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)
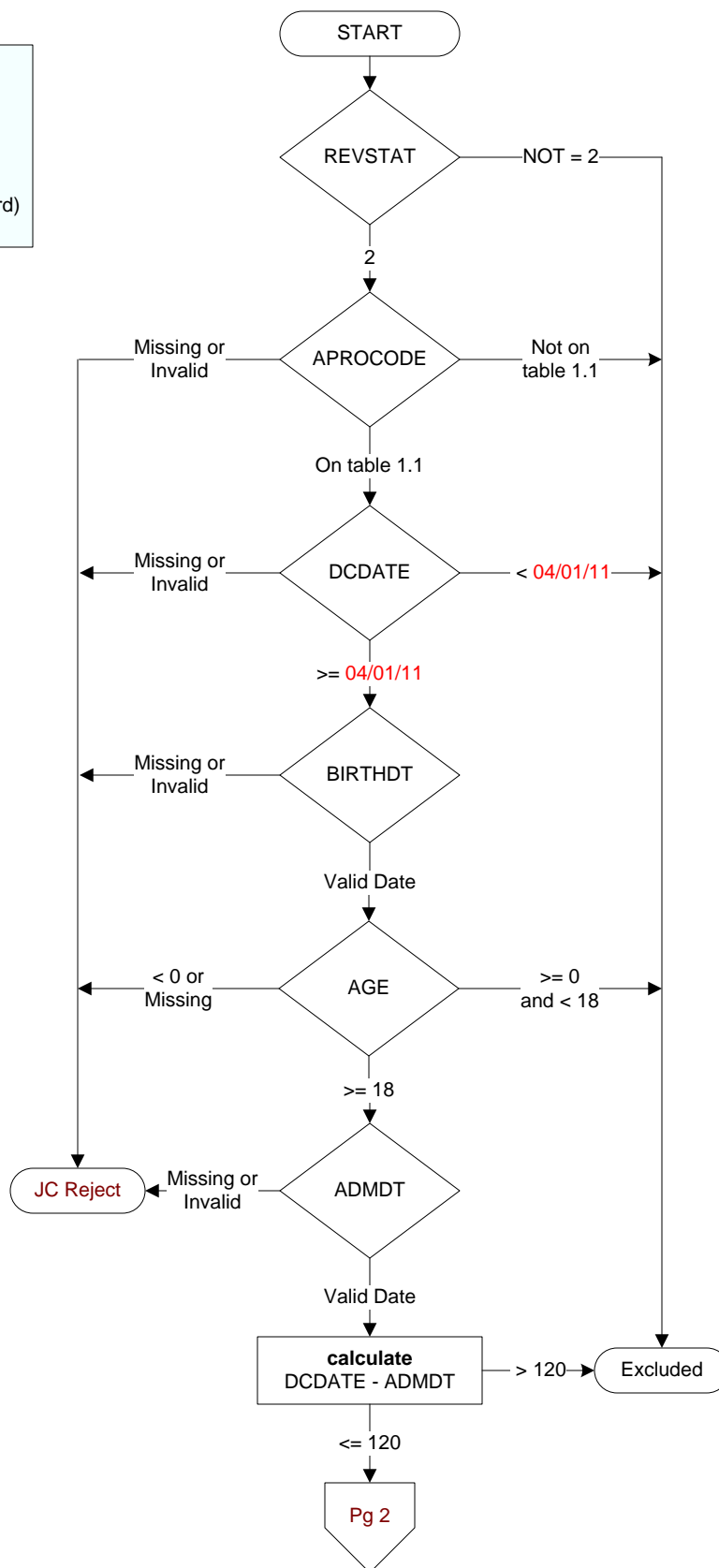
ADMDT (Validation)
Enter the date the patient was formally admitted to inpatient status at this VAMC.

BIRTHDT (rcvd on pull list)
Patients date of birth.

AGE
calculated field: ADMDT - BIRTHDT

START

REVSTAT — NOT = 2 →

2

APROCODE
Missing or Invalid ←
Not on table 1.1 →

On table 1.1

DCDATE
Missing or Invalid ←
< 04/01/11 →

>= 04/01/11

BIRTHDT
Missing or Invalid ←

Valid Date

AGE
< 0 or Missing ←
>= 0 and < 18 →

>= 18

ADMDT
JC Reject ← Missing or Invalid

Valid Date

calculate DCDATE - ADMDT — > 120 → Excluded

<= 120

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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

TRANSIN2 (Validation)
Was the patient received as a transfer from inpatient, outpatient or emergency/observation department of another hospital OR from an ambulatory surgery center?
1. Patient received as a transfer from an inpatient department of another hospital
2. Patient received as a transfer from an outpatient department of another hospital (excludes emergency/observation departments)
3. Patient received as a transfer from the emergency/observation department of another hospital
4. Patient received as a transfer from an ambulatory surgery center
99. None of the above or unable to determine from medical record documentation.

COMM1TX (Validation)
Did the patient present initially to a community hospital where he/she received all or part of the first 24 hours of care for ACS?
1. yes
2. no

COMMINPT (Validation)
Was the patient a transfer from a community hospital where he/she was an inpatient for ACS care?
1. yes
2. no

INPTACS (Validation)
Was the veteran already a VAMC inpatient when ACS occurred?
1. yes
2. no
95. not applicable
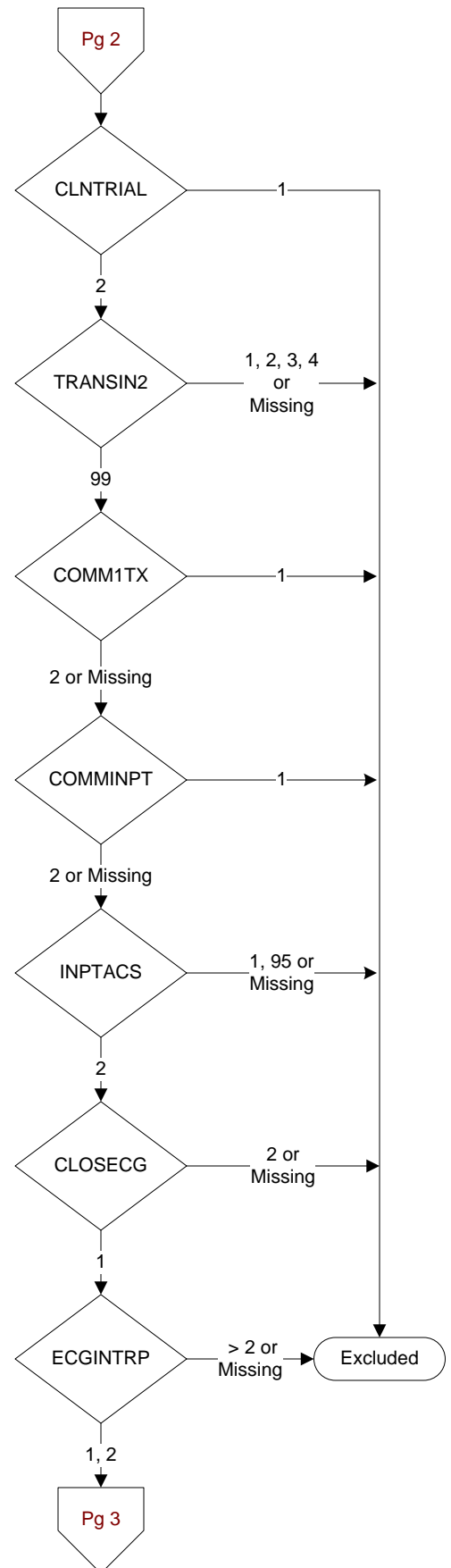
CLOSECG (At presentation)
Is there documented interpretation of the 12-lead ECG performed closest to acute care hospital arrival?
1 = Yes
2 = No

ECGINTRP(At presentation)
What were the specific findings from interpretation of the ECG performed closest to hospital arrival or a subsequent ECG if the first was non-diagnostic?
1. ST-segment elevation
2. Left bundle branch block (LBBB) (new or not known to be old)
3. LBBB described as old or chronic
4. ST-segment depression, old and/or unchanged
5. T wave inversion
6. Non-specific ST-segment and T wave changes
7. Normal ECG
8. Q waves
9. Right bundle branch block
10. Transient or dynamic ST-segment changes in association with rest angina
11. Sustained ventricular tachycardia runs and/or sustained ventricular tachycardia with hypotension
12. ST-segment depression, new or not known to be old
13. Documented NSTEMI, non ST-elevation MI
95. Not applicable
99. Interpretation not consistent with above terminology

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THTHGVN (revasc)
Was primary fibrinolytic therapy received during this episode of care?
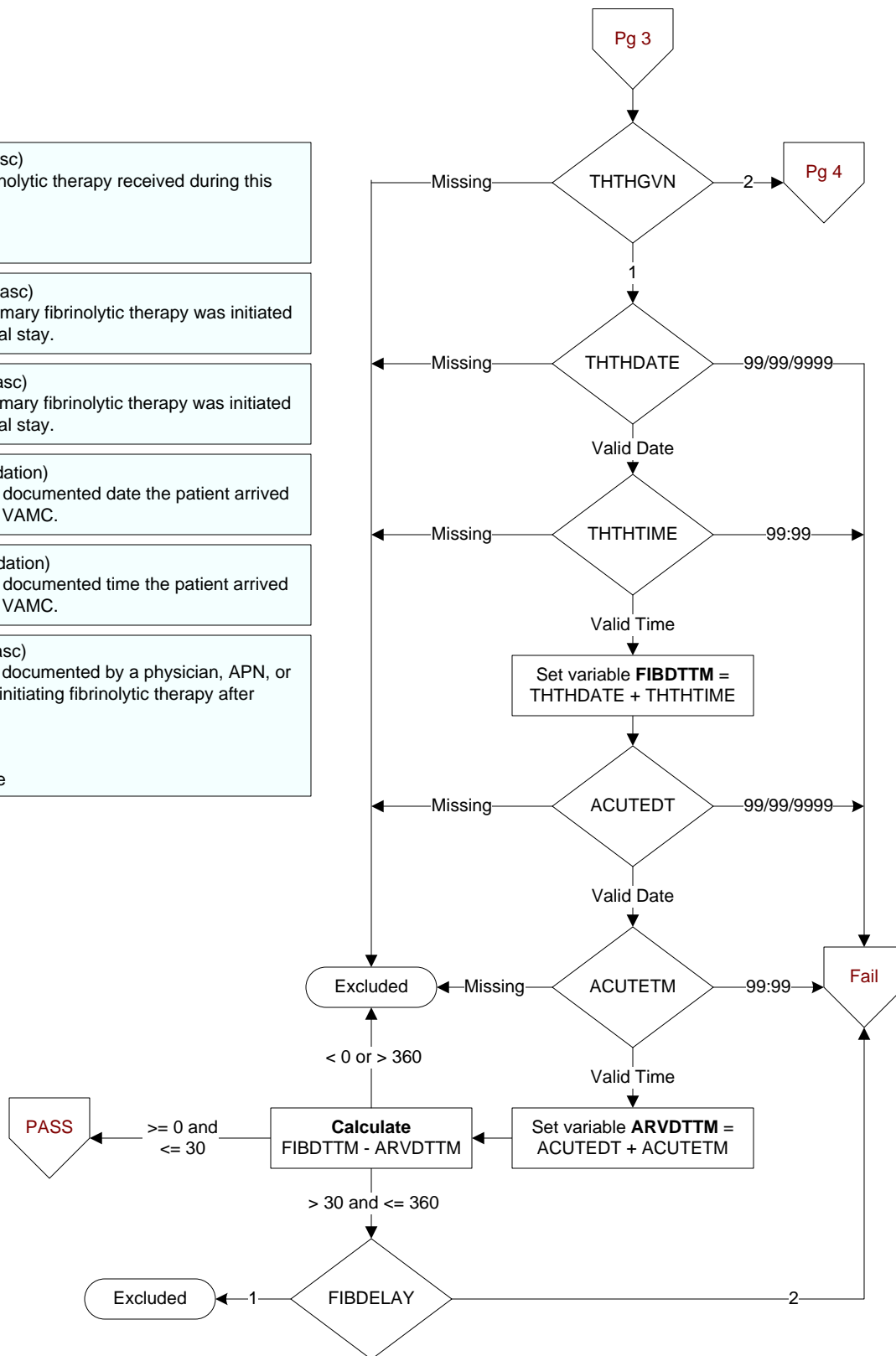1 = Yes
2 = No

THTHDATE (revasc)
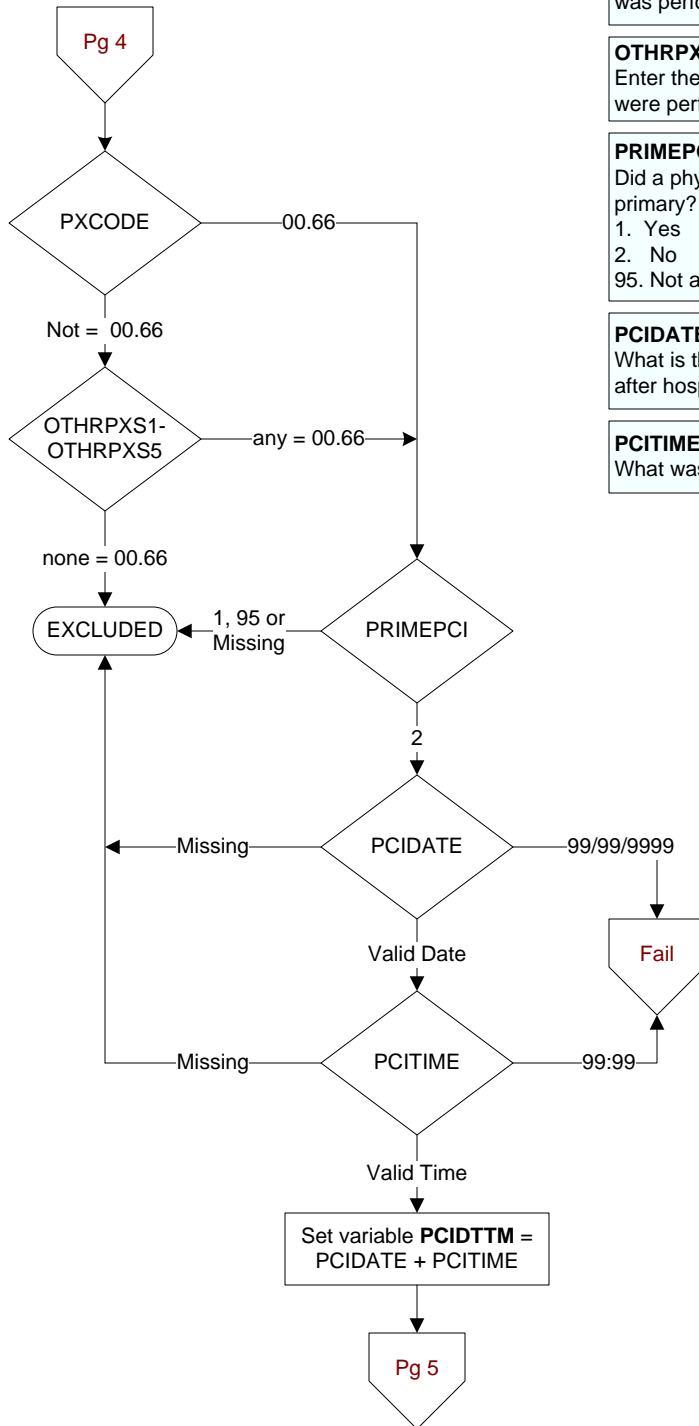Enter the date primary fibrinolytic therapy was initiated during this hospital stay.

THTHTIME (revasc)
Enter the time primary fibrinolytic therapy was initiated during this hospital stay.

ACUTEDT (Validation)
Enter the earliest documented date the patient arrived at this or another VAMC.

ACUTETM (Validation)
Enter the earliest documented time the patient arrived at this or another VAMC.

FIBDELAY (revasc)
Is there a reason documented by a physician, APN, or PA for a delay in initiating fibrinolytic therapy after hospital arrival?
1. Yes
2. No
95. Not applicable

THTHGVN — Missing / 2 → Pg 4 / 1

THTHDATE — Missing / 99/99/9999 / Valid Date

THTHTIME — Missing / 99:99 / Valid Time

Set variable **FIBDTTM** = THTHDATE + THTHTIME

ACUTEDT — Missing / 99/99/9999 / Valid Date

ACUTETM — Missing / 99:99 → Fail / Valid Time

Excluded

Set variable **ARVDTTM** = ACUTEDT + ACUTETM

Calculate FIBDTTM - ARVDTTM

< 0 or > 360 → Excluded

>= 0 and <= 30 → PASS

> 30 and <= 360 → FIBDELAY

FIBDELAY — 1 → Excluded / 2 → Fail

Pg 4

PXCODE —————00.66—————

Not = 00.66

OTHRPXS1-
OTHRPXS5 ———any = 00.66———→

none = 00.66

EXCLUDED ←—1, 95 or Missing—— PRIMEPCI

2

PCIDATE ——Missing——→ EXCLUDED

PCIDATE ———99/99/9999———→ Fail

Valid Date

PCITIME ——Missing——→

PCITIME ———99:99———→

Valid Time

Set variable **PCIDTTM** =
PCIDATE + PCITIME

Pg 5

PXCODE (Validation)
Enter the ICD-9-CM principal procedure code the procedure was performed.

OTHRPXS1 - OTHRPXS5 (Validation)
Enter the ICD-9-CM other procedure codes the procedures were performed

PRIMEPCI (revasc)
Did a physician, APN, or PA describe the first PCI as NOT primary?
1. Yes
2. No
95. Not applicable

PCIDATE (revasc)
What is the date associated with the time of the first PCI done after hospital arrival?

PCITIME (revasc)
What was the time of the first PCI done after hospital arrival?

Pg 5

ACUTEDT

99/99/9999

Missing

Valid Date

ACUTETM

99:99

Missing

Valid Time

PASS

Set variable **ARVDTTM** = ACUTEDT + ACUTETM

In Denominator and Numerator (**Passes** indicator)

>= 0 & <= 90 m

Calculate PCIDTTM - ARVDTTM

< 0 or > 1440 m

>90 & <= 1440 m

In Denominator Only (**Fails** indicator)

2

PCIDELAY

1, 95 or Missing

Excluded

Fail

PCIDELAY (revasc)
Is there a reason documented by a physician, APN, or PA for a delay in doing the first PCI after arrival?
1. Yes
2. No
95. Not applicable