

#### REVSTAT

REVIEW STATUS (not abstracted)

- 0. Abstraction has not begun
- 1. Abstraction in progress
- 2. Abstraction completed w/o errors
- 3. TVG failure (exclusion)
- 4. Record contains missing required answers (error record)
- 5. Administrative exclusion from all measures

#### LEFDATE (Validation)

Discharge date (received on pull list and may not be modified)

#### ADMDT (Validation)

Date of admission to acute inpatient care

#### BIRTHDT

Patient date of birth (received on pull list)

#### AGE

Calculated field: ADMDT - BIRTHDT

#### CXRCTABN (Validation)

Using the inclusion list, was any chest x-ray or CT scan obtained the day of or day prior to hospital arrival OR anytime during this hospital stay **abnormal**?

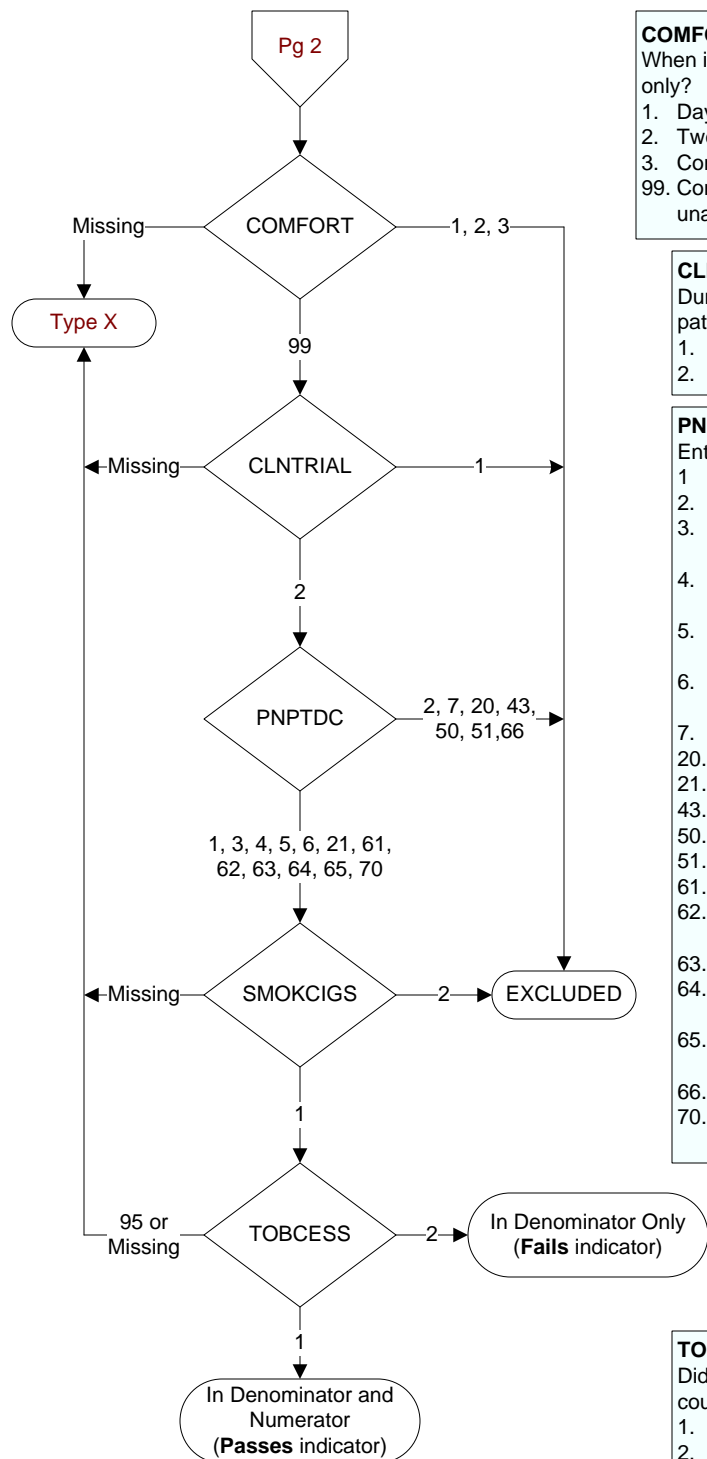
#### (SEE INCLUSION LIST)

- 1. Yes, a chest x-ray or CT scan done within the designated timeframe was abnormal (included ANY inclusion terms).
- 2. No, a chest x-ray/CT scan done within the designated timeframe was not abnormal (did not include ANY inclusion terms).
- 99. Unable to determine from medical record documentation if the chest x-ray or CT scan done during the designated timeframe was abnormal

#### CXRDONE (Validation)

Did the patient have a chest x-ray or CT scan on the day of or the day prior to hospital arrival OR anytime during this hospital stay?

- 1. Yes
- 2. No



#### COMFORT (Validation)

When is the earliest physician, APN, or PA documentation of comfort measures only?

1. Day of arrival (day 0) or day after arrival (day 1)
2. Two or more days after arrival (day 2 or greater)
3. Comfort measures only documented during hospital stay, but timing unclear
99. Comfort measures only was not documented by the physician/APN/PA or unable to determine

#### CLNTRIAL (Validation)

During this hospital stay, was the patient enrolled in a clinical trial in which patients with pneumonia were being studied?

1. yes
2. no

#### PNPTDC (Validation)

Enter the patient's discharge disposition:

1. discharged to home care or self care (routine discharge)
2. discharged/transferred to a short term general hospital for inpatient care
3. discharged/transferred to a skilled nursing facility (SNF) with Medicare certification, in anticipation of covered skilled care
4. Discharged/transferred to a facility that provides custodial or supportive care
5. discharged/transferred to discharged/transferred to a Designated Cancer Center or Children's Hospital
6. Discharged/transferred to home under care of organized home health service organization in anticipation of covered skilled care
7. left against medical advice or discontinued care
20. expired
21. Discharged/transferred to court/law enforcement
43. Discharged/transferred to a federal health care facility
50. hospice - home
51. hospice - medical facility (certified) providing hospice level of care
61. discharged/transferred to hospital-based Medicare approved swing bed
62. Discharged/transferred to inpatient rehabilitation facility (IRF) including rehabilitation distinct parts of a hospital
63. Discharged/transferred to a Medicare certified long-term care hospital
64. Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare
65. Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital
66. Discharged/transferred to a Critical Access Hospital (CAH)
70. Discharged/transferred to another Type of Health Care Institution not Defined Elsewhere in this Code List

#### SMOKCIGS (Acute Care)

Did the adult patient smoke cigarettes any time during the year prior to hospital arrival?

1. yes
2. no or unable to determine from medical record documentation

#### TOBCESS (Acute Care)

Did the patient/caregiver receive smoking/tobacco use cessation advice or counseling during the hospitalization?

1. yes
2. no
95. not applicable