

**Document Links:**[CGPI Validation Module](#)[CGPI PI Module](#)**COHORT**

16. AMI - Outpatient visit  
 48. Female, age 20-69  
 50. Random Sample  
 51. Random Sample MH  
 54. Frail/Elderly  
 60. DM Outpatient

**FEFLAG** (rcvd on pull list)

FE case flagged for CGPI review / scoring?

0. No  
 1. Yes

**OTHCARE** (Validation)

Is there evidence in the medical record that within the past two years, the patient refused VHA Primary Care and is receiving ONLY his/her primary care in a non-VHA setting?

1. yes  
 2. no

**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 data  
 5. Administrative exclusion from all measures

**HOSPICE** (Validation)

During the past year is there documentation in the medical record the patient is enrolled in a VHA or community-based hospice program?

1. Yes  
 2. No

**BNMRTRNS** (PI)

During the past year is there documentation in the medical record the patient had a bone marrow transplant?

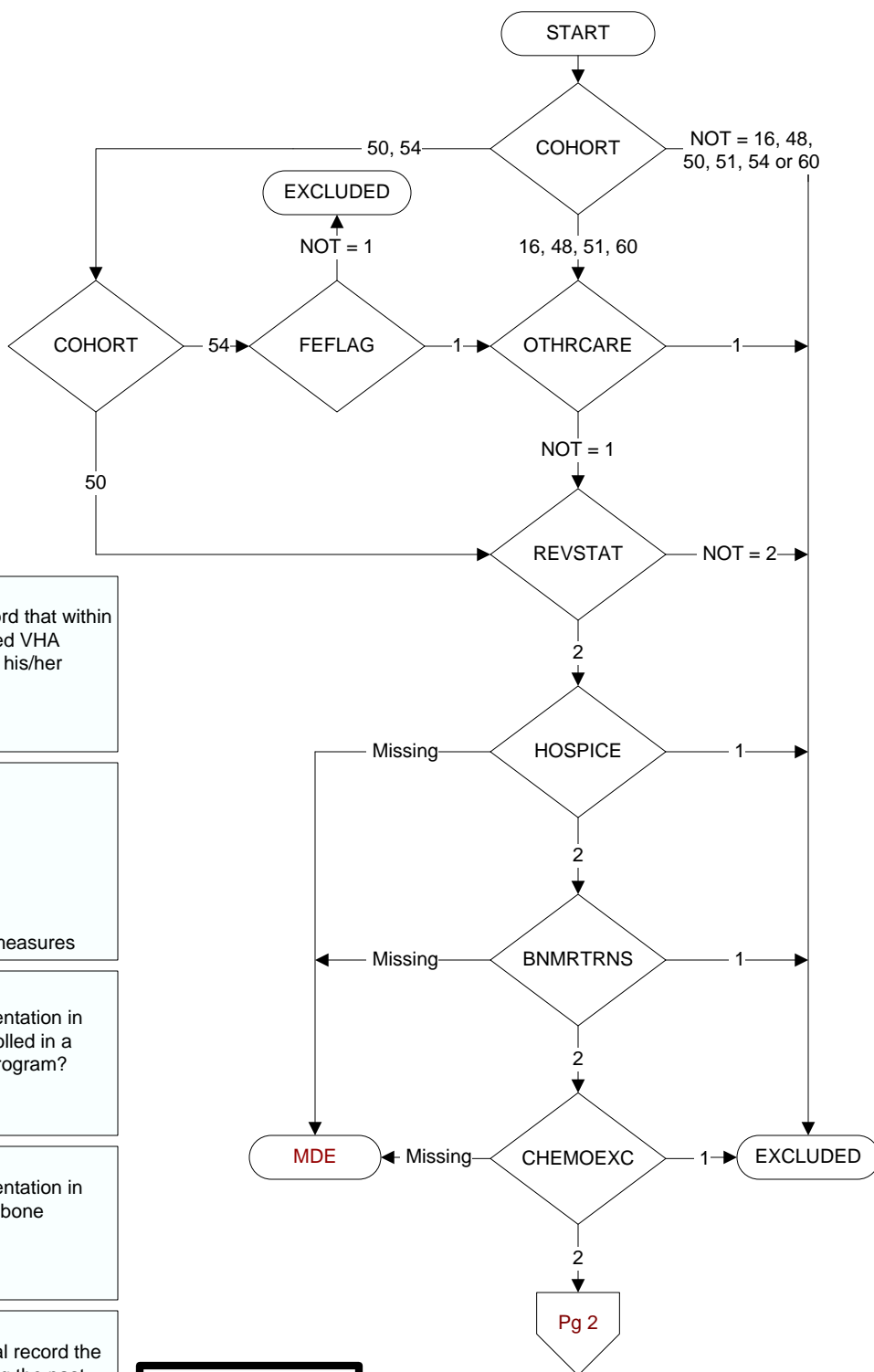
1. Yes  
 2. No

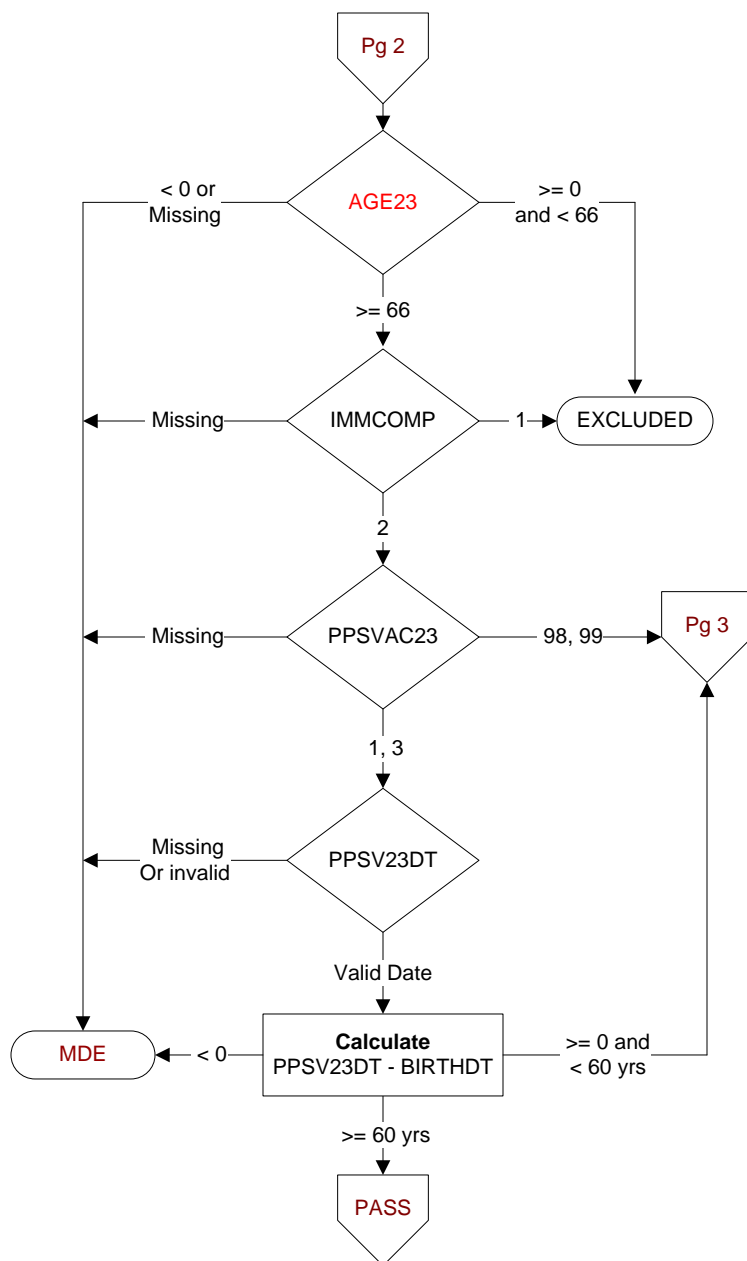
**CHEMOEXC** (PI)

Is there documentation in the medical record the patient received chemotherapy during the past year?

1. Yes  
 2. No

**MDE = Missing or  
 Invalid Data Exclusion  
 (data error)**



**AGE23**

Calculated field (01/01/23 - BIRTHDT).

**IMMCOMP (PI)**

At any time in the patient's history through (computer to display stdyend) is there documentation of any of the following in the medical record?

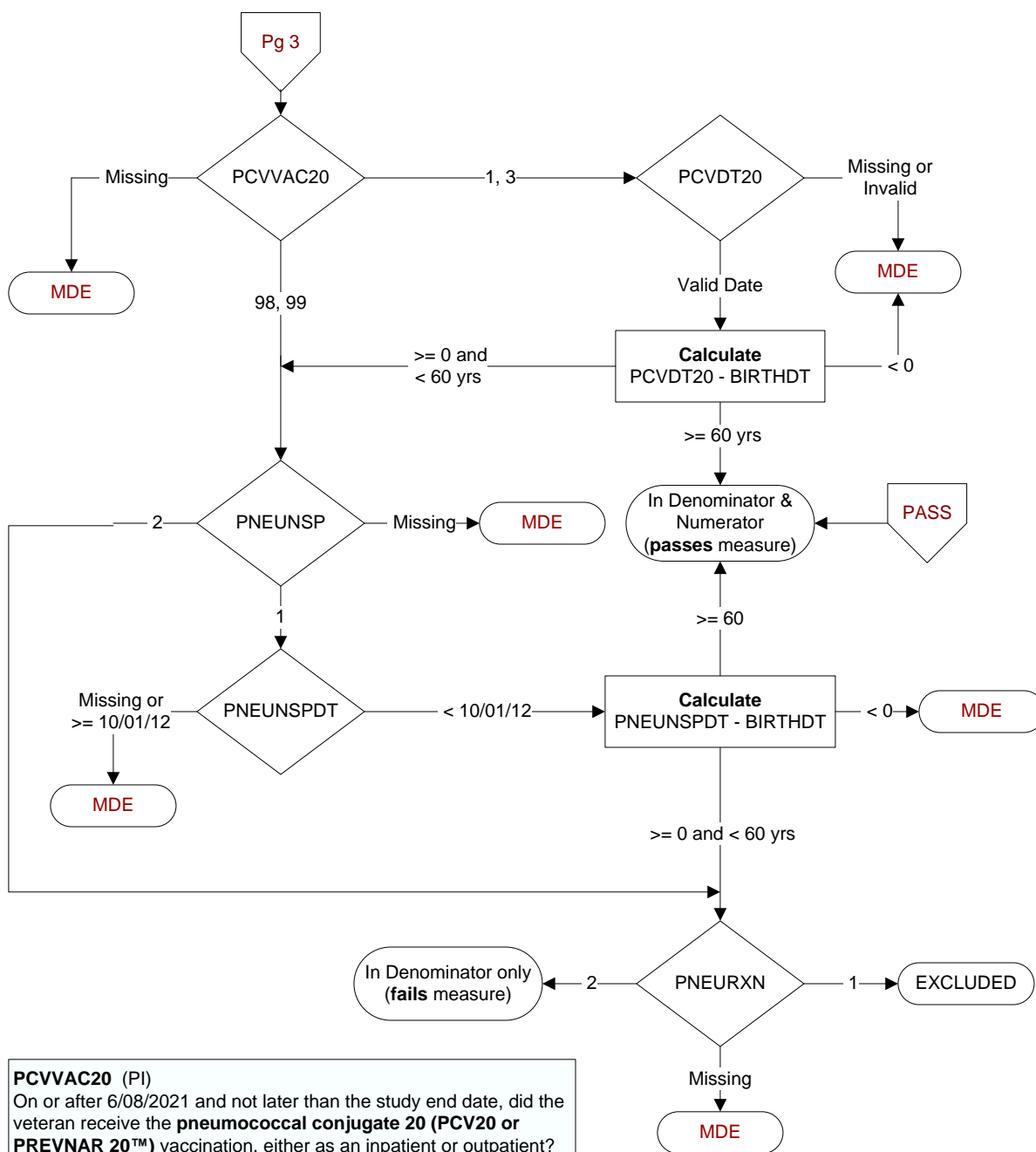
- Immunocompromising conditions
- Anatomic or functional asplenia
- Sickle cell disease and HB-S disease
- Cerebrospinal fluid leak(s)
- Cochlear implant(s)

1. Yes
2. No

**PPSVAC23 (PI)**At any time, not later than the study end date, did the veteran receive the **PPSV23 (Pneumovax 23®, Pnu-Imune 23®)** or Pneumovax vaccination, either as an inpatient or outpatient?

1. received **PPSV23** (Pneumovax 23®, Pnu-Imune 23®) or Pneumovax vaccination from VHA
3. received **PPSV23** (Pneumovax 23®, Pnu-Imune 23®) or Pneumovax vaccination from private sector provider
98. patient refused **PPSV23** (Pneumovax 23®, Pnu-Imune 23®) or Pneumovax vaccination
99. no documentation patient received **PPSV23** (Pneumovax 23®, Pnu-Imune 23®) or Pneumovax vaccination

**PPSV23DT (PI)**Enter the date of the **PPSV23** (Pneumovax 23®, Pnu-Imune 23®) or Pneumovax vaccination.**BIRTHDT** (rcvd on pull list)  
Patient date of birth

**PCVVAC20 (PI)**

On or after 6/08/2021 and not later than the study end date, did the veteran receive the **pneumococcal conjugate 20 (PCV20 or PREVNAR 20™)** vaccination, either as an inpatient or outpatient?

1. received PCV20 or PREVNAR 20™ vaccination from VHA
3. received PCV20 or PREVNAR 20™ vaccination from private sector provider
98. patient refused PCV20 or PREVNAR 20™ vaccination
99. no documentation patient received PCV20 or PREVNAR 20™ vaccination

**PCVDT20 (PI)**

Enter the date of the PCV20 or PREVNAR 20™ vaccination.

**PNEUNSP (PI)**

Prior to 10/01/2012, is there documentation in the medical record of an unspecified pneumococcal vaccination?

1. Yes
2. No

**PNEUNSPDT (PI)**

Enter the date that the unspecified pneumococcal vaccination was given.

**PNEURXN (PI)**

Is there documentation in the medical record of a prior anaphylactic reaction to a pneumococcal vaccine?

1. Yes
2. No