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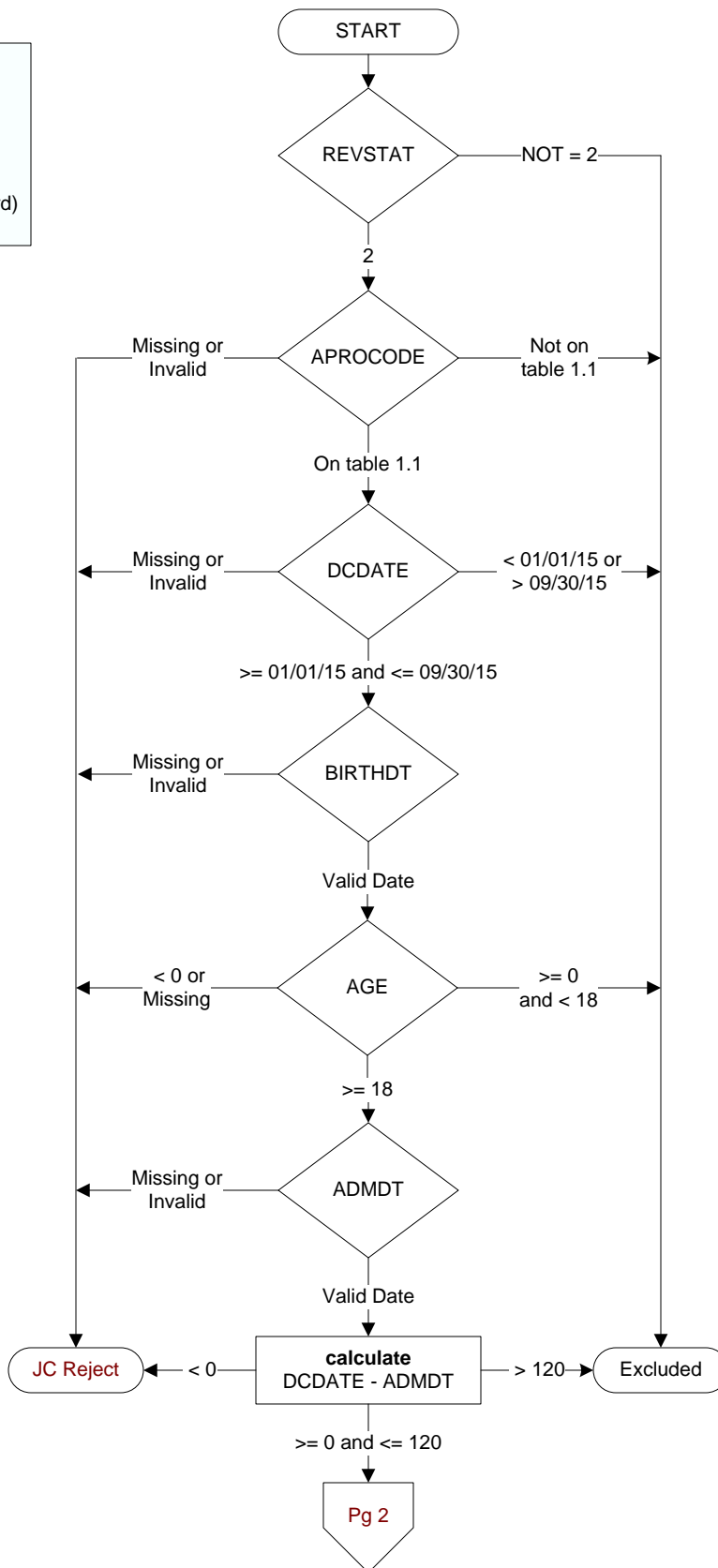
ADMDT (Validation)
Enter the date the patient was formally admitted to inpatient status at this VAMC.

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
- < 01/01/15 or > 09/30/15

>= 01/01/15 and <= 09/30/15

BIRTHDT
- Missing or Invalid

Valid Date

AGE
- < 0 or Missing
- >= 0 and < 18

>= 18

ADMDT
- Missing or Invalid

Valid Date

calculate
DCDATE - ADMDT
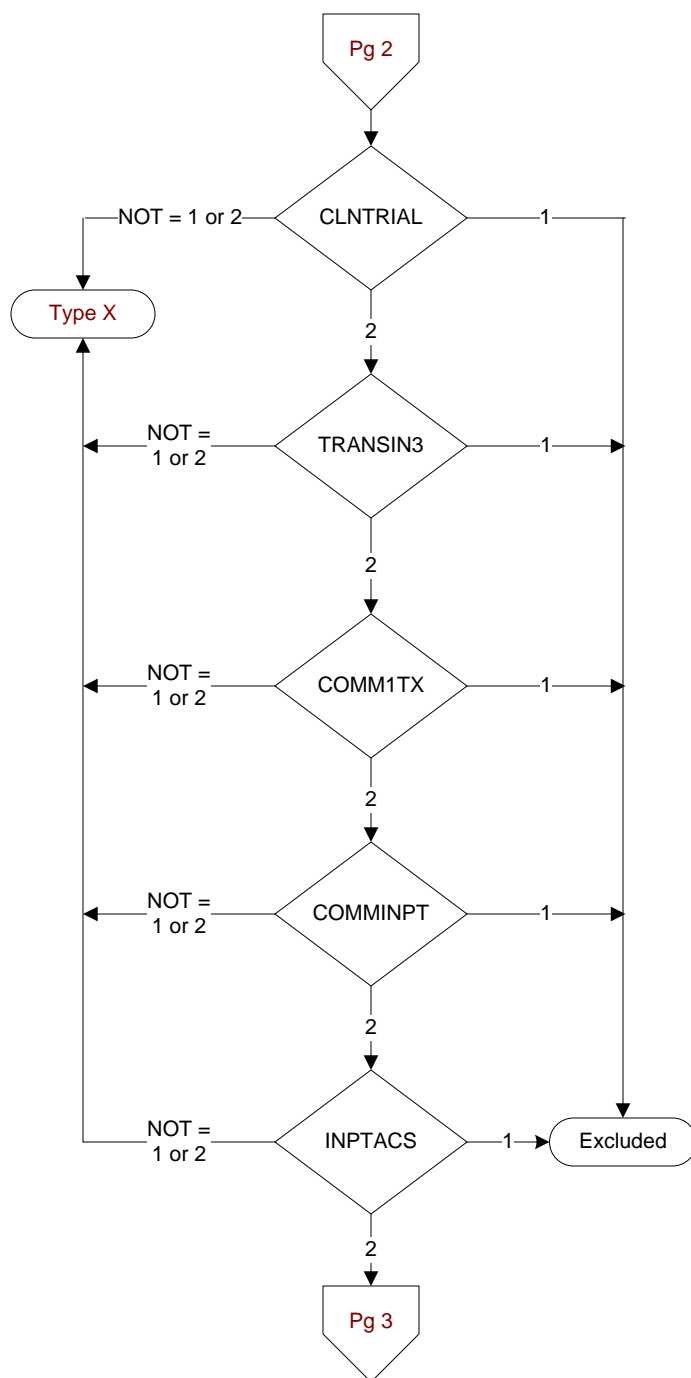- < 0 → JC Reject
- > 120 → Excluded

>= 0 and <= 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

TRANSIN3 (Validation)
Was the patient received as a transfer from an inpatient, outpatient or emergency/observation department of an <u>outside</u> hospital or from an ambulatory surgery center?
1. Yes
2. No

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

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CLNTRIAL
— NOT = 1 or 2 —
— 1 —

Type X

TRANSIN3
NOT = 1 or 2
— 1 —
2

COMM1TX
NOT = 1 or 2
— 1 —
2

COMMINPT
NOT = 1 or 2
— 1 —
2

INPTACS
NOT = 1 or 2
— 1 —> Excluded
2

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ECGSTEMI (At Presentation)
Is there documentation of ST-segment elevation on the ECG performed closest to hospital arrival?

ST-segment Elevation Inclusion Guidelines
• myocardial infarction (MI) with any mention of location or combinations of locations (e.g., anterior, apical, basal, inferior, lateral, posterior, or combination) IF DESCRIBED AS ACUTE/EVOLVING (e.g., "posterior AMI")
• Q wave MI, IF DESCRIBED AS ACUTE/EVOLVING
• ST ^
• ST, ST abnormality, or ST changes consistent with injury or acute/evolving MI
• ST-elevation (STE)
• ST-elevation myocardial infarction (STEMI)
• new or presumed new ST-segment noted as >/= .10mV or >/= 1mm
• "STEMI or equivalent"
• Transmural MI, IF DESCRIBED AS ACUTE/EVOLVING

1. Yes
2. No
95. Not applicable

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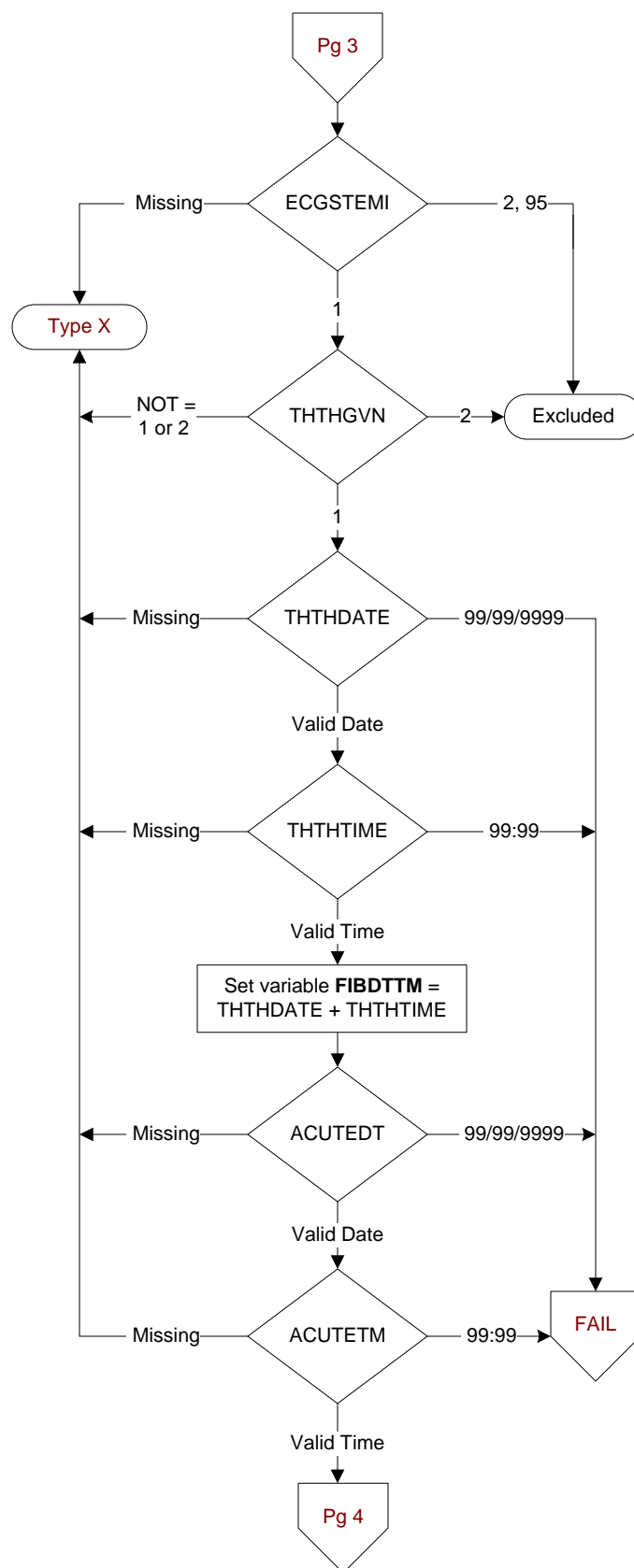
THTHTIME (revasc)
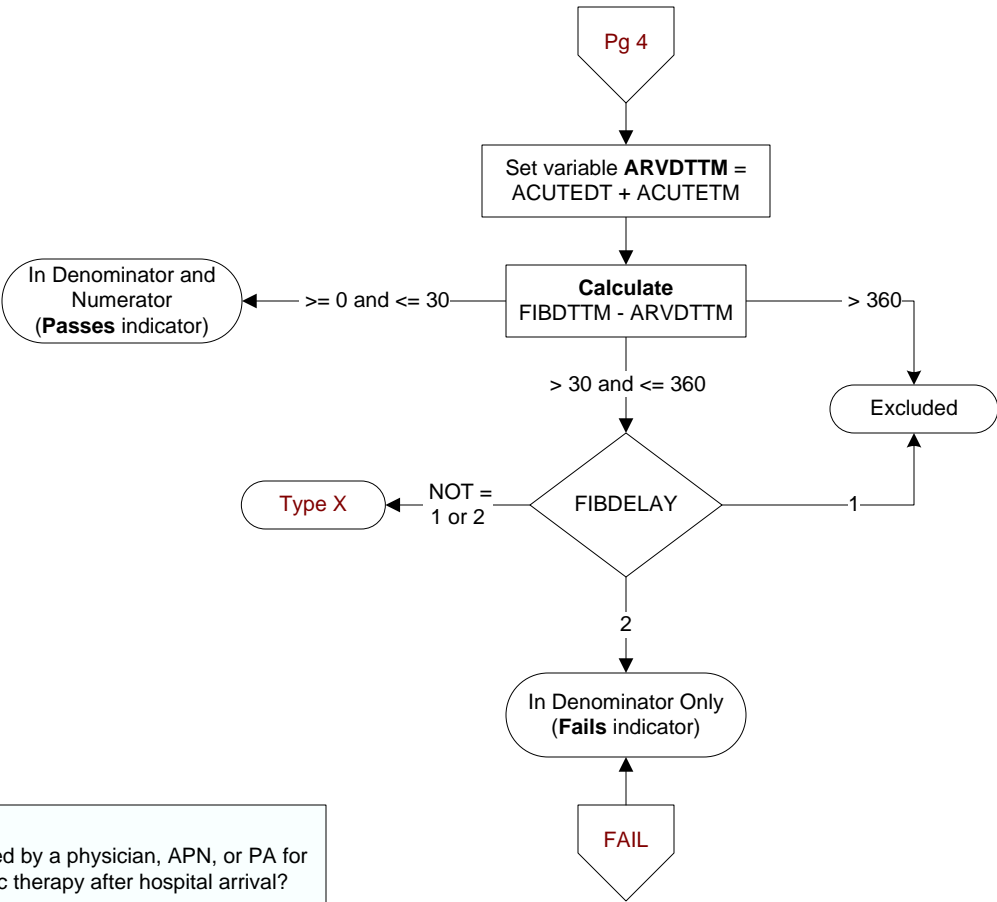Enter the time primary fibrinolytic therapy was initiated during this hospital stay.

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.

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ECGSTEMI
— Missing → Type X
— 2, 95 →

1

THTHGVN
— NOT = 1 or 2 → Type X
— 2 → Excluded

1

THTHDATE
— Missing →
— 99/99/9999 →

Valid Date

THTHTIME
— Missing →
— 99:99 →

Valid Time

Set variable **FIBDTTM** = THTHDATE + THTHTIME

ACUTEDT
— Missing →
— 99/99/9999 → FAIL

Valid Date

ACUTETM
— Missing →
— 99:99 → FAIL

Valid Time

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Set variable **ARVDTTM** = ACUTEDT + ACUTETM

Calculate FIBDTTM - ARVDTTM

>= 0 and <= 30 → In Denominator and Numerator (**Passes** indicator)

> 360 → Excluded

> 30 and <= 360

FIBDELAY

NOT = 1 or 2 → Type X

1 → Excluded

2 → In Denominator Only (**Fails** indicator) → FAIL

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