**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

DFOBDC (IHF)

Discharge date: (rcv'd on pull list and may not be modified)

PRINCODE (IHF)

Enter the ICD-9-CM principal diagnosis code.

ENTRADM (IHF)

Admission date

BIRTHDT

Patient date of birth - received on pull list

AGE

Calculated field: ENTRADM - BIRTHDT

CLNTRIAL (IHF)

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

1. Yes
2. No

COMFORT (IHF)

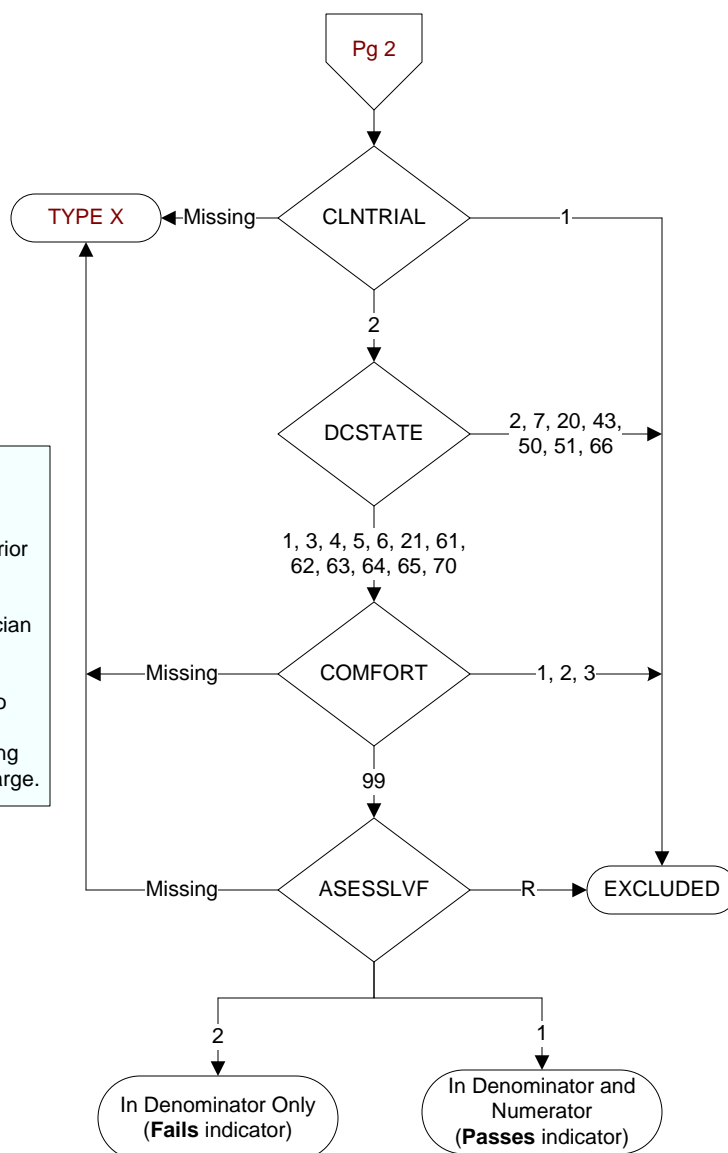
When is the earliest physician, APN, or PA documentation of comfort measures only?

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

ASESSLVF (IHF)

Is there documentation in the medical record of at least one of the following:

- Left ventricular systolic function (LVSF) assessment at any time prior to arrival or during this hospitalization
 - A plan for LVSF assessment after discharge
 - A reason documented by a physician, nurse practitioner, or physician assistant for not assessing LVSF
1. Yes
 2. No assessment at any time, no plan to assess after discharge, no reason documented, or unable to determine
 - R. Reason documented by a physician, APN, or PA for not assessing LVSF prior to arrival, during hospital stay, or planned after discharge.

**DCSTATE (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 skilled care
4. Discharged/transferred to a facility that provides custodial or supportive care
5. 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 Report this code when the patient is discharged/transferred to home with a written plan of care (tailored to the patient's medical needs)for home care services).
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