

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

EMCODE (HOP)

Enter the E/M code documented for this outpatient encounter.

DCCODE (HOP)

What was the patient's discharge disposition from the outpatient setting?

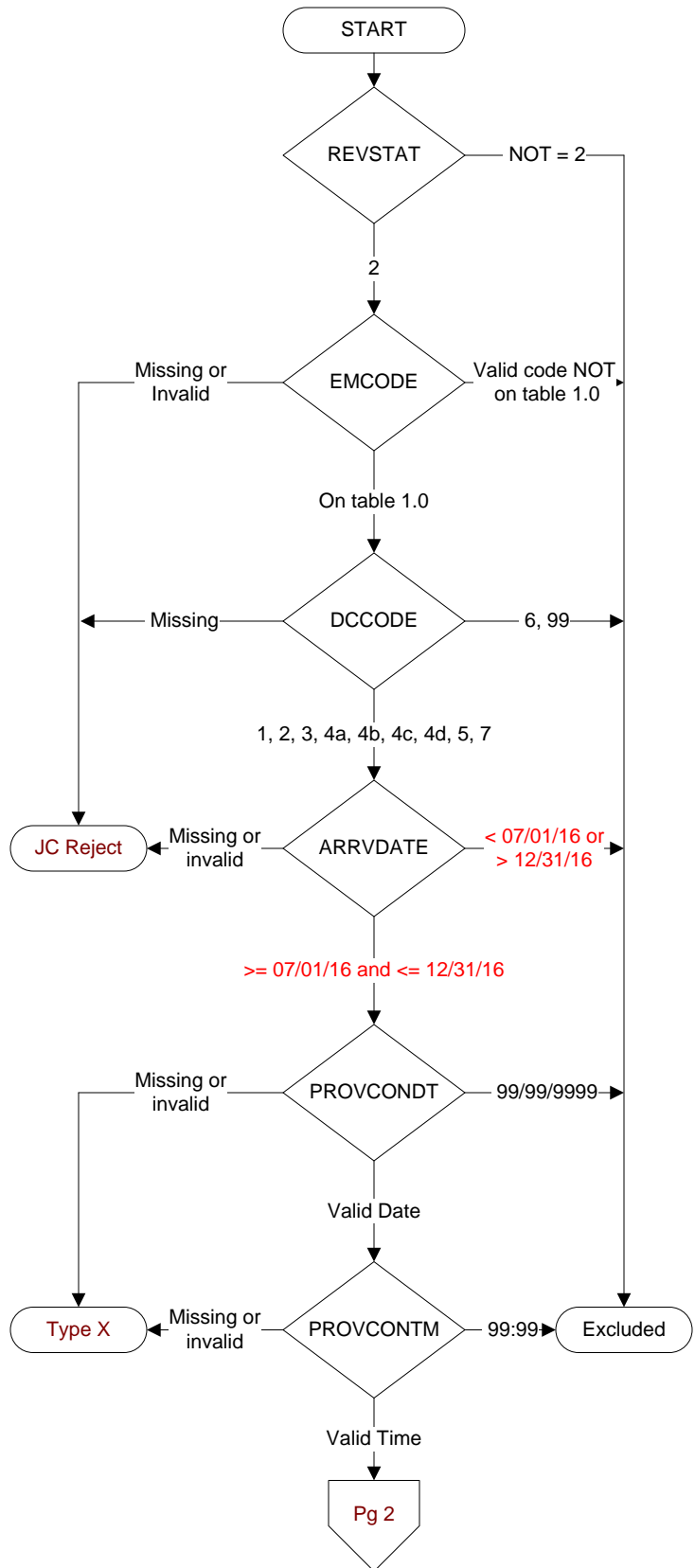
1. Home
 - Assisted Living Facilities (ALFs) – includes assisted living care at nursing home/facility
 - Court/Law Enforcement – includes detention facilities, jails, and prison
 - Home – includes board and care, domiciliary, foster or residential care, group or personal care homes, retirement communities, 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
- 4a. Acute Care Facility – General Inpatient Care
- 4b. Acute Care Facility – Critical Access Hospital
- 4c. Acute Care Facility - Cancer or Children's Hospitals
- 4d. Acute Care Facility - Department of Defense or 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

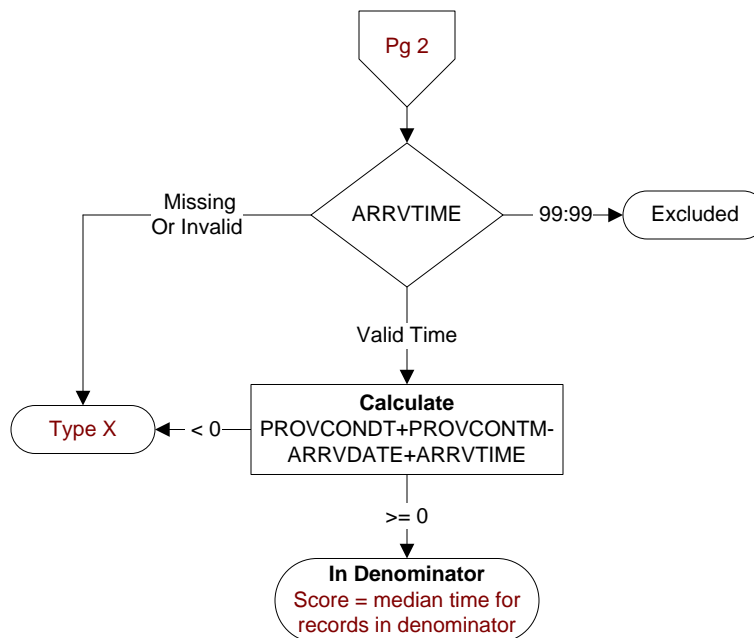
PROVCONDT (HOP)

Enter the date the patient first had direct personal exchange with the physician/APN/PA or institutionally credentialed provider to initiate the medical screening examination in the emergency department.

PROVCONTM (HOP)

Enter the time the patient first had direct personal exchange with the physician/APN/PA or institutionally credentialed provider to initiate the medical screening examination in the emergency department.

ARRVDATE (HOP)Enter the **earliest** documented date the patient arrived in the hospital outpatient setting at this VAMC.



ARRVTIME (HOP)
Enter the **earliest** documented time the patient arrived at the outpatient or emergency department at this VAMC.