

**Proposals for Revisions
to the
Elective Surgery Information System (ESIS)**

March 2000

**Acute Health Division
Department of Human Services**

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Executive Summary

This document contains details of the proposed revisions to the Elective Surgery Information System (ESIS) for 1 July 2000. In order to further consolidate the changes made for 1999–2000, an effort has been made to keep the 2000–2001 revisions to a minimum. The bulk of the proposed revisions to ESIS for 2000–2001 include amendments to existing data items only, there is one new item proposed for collection at this stage. The proposed revisions are summarised below.

- To upgrade some of the Type 2 and Type 3 edits to improve data quality from 1 July 2000.
- To include a new definition '*Postponement*'.
- To revise the definition of Waiting List to enable the data to be supplied to national bodies in accordance with the definitions specified in the National Health Data Dictionary.
- To amend the definitions for *Total Waiting Time for Admitted Patients*, and *Total Waiting Time for Patients Remaining on the Waiting List* to ensure that calculation of these fields is uniform.
- To amend the following data items:
 - *Patient Identifier*
Decrease the length of this field from twelve to ten characters and change the field layout to left justified with trailing blanks, to standardise collection of Patient Identifiers for Acute Health data collections.
 - *Reason for Rebooking*
The addition of a new value in the codeset to enable differentiation between bookings which are postponed, and those which are brought forward.
 - *Reason for Removal*
Revise the code set to:
 - enable patterns of waiting episode transfers to all hospitals to be monitored (new value 'N'),
 - remove differentiation between 'Admission from the Booking List' and 'Admission from the Waiting List' (delete existing values 'A' and 'B') and
 - include a new value 'W', Admission.
- To collect the receiving hospital's four character Campus Code for all waiting episodes where the responsibility for the patients waiting episode is transferred from an ESIS hospital to any other public hospital.
- To include a new data item 'Hospital Initiated Postponement', to record the number of postponements due to unavailability of hospital resources essential to surgery.

Introduction

From 1 July 2000, changes to the ESIS data collection will be necessary to ensure that Victoria continues to meet its national reporting obligations, and to assist planning and policy development by the Department of Human Services.

This document is being distributed to all Victorian Hospitals which currently report to ESIS, and to software suppliers known to have Victorian clients. It outlines the proposed changes to ESIS, by providing details of the proposal, reporting requirements, the purpose of the amendment and the source of the code set.

It is expected that the release of this document will stimulate discussion within the health industry.

Feedback is sought on these proposals. Hospitals and software suppliers should review this document and assess the feasibility of these proposals. All are invited to provide written feedback to the Department of Human Services by completing the proforma provided with this document, and forwarding it to the Department by **Friday 31 March 2000**.

These proposals should not be considered final. Constructive suggestions are welcomed, both for dealing with the proposed changes identified, and for other alterations to ESIS to improve its utility for hospitals. All comments will be assessed by the ESIS Technical Reference Group, and it is expected that a 'Specification for Revisions' document will be released in April 2000.

Once changes to ESIS are finalised, hospitals will be required to alter their externally supplied or in-house waiting list systems for 1 July 2000, to meet the ESIS specification.

Format of this document

This document follows the proposed new format for data collection manuals issued by the Health Data Standards and Systems (HDSS) Unit of the Department of Human Services (DHS), designed to increase the ease of use of our publications.

As this is a proposals document, there are some unique features which require explanation:

- New values in code sets and definitions are enclosed by a dotted border.
- Additions to existing text are underlined, whilst deletions are ~~struckthrough~~.
- The text is divided into the categories of 'Specification' and 'Administration'.
 - Specification* - details the reporting requirements for the item.
 - Administration* - provides additional information including the purpose of the collection of the data item and the source of the code set and definitions.

If you have any comments regarding the proposed new format of these manuals, please contact the HDSS Unit on 9616 8141.

Abbreviations

DHS	Department of Human Services
ESIS	Elective Surgery Information System
HDSS	Health Data Standards and Systems
NRFC	Not Ready for Care
RFC	Ready for Care

Proposed Revisions: *Editing*

There are currently three types of edits in ESIS:

- **Type 1 - Rejection**
Waiting episodes which receive Type 1 (Rejection) edits have not been accepted by ESIS. The incorrect data must be corrected and resubmitted.
- **Type 2 - Correction**
Waiting episodes which receive Type 2 (Correction) edits have been loaded to ESIS; however, an error has been identified. Data must be corrected and resubmitted.
- **Type 3 - Warning**
Waiting episodes which receive Type 3 (Warning) edits have been loaded to ESIS. A potential error has been identified, and the data should be checked for accuracy. If these data are correct, no further action is required. If these data are incorrect, amendments should be made and the data resubmitted.

From 1 July 2000, it is intended that some of the 1999–2000 Type 2 and Type 3 edits will be upgraded to improve data quality. A list of the specific edits affected, will be provided in the *Specification for Revisions to ESIS for 1 July 2000*, scheduled for release in April 2000.

Proposed Revisions: *Definitions*

Postponement

It is proposed to Include a new definition '*Postponement*'.

Specification

Definition Postponement occurs when surgery which has been previously booked is delayed to a future time.

Guide for Use A postponement means that the current Scheduled Admission Date is no longer valid, and will either be changed if a new booking is made, or deleted.

Related Items Booking Number, Reason for Rebooking, Scheduled Admission Date, Hospital Initiated Postponement

Administration

Purpose The definition of postponement provides a distinction between rebookings which have occurred because of a delay (that is, postponements) and rebookings which have occurred because the patient has been admitted earlier than anticipated.

Start Date July 2000 **Version** 1 (Effective 1 July 2000)

Definition Source DHS

Waiting List

It is proposed to Revise the definition of Waiting List.

Specification

Definition The list of patients registered for Elective Surgery who are *Ready for Care*. ~~The list of patients who are *Ready for Care* and who have not yet been given a Scheduled Admission Date, or who have a booking period which is greater than 42 days.~~

Related Items Registration Date, Patient Listing Status, Removal Date, Reason for Removal

Administration

Purpose To revise the definition of Waiting List to enable the data to be supplied to national bodies in accordance with the definitions specified in the National Health Data Dictionary.

Start Date January 1998 **Version** 2 (Effective 1 July 2000)

Definition Source DHS

Total Waiting Time for Admitted Patients

It is proposed to Amend the current definition to enable uniform calculation of *Total Waiting Time for Admitted Patients*.

Specification

Definition The time elapsed from the date that the patient's current Urgency Category was assigned, to the date they were admitted to hospital for the procedure (excluding Not Ready for Care days).

Collection Guide Total Waiting Time for patients admitted from the Waiting List ~~or Booking List~~ will be calculated as the time elapsed from the Registration Date or Urgency Reassignment Date to the Admission Date (indicated by the Removal Date), ~~or from the Registration Date if there is no Urgency Reassignment~~. Total Waiting Time excludes *Not Ready for Care Days*.

If there is an Urgency Reassignment Date, Total Waiting Time is calculated from this date for admitted patients. Subtract Total Not Ready for Care Days Following Last Urgency Reassignment.

If there is no Urgency Reassignment Date, Total Waiting Time is calculated from the Registration Date for admitted patients. Subtract Total Not Ready for Care Days.

Total Waiting Time for Admitted Patients equals Removal Date minus (Urgency Reassignment Date or Registration Date) minus (the sum of **either** Not Ready for Care Days **or** Not Ready for Care Days Following Last Urgency Reassignment).

Related Items Census Date, Registration Date, Urgency Reassignment Date, Total Days Not Ready for Care, Total Days Not Ready for Care Following Last Urgency Reassignment

Administration

Purpose

This is a critical elective surgery waiting times data element. It is used to determine whether patients are Overdue, or had extended waits at admission. It is used to assist doctors and patients in making decisions about hospital referral, to assist in the planning and management of hospitals and in healthcare related research.

Note: NHDD definition (Waiting time at admission) is used for Commonwealth reporting of this item.

Start Date

July 1999

Version

2 (Effective 1 July 2000)

Definition Source

DHS

Total Waiting Time for Patients Remaining on the Waiting List

It is proposed to Amend the current definition to enable uniform calculation of *Total Waiting Time for Patients Remaining on the Waiting List*.

Specification

Definition The time elapsed for a patient on the elective surgery waiting list from the date that their current Urgency Category was assigned, to a designated Census Date (excluding Not Ready for Care days).

Collection Guide ~~Total Waiting Time for patients on the Waiting or Booking List will be calculated as the time elapsed from the Urgency Reassignment Date to the Census Date or from the Registration Date to the Census Date if there is no Urgency Reassignment. Total Waiting Time excludes *Not Ready for Care Days*.~~

All Ready for Care days on the Waiting List should be counted. Because the patient has not yet been removed from the list, the first day on the list (either the Registration Date, or Urgency Reassignment Date), and the Census Date (last day being reported as being on the list for this month) should both be counted as days waiting.

If there is an Urgency Reassignment Date, Total Waiting Time is calculated from this date for patients remaining on the Waiting List. Subtract Total Not Ready for Care Days Following Last Urgency Reassignment.

If there is no Urgency Reassignment Date, Total Waiting Time is calculated from the Registration Date for patients remaining on the Waiting List. Subtract Total Not Ready for Care Days.

Total Waiting Time for Patients Remaining on the Waiting List equals Census Date minus Urgency Reassignment/Registration Date minus (the sum of **either** Not Ready for Care Days **or** Not Ready for Care Days Following Last Urgency Reassignment) plus 1.

Related Items Census Date, Registration Date, Urgency Reassignment Date, Total Days Not Ready for Care, Total Days Not Ready for Care Following Last Urgency Reassignment

Administration

Purpose

This is a critical elective surgery waiting times data element. It is used to determine whether patients are Overdue, or had extended waits at a census date. It is used to assist doctors and patients in making decisions about hospital referral, to assist in the planning and management of hospitals and in healthcare related research.

Note: NHDD definition (Waiting time at a census date) is used for Commonwealth reporting of this item.

<i>Collection Start</i>	July 1999	<i>Version</i>	2 (Effective 1 July 2000)
<i>Definition Source</i>	DHS		

Proposed Revisions: *Patient Record*

Patient Identifier

It is proposed to Decrease the length of the field *Patient Identifier* from twelve to ten characters and change the field layout to left justified with trailing blanks.

Specification

Definition Unique Patient Identifier within establishment (that is, the patient's unit record number).

Datatype Alpha/numeric **Form** Code

Field Size ~~Ten Twelve~~ **Layout** NNNNNNNNNN
Left ~~Right~~ justified, trailing blanks
~~zero filled~~

Reported For every waiting list episode.

Edits Existing edits (amended to reflect changes):

- S065 - Blank Patient Identifier (Type 1)
- S066 - Invalid Patient Identifier (Type 1)

Related Items Nil

Administration

Purpose Decrease the length of this field from twelve to ten characters and change the field layout to left justified with trailing blanks, to standardise collection of patient identifiers for Acute Health data collections.

Collection Start January 1998 **Version** 2 (Effective 1 July 2000)

Definition Source DHS

Reason for Rebooking

It is proposed to Include an additional value in the code set for *Reason for Rebooking*, to enable differentiation between patients whose bookings are postponed, and those whose bookings are brought forward.

Specification

Definition The reason for a change to the patient's Scheduled Admission Date.

Datatype Alpha/numeric **Form** Code

Field Size One **Layout** A

Reported When the decision is made not to admit the patient on the Scheduled Admission Date.

Code Set

Code	Descriptor
C	Clinical
D	Surgeon
H	Hospital
P	Patient
F	Booking brought forward

Collection Guide Report the appropriate reason to explain why the patient's Scheduled Admission Date has been changed.

Postponed admissions:

C—Clinical

The patient has been assessed by their clinician as being temporarily *Not Ready for Care* due to a change in their clinical condition. The hospital and clinician should determine whether the Patient Listing Status of the patient is reassigned.

D—Surgeon

The booking has been postponed because the surgeon booked to perform this procedure has cancelled their scheduled theatre time. ~~Rebookings caused by the surgeon being unavailable for their scheduled theatre time, not due to the needs of other patients in this hospital.~~

**Collection Guide
continued**

H—Hospital

~~The booking has been postponed because the operating room, hospital bed, staff or other hospital resource is unavailable. Rebookings due to the operating room, hospital bed, surgeon or other hospital resource being unavailable because of the need to treat other patients in this hospital (for example emergency patients).~~

P—Patient

~~The booking is postponed at the request of the patient for personal, social or other non clinical reasons. The hospital and clinician should determine whether the Patient Listing Status should be reassigned.~~

Admissions where the Scheduled Admission Date is brought forward:

F—Booking brought forward

The patient's Scheduled Admission Date has been brought forward for any reason.

Edits

To be finalised.

Related Items

Booking Date, Booking Number, Scheduled Admission Date, Hospital Initiated Postponement

Administration

Purpose

This item is used to identify the reasons for delays in patients being admitted for treatment, and to identify patients who have been admitted sooner than originally planned.

Collection Start

January 1998

Version

3 (Effective 1 July 2000)

Definition Source

DHS

**Code Set
Source**

DHS

Reason for Removal

- It is proposed to** Revise the *Reason for Removal* code set to:
- enable patterns of waiting episode transfers to all hospitals to be monitored (new value 'N'),
 - remove differentiation between 'Admission from the Booking List' and 'Admission from the Waiting List' (delete existing values 'A' and 'B') and
 - include a new value 'W', *Admission*.

Specification

Definition The reason why a ~~for the~~ patient is ~~being~~ removed from the ~~Waiting or Booking~~ List.

Datatype Alpha/numeric **Form** Code

Field Size One **Layout** A

Reported When the patient is removed from the Waiting List because they have either been:

- admitted for their awaited procedure,
- cancelled from this hospital's Waiting List, or
- transferred to the Waiting List of another public hospital.

Code Set	Code	Descriptor
	A	Admission from the Booking List
	B	Admission from the Waiting List
	C	Cancellation by the Hospital or Surgeon
	D	Cancellation by the Patient
	E	Data Error
	T	Transfer of Waiting Episode to Another ESIS Hospital
	N	Transfer of Waiting Episode to a Non-ESIS (Public) Hospital
	W	Admission

Collection Guide Report the appropriate reason to explain why the patient's waiting episode has been removed from the Waiting List.

~~A—Admission from the Booking List~~

~~The patient has been admitted to this hospital for the awaited procedure and has been booked for less than 42 days.~~

**Collection Guide
continued**

~~B—Admission from the Waiting List~~

~~There are two reasons that a patient may be admitted from the Waiting List:~~

- ~~• The patient was not booked for the awaited procedure. This can occur in a number of circumstances, for example:
 - ~~• The patient's condition has worsened, necessitating an earlier admission date than was previously thought necessary~~
 - ~~• An opening in a surgery session schedule has occurred, and the patient admitted at short notice for the awaited procedure.~~~~
- ~~• The Booked Period has exceeded 42 days.~~

C—Cancellation by the Hospital or Surgeon

The waiting episode has been cancelled ~~from the Waiting or Booking List~~ for clinical reasons at the instigation of the clinician or hospital medical staff.

This includes patients who have been admitted through the Emergency Department of this hospital for the awaited procedure, due to the worsening of the clinical condition requiring treatment.

If this code is used, the field 'Reason for Cancellation' must also be completed.

D—Cancellation by the Patient

The waiting episode has been cancelled ~~from the Booking or Waiting List~~, either:

- At the request of the patient, or
- Because the patient has died since their name was placed on the list
- ~~The patient has arranged for the procedure to be performed at a private hospital.~~

This includes patients who have arranged for the procedure to be performed at a private hospital.

If this code is used, the field 'Reason for Cancellation' must also be completed.

**Collection Guide
continued**

E—Data Error

~~This code will ensure that all Records which are erroneously entered onto the hospital waiting list system and reported to ESIS, are removed from ESIS using this code. finalised when the error is realised and the patient information is removed from the hospital waiting list system. If these records are not finalised, they are still considered to be waiting patients, and are taken into account when calculations for targets are performed. Generally, the existence of these records erroneously inflates the total Waiting List figures for the relevant hospital. This must be reported only when the record is a genuine error. Reasons for entry of incorrect episodes onto the hospital waiting list system can include vary, however, the majority will be due to:~~

- A duplicate waiting episode exists for the same Patient Identifier and Principal Prescribed Procedure
- An incorrect Patient Identifier, and therefore the wrong patient, has been entered onto the waiting list system
- Two or more Patient Identifiers issued for one patient.

~~If a record is identified as being on the waiting list system in error, the episode should be removed from the Waiting or Booking List, with a Reason for Removal of 'E' Data Error. This is used to cancel an episode which should never have been on the Waiting or Booking List.~~

Where more than one Waiting List record exists for the same waiting episode, the hospital should retain the episode which reflects the correct information for that patient. In particular, the Registration Date must be the original (or first) date on which the hospital accepted notification that the patient requires admission for elective hospital care.

If these records are not finalised, they are still considered to be waiting patients, and are taken into account when calculations for targets are performed. Generally, the existence of these records erroneously inflates the total Waiting List figures for the relevant hospital.

Collection Guide
continued

T—Transfer of Waiting Episode to Another ESIS Hospital

The responsibility for the patients waiting episode has been transferred from one ESIS hospital to another. Usually this occurs when it is possible for the patient to be treated in a more timely manner at the receiving hospital. This code should be used by hospitals and networks when the patient is transferred between hospital-waiting list systems when it is possible for the patient to be treated in a more timely manner if the waiting episode is transferred to another hospital.

When transferring the responsibility for a waiting episode, it is important that all of the original Registration and Waiting List details are provided to the receiving hospital. When the patient is entered onto the waiting list system at the receiving hospital, all waiting details to date are the original Registration Date is entered for that patient. That is, the original Registration Date must be entered, as well as any other events which will enable the Total Waiting Time to be calculated from the time when the patient was placed on the Waiting List at the original hospital.

Episodes should be reported as transferred only when the *responsibility* for the patient's waiting episode is being transferred to another hospital. Where the patient is treated at another hospital under contract from the original hospital, this is not considered a transfer of responsibility.

N—Transfer of Waiting Episode to a Non ESIS Public Hospital

The responsibility for the patient's waiting episode has been transferred from this ESIS hospital to a non ESIS reporting public hospital. The patient will be given a booking at the receiving hospital.

This code is not used for patients who have already been admitted to another hospital for the awaited procedure. Patients who have already undergone the awaited procedure at another hospital (for any reason), should be reported as Cancellations, with a *Reason for Removal* code appropriate for the circumstances, and a *Reason for Cancellation* code of either 'B', 'I' or 'U'—*Treated Elsewhere for the Awaited Procedure*.

Episodes should be reported as transferred only when the *responsibility* for the patient's waiting episode is being transferred to another hospital. Where the patient is treated at another hospital under contract from the original hospital, this is not considered a transfer of responsibility.

**Collection Guide
continued**

Patients who elect to be treated in a private hospital

Patients who elect to be treated in a private hospital are not considered to be a transfer, rather they should be removed from the Waiting List, with a Reason for Removal 'D'—Cancellation by the Patient, and no Transfer Destination recorded.

W—Admission

The patient has been admitted to this hospital for the awaited procedure._

Edits

To be finalised.

Related Items

Removal Date, Reason for Cancellation, Transfer Destination

Administration

Purpose

This is a critical element of waiting list data, as it identifies the completion of the waiting episode at this hospital. It is used to provide information about the number of patients admitted, cancelled and transferred and to determine which patients are still waiting.

Collection Start

January 1998

Version

3 (Effective 1 July 2000)

Definition Source

NHDD

**Code Set
Source**

DHS

Transfer Destination

It is proposed to Collect the receiving hospital's four character Campus Code for *all* waiting episodes where the responsibility for the patients waiting episode is transferred from an ESIS hospital to any other public hospital.

Specification

Definition The public hospital which is accepting responsibility for the patients waiting episode. ~~The four character Campus Code for the ESIS reporting hospital campus to which the responsibility for the patients waiting episode has been transferred.~~

Datatype Alpha/numeric **Form** Code

Field Size Four **Layout** XXXX

Reported Transfer Destination must be reported for all patients removed from the Waiting List with a *Reason for Removal* of:

- 'T'—Transfer of Waiting Episode to Another ESIS Hospital, or
- 'N'—Transfer of Waiting Episode to a Non-ESIS (Public) Hospital.

Code Set *A complete list of all public hospital Campus Codes will appear in an Appendix to the ESIS Manual.*

Collection Guide ~~If the patient has been treated at another public hospital which does not report to ESIS (this includes interstate hospitals), report the appropriate Reason for Removal code, and a Reason for Cancellation of 'B'—*Treated Elsewhere for the Awaited Procedure at a Public Facility.*~~

Patients who elect to be treated in a private hospital

Patients who elect to be treated in a private hospital are not considered to be a transfer, rather they should be removed from the Waiting List, with a Reason for Removal 'D'—*Cancellation by the Patient*, and no Transfer Destination recorded.
~~If the patient has elected to be treated in a private hospital, report a Reason for Removal of 'D'—*Cancellation by the Patient*, and do not report a Campus Code in this field~~

Collection Guide
continued

Patients who are treated under contract with another hospital

If the patient is treated under a contract between this hospital and a hospital where the surgery is performed, the waiting episode is not transferred to the contracted hospital. The responsibility for the patients waiting episode remains with the contracting hospital.

Edits

To be finalised.

Related Items

Reason for Removal

Administration

Purpose

This field is used to verify transfer of patients' waiting information between ESIS hospitals and to assist in the planning and management of hospitals.

Collection Start

July 1999

Version

2 (Effective 1 July 2000)

Definition Source

DHS

**Code Set
Source**

DHS

Hospital Initiated Postponement

It is proposed to To include a new data item '*Hospital Initiated Postponement*', to record the number of postponements by the hospital or surgeon.

Specification

Definition

The number of bookings postponed for a patient because the:

- Surgeon booked to perform this procedure has cancelled their scheduled theatre time (Reason for Rebooking code 'D') or
- Operating room, hospital bed, staff or other hospital resource is unavailable (Reason for Rebooking code 'H').

Datatype Numeric **Form** Sequential numeric characters

Field Size Two **Layout** NN

Reported When a booking has been postponed due to unavailability of any hospital resources essential to surgery.

Collection Guide The number of Hospital Initiated Postponements should be increased by one every time either the code H - *Hospital* or D - *Surgeon* is used in the Reason for Rebooking field. If the patient has had no Hospital Initiated Postponements, this should be reported as zero.

Edits To be finalised.

Related Items Reason for Rebooking, Booking Number, Scheduled Admission Date, Booking Date

Administration

Purpose To monitor incidence of patients experiencing multiple postponements due to the hospital or surgeon.

Collection Start July 2000 **Version** 1 (Effective 1 July 2000)

Definition Source DHS

2000–2001 File Structure

For conditional mandatory fields, see key at the foot of this table.

	Data Items	Maximum characters	Alpha/ Numeric	Layout/Values
M	Unique Key	8	A/N	Right justified, zero filled
M	Patient Identifier	4 10	A/N	<u>Left justified, trailing blanks</u>
	Medicare Number	11	N	NNNNNNNNNNNN or all spaces
	Medicare Suffix	3	A/N	AAA
M	Waiting Number	2	A/N	Left justified, NN
M	Date of Birth	8	N	DDMMCCYY
M	Sex	1	A/N	1,2,3
M	Postcode	4	N	
M	Locality	30	A/N	
M	Principal Prescribed Procedure	3	A/N	Left justified, XXX
M	Surgical Specialty	2	A/N	01,02,03,04,05,06,07,08,09,10,11
M	Clinical Urgency	1	A/N	1,2,3
M	Planned Length of Stay	1	A/N	1,2
M	Registration Date	8	N	DDMMCCYY
M	Source of Referral	1	A/N	1,2,3,4,5
	Referring Hospital	4	A/N	XXXX
1	Urgency Reassignment Date	8	N	DDMMCCYY or blank
1	Previous Urgency Category	1	A/N	1,2,3
M	Patient Listing Status	1	A/N	N,R
	Status Reassignment Date	8	N	DDMMCCYY or blank
	Reason for NRFC Status	1	A/N	C,D,S
2	Booking Date	8	N	DDMMCCYY or blank
2	Booking Number	2	A/N	Left justified, NN
	Reason for Rebooking	1	A/N	C,D,E,H,P,

Proposed Revisions (Patient Record)

	Data Items	Maximum characters	Alpha/ Numeric	Layout/Values
2	Scheduled Admission Date	8	N	DDMMCCYY
3	Removal Date	8	N	DDMMCCYY
3	Reason for Removal	1	A/N	A , B ,C,D,E, N ,T, <u>W</u>
	Insurance Declaration	1	A/N	M,P,V,W,T,A,S,C,O,X
	Reason for Cancellation	1	A/N	B,F,I,M,N,O,Q,U
	Transfer Destination	4	A/N	XXXX
M	Total Not Ready for Care Days	4	N	Right justified, zero filled NNNN or all zeros
M	Total Not Ready for Care Days Following Last Urgency Reassignment	4	N	Right justified, zero filled NNNN or all zeros
<u>M</u>	<u>Hospital Initiated Postponement</u>	<u>2</u>	<u>N</u>	<u>Left justified, NN</u>
	Total	160		

Do not zero fill fields unless specified.

All alpha characters must be in uppercase.

M = Mandatory

1 = If data reported in one of these fields, the other field is mandatory.

2 = If data reported in any of these fields, the other fields are mandatory.

3 = If data reported in one of these fields, the other field is mandatory.