

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.

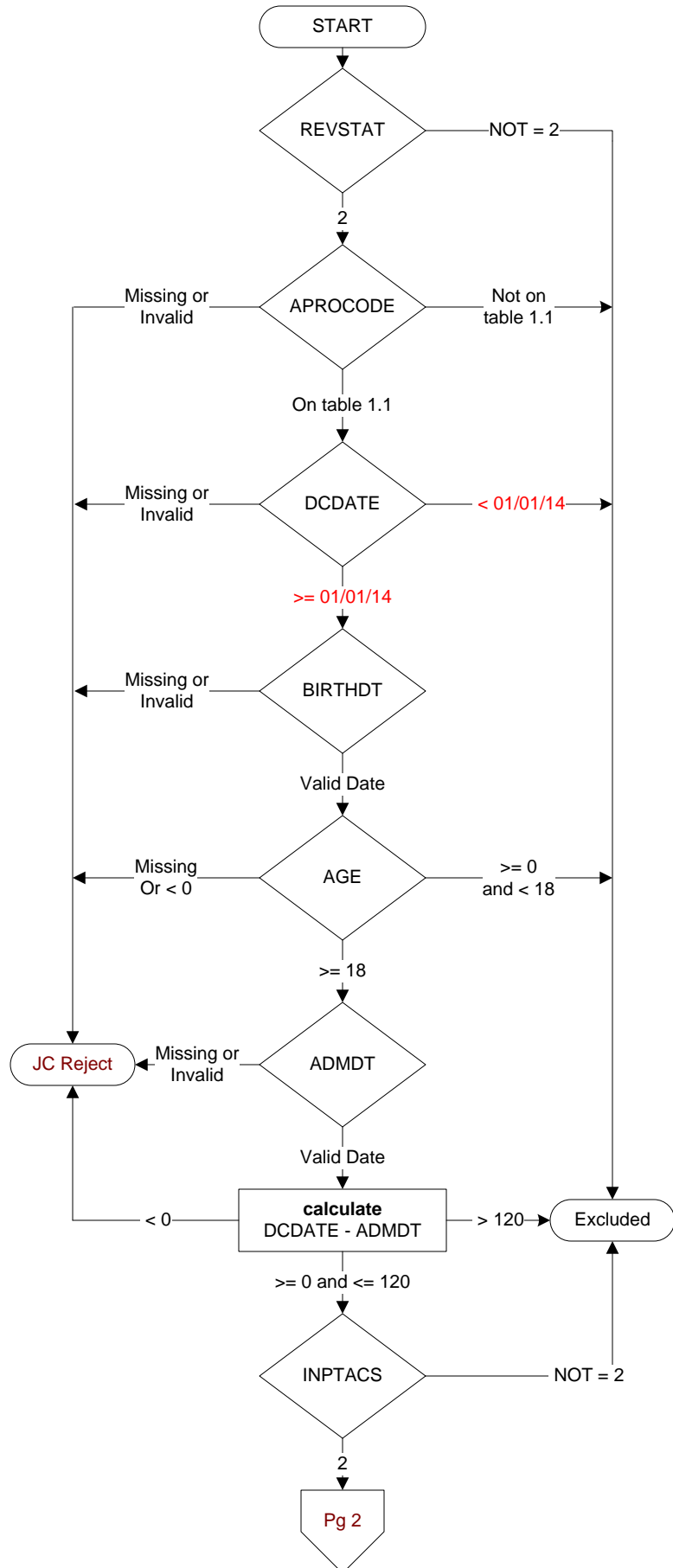
AGE

calculated field: ADMDT - BIRTHDT

INPTACS (Validation)

Was the veteran already a VAMC inpatient when ACS occurred?

- 1. yes
- 2. no
- 95. not applicable



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 acute myocardial infarction (AMI) were being studied?

(Includes AMI, STEMI, NSTEMI, or heart attack)

- 1 = Yes
2 = No

BLKATDC (Discharge)

Was the patient prescribed a beta-blocker at discharge?

Examples of beta-blockers include but are not limited to:

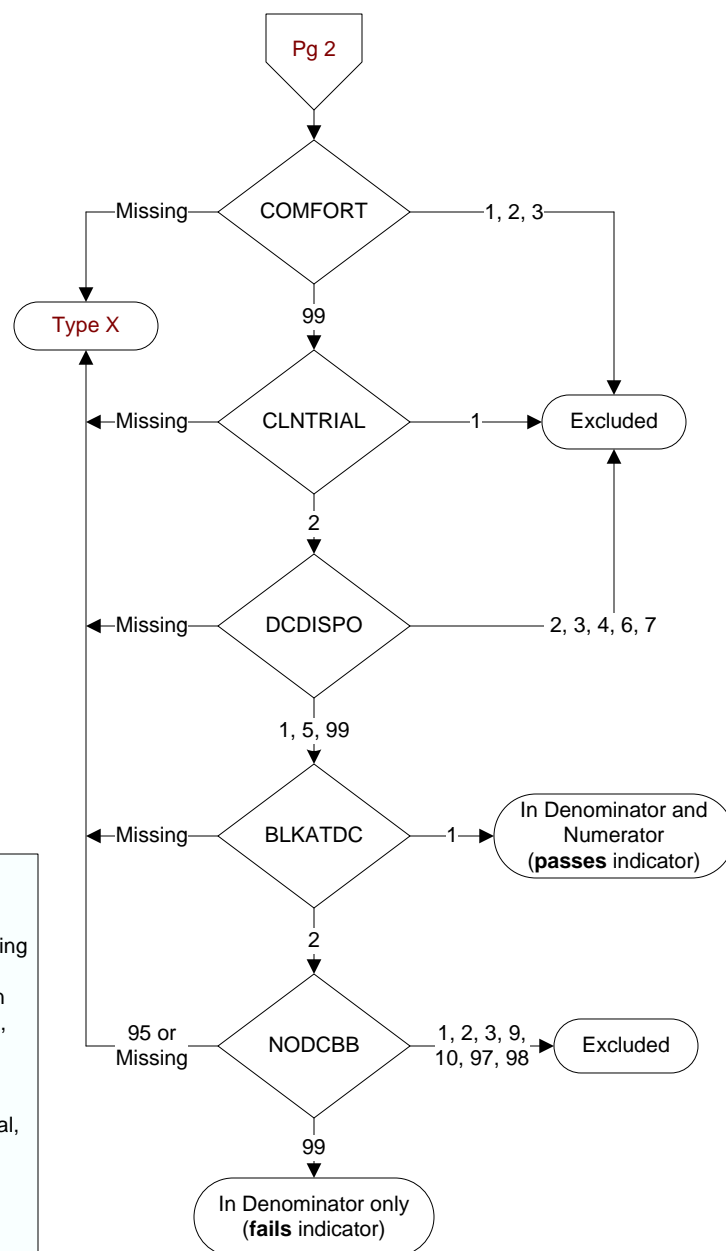
- metoprolol succinate or tartrate
- carvedilol
- atenolol
- nadolol
- propranolol
- combination of beta-blockers with other drugs

1. yes
2. no

DCDISPO (Validation)

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

1. Home
 - Assisted Living Facilities (ALFs) - includes assisted living care at nursing home facility
 - Court/Law Enforcement – includes detention facilities, jails, and prison
 - Home - includes board and care, domiciliary, foster or residential care, group or personal care homes, retirement communities, 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 (or other home setting as listed in #1 above)
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)
 - Veteran's Home
6. Expired
7. Left Against Medical Advice/AMA
99. Not documented or unable to determine

**NODCBB** (Discharge)

Does the record document any of the following reasons for not prescribing a beta-blocker at discharge?

1. Beta-blocker allergy
2. Bradycardia (heart rate less than 60 bpm) on day of discharge or day prior to discharge while not on a beta blocker
3. Second or third-degree heart block on ECG on arrival or during hospitalization and does not have a pacemaker
9. Post-heart transplant patient
10. Severely decompensated heart failure, as evidenced by patient receiving IV dobutamine, milrinone, or nesiritide during acute care
95. Not applicable
97. Other reasons documented by a physician/APN/PA or pharmacist for not prescribing a beta-blocker at discharge
98. Patient refusal of beta-blockers documented by physician/APN/PA or pharmacist
99. No documented contraindication