

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

CATNUM

Sample category (received on pull list)

- 65. No VTE sub-population
- 66. Principal VTE sub-population
- 67. Secondary VTE sub-population

AGE (calculated field)

VTEADMDT - Patient date of birth

VTEDCDT (VTE)

Discharge Date

VTEADMDT (VTE)

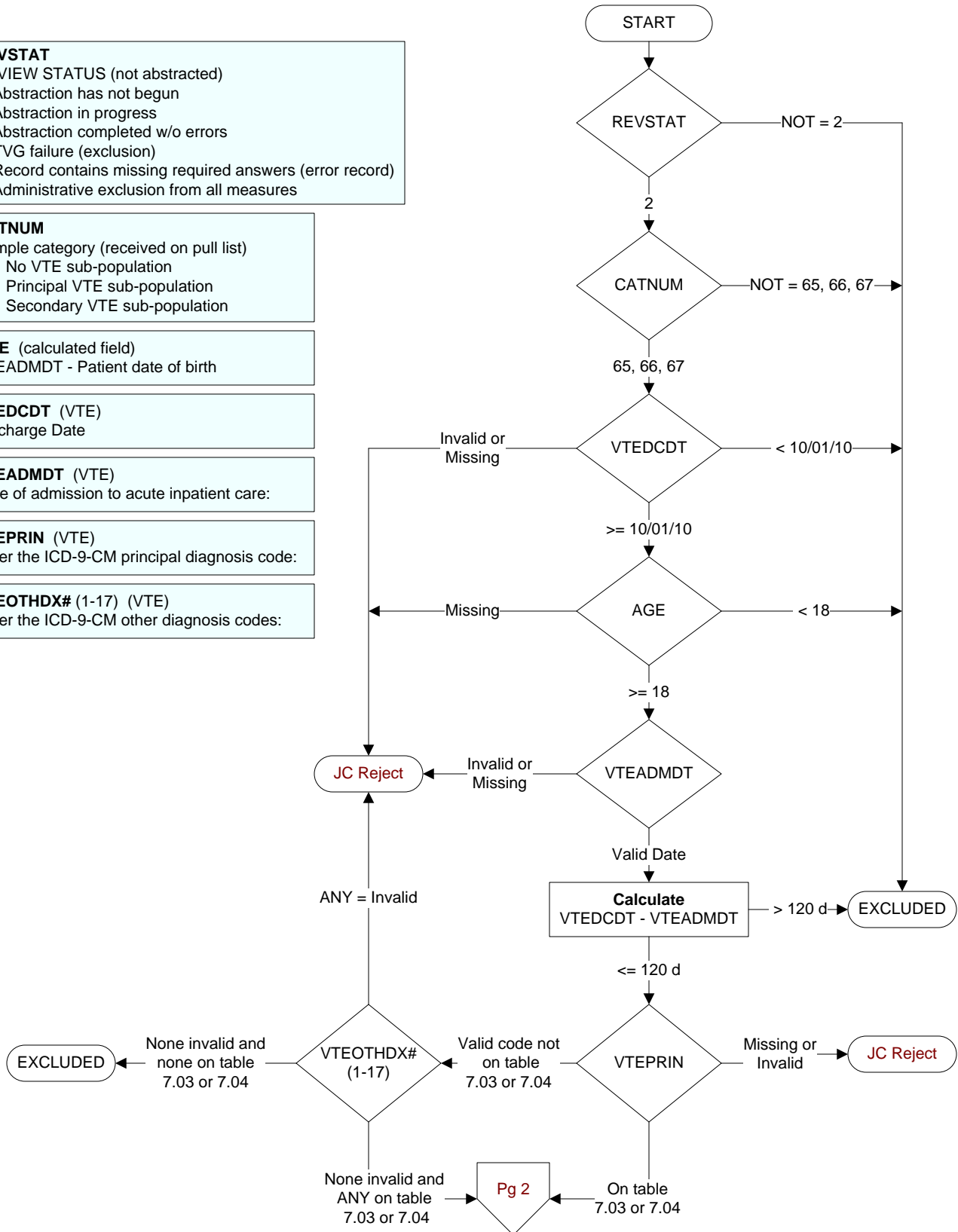
Date of admission to acute inpatient care:

VTEPRIN (VTE)

Enter the ICD-9-CM principal diagnosis code:

VTEOTHDX# (1-17) (VTE)

Enter the ICD-9-CM other diagnosis codes:



CLNTRIAL (VTE)

During this hospital stay, was the patient enrolled in a clinical trial in which patients with venous thromboembolism (VTE) were being studied?

1. Yes
2. No

VTETEST (VTE)

Is there documentation that a diagnostic test for VTE was performed?

1. Yes
2. No

POSVTE (VTE)

Is there physician/APN/PA documentation that the patient had a diagnosis of VTE confirmed in one of the defined locations?

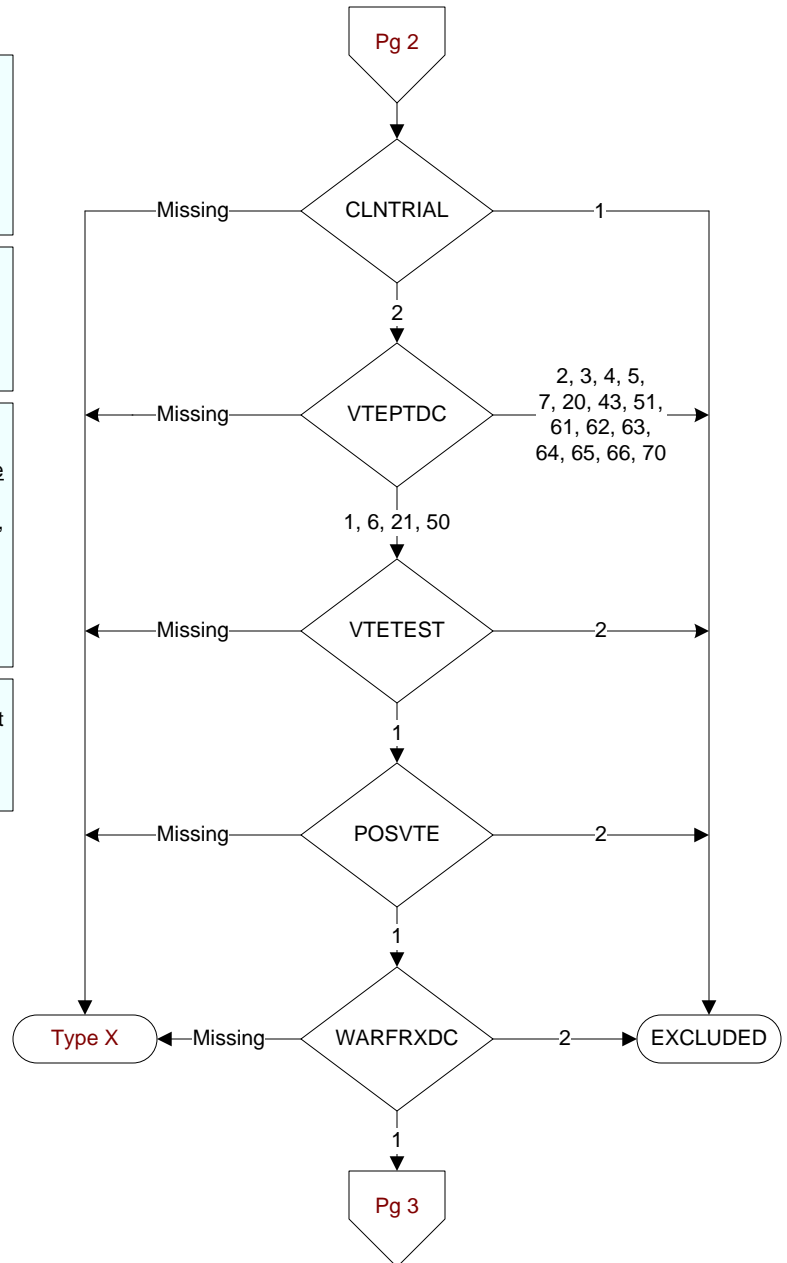
VTE Location: DVT located in the proximal leg veins, including the inferior vena cava (IVC), iliac, femoral or popliteal veins, or to pulmonary emboli (PE).

1. Yes
2. No or unable to determine from medical record documentation

WARFRXDC (VTE)

Is there documentation that warfarin was prescribed at discharge?

1. Yes
2. No

**VTEPTDC (VTE)**

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

PTEDCOM (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address compliance issues related to warfarin therapy prescribed after discharge?

1. Yes
2. No

PTEDIET (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address dietary advice related to warfarin therapy prescribed after discharge?

1. Yes
2. No

PTEDFOLO (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address follow-up monitoring related to warfarin therapy prescribed after discharge?

1. Yes
2. No

PTEDADR (VTE)

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address potential for adverse drug reactions and interactions related to warfarin therapy prescribed after discharge?

1. Yes
2. No

