

**NACRS** 

# Data Quality Documentation National Ambulatory Care Reporting System

Current-Year Information 2019–2020



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### **Abbreviations**

Alta. Alberta

B.C. British Columbia

CAD Clinical Administrative Databases

CC cardiac catheterization (clinic)

CIHI Canadian Institute for Health Information

DAD Discharge Abstract Database

DI diagnostic imaging

DS day surgery

ED emergency department

HCN Health Care Number

HMDB Hospital Morbidity Database

ICD-10-CA International Statistical Classification of Diseases and Related Health

Problems, 10th Revision, Canada

Man. Manitoba

MH mental health (clinic)

MIS FC Management Information System Functional Centre

NACRS National Ambulatory Care Reporting System

N.S. Nova Scotia

OC oncology clinic

Ont. Ontario

P.E.I. Prince Edward Island

RD renal dialysis (clinic)

Sask. Saskatchewan

Y.T. Yukon

### **Purpose**

The report *Data Quality Documentation, National Ambulatory Care Reporting System* — *Current-Year Information* is produced on a yearly basis and provides information on the quality of the data file for the given fiscal year. An associated report, <u>Data Quality Documentation, National Ambulatory Care Reporting System</u> — <u>Multi-Year Information</u>, provides background information on the reporting system to help users decide whether the information fits their needs. <u>Data Quality Documentation, National Ambulatory Care Reporting System</u> — <u>Glossary of Terms</u> is also available.

Information on how to complete the NACRS abstract, including detailed data element descriptions and collection instructions, can be found in the <u>NACRS Abstracting Manual</u>. For a summary of the mandatory and optional NACRS data elements by ambulatory care group, please refer to the <u>NACRS Data Elements</u> document on CIHI's website.

### Coverage

## Levels of care and submissions, by province/territory

NACRS contains data about hospital and community-based emergency and ambulatory care visits, including visits to DS and outpatient clinics. Data is collected from all submitting facilities in Canada on the care of patients who were registered in these facilities between April 1 and March 31 of the given fiscal year.

- In 2019–2020, a total of 24,808,508 records were submitted to NACRS (see Table 2 in Appendix A), which represents a decrease of 4.1% compared with 2018–2019.
   CIHI's coverage is now at 84%, which gives CIHI more accessible, comparable and standardized data, and supports the advancement of CIHI's corporate strategic goals.
- NACRS offers 3 options for submitting ED records:
  - Submission Level 1 includes mandatory data elements required for ED Wait Time indicators.
  - Submission Level 2 includes Level 1 information plus mandatory completion of either the Presenting Complaint or ED Discharge Diagnosis data element.
  - Submission Level 3 includes Level 2 information plus mandatory capture of diagnoses and interventions using ICD-10-CA and CCI.

For further information on submission levels, please see the report <u>Data Quality</u> <u>Documentation</u>, <u>National Ambulatory Care Reporting System — Multi-Year Information</u>.

- Submission of DS data to NACRS: Mandated in Prince Edward Island, Nova Scotia, Ontario and Alberta. All other provinces/territories submit their DS data to the DAD or to the HMDB. Information about the DAD and the HMDB can be found on the <u>DAD metadata</u> and <u>HMDB</u> <u>metadata</u> pages, respectively.
- Submission of ED data to NACRS: Mandated in Quebec,<sup>i</sup> Ontario, Alberta and Yukon; partially mandated in P.E.I., Nova Scotia, Manitoba, Saskatchewan and British Columbia; not mandated in Newfoundland and Labrador, New Brunswick, the Northwest Territories and Nunavut.
  - Fully coded diagnosis and intervention information might not be available for abstracts submitted at Level 1 or Level 2.
- NACRS Clinic Lite (Level 0) data is excluded from this 2019–2020 report. Clinic Lite is a low-cost, low-burden reporting option for ambulatory clinics; it is endorsed by the Ontario Ministry of Health as the data reporting method for the outpatient rehabilitation component of its hip and knee bundled care initiative. The data specifications for this initiative require reporting of a summary visit record that captures services provided during the patient's outpatient/ambulatory rehabilitation episode of care, which can include numerous visits. A summary record is submitted following completion or discontinuation of the patient's outpatient rehabilitation program. Level 0 Clinic Lite data should be excluded from analytical reports.

### Changes to the number of reporting facilities

Throughout the fiscal year, facilities may open, close or merge, resulting in changes to the number of reporting facilities.

- Facility numbers no longer valid in NACRS in 2019–2020: 5 facilities (2 in Ontario, 3 in Alberta).
- New facility numbers in NACRS in 2019–2020: 6 facilities (1 in Saskatchewan, 4 in Alberta, 1 in B.C.).

### Rate of over-coverage

The rate of over-coverage from true duplicate records in 2019–2020 was 0.11%. There were 28,293 true duplicate records (see Table 5 in Appendix A).

i. As of 2018–2019, Quebec submits ED data to CIHI on a monthly basis. This data is transformed to meet NACRS standards and is integrated into NACRS.

### Non-response

Unit non-response refers to incomplete data that is submitted from facilities in the frame (facilities that submit to NACRS), whether at the facility or record level. Additional unit non-response may occur with any outstanding rejected records that are not resubmitted during the data collection period.

Unit non-response rate at the facility level, due to facilities that did not submit any data to NACRS in 2019–2020:

• Nil

Unit non-response rate at the record level, due to missing records for all or some periods in NACRS in 2019–2020:

- The unit non-response rate at the record level was nil for ED, 0.106% for DS and 0.002% for all other levels of care. This rate was the result of 3 facilities from Ontario not submitting complete data for some periods in 2019–2020.
- Please refer to Table 4 in Appendix A for the item non-response rates for selected NACRS data elements.

### **NACRS** fields

- Unknown values in NACRS fields for 2019–2020: See Table 4 in Appendix A.
- NACRS fields evolution by fiscal year: See Appendix B.

### Appendix A: NACRS data tables

The NACRS 2019–2020 population of reference included 549 facilities in Canada.

**Table 1** Number of facilities submitting to each ambulatory care group in NACRS, by province/territory, 2019–2020

	Total no. of		ED					Clin	ic			Other
Prov./terr.	submitting facilities	Level 1	Level 2	Level 3	DS	СС	RD	ОС	МН	Other*	DI	ambulatory care
P.E.I.	2	0	0	1	2	0	0	0	0	1	0	0
N.S.	19	4	0	4	18	1	0	2	0	14	8	5
Que.	117	117	0	0	0	0	0	0	0	0	0	0
Ont.	190	1	0	177	150	24	55	84	0	78	15	15
Man.	7	7	0	0	0	0	0	0	0	0	0	0
Sask.	12	3	2	7	0	0	0	0	0	0	0	0
Alta.	169	0	0	109	96	3	16	5	26	95	116	124
B.C.	30	0	30	0	0	0	0	0	0	0	0	0
Y.T.	3	0	0	3	0	0	0	0	0	0	0	0
Total	549	132	32	301	266	28	71	91	26	188	139	144

#### Notes

For additional information on how the ambulatory care groups are defined using MIS functional centre account codes, please refer to detailed data element information for Visit MIS Functional Centre Account Code (data element 13) and MIS Functional Centre Account Code (data element 75), as well as the National MIS Standards Functional Centre Accounts to Ambulatory Care Group Mapping Table.

B.C.'s data submission level is based on the reporting mandate.

Level 0 Clinic Lite data is excluded from the analysis.

#### Source

National Ambulatory Care Reporting System, 2019–2020, Canadian Institute for Health Information.

<sup>\*</sup> The Clinic — Other category includes the following clinic subcategories: medical, surgical, cardiac, gynecology, neurology, obstetrics, pediatric, rehabilitation, rheumatology, ophthalmology, orthopedic, family practice and special day/night care, among others.

Table 2 Summary of all visits for NACRS, by province/territory and ambulatory care group, 2019–2020

		ED					Clinic				Other	Total N
Prov./terr.	Level 1	Level 2	Level 3	DS	CC	RD	ОС	МН	Other*	DI	ambulatory care	(%)
P.E.I.	0	0	23,575	15,263	0	0	0	0	242	0	0	39,080 (0.16%)
N.S.	181,609	0	111,057	101,150	2,835	0	750	0	11,859	5,625	504	415,389 (1.67%)
Que.	3,695,705	0	0	0	0	0	0	0	0	0	0	3,695,705 (14.90%)
Ont.	1,673	0	6,429,161	1,273,388	62,587	1,340,125	1,331,814	0	114,345	10,377	9,416	10,572,886 (42.62%)
Man.	317,670	0	0	0	0	0	0	0	0	0	0	317,670 (1.28%)
Sask.	128,044	96,491	104,859	0	0	0	0	0	0	0	0	329,394 (1.33%)
Alta.	0	0	2,290,878	389,952	12,265	250,913	18,175	356,113	2,134,346	629,546	1,669,946	7,752,134 (31.25%)
B.C.	0	1,640,921	0	0	0	0	0	0	0	0	0	1,640,921 (6.61%)
Y.T.	0	0	45,329	0	0	0	0	0	0	0	0	45,329 (0.18%)
Total	4,324,701	1,737,412	9,004,859	1,779,753	77,687	1,591,038	1,350,739	356,113	2,260,792	645,548	1,679,866	24,808,508 (100.00%)

For additional information on how the ambulatory care groups are defined using MIS functional centre account codes, please refer to detailed data element information for Visit MIS Functional Centre Account Code (data element 13) and MIS Functional Centre Account Code (data element 75), as well as the National MIS Standards Functional Centre Accounts to Ambulatory Care Group Mapping Table.

Level 0 Clinic Lite data is excluded from the analysis.

#### Source

National Ambulatory Care Reporting System, 2019–2020, Canadian Institute for Health Information.

<sup>\*</sup> The Clinic — Other category includes the following clinic subcategories: medical, surgical, cardiac, gynecology, neurology, obstetrics, pediatric, rehabilitation, rheumatology, ophthalmology, orthopedic, family practice and special day/night care, among others.

**Table 3** Percentage change in volume of NACRS records between 2018–2019 and 2019–2020, by province/territory and ambulatory care group

		ED					Clinic	;			Other	
Prov./ terr.	Level	Level 2	Level 3	DS	СС	RD	ос	МН	Other*	DI	ambulatory care	Total
P.E.I.	n/a	n/a	-5.4	-1.3	n/a	n/a	n/a	n/a	-64.2	n/a	n/a	-4.8
N.S.	2.1	n/a	0.3	-4.9	1.7	n/a	-18.7	n/a	-22.7	6.3	8.9	-1.0
Que.	-0.5	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	-0.5
Ont.	-17.8	n/a	-0.8	-1.8	2.3	3.4	4.0	n/a	3.5	10.5	0.0	0.2
Man.	0.4	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	0.4
Sask.	5.8	-0.1	10.3	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	5.3
Alta.	n/a	n/a	-0.3	-10.6	3.9	-22.8	-12.6	13.6	-21.1	-15.7	-15.4	-12.2
B.C.	n/a	-0.8	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	-0.8
Y.T.	n/a	n/a	8.8	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	8.8
Total	-0.1	-0.8	-0.5	-4.0	2.5	-1.9	3.7	13.6	-20.2	-15.2	-15.3	-4.1

n/a: Not applicable.

For additional information on how the ambulatory care groups are defined using MIS functional centre account codes, please refer to detailed data element information for Visit MIS Functional Centre Account Code (data element 13) and MIS Functional Centre Account Code (data element 75), as well as the National MIS Standards Functional Centre Accounts to Ambulatory Care Group Mapping Table.

Level 0 Clinic Lite data is excluded from the analysis.

#### Source

National Ambulatory Care Reporting System, 2018–2019 and 2019–2020, Canadian Institute for Health Information.

<sup>\*</sup> The Clinic — Other category includes the following clinic subcategories: medical, surgical, cardiac, gynecology, neurology, obstetrics, pediatric, rehabilitation, rheumatology, ophthalmology, orthopedic, family practice and special day/night care, among others.

**Table 4** Proportion of unknown/invalid data reported for selected NACRS data elements

Data element number	Data element	Definition	Unknown/ invalid values	NACRS 2018–2019 proportion when applicable (%)	NACRS 2019–2020 proportion when applicable (%)	Percentage change between 2018–2019 and 2019–2020
02	HCN*	HCN data is not valid	All zeros or invalid values	1.11	1.21	0.10
03	Province/Territory Issuing HCN	Province/ Territory Issuing HCN indicates the provincial/ territorial or federal government from which the HCN was issued	99	0.64	0.84	0.20
05	Postal Code <sup>†</sup>	Postal code is not valid	Invalid values	16.97	17.26	0.29
09	Birth Date	Birth Date is unknown or invalid	99990101 99990901 Combination of age code "U" and age unit "0"	14.35	14.90	0.55
25	Triage Time	Unknown	9999	0.29	0.28	-0.01
26	Triage Level	Unknown	99	0.44	0.42	-0.02
30	Time of Physician Initial Assessment	Unknown	9999	6.86	6.86	0.00
45	Other Problem(s)	Unknown codes for place of occurrence with injuries	U98.9	67.65	66.28	-1.37
100	Glasgow Coma Scale	Not available	99 or blank	39.69	36.71	-2.98
101	Seatbelt Indicator	Unknown	99	32.47	31.78	-0.69
102	Helmet Indicator	Unknown	99	69.56	68.55	-1.01
115	Disposition Time	Unknown	9999	1.89	1.83	-0.06
117	Time Patient Left ED	Unknown	9999	0.22	0.15	-0.07

Data element number	Data element	Definition	Unknown/ invalid values	NACRS 2018–2019 proportion when applicable (%)	NACRS 2019–2020 proportion when applicable (%)	Percentage change between 2018–2019 and 2019–2020
137 and 44	ED Discharge Diagnosis and Main Problem <sup>‡</sup>	Missing	Blank	6.18	6.97	0.79
136	Presenting Complaint <sup>‡</sup>	Missing	Blank	38.76	39.26	0.50

- \* Invalid health card numbers (HCNs) are defined as those that are missing or unknown, those with invalid formats, those used for administrative purposes and not associated with an individual, those that are the same for a child and mother, and those associated with multiple-person demographic profiles.
- † Invalid postal codes are defined as those that are not submitted, those that are invalid and those that are non-linkable (i.e., not in Statistics Canada's Postal Code Conversion File Plus [PCCF+] Version 7C, November 2019).
- ‡ The collection instructions for ED fields Discharge Diagnosis, Main Problem and Presenting Complaint vary across jurisdictions based on submission level. The percentages of missing values for these fields reflect the completeness of submissions rather than a data quality issue.

#### Source

National Ambulatory Care Reporting System, 2018–2019 and 2019–2020, Canadian Institute for Health Information.

Table 5 NACRS duplicates

Ambulatory care gr	oup	2018–2019 N (%)	2019–2020 N (%)
ED	Level 1	193 (0.53%)	159 (0.56%)
	Level 2	(0.00%)	(0.00%)
	Level 3	351 (0.96%)	9 (0.03%)
DS		413 (1.13%)	260 (0.92%)
Clinic	СС	(0.00%)	(0.00%)
	RD	5,206 (14.21%)	2,437 (8.61%)
	ОС	158 (0.43%)	158 (0.56%)
	МН	4,236 (11.56%)	7,657 (27.06%)
	Other*	18,691	9,172 (32.42%)
		(51.03%)	
DI		413 (1.13%)	216 (0.76%)
Other ambulatory of	are	6,970 (19.03%)	8,225 (29.07%)
Total		36,631	28,293
Proportion of NACR	S	~0.14%	~0.11%

#### Notes

The majority of the duplicates were from Alberta in both 2018–2019 (96.9%) and 2019–2020 (99.3%).

#### Source

National Ambulatory Care Reporting System, 2018–2019 and 2019–2020, Canadian Institute for Health Information.

<sup>\*</sup> Level 0 Clinic Lite data is excluded from the analysis.

## Appendix B: NACRS data element evolution by fiscal year

This information must be referenced when performing trending analysis on NACRS data and is intended to be used in conjunction with the *NACRS Abstracting Manual* (see Bibliography). Please refer to the *NACRS Abstracting Manual* or contact CIHI for details of these changes.

	Legend
*	No change to existing data element
С	Change in data element definition (including code or change/collection of new data)
F	Change in data element format
R	Retired data element
N	New data element
0	Data element did not exist that year

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012– 2013	2013– 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
00A	Reporting Facility's Province/Territory	*	*	*	*	*	*	*	*	С	*	*	*
00B	Reporting Facility's Ambulatory Care Number	*	*	*	*	С	*	*	*	С	*	С	*
00C	Submission Fiscal Year	*	*	*	*	*	*	*	*	*	*	*	*
00D	Submission Period	*	*	*	С	С	*	*	*	*	*	*	*
00E	Abstract Identification Number	*	*	*	*	*	*	*	*	*	*	*	*
00F	Coder Number	*	*	F	*	*	С	*	*	*	*	*	*
00G	Primary Abstract ID Number	0	0	0	0	0	0	0	0	0	0	0	0
1	Chart Number	*	*	*	*	С	*	*	*	*	*	*	*
2	Health Care Number	*	*	С	С	С	*	С	С	*	*	С	*
3	Province/Territory Issuing Health Care Number	*	*	С	С	С	*	*	*	*	*	С	*
4	Responsibility for Payment	*	*	С	С	С	*	С	*	*	*	С	*
5	Postal Code	*	*	С	С	*	*	*	*	*	*	С	*
6	Residence Code (Geographic Code)	*	С	С	С	*	*	*	*	*	*	*	*
7	Gender	*	*	С	*	С	*	*	*	*	*	С	*
8	Birth Date	*	*	*	С	*	*	*	*	*	*	*	*
9	Birth Date Is Estimated	*	*	С	С	*	*	*	*	*	*	*	*
10	Family Physician Flag	*	R	0	0	0	0	0	0	0	0	0	0

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012- 2013	2013– 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019 <del>-</del> 2020
11	Ambulatory Registration Number	*	*	*	С	*	*	*	*	*	*	С	*
12	Ambulatory Registration/ Encounter Sequence Number	*	*	*	*	*	*	*	*	*	*	*	*
13	Visit MIS FC Account Code	*	*	С	С	*	*	*	*	*	*	С	*
14	Admit via Ambulance	*	*	С	*	*	*	*	*	*	*	С	*
15	Ambulance Call Number	*	*	С	*	*	*	*	*	*	*	R	0
16	Living Arrangement	*	*	*	*	*	*	*	*	*	*	R	0
17	Residence Type	*	*	*	*	*	*	*	*	*	*	R	0
18	Visit Type	С	С	С	R	0	0	0	0	0	0	0	0
19	Ambulatory Visit Status	*	*	*	*	*	*	*	*	*	*	R	0
20	Mode of Visit/Contact	*	*	С	С	С	*	*	*	*	*	*	*
21	Highest Level of Education	*	*	*	*	*	*	*	*	*	*	*	*
22	Arrival Date	*	С	*	*	*	*	*	*	*	*	*	*
23	Arrival Time	*	С	*	*	*	*	*	*	*	*	*	*
24	Triage Date	*	*	*	С	*	*	*	*	*	*	С	*
25	Triage Time	*	*	*	С	*	*	*	*	*	*	С	*
26	Triage Level	*	С	С	С	*	*	*		*	*	С	*
27	Date of Registration/ Visit	*	*	*	*	*	С	*	С	С	*	С	*
28	Registration/ Visit Time	*	*	*	*	*	С	*	С	С	*	С	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012– 2013	2013– 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
29	Date of Physician Initial Assessment	*	С	С	С	С	*	*	*	*	*	С	*
30	Time of Physician Initial Assessment	*	С	С	С	*	*	*	*	*	*	С	*
31	Referral Source Prior to Ambulatory Care Visit	С	С	С	С	*	*	*	*	*	*	*	*
32	Institution From	С	С	С	*	*	*	*	*	*	*	С	*
33	Decision to Admit Date	0	0	0	0	0	0	0	0	0	0	0	0
34	Decision to Admit Time	0	0	0	0	0	0	0	0	0	0	0	0
35	Visit Disposition	*	С	С	С	С	*	*	С	С	*	С	*
36	Date Visit Completed	0	0	0	0	0	0	0	0	0	0	0	0
37	Time Visit Completed	0	0	0	0	0	0	0	0	0	0	0	0
38	Referred To — After Completion of Ambulatory Care Visit	*	С	*	С	*	*	*	*	*	*	*	*
39	Institution To	С	С	С	С	*	*	*	*	*	*	С	*
40	Provider Type	*	С	С	С	С	*	*	*	С	*	*	*
41	Provider Service	С	С	С	С	С	С	С	*	*	*	С	*
42	Provider Number	*	С	С	С	*	F, C	*	*	*	*	*	*
43, 43 (a–i)	Main and Other Problem Prefix	С	С	С	С	*	*	*	*	*	*	F, C	*
44	Main Problem	*	*	С	*	*	*	*	*	*	*	С	*
45 (a–i)	Other Problem(s)	*	С	С	*	*	*	*	*	С	*	С	*
46	Main Intervention	*	*	*	*	*	*	*	С	*	*	С	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012- 2013	2013- 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
47 (a-i)	Other Intervention(s)	*	*	*	*	*	С	*	*	*	*	С	*
48 (a-i)	Status Attribute (Main and Other)	*	*	С	С	*	*	*	*	*	*	С	*
49 (a–i)	Location Attribute (Main and Other)	*	*	С	С	*	*	*	*	*	*	С	*
50 (a-i)	Extent Attribute (Main and Other)	*	*	С	С	*	*	*	*	*	*	С	*
51 (a–i)	Duration of Ambulatory Care Intervention for Main and Other Interventions	*	*	С	С	С	*	*	*	*	*	*	*
52 (a–i)	Intervention Location Code for Main and Other Interventions	*	*	*	С	*	С	*	*	*	*	С	*
53	Anaesthetic Technique	*	С	*	С	*	F, C	*	С	С	*	С	*
54	Died During Intervention Flag	*	*	R	0	0	0	0	0	0	0	0	0
55	Out-of-Hospital Indicator	*	*	С	*	*	*	*	С	С	*	С	*
56	Out-of-Hospital Institution Number	*	*	*	*	*	*	*	*	*	*	С	*
57	Blood Transfusion Indicator	*	*	С	*	*	*	*	*	*	*	*	*
58	Blood Components/ Products — Red Blood Cells	*	С	С	*	*	*	С	*	С	*	С	*
59	Platelets	*	С	С	*	*	*	С	*	*	*	*	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012– 2013	2013– 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
60	Plasma — Other or Unspecified (name changed in 2018)	*	С	С	*	*	*	С	*	*	*	С	*
61	Albumin	*	С	С	*	*	*	С	*	*	*	*	*
62	Other Blood Products	*	С	С	*	С	С	С	*	С	*	С	*
63	Autologous Blood Transfusion	*	С	С	*	С	*	С	*	*	*	*	*
64	Units of Blood Transfused — Red Blood Cells	*	*	*	*	*	*	*	*	*	*	R	0
65	Platelets	*	*	*	*	*	*	*	*	*	*	R	0
66	Plasma	*	*	*	*	*	*	*	*	*	*	R	0
67	Albumin	*	*	*	*	*	*	*	*	*	*	R	0
68	Other Product Transfused	*	*	*	*	*	*	*	*	*	*	R	0
69	Number of Previous Term Deliveries	*	С	С	С	*	*	*	*	*	*	*	*
70	Number of Previous Preterm Deliveries	*	С	С	С	*	*	*	*	*	*	*	*
71	Number of Previous Spontaneous Abortions	*	С	С	С	*	*	*	*	*	*	*	*
72	Number of Previous Therapeutic Abortions	*	С	С	С	*	*	*	*	*	*	*	*
73	Gestational Age — Therapeutic Abortion	*	С	С	С	*	*	*	*	*	*	С	*
74	Date of Last Menses	*	С	С	С	*	*	*	*	*	*	С	*
	•												

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012– 2013	2013– 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
75 (a–j)	MIS FC Account Code	*	*	С	С	*	*	*	*	*	*	С	*
76	Service Recipient– Specific Direct Cost	0	0	0	0	0	0	0	0	0	0	0	0
77	Service Recipient– Specific Indirect Cost	0	0	0	0	0	0	0	0	0	0	0	0
78	Traceable Supplies	0	0	0	0	0	0	0	0	0	0	0	0
79–96 (a–e)	Special Project	*	*	С	С	*	С	*	0	0	0	0	0
97	PCTAS Indicator	*	*	R	0	0	0	0	0	0	0	0	0
98	Program Area	*	*	С	С	*	*	*	*	*	*	С	*
99	Scheduled ED Visit Indicator	С	*	С	R	0	0	0	0	0	0	С	*
100	Glasgow Coma Scale	С	С	С	*	*	С	*	*	*	*	С	*
101	Seatbelt Indicator	*	*	*	С	*	*	*	*	*	*	*	*
102	Helmet Indicator	С	*	*	С	*	*	*	*	*	*	*	*
103	Level of Care/ Service Recipient	*	*	*	*	R	0	0	0	0	0	0	0
104	Referral Date	*	*	*	*	*	*	*	*	*	*	С	*
105	Vendor MAC	*	*	*	*	*	*	*	*	*	*	*	*
106	Vendor CACS	*	*	*	*	*	*	*	*	*	*	*	*
107	Vendor RIW <sup>†</sup>	*	*	*	*	F	*	*	*	*	*	*	*
108	Complete Record	*	*	*	*	*	*	*	*	*	*	*	*
109	Main Intervention Start Date	*	*	С	С	С	С	*	*	*	*	С	*
110	Main Intervention Start Time	*	*	С	С	С	С	*	*	*	*	С	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012- 2013	2013- 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
111 (a–i)	Other Intervention Start Date	*	*	С	С	С	С	*	*	*	*	*	*
112 (a-i)	Other Intervention Start Time	*	*	С	С	С	С	*	*	*	*	*	*
113	Reason for Visit/ Chief Complaint <sup>‡</sup>	*	С	*	R	0	0	0	0	0	0	0	0
114	Disposition Date	*	*	*	С	С	С	*	*	*	*	С	*
115	Disposition Time	*	*	*	С	С	С	*	*	*	*	С	*
116	Date Patient Left Emergency Department	*	*	С	*	С	*	*	С	*	*	С	*
117	Time Patient Left Emergency Department	*	*	С	*	С	*	*	С	*	*	С	*
118	Ambulance Arrival Date	0	N	С	С	*	*	*	*	*	*	С	*
119	Ambulance Arrival Time	0	N	С	С	*	*	*	*	*	*	С	*
120	Ambulance Transfer of Care Process Date	0	N	С	С	С	*	*	*	*	*	С	*
121	Ambulance Transfer of Care Process Time	0	N	С	С	С	*	*	*	*	*	С	*
122	Clinical Decision Unit/ Observation Unit Flag	0	N	С	С	*	*	*	*	*	*	*	*
123	Clinical Decision Unit Date In	0	N	С	С	С	*	*	*	*	*	*	*
124	Clinical Decision Unit Time In	0	N	С	С	С	*	*	*	*	*	*	*
125	Clinical Decision Unit Date Out	0	N	С	С	С	*	*	*	*	*	*	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012– 2013	2013- 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
126	Clinical Decision Unit Time Out	0	N	С	С	С	*	*	*	*	*	*	*
127, 127 (a–i)	Problem Cluster for Main Problem (Main and Other)	0	N	*	С	С	*	*	*	С	*	С	*
128	Submission Level Code	0	N	С	*	*	*	*	*	*	*	*	*
129	Access to Primary Health Care Code	0	N	*	*	*	*	*	*	*	*	*	*
130 (a-c)	Consult Request Date	0	0	N	С	С	*	*	*	*	*	С	*
131 (a–c)	Consult Request Time	0	0	N	С	С	*	*	*	*	*	С	*
132 (a–c)	Consult Request Service	0	0	N	С	С	*	*	*	*	*	С	*
133	Date of Non- Physician Initial Assessment (DNPIA)	0	0	N	С	С	*	*	*	*	*	С	*
134	Time of Non- Physician Initial Assessment (TNPIA)	0	0	N	С	С	*	*	*	*	*	С	*
135	Non-Physician Initial Assessment Provider Service (NPIAPS)	0	0	N	С	С	С	*	*	*	*	С	*
136 (a-c)	Presenting Complaint List	0	0	N	С	С	*	*	С	С	*	С	*
137 (a-c)	Emergency Department Discharge Diagnosis	0	0	N	С	С	С	*	*	*	*	С	*
138	Status After Triage	0	0	0	N	*	*	*	*	*	*	*	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012– 2013	2013- 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
139	ED Visit Indicator	0	0	0	N	*	*	*	*	*	*	С	*
140	Vendor Age Category	0	0	0	N	*	*	*	*	*	*	*	*
141	Vendor Anaesthetic Category	0	0	0	N	*	*	*	*	*	*	*	*
142	Vender IT Total Count	0	0	0	N	*	*	*	*	*	*	*	*
143 (a-c)	Consult Arrival Date	0	0	0	N	С	*	*	*	*	*	С	*
144 (a-c)	Consult Arrival Time	0	0	0	N	С	*	*	*	*	*	С	*
146-169	Project Data Fields	0	0	0	0	0	0	0	C, F	С	*	С	С
170	Mental Health Indicators — Legal Status Upon Arrival to ED	0	0	0	0	0	0	0	0	0	0	N	С
171 (a-d)	Type of Restraint	0	0	0	0	0	0	0	0	0	0	N	С
172 (a-d)	Frequency of Restraint Use	0	0	0	0	0	0	0	0	0	0	N	*
173 (a-c)	Emergency Department Intervention Pick-List	0	0	0	0	0	0	0	0	0	0	N	*
174 (a-c)	Emergency Department Investigative Technology	0	0	0	0	0	0	0	0	0	0	N	*
175 (a–c)	Number of Emergency Department Investigative Technologies Performed	0	0	0	0	0	0	0	0	0	0	N	*

Data element ID number	Description	2008– 2009	2009– 2010	2010– 2011	2011– 2012	2012- 2013	2013– 2014	2014– 2015	2015– 2016	2016– 2017	2017– 2018	2018– 2019	2019– 2020
177	Blood Products/ Components — Cryoprecipitate Plasma	0	0	0	0	0	0	0	0	0	0	N	*
178	Cryosupernatant Plasma	0	0	0	0	0	0	0	0	0	0	N	*
179	Intravenous/ Subcutaneous Immune Globulin (IVIG/SCIG)	0	0	0	0	0	0	0	0	0	0	N	*
180	Fibrinogen	0	0	0	0	0	0	0	0	0	0	N	*
181	Prothrombin Complex Concentrate (PCC)	0	0	0	0	0	0	0	0	0	0	N	*
182	Anti-Inhibitor Coagulant (FEIBA)	0	0	0	0	0	0	0	0	0	0	N	*
183	Antithrombin III	0	0	0	0	0	0	0	0	0	0	N	*
184	C1 Inhibitor	0	0	0	0	0	0	0	0	0	0	N	*
185	Protein C/ Other Factors	0	0	0	0	0	0	0	0	0	0	N	*

<sup>†</sup> From 2004–2005 to 2005–2006, the name of data element 107 was Vendor ACW.

<sup>‡</sup> From 2004–2005 to 2005–2006, Reason for Visit (data element 113) was captured as value "R" in Main Problem Prefix (data element 43).

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