

**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

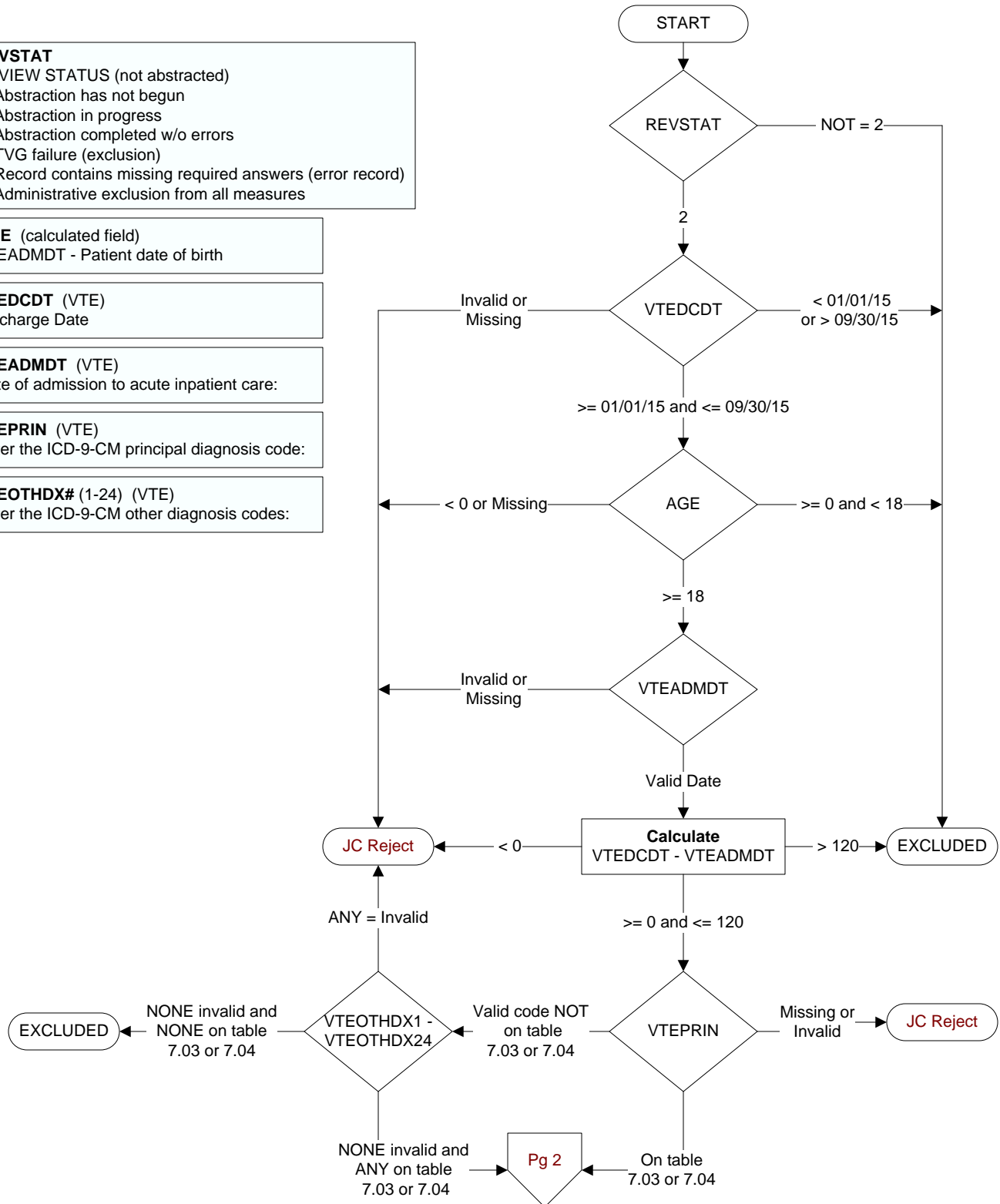
**AGE** (calculated field)  
VTEADMDT - Patient date of birth

**VTEDCDT** (VTE)  
Discharge Date

**VTEADMDT** (VTE)  
Date of admission to acute inpatient care:

**VTEPRIN** (VTE)  
Enter the ICD-9-CM principal diagnosis code:

**VTEOTHDX#** (1-24) (VTE)  
Enter the ICD-9-CM other diagnosis codes:



**COMFORT (VTE)**

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 (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 within four days prior to arrival or anytime during the hospitalization?

1. Yes
2. No

**DCDISPO (VTE)**

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 facilities and homeless shelters
  - Home with Home Health Services
2. Outpatient Services including outpatient procedures at another hospital, outpatient Chemical Dependency Programs and Partial Hospitalization
3. Hospice – Home (or other home setting as listed in #1 above)
4. Hospice – Health Care Facility
  - General Inpatient and Respite, Residential and Skilled Facilities, and Other Health Care Facilities
5. Acute Care Facility
  - Acute Short Term General and Critical Access Hospitals
  - Cancer and Children's Hospitals
  - Department of Defense and Veteran's Administration Hospitals
6. 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
7. Expired
99. Left Against Medical Advice/AMA
99. Not documented or unable to determine

**POSVTE (VTE)**

Is there physician/APN/PA documentation that the patient had a diagnosis of VTE confirmed in one of the defined locations within four calendar days prior to arrival, or anytime during hospitalization?

**VTE Confirmed: Deep Vein Thrombosis (DVT) located in the proximal leg veins, including superficial femoral vein; the inferior vena cava (IVC); iliac, femoral or popliteal veins; or pulmonary emboli (PE).**

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

**ADMIVHEP (VTE)**

Is there documentation that **intravenous (IV) unfractionated heparin** was administered?

1. Yes
2. No

**MGTHEPTX (VTE)**

Was there physician/APN/PA or Pharmacist documentation that the IV unfractionated heparin (UFH) AND platelet counts were managed by defined parameters using a nomogram or protocol?

1. Yes
2. No
95. Not applicable

