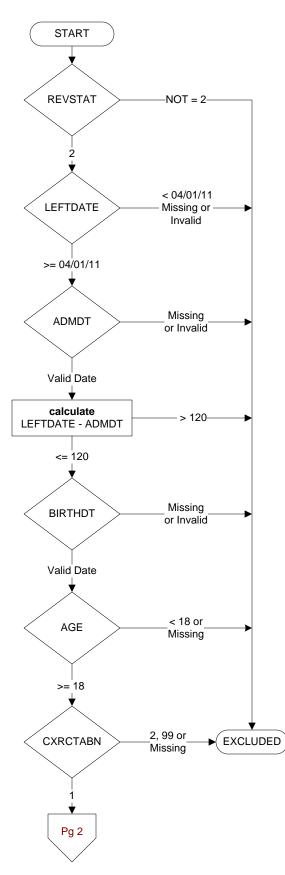
# PN 4q11 - CAP1 - CAP - Inpt - O2 Assess in 24 Hours of Arrival (MPR)



## 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

## **LEFTDATE** (Validation)

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

## ADMDT (Validation)

Date of admission to acute inpatient care

# AGE

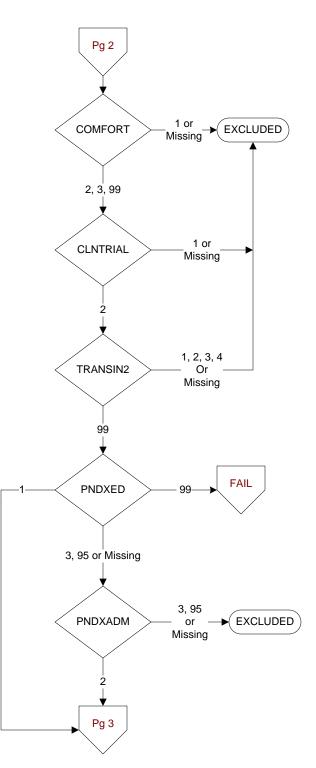
Calculated field: ADMDT - BIRTHDT

#### **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 <u>abnormal</u>? (SEE INCLUSION LIST)

- 1. Yes, a chest x-ray or CT scan done within the designated
- timeframe was abnormal (included ANY inclusion terms).
  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

# PN 4q11 - CAP1 - CAP - Inpt - O2 Assess in 24 Hours of Arrival (MPR)



## **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)
- 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

# TRANSIN2 (Validation)

Was the patient received as a transfer from an inpatient, outpatient, or emergency/observation department of another hospital OR from an ambulatory surgery center?

- 1. Patient received as a transfer from an inpatient department of another hospital
- Patient received as a transfer from an outpatient department of another hospital (excludes emergency/observation departments)
- 3. Patient received as a transfer from the emergency/observation department of another hospital
- Patient received as a transfer from an ambulatory surgery center
   None of the above or unable to determine from medical record documentation

### PNDXADM (Validation)

Was there documentation of the diagnosis of pneumonia as an admission diagnosis/impression for the **direct admit** patient? **Physician, Advanced Practice Nurse, or Physician Assistant documentation only** 

- 2. There <u>is</u> documentation that pneumonia is listed as an initial diagnosis/impression upon direct admit.
- There is NO documentation of pneumonia as an initial diagnosis/ impression upon direct admit.
- 95. Not applicable

#### PNDXED (Validation)

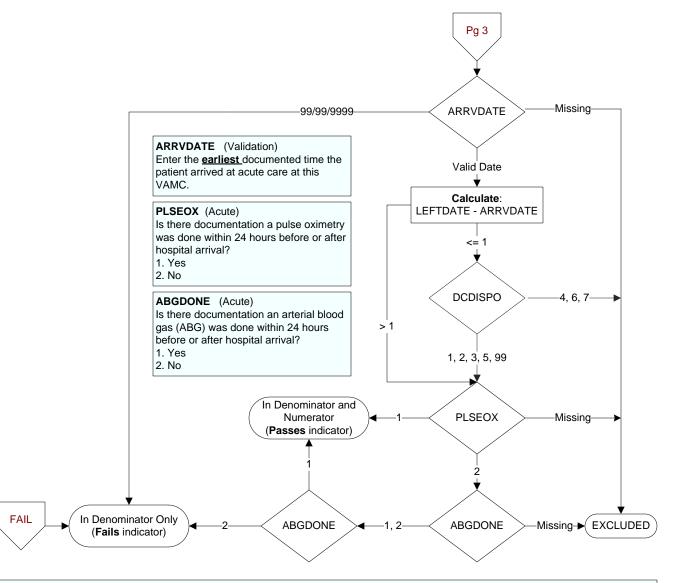
Was there documentation of the diagnosis of pneumonia as an Emergency Department final diagnosis/impression? Physician, Advanced Practice Nurse, or Physician Assistant

- documentation only 1. There is documentation that pneumonia was a final diagnosis/
- impression on the ED form.3. There is NO documentation of pneumonia as a final diagnosis/ impression on the ED form

#### 95. Not applicable

99. Unable to determine from ED medical record documentation (only use if the final ED diagnosis/impression is left blank in **ALL** 

Emergency Department sources)



#### DCDISPO (Validation)

What was the patient's discharge disposition on the day of discharge?

- 1. Home
- -- Assisted Living Facilities
- -- Court/Law Enforcement -- includes detention facilities, jails, and prison
- -- Board and care, domiciliary, foster or residential care, group or personal care homes, and homeless shelters
- -- Home with Home Health Services
- -- Outpatient Services including outpatient procedures at another hospital, outpatient Chemical Dependency Programs and Partial Hospitalization
- 2. Hospice Home
- 3. Hospice Health Care Facility
- -- General Inpatient and Respite, Residential and Skilled Facilities, and Other Health Care Facilities
- 4. Acute Care Facility
- -- Acute Short Term General and Critical Access Hospitals
- -- Cancer and Children's Hospitals
- -- Department of Defense and Veteran's Administration Hospitals
- 5. Other Health Care Facility
- -- Extended or Immediate Care Facility (ECF/ICF)
- -- Long Term Acute Care Hospital (LTACH)
- -- Nursing Home or Facility including Veteran's Administration Nursing Facility
- -- Psychiatric Hospital or Psychiatric Unit of a Hospital
- -- Rehabilitation Facility including Inpatient Rehabilitation Facility/Hospital or Rehabilitation Unit of a Hospital
- -- Skilled Nursing Facility (SNF), Sub-Acute Care or Swing Bed
- -- Transitional Care Unit (TCU)
- 6. Expired
- 7. Left Against Medical Advice/AMA
- 99. Not documented or unable to determine