

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

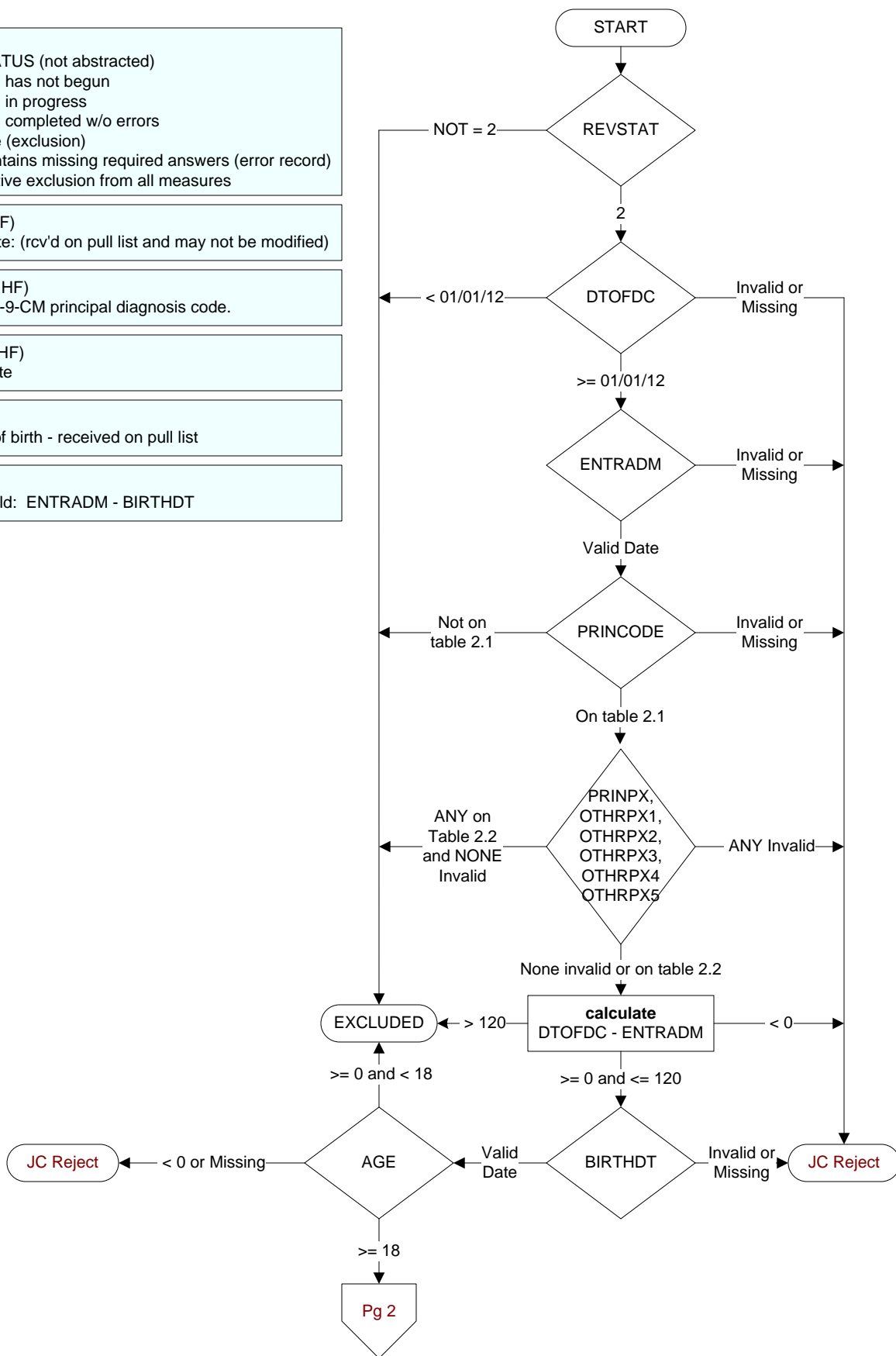
DTOFDC (IHF)
Discharge date: (rcv'd on pull list and may not be modified)

PRINCODE (IHF)
Enter the ICD-9-CM principal diagnosis code.

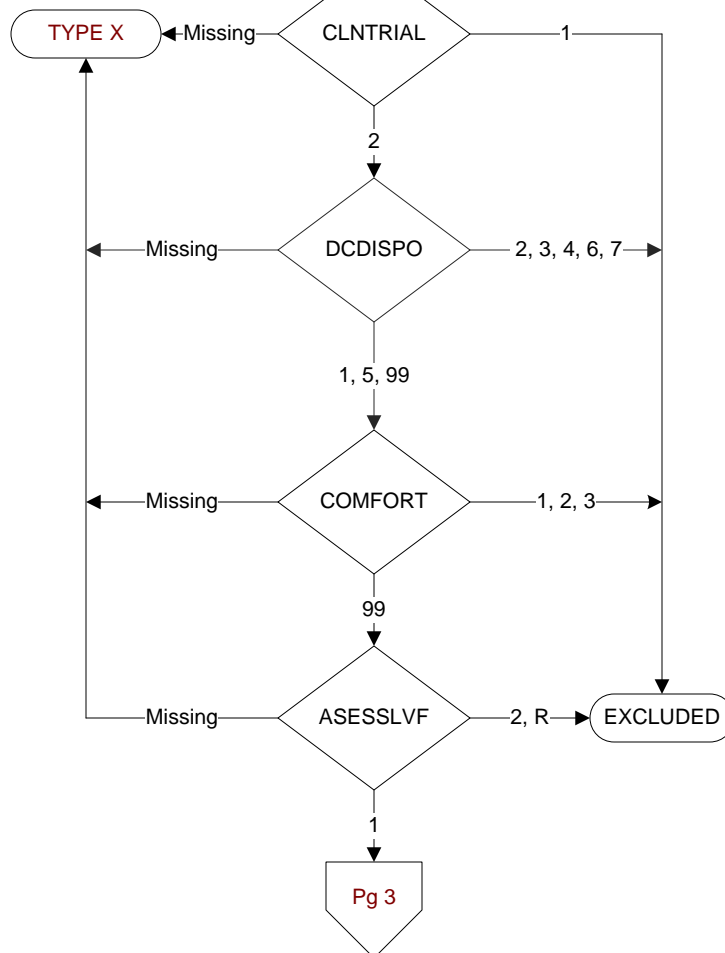
ENTRADM (IHF)
Admission date

BIRTHDT
Patient date of birth - received on pull list

AGE
Calculated field: ENTRADM - BIRTHDT



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**CLNTRIAL (IHf)**

During this hospital stay, was the patient enrolled in a clinical trial in which patients with heart failure were being studied?

1. Yes
2. No

COMFORT (IHf)

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

ASESSLVF (IHf)

Is there documentation in the medical record of at least one of the following:

- Left ventricular systolic function (LVSF) assessment at any time prior to arrival or during this hospitalization
 - A plan for LVSF assessment after discharge
 - A reason documented by a physician, nurse practitioner, or physician assistant for not assessing LVSF
1. Yes
 2. No assessment at any time, no plan to assess after discharge, no reason documented, or unable to determine
 - R. Reason documented by a physician, APN, or PA for not assessing LVSF prior to arrival, during hospital stay, or planned after discharge.

DCDISPO (IHf)

What was the patient's discharge disposition on the day of discharge?

1. Home
 - Assisted Living Facilities
 - Court/Law Enforcement – includes detention facilities, jails, and prison
 - Board and care, domiciliary, foster or residential care, group or personal care homes, 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
3. Hospice – Health Care Facility
 - General Inpatient and Respite, Residential and Skilled Facilities, and Other Health Care Facilities
4. Acute Care Facility
 - Acute Short Term General and Critical Access Hospitals
 - Cancer and Children's Hospitals
 - Department of Defense and 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)
6. Expired
7. Left Against Medical Advice/AMA
99. Not documented or unable to determine

LVFLESS (IHF)
Is the most recent left ventricular systolic function documented as an ejection fraction (EF) less than 40% or a narrative description consistent with moderate or severe systolic dysfunction (LVSD)?
1. Yes
2. No
95. Not applicable

ACEIDC (IHF)
Was an angiotensin converting enzyme inhibitor (ACE inhibitor) prescribed at discharge?
1. Yes
2. No
95. Not applicable

ARBATDC (IHF)
Was an angiotensin II receptor antagonist (ARB or AIIRA) prescribed at discharge?
1. Yes
2. No
95. Not applicable

NOACEWHY (IHF)
Does the record document any of the following reasons for not prescribing an ACEI at discharge?
1. ACEI allergy
5. Moderate or severe aortic stenosis
95. Not applicable
97. Other reasons documented by a physician/APN/ PA or pharmacist for not prescribing an ACEI at discharge
98. Patient refusal of ACE inhibitors documented by physician/APN/PA or pharmacist
99. No documented reason

NOARBDC (IHF)
Does the record document any of the following reasons for not prescribing an ARB at discharge?
1. ARB (AIIRA) allergy or sensitivity
2. Moderate or severe aortic stenosis
95. Not applicable
97. Other reasons documented by a physician/ APN/PA or pharmacist for not prescribing an ARB
98. Patient refusal of ARBs documented by physician/APN/ PA or pharmacist
99. No documented reason

