

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

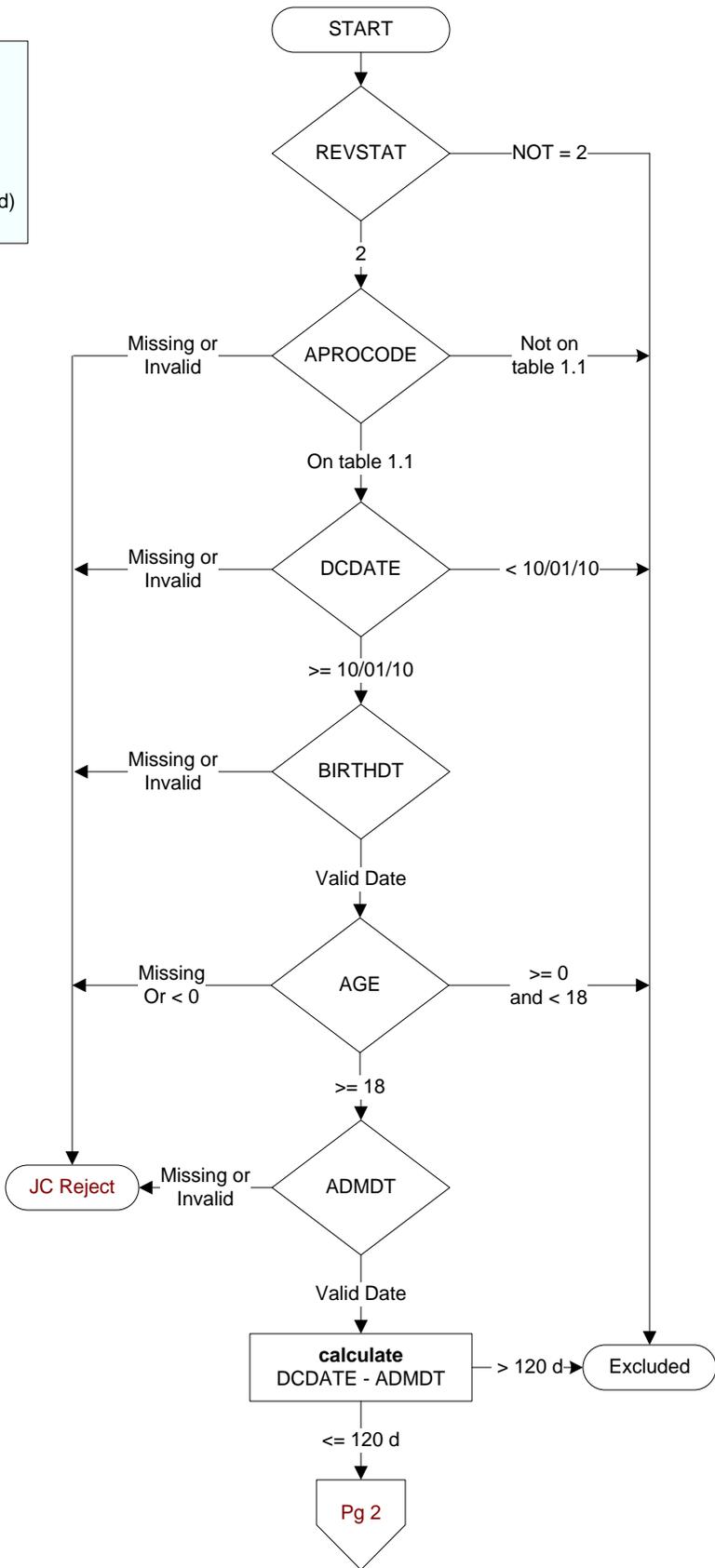
APROCODE (Validation)
 Enter the ICD-9-CM principal diagnosis code

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



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

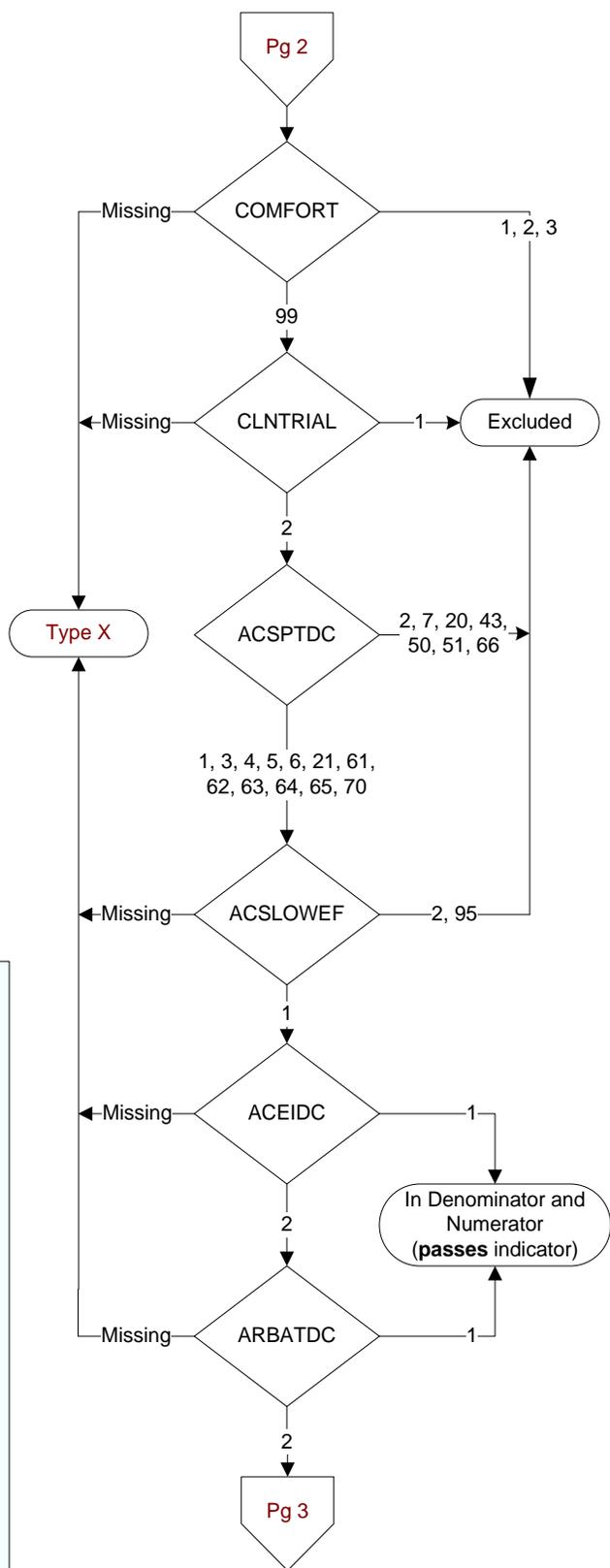
CLNTRIAL (Validation)
 During this hospital stay, was the patient enrolled in a clinical trial in which patients with acute myocardial infarction (AMI) were being studied?
 1 = Yes
 2 = No

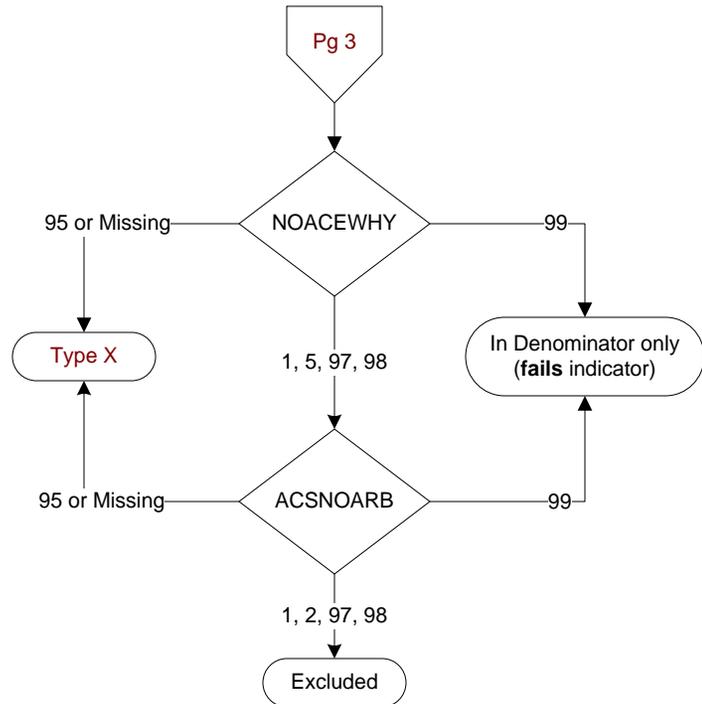
ACSLWEF (Cont Care)
 Is the left ventricular systolic function (LVSF) documented as an ejection fraction (EF) less than 40% or narrative description consistent with moderate or severe systolic dysfunction (LVSD)?
 1. yes
 2. no
 95. not applicable

ACEIDC (Discharge)
 Was an angiotensin converting enzyme inhibitor (ACE inhibitor) prescribed at discharge?
 1. yes
 2. no

ARBATDC (Discharge)
 Was an angiotensin II receptor antagonist (ARB or AIIRA) prescribed at discharge?
 1. yes
 2. no

ACSPTDC (Validation)
 Enter the patient's discharge disposition:
 1. discharged to home care or self care (routine discharge)
 2. discharged/transferred to a short term general hospital for inpatient care
 3. discharged/transferred to a skilled nursing facility (SNF) with Medicare certification in anticipation of skilled care
 4. Discharged/transferred to a facility that provides custodial or supportive care
 5. discharged/transferred to a Designated Cancer Center or Children's Hospital
 6. Discharged/transferred to home under care of organized home health service organization in anticipation of covered skilled care
 7. left against medical advice or discontinued care
 20. expired
 21. Discharged/transferred to court/law enforcement
 43. Discharged/transferred to a federal health care facility
 50. hospice - home
 51. hospice - medical facility (certified) providing hospice level of care
 61. discharged/transferred to hospital-based Medicare approved swing bed
 62. Discharged/transferred to inpatient rehabilitation facility (IRF) including rehabilitation distinct parts of a hospital
 63. Discharged/transferred to a Medicare certified long-term care hospital
 64. Discharged/transferred to a nursing facility certified under Medicaid but not certified under Medicare
 65. Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital
 66. Discharged/transferred to a Critical Access Hospital (CAH)
 70. Discharged/transferred to another Type of Health Care Institution not Defined Elsewhere in this Code List





NOACEWHY (Discharge)

Is there documentation of a reason for not prescribing an ACEI at discharge?

- 1. ACEI allergy
- 5. Moderate or severe aortic stenosis
- 95. Not applicable
- 97. Other reason(s) documented by a physician, APN, PA, or pharmacist for not prescribing an ACEI at discharge
- 98. Patient refused ACEIs documented by physician/APN/PA or pharmacist
- 99. No documented contraindication

ACSNOARB (Discharge)

Does the record document any of the following ARB (AIIRA) contraindications:

Is there documentation of a reason for not prescribing an ARB at discharge?

- 1. ARB (AIIRA) allergy or sensitivity
- 2. moderate or severe aortic stenosis
- 95. Not applicable
- 97. Other reason(s) documented by a physician/APN/PA or pharmacist for not prescribing an ARB
- 98. Patient refused ARBs documented by physician/APN/PA or pharmacist
- 99. No documented contraindication