

**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

**APROCODE** (Validation)

Enter the ICD-9-CM principal diagnosis code

**DCDATE** (Validation)

Enter the date of discharge. (received on pull list and may not be modified)

**ADMDT** (Validation)

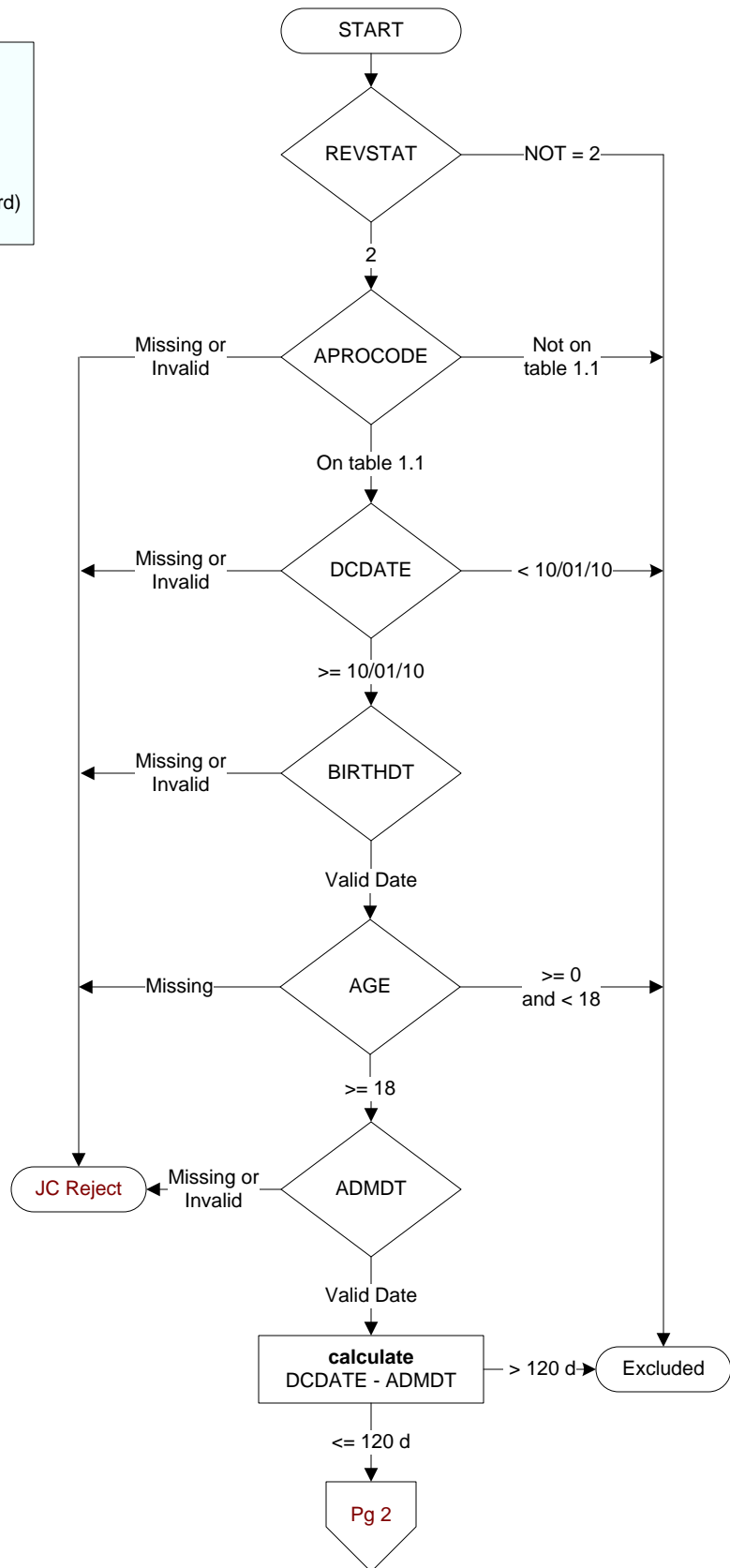
Enter the date the patient was formally admitted to inpatient status at this VAMC.

**BIRTHDT** (rcvd on pull list)

Patients date of birth.

**AGE**

calculated field: ADMDT - BIRTHDT



**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)

Was the patient involved in a clinical trial for Acute Myocardial Infarction during this hospital stay?

- 1 = Yes
- 2 = No

**ACSPTDC** (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
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

**LIPIDMED** (Hx & Assmt)

Is there documentation that the patient was on a lipid-lowering medication prior to hospital arrival?

1. Yes
2. No

**INPTLDL** (Hx & Assmt)

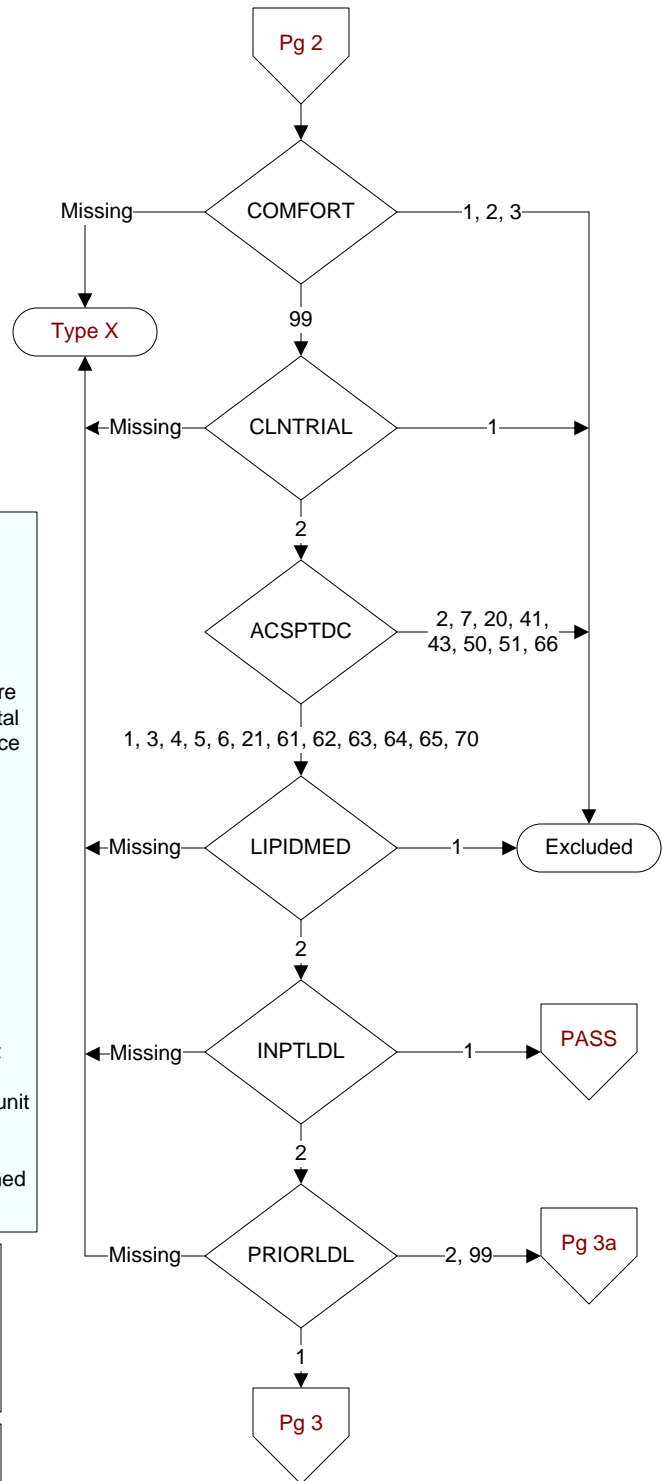
Was an LDL-cholesterol (LDL-c) test in mg/dL (or mg/100ml) performed during this hospital stay?

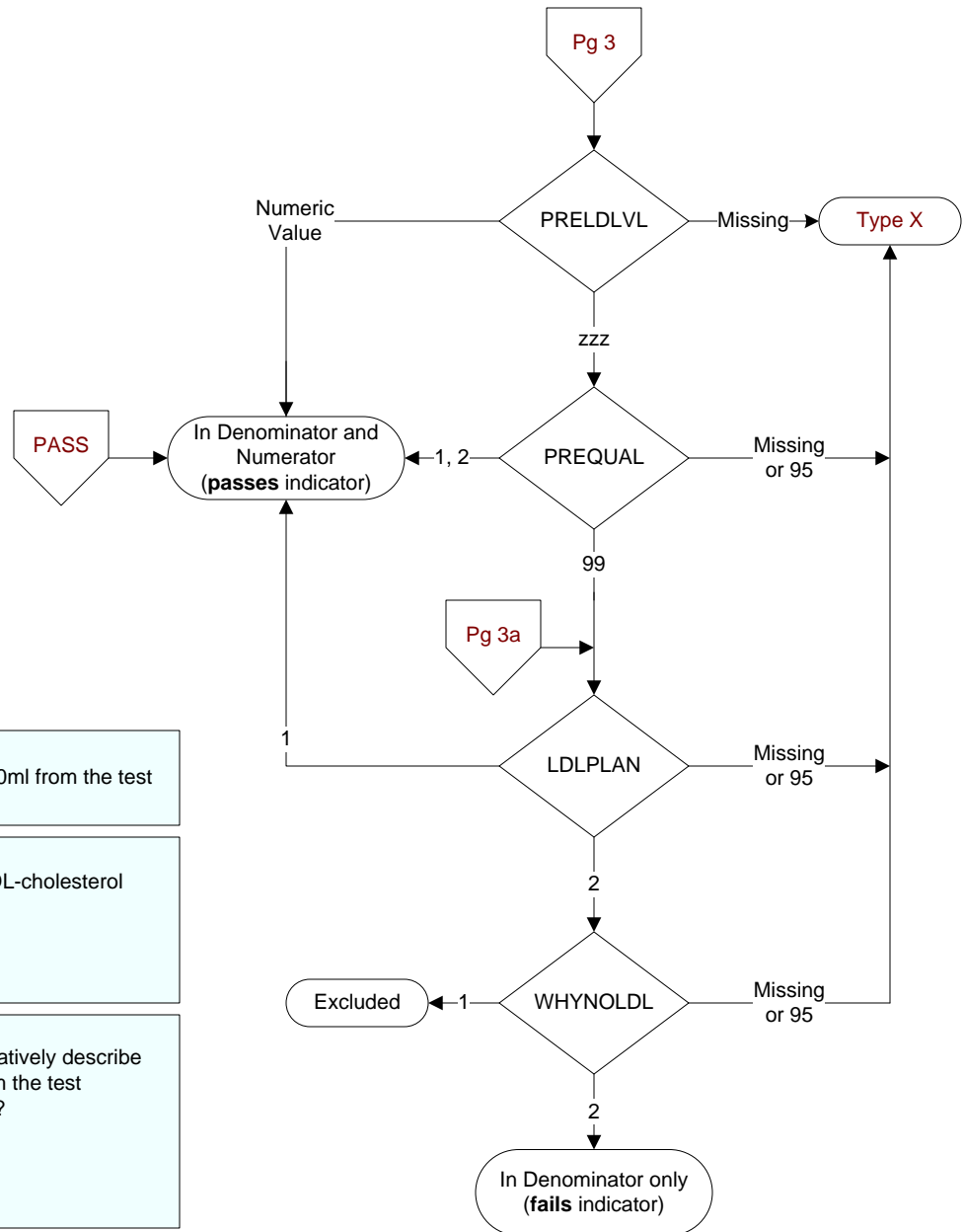
1. yes
2. no

**PRIORLDL** (Hx & Assmt)

Does the record document an LDL-cholesterol (LDL-c) test in mg/dL or mg/100ml was performed within one year prior to acute care arrival?

1. Yes
2. No
99. Not documented/unable to determine





**PRELDLVL** (Hx & Assmt)  
Enter the LDL-c value in mg/dL or mg/100ml from the test performed within one year prior to arrival.

**LDLPLAN** (Hx & Assmt)  
Is there documentation of a plan to do LDL-cholesterol testing after discharge?  
1. Yes  
2. No  
95. Not applicable

**PREQUAL** (Hx & Assmt)  
How did the physician, APN, or PA qualitatively describe the patient's LDL-cholesterol (LDL-c) from the test performed within one year prior to arrival?  
1. Elevated LDL-c  
2. No elevated LDL-c  
95. Not applicable  
99. Not documented

**WHYNOLDL** (Hx & Assmt)  
Is there a reason documented by a physician, APN, or PA for not doing LDL-cholesterol (LDL-c) testing?  
1. Yes  
2. No  
95. Not applicable