [802] 13706-06 [802] 13706-07 [802] 13706-09 [802] 13706-10 [802] 30375-21 [817] 90317-00 [954] 90324-00 [981] 36503-00 [1058] 36503-01 [1058] 14203-01 [1906]</p> <p>Procedures associated with obstetrics:</p> <p>16511-00 [1274] Obstetric Blocks [1330] to [1345] and [1347]</p> <p>Biopsy (needle) of:</p> <ul style="list-style-type: none"> <li>- kidney: 36561-00 [1047]</li> <li>- lung: 38412-00 [550]</li> <li>- liver and gall bladder: 30409-00 [953] 30412-00 [953] 90319-01 [951] 30094-04 [964]</li> </ul> <p>Bronchoscopy:</p> <p>41889-00 [543] 41892-00 [544] 41904-00 [546] 41764-02 [416] 41895-00 [544] 41764-04 [532] 41892-01 [545] 41901-00 [545] 41898-00 [543] 41898-01 [544] 41889-01 [543] 41849-00 [520] 41764-03 [520] 41855-00 [520]</p> <p>Peritoneal renal dialysis:</p> <p>13100-06 [1061] 13100-07 [1061] 13100-08 [1061] 13100-00 [1060]</p> <p>Endoscopy of biliary tract:</p> <p>30484-00 [957] 30484-01 [957] 30484-02 [974] 30494-00 [971] 30452-00 [971] 30491-00 [958] 30491-01 [958] 30485-00 [963] 30485-01 [963] 30452-01 [958] 30450-00 [959] 30452-02 [959] 90349-00 [975]</p> <p>Endoscopy of oesophagus:</p> <p>30473-03 [850] 30473-04 [861] 41822-00 [861] 30478-11 [856] 41819-00 [862] 30478-10 [852] 30478-13 [861] 41816-00 [850] 41822-00 [861] 41825-00 [852] 30478-12 [856] 41831-00 [862] 30478-12 [856] 30490-00 [853] 30479-00 [856]</p> <p>Panendoscopy:</p> <p>30476-03 [874] 32095-00 [891] 30568-00 [893] 30569-00 [894] 30473-05 [1005] 30473-00 [1005] 30473-02 [1005] 30478-00 [1006] 30478-14 [1006] 30478-01 [1007] 30478-02 [1007] 30478-03 [1007] 30478-15 [1007] 30478-16 [1007] 30478-17 [1007] 30478-20 [1007] 30478-21 [1007] 30473-01 [1008] 30478-04 [1008] 30473-06 [1008] 30478-18 [1008]</p>

## Endoscopy of large intestine, rectum and anus:

32075-00 [904] 32090-00 [905] 32084-00 [905] 30479-02 [908] 90308-00 [908]  
32075-01 [910] 32078-00 [910] 32081-00 [910] 32090-01 [911] 32093-00 [911]  
32084-01 [911] 32087-00 [911] 30479-01 [931] 90315-00 [933]

## Miscellaneous cardiac:

38603-00 [642] 38600-00 [642] 38256-00 [647] 38256-01 [647] 38256-02 [647]  
38278-00 [648] 38278-01 [648] 38284-00 [648] 90202-00 [649] 38470-00 [649]  
38473-00 [649] 38281-01 [650] 38281-02 [650] 38281-03 [650] 38281-04 [650]  
38281-05 [650] 38281-06 [650] 38281-07 [651] 38281-07 [651] 38281-08 [651]  
38281-09 [651] 38281-10 [651] 38281-00 [652] 38278-02 [654] 38456-07 [654]  
90203-00 [654] 38284-01 [654] 90219-00 [663] 38281-11 [655] 38281-12 [655]  
38212-00 [665] 38209-00 [665] 38200-00 [667] 38203-00 [667] 38206-00 [667]  
35324-00 [740] 35315-00 [758] 35315-01 [758]

## Endovascular interventional:

35304-01 [670] 35305-00 [670] 35304-00 [670] 35305-01 [670] 35310-00 [671]  
35310-01 [671] 35310-03 [671] 35310-04 [671] 35310-02 [671] 35310-05 [671]  
34524-00 [694] 13303-00 [694] 34521-01 [694] 32500-01 [722] 32500-00 [722]  
13300-01 [738] 13300-02 [738] 13319-00 [738] 13300-00 [738] 13815-00 [738]  
13815-01 [738] 34521-02 [738] 34530-04 [738] 90220-00 [738]

Urethroscopy: 36800-00 [1090] 36800-01 [1090] 37011-00 [1093] 37008-01  
[1093] 37008-00 [1093] 37315-00 [1112] 37315-01 [1116] 37318-01 [1116]  
36815-01 [1116] 37854-00 [1116] 35527-00 [1116] 37318-04 [1117]

## Dental:

Blocks [450] to [490]

## Other diagnostic and non-surgical:

90347-01 [983] 90760-00 [1780] 90767-00 [1780] 13915-00 [1780] 13918-00  
[1780] 13921-00 [1780] 13927-00 [1780] 13939-00 [1780] 13942-00 [1780]  
90768-00 [1780] Blocks [1820] to 1939], [1940] to [2016]