Data Quality Documentation, National Ambulatory Care Reporting System — Current-Year Information, 2014–2015

Standards and Data Submission

Canadian Institute
for Health Information

Institut canadien
d'information sur la santé

Our Vision
Better data. Better decisions.
Healthier Canadians.

Our Mandate
To lead the development and
maintenance of comprehensive
and integrated health information
that enables sound policy and
effective health system management
that improve health and health care.

Our Values
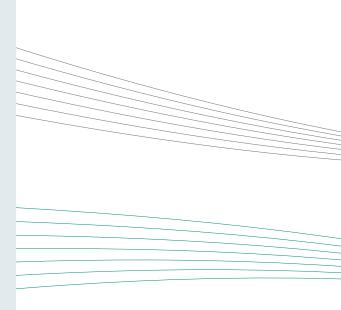Respect, Integrity, Collaboration,
Excellence, Innovation

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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
DI	diagnostic imaging
DS	day surgery
ED	emergency department
HCN	Health Care Number
ICD-10-CA	International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Canada
Man.	Manitoba
MIS FC	Management Information System Functional Centre
MH	mental health (clinic)
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

This 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 relevant fiscal year. An associated report, *Data Quality Documentation, National Ambulatory Care Reporting System — Multi-Year Information*, provides background information on the reporting system to help users decide whether the information fits their needs. The *Data Quality Documentation, National Ambulatory Care Reporting System — Glossary of Terms* is also available.

Information on how to complete the National Ambulatory Care Reporting System (NACRS) abstract, including detailed data element descriptions and collection instructions, can be found in the *National Ambulatory Care Reporting System Abstracting Manual.* For a summary of the mandatory and optional NACRS data elements by ambulatory care group, please refer to the *NACRS Data Elements* document on CIHI's website.

Coverage

NACRS contains data about hospital- and community-based emergency and ambulatory care visits, including visits to day surgery (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 2014–2015, a total of 21,031,102 abstracts were submitted to NACRS (see Table 2 in Appendix A); 20,093,192 abstracts were submitted in 2013–2014. This represents an increase of 4.7%, which is partially due to an increase in coverage, including 1 Prince Edward Island facility (day surgery data) and 1 Saskatchewan facility (Level 1 emergency department [ED] data). For further information on submission levels, please see the report *Data Quality Documentation, National Ambulatory Care Reporting System — Multi-Year Information*.

- Submission of DS data to NACRS is mandated in Prince Edward Island, Nova Scotia, Ontario and Alberta. All other provinces/territories submit their DS data to the Discharge Abstract Database (DAD) or to the Hospital Morbidity Database (HMDB). Information about the DAD and the HMDB can be found in *Data Quality Documentation, Discharge Abstract Database* and *Data Quality Documentation, Hospital Morbidity Database*, respectively.

- There was 100% Level 3 ED coverage for Ontario and Alberta. Yukon and Prince Edward Island submitted Level 3 ED data, B.C. submitted Level 2 ED data, Saskatchewan submitted Level 1 and Level 2 ED data, and Nova Scotia and Manitoba submitted Level 1 and Level 3 ED data in 2014–2015. Fully coded diagnosis and intervention information might not be available for abstracts submitted at Level 1 or Level 2 by these provinces.

- 2 ED facilities from Yukon were identified for reporting to NACRS but did not submit any data to CIHI. 1 of these Yukon facilities has been missing submissions to NACRS since 2011–2012.

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

- The rate of over-coverage from true duplicate abstracts in 2014–2015 was 0.75%. There were 156,148 true duplicate abstracts (see Table 5 in Appendix A).

- There were no sources of under-coverage at the facility level in 2014–2015.

- In 2014–2015, 47.09% of the data was from Ontario and 40.96% was from Alberta.

Non-response

Unit non-response refers to incomplete data that is submitted from facilities in the frame, 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.

- The unit non-response rate at the facility level was 0.59% for ED, since 2 Yukon facilities did not submit all periods of 2014–2015 data.

- The unit non-response rates at the record level were estimated at 0.095% for ED, 0.024% for DS and 0.003% for all other levels of care. These rates were the result of 6 facilities not submitting data for some periods in 2014–2015 (4 Ontario facilities), 2 facilities not submitting all periods of 2014–2015 data (2 Yukon facilities) and 1,337 outstanding rejected records.

- Please refer to Table 4 for the item non-response rates for selected NACRS data elements.

Appendix A: NACRS data tables

The NACRS 2014–2015 population of reference included 424 facilities in Canada.

Table 1: Number of facilities submitting to each ambulatory care group in NACRS, by province/territory, 2014–2015											
Prov./ terr.	**Total no. of submitting facilities**	**ED**			**DS**	**Clinic**					**DI**	**Other ambulatory care**
		Level 1	Level 2	Level 3		CC	RD	OC	MH	Other		
P.E.I.	2	0	0	1	2	0	0	0	0	0	0	1
N.S.	20	4	0	5	19	1	0	2	0	13	8	7
Ont.	189	0	0	177	150	23	54	85	1	81	14	8
Man.	8	7	0	1	0	0	0	0	0	0	0	0
Sask.	6	4	2	0	0	0	0	0	0	0	0	0
Alta.	169	0	0	108	94	4	4	7	31	107	120	120
B.C.	29	0	29	0	0	0	0	0	0	0	0	0
Y.T.	1	0	0	1	0	0	0	0	0	0	0	0
Total	**424**	**15**	**31**	**293**	**265**	**28**	**58**	**94**	**32**	**201**	**142**	**136**

Notes

For a listing of how the ambulatory care groups are defined using the national Management Information System Functional Centre (MIS FC) account codes, please refer to Appendix D of the *NACRS Manual*.

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.

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

Source

National Ambulatory Care Reporting System, 2014–2015, Canadian Institute for Health Information.

Table 2: Summary of all visits for NACRS, by province/territory and ambulatory care group, 2014–2015

Prov./ terr.	ED			DS	Clinic					DI	Other ambulatory care	Total N (%)
	Level 1	Level 2	Level 3		CC	RD	OC	MH	Other			
P.E.I.	0	0	26,136	13,045	0	0	0	0	0	0	1	**39,182 (0.19)**
N.S.	167,784	0	100,620	102,307	2,519	0	799	0	17,061	3,739	76	**394,905 (1.88)**
Ont.	0	0	6,134,721	1,221,074	53,560	1,232,238	1,127,139	58	115,350	11,302	7,504	**9,902,946 (47.09)**
Man.	277,380	0	39,975	0	0	0	0	0	0	0	0	**317,355 (1.51)**
Sask.	150,719	98,331	0	0	0	0	0	0	0	0	0	**249,050 (1.18)**
Alta.	0	0	2,392,753	342,633	11,121	327,593	14,162	531,021	2,454,448	752,677	1,787,738	**8,614,146 (40.96)**
B.C.	0	1,477,772	0	0	0	0	0	0	0	0	0	**1,477,772 (7.03)**
Y.T.	0	0	35,746	0	0	0	0	0	0	0	0	**35,746 (0.17)**
Total	**595,883**	**1,576,103**	**8,729,951**	**1,679,059**	**67,200**	**1,559,831**	**1,142,100**	**531,079**	**2,586,859**	**767,718**	**1,795,319**	**21,031,102 (100.0)**

Notes

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Source

National Ambulatory Care Reporting System, 2014–2015, Canadian Institute for Health Information.

Table 3: Percentage change in volume of NACRS abstracts between 2013–2014 and 2014–2015, by province/territory and ambulatory care type

Prov./ terr.	ED			DS	Clinic					DI	Other ambulatory care	Total
	Level 1	Level 2	Level 3		CC	RD	OC	MH	Other			
P.E.I.	—	—	-1.41	N/A	—	—	—	—	—	—	N/A	**47.8**
N.S.	-0.67	—	25.5	0.4	-3.7	—	6.8	—	-16.6	193.9	40.7	**5.1**
Ont.	—	—	2.9	1.6	2.9	1.5	0.8	-9.4	103.5	9.1	9.1	**2.9**
Man.	3.58	—	-3.0	—	—	—	—	—	—	—	—	**2.7**
Sask.	27.3	7.4	—	—	—	—	—	—	—	—	—	**18.6**
Alta.	—	—	1.3	7.3	1.2	2.9	10.6	23.9	3.6	2.7	5.2	**4.4**
B.C.	-100	N/A	—	—	—	—	—	—	—	—	—	**17.21**
Y.T.	—	—	5.5	—	—	—	—	—	—	—	—	**5.5**
Total	**-67.2**	**31,620.7***	**2.6**	**3.4**	**2.4**	**1.8**	**0.9**	**23.9**	**5.7**	**3.2**	**5.2**	**4.7**

Notes

* The large percentage change is because of the shift in reporting method to reflect mandate of all 29 facilities in B.C. to submit Level 2 ED data.

For a listing of how the ambulatory care groups are defined using the national Management Information System Functional Centre (MIS FC) account codes, please refer to Appendix D of the *NACRS Manual*.

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.

Source

National Ambulatory Care Reporting System, 2013–2014 and 2014–2015, Canadian Institute for Health Information.

Table 4: Proportion of unknown data reported for selected NACRS data elements

Data element number	Data element	Definition	Unknown value	NACRS 2013–2014 proportion when applicable (%)	NACRS 2014–2015 proportion when applicable (%)	Percentage change between 2013–2014 and 2014–2015
02	HCN	HCN data is not available	All zeros	1.16	1.12	-0.04
03	Province/ Territory Issuing HCN	Province/ Territory Issuing HCN indicates the provincial/ territorial or federal government from which the HCN was issued	99	0.61	0.61	0.00
05	Postal Code*	Client is a resident of Canada and the postal code is unknown or invalid	2-digit alpha code or invalid 6-digit code	1.85	1.28	-0.57

Table 4: Proportion of unknown data reported for selected NACRS data elements (cont'd)

Data element number	Data element	Definition	Unknown value	NACRS 2013–2014 proportion when applicable (%)	NACRS 2014–2015 proportion when applicable (%)	Percentage change between 2013–2014 and 2014–2015
09	Birth Date	Birth Date is unknown or invalid	99990101 99990901 Combination of age code "U" and age units "0"	<0.01	<0.01	0.00
25	Triage Time	Unknown	9999	0.87	0.85	-0.02
26	Triage Level	Unknown	99	1.14	1.09	-0.05
30	Time of Physician Initial Assessment	Unknown	9999	11.13	10.0	-1.13
45	Other Problem(s)	Unknown codes for place of occurrence with injuries	U98.9	66.57	66.8	0.23
100	Glasgow Coma Scale	Not available	99 or blank	46.37	45.26	-1.11
101	Seatbelt Indicator	Unknown	99	37.02	37.43	0.41
102	Helmet Indicator	Unknown	99	71.42	71.37	-0.05
115	Disposition Time	Unknown	9999	2.26	2.56	0.3
117	Time Patient Left ED	Unknown	9999	0.52	0.47	-0.05

Note

*   Full 6-digit postal codes that were not found in the latest Postal Code Conversion File from Statistics Canada (June 2013) are deemed invalid. Mini–postal codes that refer to a Canadian province/territory or to persons who are transient/homeless are deemed unknown.

Source

National Ambulatory Care Reporting System, 2013–2014 and 2014–2015, Canadian Institute for Health Information.

Table 5: NACRS duplicates			
Fiscal year		**2013–2014 N (%)**	**2014–2015 N (%)**
ED	Level 1	664 (0.55)	787 (0.50)
	Level 2	0 (0.00)	0 (0.00)
	Level 3	28 (0.02)	23 (0.01)
DS		1,027 (0.86)	987 (0.63)
Clinic	CC	2 (0.00)	2 (0.00)
	RD	3,510 (2.93)	3,153 (2.02)
	OC	15 (0.01)	21 (0.01)
	MH	81,807 (68.36)	121,333 (77.7)
	Other	25,851 (21.6)	23,016 (14.74)
DI		84 (0.07)	397 (0.25)
Other ambulatory care		6,676 (5.58)	6,429 (4.12)
Total		**119,664**	**156,148**
Proportion of NACRS		**~0.60%**	**~0.74%**

Note

The majority of the duplicates were from Alberta in both 2013–2014 (99.4%) and 2014–2015 (99.5%).

For unscheduled ED visits for the same individual from the same facility, visits were found to overlap with their previous visits (after the exclusion of above duplicates). These overlapping visits (0.09% of all unscheduled ED visits) may represent duplicate abstracts submitted to NACRS.

Source

National Ambulatory Care Reporting System, 2013–2014 and 2014–2015, Canadian Institute for Health Information.

Appendix B: NACRS data element evolution by fiscal year

This appendix is intended to be used in conjunction with the *NACRS Manual*; please refer to it for details.

Legend	
*	No change to existing data element
C	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
O	Data element did not exist that year

Data element ID Number	Description	2014–2015	2013–2014	2012–2013	2011–2012	2010–2011	2009–2010	2008–2009	2007–2008	2006–2007	2005–2006	2004–2005	2003–2004
00A	Reporting Facility's Province/Territory	*	*	*	*	*	*	*	*	*	*	*	*
00B	Reporting Facility's Ambulatory Care Number	*	*	C	*	*	*	*	*	*	*	*	*
00C	Submission Fiscal Year	*	*	*	*	*	*	*	*	*	*	*	*
00D	Submission Period	*	*	C	C	*	*	*	*	*	*	*	*
00E	Abstract Identification Number	*	*	*	*	*	*	*	*	*	*	*	*
00F	Coder Number	*	C	*	*	F	*	*	*	*	*	*	*
00G	Primary Abstract ID Number	O	O	O	O	O	O	O	O	R	N	O	O
01	Chart Number	*	*	C	*	*	*	*	*	*	*	*	*
02	Health Care Number	C	*	C	C	C	*	*	*	*	*	*	*
03	Province/Territory Issuing Health Care Number	*	*	C	C	C	*	*	*	*	*	*	C
04	Responsibility for Payment	C	*	C	C	C	*	*	*	*	*	*	*
05	Postal Code	*	*	*	C	C	*	*	*	*	*	*	C
06	Residence Code (Geographic Code)	*	*	*	C	C	C	*	*	*	*	*	*

Data element ID Number	Description	2014–2015	2013–2014	2012–2013	2011–2012	2010–2011	2009–2010	2008–2009	2007–2008	2006–2007	2005–2006	2004–2005	2003–2004
07	Gender	*	*	C	*	C	*	*	*	*	*	*	*
08	Birth Date	*	*	*	C	*	*	*	*	*	*	*	*
09	Birth Date Is Estimated	*	*	*	C	C	*	*	*	*	*	*	*
10	Family Physician Flag	O	O	O	O	O	R	*	C	*	*	*	*
11	Ambulatory Registration Number	*	*	*	C	*	*	*	*	*	*	*	*
12	Ambulatory Registration/ Encounter Sequence Number	*	*	*	*	*	*	*	*	*	*	*	*
13	Visit MIS FC Account Code	*	*	*	C	C	*	*	*	*	*	*	*
14	Admit via Ambulance	*	*	*	*	C	*	*	*	C	*	*	C
15	Ambulance Call Number	*	*	*	*	C	*	*	*	*	*	*	*
16	Living Arrangement	*	*	*	*	*	*	*	*	*	*	*	*
17	Residence Type	*	*	*	*	*	*	*	*	*	*	*	*
18	Visit Type	O	O	O	R	C	C	C	*	*	*	*	*
19	Ambulatory Visit Status	*	*	*	*	*	*	*	*	*	*	*	*
20	Mode of Visit/Contact	*	*	C	C	C	*	*	*	*	*	*	*
21	Highest Level of Education	*	*	*	*	*	*	*	*	*	*	*	*
22	Arrival Date	*	*	*	*	*	C	*	*	*	*	*	*
23	Arrival Time	*	*	*	*	*	C	*	*	*	*	*	*
24	Triage Date	*	*	*	C	*	*	*	*	*	*	*	*
25	Triage Time	*	*	*	C	*	*	*	C	*	*	*	*
26	Triage Level	*	*	*	C	C	C	*	*	C	*	*	*
27	Date of Registration/Visit	*	C	*	*	*	*	*	*	*	*	*	*
28	Registration/Visit Time	*	C	*	*	*	*	*	*	*	*	*	*
29	Date of Physician Initial Assessment	*	*	C	C	C	C	*	*	*	*	*	*
30	Time of Physician Initial Assessment	*	*	*	C	C	C	*	*	*	*	*	C

Data element ID Number	Description	2014–2015	2013–2014	2012–2013	2011–2012	2010–2011	2009–2010	2008–2009	2007–2008	2006–2007	2005–2006	2004–2005	2003–2004
31	Referral Source Prior to Ambulatory Care Visit	*	*	*	C	C	C	C	*	*	*	C	*
32	Institution From	*	*	*	*	C	C	C	*	*	*	*	*
33	Decision to Admit Date	O	O	O	O	O	O	O	R	*	*	*	*
34	Decision to Admit Time	O	O	O	O	O	O	O	R	*	*	*	C
35	Visit Disposition	*	*	C	C	C	C	*	*	*	C	*	C
36	Date Visit Completed	O	O	O	O	O	O	O	R	*	*	*	*
37	Time Visit Completed	O	O	O	O	O	O	O	R	C	*	*	*
38	Referred To — After Completion of Ambulatory Care Visit	*	*	*	C	*	C	*	*	*	*	C	*
39	Institution To	*	*	*	C	C	C	C	*	*	*	*	*
40	Provider Type	*	*	C	C	C	C	*	C	*	*	*	*
41	Service Provider	C	C	C	C	C	C	C	C	C	C	*	C
42	Service Provider ID Number	*	F, C	*	C	C	C	*	*	*	*	*	*
43, 43 (a–i)	Main and Other Problem Prefix	*	*	*	C	C	C	C	*	C	*	*	C
44	Main Problem	*	*	*	*	C	*	*	*	*	*	*	*
45 (a–i)	Other Problem(s)	*	*	*	*	C	C	*	*	*	*	*	*
46	Main Intervention	*	*	*	*	*	*	*	*	*	*	*	*
47 (a–i)	Other Intervention(s)	*	C	*	*	*	*	*	*	*	*	*	*
48 (a–i)	Status Attribute (Main and Other)	*	*	*	C	C	*	*	*	*	*	*	*
49 (a–i)	Location Attribute (Main and Other)	*	*	*	C	C	*	*	*	*	*	*	*
50 (a–i)	Extent Attribute (Main and Other)	*	*	*	C	C	*	*	*	*	*	*	*
51 (a–i)	Duration of Ambulatory Care Intervention for Main and Other Interventions	*	*	C	C	C	*	*	*	*	*	*	*

Data element ID Number	Description	2014–2015	2013–2014	2012–2013	2011–2012	2010–2011	2009–2010	2008–2009	2007–2008	2006–2007	2005–2006	2004–2005	2003–2004
52 (a–i)	Intervention Location Code for Main and Other Interventions	*	C	*	C	*	*	*	*	*	*	*	C
53	Anaesthetic Technique	*	F, C	*	C	*	C	*	*	*	C	*	*
54	Died During Intervention Flag	O	O	O	O	R	*	*	*	*	*	*	*
55	Out-of-Hospital Indicator	*	*	*	*	C	*	*	*	*	*	*	*
56	Out-of-Hospital Institution Number	*	*	*	*	*	*	*	*	*	*	*	*
57	Blood Transfusion Indicator	*	*	*	*	C	*	*	*	*	*	*	*
58	Blood Components/ Products — Red Blood Cells	C	*	*	*	C	C	*	*	*	*	*	*
59	Platelets	C	*	*	*	C	C	*	*	*	*	*	*
60	Plasma	C	*	*	*	C	C	*	*	*	*	*	*
61	Albumin	C	*	*	*	C	C	*	*	*	*	*	*
62	Other	C	C	C	*	C	C	*	*	*	*	*	*
63	Autologous Blood Transfusion	C	*	C	*	C	C	*	*	*	*	C	*
64	Units of Blood Transfused — Red Blood Cells	*	*	*	*	*	*	*	*	*	*	*	*
65	Platelets	*	*	*	*	*	*	*	*	*	*	*	*
66	Plasma	*	*	*	*	*	*	*	*	*	*	*	*
67	Albumin	*	*	*	*	*	*	*	*	*	*	*	*
68	Other	*	*	*	*	*	*	*	*	*	*	*	*
69	Therapeutic Abortion Information — Number of Previous Term Deliveries	*	*	*	C	C	C	*	*	*	*	*	*
70	Number of Previous Preterm Deliveries	*	*	*	C	C	C	*	*	*	*	*	*
71	Number of Previous Spontaneous Abortions	*	*	*	C	C	C	*	*	*	*	*	*

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Data element ID Number	Description	2014– 2015	2013– 2014	2012– 2013	2011– 2012	2010– 2011	2009– 2010	2008– 2009	2007– 2008	2006– 2007	2005– 2006	2004– 2005	2003– 2004
72	Number of Previous Therapeutic Abortions	*	*	*	C	C	C	*	*	*	*	*	*
73	Gestational Age — Therapeutic Abortion	*	*	*	C	C	C	*	*	*	*	*	*
74	Date of Last Menses	*	*	*	C	C	C	*	*	*	*	*	*
75 (a–j)	MIS FC Account Code	*	*	*	C	C	*	*	*	*	*	F	*
76	Service Recipient– Specific Direct Cost	O	O	O	O	O	O	O	O	O	O	R	*
77	Service Recipient– Specific Indirect Cost	O	O	O	O	O	O	O	O	O	O	R	*
78	Traceable Supplies	O	O	O	O	O	O	O	O	O	O	R	*
79– 96 (a–e)	Special Project	*	C	*	C	C	*	*	*	*	*	*	*
97	PCTAS Indicator	O	O	O	O	R	*	*	*	*	*	*	N
98	Program Area	*	*	*	C	C	*	*	*	*	*	*	N
99	Scheduled ED Visit Indicator	O	O	O	R	C	*	C	*	*	*	*	N
100	Glasgow Coma Scale	*	C	*	*	C	C	C	*	*	*	*	N
101	Seatbelt Indicator	*	*	*	C	*	*	*	*	*	*	*	N
102	Helmet Indicator	*	*	*	C	*	*	C	*	*	*	N	O
103	Level of Care/ Service Recipient	O	O	R	*	*	*	*	*	*	*	N	O
104	Referral Date	*	*	*	*	*	*	*	*	*	*	N	O
105	Vendor MAC	*	*	*	*	*	*	*	*	*	*	N	O
106	Vendor CACS	*	*	*	*	*	*	*	*	*	*	N	O
107	Vendor RIW†	*	*	F	*	*	*	*	*	C	*	N	O
108	Complete Record	*	*	*	*	*	*	*	*	*	*	N	O
109	Main Intervention Start Date	*	C	C	C	C	*	*	*	*	*	N	O
110	Main Intervention Start Time	*	C	C	C	C	*	*	*	*	*	N	O
111 (a–i)	Other Intervention Start Date	*	C	C	C	C	*	*	*	*	*	N	O
112 (a–i)	Other Intervention Start Time	*	C	C	C	C	*	*	*	*	*	N	O

Data element ID Number	Description	2014–2015	2013–2014	2012–2013	2011–2012	2010–2011	2009–2010	2008–2009	2007–2008	2006–2007	2005–2006	2004–2005	2003–2004
113	Reason for Visit/ Chief Complaint[‡]	O	O	O	R	*	C	*	*	N	O	O	O
114	Disposition Date	*	C	C	C	*	*	*	N	O	O	O	O
115	Disposition Time	*	C	C	C	*	*	*	N	O	O	O	O
116	Date Patient Left Emergency Department	*	*	C	*	C	*	*	N	O	O	O	O
117	Time Patient Left Emergency Department	*	*	C	*	C	*	*	N	O	O	O	O
118	Ambulance Arrival Date	*	*	*	C	C	N	O	O	O	O	O	O
119	Ambulance Arrival Time	*	*	*	C	C	N	O	O	O	O	O	O
120	Ambulance Transfer of Care Process Date	*	*	C	C	C	N	O	O	O	O	O	O
121	Ambulance Transfer of Care Process Time	*	*	C	C	C	N	O	O	O	O	O	O
122	Clinical Decision Unit/Observation Unit Flag	*	*	*	C	C	N	O	O	O	O	O	O
123	Clinical Decision Unit Date In	*	*	C	C	C	N	O	O	O	O	O	O
124	Clinical Decision Unit Time In	*	*	C	C	C	N	O	O	O	O	O	O
125	Clinical Decision Unit Date Out	*	*	C	C	C	N	O	O	O	O	O	O
126	Clinical Decision Unit Time Out	*	*	C	C	C	N	O	O	O	O	O	O
127, 127 (a–i)	Problem Cluster for Main Problem (Main and Other)	*	*	C	C	*	N	O	O	O	O	O	O
128	Submission Level Code	*	*	*	*	C	N	O	O	O	O	O	O
129	Access to Primary Health Care Code	*	*	*	*	*	N	O	O	O	O	O	O
130 (a–c)	Consult Request Date	*	*	C	C	N	O	O	O	O	O	O	O
131 (a–c)	Consult Request Time	*	*	C	C	N	O	O	O	O	O	O	O
132 (a–c)	Consult Request Service	*	*	C	C	N	O	O	O	O	O	O	O

Data element ID Number	Description	2014–2015	2013–2014	2012–2013	2011–2012	2010–2011	2009–2010	2008–2009	2007–2008	2006–2007	2005–2006	2004–2005	2003–2004
133	Date of Non-Physician Initial Assessment (DNPIA)	*	*	C	C	N	O	O	O	O	O	O	O
134	Time of Non-Physician Initial Assessment (TNPIA)	*	*	C	C	N	O	O	O	O	O	O	O
135	Non-Physician Initial Assessment Provider Service (NPIAPS)	*	C	C	C	N	O	O	O	O	O	O	O
136 (a–c)	Presenting Complaint List	*	*	C	C	N	O	O	O	O	O	O	O
137 (a–c)	Emergency Department Discharge Diagnosis	*	C	C	C	N	O	O	O	O	O	O	O
138	Status After Triage	*	*	*	N	O	O	O	O	O	O	O	O
139	ED Visit Indicator	*	*	*	N	O	O	O	O	O	O	O	O
140	Vendor Age Category	*	*	*	N	O	O	O	O	O	O	O	O
141	Vendor Anaesthetic Category	*	*	*	N	O	O	O	O	O	O	O	O
142	Vender IT Total Count	*	*	*	N	O	O	O	O	O	O	O	O
143 (a–c)	Consult Arrival Date	*	*	C	N	O	O	O	O	O	O	O	O
144 (a–c)	Consult Arrival Time	*	*	C	N	O	O	O	O	O	O	O	O

Notes
† From 2004–2005 to 2005–2006, the name of data element 107 was Vendor ACW.
‡ From 2003–2004 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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