

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**?

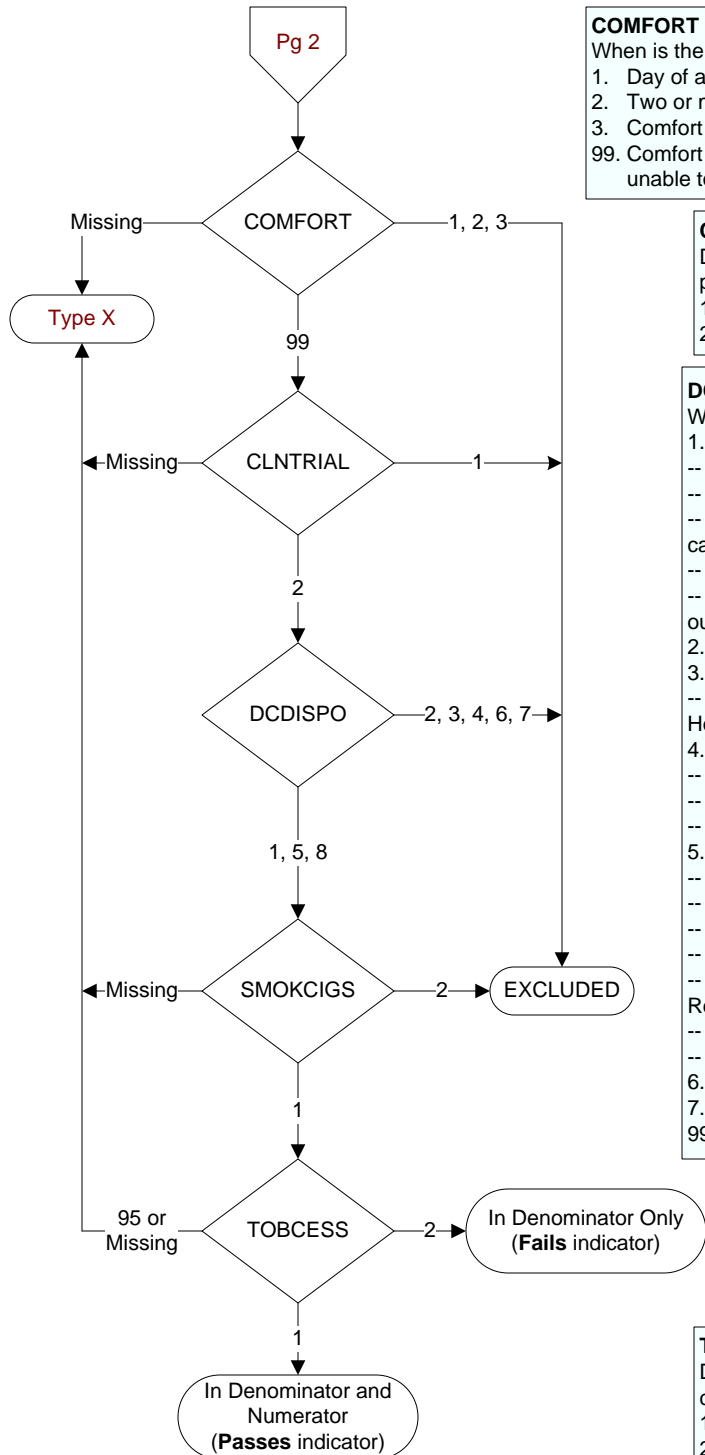
(SEE INCLUSION LIST)

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

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

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