

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter '/', shows on screen as 'n/a') means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
- **Unknown** (enter 'U' or '\*\*', shows on screen as unk or "U") means the information is appropriate to this patient, but is not known or reasonably obtainable. Also, see special instructions for use of Unknown in specific fields.
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
Demographic	F1.1	Hospital Index	HOSP_INDEX	hindex	A unique number for each patient encounter. Hospitals should use their billing number. The hospital index, along with the hospital ID number (see INST_NUM), will uniquely identify this patient record.
Demographic	F1.1	Facility ID Number	INST_NUM	hospid	<p>A number assigned by the state that is unique to this hospital. This, together with the hospital index (see HOSP_INDEX), will uniquely identify a patient record.</p> <p><i>Note: Unless you are using Central Site Collector, this number will be entered automatically.</i></p> <p><b>Central Region</b>                      014 = Children's Hospital &amp; Medical Center (Seattle)                      029 = Harborview Medical Center (HMC) (Seattle)                      035 = Enumclaw Community Hospital (Enumclaw)                      126 = Highline Community Hospital (Burien)                      130 = Northwest Hospital &amp; Medical Center (Seattle)                      131 = Overlake Hospital Medical Center (Bellevue)                      155 = Valley Medical Center (Renton)                      164 = Evergreen Hospital Medical Center (Kirkland)                      183 = Auburn Regional Medical Center (Auburn)                      201 = St. Francis Community Hospital (Federal Way)</p> <p><b>East Region</b>                      021 = Newport Community Hospital (Newport)                      030 = Mount Carmel Hospital (Colville)                      037 = Deaconess Medical Center (Spokane)                      042 = Deer Park Hospital (Spokane)                      080 = Odessa Memorial Healthcare (Odessa)                      082 = Garfield County Hospital District (Pomeroy)                      108 = Tri-State Memorial Hospital (Clarkston)                      111 = East Adams Rural Hospital (Ritzville)                      125 = Othello Community Hospital (Othello)                      137 = Lincoln Hospital (Davenport)                      139 = Holy Family Hospital (Spokane)                      153 = Whitman Hospital and Medical Center (Colfax)                      157 = St Luke's Rehabilitation Institute (Spokane)                      162 = Sacred Heart Medical Center (Spokane)                      167 = Ferry County Memorial Hospital (Republic)                      172 = Pullman Regional Hospital (Pullman)                      180 = Valley Hospital &amp; Medical Center (Spokane)                      194 = St. Joseph Hospital (Chewelah)                      950 = St. Joseph Regional Medical Center (Lewiston, ID)</p> <p><b>North Region</b>                      027 = Providence Everett Medical Center (Everett)                      073 = Skagit Valley Hospital (Mt. Vernon)                      104 = Valley General Hospital (Monroe)                      106 = Cascade Valley Hospital (Arlington)                      138 = Stevens Hospital (Edmonds)                      145 = St. Joseph Hospital (Bellingham)                      156 = Whidbey General Hospital (Coupeville)                      163 = Island Hospital (Anacortes)                      961 = Inter-Island Medical Center (Friday Harbor)                      965 = Darrington Clinic (Darrington)</p>

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					<p>967 = United General Hospital (Sedro-Woolley)</p> <p><b>North Central Region</b></p> <p>023 = Okanogan-Douglas County Hospital (Brewster)            045 = Columbia Basin Hospital (Ephrata)            078 = Samaritan Hospital (Moses Lake)            107 = North Valley Hospital (Tonasket)            129 = Quincy Valley Medical Center (Quincy)            147 = Mid-Valley Hospital (Omak)            150 = Coulee Community Hospital (Grand Coulee)            158 = Cascade Medical Center (Leavenworth)            165 = Lake Chelan Community Hospital (Chelan)            168 = Central Washington Hospital (Wenatchee)</p> <p><b>Northwest Region</b></p> <p>038 = Olympic Medical Center (Port Angeles)            054 = Forks Community Hospital (Forks)            085 = Jefferson General Hospital (Port Townsend)            142 = Harrison Memorial Hospital (Bremerton)            152 = Mason General Hospital (Shelton)</p> <p><b>South Central Region</b></p> <p>022 = Lourdes Medical Center (Pasco)            039 = Kennewick General Hospital (Kennewick)            044 = Walla Walla General Hospital (Walla Walla)            140 = Kittitas Valley Community Hospital (Ellensburg)            141 = Dayton General Hospital (Dayton)            161 = Kadlec Medical Center (Richland)            198 = Sunnyside Community Hospital (Sunnyside)            199 = Toppenish Community Hospital (Toppenish)</p> <p><b>Southwest Region</b></p> <p>08 = Klickitat Valley Hospital (Goldendale)            026 = St. John Medical Center (Longview)            079 = Ocean Beach Hospital (Ilwaco)            096 = Skyline Hospital (White Salmon)            170 = Southwest Washington Medical Center (Vancouver)</p> <p><b>West Region</b></p> <p>032 = St. Joseph Medical Center (Tacoma)            056 = Willapa Harbor Hospital (South Bend)            063 = Grays Harbor Community Hospital (Aberdeen)            081 = Good Samaritan Community Healthcare (Puyallup)            132 = St. Clare Hospital (Lakewood)            159 = Providence St. Peter Hospital (Olympia)            173 = Morton General Hospital (Morton)            175 = Mary Bridge Children’s Hospital (Tacoma)            176 = Tacoma General Hospital (Tacoma)            186 = Mark Reed Hospital (McCleary)            191 = Providence Centralia Hospital (Centralia)            197 = Capital Medical Center (Olympia)            209 = St. Anthony Hospital (Gig Harbor)            720 = Madigan Army Medical Center (Fort Lewis)</p>

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Demographic	F1.1	Abstractor	ABTRACTOR	abstract	Indicates the ID number (if your facility has assigned one) or initials of the person abstracting the data for the Trauma Registry.
Demographic	F1.1	Accession Number	ACC_NUM	accnum	Reserved for DOH linking purposes.
Demographic	F1.1	Abstraction Date	ABS_DATE	absdate	The latest date that information was entered or modified for this patient record. If adding a record, today's date is automatically filled in. If modifying a previously closed record, you must override the field with today's date.
Demographic	F1.1	Abstraction Month	ABS_DATE_M	absmo	Month portion of the Abstraction Date. Valid values range from 1 to 12.
Demographic	F1.1	Abstraction Day	ABS_DATE_D	absday	Day portion of the Abstraction Date. Valid values range from 1 to 31.
Demographic	F1.1	Abstraction Year	ABS_DATE_Y	absyr	Year portion of the Abstraction Date. Valid values are from 1980 to 2099.
Demographic	F1.1	Patient ID Number	PAT_ID_NUM	patid	<b>The unique number assigned by your facility to this patient within your hospital (but not necessarily unique to this patient encounter). This is the patient's medical record number.</b> <b>Note: Do not use 'U' Unknown or (/)Not Applicable in this field.</b>
Demographic	F1.1	Patient Name	PAT_NAME	pnameh	Indicates the patient's full name, including the last, first, and middle initial.
Demographic	F1.1	Patient Last Name	PAT_NAM_LH	pnamelh	Enter the <i>full</i> last name. If unknown, enter an asterisk (*), and "unk" will display on the screen. <b>Note: Do not enter '/' Not Applicable in this field.</b>
Demographic	F1.1	Patient First Name	PAT_NAM_FH	pnamefh	Enter the <i>full</i> first name -- do not use initial(s) unless the patient's first name consists of initial(s). If unknown, enter an asterisk (*), and "unk" will display on the screen. <b>Note: Do not enter '/' Not Applicable in this field.</b>
Demographic	F1.1	Patient Middle Initial	PAT_NAM_MH	pnamemh	The patient's middle initial If no middle initial, leave blank. <b>Note: Do not use 'U' Unknown or (/)Not Applicable in this field.</b>
Demographic	F1.1	Date of Birth	DOB_TEXT	dob	The patient's date of birth. IF DOB is unknown, see <a href="#">RAW AGEH</a> .
Demographic	F1.1	DOB Month	DOB_MH	dobmoh	Month portion of the patient's date of birth. Valid values range from 1 to 12.
Demographic	F1.1	DOB Day	DOB_DH	dobdayh	Day portion of the patient's date of birth. Valid values range from 1 to 31.
Demographic	F1.1	DOB Year	DOB_YH	dobyrh	Year portion of the patient's date of birth. <b>Enter all 4 digits.</b> Valid values are from <b>1850 - 2098</b> .
Demographic	F1.1	Patient Age Entered by Abstractor	RAW_AGEH	ageh	Enter the Patient age if DOB is unknown. It is based on information received from the patient's family or other reliable source. If the patient is under 1 year, enter number of <i>months</i> ; if under one month, enter number of <i>days</i> . If the patient is 1 year or older, enter number of <i>years</i> . Always attempt to estimate the age. If medical personnel estimate the age, enter the number of estimated years. Allowed values range from 1 to 120. See also <a href="#">AGE_TYPE</a> , <a href="#">AGE</a> .  Note: There is only a single AGE field on the Collector screen.
Demographic	F1.1	Age	AGE	ageh	Indicates the patient's age at ED arrival date. It is automatically calculated by Collector if date of birth (DOB) is entered, using DOB and the ED arrival date. The patient age will initially be computed as the age at date of abstraction. However, once the ED arrival date is entered, the age field will automatically be refreshed with the correct patient age. <b>If the DOB is unknown, Collector will take the value of the raw age entered by</b>

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					<p>the user (see <a href="#">RAW_AGE</a>, <a href="#">AGE_TYPE</a>) and round to the nearest year.</p> <p><i>Example 1:</i> On abstraction date 1/1/1998, the patient's DOB is entered as 1/1/1991. The patient AGE is automatically displayed on the Collector screen as 7. When the abstractor later enters the ED arrival date of 3/3/1996, the age is automatically modified to 5.</p> <p><i>Example 2:</i> The age is manually entered because DOB is unknown. The patient age is 5 months (family verified), so 5 is entered for the age, and 2 (=months) is entered for age units. The value of AGE in this case is zero, and the value of RAW_AGE is 5. If the entered age is 6 months, the value of AGE is 1, and the value of RAW_AGE is 6. This distinction is important when writing reports. See also <a href="#">RAW_AGEH</a>.</p>
Demographic	F1.1	In (Age Units)	AGE_TYPE	ageunits	<p>The age units corresponding to the patient's age. If Collector automatically calculated patient age (see <a href="#">AGE</a>), the age units field is automatically set by Collector as option 4 - "Estimated, in Years"; then, when the EDA is entered, the units field is updated to 1- "Years". If, however, the abstractor manually entered the patient's age (see <a href="#">RAW_AGE</a>), then the age units are manually entered by the abstractor as shown below.</p> <p>1 = Years 2 = Months 3 = Days 4 = Estimated, in Years</p>
Demographic	F1.1	Sex	SEXH	sexh	<p>1 = Male 2 = Female Note: Enter the gender as listed by the patient or facility. Note: Do not use 'U' Unknown or (/)Not Applicable in this field.</p>
Demographic	F1.1	Pregnancy	<b>PREGNANCY</b> <b>New Required</b> <b>(12/17/2009)</b>	prenn	<p>Indicates whether the patient was pregnant at the time, for females age 10 to 60 years. Otherwise, cursor will skip to next element.</p> <p>1 = Yes 2 = No 'U' Unknown can be used for female patients with no pregnancy test results.</p>
Demographic	F1.1	Race	RACEH	raceh	<p>The race of the patient as stated by the patient or next of kin. Note: Hispanic is considered a national origin, not a race. If Hispanic is given as a response with no additional information, enter 'U' Unknown or (/)Not Applicable in this field, and enter a 1 for the ethnicity field (see <a href="#">ETHNICITYH</a>).</p> <p>1 = White 2 = Black 3 = Native American (American Indian, Eskimo, Aleut) 4 = Asian or Pacific Islanders (Asian includes Chinese, Filipino, Japanese, Asian Indian, Korean, Vietnamese, Cambodian, Hmong, Laotian, Thai, and other Asian. Pacific Islander includes Hawaiian, Samoan, Guam, Tongan, Other Polynesian, Other Micronesian, Melanesian, and other Pacific Islander.) 5 = Other</p>
Demographic	F1.1	Ethnicity	ETHNICITYH	ethnich	<p>Note: Persons of Hispanic origin may be of any race. See also RACEH.</p> <p>1 = Hispanic Origin 2 = Non-Hispanic Origin</p>
Demographic	F1.1	Social Security	SSN	ssnh	<p>The patient's social security number. If patient does not have a social security number (e.g. is not a US citizen), or the SSN is unknown, enter 'U' Unknown in</p>

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		<b>Number</b>			all three social security fields. See SOC_SEC_1H, SOC_SEC_2H, and SOC_SEC_3H. <b>LAST FOUR ONLY REQUIRED (12/17/2009)</b>
Demographic	F1.1	SSN Part 1	SOC_SEC_1H	ssn1h	The first part (3 digits) of the patient's social security number. If unknown, enter 'U' Unknown.
Demographic	F1.1	SSN Part 2	SOC_SEC_2H	ssn2h	The second part (2 digits) of the patient's social security number. If unknown, enter 'U' Unknown.
Demographic	F1.1	SSN Part 3	<b>SOC_SEC_3H (12/17/2009)</b>	ssn3h	The third part (4 digits) of the patient's social security number. In unknown, enter 'U' Unknown.
Demographic	F1.1	Home Zip Code	PAT_ADR_Z	ziphome	Zip code of the patient's residence. 'U' Unknown – Use if Zip code is not known, or if residence is outside U.S.
Demographic	F1.2	Demographics Memo	NOTES_DEMO		Ten lines designated for a description of additional patient demographic information.
Injury Data	F2.1	Injury Date	INJ_DATE	injdate	Date that the patient was injured. (Note: Order of preference for source is prehospital run sheet, health care providers, patient, witness, family.) 'U' Unknown – If information is not available.
Injury Data	F2.1	Injury Month	INJ_DATE_M	injmo	Month that the patient was injured. Valid values are from 1 to 12. See INJ_DATE for a complete definition. 'U' Unknown – If information is not available.
Injury Data	F2.1	Injury Day	INJ_DATE_D	injday	Day that the patient was injured. Valid values are from 1 to 31. See INJ_DATE for a complete definition. 'U' Unknown – If information is not available.
Injury Data	F2.1	Injury Year	INJ_DATE_Y	injyr	Year that the patient was injured. Valid values are from 1980 to 2099. See INJ_DATE for a complete definition. 'U' Unknown – If information is not available.
Injury Data	F2.1	Injury Time	INJ_TIME	injtime	Time that the patient was injured. (Note: Order of preference for source is prehospital run sheet, health care providers, patient, witness, family. Dispatch or 911 call time should not be used.) 'U' Unknown – If information is not available.
Injury Data	F2.1	Injury Hour	INJ_TIME_H	injhr	Hour that the patient was injured. Valid values are from 0 to 23. See INJ_TIME for a complete definition. 'U' Unknown – If information is not available.
Injury Data	F2.1	Injury Minutes	INJ_TIME_M	injmin	'Minutes' portion of time that the patient was injured. Valid values are from 0 to 59. See INJ_TIME for a complete definition. 'U' Unknown – If information is not available.
Injury Data	F2.1	Zip Code of Place of Injury	<b>ZIP_INJ (New Requirement, 12/17/2009)</b>	zipinj	Zip Code of Place of Injury. (Note: Order of preference for source is prehospital run sheet, health care providers, patient, or witness.) 'U' Unknown – If information is not available.
Injury Data	F2.1	Incident Location Type	<b>E849 X</b>	injplace	The place where the injury occurred. These options are taken in part from the <a href="#">E849 X</a> category. Refer to the ICD-9-CM coding manual for a complete description of these codes.  0 = Home 1 = Farm (exclude farmhouse) 2 = Mine/Quarry 3 = Industrial Place 4 = Place for Sports or Recreation 5 = Street or Highway 6 = Public Building 7 = Residential Institution 8 = Other Specified Place

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					<b>9 = Unspecified Place</b>
Injury Data	F2.1	Injury Description Details	NOTES_INJD		Ten lines for a description of patient’s injury.
Injury Data	F2.2	Primary E-Code	E_CODE	ecode1	<b>The main, external cause of the injury, assigned on the basis of the most severe injury. For further information about use of these codes, refer to: ICDM-9-CM coding manual, External Cause Codes Alphabetic Listing</b> <i>Example:</i> Enter E845.0 for Accident to Occupant of Spacecraft.
Injury Data	F2.2	Specify	CAUSE_INJ1	ec1desc	Specify a description of primary cause of injury (see <a href="#">E_CODE</a> ).
Injury Data	F2.2	Secondary E-Code	E_CODE_2	ecode2	An additional, external cause of injury, assigned to the less severe injury. For further information, refer to the ICD-9-CM on-line coding manual. <i>Example:</i> Enter E901.8 for Other accidental drowning/submersion.
Injury Data	F2.2	Specify	CAUSE_INJ2	ec2desc	Specify a description of secondary cause of injury (see <a href="#">E_CODE_2</a> ).
Injury Data	F2.2	Activity Code	E_ACT	e_act	Describes what activity the patient was engaged in when the injury occurred. For Example: 017.0 roller coaster riding. Select from the drop down menu <a href="#">E_ACT</a> .
Injury Data	F2.2	Specify	E_ACT_S	e_act_s	Specify a description of activity if Other is selected.
Injury Data	F2.2	External Cause Status	E_ECS	e_ecs	Describes the patient status at the time the injury occurred. (For Example: 0.2 Volunteer activity.) Select from the drop down menu E_ECS: 0 = Civilian activity done for income or pay 0.1 = Military activity 0.2 = Volunteer activity 0.8 = Other external cause status 0.9 = Unspecified external cause status
Injury Data	F2.2	Specify	E_ECS_S	e_ecs_s	Specify a description of External Cause of injury Status.
Injury Data	F2.2	<b>Mechanism of Injury (rev. 12/17/009)</b>	<b>BLUNT_PENT</b>	<b>bluntorp</b>	<b>The force type that caused the injury. (Not the external cause or E-code) If there was more than one force type, choose the one which caused the more severe injury.</b> <b>Example 1: MVC could be the force which caused an open fracture (Mechanism would be penetrating due to fracture fragment penetrating the skin.)</b> <b>Example 2: Assault would be the force which caused a liver laceration, (Mechanism would be penetrating due to the instrument used in the assault)</b> <b>Note: Be sure to record the force of the injury, not the type of injury (e.g. a blunt trauma MVA could be the cause (force) of an open fracture (type of injury)).</b> <b>1 = Blunt</b> <b>2 = Penetrating</b> <b>3 = Other (e.g. burns, near-drowning, asphyxiation, electrocution, foreign-body obstruction, etc.)</b> <b>‘U’ Unknown – If information is not available.</b> <b>**Former screen text was Type of Injury (prior to 12/17/2009).</b> <b>The Collector Data Element Name used for queries and reports will remain BLUNT_PENT**</b>
Injury Data	F2.2	<b>Cause of Injury (rev. 12/17/009)</b>	<b>MECH_INJ</b>	<b>mechinj</b>	<b>Cause of Injury</b> <b>AC = Other Accident or Injury (Note: if AC is chosen, please specify the cause of injury in the provided field.)Example: Human Bite</b> <b>AN = Animal Caused Injury</b> <b>AS = Beating, Fight, or Assault without weapon</b>

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					<p>BI = Bicycle (including Bicycle vs. Car, Pedicycle, Unicycle) See also Motor Vehicle                      BL = Blunt Instrument                      BU = Burn                      CH = Child Abuse (May include all other causes of injury)                      DR = Drowning or Near Drowning                      ES = Electrical Shock (Flash box)                      FA = Fall or Jump, (Sky-diving, Base-jumping)                      GS = Firearms (gunshot)                      KN = Sharp Instrument (knife)                      MC = Motorcycle (including Motorcycle vs. Car, electric bicycle)                      ME = Machinery or Equipment (Includes ski-lift, cable car, fork-lift)                      MV = Motor Vehicle (Includes all types of motorized transportation: motorized wheelchair, ATV’s, snow mobile, scooter, Segway, golf cart, boat, go-cart, Ultra-light aircraft. <i>Excludes : motorcycles, motorized bicycles, jet ski</i>)                      PV = Pedestrian vs. Vehicle (Includes Pedestrian vs. Bicycle)                      SP = Sports or Play Injury (Wrestling, Football, Hiking, Dog Agility, Diving, Swimming, Child’s Play)                      ST = Strangulation or Suffocation or Asphyxiation                      ‘U’ Unknown – If information is not available.                      ** Former screen text was <i>Mechanism of Injury (prior to 12/17/2009)</i>                      The Collector Data Element Name used for queries and reports will remain <b>MECH_INJ**</b></p>
Injury Data	F2.2	If Other	MECH_INJ_O	mechinjo	Specific description of injury if AC was chosen as the cause of injury (see MECH_INJ).
Injury Data	F2.2	Work Related	WORK_RELAT	workrltd	<p>Work related injury as documented in the patient’s medical record. (Employment based status.)                      1 = yes                      2 = no                      ‘U’ Unknown                      ‘/’ Not Applicable</p>
Injury Data	F2.2	Use of Safety Equipment (rev. 12/17/2009)	PROT_DEV_1	protdev1	<p>The first (of two) most important device in use by this patient, including injury prevention devices used in sports, industry, non-motorized and motorized vehicles, or at home. Enter 00=None, if the appropriate cause is applicable but either the EMS or Hospital record explicitly states that the device was not used. e.g., the cause is a drowning or near-drowning and the patient was <i>not</i> wearing a personal flotation device. For this same example, enter ‘Unknown’ if the patient record doesn’t indicate whether the patient was wearing a PFD.</p> <p>00 = None                      01 = Lap Belt                      02 = Shoulder Belt                      03 = Lap/Shoulder Belt Combined                      04 = Safety Belt, unspecified type                      05 = Airbag only                      06 = Airbag/Belt (Airbag with Lap/Shoulder Belt)                      07 = Helmet                      08 = Infant/Child Booster Seat                      09 = Other Protective Gear (Not Otherwise Listed)                      10 = Personal Flotation Device (PFD)                      11 = Gunlock or Lockbox                      ‘U’ Unknown                      ‘/’ Not Applicable</p>

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Injury Data	F2.2	Use of Safety equipment	PROT_DEV_2	protdev2	The second most important device as described in PROT_DEV_1.
Injury Data	F2.2	If Other	PROT_DEV_O	protdevo	Description of the protective device if ‘Other’ (=9) was chosen for either protective device 1 or 2. (see PROT_DEV_1 & PROT_DEV_2)
Injury Data	F2.3	Injury Memo	NOTES_INJ		Ten lines for a description of patient’s injury.
Pre-H/Transfer	F3.1	Transport Mode	TRANSP_S	trsptyps	How the patient was transported from the scene/field. <i>Note that “transport” refers to the unit that provides the majority of the transportation between the scene and the receiving facility.</i> 1 = Ground Ambulance (Pre-Hospital Agency) 2 = Helicopter (Pre-Hospital Agency) 3 = Fixed Wing Aircraft (Pre-Hospital Agency) 4 = Police (or other Law Enforcement, not a Pre-Hospital agency) 5 = Private Vehicle (not a Pre-Hospital agency) 6 = Other ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Patient Care Report Available (EMS Run Sheet)	RUN_FORM	rfavails	Is a pre-hospital care record or equivalent (e.g. Washington Emergency Medical Service Incident Report - WEMSIR) present in the patient’s chart at the time of abstracting? 1 = Yes 2 = No ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Transport Agency ID #	TRANSP_AG	trspaid	The ID number of the <i>primary</i> transport agency. Note: “Primary transport” refers to the unit which provides <i>the majority</i> of the medical care between the scene and the receiving facility. <i>Example:</i> A helicopter transports a patient from a wilderness scene to a landing site a few blocks from an urban trauma center. The patient is transported the last few blocks by ground ambulance. The helicopter is the primary transportation. ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Unit #	TRANSP_UN	trspuid	Identifies the number of the unit (vehicle) that transported the patient. This is a user-defined field assigned by the individual transporting agency. ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Crew Member Level	LEV_SERV	lsuplevs	The <i>highest level of certification of personnel</i> from the primary transporting agency on this run. 1 = Advanced Life Support (ALS) -- Paramedic, RN, MD 2 = Intermediate Life Support (ILS) – AEMT(Advanced EMT) 3 = Basic Life Support (BLS) -- EMR (Emergency Medical Responder, First Responder), EMT ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Patient Care Report (Run Number)	RUN_NUM	runnumh	The run number from the primary Transport Agency pre-hospital patient care report (EMS Run Sheet). ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	First EMS Agency#	FIRST_AG	firstsce	The Agency Identification Number of the first licensed EMS agency (non - transporting) at the scene. The menu is user-defined. The format for the

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
r					Agency ID Number is NNXNN: 2 numbers indicating the county, 1 alpha indicating the type of agency, and 2 numbers indicating the district. This number can be found on the prehospital patient care report. ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Crew Member Level	FIRST_LEV	first_lev	The <i>highest level of certification of personnel</i> from the First EMS agency to reach the patient. 1 = Advanced Life Support (ALS) -- Paramedic, RN, MD 2 = Intermediate Life Support (ILS) – AEMT(Advanced EMT) 3 = Basic Life Support (BLS) -- EMR (Emergency Medical Responder, First Responder),EMT ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Patient Care Report (Run Number)	RUN_NUM_2	run_num_2	The pre-hospital patient care report number from the First EMS Agency to reach the patient. Enter ‘U’ if Unknown ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Patient Care Report (Run Number)	RUN_NUM_3	run_num_3	The pre-hospital patient care report number from a third EMS agency. Enter ‘U’ if Unknown ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Mass Casualty Incident Declared	MULTI_INC	masscaus	Was a Mass Casualty Incident (MCI) declared by the prehospital EMS agency. Note: Specific criteria for MCI are determined within each local system. 1 = Yes 2 = No ‘U’ Unknown ‘/’ Not Applicable
Pre-H/Transfer	F3.1	Extrication Required	EXTRIC	extric	Was extrication required? 1 = Yes 2 = No ‘U’ Unknown ‘/’ Not Applicable Note: This includes any type of extrication, such as a canyon, ditch, elevator shaft, bedroom, not just from vehicles. Do not enter ‘/’ Not Applicable in this field.
Pre-H/Transfer	F3.1	Extrication Time Greater Than 20 minutes	EXTRIC_20	extric20	Was the time required for extrication greater than twenty minutes? 1 = Yes 2 = No ‘U’ Unknown ‘/’ Not Applicable Enter Unknown if extrication was performed, but the length is not known.
Pre-H/Transfer	F3.1	Response Area Type	AREA	area	Enter the response area type from the patient care report (EMS Run Sheet), if it is reported. 1 = Urban 2 = Suburban 3 = Rural 4 = Wilderness Enter ‘U’ Unknown if no Response Area Type is reported ‘/’ Not Applicable

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Pre-H/Transfer	F3.1	Reason For Destination	DEST_REASN	reasdest	Reason for the Destination Decision?  0 = Did not Transport 1 = Nearest Hospital 2 = Trauma Protocols (nearest designated facility within 30 minutes) 3 = Medical Control direction 4 = Patient or Family request 5 = Patient's Physician's request 6 = Divert from Another Hospital 7 = Other 'U' Unknown
Pre-H/Transfer	F3.1	Unit En Route Date	PREDATE_D	???	The date that the pre-hospital agency was dispatched to the incident.
Pre-H/Transfer	F3.1	Unit En Route Month	PREDATE_DM	predate_dm	Indicates the month of dispatch. Valid values range from 01 to 12.
Pre-H/Transfer	F3.1	Unit En Route Day	PREDATE_DD	predate_dd	Indicates the day of dispatch. Valid values range from 01 to 31.
Pre-H/Transfer	F3.1	Unit En Route Year	PREDATE_DY	predate_dy	Indicates the year of dispatch. Valid values range from 1980 to 2099.
Pre-H/Transfer	F3.1	Unit En Route Time	PRETIME_D	dispatim	Indicates time that the pre-hospital agency was dispatched to the incident.
Pre-H/Transfer	F3.1	Unit En Route Hour	PRETIME_DH	dispahr	Indicates the hour that the pre-hospital agency was dispatched to the incident. Valid values are from 0 to 23.
Pre-H/Transfer	F3.1	Unit En Route Minutes	PRETIME_DM	dispamin	Indicates the minute that the pre-hospital agency was dispatched to the incident. Valid values are from 0 to 59.
Pre-H/Transfer	F3.1	Unit Arrived at Patient	PRETIME_R	arvltime	Indicates the time the first EMS agency reached the patient.
Pre-H/Transfer	F3.1	Unit Arrived at Patient (1 <sup>st</sup> Responder) Hour	PRETIME_RH	arvlhr	Indicates the hour the first EMS agency reached the patient. Valid values are from 0 and 23.
Pre-H/Transfer	F3.1	Unit Arrived at Patient Minutes of 1 <sup>st</sup> Responder	PRETIME_RM	arvlmin	Indicates the minute of the first EMS agency reached the patient. Valid Values are from 0 and 59.
Pre-H/Transfer	F3.1	Unit Left Scene	PRETIME_L	departim	Indicates the time that the patient was taken from the scene by EMS personnel, either en route to a facility or to a rendezvous point with another EMS vehicle. <b>NOTE: The times reported for 'Unit Arrived at Patient' (First Responder) and 'Unit Left Scene' may be from different agencies.</b>
Pre-H/Transfer	F3.1	Hour Unit Left Scene	PRETIME_LH	deparhr	Indicates the hour that the patient was taken from the scene by EMS personnel, either en route to a facility or to a rendezvous point with another EMS vehicle. <b>NOTE: The times reported for 'Unit Arrived at Patient (First Responder)' and 'Unit Left Scene' may be from different agencies. Valid values are from 0 and 23.</b>

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
Pre-H/Transfer	F3.1	Minutes Unit Left Scene	PRETIME_LM	deparmin	Indicates the minute the patient was taken from the scene by EMS personnel, either en route to a facility or to a rendezvous point with another EMS vehicle. <b>NOTE: The times reported for 'Unit Arrived at Patient (First Responder)' and 'Unit Left Scene' may be from different agencies. Valid Values are from 0 and 59.</b>
Pre-H/Transfer	F3.1	Scene Time	SCENE_TIME	scenetim	A Collector calculated data element defined as the elapsed time (in minutes) from arrival at scene to departure from scene. <b>NOTE: It does not appear on the data entry screen; however it may be selected from the list of elements for use in a data table report or query.</b>
Pre-H/Transfer	F3.1	Incident County Code	COUNTY	injcnty	<b>The county in which the incident occurred.</b>  01 = Adams 02 = Asotin 03 = Benton 04 = Chelan 05 = Clallam 06 = Clark 07 = Columbia 08 = Cowlitz 09 = Douglas 10 = Ferry 11 = Franklin 12 = Garfield 13 = Grant 14 = Grays Harbor 15 = Island 16 = Jefferson 17 = King 18 = Kitsap 19 = Kittitas 20 = Klickitat 21 = Lewis 22 = Lincoln 23 = Mason 24 = Okanogan 25 = Pacific 26 = Pend Oreille 27 = Pierce 28 = San Juan 29 = Skagit 30 = Skamania 31 = Snohomish 32 = Spokane 33 = Stevens 34 = Thurston 35 = Wahkiakum 36 = Walla Walla 37 = Whatcom 38 = Whitman 39 = Yakima 45 = Oregon 50 = Idaho

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					60 = Alaska 70 = Canada 80 = Other States 90 = Other Countries																									
Pre-H/Transfer	F3.2	GCS: Eye Opening	EYE_OPNG_S	eyeopns	<p>Sub-score of the Glasgow Coma Score (GCS) indicating a patient's earliest eye opening at the scene. It is added to two other sub-scores to obtain the GCS at the scene. See GCS at scene (GCS_S).</p> <table border="1" style="width: 100%;"> <tr> <th colspan="2">Adult Coma Scale</th> </tr> <tr> <td>1 = None or pharmacologically paralyzed</td> <td></td> </tr> <tr> <td>2 = To Pain</td> <td></td> </tr> <tr> <td>3 = To Voice</td> <td></td> </tr> <tr> <td>4 = Spontaneous</td> <td></td> </tr> <tr> <td>U = Unknown</td> <td></td> </tr> </table> <p>Pediatric Coma Scale</p> <table border="1" style="width: 100%;"> <tr> <th>&lt; 1 year</th> <th>&gt; 1 Year</th> </tr> <tr> <td>1= None or pharmacologically paralyzed</td> <td>1= None or pharmacologically paralyzed</td> </tr> <tr> <td>2= To Pain</td> <td>2= No Pain</td> </tr> <tr> <td>3= To Shout</td> <td>3= To Verbal Command</td> </tr> <tr> <td>4= Spontaneously</td> <td>4= Spontaneously</td> </tr> </table>	Adult Coma Scale		1 = None or pharmacologically paralyzed		2 = To Pain		3 = To Voice		4 = Spontaneous		U = Unknown		< 1 year	> 1 Year	1= None or pharmacologically paralyzed	1= None or pharmacologically paralyzed	2= To Pain	2= No Pain	3= To Shout	3= To Verbal Command	4= Spontaneously	4= Spontaneously			
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Pre-H/Transfer	F3.2	Verbal Response	VER_RESP_S	vrbbrsps	<p>Sub-score of the Glasgow Coma Score (GCS) indicating patient earliest verbal response. It is added to two other sub-scores to obtain the GCS at the scene. See also GCS at scene (GCS_S).</p> <table border="1" style="width: 100%;"> <tr> <th colspan="1">Adult</th> </tr> <tr> <td>1 = None, intubated, or pharmacologically paralyzed</td> </tr> <tr> <td>2 = Incomprehensible Sounds</td> </tr> <tr> <td>3 = Inappropriate Words</td> </tr> <tr> <td>4 = Confused</td> </tr> <tr> <td>5 = Oriented</td> </tr> <tr> <td>U = Unknown</td> </tr> </table> <p>Pediatric Verbal Response</p> <table border="1" style="width: 100%;"> <tr> <th>&gt; 5 Years</th> <th>2 to 5 Years</th> <th>0 to 23 Months</th> </tr> <tr> <td>5= Oriented and converses</td> <td>5= Appropriate words / phrases</td> <td>5= Smiles, coos appropriately</td> </tr> <tr> <td>4= Disoriented and converses</td> <td>4= Inappropriate words</td> <td>4= Cries, consolable</td> </tr> <tr> <td>3= Inappropriate words</td> <td>3= Persistent crying and screaming</td> <td>3= Persistent inappropriate crying and screaming</td> </tr> <tr> <td>2= Incomprehensible sounds</td> <td>2= Grunts</td> <td>2= Grunts, agitated, restless</td> </tr> <tr> <td>1= None, intubated, or pharmacologically paralyzed</td> <td>1= None, intubated, or pharmacologically paralyzed</td> <td>1= None, intubated, or pharmacologically paralyzed</td> </tr> </table>	Adult	1 = None, intubated, or pharmacologically paralyzed	2 = Incomprehensible Sounds	3 = Inappropriate Words	4 = Confused	5 = Oriented	U = Unknown	> 5 Years	2 to 5 Years	0 to 23 Months	5= Oriented and converses	5= Appropriate words / phrases	5= Smiles, coos appropriately	4= Disoriented and converses	4= Inappropriate words	4= Cries, consolable	3= Inappropriate words	3= Persistent crying and screaming	3= Persistent inappropriate crying and screaming	2= Incomprehensible sounds	2= Grunts	2= Grunts, agitated, restless	1= None, intubated, or pharmacologically paralyzed	1= None, intubated, or pharmacologically paralyzed	1= None, intubated, or pharmacologically paralyzed
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Pre-H/Transfer	F3.2	Motor Response	MOT_RESP_S	motrsps	<p>Sub-score of the Glasgow Coma Score (GCS) indicating the patient's earliest motor response at the scene. It is added to two other sub-scores to obtain the GCS at the scene. See GCS at scene (GCS_S).</p>																									

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					<p><b>Adult Motor Response</b>                      1 = None, or pharmacologically paralyzed                      2 = Abnormal extension                      3 = Abnormal flexion                      4 = Withdraws to pain                      5 = Localizes pain                      6 = Obeys commands                      U = Unknown</p> <p><b>Pediatric Motor Response</b></p> <table border="1" style="width: 100%;"> <tr> <td style="width: 50%;"><b>&gt; 1 Year</b></td> <td style="width: 50%;"><b>&lt; 1 Year</b></td> </tr> <tr> <td>6= Obeys 5= Localizes pain 4= Flexion-withdrawal 3= Flexion-abnormal (decorticate rigidity) 2= Extension (decerebrate rigidity) 1= None, or pharmacologically paralyzed</td> <td>6= Spontaneous 5= Localizes pain 4= Flexion-withdrawal 3= Flexion-abnormal (decorticate rigidity) 2= Extension (decerebrate) 1= None, or pharmacologically paralyzed</td> </tr> </table>	<b>&gt; 1 Year</b>	<b>&lt; 1 Year</b>	6= Obeys 5= Localizes pain 4= Flexion-withdrawal 3= Flexion-abnormal (decorticate rigidity) 2= Extension (decerebrate rigidity) 1= None, or pharmacologically paralyzed	6= Spontaneous 5= Localizes pain 4= Flexion-withdrawal 3= Flexion-abnormal (decorticate rigidity) 2= Extension (decerebrate) 1= None, or pharmacologically paralyzed
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Pre-H/Transfer	F3.2	GCS Total	GCS_S	gcss	<p>Glasgow Coma Score at the scene (GCS) is an index that assesses the degree of coma in patients. The <i>pre-hospital</i> GCS is calculated by adding the sub-scores of three behavioral responses at the scene: <i>earliest</i> eye opening (see EYE_OPNG_S), <i>earliest</i> verbal response (see VER_RESP_S), and <i>earliest</i> motor response (see MOT_RESP_S). If any of the sub-scores are unavailable but the total GCS is known, the abstractor may enter it here. Enter ‘U’ Unknown for unknown.</p> <p>If documentation in the record closely describes a related level of functioning, the appropriate sub-score may be assigned, IF there is no contradicting documentation. For example, the record says “AAOX3”, “awake, alert, oriented”, or “normal mental status”, then the abstractor may record this as GCS of 15 IF there is no other contradicting documentation. The record indicates “withdraws from pain”, then the abstractor can assign 4 to the motor component. Total GCS values range from 3 to 15. Values range from 3 to 15.</p>				
Pre-H/Transfer	F3.2	Was Patient Intubated at the time of GCS	INTUBAT_S	intubpre	<p>Indicates whether the patient was intubated at the time of Glasgow Coma Score evaluation at the scene. If there is no indication that the GCS score was evaluated, enter ‘U’ Unknown. ‘/’ Not Applicable, is not a valid value for this data element.</p> <p>1 = Yes 2 = No</p>				
Pre-H/Transfer	F3.2	Was the Patient pharmacologically paralyzed at the time of GCS	PARALYZ_S	paralpre	<p>Indicates whether the patient was pharmacologically paralyzed at the time of Glasgow Coma Score evaluation at the scene. If there is no GCS evaluation, enter ‘U’ Unknown. ‘/’ Not Applicable is not a valid value for this data element.</p> <p>1 = Yes 2 = No</p>				
Pre-H/Transfer	F3.2	Prehospital Vital Signs: Time	VIT_TIM	vit_tim	<p>The time that the <i>earliest</i> vital signs were taken by pre-hospital personnel. See the definitions of each individual vital sign (SYS_BP_S, RESP_RAT_S, PULSE_S) for a complete description of which measurements should be</p>				

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					recorded for the pre-hospital vital signs.
Pre-H/Transfer	F3.2	Prehospital Vital Signs Hour	VIT_TIM_H	vit_tim_h	The hour that the earliest systolic blood pressure was taken by pre-hospital personnel. Valid values are from 00 to 23.
Pre-H/Transfer	F3.2	Prehospital Vital Signs Minutes	VIT_TIM_M	vit_tim_m	The minutes the earliest systolic blood pressure was taken by pre-hospital personnel. Valid values are 00 to 59.
Pre-H/Transfer	F3.2	Vitals From First Agency	FIRST_VIT	firstvit	Did the earliest vital signs come from the first agency on scene?  1 = Yes 2 = No 'U' = Unknown
Pre-H/Transfer	F3.2	Posture	POSTURE	posture	Patient's position during pre-hospital vital sign assessment. If position is not specified in the patient care report, please enter unknown.  1 = Lying 2 = Sitting 3 = Upright 'U' = Unknown
Pre-H/Transfer	F3.2	First Pulse Rate	PULSE_S	pulses	Earliest pulse rate during prehospital care (at the scene or during transport), in beats per minute.
Pre-H/Transfer	F3.2	First Respiratory Rate	RESP_RAT_S	resprats	The number of earliest <i>unassisted</i> respirations during prehospital care (at the scene or during transport) per minute. (Do NOT use the bagged or controlled ventilator rate). Enter 'U' Unknown If the patient's <i>unassisted</i> respiratory rate was not recorded. Enter 0 (Zero) if the patient had no unassisted respirations.
Pre-H/Transfer	F3.2	First Systolic Blood Pressure	SYS_BP_S	sysbps	Earliest systolic blood pressure during prehospital care (at the scene or during transport), in mm of Hg. If no SBP was recorded, enter 'U' Unknown If SBP was measured, and patient had no measurable SBP, enter 0 (Zero).
Pre-H/Transfer	F3.2	Field Interventions	INTERV_S1	fproc1	Field Intervention # 1 of 8 maximum allowed.  00 = None 01 = O2 (Oxygen) 02 = Wound Care 03 = Extrication/Rescue 04 = Splinting 05 = Cervical Collar, Backboard 07 = ECG Monitor 08 = Oral Airway/Bag Mask 10 = CPR 11 = Shock Trouser 12 = Automatic DC Shock 13 = Manual DC Shock 14 = Endotracheal Intubation 17 = IV, Central Line 18 = IV, Peripheral 19 = IV, Intraosseous 20 = Needle Thoracostomy 21 = Pericardiocentesis

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					22 = Cricothyrotomy 23 = Other 24 = Multilumen Airway 25 = Baseline Blood 26 = Blood Transfusion  <b>Drug Therapy</b> (Included are examples of drugs by category. The category is not limited to the drugs listed.) 51 = Antihistamine: Diphenhydramine 52 = Anticholinergic - Antimuscarinic/Antispasmodic: Atropine 53 = Sympathomimetic (Adrenergic): Albuterol 54 = Skeletal Muscle Relaxants: Succinylcholine 55 = Coagulants and Anticoagulants: Heparin 56 = Cardiac Drugs 57 = Vasodilating Agents 58 = Nonsteroidal: Aspirin 59 = Opiate Agonists: Meperidine, Morphine, Fentanyl, Dilaudid 60 = Opiate Antagonists: Naloxone 61 = Misc: Acetaminophen 62 = Benzodiazepines: Diazepam 63 = Misc: Magnesium Sulfate 64 = Benzodiazepines: Lorazepam 65 = Alkalinizing Agents: Sodium Bicarbonate 66 = Replacement: Calcium (Chloride/Gluconate) 67 = Caloric Agents: Dextrose & Water 68 = Diuretics, Furosemide, Hydrochlorothiazide 69 = Antacids & Adsorbents: Activated Charcoal 70 = Emetics: Ipecac 71 = Misc GI: Metoclopramide 72 = Adrenals: Dexamethasone, Methylprednisolone 73 = Antidiabetic - Misc: Glucagon 74 = Other Medications
Pre-H/Transfer	F3.2	Field Intervention 2	INTERV_S2	fproc2	Field Intervention # 2 of 8 maximum allowed. See field intervention 1 (INTERV_S1) for defined values.
Pre-H/Transfer	F3.2	Field Intervention 3	INTERV_S3	fproc3	Field Intervention # 3 of 8 maximum allowed. See field intervention 1 (INTERV_S1) for defined values.
Pre-H/Transfer	F3.2	Field Intervention 4	INTERV_S4	fproc4	Field Intervention # 4 of 8 maximum allowed. See field intervention 1 (INTERV_S1) for defined values.
Pre-H/Transfer	F3.2	Field Intervention 5	INTERV_S5	fproc5	Field Intervention # 5 of 8 maximum allowed. See field intervention 1 (INTERV_S1) for defined values.
Pre-H/Transfer	F3.2	Field Intervention 6	INTERV_S6	fproc6	Field Intervention # 6 of 8 maximum allowed. See field intervention 1 (INTERV_S1) for defined values.
Pre-H/Transfer	F3.2	Field Intervention 7	INTERV_S7	fproc7	Field Intervention # 7 of 8 maximum allowed. See field intervention 1 (INTERV_S1) for defined values.
Pre-	F3.2	Field	INTERV_S8	fproc8	Field Intervention # 8 of 8 maximum allowed. See field intervention 1

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Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition																								
H/Transfer		Intervention 8			(INTERV_S1) for defined values.																								
Pre-H/Transfer	F4.2	Pediatric Trauma Score (PTS)	PTS_S	ptsscene	The Pediatric (age 0-14) Trauma Score at the scene of the accident. See PTS_A for a complete definition.																								
Pre-H/Transfer		Revised Trauma Score (RTS)	RTS_S	rtsscene	<p>The Revised Trauma Score (RTS) is a physiologic severity score widely used in pre-hospital triage and based on measurements of vital signs [systolic blood pressure (SBP), respiratory rate (RR) and a measurement of consciousness [(Glasgow Coma Scale (GCS)]. The RTS provides a more accurate estimation of injury severity for patients with serious head injuries, and supplies more reliable predictions of outcome than its predecessor -- the Trauma Score.</p> <p>The RTS at the scene (RTS<sub>scene</sub>) is computed by adding the coded values of GCS, SBP, and RR at the scene as follows:</p> $RTS_{scene} = GCS_{coded\ value} + SBP_{coded\ value} + RR_{coded\ value}$ <table style="margin-left: 40px;"> <thead> <tr> <th>GCS<sub>scene</sub></th> <th>SBP<sub>scene</sub></th> <th>RR<sub>scene</sub></th> <th>Coded Value</th> </tr> </thead> <tbody> <tr> <td>13 – 15</td> <td>&gt;89</td> <td>10 - 29</td> <td>4</td> </tr> <tr> <td>9 – 12</td> <td>76 - 89</td> <td>&gt;29</td> <td>3</td> </tr> <tr> <td>6 - 8</td> <td>50 - 75</td> <td>6 - 9</td> <td>2</td> </tr> <tr> <td>4 - 5</td> <td>1 - 49</td> <td>1 - 5</td> <td>1</td> </tr> <tr> <td>3</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table> <p>NOTE: The RTS at the scene does not use weighted values as does the RTS in the ED since it is easier to sum the coded values at the scene. RTS values at the scene range from 12 (best) to 0 (worst). See also GCS_S, SYS_BP_S, and RESP_RAT_S.</p>	GCS <sub>scene</sub>	SBP <sub>scene</sub>	RR <sub>scene</sub>	Coded Value	13 – 15	>89	10 - 29	4	9 – 12	76 - 89	>29	3	6 - 8	50 - 75	6 - 9	2	4 - 5	1 - 49	1 - 5	1	3	0	0	0
GCS <sub>scene</sub>	SBP <sub>scene</sub>	RR <sub>scene</sub>	Coded Value																										
13 – 15	>89	10 - 29	4																										
9 – 12	76 - 89	>29	3																										
6 - 8	50 - 75	6 - 9	2																										
4 - 5	1 - 49	1 - 5	1																										
3	0	0	0																										
Pre-H/Transfer	F3.3	Transferred in	REF_HOSP	transfin	<p>Indicates whether the patient was transferred in from another hospital (known as the referring or sending hospital). A 'referral' is a patient sent to your hospital from another licensed acute care facility or a designated trauma service. A patient sent to your hospital from a doctor's office, clinic, nursing home, ambulatory surgery center, etc. that is <i>not</i> a designated trauma service is considered a transport directly from the field -- <i>not</i> a referral or a transfer in.</p> <p>1 = Yes 2 = No</p> <p>Note: Do not use 'U' Unknown or (/)Not Applicable in this field. Note: A patient is "transferred" from another hospital if sent by ambulance. A patient sent by private vehicle or other means is not a "transfer" for the purposes of the Trauma Registry.</p>																								
Pre-H/Transfer	F3.3	Transport Mode	TRANSP_R	trstypr	<p>Indicates how the patient was transported from the referring or sending facility, if applicable. Note that "transport" refers to the unit that provides most of the transportation between the scene and the receiving facility.</p> <p>1 = Ground Ambulance (Pre-Hospital Agency) 2 = Helicopter (Pre-Hospital Agency) 3 = Fixed Wing Aircraft (Pre-Hospital Agency) 4 = Police (or other Law Enforcement, not a Pre-Hospital agency) 5 = Private Vehicle (not a Pre-Hospital agency) 6 = Other 'U' Unknown</p>																								

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					‘/’ Not Applicable
Pre-H/Transfer	F3.3	Crew Member Level	LEV_R	Isuplevr	The <i>highest level of certification of personnel</i> from the primary transporting agency on this run. 1 = Advanced Life Support (ALS) -- Paramedic, RN, MD 2 = Intermediate Life Support (ILS) – AEMT(Advanced EMT) 3 = Basic Life Support (BLS) -- EMR (Emergency Medical Responder, First Responder),EMT ‘U’ Unknown ‘/’ Not applicable
Pre-H/Transfer	F3.3	Transporting Agency ID Number	RTRANSP_AG	trspaidr	Agency (Identification Number of Primary Transporting Agency that transported the patient from the referring hospital to another hospital, if applicable. ‘Primary Transport’ refers to the unit that provides <i>most</i> of the medical care between the sending facility and the receiving facility. <i>Example: A helicopter transports a patient from a rural hospital to a landing site a few blocks from an urban trauma center. The patient is transported the last few blocks by ground ambulance. The air ambulance (helicopter) is the primary transportation.</i> ‘U’ Unknown ‘/’ Not applicable
Pre-H/Transfer	F3.3	Unit Number	RTRANSP_UN	trspuidr	The ID number of the transport <i>vehicle /aircraft</i> that transported the patient from the sending hospital to the receiving hospital, This is a user-defined field, the unit numbers are assigned by the prehospital transporting agency. ‘U’ Unknown ‘/’ Not applicable
Pre-H/Transfer	F3.3	Patient Care Report Available (EMS Run Sheet)	RRUN_FORM	rfavailr	Is a Washington Emergency Medical Service Incident Report (WEMSIR) , run sheet, run record or equivalent pre-hospital patient record of the inter-hospital <i>transfer</i> present in the patient’s chart at the time of abstracting? 1 = Yes 2 = No ‘U’ Unknown ‘/’ Not applicable
Pre-H/Transfer	F3.3	Patient Care Report Number	RRUN_NUM	runnumr	Indicates the inter-hospital transport run number from the Patient Care Report or other pre-hospital patient record. ‘U’ Unknown ‘/’ Not applicable
Pre-H/Transfer	F3.3	Unit Notified by Dispatch Date	REFDATE_D	refdspdat	The date that the Agency performing the Interfacility Transport was dispatched.
Pre-H/Transfer	F3.3	Unit Notified by Dispatch Month	REFDATE_DM	refdate_dm	Indicates the month of dispatch. Valid values range from 01 to 12.
Pre-H/Transfer	F3.3	Unit Notified by Dispatch Day	REFDATE_DD	refdate_dd	Indicates the day of dispatch. Valid values range from 01 to 31.
Pre-H/Transfer	F3.3	Unit Notified by Dispatch Year	REFDATE_DY	refdate_dy	Indicates the year of dispatch. Valid values range from 1980 to 2099.
Pre-H/Transfer	F3.3	Unit En Route Time	REFTIME_D	refdsptim	The time that the Agency performing the Interfacility Transport was notified of the transport.

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r					
Pre-H/Transfer	F3.3	Unit En Route Hour	REFTIME_DH	reftime_dh	Indicates the hour of dispatch. Valid values are from 0 to 23.
Pre-H/Transfer	F3.3	Unit En Route Minutes	REFTIME_DM	reftime_dm	Indicates the minutes of dispatch. Valid values are 0 to 59.
Pre-H/Transfer	F3.3	Unit Arrived at Patient	REFTIME_R	refarvtim	Indicates the time that the unit performing the Interfacility Transport arrives at the referring facility.
Pre-H/Transfer	F3.3	Unit Arrived at Patient Hour	REFTIME_RH	reftime_rh	Indicates the hour of arrival at the referring facility. Valid values are from 0 to 23.
Pre-H/Transfer	F3.3	Unit Arrived at Patient Minutes	REFTIME_RM	reftime_rm	Indicates the minutes of arrival at the sending (referring) facility. Valid values are from 0 to 59.
Pre-H/Transfer	F3.3	Unit left Scene Time	REFTIME_L	reflrhtim	Indicates the time that the unit performing the Interfacility Transport leaves the sending (referring) facility.
Pre-H/Transfer	F3.3	Unit left Scene Hour	REFTIME_LH	reftime_lh	Indicates the hour of departure from the sending (referring) facility. Valid values are from 0 to 23.
Pre-H/Transfer	F3.3	Unit left Scene Minutes	REFTIME_LM	reftime_lm	Indicates the minutes of departure from the sending (referring) facility. Valid values are from 0 to 59.
Pre-H/Transfer	F3.3	Facility Patient Transferred From	REF_ID	referhid	<p>ID number of the sending (referring) hospital if REF_HOSP = yes. A menu will appear with Washington Hospitals listed in alphabetical order. Selecting Oregon, Idaho, Montana, Alaska, or British Columbia will display <i>user-defined</i> menus of hospitals in those states, if defined.</p> <p>146 = Allenmore Hospital (Tacoma)                      183 = Auburn Regional Medical Center (Auburn)                      197 = Capital Medical Center (Olympia)                      158 = Cascade Medical Center (Leavenworth)                      106 = Cascade Valley Hospital (Arlington)                      168 = Central Washington Hospital (Wenatchee)                      045 = Columbia Basin Hospital (Ephrata)                      150 = Coulee Medical Center (Grand Coulee)                      965 = Darrington Clinic (Darrington)                      141 = Dayton General Hospital (Dayton)                      037 = Deaconess Medical Center (Spokane)                      042 = Deer Park Hospital (Spokane)                      111 = East Adams Rural Hospital (Ritzville)                      507 = Eastern State Hospital (Spokane)                      035 = Enumclaw Regional Medical Center (Enumclaw)                      164 = Evergreen Hospital Medical Center (Kirkland)                      707 = Fairchild Air Force Base Hospital (Fairchild AFB)                      167 = Ferry County Memorial Hospital (Republic)                      148 = Fifth Avenue Medical Center (Seattle)                      054 = Forks Community Hospital (Forks)                      082 = Garfield County Memorial Hospital Pomeroy                      081 = Good Samaritan Hospital (Multicare) (Puyallup)                      063 = Grays Harbor Community Hospital (Aberdeen)</p>

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					020 = Group Health Central Hospital (Seattle) 169 = Group Health Eastside Hospital (Redmond) 029 = Harborview Medical Center (Seattle) 142 = Harrison Memorial Hospital (Medical Center) (Bremerton) 126 = Highline Medical Center (Burien) 139 = Providence Holy Family Hospital (Spokane) 200 = Hospice Care Center Hospital (Longview) 961 = Inter-Island Medical Center (Friday Harbor) 163 = Island Hospital (Anacortes) 085 = Jefferson Healthcare (Port Townsend) 161 = Kadlec Regional Medical Center (Richland) 039 = Kennewick General Hospital (Kennewick) 966 = Kittitas County Hospital District #2 (Cle Elum) 140 = Kittitas Valley Community Hospital (Ellensburg) 008 = Klickitat Valley Health (Goldendale) 951 = Kootenai Medical Center 165 = Lake Chelan Community Hospital (Chelan) 137 = Lincoln Hospital (Davenport) 022 = Lourdes Medical Center (Pasco) 720 = Madigan Army Medical Center (Tacoma) 186 = Mark Reed Hospital (McCleary) 175 = Mary Bridge Children’s Hospital and Health Center (Tacoma) 152 = Mason General Hospital (Shelton) 147 = Mid-Valley Hospital (Omak) 173 = Morton General Hospital (Morton) 030 = Providence Mount Carmel Hospital (Colville) 701 = Naval Air Station (US) (Whidbey Island) 704 = Naval Regional Med. Center (Bremerton) 021 = Newport Hospital & Health Services (Newport) 107 = North Valley Hospital (Tonasket) 130 = Northwest Hospital (Seattle) 079 = Ocean Beach Hospital (Ilwaco) 080 = Odessa Memorial Healthcare Center (Odessa) 023 = Okanogan-Douglas (District) Hospital (Brewster) 038 = Olympic Medical Center (Port Angeles) 125 = Othello Community Hospital (Othello) 131 = Overlake Hospital Medical Center (Bellevue) 046 = Prosser Memorial Hospital (Prosser) 191 = Providence Centralia Hospital (Centralia) 027 = Providence Regional Medical Center Everett (Everett) 159 = Providence St. Peter Hospital (Olympia) 003 = Providence Medical Center (Seattle) 083 = Puget Sound Hospital (Tacoma) 172 = Pullman Regional Hospital (Pullman) 129 = Quincy Valley Medical Center (Quincy) 162 = Providence Sacred Heart Medical Center & Children’s Hospital (Spokane) 078 = Samaritan Healthcare (Hospital) (Moses Lake) 014 = Seattle Children’s Hospital (Seattle) 043 = Shriners Hospital for Children (Spokane) 073 = Skagit Valley Hospital (Mt. Vernon) 096 = Skyline Hospital (White Salmon) 170 = Southwest Washington Medical Center (Vancouver) 209 = St. Anthony Hospital (Gig Harbor) 132 = St. Clare Hospital (Lakewood)

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					<p>201 = St. Francis Community Hospital (Federal Way)            026 = St. John Medical Center (PeaceHealth) (Longview)            145 = St. Joseph Hospital (PeaceHealth) (Bellingham)            194 = Providence St. Joseph's Hospital (Chewelah)            032 = St. Joseph Medical Center (Tacoma)            050 = Providence St. Mary Medical Center (Walla Walla)            138 = Swedish/Edmonds (Stevens Healthcare) (Edmonds)            198 = Sunnyside Community Hospital (Sunnyside)            001 = Swedish Medical Center -- Ballard (Seattle)            001 = Swedish Medical Center -- Seattle (Seattle)            176 = Tacoma General Hospital (Tacoma)            199 = Toppenish Community Hospital (Toppenish)            108 = Tri-State Memorial Hospital (Clarkston)            967 = United General Hospital (Sedro-Woolley)            128 = University of Washington Medical Center (Seattle)            104 = Valley General Hospital (Monroe)            180 = Valley Hospital &amp; Medical Center (Spokane Valley)            155 = Valley Medical Center (Renton)            710 = Veterans Administration Hospital (Seattle)            705 = Veterans Administration Hospital -- American (Tacoma)            715 = Veterans Administration Hospital (Spokane)            010 = Virginia Mason Hospital (Seattle)            044 = Walla Walla General Hospital (Walla Walla)            506 = Western State Hospital (Tacoma)            205 = Wenatchee Valley Medical Center (Wenatchee)            156 = Whidbey General Hospital (Coupeville)            153 = Whitman Hospital &amp; Medical Center (Colfax)            056 = Willapa Harbor Hospital (South Bend)            102 = Yakima Regional Medical &amp; Cardiac Center (Yakima)            058 = Yakima Valley Memorial Hospital (Yakima)</p> <p>California            084 = General Hospital Medical Center (Eureka)</p> <p>Oregon            916 = Legacy Emanuel Hospital (Portland)            915 = Good Shepherd Hospital (Hermiston)            911 = Grande Ronde Hospital (La Grande)            917 = Oregon Health &amp; Sciences University Hospital (Portland)            914 = Pioneer Memorial Hospital (Prinville)            912 = St. Anthony Hospital (Pendleton)            700 = Veterans Administration Hospital -- Vancouver (Portland)            913 = Wallowa Memorial Hospital (Enterprise)            910 = Other Oregon Hospitals</p> <p>Idaho            950 = St. Joseph Regional Medical Center s(Lewiston)            952 = Gritman Medical Center (Moscow)            940 = Idaho Hospitals (NOS)</p> <p>Montana            945 = Other Montana Hospitals</p> <p>Alaska</p>

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					<p>930 = Other Alaska Hospitals</p> <p>British Columbia</p> <p>920 = Other British Columbia Hospitals</p> <p>960 = All Other Hospitals</p> <p>970 = Doctor’s Office, Nursing Home or Other Care Facility</p> <p>997 = Field (Scene, Residence)</p> <p>998 = Rendezvous</p> <p>Note: If “960 = All Other Hospital” is chosen, enter name of referring hospital below.</p> <p>Note: Do not use 970, 997, or 998 in this field. A transfer is from a <u>licensed</u> hospital (or <u>designated Level V Trauma Service</u>). A patient transported from a doctor’s office or rendezvous is not considered a transfer</p>
Pre-H/Transfer	F3.3	If Other	REF_OTHER	refhotxt	Enter the name of the hospital if “960 = All Other Hospitals” was chosen for the sending (referring) hospital ID (see <a href="#">REF_ID</a> ).
Pre-H/Transfer	F3.3	Reason for Referral	REF_REASON <b>12/17/2009</b>	refreasn	<p>Reason patient was sent from sending hospital to receiving hospital</p> <p>100 Specialty Physician not available</p> <p>101 Ward Bed not available</p> <p>102 Critical Care Bed not available</p> <p>103 Hospital Staff not available</p> <p>104 OR not available</p> <p>105 Trauma Protocols</p> <p>106 Patient or Family request</p> <p>107 Physician Request</p> <p>108 Equipment or Supply not available (e.g., Instruments, CT, blood, etc)</p> <p>109 ED Over-capacity</p> <p>110 Insurance Status</p> <p>111 Other</p> <p>User-defined Choices</p> <p><b>X , Reason (example) (Enter your reasons and number them 0-99)</b></p> <p><b>‘U’ Unknown</b></p> <p><b>‘/’ Not applicable</b></p>
Pre-H/Transfer	F3.3	If Other	REF_REAS_O		Enter text description if “111=Other” was chosen as the reason for referral.
Pre-H/Transfer	F3.3	Arrive Referring Hospital	REF_AR_D	refhadat	Date of patient’s arrival at the sending hospital..
Pre-H/Transfer	F3.3	Month of Arrival at Referring Hospital	REF_AR_D_M	refhamo	Month of patient’s arrival at the sending hospital Valid values range from 1 to 12.
Pre-H/Transfer	F3.3	Day of Arrival at Referring Hospital	REF_AR_D_D	refhaday	Day of patient’s arrival at the sending hospital. Valid values range from 1 to 31.
Pre-H/Transfer	F3.3	Year of Arrival at	REF_AR_D_Y	refhayr	Year of patient’s arrival at the sending hospital. Valid values range from 1980 to 2099.

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		Referring Hospital			
Pre-H/Transfer	F3.3	Time of Arrival at Referring Hospital	REF_AR_T	refhatim	Time of patient's arrival at the sending hospital.
Pre-H/Transfer	F3.3	Hour of Arrival at Referring Hospital	REF_AR_T_H	refhahr	Hour of patient's arrival at the sending hospital .Valid values range from 0 to 23.
Pre-H/Transfer	F3.3	Minutes of Arrival at Referring Hospital	REF_AR_T_M	refhamin	Minute of patient's arrival at the sending hospital .Valid values range from 0 to 59.
Pre-H/Transfer	F3.3	Depart Referring Hospital	REF_DP_D	refhddat	Date of patient's departure from the sending hospital.
Pre-H/Transfer	F3.3	Month of Departure from Referring Hospital	REF_DP_D_M	refhdmo	Month of patient's departure from the sending hospital .Valid values range from 1 to 12.
Pre-H/Transfer	F3.3	Day of Departure from Referring Hospital	REF_DP_D_D	refhdday	Day of patient's departure from the sending hospital. Valid values range from 1 to 31.
Pre-H/Transfer	F3.3	Year of Departure from Referring Hospital	REF_DP_D_Y	refhdyr	Year of patient's departure from the sending hospital. Valid values range from 1980 to 2099.
Pre-H/Transfer	F3.3	Time of Departure from Referring Hospital	REF_DP_T	refhdtim	Time of patient's departure from the sending hospital.
Pre-H/Transfer	F3.3	Hour of Departure from Referring Hospital	REF_DP_T_H	refhdhr	Hour of patient's departure from the sending hospital .Valid values range from 0 to 23.
Pre-H/Transfer	F3.3	Minutes of Departure from Referring Hospital	REF_DP_T_M	refhdmin	Minute of patient's departure from the sending hospital .Valid values range from 0 to 59.
Pre-H/Transfer	F3.3	Decision to Transfer Made By	REF_X_BY		The decision to transfer the patient from the referring hospital was made by: 1= ED Physician 2= ED Mid Level Provider 3= General Surgeon 4= Neurosurgeon 5= Orthopedic Surgeon

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					6= Pediatric Surgeon 7= Pediatrician 8= Other  'U' Unknown '/'= Not Applicable
Pre-H/Transfer	F3.3	Decision to Transfer Made By- If Other	REF_X_BY_O		If the decision to transfer the patient is Other (8), enter a text description in the data field.
Pre-H/Transfer	F3.3	Referring Facility Interventions	RPROC_01	rproc1	1 <sup>st</sup> of 10 possible Referring Facility Interventions. Select from the <a href="#">Primary Procedure List</a> first, then select from the <a href="#">Secondary Procedure List</a> .  <b>PRIMARY PROCEDURE LIST</b> 00 = None 03 = Angiography, Arteriogram, or Aortagram 01 = Airway, Endotracheal Intubation 211 = Benzodiazepines (valium, ativan, versed, etc.) 09 = Blood Product Transfusion 10 = CPR 49 = CT Abdomen 50 = CT Cervical Spine 51 = CT Chest 13 = CT Head 33 = Diagnostic Peritoneal Lavage (DPL) 217 = Diuretics (lasix, mannitol, etc.) 57 = Echocardiogram 21 = Fluid Resuscitation 203 = Neuromuscular Blocking Agents (succinylcholine, vecuronium, etc.) 208 = Opiates (meperidine, morphine, etc.) 221 = Steroids (dexamethasone, methylprednisolone, etc.) 40 = Thoracostomy, Chest Tube 30 = Thoracotomy (Open Chest) 42 = Tracheostomy or Cricothyroidotomy 69 = Ultrasound 43 = Warming Methods  <b>SECONDARY PROCEDURE LIST</b> 210 = Acetaminophen 224 = Antibiotics 04 = Arterial Blood Gases 05 = Arterial Line 06 = Autotransfusion 02 = Bag/Valve/Mask Ventilation 07 = Baseline Blood 209 = Benzodiazepine Antagonist or Opiate Antagonist 47 = Bronchoscopy 48 = Capnography or End Tidal CO2 205 = Cardiovascular Drugs (epinephrine, lidocaine, etc.) 11 = Cervical Collar/Backboard 12 = Closed Reduction(s) 52 = CT Facial 53 = CT Lumbar-Sacral Spine 54 = CT Pelvis

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					55 = CT Thoracic Spine 56 = CT Other 15 = Cutdown 16 = Cystogram 17 = Defibrillation 18 = Doppler Study 19 = ECG Monitor 20 = Fetal Heart Rate Monitor 58 = Fetal Heart Tone Auscultation 22 = Foley Catheter 220 = GI Drugs (droperidol, metoclopramide, etc.) 59 = HCG, Urine or Serum 60 = Hyperventilation 225 = Immunizations, Vaccinations 23 = Intracranial Pressure Monitor 24 = IV, Central Line 25 = IV, Intraosseous 226 = IV, Isotonic Crystalloids (NS, LR, etc.) 26 = IV, Peripheral 27 = K-wire or Steinman Pin Insertion 61 = MRI Abdomen 62 = MRI Brain 28 = MRI Cervical Spine 63 = MRI Chest 64 = MRI Lumbar or Sacral Spine 65 = MRI Other 66 = MRI Pelvis 67 = MRI Thoracic Spine 29 = Naso- or Oro-gastric Tube 207 = Nonsteroidal Anti-inflammatory Drugs (aspirin, ibuprofen, ketorolac, etc.) 46 = Other 31 = Oxygen 32 = Pericardiocentesis 68 = Pulse Oximetry 08 = Repeat H&H 34 = Shock Trouser 35 = Skeletal Traction 36 = Splinting 37 = Suture or Staple Laceration 38 = Temperature Monitor 39 = Thoracostomy, Needle 41 = Tongs or Halo 44 = Wound Care 45 = X-ray  100 – 199 = User-defined Interventions/Procedures
Pre-H/Transfer	F3.3	Referring Facility Interventions 2	RPROC_02	rproc2	2 <sup>nd</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions	RPROC_03	rproc3	3 <sup>rd</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		3			
Pre-H/Transfer	F3.3	Referring Facility Interventions 4	RPROC_04	rproc4	4 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions 5	RPROC_05	rproc5	5 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions 6	RPROC_06	rproc6	6 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions 7	RPROC_07	rproc7	7 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions 8	RPROC_08	rproc8	8 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions 9	RPROC_09	rproc9	9 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.3	Referring Facility Interventions 10	RPROC_10	rproc10	10 <sup>th</sup> of 10 possible Referring Facility Interventions. See 1 <sup>st</sup> referring facility intervention for possible values.
Pre-H/Transfer	F3.4	Pre-Hospital Memo	NOTES_PRE		Ten lines designated for a description of pre-hospital information.
ED Data	F4.1	<b>Emergency Department Arrival (EDA) Date</b>	<b>READMIT</b>	<b>readmit</b>	<p><b>Indicates patient is in facility for a second visit for the same episode of injury. Readmissions are required in the registry if an injury was missed at the time of the original care in your ED or facility. Readmissions without a missed diagnosis are not required submissions.</b></p> <p><b>Example:</b> Patient admitted to hospital for a 3 day stay following a MVC, and discharged with no abdominal diagnoses. One day later, he returned to the ED with pain; an abdominal CT showed a small liver laceration. This is a missed injury, and a required registry readmission. There should be two records for this patient in the registry.</p> <p><b>Readmission?</b>                      1 = Yes                      2 = No</p> <p><b>Note:</b> ‘U’ Unknown or ‘/’ Not Appropriate are not valid values for this data element.</p> <p><b>If yes is entered, please indicate the date of the original admission and the missed injury description in the Injury Memo screen F2.3. Also enter #25=Missed Injury in one of the 3 ED Care Issues on Screen F4.3.</b></p>

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					Only the initial episode of care (per Inclusion Criteria) is required for readmissions without a missed injury.. Exception: If a patient is discharged home from the emergency department and is subsequently admitted for a missed diagnosis of the same injury, both records should be included. Registrars are welcome to enter more than the minimum inclusion criteria records, if helpful to their trauma service.
ED Data	F4.1	Emergency Department Arrival (EDA) Date	EDA_DATE	edadata	Emergency Department Arrival (EDA) Date.  NOTE: When Direct Admit is YES, the admit date should be entered here. It will automatically be entered as the ED Discharge Date by the software.
ED Data	F4.1	Emergency Department Arrival (EDA) Month	EDA_DATE_M	edamo	Month of Emergency Department Arrival (EDA). NOTE: <i>If the patient was a direct admit, the software will skip to PREEXISTING CONDITIONS (screen 4.2).</i> Valid values are from 01 to 12.
ED Data	F4.1	Emergency Department Arrival (EDA) Day	EDA_DATE_D	edaday	Day of Emergency Department Arrival (EDA). NOTE: <i>If the patient was a direct admit, the software will skip to PREEXISTING CONDITIONS (screen 4.2).</i> Valid values are from 01 to 31.
ED Data	F4.1	Emergency Department Arrival (EDA) Year	EDA_DATE_Y	edayr	Year of Emergency Department Arrival (EDA). NOTE: <i>If the patient was a direct admit, the software will skip to PREEXISTING CONDITIONS (screen 4.2).</i> Valid values are from 1980 to 2099.
ED Data	F4.1	Emergency Department Arrival (EDA) Time	EDA_TIME	edatime	Emergency Department Arrival (EDA) Time.  NOTE: When Direct Admit is YES, the admit time should be entered here. It will automatically be entered as the ED Discharge Time by the software.
ED Data	F4.1	Emergency Department Arrival (EDA) Hour	EDA_TIME_H	edahr	Emergency Department Arrival (EDA) Hour. NOTE: <i>If the patient was a direct admit, the software will skip to PREEXISTING CONDITIONS (screen 4.2).</i> Valid values are from 0 to 23.
ED Data	F4.1	Emergency Department Arrival (EDA) Minutes	EDA_TIME_M	edamin	Emergency Department Arrival (EDA) Minutes. NOTE: <i>If the patient was a direct admit, the software will skip to PREEXISTING CONDITIONS (screen 4.2).</i> Valid values are from 0 to 59.
ED Data	F4.1	Direct Admit	DIRECT_ADM	diradmit	Identifies a patient that was admitted as an inpatient, without being evaluated in the Emergency Department. ‘U’ Unknown or ‘/’ Not Applicable are not valid responses for this data element.  1 = Yes 2 = No  Note: When a patient is indicated as a Direct Admit: a. The Admit date and time should be entered into the Date and Time Entered ED fields. b. The ED Admit date and time will automatically be entered as the ED Discharge Time by the software, thereby making the ED length of stay zero. c. A skip will only allow the following ED elements to be entered: •DOA

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					<ul style="list-style-type: none"> <li>• Was the MCI Disaster Plan implemented?</li> <li>• Trauma Team Activated</li> <li>• Response Level</li> <li>• Date and Time of TTA</li> <li>• PTS</li> <li>• Intubated</li> <li>• Paralyzed</li> <li>• Vital Signs (First Vital Signs taken in the ED)</li> </ul>
ED Data	F4.1	Dead on Arrival (DOA)	DOA	doa	<p>Indicates the patient was declared dead on arrival at the facility (i.e. no resuscitative efforts started or continued).</p> <p>1 = Yes 2 = No (Example: GSW-unresponsive at arrival, attempted resuscitation then declared dead.)</p> <p>Note: Do not use ‘/’ Not Applicable or ‘U’ Unknown in this field.</p>
ED Data	F4.1	MCI Disaster Plan Implemented	MCI_PLAN	mci_plan	<p>Was your facility Mass Casualty Incident Plan implemented in the ED.</p> <p>1= Yes 2 = No ‘U’ Unknown ‘/’ Not applicable</p>
ED Data	F4.1	Trauma Team Activated?	TRAUMA_ACT	trmatact	<p>Indicates whether the ED activated the Trauma Resuscitation Team for this trauma patient, as documented in the medical record. The Trauma Team is a pre-assigned group of caregivers who respond immediately to the ED to provide resuscitation care. The response, criteria, and team membership is defined by the facility. It is an extraordinary response to an injured patient, in comparison to the usual ED response to a non-emergent injured patient.</p> <p>1 = Yes for either Full Trauma Resuscitation Team activation or Modified Trauma Resuscitation Team activation. If 1 or Yes is chosen for this data element, the Trauma Response Level must also be completed to indicate whether it was a Full Trauma Resuscitation Team or a Modified Trauma Resuscitation Team that was implemented. See also RESUS.</p> <p>2 = No Trauma Resuscitation Team was activated. Use 2 or No if a trauma consult was implemented without a Full or Modified Team. See also RESUS.</p>
ED Data		Trauma Team Activated - Month [I]	TTA_DM	tta_dm	The month the Trauma Team was activated. (Range 01-12)
ED Data		Trauma Team Activated - Day [I]	TTA_DD	tta_dd	The day the Trauma Team was activated. (Range 01-31)
ED Data		Trauma Team Activated - Year [I]	TTA_DY	tta_dy	The year the Trauma Team was activated. (Range 1980-2099)
ED Data		Trauma Team Activated - Hour [I]	TTA_TH	tta_th	The hour the Trauma Team was activated.(Range 00-23)
ED Data		Trauma Team	TTA_TM	tta_tm	The minute the Trauma Team was activated. (Range 00-59)

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		Activated - Minute [I]			
ED Data	F4.1	Trauma Response Level	RESUS	trmaresp	<p>1 = Full Trauma Team Response (Full Trauma Team Activation). Indicates activation of the Trauma Resuscitation Team for this patient. This response, criteria, and team membership is defined by the facility but must include the general surgeon’s prompt response to the patient’s bedside in the ED phase of care. Only facilities with a general surgeon on-call for trauma can report a Full Trauma Team Response. The data entry of 1 = Full Trauma Team Response should only be used when “Trauma Team Activated?” data entry field is “1” or “Yes”. See also <a href="#">TRAUMA ACT</a>. The Full Trauma Team Response may have a different name in different facilities.</p> <p>2 = Modified Trauma Team Response (Modified Trauma Team Activation) Indicates activation of the Modified Trauma Resuscitation Team for this patient. This response, criteria, and team membership is defined by the facility. A Modified Trauma Team Response is an extraordinary response to an injured patient, in comparison to the usual ED response to a non-emergent injured patient. The data entry of 2 = Modified Trauma Team Response should only be used when “Trauma Team Activated?” data entry field is “1” or “Yes”. See also <a href="#">TRAUMA ACT</a>. The Modified Trauma Team Response may have a different name in different facilities.</p> <p>3 = Trauma Consult. This indicates the patient received an evaluation by a general surgeon <u>during the ED phase of care</u> on a non-emergent basis. A general surgeon evaluation in the inpatient setting can be indicated on Screen F8.1. See Consults: General Surgeon</p> <p>4 = None. Indicates neither Trauma Team nor the general surgeon was activated to care for the patient in the ED.</p>
ED Data	F4.1	ED Procedure 1	ED_PROC_01	edproc1	<p>In ED Procedures 1-20, first enter all of the primary procedures performed. (Order of entry is not significant) Then enter the most important secondary procedures until all fields are completed.</p> <p><b>PRIMARY PROCEDURE LIST</b></p> <p>00 = None            03 = Angiography, Arteriogram, or Aortogram            01 = Airway, Endotracheal Intubation            211 = Benzodiazepines (valium, ativan, versed, etc.)            09 = Blood Product Transfusion            70 = Conscious Sedation (12/17/2009)            10 = CPR            49 = CT Abdomen            50 = CT Cervical Spine            51 = CT Chest            13 = CT Head            33 = Diagnostic Peritoneal Lavage (DPL)            217 = Diuretics (lasix, mannitol, etc.)            57 = Echocardiogram            21 = Fluid Resuscitation            203 = Neuromuscular Blocking Agents (succinylcholine, vecuronium, etc.)            208 = Opiates (meperidine, morphine, etc.)            72 = Pelvic Stabilization (12/17/2009)            71 = Sedatives (e.g. Propofol) (12/17/2009)            221 = Steroids (dexamethasone, methylprednisolone, etc.)</p>

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					40 = Thoracostomy, Chest Tube 30 = Thoracotomy (Open Chest) 42 = Tracheostomy or Cricothyroidotomy 69 = Ultrasound 43 = Warming Methods  <b>SECONDARY PROCEDURE LIST (See Also Appendix XXX)</b> 210 = Acetaminophen 224 = Antibiotics 04 = Arterial Blood Gases 05 = Arterial Line 06 = Autotransfusion 02 = Bag/Valve/Mask Ventilation 07 = Baseline Blood 209 = Benzodiazepine Antagonist or Opiate Antagonist 47 = Bronchoscopy 48 = Capnography or End Tidal CO2 205 = Cardiovascular Drugs (epinephrine, lidocaine, etc.) 11 = Cervical Collar/Backboard 12 = Closed Reduction(s) 52 = CT Facial 53 = CT Lumbar-Sacral Spine 54 = CT Pelvis 55 = CT Thoracic Spine 56 = CT Other 15 = Cutdown 16 = Cystogram 17 = Defibrillation 18 = Doppler Study 19 = ECG Monitor 20 = Fetal Heart Rate Monitor 58 = Fetal Heart Tone Auscultation 22 = Foley Catheter 220 = GI Drugs (droperidol, metoclopramide, etc.) 59 = HCG, Urine or Serum 60 = Hyperventilation 225 = Immunizations, Vaccinations 23 = Intracranial Pressure Monitor 24 = IV, Central Line 25 = IV, Intraosseous 226 = IV, Isotonic Crystalloids (NS, LR, etc.) 26 = IV, Peripheral 27 = K-wire or Steinman Pin Insertion 61 = MRI Abdomen 62 = MRI Brain 28 = MRI Cervical Spine 63 = MRI Chest 64 = MRI Lumbar or Sacral Spine 65 = MRI Other 66 = MRI Pelvis 67 = MRI Lumbar Spine 29 = Naso- or Oro-gastric Tube 207 = Nonsteroidal Anti-inflammatory Drugs (aspirin, ibuprofen, ketorolac, etc.) 46 = Other

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					31 = Oxygen 32 = Pericardiocentesis 68 = Pulse Oximetry 08 = Repeat H&H 34 = Shock Trouser 35 = Skeletal Traction 36 = Splinting 37 = Suture or Staple Laceration 38 = Temperature Monitor 39 = Thoracostomy, Needle 41 = Tongs or Halo 44 = Wound Care 45 = X-ray  100 – 199 = User-defined Interventions/Procedures
ED Data	F4.1	ED Procedure 2	ED_PROC_02	edproc2	Emergency Department Procedure #2 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 3	ED_PROC_03	edproc3	Emergency Department Procedure #3 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 4	ED_PROC_04	edproc4	Emergency Department Procedure #4 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 5	ED_PROC_05	edproc5	Emergency Department Procedure #5 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 6	ED_PROC_06	edproc6	Emergency Department Procedure #6 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 7	ED_PROC_07	edproc7	Emergency Department Procedure #7 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 8	ED_PROC_08	edproc8	Emergency Department Procedure #8 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 9	ED_PROC_09	edproc9	Emergency Department Procedure #9 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for

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					the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 10	ED_PROC_10	edproc10	Emergency Department Procedure #10 of 20 Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 11	ED_PROC_11	ed_proc_11	Emergency Department Procedure #11 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 12	ED_PROC_12	ed_proc_12	Emergency Department Procedure #12 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 13	ED_PROC_13	ed_proc_13	Emergency Department Procedure #13 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 14	ED_PROC_14	ed_proc_14	Emergency Department Procedure #14 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 15	ED_PROC_15	ed_proc_15	Emergency Department Procedure #15 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 16	ED_PROC_16	ed_proc_16	Emergency Department Procedure #16 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 17	ED_PROC_17	ed_proc_17	Emergency Department Procedure #17 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 18	ED_PROC_18	ed_proc_18	Emergency Department Procedure #18 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	ED Procedure 19	ED_PROC_19	ed_proc_19	Emergency Department Procedure #19 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.

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ED Data	F4.1	ED Procedure 20	ED_PROC_20	ed_proc_20	Emergency Department Procedure #20 of 20. Enter the most important secondary procedures until all fields are completed. Order is not important for the maximum of twenty procedures. See Emergency Department Procedure 1 for values.
ED Data	F4.1	CT Scan of Head Date	CT_DATE	cthdate	CT Scan of Head Date, if applicable. Format is mm/dd/yyyy.
ED Data	F4.1	CT Scan of Head Month	CT_DATE_M	cthmo	Month of CT Scan of the head. Values are from 01 and 12.
ED Data	F4.1	CT Scan of Head Day	CT_DATE_D	cthrday	Day of CT Scan of the head. Valid values are from 01 to 31.
ED Data	F4.1	CT Scan of Head Year	CT_DATE_Y	cthyr	Year of CT Scan of the head. Valid values are from 1980 to 2099.
ED Data	F4.1	CT Scan of Head Time	CT_TIME	cthtime	The time that the CT Scan of the head was performed if applicable.
ED Data	F4.1	CT Scan of Head Hour	CT_TIME_H	cthr	The hour that the CT Scan of the head was performed, if applicable. Valid values are from 00 to 23.
ED Data	F4.1	CT Scan of Head Minutes	CT_TIME_M	cthrmin	The minute that the CT Scan of the head was performed, if applicable. Valid values are from 00 to 59.
ED Data	F4.1	BAC Done	BAC_DONE	bacdone	Indicates whether the patient had Blood Alcohol Concentration (BAC) tested. 1 = Yes 2 = No 'U' = Unknown Do not use '/' Not Applicable for this field.
ED Data	F4.1	Blood Alcohol Content	ETOH_BAC	bac	Blood alcohol concentration in mg/dL. Blood alcohol concentration levels may also be reported as grams/dL, or as a percentage. For example, 80 mg/dL, is equivalent to 0.80 g/dL and 0.80 %.. (A decimal is not entered or needed in this field.) If the reported value is .10 g/dL, enter 100. If the measured value is 1000 mg/dL or greater (or 1 g/dL or greater), enter 999; this situation should be very rare.  Enter 'U' Unknown if BAC was not tested in your facility or if the test was done but the results are not known. Do not use '/' Not Applicable for this field.
ED Data	F4.1	Tox Screen Performed?	TOX_DONE	toxdone	Indicates whether a Toxicology Screen was performed. 1 = Yes 2 = No 'U' Unknown (Enter Unknown if TOX was not tested in your facility or if the test was done but the results are not known.) Do not use '/' Not Applicable for this field.
ED Data	F4.1	Tox Screen Results	TOX_RESULT	toxreslt	Results of the Toxicology Screen, if performed. 1 = Positive 2 = Negative 'U' Unknown (Enter Unknown if TOX was not tested in your facility or if the test was done but the results are not known.) '/' Not applicable
ED Data	F4.1	Tox Drug 1 Found	TOX_DRUG	toxdrug1	1 <sup>st</sup> of up to 8 drugs found. Do not include positive drug results secondary to drug administration by health care personnel during the resuscitation. Items 1 through 5, and 7 through 9 should be selected only once. Item 6 may be selected multiple times. 00 = None

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					01 = Opiates (Other than Methadone) (12/17/2009) 02 = Cocaine 03 = Amphetamines 04 = Cannabis 05 = Barbiturates 06 = Other 07 = Benzodiazepines (12/17/2009) 08 = Phencyclidine (PCP) (12/17/2009) 09 = Methadone (12/17/2009)
ED Data	F4.1	Tox Drug 2 Found	TOX_DRUG_2	toxdrug2	2 <sup>nd</sup> of up to 6 drugs found. Do not include positive drug results secondary to drug administration by health care personnel during the resuscitation. Items 1 through 5, and 7 through 9 should be selected only once. Item 6 may be selected multiple times. See Tox Drug 1 for values.
ED Data	F4.1	Tox Drug 3 Found	TOX_DRUG_3	toxdrug3	3 <sup>rd</sup> of up to 6 drugs found. Do not include positive drug results secondary to drug administration by health care personnel during the resuscitation. Items 1 through 5, and 7 through 9 should be selected only once. Item 6 may be selected multiple times. See Tox Drug 1 for values.
ED Data	F4.1	Tox Drug 3 Found	TOX_DRUG_4	tox_drug_4	4 <sup>th</sup> of up to 6 drugs found. Do not include positive drug results secondary to drug administration by health care personnel during the resuscitation. Items 1 through 5, and 7 through 9 should be selected only once. Item 6 may be selected multiple times. See Tox Drug 1 for values.
ED Data	F4.1	Tox Drug 4 Found	TOX_DRUG_5	tox_drug_5	5 <sup>th</sup> of up to 6 drugs found. Do not include positive drug results secondary to drug administration by health care personnel during the resuscitation. Items 1 through 5, and 7 through 9 should be selected only once. Item 6 may be selected multiple times. See Tox Drug 1 for values.
ED Data	F4.1	Tox Drug 5 Found	TOX_DRUG_6	tox_drug_6	6 <sup>th</sup> of up to 6 drugs found. Do not include positive drug results secondary to drug administration by health care personnel during the resuscitation. Items 1 through 5, and 7 through 9 should be selected only once. Item 6 may be selected multiple times. See Tox Drug 1 for values.
ED Data	F4.1	Tox Drug Other Found	TOX_DRUG_O	toxdrugo	Written name of the drug(s) found if "6=other" is chosen for tox drugs 1, 2, 3, or all. See also TOX_DRUG_1 through TOX_DRUG_6.
ED Data	F4.1	Elapsed Time (minutes) in Radiology	RAD_TIME	radmin	Minutes spent in radiology. Valid values are from 000 to 999.
ED Data	F4.2	Missed Cervical Spine Injury	MISSED_CS	misdxc	Indicates whether there was a c-spine injury diagnosis at hospital discharge that was not indicated in the admission (ED) diagnoses.  1 = Yes (that is, the ED did not diagnose a c-spine injury that was diagnosed later in the patient's stay.) 2 = No (that is, a c-spine injury was diagnosed in the ED)  '/' Not Applicable= This patient did not have a c-spine injury noted in the discharge diagnosis.  'U' Unknown should not be used in this field.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
ED Data	F4.2	No Operation for GSW to Abdomen	GUN_NONOP	gunnoop	Indicates whether the patient received non-operative management for a gunshot wound to the abdomen.  1 = Yes (received nonoperative management) 2 = No (received surgery)  Enter '/' Not Applicable if there was no gunshot wound to abdomen.
ED Data	F4.2	No Operation for SW to abdomen	STAB_NONOP	stabnop	Indicates whether the patient received non-operative management for a stab wound to the abdomen.  1 = Yes 2 = No  Enter '/' Not Applicable if no stab wound to abdomen.
ED Data	F4.2	Pre-existing Condition 1	PAST_MED_1	prexist1	<b>Pre-existing condition 1 of up to 6. Refers to conditions evident prior to this hospital admission and documented in the medical record.</b> <b>00 = None</b> <b>01 = Gastrointestinal (GI) disease</b> <b>02 = Cardiac (such as, history of angina, significant arrhythmias, coronary artery bypass graft, angioplasty, stent placement, myocardial infarction, coronary artery disease, congestive heart failure, valvular disease, cardiomyopathy, etc.)</b> <b>03 = Collagen/Vascular disease (non-cardiac)</b> <b>04 = Obesity</b> <b>05 = Drug Abuse</b> <b>06 = Tobacco Use</b> <b>07 = Seizure disorder</b> <b>08 = Organic Brain Syndrome (e.g. Alzheimer's Disease, Dementia)</b> <b>09 = Diabetes</b> <b>10 = Respiratory (such as chronic restrictive or obstructive pulmonary disease, pulmonary hypertension, etc.)</b> <b>11 = Cancer</b> <b>12 = Cirrhosis (or portal hypertension, hepatic failure, encephalopathy, or coma.)</b> <b>13 = Alcohol (ETOH) Abuse</b> <b>14 = Previous Trauma</b> <b>15 = Cerebral Vascular Accident (CVA or stroke)</b> <b>16 = Hypertension</b> <b>17 = Psychiatric</b> <b>99 = Other</b> <b>100 = DVT (12/17/2009)</b> <b>101 = Pulmonary Embolism(12/17/2009)</b> <b>102 = Chronic Renal Failure or Insufficiency(12/17/2009)</b> <b>103 = Infection or Sepsis(12/17/2009)</b> <b>104 = Arthritis(12/17/2009)</b> <b>105 = Osteoporosis(12/17/2009)</b> <b>106 = Parkinson's Disease (12/17/2009)</b> <b>107 = Polio (12/17/2009)</b> <b>108 = Pressure Sore (12/17/2009)</b>
ED Data	F4.2	Pre-existing Condition 2	PAST_MED_2	prexist2	Pre-existing condition 2. See Pre-existing Condition 1 for definition and values.

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ED Data	F4.2	Pre-existing Condition 3	PAST_MED_3	prexist3	Pre-existing condition 3. See Pre-existing Condition 1 for definition and values.
ED Data	F4.2	Pre-existing Condition 4	PAST_MED_4	prexist4	Pre-existing condition 4. See Pre-existing Condition 1 for definition and values.
ED Data	F4.2	Pre-existing Condition 5	PAST_MED_5	prexist5	Pre-existing condition 5. See Pre-existing Condition 1 for definition and values.
ED Data	F4.2	Pre-existing Condition 6	PAST_MED_6	prexist6	Pre-existing condition 6. See Pre-existing Condition 1 for definition and values.
ED Data	F4.2	Pre-existing Condition Other	PAST_MED_O	prexisto	Description of pre-existing condition(s) not included in the list of values for pre-existing conditions 1 through 6.
ED Data	F4.2	Eye Opening Sub-score of GCS in ED	EYE_OPNG_E	eyeopned	Sub-score of the Glasgow Coma Score (GCS) indicating patient <i>best</i> eye opening <i>in the ED</i> . It is added to two other sub-scores to obtain the GCS in the ED. See also ED GCS (GCS_A). 1 = None 2 = To Pain 3 = To Voice 4 = Spontaneous U = Unknown
ED Data	F4.2	Verbal Response Sub-score of GCS in ED	VER_RESP_E	vrbrsped	Sub-score of the Glasgow Coma Score (GCS) indicating patient <i>best</i> verbal response <i>in the ED</i> . It is added to two other sub-scores to obtain the GCS in the ED. See also ED GCS (GCS_A). 1 = None, intubated, or pharmacologically paralyzed 2 = Incomprehensible Sounds (under 2 yrs, Agitated/Restless) 3 = Inappropriate Words (under 2 yrs., Persistent Crying) 4 = Confused 5 = Oriented U = Unknown NOTE: If the patient was intubated or pharmacologically paralyzed enter 1 AND be sure to indicate the patient's status (intubated and/or paralyzed) below.
ED Data	F4.2	Motor Response Sub-score of GCS in ED	MOT_RESP_E	motrsped	Sub-score of the Glasgow Coma Score (GCS) indicating the patient's <i>best</i> motor response <i>in the ED</i> . It is added to two other sub-scores to obtain the ED GCS. See also discharge-GCS (GCS_A). 1 = None, or pharmacologically paralyzed 2 = Abnormal Extension 3 = Abnormal Flexion 4 = Withdraws to Pain 5 = Localizes Pain 6 = Obeys Commands U = Unknown Note: If the patient was pharmacologically paralyzed enter 1 AND be sure to indicate the patients paralyzed status below.
ED Data	F4.2	GCS in ED	GCS_A	gcsed	Glasgow Coma Score (GCS) is a widely used index that assesses the degree of coma in patients with craniocerebral injuries. The ED GCS is calculated by adding the sub-scores of three behavioral responses in the emergency department: eye opening (see EYE_OPNG_E), best verbal response (see VER_RESP_E), and best motor response (see MOT_RESP_E).  Values range from 3 to 15.
ED Data	F4.2	Pediatric Trauma Score (PTS)	PTS_A	ptseda	Pediatric Trauma Score in the emergency department. The Pediatric Trauma Score (PTS) combines physiologic and anatomic measures to assess the severity of childhood injury. One of three severity assignments is made for

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		on Admission			<p>each of the six component variables: Size, Airway, Systolic BP, Central Nervous System, Skeletal, and Cutaneous. The associated point values are <i>summed</i> to yield the PTS. Value range from –6 (worst) to 12 (best). Specify ‘I’ for non-pediatric pts. or ‘N’?</p> <p><b>Size:</b>                      -1 = &lt;10 kg (20 lbs.)                      1 = 10 - 20 kg (20 lbs. to 40 lbs.)                      2 = &gt;20 kg (40 lbs.)</p> <p><b>Airway</b>                      -1 = Unmaintainable                      1 = Maintainable                      2 = Normal</p> <p><b>Systolic BP</b>                      -1 = &lt;50 mm Hg                      1 = 50-90 mm Hg                      2 = &gt;90 mm Hg</p> <p><b>Central Nervous System</b>                      -1 = Coma                      1 = Obtunded                      2 = Awake</p> <p><b>Skeletal</b>                      -1 = Open fracture or multiple fractures                      1 = Closed fracture                      2 = None</p> <p><b>Cutaneous</b>                      -1 = Major/penetrating                      1 = Minor                      2 = None</p>
ED Data	F4.2	GCS Documented Every Hour	GCS_DOC	gcsdochr	<p>Indicates whether the Glasgow Coma Scale (GCS) was documented every hour.</p> <p>1 = Yes                      2 = No</p>
ED Data	F4.2	Intubated at the Time of First GCS	ED_INTUB	intubgcs	<p>Indicates whether the patient was intubated at the time of the Glasgow Coma Score (GCS) assessment recorded above.</p> <p>1 = Yes                      2 = No                      ‘U’ Unknown (<i>Use if Intubation was not indicated</i>)                      ‘/’ Not applicable</p> <p><b>Important Note:</b> If a patient is intubated, enter “1” for the GCS Verbal component recorded above. A GCS score cannot be accurately determined since the true verbal sub-score cannot be ascertained.</p>
ED Data	F4.2	Paralyzed at the Time of First GCS	ED_PRLYZ	prlyzed	<p>Indicates whether the patient was pharmacologically paralyzed at the time of the first Glasgow Coma Score (GCS) assessment recorded above.</p> <p>1 = Yes                      2 = No                      ‘U’ Unknown (<i>Use if Intubation is not indicated</i>)                      ‘/’ Not applicable</p> <p><b>Important Note:</b> If a patient is pharmacologically paralyzed, enter “1” for the GCS Verbal and Motor components recorded above. A GCS score cannot be accurately determined since the sub-scores cannot be ascertained.</p>
ED Data	F4.3	Transfusion Within 24	ED_TRANSF	bloodxed	<p>Indicates whether the patient received a transfusion of platelets or fresh frozen plasma within 24 hours after arrival at this facility’s emergency department, after</p>

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Hours of ED Arrival			having received <8 units of packed red blood cells or whole blood. 1 = Yes indicates the patient received fewer than 8 units of packed red cells or 8 units of whole blood (or a combination of these) then received either platelets or fresh frozen plasma—all within his first 24 hours after ED arrival at this facility. 2 = No indicates the patient did not receive fewer than 8 units of packed red cells or 8 units (or combination) of whole blood then received either platelets or fresh frozen plasma within the first 24 hours after arrival in the ED.
ED Data	F4.3	Pulse Rate (First ED)	PULSE_E	pulseed	<b>First pulse rate in beats per minute.</b>
ED Data	F4.3	Respiratory Rate Controlled	ASSI_ONV_E		<b>Indicates whether the patient's Respiratory Rate is controlled? Unknown and Inappropriate are not valid responses for this data element.</b>  1 = Yes 2 = No
ED Data	F4.3	Controlled Respiratory Rate	VENT_RAT_E	crsprat	The controlled rate of respiration if the respiratory rate is controlled. Enter Unknown if the respiration rate is controlled but the rate is not shown in the patient chart.
ED Data	F4.3	Respiratory Rate (First Spontaneous in ED)	RESP_RAT_E	resprted	The <i>first</i> number of unassisted respirations by the patient per minute. Does not include bagged or controlled ventilatory rates. If the patient's <i>unassisted</i> respiratory rate could not be recorded, enter “U” for unknown.
ED Data	F4.3	Systolic BP (First in ED)	SYS_BP_E	sysbped	First Systolic Blood Pressure (BP) in ED measured in mm Hg.
ED Data	F4.3	Systolic BP (Lowest in ED)	LSYS_BP_E	lsysbped	Lowest systolic blood pressure in ED measured in mm Hg.
ED Data	F4.3	Hematocrit Level	HCT (12/17/2009)	hct	First Hematocrit level (percentage) for the patient. The percent of red blood cells to the blood volume. Use ‘/’ Not Applicable for pts. that do not have blood work done.(i.e. Direct Admits, Peds Pts. and Transfers)
ED Data	F4.3	Recorded Temperature	TEMP_E (12/17/2009)	temped	First temperature recorded by the health care professional. May be recorded in Fahrenheit or Centigrade. The unit must also be entered. See TEMP_FC_E
ED Data	F4.3	Unit of Recorded Temperature	TEMP_FC_E	tempunit	<b>Unit</b> of first recorded temperature. See TEMP_E. F = Fahrenheit C = Centigrade
ED Data	F4.3	Vital Signs Recorded Every Hour	VITALS_DOC	vitaldoc	Indicates whether the vital signs were recorded every hour.  1 = Yes 2 = No
ED Data	F4.3	Revised Trauma Score (RTS) At ED	RTS_A	rtsed	<b>Note:</b> This field is calculated by Collector if all the necessary data elements are entered. The Revised Trauma Score (RTS) is a physiologic severity score widely used in pre-hospital triage and based on measurements of vital signs (systolic blood pressure (SBP), respiratory rate (RR)) and a measurement of consciousness (Glasgow Coma Score (GCS)). The RTS provides a more accurate estimation of injury severity for patients with serious head injuries, and supplies more reliable predictions of outcome than its predecessor -- the Trauma Score.

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					<p>The ED RTS (RTS<sub>ed</sub>) is automatically calculated by Collector if all data needed to compute it are known, as follows:</p> $RTS_{ed} = 0.9368 (GCS_c) + 0.7326 (SBP_c) + 0.2908 (RR_c), \text{ where the subscript c refers to coded value.}$ <table style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th>GCS<sub>ed</sub></th> <th>SBP<sub>ed</sub></th> <th>RR<sub>ed</sub></th> <th>Coded Value</th> </tr> </thead> <tbody> <tr> <td>13 – 15</td> <td>&gt;89</td> <td>10 – 29</td> <td>4</td> </tr> <tr> <td>9 – 12</td> <td>76 - 89</td> <td>&gt;29</td> <td>3</td> </tr> <tr> <td>6 - 8</td> <td>50 - 75</td> <td>6 - 9</td> <td>2</td> </tr> <tr> <td>4 - 5</td> <td>1 - 49</td> <td>1 - 5</td> <td>1</td> </tr> <tr> <td>3</td> <td>0</td> <td>0</td> <td>0</td> </tr> </tbody> </table> <p>See also GCS_A, SYS_BP_E, and RESP_RAT_E.</p>	GCS <sub>ed</sub>	SBP <sub>ed</sub>	RR <sub>ed</sub>	Coded Value	13 – 15	>89	10 – 29	4	9 – 12	76 - 89	>29	3	6 - 8	50 - 75	6 - 9	2	4 - 5	1 - 49	1 - 5	1	3	0	0	0
GCS <sub>ed</sub>	SBP <sub>ed</sub>	RR <sub>ed</sub>	Coded Value																										
13 – 15	>89	10 – 29	4																										
9 – 12	76 - 89	>29	3																										
6 - 8	50 - 75	6 - 9	2																										
4 - 5	1 - 49	1 - 5	1																										
3	0	0	0																										
ED Data	F4.3	Care Issue 1	ISSUE_E_1	issue_e_1	<p>1<sup>st</sup> of up to 3 care issues. Broad categories or specific events that may warrant review. Used to note a question or concern surrounding, for example, the patient’s transport to the most appropriate facility, the call to a specialist, the OR’s acceptance, etc. that could serve as an opportunity for further research or improvement.</p> <p>00 = None</p> <p>01 = Transport to Appropriate Facility (<i>under triage, or over triage; e.g., a Step 2 patient delivered to a Level IV facility despite the injury occurring within 30 minutes of a capable and available Level III facility</i>)</p> <p>02 = Emergency Physician Availability (<i>delay in placing call, or arrival of physician</i>)</p> <p>03 = Trauma Team Activation (<i>e.g., under triage = patient eligible for a trauma team activation but does not receive one; or, over triage = patient not eligible for a trauma team activation, but receives one</i>)</p> <p>04 = Trauma Team Arrival (<i>delay in arrival, or delay in placing call to team, or incomplete response of team</i>)</p> <p>05 = General Surgeon (<i>delay in placing call, or uncertainty which surgeon should be called</i>)</p> <p>06 = General Surgeon Arrival (<i>delay in arrival</i>)</p> <p>07 = Specialist Call (<i>delay in placing call, or uncertainty which individual should be called</i>)</p> <p>08 = Specialist Arrival (<i>delay in arrival</i>)</p> <p>09 = Transfer Out to Appropriate Facility (<i>difficulty in determining most appropriate facility or physician, or obtaining verbal acceptance of transfer, etc.</i>)</p> <p>10 = Delay in Transfer Out (<i>delay in decision to transfer out, delay in prehospital response to ED for transfer, poor weather conditions prolonging departure, etc.</i>)</p> <p>11 = Met Transfer Criteria, Not Transferred Out (<i>patient likely to need resources unavailable at current hospital, yet not transferred to other acute care facility, etc.</i>)</p> <p>12 = Blood Availability</p> <p>13 = CT Scan Availability</p> <p>14 = MRI Availability</p> <p>15 = Diagnostic Test Results Availability</p> <p>16 = Equipment Malfunction (<i>equipment needed for patient care not operating adequately</i>)</p> <p>17 = Equipment Not Readily Available (<i>difficulty locating equipment, or needed</i>)</p>																								

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					<p><i>equipment already in use)</i></p> <p>18 = Indicated Procedure Not Performed            19 = Indicated Diagnostic Test Not Ordered or Not Performed            20 = OR Acceptance            21 = Delay of Pain Medication            23 = Critical Care Bed Not Available            24 = Ward Bed Not Available            25 = Missed Injury (<i>significant injury documented on discharge from hospital that was not found during ED stay</i>)            26 = Unrecognized or Untreated Hypothermia            27 = Unrecognized or Untreated Hypovolemia            28 = Aspiration Due to C-Spine Restraints            31 = Cardiac Arrest Outside of ED (ie, CT)            32 = Chest Tube Displacement            33 = Intubation, Esophageal            34 = Intubation, Mainstem            35 = Intubation, Tube Displacement            36 = Medication Not Available            37 = Neurovascular Changes After Splinting            38 = Other            39 = Over Triage (12/17/2009)            40 = Under Triage (12/17/2009)            If '38, Other' is chosen, specify the care issue in the NOTES_CARE field.</p>
ED Data	F4.3	Care Issue 2	ISSUE_E_2	issue_e_2	Second of up to 3 ED care issues. See definition and values for ISSUE_E_1.
ED Data	F4.3	Care Issue 3	ISSUE_E_3	issue_e_3	Third of up to 3 ED care issues. See definition and values for ISSUE_E_1.
ED Data	F4.3	Care Issue Memo	NOTES_CARE		<p>Memo field to specify additional care issues not captured in ED Care Issue 1-3 fields.</p> <p>A care issue is defined as a condition arising <i>after</i> arrival in the emergency department which occurs as a result of the patient's treatment or events during the hospitalization, and requires additional medical treatment or affects the patient's length of stay. Care issues must be documented in the patient record by an attending or consulting <i>physician</i>. Suspected exacerbation of a pre-morbid condition should not be coded as a complication <i>unless specified by an attending or consulting physician</i>.</p>
ED Data	F4.4	Emergency Department Physician	ED_MD	edmd	User-Defined code for the ED Physician. Values vary according to facility.
ED Data	F4.4	Time ED Physician Called	ED_MD_C	edmdtimc	<p>Time Emergency Department (ED) Physician was requested to see the patient.</p> <p>Note: If the physician was in the ED at the same time the patient arrived and <i>immediately</i> saw the patient, then the ED arrival time and time ED physician called could be the same. However, do not automatically enter the EDA arrival time here.</p>
ED Data	F4.4	Hour ED Physician Called	ED_MD_CH	edmdhrc	Hour Emergency Department (ED) Physician was requested to see the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes ED Physician	ED_MD_CM	edmdminc	Minutes Emergency Department (ED) Physician was requested to see the patient. Valid values are from 0 to 59.

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		Called			
ED Data	F4.4	Time ED Physician Arrived and Available for Care	ED_MD_A	edmdtima	Time Emergency Department (ED) Physician actually reached the patient.
ED Data	F4.4	Hour ED Physician Arrived and Available for Care	ED_MD_AH	edmdhra	Hour Emergency Department (ED) Physician actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes ED Physician Arrived and Available for Care	ED_MD_AM	edmdmina	Minutes Emergency Department (ED) Physician actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.4	Trauma/General Surgeon	TR_RES_MD	traumamd	User-Defined code for the trauma/general surgeon. Values vary according to facility.
ED Data	F4.4	Time Trauma/General Surgeon Called	TR_RES_C	trmatimc	Time Trauma/General Surgeon was requested to see the patient.
ED Data	F4.4	Hour Trauma/General Surgeon Called	TR_RES_CH	trmahrc	Hour Trauma/General Surgeon was requested to see the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Trauma/General Surgeon Called	TR_RES_CM	trmaminc	Minutes Trauma/General Surgeon was requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time Trauma/General Surgeon Arrived and Available for Care	TR_RES_A	trmatima	Time Trauma/General Surgeon actually reached the patient.
ED Data	F4.4	Hour Trauma/General Surgeon Arrived and Available for Care	TR_RES_AH	trmahra	Hour Trauma/General Surgeon actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Trauma/General Surgeon Arrived and	TR_RES_AM	trmamina	Minutes Trauma/General Surgeon actually reached the patient. Valid values are from 0 to 59.

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Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		<b>Available for Care</b>			
ED Data	F4.4	Anesthesiologist	ANES_MD	anesmd	User-Defined code for the Anesthesiologist. Values vary depending on facility.
ED Data	F4.4	Time Anesthesiologist Called	ANES_C	anestimc	Time Anesthesiologist was requested to see the patient.
ED Data	F4.4	Hour Anesthesiologist Called	ANES_CH	aneshrc	Hour Anesthesiologist was requested to see the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Anesthesiologist Called	ANES_CM	anesminc	Minutes Anesthesiologist was requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time Anesthesiologist Arrived	ANES_A	anestima	Time Anesthesiologist actually reached the patient.
ED Data	F4.4	Hour Anesthesiologist Arrived	ANES_AH	aneshra	Hour Anesthesiologist actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Anesthesiologist Arrived	ANES_AM	anesmina	Minutes Anesthesiologist actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.4	Neurosurgeon	NEURO_MD	neuromd	User-Defined code for Neurosurgeon. Values vary depending on facility.
ED Data	F4.4	Time Neurosurgeon Called	NEURO_C	neurtimc	Time Emergency Department (ED) Physician was requested to see the patient.
ED Data	F4.4	Hour Neurosurgeon Called	NEURO_CH	neurhrc	Hour Neurosurgeon was requested to see the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Neurosurgeon Called	NEURO_CM	neurminc	Minutes portion of time Neurosurgeon was requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time Neurosurgeon Arrived	NEURO_A	neurtima	Time Neurosurgeon actually reached the patient.
ED Data	F4.4	Hour Neurosurgeon Arrived	NEURO_AH	neurhra	Hour Neurosurgeon actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Neurosurgeon Arrived	NEURO_AM	neurmina	Minutes portion of time Neurosurgeon actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.4	Orthopedic Surgeon	ORTHO_MD	orthomd	User-Defined code for Orthopedic Surgeon. Values vary depending on facility.
ED Data	F4.4	Time Orthopedic Surgeon Called	ORTHO_C	orthtimc	Time Orthopedic Surgeon was requested to see the patient.
ED Data	F4.4	Hour Orthopedic Surgeon Called	ORTHO_CH	orthhrc	Hour Orthopedic Surgeon was requested to see the patient. Valid values are from 0 to 23.

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Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
ED Data	F4.4	Minutes Orthopedic Surgeon Called	ORTHO_CM	orthminc	Minutes Orthopedic Surgeon was requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time Orthopedic Surgeon Arrived	ORTHO_A	orthtima	Time Orthopedic Surgeon actually reached the patient.
ED Data	F4.4	Hour Orthopedic Surgeon Arrived	ORTHO_AH	orthhra	Hour Orthopedic Surgeon actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Orthopedic Surgeon Arrived	ORTHO_AM	orthmina	Minutes Orthopedic Surgeon actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.4	Pediatric Surgeon	PEDIA_MD	pediamd	User-Defined code for Pediatric Surgeon. Values vary depending on facility.
ED Data	F4.4	Time Pediatric Surgeon Called	PEDIA_C	pedtimec	Time Pediatric Surgeon was requested to see the patient.
ED Data	F4.4	Hour Pediatric Surgeon Called	PEDIA_CH	pedhrc	Hour Pediatric Surgeon was requested to see the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Pediatric Surgeon Called	PEDIA_CM	pedminc	Minutes Pediatric Surgeon was requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time Pediatric Surgeon Arrived	PEDIA_A	pedtimea	Time Pediatric Surgeon actually reached the patient.
ED Data	F4.4	Hour Pediatric Surgeon Arrived	PEDIA_AH	pedhra	Hour Pediatric Surgeon actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Pediatric Surgeon Arrived	PEDIA_AM	pedmina	Minutes Pediatric Surgeon actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.4	Consulting Physician	CNSLT_MD	cnsltmd	User-Defined code for the Consulting Physician. Values vary according to facility.
ED Data	F4.4	Time Consulting Physician Called	CNSLT_C	cnsltimc	Time Consulting Physician was requested to see the patient.
ED Data	F4.4	Hour Consulting Physician Called	CNSLT_CH	cnslhrc	Hour Consulting Physician was requested to see the patient. Valid values are from 0 to 23.

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
ED Data	F4.4	Minutes Consulting Physician Called	CNSLT_CM	cnslminc	Minutes Consulting Physician was requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time Consulting Physician Arrived	CNSLT_A	cnsltima	Time Consulting Physician actually reached the patient.
ED Data	F4.4	Hour Consulting Physician Arrived	CNSLT_AH	cnslhra	Hour Consulting Physician actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes Consulting Physician Arrived	CNSLT_AM	cnslmina	Minutes Consulting Physician actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.4	ENT/Plastic Surgeon	ENT_MD	entmd	User-Defined code for ENT/Plastic Surgeon. Values vary depending on facility.
ED Data	F4.4	Time ENT/Plastic Surgeon Called	ENT_C	enttimc	Time ENT/Plastic Surgeon requested to see the patient.
ED Data	F4.4	Hour ENT/Plastic Surgeon Called	ENT_CH	enthrc	Hour portion of time ENT/Plastic Surgeon requested to see the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes ENT/Plastic Surgeon Called	ENT_CM	entminc	Minutes portion of time ENT/Plastic Surgeon requested to see the patient. Valid values are from 0 to 59.
ED Data	F4.4	Time ENT/Plastic Surgeon Arrived	ENT_A	enttima	Time ENT/Plastic Surgeon actually reached the patient.
ED Data	F4.4	Hour ENT/Plastic Surgeon Arrived	ENT_AH	enthra	Hour portion of time ENT/Plastic Surgeon actually reached the patient. Valid values are from 0 to 23.
ED Data	F4.4	Minutes ENT/Plastic Surgeon Arrived	ENT_AM	entmina	Minutes portion of time ENT/Plastic Surgeon actually reached the patient. Valid values are from 0 to 59.
ED Data	F4.5	<b>Emergency Department Discharge (EDD) Date</b>	<b>EDD_DATE</b>	edddate	<b>Date that the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor, transferred to another facility, discharged, or died. If the patient was a direct admit to the hospital, the date will default to the EDA date so the ED length of stay will be zero.</b>
ED Data	F4.5	<b>Emergency Department Discharge (EDD) Month</b>	<b>EDD_DATE_M</b>	eddm	<b>Month that the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor, transferred to another facility, discharged, or died.</b>

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
ED Data	F4.5	Emergency Department Discharge (EDD) Day	EDD_DATE_D	eddday	Day that the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor, transferred to another facility, discharged, or died.
ED Data	F4.5	Emergency Department Discharge (EDD) Year	EDD_DATE_Y	eddyr	Year that the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor, transferred to another facility, discharged, or died.
ED Data	F4.5	Emergency Department Discharge (EDD) Time	EDD_TIME	edddtime	Time that the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor, transferred to another facility, discharged, or died. Initial radiological work-up (CT scan X-rays, angiography, etc.) is included in ED time. If the patient was a direct admit to the hospital, the time will default to the EDA time so the ED length of stay will be zero.
ED Data	F4.5	Emergency Department Discharge (EDD) Hour	EDD_TIME_H	edddhr	Hour portion of the time the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor; transferred to another facility, discharged, or died. Initial radiological work-up (CT scan X-rays, angiography, etc.) is included in ED time. Valid values range from 0 to 23
ED Data	F4.5	Emergency Department Discharge (EDD) Minutes	EDD_TIME_M	edddmin	Minutes portion of the time the patient left the ED resuscitation area for final disposition, without returning to the ED, and was either admitted to OR, ICU, or floor, transferred to another facility, discharged, or died. Initial radiological work-up (CT scan X-rays, angiography, etc.) is included in ED time. Valid values are from 0 to 59.
ED Data	F4.5	Emergency Department Discharge Disposition	EDD_DISP	edddisp	<p>Emergency Department Discharge Disposition.</p> <p>01 = OR (Operating Room)</p> <p>02 = Ward or Floor; <i>providing routine nursing care and staffing levels</i></p> <p>03 = Other Acute Care Facility (<i>transfers to other hospitals; when used, the “receiving hospital ID” must also be entered. See REC_FAC_ID.</i>)</p> <p>04 = ICU/CCU</p> <p>05 = Other In-house (Excludes pt. admitted to the 02-Ward or 11-Peds as an outpatient.)</p> <p>06 = Home</p> <p>07 = Skilled Nursing Facility (SNF) - External</p> <p>08 = Intermediate Care Facility (ICF)</p> <p>09 = Expired (Died in the ED)</p> <p>10 = Other (Out of Facility, POV Transfers) <i>This field is only used when the patient is transferred to somewhere other than listed above. This field should rarely be used. When used, EDD_DISP_O should also be entered.</i></p> <p>11 = Pediatric Ward</p> <p>12 = Pediatric ICU</p> <p>13 = Progressive Care Unit (eg, Stepdown, Telemetry, Monitored Unit)</p> <p>14 = Short Stay Unit (eg, Ambulatory Treatment Unit, Observation Unit, &lt;24 Hour Unit) – If patient is subsequently admitted, use 05=Other In-House</p> <p>15 = Inpatient Psychiatry</p> <p>16 = Jail, Police Custody</p> <p>17 = In House SNF (Skilled Nursing Facility)</p> <p>18 = Foster Care</p> <p>Note: A patient is “transferred” (choice 3) to another hospital if sent by ambulance. A patient sent by private vehicle or other means is not a “transfer”</p>

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					for the purposes of the Trauma Registry. However, if you are including these records in your registry, please code the ED disposition as 10=Other and not 3=Other ACF, and specify POV Transfer in the Emergency Department Other Discharge Disposition (EDD_DISP_O) field.
ED Data	F4.5	Emergency Department Other Discharge Disposition	EDD_DISP_O	eddispo	Text description of the ED discharge disposition if ‘10 = Other’ is chosen. See EDD_DISP.
EDData	F4.5	Decision To Transfer Made By	EDD_X_BY	edd_x_by	The Emergency Department staff who initiated the patient transfer. 1 = ED Physician 2 = ED Mid Level Provider 3 = General Surgeon 4 = Neurosurgeon 5 = Orthopedic Surgeon 6 = Pediatric Surgeon 7 = Pediatrician 8 = Other ‘U’ = Unknown ‘/’ = Not Applicable
EDData	F4.5	Decision To Transfer Made By-If Other	EDD_X_BY_O	edd_x_by_o	Text description of the title of physician that determined the Discharge Disposition of Patient., If #8, Other is selected.
ED Data	F4.5	Receiving Facility ID if Transferred from ED	REC_FAC_ID	rechid	<b>ID of the hospital where the patient went if the patient was transferred from the ED to another hospital. See <a href="#">REF ID</a> for defined values.</b> ‘U’ Unknown ‘/’ <b>Not applicable</b>
ED Data	F4.5	Previously Seen in ED	SEEN_PREV	admit72h	Indicates whether a patient was evaluated <i>and discharged</i> from an ED (i.e. <i>not admitted</i> to the hospital) who subsequently returned and was admitted to the hospital within 72 hours of initial evaluation. 1 = Yes 2 = No
ED Data	F4.5	Admitting Service	ADMIT_ED	admitsvc	<b>Admitting Service</b> <b>01 = Trauma</b> <b>02 = Neurosurgery</b> <b>03 = Orthopedic Surgery</b> <b>04 = ENT/Plastic Surgery</b> <b>05 = Thoracic Surgery</b> <b>06 = Pediatric Surgery</b> <b>07 = Pediatrics</b> <b>08 = Other Surgical Service</b> <b>09 = Other Non-surgical Service</b> <b>100 = Intensivist (12/17/2009)</b> <b>101= Hospitalist-Medical (12/17/2009)</b> <b>102 = Hospitalist-Surgical (12/17/2009)</b> <b>103 = Internist (12/17/2009)</b>
ED Data	F4.5	Other Admitting Service	ADMIT_ED_O	admitso	Text name and/or description of admitting service if not listed in ADMIT_ED.
ED Data	F4.5	Attending M.D. in ED	ED_ATT_MD	edattng	ID of Attending/Admitting Physician. This is a user-defined field and varies between hospitals.

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ED Data	F4.5	Left ED Intubated	ART_AIRWAY	intubed	Indicates whether the patient left the ED intubated. If intubation was not required, enter "I". 1 = Yes 2 = No
ED Data	F4.5	Laparotomy Performed Within 2 Hours if Required	NO_LAPAROT	lapar2hr	Indicates that a laparotomy was performed within 2 hours of EDA. If a laparotomy was not required, enter "I". 1 = Yes 2 = No
ED Data	F4.5	Procedure Code of Laparotomy	LAP_PROC	lappcode	The operative procedure code of the type of laparotomy that was performed. If a laparotomy was not required, enter '/' Not Applicable.
ED Data	F4.6	ED Memo	NOTES_ED		Ten lines designated for a description of patient's ED information.
Opers./Pr ocs.	F5.1	Surgery Performed	SURG_DONE	surgprfm	Indicates whether the patient had surgery.  1 = Yes 2 = No
Opers./Pr ocs.	F5.1	Operation 1 Arrival Date	OP1A_DATE	op1adate	Date the patient arrived in the surgical suite for operation 1.
Opers./Pr ocs.	F5.1	Operation 1 Arrival Month	OP1A_D_M	op1amo	Month the patient arrived in the surgical suite for operation 1. Valid values are from 1 to 12.
Opers./Pr ocs.	F5.1	Operation 1 Arrival Day	OP1A_D_D	op1aday	Day the patient arrived in the surgical suite for operation 1. Valid values are from 1 to 31.
Opers./Pr ocs.	F5.1	Operation 1 Arrival Year	OP1A_D_Y	op1ayr	Year the patient arrived in the surgical suite for operation 1. Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.1	Operation 1 Arrival Time	OP1A_TIME	op1atime	Time that the patient arrived in the surgical suite for operation 1.
Opers./Pr ocs.	F5.1	Operation 1 Hour of Arrival Time	OP1A_T_H	op1ahr	Hour that the patient arrived in the surgical suite for operation 1. Valid values are from 0 to 23.
Opers./Pr ocs.	F5.1	Operation 1 Minutes of Arrival Time	OP1A_T_M	op1amin	Minutes portion of time that the patient arrived in the surgical suite for operation 1. Valid values are from 0 to 59.
Opers./Pr ocs.	F5.1	Operation 1 Start Date	OP1S_DATE	op1sdate	Date operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.1	Operation 1 Start Month	OP1S_D_M	op1smo	Month operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Opers./Pr ocs.	F5.1	Operation 1 Start Day	OP1S_D_D	op1sday	Day that operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Opers./Pr ocs.	F5.1	Operation 1 Start Year	OP1S_D_Y	op1syr	Year operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.1	Operation 1 Start Time	OP1S_TIME	op1stime	Time operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.1	Operation 1 Hour of	OP1S_T_H	op1shr	Hour operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Start Time			Valid values are from 0 and 23.
Opers./Pr ocs.	F5.1	Operation 1 Minutes of Start Time	OP1S_T_M	op1smin	Minutes portion of the time operation 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 to 59.
Opers./Pr ocs.	F5.1	Operation 1 End Date	OP1E_DATE	op1edate	Date operation 1 was finished.
Opers./Pr ocs.	F5.1	Operation 1 End Month	OP1E_D_M	op1emo	Month operation 1 was finished. Valid values are from 1 to 12.
Opers./Pr ocs.	F5.1	Operation 1 End Day	OP1E_D_D	op1eday	Day operation 1 was finished. Valid values are from 1 to 31.
Opers./Pr ocs.	F5.1	Operation 1 End Year	OP1E_D_Y	op1eyr	Year operation 1 was finished. Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.1	Operation 1 End Time	OP1E_TIME	op1etime	Time operation 1 was finished.
Opers./Pr ocs.	F5.1	Operation 1 Hour of End Time	OP1E_T_H	op1ehr	Hour operation 1 was finished. Valid values are from 0 to 23.
Opers./Pr ocs.	F5.1	Operation 1 Minutes of End Time	OP1E_T_M	op1emin	Minutes portion of time operation 1 was finished. Valid values are from 0 to 59.
Opers./Pr ocs.	F5.1	Operation 1 Surgeon ID	OP1_SURG	op1_surg1	User-defined ID number of the primary operating surgeon for operation 1. Values vary by hospital.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 1	OP1_PROC1	op1pro1	1 <sup>st</sup> of up to 10 operative procedures for operation 1, using standard ICD-9-CM Procedure coding – <a href="#">Appendix IV</a>
Opers./Pr ocs.	F5.1	Operation 1 Procedure 2	OP1_PROC2	op1_surg2	2 <sup>nd</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 3	OP1_PROC3	op1_surg3	3 <sup>rd</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 4	OP1_PROC4	op1_surg4	4 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 5	OP1_PROC5	op1_surg5	5 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 6	OP1_PROC6	op1_surg6	6 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 7	OP1_PROC7	op1_surg7	7 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 8	OP1_PROC8	op1_surg8	8 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 9	OP1_PROC9	op1_surg9	9 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Procedure 10	OP1_PROC10	op1_surg10	10 <sup>th</sup> operative procedure for operation 1, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.1	Operation 1 Disposition	OP1_DISP	op1disp	Operation 1 disposition. Refers to the disposition of the patient following post-anesthesia recovery (PAR).  01 = OR 02 = Ward/Floor 04 = ICU/CCU 05 = Short Stay/Discharged, (e.g. ambulatory treatment unit, observation unit, <24 hour unit)

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					06 = Expired (Died) 07 = Other In-House 08 = Other (Out of Facility) 09 = Other Acute Care Facility 10 = Peds 11 = Peds, ICU 12 = Progressive Care Unit (e.g., stepdown, telemetry, monitored unit) 13 = Home 14 = Jail, Police Custody ‘U’ Unknown ‘/’ Not applicable
Opers./Pr ocs.	F5.2	Operation 2 Arrival Date	OP2A_DATE	op2adate	Date the patient arrived in the surgical suite for operation 2.
Opers./Pr ocs.	F5.2	Operation 2 Arrival Month	OP2A_D_M	op2amo	Month the patient arrived in the surgical suite for operation 2. Valid values are from 1 to 12.
Opers./Pr ocs.	F5.2	Operation 2 Arrival Day	OP2A_D_D	op2aday	Day the patient arrived in the surgical suite for operation 2. Valid values are from 1 to 31.
Opers./Pr ocs.	F5.2	Operation 2 Arrival Year	OP2A_D_Y	op2ayr	Year the patient arrived in the surgical suite for operation 2. Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.2	Operation 2 Arrival Time	OP2A_TIME	op2atime	Time that the patient arrived in the surgical suite for operation 2.
Opers./Pr ocs.	F5.2	Operation 2 Hour of Arrival Time	OP2A_T_H	op2ahr	Hour that the patient arrived in the surgical suite for operation 2. Valid values are from 0 to 23.
Opers./Pr ocs.	F5.2	Operation 2 Minutes of Arrival Time	OP2A_T_M	op2amin	Minutes portion of time that the patient arrived in the surgical suite for operation 2. Valid values are from 0 to 59.
Opers./Pr ocs.	F5.2	Operation 2 Start Date	OP2S_DATE	op2sdate	Date operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.2	Operation 2 Start Month	OP2S_D_M	op2smo	Month operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Opers./Pr ocs.	F5.2	Operation 2 Start Day	OP2S_D_D	op2sday	Day that operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Opers./Pr ocs.	F5.2	Operation 2 Start Year	OP2S_D_Y	op2syr	Year operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.2	Operation 2 Start Time	OP2S_TIME	op2stime	Time operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.2	Operation 2 Hour of Start Time	OP2S_T_H	op2shr	Hour operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 and 23.
Opers./Pr ocs.	F5.2	Operation 2 Minutes of Start Time	OP2S_T_M	op2smin	Minutes portion of the time operation 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 to 59.
Opers./Pr ocs.	F5.2	Operation 2 End Date	OP2E_DATE	op2edate	Date operation 2 was finished.
Opers./Pr ocs.	F5.2	Operation 2 End Month	OP2E_D_M	op2emo	Month operation 2 was finished. Valid values are from 1 to 12.
Opers./Pr ocs.	F5.2	Operation 2 End Day	OP2E_D_D	op2eday	Day operation 2 was finished. Valid values are from 1 to 31.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter ‘/’, shows on screen as ‘n/a’)) means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
- **Unknown** (enter ‘U’ or ‘\*’, shows on screen as unk or “U”) means the information is appropriate to this patient, but is not known or reasonably obtainable. Also, see special instructions for use of Unknown in specific fields.
- **BOLD TEXT INDICATES STATE REQUIRED DATA ELEMENT**
- Data Elements no longer displayed on screen (*legacy elements*) are listed in [Appendix VIII](#)

Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		End Day			
Opsers./Pr ocs.	F5.2	Operation 2 End Year	OP2E_D_Y	op2eyr	Year operation 2 was finished. Valid values are from 1980 to 2099.
Opsers./Pr ocs.	F5.2	Operation 2 End Time	OP2E_TIME	op2etime	Time operation 2 was finished.
Opsers./Pr ocs.	F5.2	Operation 2 Hour of End Time	OP2E_T_H	op2ehr	Hour operation 2 was finished. Valid values are from 0 to 23.
Opsers./Pr ocs.	F5.2	Operation 2 Minutes of End Time	OP2E_T_M	op2emin	Minutes portion of time operation 2 was finished. Valid values are from 0 to 59.
Opsers./Pr ocs.	F5.2	Operation 2 Surgeon ID	OP2_SURG	op2_surg1	User-defined ID number of the primary operating surgeon for operation 2. Values vary by hospital.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 1	OP2_PROC1	op2pro1	1 <sup>st</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 2	OP2_PROC2	op2pro2	2 <sup>nd</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 3	OP2_PROC3	op2pro3	3 <sup>rd</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 4	OP2_PROC4	op2pro4	4 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 5	OP2_PROC5	op2pro5	5 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 6	OP2_PROC6	op2pro6	6 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 7	OP2_PROC7	op2pro7	7 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 8	OP2_PROC8	op2pro8	8 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 9	OP2_PROC9	op2pro9	9 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Procedure 10	OP2_PROC10	op2pro10	10 <sup>th</sup> operative procedure for operation 2, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.2	Operation 2 Disposition	OP2_DISP	op2disp	Operation 2 disposition. Refers to the disposition of the patient following post-anesthesia recovery (PAR). See OP1_DISP for values.
Opsers./Pr ocs.	F5.3	Operation 3 Arrival Date	OP3A_DATE	op3adate	Date the patient arrived in the surgical suite for operation 3.
Opsers./Pr ocs.	F5.3	Operation 3 Arrival Month	OP3A_D_M	op3amo	Month the patient arrived in the surgical suite for operation 3. Valid values are from 1 to 12.
Opsers./Pr ocs.	F5.3	Operation 3 Arrival Day	OP3A_D_D	op3aday	Day the patient arrived in the surgical suite for operation 3. Valid values are from 1 to 31.
Opsers./Pr ocs.	F5.3	Operation 3 Arrival Year	OP3A_D_Y	op3ayr	Year the patient arrived in the surgical suite for operation 3. Valid values are from 1980 to 2099.
Opsers./Pr ocs.	F5.3	Operation 3 Arrival Time	OP3A_TIME	op3atime	Time that the patient arrived in the surgical suite for operation 3.
Opsers./Pr ocs.	F5.3	Operation 3 Hour of Arrival Time	OP3A_T_H	op3ahr	Hour that the patient arrived in the surgical suite for operation 3. Valid values are from 0 to 23.
Opsers./Pr ocs.	F5.3	Operation 3 Minutes of	OP3A_T_M	op3amin	Minutes portion of time that the patient arrived in the surgical suite for operation 3. Valid values are from 0 to 59.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter '/', shows on screen as 'n/a') means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
- **Unknown** (enter 'U' or '\*', shows on screen as unk or "U") means the information is appropriate to this patient, but is not known or reasonably obtainable. Also, see special instructions for use of Unknown in specific fields.
- **BOLD TEXT INDICATES STATE REQUIRED DATA ELEMENT**
- Data Elements no longer displayed on screen (*legacy elements*) are listed in [Appendix VIII](#)

Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Arrival Time			
Opers./Pr ocs.	F5.3	Operation 3 Start Date	OP3S_DATE	op3sdate	Date operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.3	Operation 3 Start Month	OP3S_D_M	op3sdm	Month operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Opers./Pr ocs.	F5.3	Operation 3 Start Day	OP3S_D_D	op3sdd	Day that operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Opers./Pr ocs.	F5.3	Operation 3 Start Year	OP3S_D_Y	op3sdy	Year operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.3	Operation 3 Start Time	OP3S_TIME	op3stime	Time operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.3	Operation 3 Hour of Start Time	OP3S_T_H	op3shr	Hour operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 and 23.
Opers./Pr ocs.	F5.3	Operation 3 Minutes of Start Time	OP3S_T_M	op3smin	Minutes portion of the time operation 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 to 59.
Opers./Pr ocs.	F5.3	Operation 3 End Date	OP3E_DATE	op3edate	Date operation 3 was finished.
Opers./Pr ocs.	F5.3	Operation 3 End Month	OP3E_D_M	op3emo	Month operation 3 was finished. Valid values are from 1 to 12.
Opers./Pr ocs.	F5.3	Operation 3 End Day	OP3E_D_D	op3eday	Day operation 3 was finished. Valid values are from 1 to 31.
Opers./Pr ocs.	F5.3	Operation 3 End Year	OP3E_D_Y	op3eyr	Year operation 3 was finished. Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.3	Operation 3 End Time	OP3E_TIME	op3etime	Time operation 3 was finished.
Opers./Pr ocs.	F5.3	Operation 3 Hour of End Time	OP3E_T_H	op3ehr	Hour operation 3 was finished. Valid values are from 0 to 23.
Opers./Pr ocs.	F5.3	Operation 3 Minutes of End Time	OP3E_T_M	op3emin	Minutes portion of time operation 3 was finished. Valid values are from 0 to 59.
Opers./Pr ocs.	F5.3	Operation 3 Surgeon ID	OP3_SURG	op3surg	User-defined ID number of the primary operating surgeon for operation 3. Values vary by hospital.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 1	OP3_PROC1	op3pro1	1 <sup>st</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 2	OP3_PROC2	op3pro2	2 <sup>nd</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 3	OP3_PROC3	op3pro3	3 <sup>rd</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 4	OP3_PROC4	op3pro4	4 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 5	OP3_PROC5	op3pro5	5 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 6	OP3_PROC6	op3pro6	6 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter '/', shows on screen as 'n/a')) means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
- **Unknown** (enter 'U' or '\*', shows on screen as unk or "U") means the information is appropriate to this patient, but is not known or reasonably obtainable. Also, see special instructions for use of Unknown in specific fields.
- **BOLD TEXT INDICATES STATE REQUIRED DATA ELEMENT**
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
Opers./Pr ocs.	F5.3	Operation 3 Procedure 7	OP3_PROC7	op3pro7	7 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 8	OP3_PROC8	op3pro8	8 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 9	OP3_PROC9	op3pro9	9 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Procedure 10	OP3_PROC10	op3pro10	10 <sup>th</sup> operative procedure for operation 3, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Pr ocs.	F5.3	Operation 3 Disposition	OP3_DISP	op3disp	Operation 3 disposition. Refers to the disposition of the patient following post-anesthesia recovery (PAR). See OP1_DISP for values.
Opers./Pr ocs.	F5.4	Operation 4 Arrival Date	OP4A_DATE	op4adate	Date the patient arrived in the surgical suite for operation 4.
Opers./Pr ocs.	F5.4	Operation 4 Arrival Month	OP4A_D_M	op4amo	Month the patient arrived in the surgical suite for operation 4. Valid values are from 1 to 12.
Opers./Pr ocs.	F5.4	Operation 4 Arrival Day	OP4A_D_D	op4aday	Day the patient arrived in the surgical suite for operation 4. Valid values are from 1 to 31.
Opers./Pr ocs.	F5.4	Operation 4 Arrival Year	OP4A_D_Y	op4ayr	Year the patient arrived in the surgical suite for operation 4. Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.4	Operation 4 Arrival Time	OP4A_TIME	op4atime	Time that the patient arrived in the surgical suite for operation 4.
Opers./Pr ocs.	F5.4	Operation 4 Hour of Arrival Time	OP4A_T_H	op4ahr	Hour that the patient arrived in the surgical suite for operation 4. Valid values are from 0 to 23.
Opers./Pr ocs.	F5.4	Operation 4 Minutes of Arrival Time	OP4A_T_M	op4amin	Minutes portion of time that the patient arrived in the surgical suite for operation 4. Valid values are from 0 to 59.
Opers./Pr ocs.	F5.4	Operation 4 Start Date	OP4S_DATE	op4sdate	Date operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.4	Operation 4 Start Month	OP4S_D_M	op4smo	Month operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Opers./Pr ocs.	F5.4	Operation 4 Start Day	OP4S_D_D	op4sday	Day that operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Opers./Pr ocs.	F5.4	Operation 4 Start Year	OP4S_D_Y	op4syr	Year operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Opers./Pr ocs.	F5.4	Operation 4 Start Time	OP4S_TIME	op4stime	Time operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opers./Pr ocs.	F5.4	Operation 4 Hour of Start Time	OP4S_T_H	op4shr	Hour operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 and 23.
Opers./Pr ocs.	F5.4	Operation 4 Minutes of Start Time	OP4S_T_M	op4smin	Minutes portion of the time operation 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 to 59.
Opers./Pr ocs.	F5.4	Operation 4 End Date	OP4E_DATE	op4edate	Date operation 4 was finished.
Opers./Pr ocs.	F5.4	Operation 4 End Month	OP4E_D_M	op4emo	Month operation 4 was finished. Valid values are from 1 to 12.
Opers./Pr	F5.4	Operation 4	OP4E_D_D	op4eday	Day operation 4 was finished. Valid values are from 1 to 31.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter ‘/’, shows on screen as ‘n/a’)) means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
ocs		End Day			
Opsers./Pr ocs.	F5.4	Operation 4 End Year	OP4E_D_Y	op4eyr	Year operation 4 was finished. Valid values are from 1980 to 2099.
Opsers./Pr ocs.	F5.4	Operation 4 End Time	OP4E_TIME	op4etime	Time operation 4 was finished.
Opsers./Pr ocs	F5.4	Operation 4 Hour of End Time	OP4E_T_H	op4ehr	Hour operation 4 was finished. Valid values are from 0 to 23.
Opsers./Pr ocs.	F5.4	Operation 4 Minutes of End Time	OP4E_T_M	op4emin	Minutes portion of time operation 4 was finished. Valid values are from 0 to 59.
Opsers./Pr ocs.	F5.4	Operation 4 Surgeon ID	OP4_SURG	op4_surg	User-defined ID number of the primary operating surgeon for operation 4. Values vary by hospital.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 1	OP4_PROC1	op4pro1	1 <sup>st</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 2	OP4_PROC2	op4pro2	2 <sup>nd</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 3	OP4_PROC3	op4pro3	3 <sup>rd</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 4	OP4_PROC4	op4pro4	4 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 5	OP4_PROC5	op4pro5	5 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 6	OP4_PROC6	op4pro6	6 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 7	OP4_PROC7	op4pro7	7 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 8	OP4_PROC8	op4pro8	8 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.4	Operation 4 Procedure 9	OP4_PROC9	op4pro9	9 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs	F5.4	Operation 4 Procedure 10	OP4_PROC10	op4pro10	10 <sup>th</sup> operative procedure for operation 4, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs	F5.4	Operation 4 Disposition	OP4_DISP	op4disp	Operation 4 disposition. Refers to the disposition of the patient following post-anesthesia recovery (PAR). See OP1_DISP for values.
Opsers./Pr ocs.	F5.5	Operation 5 Arrival Date	OP5A_DATE	op5adate	Date the patient arrived in the surgical suite for operation 5.
Opsers./Pr ocs.	F5.5	Operation 5 Arrival Month	OP5A_D_M	op5amo	Month the patient arrived in the surgical suite for operation 5. Valid values are from 1 to 12.
Opsers./Pr ocs.	F5.5	Operation 5 Arrival Day	OP5A_D_D	op5aday	Day the patient arrived in the surgical suite for operation 5. Valid values are from 1 to 31.
Opsers./Pr ocs.	F5.5	Operation 5 Arrival Year	OP5A_D_Y	op5ayr	Year the patient arrived in the surgical suite for operation 5. Valid values are from 1980 to 2099.
Opsers./Pr ocs.	F5.5	Operation 5 Arrival Time	OP5A_TIME	op5atime	Time that the patient arrived in the surgical suite for operation 5.
Opsers./Pr ocs	F5.5	Operation 5 Hour of Arrival Time	OP5A_T_H	op5ahr	Hour that the patient arrived in the surgical suite for operation 5. Valid values are from 0 to 23.
Opsers./Pr ocs.	F5.5	Operation 5 Minutes of	OP5A_T_M	op5amin	Minutes portion of time that the patient arrived in the surgical suite for operation 5. Valid values are from 0 to 59.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter ‘/’, shows on screen as ‘n/a’)) means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Arrival Time			
Opsers./Pr ocs.	F5.5	Operation 5 Start Date	OP5S_DATE	op5sdate	Date operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opsers./Pr ocs.	F5.5	Operation 5 Start Month	OP5S_D_M	op5smo	Month operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Opsers./Pr ocs.	F5.5	Operation 5 Start Day	OP5S_D_D	op5sday	Day that operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Opsers./Pr ocs.	F5.5	Operation 5 Start Year	OP5S_D_Y	op5syr	Year operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Opsers./Pr ocs.	F5.5	Operation 5 Start Time	OP5S_TIME	op5stime	Time operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).
Opsers./Pr ocs.	F5.5	Operation 5 Hour of Start Time	OP5S_T_H	op5shr	Hour operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 and 23.
Opsers./Pr ocs.	F5.5	Operation 5 Minutes of Start Time	OP5S_T_M	op5smin	Minutes portion of the time operation 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 0 to 59.
Opsers./Pr ocs.	F5.5	Operation 5 End Date	OP5E_DATE	op5edate	Date operation 5 was finished.
Opsers./Pr ocs.	F5.5	Operation 5 End Month	OP5E_D_M	op5emo	Month operation 5 was finished. Valid values are from 1 to 12.
Opsers./Pr ocs.	F5.5	Operation 5 End Day	OP5E_D_D	op5eday	Day operation 5 was finished. Valid values are from 1 to 31.
Opsers./Pr ocs.	F5.5	Operation 5 End Year	OP5E_D_Y	op5eyr	Year operation 5 was finished. Valid values are from 1980 to 2099.
Opsers./Pr ocs.	F5.5	Operation 5 End Time	OP5E_TIME	op5etime	Time operation 5 was finished.
Opsers./Pr ocs.	F5.5	Operation 5 Hour of End Time	OP5E_T_H	op5ehr	Hour operation 5 was finished. Valid values are from 0 to 23.
Opsers./Pr ocs.	F5.5	Operation 5 Minutes of End Time	OP5E_T_M	op5emin	Minutes portion of time operation 5 was finished. Valid values are from 0 to 59.
Opsers./Pr ocs.	F5.5	Operation 5 Surgeon ID	OP5_SURG	op5surg	User-defined ID number of the primary operating surgeon for operation 5. Values vary by hospital.
Opsers./Pr ocs.	F5.5	Operation 5 Procedure 1	OP5_PROC1	op5pro1	1 <sup>st</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.5	Operation 5 Procedure 2	OP5_PROC2	op5pro2	2 <sup>nd</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.5	Operation 5 Procedure 3	OP5_PROC3	op5pro3	3 <sup>rd</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opsers./Pr ocs.	F5.5	Operation 5 Procedure 4	OP5_PROC4	op5pro4	4 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter ‘/’, shows on screen as ‘n/a’)) means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
- **Unknown** (enter ‘U’ or ‘\*’, shows on screen as unk or “U”) means the information is appropriate to this patient, but is not known or reasonably obtainable. Also, see special instructions for use of Unknown in specific fields.
- **BOLD TEXT INDICATES STATE REQUIRED DATA ELEMENT**
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
Opers./Procs	F5.5	Operation 5 Procedure 5	OP5_PROC5	op5pro5	5 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Procs.	F5.5	Operation 5 Procedure 6	OP5_PROC6	op5pro6	6 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Procs.	F5.5	Operation 5 Procedure 7	OP5_PROC7	op5pro7	7 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Procs.	F5.5	Operation 5 Procedure 8	OP5_PROC8	op5pro8	8 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Procs	F5.5	Operation 5 Procedure 9	OP5_PROC9	op5pro9	9 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Procs.	F5.5	Operation 5 Procedure 10	OP5_PROC10	op5pro10	10 <sup>th</sup> operative procedure for operation 5, using standard ICD-9-CM Procedure coding. See Operation 1 Procedure 1 (OP1_PROC1) for values.
Opers./Procs	F5.5	Operation 5 Disposition	OP5_DISP	op5disp	Operation 5 disposition. Refers to the disposition of the patient following post-anesthesia recovery (PAR). See OP1_DISP for values.
Opers./Procs.	F5.6	Abdominal Surgery Performed Late	ABD_SURG	abds24	Indicates whether abdominal surgery was performed > 24 hours after arrival, if applicable. Enter “1” if no abdominal surgery was performed. 1 = Yes 2 = No
Opers./Procs.	F5.6	Thoracic Surgery Performed Late	THRC_SURG	thrcs24	Indicates whether thoracic surgery was performed > 24 hours after arrival, if applicable. Enter “1” if no thoracic surgery was performed. 1 = Yes 2 = No
Opers./Procs.	F5.6	Vascular Surgery Performed Late	VASC_SURG	vascs24	Indicates whether vascular surgery was performed > 24 hours after arrival, if applicable. Enter “1” if no vascular surgery was performed. 1 = Yes 2 = No
Opers./Procs.	F5.6	Cranial Surgery Performed Late	CRAN_SURG	crans24	Indicates whether cranial surgery was performed > 24 hours after arrival, if applicable. Enter “1” if no cranial surgery was performed. 1 = Yes 2 = No
Opers./Procs.	F5.6	Unplanned Return To OR	UNPLAND_OR	orreturn	Indicates whether there was an unplanned return to OR within 48 hours of admission. If ‘yes’, the body region of the operation must also be entered. See also BODY_REG. 1 = Yes 2 = No
Opers./Procs.	F5.6	Body Region of Operation	BODY_REG	opertype	Indicates what region of the body in which an unplanned operation was performed. See also UNPLAND_OR. 1 = Vascular 2 = Abdominal 3 = Orthopedic 4 = Neurologic 5 = Thoracic 6 = Other
Opers./Procs.	F5.7	OR Memo	NOTES_OR		Ten lines designated for a description of patient’s OR information.
Other Procedures	F6.1	Other In-House Procedure 1	PR_01_PR		1 <sup>st</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. <a href="#">Appendix IV</a>
Other Procedure	F6.1	Other In-	PR_01_LC		Location of Other In-House Procedure 1.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
s		House Procedure 1 Location			01 = ICU/CCU 02 = Ward/Floor 03 = Radiology/Angiography 04 = Special Procedure Unit 05 = Short Stay Unit 06 = Pediatrics 07 = Pediatrics ICU 08 = Progressive Care Unit 09 = Other In-house Location (excluding OR) 'U' Unknown '/' Not applicable
Other Procedures	F6.1	Other In-House Procedure 1 Start Date	PR_01_S_DATE		Date Other In-House Procedure 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 1 Start Month	PR_01_S_DM		Month Other In-House Procedure 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 1 Start Day	PR_01_S_DD		Day Other In-House Procedure 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 1 Start Year	PR_01_S_DY		Year Other In-House Procedure 1 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Other Procedures	F6.1	Other In-House Procedure 2	PR_02_PR		2 <sup>nd</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 2 Location	PR_02_LC		Location of Other In-House Procedure 2. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 2 Start Date	PR_02_S_DATE		Date Other In-House Procedure 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 2 Start Month	PR_02_S_DM		Month Other In-House Procedure 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 2 Start Day	PR_02_S_DD		Day Other In-House Procedure 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 2	PR_02_S_DY		Year Other In-House Procedure 2 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Start Year			
Other Procedures	F6.1	Other In-House Procedure 3	PR_03_PR		3 <sup>rd</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 3 Location	PR_03_LC		Location of Other In-House Procedure 3. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 3 Start Date	PR_03_S_DATE		Date Other In-House Procedure 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 3 Start Month	PR_03_S_DM		Month Other In-House Procedure 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 3 Start Day	PR_03_S_DD		Day Other In-House Procedure 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 3 Start Year	PR_03_S_DY		Year Other In-House Procedure 3 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Other Procedures	F6.1	Other In-House Procedure 4	PR_04_PR		4 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 4 Location	PR_04_LC		Location of Other In-House Procedure 4. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 4 Start Date	PR_04_S_DATE		Date Other In-House Procedure 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 4 Start Month	PR_04_S_DM		Month Other In-House Procedure 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 4 Start Day	PR_04_S_DD		Day Other In-House Procedure 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 4	PR_04_S_DY		Year Other In-House Procedure 4 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Start Year			
Other Procedures	F6.1	Other In-House Procedure 5	PR_05_PR		5 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 5 Location	PR_05_LC		Location of Other In-House Procedure 5. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 5 Start Date	PR_05_S_DATE		Date Other In-House Procedure 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 5 Start Month	PR_05_S_DM		Month Other In-House Procedure 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 5 Start Day	PR_05_S_DD		Day Other In-House Procedure 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 5 Start Year	PR_05_S_DY		Year Other In-House Procedure 5 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Other Procedures	F6.1	Other In-House Procedure 6	PR_06_PR		6 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 6 Location	PR_06_LC		Location of Other In-House Procedure 6. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 6 Start Date	PR_06_S_DATE		Date Other In-House Procedure 6 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 6 Start Month	PR_06_S_DM		Month Other In-House Procedure 6 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 6 Start Day	PR_06_S_DD		Day Other In-House Procedure 6 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House	PR_06_S_DY		Year Other In-House Procedure 6 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Procedure 6 Start Year			Valid values are from 1980 to 2099.
Other Procedures	F6.1	Other In-House Procedure 7	PR_07_PR		7 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 7 Location	PR_07_LC		Location of Other In-House Procedure 7. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 7 Start Date	PR_07_S_DATE		Date Other In-House Procedure 7 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 7 Start Month	PR_07_S_DM		Month Other In-House Procedure 7 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 7 Start Day	PR_07_S_DD		Day Other In-House Procedure 7 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 7 Start Year	PR_07_S_DY		Year Other In-House Procedure 7 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Other Procedures	F6.1	Other In-House Procedure 8	PR_08_PR		8 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 8 Location	PR_08_LC		Location of Other In-House Procedure 8. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 8 Start Date	PR_08_S_DATE		Date Other In-House Procedure 8 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 8 Start Month	PR_08_S_DM		Month Other In-House Procedure 8 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 8 Start Day	PR_08_S_DD		Day Other In-House Procedure 8 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 8	PR_08_S_DY		Year Other In-House Procedure 8 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Start Year			
Other Procedures	F6.1	Other In-House Procedure 9	PR_09_PR		9 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 9 Location	PR_09_LC		Location of Other In-House Procedure 9. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 9 Start Date	PR_09_S_DATE		Date Other In-House Procedure 9 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 9 Start Month	PR_09_S_DM		Month Other In-House Procedure 9 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 9 Start Day	PR_09_S_DD		Day Other In-House Procedure 9 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House Procedure 9 Start Year	PR_09_S_DY		Year Other In-House Procedure 9 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1980 to 2099.
Other Procedures	F6.1	Other In-House Procedure 10	PR_10_PR		10 <sup>th</sup> of up to 10 Other In-House Procedures, using standard ICD-9-CM Procedure coding. See Other In-House Procedure 1 (PR_01_PR) for values.
Other Procedures	F6.1	Other In-House Procedure 10 Location	PR_10_LC		Location of Other In-House Procedure 10. See Other In-House Procedure 1 Location (PR_01_LC) for values.
Other Procedures	F6.1	Other In-House Procedure 10 Start Date	PR_10_S_DATE		Date Other In-House Procedure 10 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Format is MM/DD/YYYY.
Other Procedures	F6.1	Other In-House Procedure 10 Start Month	PR_10_S_DM		Month Other In-House Procedure 10 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 12.
Other Procedures	F6.1	Other In-House Procedure 10 Start Day	PR_10_S_DD		Day Other In-House Procedure 10 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia). Valid values are from 1 to 31.
Other Procedures	F6.1	Other In-House	PR_10_S_DY		Year Other In-House Procedure 10 started. An operation includes all the procedures performed during one session of anesthesia (but excluding pre-operative anesthesia).

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
s		Procedure 10 Start Year			Valid values are from 1980 to 2099.
ICU Data	F7.1	<b>Patient Admitted To ICU</b>	ICU_ADMIT	icuadmit	Indicates whether the patient was admitted to the ICU. 1 = Yes 2 = No <b>Note: '/' Not Applicable or 'U' Unknown should not be used in this field.</b>
ICU Data	F7.1	<b>Patient Readmitted to ICU</b>	ICU_READM	icu_readm	Indicates whether the patient was readmitted to the ICU. 1 = Yes 2 = No <b>Note: '/' Not Applicable or 'U' Unknown should not be used in this field.</b>
ICU Data	F7.1	ICU Date of Admission	ICU1_DATE	icu1adate	Date that the patient was admitted to the ICU.
ICU Data	F7.1	ICU Month of Admission	ICU1_D_M	icu1amo	Month that the patient was admitted to the ICU. Valid values are from 1 to 12.
ICU Data	F7.1	ICU Day of Admission	ICU1_D_D	icu1aday	Day that the patient was admitted to the ICU. Valid values are from 1 to 31.
ICU Data	F7.1	ICU Year of Admission	ICU1_D_Y	icu1ayr	Year that the patient was admitted to the ICU. Valid values are from 1980 to 2099.
ICU Data	F7.1	ICU Time of Admission	ICU1_TIME	icu1atime	Time that the patient was admitted to the ICU.
ICU Data	F7.1	ICU Hour of Admission	ICU1_T_H	icuahr	Hour that the patient was admitted to the ICU. Valid values are from 0 to 23.
ICU Data	F7.1	ICU Minutes of Admission	ICU1_T_M	icu1amin	Minutes portion of the time that the patient was admitted to the ICU. Valid values are from 0 to 59.
ICU Data	F7.1	ICU Date of Discharge	ICU1D_DATE	icu1ddat	Date that the patient was discharged from the ICU.
ICU Data	F7.1	ICU Month of Discharge	ICU1D_D_M	icu1dmo	Month that the patient was discharged from the ICU. Valid values are from 1 to 12.
ICU Data	F7.1	ICU Day of Discharge	ICU1D_D_D	icu1dday	Day that the patient was discharged from the ICU. Valid values are from 1 to 31.
ICU Data	F7.1	ICU Year of Discharge	ICU1D_D_Y	icu1dyr	Year that the patient was discharged from the ICU. Valid values are from 1980 to 2099.
ICU Data	F7.1	ICU Time of Discharge	ICU1D_TIME	icu1dtim	Time that the patient was discharged from the ICU.
ICU Data	F7.1	ICU Hour of Discharge	ICU1D_T_H	icu1dhr	Hour that the patient was discharged from the ICU. Valid values are from 0 to 23.
ICU Data	F7.1	ICU Minutes of Discharge	ICU1D_T_M	icu1dmin	Minutes portion of the time that the patient was discharged from the ICU. Valid values are from 0 to 59.
ICU Data	F7.1	ICU Disposition	TRANSF_TO1	icu1trto	The destination code of the patient after discharge from the primary ICU stay. . This field is user-defined and may vary by hospital.
ICU Data	F7.1	ICU Disposition if Other	TRANSF_O1	icu1tro	The description of the patient's destination, after discharge from the primary ICU stay, if not listed in the ICU disposition field.
ICU Data	F7.1	ICU Date of Readmission	ICU2_DATE	icu2rdat	Date that the patient was readmitted to the ICU.
ICU Data	F7.1	ICU Month of Readmission	ICU2_D_M	icu2rmo	Month that the patient was readmitted to the ICU. Valid values are from 1 to 12.
ICU Data	F7.1	ICU Day of	ICU2_D_D	icu2rday	Day that the patient was readmitted to the ICU. Valid values are from 1 to 31.

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Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Readmission			
ICU Data	F7.1	ICU Year of Readmission	ICU2_D_Y	icu2yr	Year that the patient was readmitted to the ICU. Valid values are from 1980 to 2099.
ICU Data	F7.1	ICU Time of Readmission	ICU2_TIME	icu2rtim	Time that the patient was readmitted to the ICU.
ICU Data	F7.1	ICU Hour of Readmission	ICU2_T_H	icu2hr	Hour that the patient was readmitted to the ICU. Valid values are from 0 to 23.
ICU Data	F7.1	ICU Minutes of Readmission	ICU2_T_M	icu2rmin	Minutes portion of the time that the patient was readmitted to the ICU. Valid values are from 0 to 59.
ICU Data	F7.1	ICU Date of Readmission Discharge	ICU2D_DATE	icu2ddat	Date that the patient was discharged from readmission to the ICU.
ICU Data	F7.1	ICU Month of Readmission Discharge	ICU2D_D_M	icu2dmo	Month that the patient was discharged from readmission to the ICU. Valid values are from 1 to 12.
ICU Data	F7.1	ICU Day of Readmission Discharge	ICU2D_D_D	icu2dday	Day that the patient was discharged from readmission to the ICU. Valid values are from 1 to 31.
ICU Data	F7.1	ICU Year of Readmission Discharge	ICU2D_D_Y	icu2dyr	Year that the patient was discharged from readmission to the ICU. Valid values are from 1980 to 2099.
ICU Data	F7.1	ICU Time of Readmission Discharge	ICU2D_TIME	icu2dtim	Time that the patient was discharged from readmission to the ICU.
ICU Data	F7.1	ICU Hour of Readmission Discharge	ICU2D_T_H	icu2dhr	Hour that the patient was discharged from readmission to the ICU. Valid values are from 0 to 23.
ICU Data	F7.1	ICU Minutes of Readmission Discharge	ICU2D_T_M	icu2dmin	Minutes portion of the time that the patient was discharged from readmission to the ICU. Valid values are from 0 to 59.
ICU Data	F7.1	ICU Readmission Disposition	TRANSF_TO2	icu2trto	The destination code of the patient after discharge from the readmission ICU stay. This field is user-defined and may vary by hospital
ICU Data	F7.1	ICU Readmission Disposition if Other	TRANSF_O2	icu2tro	The description of the patient's destination after discharge from the readmission ICU stay, if not listed in the ICU readmission disposition field
ICU Data	F7.1	<b>Days of Primary ICU Stay</b>	<b>PRIM_STAY</b>	icu1days	<b>Number of days the patient spent during the primary ICU stay. This field is automatically entered by Collector if the date of primary ICU admission &amp; discharge are entered. If not, then the user must enter the number of days. This includes any critical care unit (e.g., ICU, CCU, burn unit, etc.). It does not include step-down or intermediate care units.</b> <b>Note: If a patient is sent to the OR or to other services with a plan to return to the ICU, then the ICU stay is counted as a single, contiguous stay.</b>
ICU Data	F7.1	Days of Primary ICU Stay Ventilator Days	PRIM_VDAYS <b>(12/17/2009)</b>	prim_vdays	Number of days the patient spent on a ventilator during the primary ICU stay. This field is automatically entered by Collector if the date of primary ICU admission & discharge are entered. If not, then the user must enter the number of days. This includes any critical care unit (e.g., ICU, CCU, burn unit, etc.). It does not include step-down or intermediate care units.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					Note: If a patient is sent to the OR or to other services with a plan to return to the ICU, then the ICU stay is counted as a single, contiguous stay. 0 = patient was not admitted to an ICU.
ICU Data	F7.1	<b>Days of ICU Readmission Stay</b>	READ_STAY	icu2days	<b>Total number of days the patient spent during readmission ICU stays. If the patient had more than one readmission to the ICU, total all these days of readmission.</b> <b>This question is skipped if you have entered an N in the field prior.</b> <b>0 = patient was not readmitted to an ICU.</b>
ICU Data	F7.1	Days of ICU Readmission Stay Ventilator Days	READ_VDAYS <b>(12/17/2009)</b>	read_vdays	Total number of days the patient spent on a ventilator during readmission ICU stays. If the patient had more than one readmission to the ICU, total all these days of readmission.
ICU Data	F7.2	ICU Notes	NOTES_ICU		Ten lines designated for a description of patient's ICU information.
Outcome	F8.1	<b>Complication 1</b>	<b>COMPLIC_1</b>	<b>comp1</b>	First of up to 10 medical complications that occurred during the patient's care at this hospital. A complication is defined as a condition, documented by a physician, and arising after arrival as a result of patient treatment, or events occurring during the stay, that requires additional medical treatment, or affects the length of stay. Example: A hemothorax or a pneumothorax is commonly a result of the injury itself, but can also be secondary to a medical procedure. A hemo- or pneumothorax that is caused by the injury is not a complication. A hemo- or pneumothorax that develops as a result of a procedure is a complication and should be included here. Suspected exacerbation of a pre-existing medical diagnosis should not be coded as a complication unless documented by a physician that it is secondary to treatment or lack of treatment. A pre-existing medical diagnosis that does not exacerbate during this episode of care should be reported as a Pre-existing Condition (see Screen F4.2). Example: If patient with a dependency on alcohol arrives in alcohol withdrawal, do not report this as a complication here. Alcohol withdrawal that develops after patient arrival is a complication and should be included here. A respiratory arrest or cardiac arrest that results in death should not be reported as a complication—it is understood that death is always associated with respiratory and cardiac arrest. These arrests should not be reported as complications unless the patient was successfully resuscitated from the arrest. <b>00 = None</b> <b>01 = Evisceration or dehiscence</b> <b>02 = Arterial Occlusion</b> <b>03 = Thrombosis, central venous or deep vein</b> <b>04 = Pulmonary Embolism</b> <b>05 = Fat Embolism</b> <b>06 = Acute Respiratory Distress Syndrome (ARDS)</b> <b>07 = Pneumonia</b> <b>08 = Respiratory Arrest</b> <b>09 = Cardiac Arrest</b> <b>10 = Congestive Heart Failure (CHF)</b> <b>11 = Pulmonary Edema</b> <b>12 = Major Arrhythmia</b> <b>13 = Myocardial Infarction (MI)</b> <b>14 = Coagulopathy or Disseminated Intravascular Coagulation (DIC)</b> <b>15 = Compartment Syndrome</b> <b>16 = Stroke (CVA)</b> <b>17 = Emphysema</b> <b>18 = GI Bleed or Stress Ulcer</b> <b>19 = Hemothorax or Pneumothorax</b>

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					20 = Inadvertent Enterotomy 21 = Intra-abdominal Abscess 22 = Liver Failure, Hepatic Dysfunction, Jaundice or Hyperbilirubinemia 23 = Pancreatitis 24 = Pressure Sore 25 = Renal Failure or Acute Tubular Necrosis (ATN) 26 = Sepsis 27 = Shock 28 = Meningitis 29 = Urinary Tract Infection (UTI) 30 = Wound Infection 31 = Hypothermia 32 = Alcohol or Drug Withdrawal 33 = Fracture, non-union 99 = Other 34 = Alteration from Pre-Injury Mental Status 35 = Anemia Secondary to Injury/Treatment 36 = Fever of Unknown Origin (FUO) 37 = Acute respiratory Failure 50-79 = Designated for user-defined complications
Outcome	F8.1	Complication 2	COMPLIC_2	comp2	2 <sup>nd</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 3	COMPLIC_3	comp3	3 <sup>rd</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 4	COMPLIC_4	comp4	4 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 5	COMPLIC_5	comp5	5 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 6	COMPLIC_6	comp6	6 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 7	COMPLIC_7	comp7	7 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 8	COMPLIC_8	comp8	8 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 9	COMPLIC_9	comp9	9 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication 10	COMPLIC_10	comp10	10 <sup>th</sup> of up to 10 complications which are documented in the patient’s record for this stay. See Complication 1 (COMPLIC_1) for definition and values.
Outcome	F8.1	Complication if Other	COMPLIC_O	compoth	Text description of a complication that occurred but is not given as an option on the complication list as defined in COMPLIC_1.
ED Data	F8.1	Reintubation Required	REINTUBAT	reintub	Indicates whether the patient required reintubation within 48 hours of extubation. This includes whether extubation was by the physician, or if self-extubated by the patient. If intubation was never required, enter “1”. 1 = Yes 2 = No
Outcome	F8.1	Social Work Consult	SW_CNSLT	swcnslt	Indicates whether a social worker consulted with a patient. This would include discharge planning or case management by a person other than a social worker. 1 = Yes 2 = No
Outcome	F8.1	Social Work Consult Date	SW_DATE	swdate	Date of the social work consultation.
Outcome	F8.1	Social Work Consult	SW_DATE_M	swmo	Month of the social work consultation. Valid values are from 1 to 12.

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Month			
Outcome	F8.1	Social Work Consult Day	SW_DATE_D	swday	Day of the social work consultation. Valid values are from 1 to 31.
Outcome	F8.1	Social Work Consult Year	SW_DATE_Y	swyr	Year of the social work consultation. Valid values are from 1980 to 2099.
Outcome	F8.1	Mental health Consult	MH_CNSLT	mhcnslt	Indicates whether there was a mental health consultation with the patient (including alcohol/drug counselor, psychologist, psychiatrist,). 1 = Yes 2 = No
Outcome	F8.1	Mental health Consult Date	MH_DATE	mhdate	Date of the mental health consultation.
Outcome	F8.1	Mental health Consult Month	MH_DATE_M	mhmo	Month of the mental health consultation. Valid values are from 1 to 12.
Outcome	F8.1	Mental health Consult Day	MH_DATE_D	mhdya	Day of the mental health consultation. Valid values are from 1 to 31.
Outcome	F8.1	Mental health Consult Year	MH_DATE_Y	mhyr	Year of the mental health consultation. Valid values are from 1980 to 2099.
Outcome	F8.1	Physical therapy Consult	PT_CNSLT	ptcnslt	Indicates whether there was a physical therapy consultation with the patient. 1 = Yes 2 = No
Outcome	F8.1	Physical therapy Consult Date	PT_DATE	ptdate	Date of the physical therapy consultation.
Outcome	F8.1	Physical therapy Consult Month	PT_DATE_M	ptmo	Month of the physical therapy consultation. Valid values are from 1 to 12.
Outcome	F8.1	Physical therapy Consult Day	PT_DATE_D	ptday	Day of the physical therapy consultation. Valid values are from 1 to 31.
Outcome	F8.1	Physical therapy Consult Year	PT_DATE_Y	ptyr	Year of the physical therapy consultation. Valid values are from 1980 to 2099.
Outcome	F8.1	Rehabilitation Consult	RH_CNSLT	rhcnslt	Indicates whether a rehabilitation caregiver screened the patient for rehabilitation needs. 1 = Yes 2 = No
Outcome	F8.1	Rehabilitation Consult Date	RH_DATE	rhdate	Date of the rehabilitation consultation.
Outcome	F8.1	Rehabilitation Consult Month	RH_DATE_M	rhmo	Month of the rehabilitation consultation. Valid values are from 1 to 12.
Outcome	F8.1	Rehabilitation Consult Day	RH_DATE_D	rhday	Day of the rehabilitation consultation. Valid values are from 1 to 31.

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		on Consult Day			
Outcome	F8.1	Rehabilitation Consult Year	RH_DATE_Y	rhyr	Year of the rehabilitation consultation. Valid values are from 1980 to 2099.
Outcome	F8.1	General Surgeon Consult	GS_CNSLT	gscnslt	Indicates whether a general surgeon screened the patient . 1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Orthopedic Surgeon Consult	OR_CNSLT	or_cnslt	1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Pediatric Surgeon Consult	PC_CNSLT	pc_cnslt	1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Pediatrician Consult	PN_CNSLT	pn_cnslt	1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Neurosurgeon Consult	NS_CNSLT	ns_cnslt	1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Intensivist Consult	IN_CNSLT	in_cnslt	1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Brief Substance Abuse Intervention Done?	SA_INT	sa_int	Indicates whether a brief substance abuse intervention was performed on the patient. 1 = Yes 2 = No 'U' = Unknown '/' = Not Applicable (Use Not Applicable for pediatric and geriatric pts. when it is not appropriate.)
Outcome	F8.1	Date of Discharge From Hospital or Death	DATE_DEATH	dischdate	Indicates either the date of <i>discharge</i> from the hospital if the patient lived, or the date of <i>death</i> if the patient died. Note: Discharge includes transfers to another health care facility.
Outcome	F8.1	Month of Discharge From Hospital or Death	D_DEATH_M	dischmo	Month of <i>discharge/transfer</i> from the hospital, <i>transfer</i> from the ED, or <i>death</i> . Valid values are from 1 to 12.
Outcome	F8.1	Day of Discharge From Hospital or Death	D_DEATH_D	dischday	Day of <i>discharge/transfer</i> from the hospital, <i>transfer</i> from the ED, or <i>death</i> . Valid values are from 1 to 31.

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Outcome	F8.1	Year of Discharge From Hospital or Death	D_DEATH_Y	dischyr	Year of <i>discharge/transfer</i> from the hospital, <i>transfer</i> from the ED, or <i>death</i> . Valid values are from 1980 to 2099.
Outcome	F8.1	Time of Discharge or Death	TIME_DEATH	dischtime	Indicates the time of <i>discharge/transfer</i> from the hospital if the patient lived, the time of <i>transfer</i> if the patient was transferred from the ED to another hospital, or the time of <i>death</i> if the patient died.
Outcome	F8.1	Hour of Discharge or Death	T_DEATH_H	dischhr	Hour of <i>discharge/transfer</i> from the hospital, <i>transfer</i> from the ED, or <i>death</i> . Valid values are from 0 to 23.
Outcome	F8.1	Minutes of Discharge or Death	T_DEATH_M	dischmin	Minutes of <i>discharge/transfer</i> from the hospital, <i>transfer</i> from the ED, or <i>death</i> . Valid values are from 0 to 59.
Outcome	F8.1	Hospital Discharge Disposition	DISCHG_TO	hospdisp	Indicates where the patient went upon final discharge from the hospital. 0 = Home, no outside assistance 1 = Home, with outside health care assistance 2 = Home, with outpatient rehabilitation care 3 = Skilled Nursing Facility (SNF) 4 = Rehab Facility 5 = Other Acute Care Facility (i.e. transfers to another acute care hospital) 6 = Expired (Died) 7 = Other, out of facility. If used, a text description of where the patient went must also be entered; for example, Foster Care. See also <a href="#">DISCG_TO_O</a> 8 = Psychiatric Facility 9 = Jail or Police Custody 10 = In-house SNF (or Transitional Care Unit) Note: A patient is "transferred" (choice 5 Other Acute Care Facility) to another acute care hospital if sent by ambulance. A patient sent by private vehicle or other means is not a "transfer" for the purposes of the Trauma Registry. For patients referred to another hospital but <u>not</u> sent by ambulance, choose 7 = Other and enter the receiving facility's ID number and "POV" in the "Discharge Disposition If Other" space.
Outcome	F8.1	Hospital Discharge if Other	DISCG_TO_O	hdispoth	Text description of where the patient went upon final discharge from the hospital if not listed as an option from the Hospital Discharge Disposition Menu. Note: This field should <i>rarely</i> be used. If the patient was transferred to another acute care facility (DISCHG_TO = 5), use this field to indicate the receiving hospital ID.
Outcome	F8.1	Decision to Transfer Made By	DIS_X_BY	dis_x_by	1 = ED Physician 2 = ED Mid Level Provider 3 = General Surgeon 4 = Neurosurgeon 5 = Orthopedic Surgeon 6 = Pediatric Surgeon 7 = Pediatrician 8 = Other 'U' = Unknown '/' = Not Applicable
Outcome	F8.1	Decision to Transfer Made By – If Other	DIS_X_BY_O	dis_x_by_o	If Other (8) is selected as the decision to transfer made by, enter text description in data field.
Outcome	F8.1	Acute Care	ACUTE_ID_N	rechiddc	ID of the acute care facility where the patient went if the patient was referred to

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Facility ID if Discharged From Hospital			an acute care facility from the hospital. See <a href="#">REF_ID</a> for defined values.
Outcome	F8.1	Rehabilitation Facility ID	REHAB_ID_N	rehabid	Indicates the ID number of the rehabilitation facility. User-defined facilities may also be added. <b>158 = Cascade Medical Center (Leavenworth)</b> <b>014 = Children’s Hospital (Seattle)</b> <b>081 = Good Samaritan Hospital (Puyallup)</b> <b>935 = Green Mountain Rehab Medicine (Bremerton)</b> <b>029 = Harborview Medical Center (Seattle)</b> <b>916 = Legacy Emanuel Hospital (Portland)</b> <b>022 = Lourdes Medical Center (Pasco)</b> <b>130 = Northwest Hospital (Seattle)</b> <b>191 = Providence Centralia Hospital</b> <b>027 = Providence Everett Medical Center</b> <b>003 = Providence Medical Center (Seattle)</b> <b>159 = Providence St. Peter Hospital (Olympia)</b> <b>170 = Southwest Washington Medical Center (Vancouver)</b> <b>026 = St. John Medical Center (Longview)</b> <b>032 = St. Joseph Medical Center (Tacoma)</b> <b>157 = St. Luke’s Rehabilitation Center (Spokane)</b> <b>050 = St. Mary Medical Center (Walla Walla)</b> <b>128 = University of Washington Medical Center (Seattle)</b> <b>155 = Valley Medical Center (Renton)</b> <b>102 = Yakima Regional Medical Center</b>
Outcome	F8.2	Disability at Discharge - Feeding	D_DISABL_F	fimfeed	Indicates the ‘feeding’ component of the Level of Function. Each component should be assessed as close to discharge as possible, but not earlier than 48 hours prior to discharge. <b>4 = Independent</b> <b>3 = Independent, with Device</b> <b>2 = Dependent, Partial Help</b> <b>1 = Dependent, Total Help</b> <b>0 = Pediatric, Age &lt; 2</b>
Outcome	F8.2	Disability at Discharge – Locomotion	D_DISABL_L	fimloco	Indicates the ‘locomotion’ component of the Level of Function. Each component should be assessed as close to discharge as possible, but not earlier than 48 hours prior to discharge. <b>4 = Independent</b> <b>3 = Independent, with Device</b> <b>2 = Dependent, Partial Help</b> <b>1 = Dependent, Total Help</b> <b>0 = Pediatric, Age &lt; 2</b>
Outcome	F8.2	Disability at Discharge – Expression	D_DISABL_E	fimexpr	Indicates the ‘expression’ component of the Level of Function. Each component should be assessed as close to discharge as possible, but not earlier than 48 hours prior to discharge. <b>4 = Independent</b> <b>3 = Independent, with Device</b> <b>2 = Dependent, Partial Help</b> <b>1 = Dependent, Total Help</b> <b>0 = Pediatric, Age &lt; 2</b>
Outcome	F8.2	Eye	EYE_OPNG_D	eyeopnd	Sub-score of the Glasgow Coma Score (GCS) indicating patient <i>best</i> eye

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		Opening Sub-Score of GCS at Discharge			opening <i>at discharge</i> from the hospital. It is added to two other sub-scores to obtain the GCS at discharge. See also Discharge GCS (GCS_D). 1 = None 2 = To Pain 3 = To Voice 4 = Spontaneous U = Unknown
Outcome	F8.2	Verbal Response Sub-Score of GCS at Discharge	VER_RESP_D	vrbrspd	Sub-score of the Glasgow Coma Score (GCS) indicating patient <i>best</i> verbal response <i>at discharge</i> . It is added to two other sub-scores to obtain the GCS at discharge from the hospital. See also discharge-GCS (GCS_D). 1 = None, <u>or</u> intubated, or pharmacologically paralyzed 2 = Incomprehensible Sounds (Under 2 years, Agitated/Restless) 3 = Inappropriate Words (Under 2 years, Persistent Crying) 4 = Confused 5 = Oriented U = Unknown
Outcome	F8.2	Motor Response Sub-Score of GCS at Discharge	MOT_RESP_D	motrspd	Sub-score of the Glasgow Coma Score (GCS) indicating patient's <i>best</i> motor response <i>at discharge</i> . It is added to two other sub-scores to obtain the GCS at discharge from the hospital. See also discharge-GCS (GCS_D). 1 = None, <u>or</u> pharmacologically paralyzed 2 = Abnormal Extension 3 = Abnormal Flexion 4 = Withdraws to Pain 5 = Localizes Pain 6 = Obeys Commands U = Unknown
Outcome	F8.2	GCS at Discharge (Outcome GCS)	GCS_D	gcsdisch	Glasgow Coma Score (GCS) is a widely used index that assesses the degree of coma in patients with craniocerebral injuries. The GCS at discharge is calculated by adding the sub-scores of three behavioral responses at discharge: best eye opening (see EYE_OPNG_D), best verbal response (see VER_RESP_D), and best motor response (see MOT_RESP_D). Values range from 3 to 15.
Outcome	F8.3	Payer Source 1	P1_CODE	payers1	The primary source of payment. See also Payer Source 2 (P2_CODE). 00 = None 01 = Medicare 02 = Medicaid - (Washington State Department of Social and Health Services) [DSHS] 03 = Labor and Industries (L&I) – (includes state fund, self-insured employers, and Labor and Industries crime victim's claims) 04 = Health Maintenance Organization (HMO) – (e.g. Kaiser, Group Health, Molina, Basic Health Plan, Healthy Options) 05 = Other Insurance 08 = Self Pay 10 = Commercial Insurance – (e.g. Mutual of Omaha, Safeco) 11 = Health Care Service Contractor – (e.g. Premera Blue Cross, KPS) 12 = Other Government Sponsored Patients – (e.g. TRI-CARE, Indian Health) 13 = Charity Care
Outcome	F8.3	Payer Source 2	P2_CODE	payers2	The secondary source of payment. See also Payer Source 1 (P1_CODE). 00 = None 01 = Medicare 02 = Medicaid - (Washington State Department of Social and Health Services) [DSHS] (Healthy Options) 03 = Labor and Industries (L&I) – (includes state fund, self-insured employers,

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					and Labor and Industries crime victim's claims) <b>04 = Health Maintenance Organization (HMO) – (e.g. Kaiser, Group Health, Molina, Basic Health Plan)</b> <b>05 = Other Insurance</b> <b>08 = Self Pay</b> <b>10 = Commercial Insurance– (e.g. Mutual of Omaha, Safeco)</b> <b>11 = Health Care Service Contractor – (e.g. Premera Blue Cross, KPS)</b> <b>12 = Other Government Sponsored Patients – (e.g. TRI-CARE, Indian Health)</b> <b>13 = Charity Care</b>
Outcome	F8.3	Financial Data Available	FINANCE_YN	finavail	Indicates whether financial data is available at this time. 1 = Yes 2 = No 'U' Unknown '/' Inappropriate
Outcome	F8.3	Total Hospital Charges	HOSP_CHARG	hospchrg	The total charges from this facility for this patient, in dollars & cents, including the decimal point.
Outcome	F8.3	Payer Source 1 Reimbursement	P1_RETURN	pay1reim	The amount received from the primary source of payment, in dollars and cents including the decimal point.
Outcome	F8.3	Payer Source 2 Reimbursement	P2_RETURN	pay2reim	The amount received from the secondary source of payment, in dollars and cents including the decimal point.
Outcome	F8.3	Total Reimbursement	T_RETURN	treimbrs	The total amount received from all sources, including the primary and secondary payers. See Payer Source 1 Reimbursement (P1_RETURN) and Payer Source 2 Reimbursement (P2_RETURN).
Outcome	F8.3	Was the Patient Declared Brain Dead?	<b>BRAIN_DEAD</b> (12/17/2009)	braindea	Indicates whether the patient's medical record states the brain death has occurred as judged by a licensed physician(s) or mid-level provider(s) in accordance with the approved procedures in your facility. 1 = Yes 2 = No
Outcome	F8.3	Autopsy Done	AUTOPSY_YN	autopsy	Indicates whether an autopsy was done. 1 = Yes 2 = No
Outcome	F8.3	Autopsy Results Requested	AUTOPSY_RQ	autopreq	Indicates whether the autopsy results were requested. 1 = Yes 2 = No
Outcome	F8.3	Autopsy Results Received	RESULT_REC	autoprec	Indicates whether the autopsy results were received when requested. 1 = Yes 2 = No
Outcome	F8.3	Organ Donation Evaluation	ORG_REQ	orgreqst	Indicates whether organ donation was requested. 1 = Yes 2 = No
Outcome	F8.3	Organ(s) Donated	ORG_DNR	orgdontd	Indicates which organs were donated. 00 = None 01 = Adrenal Glands 02 = Bone 03 = Bone Marrow 04 = Cartilage 05 = Cornea 06 = Dura Mater

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					07 = Fascialata 08 = Heart 09 = Heart & Lungs 10 = Heart & Valves 11 = Kidneys 12 = Liver 13 = Lungs 14 = Nerves 15 = Pancreas 16 = Skin 17 = Tendons 18 = Multiple Organ Donation 19 = All
Outcome	F8.3	Life Support Withdrawn	LIFE_SPT <b>(12/17/2009)</b>	life_spt	Indicates whether life support therapies required to sustain life in a critically ill or injured patient were withdrawn or discontinued. Therapies can include those such as dialysis, mechanical ventilation, tube or parenteral nutrition, inotropes, vasopressors, cardiopulmonary resuscitation, defibrillation, heart/lung bypass, or artificial pacemaker. 1 = Yes 2 = No
Outcome	F8.3	Cause of Death	C_DEATH		Ten lines designated for a description of patient’s cause of death.
Outcome	F8.4	Discharge Memo	NOTES_DSCH		Ten lines designated for a description of patient’s discharge.
Outcome	F8.8	QA Comments	QA_COMM		Ten lines designated for a description of patient’s injury QA comments.
Diagnoses	F9.1	Injury Severity Score (ISS)	ISS	iss	Note: This field is calculated by Collector. The Injury Severity Score (ISS) is a summary score for traumatic injuries. The ISS is calculated as the square of the AIS. If a patient has more than one AIS, the highest AIS value is selected from each of up to six body regions (head/neck, face, thorax, abdominal and pelvic contents, limbs, and skin), and the three highest of these are squared and summed. If any AIS score is 6, then the ISS is set at 75. Values range from 1 (best) to 75 (almost always fatal). ISS = 75 if patient has severity value of 6 (nearly always fatal), Otherwise, $ISS = (1^{st} \text{ of 3 highest AIS})^2 + (2^{nd} \text{ of 3 highest AIS})^2 + (3^{rd} \text{ of 3 highest AIS})^2$
Diagnoses	F9.1	Received Injury Severity Score (Received ISS)	RECV_ISS	recviss	The Received Injury Severity Score is the ISS that was calculated at the referring hospital if the patient is transferred in from another hospital. See ISS for a complete definition of Injury Severity Score.
Diagnoses	F9.1	TRISS	TRISS	triss	TRISS is a method used to estimate probability of survival ( $P_s$ ) as a function of injury severity (ISS), revised trauma score (RTS), patient age, and type of injury (blunt or penetrating), using a logistic model:  $P_s = 1 / (1 + e^{-b})$ , where $e = 2.7183$ and $b = b_0 + b_1 (RTS) + b_2 (ISS) + b_3 (AGE)$ where $b_0, b_1, b_2,$ and $b_3$ are weights derived from study data; RTS is the Revised Trauma Score on Admission; ISS is the Injury Severity Score; and AGE = 1 if patient age is over 54 years, and AGE = 0 if patient age is 54 years or less. The TRISS regression weights for AIS-90 based norms are defined below <sup>1</sup> : $b_0 \qquad b_1 (RTS) \qquad b_2 (ISS) \qquad b_3 (AGE^*)$

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					<p>Blunt            -0.4499      0.8085      -0.0835      -1.7430</p> <p>Penetrating   -2.5355      0.9934      -0.0651      -1.1360</p> <p>The adult blunt-injured coefficients (AGE=0) are also for both blunt and penetrating-injured pediatric patients (&lt;15 years old).</p> <p>See also RTS_A, ISS, and BLUNT_PENT.</p> <p>Note: TRISS will be calculated only if all components have values.</p> <p>1. Champion, Sacco, Copes: Injury Severity Scoring Again. <i>J Trauma</i> 38:94, 1995.</p>
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Version	AIS_VER	aisver	Indicates the AIS version being used for the AIS - ICD-9-CM mapping. See AIS_01.
Diagnoses	F9.2	ICD-9-CM Code 1	<b>ICD9_01</b>	icd1	1 <sup>st</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 1	<b>AIS_01</b>	ais1	<p>The Abbreviated Injury Scale (AIS) &amp; Body Region value 1 for this patient. The AIS is a list of several hundred injuries, each assigned a severity value of 1 (minor) to 6 (nearly always fatal) and a body region from 1 to 6. The AIS severity values have been "assigned" to ICD-9-CM injury rubrics so that ICD-9-CM injury codes listed in hospital discharge summaries can be mapped to AIS values. These values can then be used in the computation of Injury Severity Score (ISS). See also AIS_VER.</p> <p>1<sup>st</sup> digit = AIS Severity  0 = None  1 = Minor  2 = moderate  3 = serious  4 = Severe  5 = Critical  6 = Maximum (Nearly Always Fatal)  9 = Unknown (Cannot Be Used In Scoring)</p> <p>2<sup>nd</sup> digit = AIS Body Region  1 = head/neck  2 = face  3 = thorax  4 = abdomen and pelvic contents  5 = extremities  6 = external (skin)  9 = Inappropriate</p>
Diagnoses	F9.2	PREDOT Code 1	<b>PREDOT_01</b>	predot1	<p>1<sup>st</sup> of up to 27 Predot codes. The predot code corresponds to the 6 digits preceding the decimal point in the pre-defined associated AIS Code. (The Abbreviated Injury Score is the digit to the right of the decimal point. See <a href="#">AIS_01</a>). The predot code is generated when using the TRICODE option in Collector, which assigns ICD-9-CM, AIS, and Body Regions from text injury descriptions. The following conventions are used in assigning the numerics to specific injury codes:</p> <p>1<sup>st</sup> digit = Body Region  1 = head</p>

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					2 = face 3 = neck 4 = thorax 5 = abdomen 6 = spine 7 = upper extremity 8 = lower extremity 9 = unspecified (including burns/skin)  <b>2<sup>nd</sup> digit = Type of Anatomic Structure</b> 1 = whole area 2 = vessels 3 = nerves 4 = organs (including muscles/ligaments) 5 = skeletal (including joints) 6 = head - LOS (loss of consciousness)  <b>3<sup>rd</sup> &amp; 4<sup>th</sup> digits = Specific Anatomic Structure or Nature</b> <b>Whole Area</b> 02 = skin - abrasion 04 = skin - contusion 06 = skin - laceration 08 = skin - avulsion 10 = amputation 20 = burn 30 = crush 40 = degloving 50 = injury - NFS 60 = penetrating 90 = trauma, other than mechanical <b>Head - LOC</b> 02 = length of LOC 04 = level of consciousness 06 = level of consciousness 08 = level of consciousness 10 = concussion <b>Spine</b> 02 = cervical 04 = thoracic 06 = lumbar <b>Vessels, Nerves, Organs, Bones, Joints</b> Are assigned consecutive two digit numbers beginning with 02  <b>5<sup>th</sup> &amp; 6<sup>th</sup> digits = LEVEL</b> Specific injuries are assigned consecutive two-digit numbers beginning with 02
Diagnoses	F9.2	ICD-9-CM Code 2	<a href="#">ICD9_02</a>	icd2	2 <sup>nd</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 2	AIS_02	ais2	The Abbreviated Injury Scale (AIS) value 2 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 2	PREDOT_02	predot2	2 <sup>nd</sup> predot code. See PREDOT_01 for a complete definition.

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Diagnoses	F9.2	ICD-9-CM Code 3	<b>ICD9_03</b>	icd3	3 <sup>rd</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 3	AIS_03	ais3	The Abbreviated Injury Scale (AIS) value 3 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 3	PREDOT_03	predot3	3 <sup>rd</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 4	<b>ICD9_04</b>	icd4	4 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 4	AIS_04	ais4	The Abbreviated Injury Scale (AIS) value 4 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 4	PREDOT_04	predot4	4 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 5	<b>ICD9_05</b>	icd5	5 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 5	AIS_05	ais5	The Abbreviated Injury Scale (AIS) value 5 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 5	PREDOT_05	predot5	5 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 6	<b>ICD9_06</b>	icd6	6 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 6	AIS_06	ais6	The Abbreviated Injury Scale (AIS) value 6 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 6	PREDOT_06	predot6	6 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 7	<b>ICD9_07</b>	icd7	7 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 7	AIS_07	ais7	The Abbreviated Injury Scale (AIS) value 7 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 7	PREDOT_07	predot7	7 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 8	<b>ICD9_08</b>	icd8	8 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 8	AIS_08	ais8	The Abbreviated Injury Scale (AIS) value 8 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 8	PREDOT_08	predot8	8 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 9	<b>ICD9_09</b>	icd9	9 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale	AIS_09	ais9	The Abbreviated Injury Scale (AIS) value 9 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.

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		(AIS) Value 9			
Diagnoses	F9.2	PREDOT Code 9	PREDOT_09	predot9	9 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 10	<b>ICD9_10</b>	icd10	10 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 10	AIS_10	ais10	The Abbreviated Injury Scale (AIS) value 10 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 10	PREDOT_10	predot10	10 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 11	<b>ICD9_11</b>	icd11	11 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 11	AIS_11	ais11	The Abbreviated Injury Scale (AIS) value 11 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 11	PREDOT_11	predot11	11 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 12	<b>ICD9_12</b>	icd12	12 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 12	AIS_12	ais12	The Abbreviated Injury Scale (AIS) value 12 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 12	PREDOT_12	predot12	12 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 13	<b>ICD9_13</b>	icd13	13 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 13	AIS_13	ais13	The Abbreviated Injury Scale (AIS) value 13 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 13	PREDOT_13	predot13	13 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 14	<b>ICD9_14</b>	icd14	14 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 14	AIS_14	ais14	The Abbreviated Injury Scale (AIS) value 14 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 14	PREDOT_14	predot14	14 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 15	<b>ICD9_15</b>	icd15	15 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 15	AIS_15	ais15	The Abbreviated Injury Scale (AIS) value 15 for this patient. See <a href="#">AIS_01</a> for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 15	PREDOT_15	predot15	15 <sup>th</sup> predot code. See <a href="#">PREDOT_01</a> for a complete definition.

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Diagnoses	F9.2	ICD-9-CM Code 16	<b>ICD9_16</b>	icd16	16 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 16	AIS_16	ais16	The Abbreviated Injury Scale (AIS) value 16 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 16	PREDOT_16	predot16	16 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 17	<b>ICD9_17</b>	icd17	17 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 17	AIS_17	ais17	The Abbreviated Injury Scale (AIS) value 17 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 17	PREDOT_17	predot17	17 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 18	<b>ICD9_18</b>	icd18	18 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 18	AIS_18	ais18	The Abbreviated Injury Scale (AIS) value 18 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 18	PREDOT_18	predot18	18 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 19	<b>ICD9_19</b>	icd19	19 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 19	AIS_19	ais19	The Abbreviated Injury Scale (AIS) value 19 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 19	PREDOT_19	predot19	19 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 20	<b>ICD9_20</b>	icd20	20 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 20	AIS_20	ais20	The Abbreviated Injury Scale (AIS) value 20 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 20	PREDOT_20	predot20	20 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 21	<b>ICD9_21</b>	icd21	21 <sup>st</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 21	AIS_21	ais21	The Abbreviated Injury Scale (AIS) value 21 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 21	PREDOT_21	predot21	21 <sup>st</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 22	<b>ICD9_22</b>	icd22	22 <sup>nd</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale	AIS_22	ais22	The Abbreviated Injury Scale (AIS) value 22 for this patient. See AIS_01 for a complete definition and for values.

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		(AIS) Value 22			
Diagnoses	F9.2	PREDOT Code 22	PREDOT_22	predot22	22 <sup>nd</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 23	<b>ICD9_23</b>	icd23	23 <sup>rd</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 23	AIS_23	ais23	The Abbreviated Injury Scale (AIS) value 23 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 23	PREDOT_23	predot23	23 <sup>rd</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 24	<b>ICD9_24</b>	icd24	24 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 24	AIS_24	ais24	The Abbreviated Injury Scale (AIS) value 24 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 24	PREDOT_24	predot24	24 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 25	<b>ICD9_25</b>	icd25	25 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 25	AIS_25	ais25	The Abbreviated Injury Scale (AIS) value 25 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 25	PREDOT_25	predot25	25 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 26	<b>ICD9_26</b>	icd26	26 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 26	AIS_26	ais26	The Abbreviated Injury Scale (AIS) value 26 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 26	PREDOT_26	predot26	26 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
Diagnoses	F9.2	ICD-9-CM Code 27	<b>ICD9_27</b>	icd27	27 <sup>th</sup> ICD-9-CM injury code for this patient.
Diagnoses	F9.2	Abbreviated Injury Scale (AIS) Value 27	AIS_27	ais27	The Abbreviated Injury Scale (AIS) value 27 for this patient. See AIS_01 for a complete definition and for values.
Diagnoses	F9.2	PREDOT Code 27	PREDOT_27	predot27	27 <sup>th</sup> predot code. See PREDOT_01 for a complete definition.
N/A				issdowncode	The final Injury Severity Score (ISS) for a patient, after the conversion from ISS98 to AIS2005 has been completed.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 1	NT_ICD9_01	nticd1	1 <sup>st</sup> of up to 10 non-trauma ICD-9-CM Codes. These codes allow analysts to account for co-existing medical conditions, using ICD-9-CM codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 2	NT_ICD9_02	nticd2	2 <sup>nd</sup> of up to 10 non-trauma ICD-9-CM Codes.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 3	NT_ICD9_03	nticd3	3 <sup>rd</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 4	NT_ICD9_04	nticd4	4 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 5	NT_ICD9_05	nticd5	5 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 6	NT_ICD9_06	nticd6	6 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 7	NT_ICD9_07	nticd7	7 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 8	NT_ICD9_08	nticd8	8 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 9	NT_ICD9_09	nticd9	9 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.3	Non-Trauma ICD-9-CM Code 10	NT_ICD9_10	nticd10	10 <sup>th</sup> of up to 10 non-trauma ICD-9-CM Codes.
Diagnoses	F9.4	<b>For patients with diagnosis of brain or facial injury</b>	<b>BFI_XFR (12/17/2009)</b>	bfi_xfr	Indicates if the patient was diagnosed with brain or facial injury prior to being transferred to your facility. <a href="#">(List of AIS and ICD Codes used to determine diagnosis)</a> 1 = YES 2 = NO 'U' Unknown '/' Inappropriate
	F9.4	<b>For patients with diagnosis of brain or facial injury</b>	<b>BFI_DX (1/1)</b>	bfi_dx	Was the dx of brain or facial injury based on physician doc or CT report? 1 = YES 2 = NO 'U' Unknown '/' Inappropriate
	F9.4	<b>For patients with diagnosis of brain or facial injury</b>	<b>BFI_MED</b>	bfi_med	Did the pt receive coumadin or warfarin med in the 4 days prior to injury? 1 = YES 2 = NO 'U' Unknown '/' Inappropriate
	F9.4	<b>For patients with diagnosis of brain or facial injury</b>	<b>INR_DM</b>	inr_dm	First INR Performed at Your Hospital - Month Valid values are from 01 to 12.
	F9.4	<b>For patients with diagnosis of brain or facial injury</b>	<b>INR_DD</b>	inr_dd	First INR Performed at Your Hospital – Day Valid values are from 01 to 31.
	F9.4	<b>For patients with</b>	<b>INR_DY</b>	inr_dy	First INR Performed at Your Hospital - Year Valid values are from 1980 to 2099.

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		diagnosis of brain or facial injury			
	F9.4	For patients with diagnosis of brain or facial injury	INR_TH	inr_th	First INR Performed at Your Hospital - Hour Valid values are from 0 to 23.
	F9.4	For patients with diagnosis of brain or facial injury	INR_TM	inr_tm	First INR Performed at Your Hospital - Minute Valid values are from 0 to 59.
	F9.4	For patients with diagnosis of brain or facial injury	INR_RES	inr_res	First International Normalized Ratio (INR) Performed at Your Hospital. Enter the date mm/dd/yyyy, and time hh/mm, of the first measurement of INR performed on this patient at your hospital for this episode of care. The INR is a laboratory measure of the blood's ability to clot compared to an average. It can assist in assessing risk of bleeding and evaluate the effect of some anticoagulants medications. Enter the numerical result of this patient's first INR measured at your hospital for this episode of care. Range of INR values acceptable for this data element is 0 – 60.00
	F9.4	For patients with diagnosis of brain or facial injury	CT_DT_SRC	ct_dt_src	Head CT Performed at Your Hospital - Source of Head CT Date/Time 1 = Nursing Note Documentation 2 = PACS or CT Image 3 = CT Results Report 4 = Other Diagnostic Imaging Dept. Notation 5 = Other
	F9.4	For patients with diagnosis of brain or facial injury	CT_DT_SRCO	ct_dt_srcO	Head CT Performed at Your Hospital - Source of Head CT Date/Time – Other Enter text describing the Source of Head CT Date/Time
	F9.4	For patients with diagnosis of brain or facial injury	ROA_MED	roa_med	What med was first used to reverse anticoagulation? The name of the medication (or blood component) that was first used to reverse anticoagulation for this episode of care at your hospital. Do not address the administration of anticoagulation medications at previous or subsequent hospitals, only at your hospital. Chose only one response. Disregard administration of Vitamin K for this data element. 0 = None of the Medications Below Were Given 1= FFP (Fresh Frozen Plasma) 2= Factor VIIa 3= Prothrombin Complex Concentrate 'U' Unknown
	F9.4	For patients with diagnosis of brain or facial injury	ROA_DM	roa_dm	Month that med was first used to reverse anticoagulation. First Dose - Month Valid values are from 01 to 12.
	F9.4	For patients with diagnosis of brain or	ROA_DD	roa_dd	Day that med was first used to reverse anticoagulation. First Dose – Day Valid values are from 1 to 31.

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		facial injury			
	F9.4	For patients with diagnosis of brain or facial injury	ROA_DY	roa_dy	Year that med was first used to reverse anticoagulation. First Dose - Year Valid values are from 1980 to 2099.
	F9.4	For patients with diagnosis of brain or facial injury	ROA_TH	roa_th	Hour that med was first used to reverse anticoagulation. First Dose - Hour Valid values are from 0 to 23.
	F9.4	For patients with diagnosis of brain or facial injury	ROA_TM	roa_tm	Minute that med was first used to reverse anticoagulation. First Dose - Minute Valid values are from 0 to 59.
	F9.4	For patients with diagnosis of brain or facial injury	ROA_MED_A1	roa_med_a1	What additional medications were used to reverse anticoagulation? 0 = None of the Medications Below Were Given 1 = FFP (Fresh Frozen Plasma) 2 = Factor VIIa 3 = Prothrombin Complex Concentrate 4 = Vitamin K 5 = Other
	F9.4	For patients with diagnosis of brain or facial injury	ROA_MED_A2	roa_med_a2	What additional medications were used to reverse anticoagulation? 0 = None of the Medications Below Were Given 1 = FFP (Fresh Frozen Plasma) 2 = Factor VIIa 3 = Prothrombin Complex Concentrate 4 = Vitamin K 5 = Other
	F9.4	For patients with diagnosis of brain or facial injury	ROA_MED_A3	roa_med_a3	What additional medications were used to reverse anticoagulation? 0 = None of the Medications Below Were Given 1 = FFP (Fresh Frozen Plasma) 2 = Factor VIIa 3 = Prothrombin Complex Concentrate 4 = Vitamin K 5 = Other
	F9.4	For patients with diagnosis of brain or facial injury	ROA_MED_A4	roa_med_a4	What additional medications were used to reverse anticoagulation? 0 = None of the Medications Below Were Given 1 = FFP (Fresh Frozen Plasma) 2 = Factor VIIa 3 = Prothrombin Complex Concentrate 4 = Vitamin K 5 = Other
	F9.4	For patients with diagnosis of brain or facial injury	ROA_MED_AS	roa_med_as	What additional medications were used to reverse anticoagulation? - Other Enter text description of other medication used.
	F10.7	WTR Inclusion Criteria Met	IS_WTR_2009	doh3	Does the patient meet the WA Trauma Registry Inclusion Criteria? Derived by Collector and auto populated.

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Reserved Data	F10.1	Washington State Reserved Element 10	<b>HOSP01</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 11	<b>HOSP02</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 12	<b>HOSP03</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 13	<b>HOSP04</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 14	<b>HOSP05</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 15	<b>HOSP06</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 16	<b>HOSP07</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 17	<b>HOSP08</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 18	<b>HOSP09</b>		User-defined field. It is currently undefined.
Reserved Data	F10.1	Washington State Reserved Element 19	<b>HOSP10</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 1	<b>HOSP11</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 2	<b>HOSP12</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 3	<b>HOSP13</b>		User-defined field. It is currently undefined.

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Reserved Data	F10.2	Washington State Reserved Element 4	<b>HOSP14</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 5	<b>HOSP15</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 6	<b>HOSP16</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 7	<b>HOSP17</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 8	<b>HOSP18</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 9	<b>HOSP19</b>		User-defined field. It is currently undefined.
Reserved Data	F10.2	Washington State Reserved Element 20	<b>HOSP20</b>		User-defined field. It is currently undefined.
Scores	N/A	A-Score Component of Anatomic Profile	A_SCORE	ascore	<p>Indicates the “A” component of the Anatomic Profile (AP), a score that was developed to compare groups of patients with similar injuries and is comprised of four scores (A, B, C, D). The first three components summarize all serious (AIS &gt; 2) injuries to (A) the head/brain and spinal cord, (B) the thorax and front of the neck, and (C) all remaining serious injuries, and are used in the calculation of ASCOT. (D) is a summary measure of all non-serious injuries &amp; is not used in the calculation.</p> <p>AP component “A” is computed by taking the square root of the sum of squares of AIS scores for injury in AP component A. For example, a patient with two AIS 5 injuries and one AIS 3 injury in AP component A (injuries to the head/brain and spinal cord) has an A score of 7.68 [<math>\sqrt{(5^2 + 5^2 + 3^2)}</math>]. If no serious injuries to the head/brain and spinal cord were sustained, A = 0.</p>
Scores	N/A	ASCOT (A Severity Characterization of Trauma) Probability of Survival	ASCOT	ascot	<p>ASCOT combines emergency department admission values (<b>as coded for RTS</b>) of the Glasgow Coma Scale (G), systolic blood pressure (S), and respiratory rate (R) with 3 AP components and patient age<sup>1</sup>.</p> $ASCOT P_s = 1/(1 + e^{-k})$ <p>Where k = k<sub>0</sub> + k<sub>1</sub>G + k<sub>2</sub>S + k<sub>3</sub>R + k<sub>4</sub>A + k<sub>5</sub>B + k<sub>6</sub>C + k<sub>7</sub>AGE and                      G = coded value of ED Glasgow Coma Scale (see G_SCORE_A),                      S = coded value of ED systolic blood pressure (see S_SCORE_A),                      R = coded value of ED respiratory rate (see R_SCORE_A),                      A = Anatomic Profile (AP) “A” component (see A_SCORE),                      B = Anatomic Profile (AP) “B” component (see B_SCORE),</p>

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					<p>C = Anatomic Profile (AP) “C” component (see C_SCORE).</p> <p>(Note: The D component of AP was not significant in predicting P<sub>s</sub>)</p> <p>AGE      Ages (years)</p> <p>0        0 - 54</p> <p>1        55 - 64</p> <p>2        65 - 74</p> <p>3        75 - 84</p> <p>4        &gt;=85</p> <p>ASCOT</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Model Weights</th> <th style="text-align: center;">Blunt</th> <th style="text-align: center;">Penetrating</th> </tr> </thead> <tbody> <tr><td>k<sub>0</sub></td><td style="text-align: center;">-1.1570</td><td style="text-align: center;">-1.1350</td></tr> <tr><td>k<sub>1</sub></td><td style="text-align: center;">0.7705</td><td style="text-align: center;">1.0626</td></tr> <tr><td>k<sub>2</sub></td><td style="text-align: center;">0.6583</td><td style="text-align: center;">0.3638</td></tr> <tr><td>k<sub>3</sub></td><td style="text-align: center;">0.2810</td><td style="text-align: center;">0.3332</td></tr> <tr><td>k<sub>4</sub></td><td style="text-align: center;">-0.3002</td><td style="text-align: center;">-0.3702</td></tr> <tr><td>k<sub>5</sub></td><td style="text-align: center;">-0.1961</td><td style="text-align: center;">-0.2053</td></tr> <tr><td>k<sub>6</sub></td><td style="text-align: center;">-0.2086</td><td style="text-align: center;">-0.3188</td></tr> <tr><td>k<sub>7</sub></td><td style="text-align: center;">-0.6355</td><td style="text-align: center;">-0.8365</td></tr> </tbody> </table> <p>1. <a href="#">Trauma</a>, 3<sup>rd</sup> Edition, Moore, Mattox, Feliciano, 1996, pp. 61-62.</p>	Model Weights	Blunt	Penetrating	k <sub>0</sub>	-1.1570	-1.1350	k <sub>1</sub>	0.7705	1.0626	k <sub>2</sub>	0.6583	0.3638	k <sub>3</sub>	0.2810	0.3332	k <sub>4</sub>	-0.3002	-0.3702	k <sub>5</sub>	-0.1961	-0.2053	k <sub>6</sub>	-0.2086	-0.3188	k <sub>7</sub>	-0.6355	-0.8365
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Scores	N/A	B-Score Component of Anatomic Profile	B_SCORE	bscore	<p>Indicates the “B” component of the Anatomic Profile (AP), a score that was developed to compare groups of patients with similar injuries and is comprised of four scores (A, B, C, D). The first three components summarize all serious (AIS &gt; 2) injuries to (A) the head/brain and spinal cord, <b>(B) the thorax and front of the neck</b>, and (C) all remaining serious injuries, and are used in the calculation of ASCOT. (D) is a summary measure of all non-serious injuries &amp; is not used in the calculation</p> <p>AP component “B” is computed by taking the square root of the sum of squares of AIS scores for injury in AP component A. For example, a patient with two AIS 5 injuries and one AIS 3 injury in AP component B (injuries to the thorax and front of the neck) has a B score of 7.68 [<math>\sqrt{(5^2 + 5^2 + 3^2)}</math>]. If no injuries to the thorax and front of the neck were sustained, B = 0.</p>																											
Scores	N/A	C-Score Component of Anatomic Profile	C_SCORE	cscore	<p>Indicates the “C” component of the Anatomic Profile (AP), a score that was developed to compare groups of patients with similar injuries and is comprised of four scores (A, B, C, D). The first three components summarize all serious (AIS &gt; 2) injuries to (A) the head/brain and spinal cord, (B) the thorax and front of the neck, and <b>(C) all remaining serious injuries</b>, and are used in the calculation of ASCOT. (D) is a summary measure of all non-serious injuries &amp; is not used in the calculation</p> <p>AP component “C” is computed by taking the square root of the sum of squares of AIS scores for injury in AP component C. For example, a patient with two AIS 5 injuries and one AIS 3 injury in AP component C (all remaining injuries) has a C score of 7.68 [<math>\sqrt{(5^2 + 5^2 + 3^2)}</math>]. If no remaining serious injuries were sustained, C = 0.</p>																											
Scores	N/A	D-Score Component of Anatomic Profile	D_SCORE	dscore	<p>Indicates the “D” component of the Anatomic Profile (AP), a score that was developed to compare groups of patients with similar injuries and is comprised of four scores (A, B, C, D). The first three components summarize all serious (AIS &gt; 2) injuries to (A) the head/brain and spinal cord, (B) the thorax and front of the neck, and</p>																											

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					(C) all remaining serious injuries, and are used in the calculation of ASCOT. <b>(D) is a summary measure of all non-serious injuries and is not used in the calculation of ASCOT.</b>  AP component “D” is computed by taking the square root of the sum of squares of AIS scores for injury in AP component D - all non-serious injuries.
Outcome	N/A	Discharge Status	DIS_STATUS	died	Indicates whether the patient lived, died, or whether the information is missing.  6 = lived 7 =died U = unknown
Scores	N/A	MTOS Etiology	ETIOLOGY	etiology	Etiology categorization of cause of injury for the Major Trauma Outcome Study (MTOS) using defined E-Code ranges and the variables E_CODE and E_CODE2.  1 = Motor Vehicle Accident 2 = Motorcycle Accident 3 = Pedestrian Accident 4 = Gunshot Wound 5 = Stabbing 6 = Fall 7 = Other
Scores	N/A	MTOS Primary Etiology	ET_MTOS1	etiology1	Primary etiology categorization of cause of injury for the Major Trauma Outcome Study (MTOS) using defined E-Code ranges and the variables E_CODE and E_CODE2.  1 = Motor Vehicle Accident 2 = Motorcycle Accident 3 = Pedestrian Accident 4 = Gunshot Wound 5 = Stabbing 6 = Fall 7 = Other
Scores	N/A	MTOS Primary Etiology – Other	ET_MTOSO1	etiology2	Primary other etiology categorization of cause of injury for the Major Trauma Outcome Study (MTOS) using defined E-Code ranges and the variables E_CODE and E_CODE2.  1 = Motor Vehicle Accident 2 = Motorcycle Accident 3 = Pedestrian Accident 4 = Gunshot Wound 5 = Stabbing 6 = Fall 70 = Hot/Corrosive Material Injury 71 = Pedal Cycle Accident 72 = Air/Water Craft 73 = Fire/Flame 74 = Struck By/Against and Object/Person 75 = Caught Between Objects 76 = Machinery/Powered Tools 77 = Fight/Assault/Abuse

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					78 = Animal Related 79 = Other
Scores	N/A	MTOS Secondary Etiology	ET_MTOS2		Secondary etiology categorization of cause of injury for the Major Trauma Outcome Study (MTOS) using defined E-Code ranges and the variables E_CODE and E_CODE2. See MTOS Primary Etiology (ET_MTOS1) for values.
Scores	N/A	MTOS Secondary Etiology – Other	ET_MTOSO2		Secondary other etiology categorization of cause of injury for the Major Trauma Outcome Study (MTOS) using defined E-Code ranges and the variables E_CODE and E_CODE2. See MTOS Primary Etiology - Other (ET_MTOSO1) for values.
Scores	N/A	ACE Primary Etiology	ET_ECAT1	etiology3	Primary etiology categorization of cause of injury for Alternate Classification of E-Code (ACE) using defined E-Code ranges and the variables E_CODE and E_CODE2.  11 = MV Traffic 12 = Motorcycle 13 = Pedestrian 14 = Pedal cyclist 15 = Other Transport 16 = Falls 17 = Fire/Burn 18 = Inhalation 19 = Machinery 20 = Natural/Environmental 21 = Overexertion 22 = Poisoning 23 = Submersion/Suffocation/Foreign Bodies 24 = Struck By/Against 25 = GSW 26 = Stabbing 27 = Other Suicides 28 = Other Assault 29 = Other Cause – Specified 30 = Other Cause – Unspecified
Scores	N/A	ACE Primary Etiology – Detailed	ET_ECATD1		Primary detailed etiology categorization of cause of injury for Alternate Classification of E-Code (ACE) using defined E-Code ranges and the variables E_CODE and E_CODE2.  1110 = MV Traffic – Unintentional 1120 = MV Traffic – Intentional, Self-Inflicted 1130 = MV Traffic – Undetermined Intent 1210 = Motorcycle – MV Traffic 1220 = Motorcycle – Other 1310 = Pedestrian – MV Traffic 1320 = Pedestrian – Other 1410 = Pedal cyclist – MV Traffic 1420 = Pedal cyclist – Other 1510 = Other Transport – Railway 1520 = Other Transport – Water Transport 1531 = Other Transport – Air and Space – Unintentional 1532 = Other Transport – Air and Space – Intentional, Self-Inflicted 1533 = Other Transport – Air and Space – Undetermined Intent

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

- **Pediatric** refers to patients 14 years old or younger.
- **Not Applicable** (Enter '/', shows on screen as 'n/a') means the information for a field does not apply to this patient (example: Pediatric trauma scores for adult patients). Also, see special instructions for use of Not Applicable in specific fields.
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					1541 = Other Transport – Other – Unintentional 1542 = Other Transport – Other – Intentional 1610 = Falls – Unintentional 1620 = Falls – Intentional, Assault 1630 = Falls – Intentional, Self-Inflicted 1640 = Falls – Undetermined Intent 1711 = Fire/Burn – Fire/Flame – Unintentional 1712 = Fire/Burn – Fire/Flame – Intentional, Assault 1713 = Fire/Burn – Fire/Flame – Intentional, Self-Inflicted 1714 = Fire/Burn – Fire/Flame – Undetermined Intent 1721 = Fire/Burn – Hot Object/Substance – Unintentional 1722 = Fire/Burn – Hot Object/Substance – Intentional, Assault 1723 = Fire/Burn – Hot Object/Substance – Intentional, Self-Inflicted 1724 = Fire/Burn – Hot Object/Substance – Undetermined Intent 1731 = Fire/Burn – Electric Current – Unintentional 1732 = Fire/Burn – Electric Current – Intentional, Self-Inflicted 1733 = Fire/Burn – Electric Current – Undetermined Intent 1810 = Inhalation – Unintentional 1820 = Inhalation – Intentional, Self-Inflicted 1900 = Machinery 2010 = Natural/Environmental – Unintentional 2020 = Natural/Environmental – Intentional, Self-Inflicted 2030 = Natural/Environmental – Undetermined Intent 2040 = Natural/Environmental – Bites and Stings 2100 = Overexertion 2211 = Poisoning – Drugs/Medicinal/Biological – Unintentional 2212 = Poisoning – Drugs/Medicinal/Biological – Intentional, Assault 2213 = Poisoning – Drugs/Medicinal/Biological – Intentional, Self-Inflicted 2214 = Poisoning – Drugs/Medicinal/Biological – Undetermined Intent 2221 = Poisoning – Not Drug Related – Unintentional 2222 = Poisoning – Not Drug Related – Intentional, Assault 2223 = Poisoning – Not Drug Related – Intentional, Self-Inflicted 2224 = Poisoning – Not Drug Related – Undetermined Intent 2225 = Poisoning – Not Drug Related – Legal Intervention 2310 = Submersion/Suffocation/Foreign Bodies – Unintentional 2320 = Submersion/Suffocation/Foreign Bodies – Intentional, Assault 2330 = Submersion/Suffocation/Foreign Bodies – Intentional, Self-Inflicted 2340 = Submersion/Suffocation/Foreign Bodies – Undetermined Intent 2410 = Struck By/Against – Falling Object 2420 = Struck By/Against – In Sports 2431 = Struck By/Against – Other – Unintentional 2432 = Struck By/Against – Other – Intentional 2433 = Struck By/Against – Other – Legal Intervention 2510 = GSW – Unintentional 2520 = GSW – Intentional, Assault 2530 = GSW – Intentional, Self-Inflicted 2540 = GSW – Undetermined Intent 2550 = GSW – Legal Intervention 2610 = Stabbing – Unintentional 2620 = Stabbing – Intentional, Assault 2630 = Stabbing – Intentional, Self-Inflicted 2640 = Stabbing – Undetermined Intent 2650 = Stabbing – Legal Intervention 2700 = Other Suicides

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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>
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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					2800 = Other Assaults 2900 = Other Cause – Specified 3000 = Other Cause - Unspecified
Scores	N/A	ACE Secondary Etiology	ET_ECAT2		Secondary etiology categorization of cause of injury for Alternate Classification of E-Code (ACE) using defined E-Code ranges and the variables E_CODE and E_CODE2. See ACE Primary Etiology (ET_ECAT1) for values.
Scores	N/A	ACE Secondary Etiology – Detailed	ET_ECATD2		Secondary detailed etiology categorization of cause of injury for Alternate Classification of E-Code (ACE) using defined E-Code ranges and the variables E_CODE and E_CODE2. See ACE Primary Etiology – Detailed (ET_ECATD1) for values.
Scores	N/A	Primary Etiology by E-Code Groups	ET_EC1	etiology4	Primary etiology by E-Code Groups categorization using defined E-Code ranges and the variables E_CODE and E_CODE2.  1 = Railway Accidents 2 = Motor Vehicle Traffic 3 = Motor Vehicle Nontraffic 4 = Other Road Vehicle 5 = Pedal Cycles 6 = Water Transport 7 = Air & Space Transport 8 = Vehicle Accidents NEC 9 = Falls 10 = Fire and Flames 11 = Hot Substance or Object 12 = Drowning and Suffocation 13 = Homicide & Assault 14 = Suicide & Self-Inflicted 15 = Undetermined if Accidental or SI 16 = Cutting or Piercing 17 = Firearm Missile 18 = Natural & Environmental Factors 19 = Foreign Bodies 20 = Struck by Object or Persons in Sports 21 = Caused by Machinery 22 = Legal Interventions 23 = Operations of War 24 = Other Accidents 25 = Terrorism 99 = Other
Scores	N/A	Primary Etiology by E-Code Groups – Detailed	ET_ECD1		Primary detailed etiology by E-Code Groups categorization using defined E-Code ranges and the variables E_CODE and E_CODE2.  10 = Railway Accidents 20 = Motor Vehicle Traffic 30 = Motor Vehicle Nontraffic 40 = Other Road Vehicle 50 = Pedal Cycles 60 = Water Transport 70 = Air & Space Transport 80 = Vehicle Accidents NEC 91 = Falls – Playground

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					92 = Falls – Sports 93 = Falls – Other 100 = Fire and Flames 110 = Hot Substance or Object 120 = Drowning and Suffocation 130 = Homicide & Assault 140 = Suicide & Self-Inflicted 150 = Undetermined if Accidental or SI 160 = Cutting or Piercing 170 = Firearm Missile 180 = Natural & Environmental Factors 190 = Foreign Bodies 200 = Struck by Object or Persons in Sports 211 = Caused by Machinery – Agriculture 212 = Caused by Machinery - Other 220 = Legal Interventions 230 = Operations of War 241 = Other Accidents – Falling Objects 242 = Other Accidents – By Object or Person 243 = Other Accidents – Caught In or Between 244 = Other Accidents – Explosion of Pressure Vehicle 245 = Other Accidents – Explosive Material 246 = Other Accidents – Electric Current 247 = Other Accidents – Radiation/Exposure 248 = Other Accidents – Over-exertion 249 = Other Accidents – Other/Unspecified Accident 250 = Terrorism 990 = Other
Scores	N/A	Secondary Etiology by E-Code Groups	ET_EC2		Secondary etiology by E-Code Groups categorization using defined E-Code ranges and the variables E_CODE and E_CODE2. See Primary Etiology by E-Code Groups ( <a href="#">ET_EC1</a> ) for values.
Scores	N/A	Secondary Etiology by E-Code Groups - Detailed	ET_ECD2		Secondary detailed etiology by E-Code Groups categorization using defined E-Code ranges and the variables E_CODE and E_CODE2. See Primary Etiology by E-Code Groups – Detailed ( <a href="#">ET_ECD1</a> ) for values.
Scores	N/A	Functional Independence Measure (FIM)	FIM	fim	The Functional Independence Measure (FIM) was developed to characterize patient disability resulting from trauma or non-trauma causes. Three FIM components are chosen to provide a useful summary measure of patient disability at discharge from acute care: self feeding, expression, and locomotion. The sum of the three components determines the FIM Score. See also D_DISABL_F, D_DISABL_E, and D_DISABL_L.
Scores	N/A	ASCOT Component G	G_SCORE_A	gscorea	Indicates the value of emergency department GCS, <b>coded for RTS</b> . It is used in the computation of ASCOT. See also RTS_A.
Scores	N/A	Highest Overall Abbreviated Injury Score (AIS)	MAXIMUM_AIS	maxais	Indicates the highest AIS score for all six body regions. MAXIMUM_AIS is used in the calculation of ISS. Values range from 1(minor) to 6 (nearly always fatal). If the highest overall AIS score is a 6, the ISS is automatically assigned a maximum value of 75. See also AIS_01, MAXIMUM_AIS_1, and ISS.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
Scores	N/A	Highest Abbreviated Injury Score (AIS) For Body Region 1	MAXIMUM_AIS_1	maxais1	The highest AIS score for body region 1: head/neck. The highest AIS scores for all six defined body regions are used in the calculation of Injury Severity Score (ISS). Values range from 1 (minor) to 6 (nearly always fatal) and are based upon which AIS Version is being used. See also AIS_VERSION, AIS_01, and ISS.
Scores	N/A	Highest Abbreviated Injury Score (AIS) For Body Region 2	MAXIMUM_AIS_2	maxais2	The highest AIS score for body region 2: face. See MAXIMUM_AIS_1 for a complete definition and values.
Scores	N/A	Highest Abbreviated Injury Score (AIS) For Body Region 3	MAXIMUM_AIS_3	maxais3	The highest AIS score for body region 3: thorax. See MAXIMUM_AIS_1 for a complete definition and values.
Scores	N/A	Highest Abbreviated Injury Score (AIS) For Body Region 4	MAXIMUM_AIS_4	maxais4	The highest AIS score for body region 4: abdominal or pelvic contents. See MAXIMUM_AIS_1 for a complete definition and values.
Scores	N/A	Highest Abbreviated Injury Score (AIS) For Body Region 5	MAXIMUM_AIS_5	maxais5	The highest AIS score for body region 5: extremities or pelvic girdle. See MAXIMUM_AIS_1 for a complete definition and values.
Scores	N/A	Highest Abbreviated Injury Score (AIS) For Body Region 6	MAXIMUM_AIS_6	maxais6	The highest AIS score for body region 6: external structures. See MAXIMUM_AIS_1 for a complete definition and values.
Scores	N/A	ASCOT Component R	R_SCORE_A	rscorea	Indicates the value of emergency department respiratory rate, <b>coded for RTS</b> . It is used in the computation of ASCOT. See also ASCOT.
Scores	N/A	ASCOT Component S	S_SCORE_A	sscorea	Indicates the value of emergency department systolic blood pressure, <b>coded for RTS</b> . It is used in the computation of ASCOT. See also ASCOT.
Pre-H/Transfer	N/A	Scene Time in Minutes	SCENE_TIME	scenetim	The elapsed time (in minutes) between arrival of the 1 <sup>st</sup> unit at the scene and departure of the patient from the scene. Valid values are from 000 to 999.
ED Data	N/A	Temperature in Centigrade	TEMP_C	tempc	<i>Calculated</i> temperature in <i>Centigrade</i> if the recorded temperature (TEMP_E) is entered in Fahrenheit.
ED Data	N/A	Temperature in Fahrenheit	TEMP_F	tempf	<i>Calculated</i> temperature in <i>Fahrenheit</i> if the recorded temperature (TEMP_E) is entered in Centigrade.
ED Data	NA	ED Length of Stay	ED_HOURS	edhours	A Collector computed data element defined as the elapsed time (in hours) from ED Arrival to ED Discharge.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		(Hours)			
ED Data	NA	ED Length of Stay (Minutes)	ED_MINUTES	ed_minutes	A Collector computed data element defined as the elapsed time (in minutes) from ED Arrival to ED Discharge.
Outcomes	NA	Hospital Days	HOSP_DAYS	hosp_days	A Collector computed data element defined as the number of days spent in the hospital beginning with ED Arrival and ending with Hospital Discharge. The day of arrival is counted as a Hospital Day; the day of discharge is not. DOA's are assigned 0 Hospital Days. <ul style="list-style-type: none"> <li>• Examples: <ol style="list-style-type: none"> <li>1) A patient that arrived on 01/01/2004 and was discharged on 01/01/2004 will have 1 hospital day.</li> <li>2) A patient that arrived on 01/01/2004 and was discharged on 01/03/2004 will have 2 hospital days.</li> </ol> </li> </ul>
Outcomes	NA	In-Patient Hospital Days	ED_INPATIENT_DAYS		A Collector computed data element defined as the number of days spent in the hospital beginning with ED Arrival and ending with Hospital Discharge. The calculation is similar to Hospital Days, except In-patient Hospital Days are 0 for all patients that die in (including DOA's) or are discharged from the ED.
Outcomes	NA	In-Patient Days	INPATIENT_DAYS		A Collector computed data element defined as the number of days spent in the hospital beginning with ED Discharge and ending with Hospital Discharge. All patients that die in (including DOA's) or are discharged from the ED are assigned 0 In-patient Days.
Outcomes	NA	Hospital Length of Stay (Hours)	HOSP_HOURS		A Collector computed data element defined as the number of hours from ED Arrival to Hospital Discharge. Both dates and times are needed for this calculation.
Outcomes	NA	Hospital Length of Stay (Minutes)	HOSP_MINUTES		A Collector computed data element defined as the number of minutes from ED Arrival to Hospital Discharge. Both dates and times are needed for this calculation.
Outcomes	NA	In-Patient Length of Stay (Hours)	INPATIENT_HOURS		A Collector computed data element defined as the number of hours from ED Discharge to Hospital Discharge. Both dates and times are needed for this calculation.
Outcomes	NA	In-Patient Length of Stay (Minutes)	INPATIENT_MINUTES		A Collector computed data element defined as the number of minutes from ED Discharge to Hospital Discharge. Both dates and times are needed for this calculation.

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
	N/A	ED Admit Day of Week	DAY_AS_TEXT(EDA_DATE)	dayofweek	0= Sunday 1= Monday 2= Tuesday 3= Wednesday 4= Thursday 5= Friday 6= Saturday
		Admitted	N/A	admitted	0= No 1= Yes
		Age Category	N/A	agecat	1= Age 0-4 2= Age 5-14 3= Age 15-24 4= Age 25-34 5= Age35-64 6= Age 65+
		HWS Age Category	N/A	agehws	1= Age <1 2= Age 1-4 3= Age 5-14 4= Age 15-24 5= Age 25-34 6= Age 35-44 7= Age 45-54 8= Age 55-64 9= Age 65-74 10= Age 75-84 11= Age 85+
		All 27 ICD9 Variable are Missing	N/A	allmiss	0= No 1= Yes
		Amputation Above Wrist or Ankle?	N/A	amputate	0= No 1= Yes
		Burn >20% of Body?	N/A	burn20	0= No 1= Yes
			N/A	disisc9	
		Meets DOH WTR old inclusion criteria	N/A	dohcase1	0= No 1= Yes
		Meets DOH WTR new inclusion criteria	N/A	dohcase2	0= No 1= Yes
		EDA Quarter	N/A	edaqtr	1= January - March 2= April - June 3= July - September 4= October - December

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		ED Length of Stay (minutes)	N/A	edlos	
		Expected Death from TRISS	N/A	expected	0= Unexpected 1= Expected
		Flail Chest?	N/A	flail	0= No 1= Yes
		Full Activation?	N/A	fullteam	0= No 1= Yes
		Intent	N/A	intent	0= Unintentional 1= Suicide 2= Assault 3= Uncertain
		ISS Grouping	N/A	issgroup	1= ISS 0-8 2= ISS 9-15 3= ISS 16-75
		ISS Group Detailed	N/A	issgrp2	1= ISS 0-8 2= ISS 9-15 3= ISS 16-24 4= ISS 25-34 5= ISS 35-44 6= ISS 45+
		Joint Designated	N/A	joint	0= No 1= Yes
		Peds Patient?	N/A	kid	0= No 1= Yes
		State Designated Level of Care	N/A	level	1= Level 1 2= Level 2 3= Level 3 4= Level 4 5= Level 5
		Liver Procedures	N/A	liver	
		Liver Injury Diagnosis	N/A	liverdx	0= No 1= Yes
		Length of Stay (hours)	N/A	los	
		Hospital LOS in Days	N/A	loshosp	
		Low Blood Pressure	N/A	lowbp	0= No 1= Yes

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
		Major Injury Dx	N/A	majinjdx	0= No 1= Yes
		Major TBI Diagnosis? (AIS>=4)	N/A	majtbidx	0= No 1= Yes
		Mechanism (by Ecode)	N/A	mechcat	1= Cut/Pierce 2= Falls 3= Fire/Flame/Heat 4= Firearm 5= Machinery 6= MV Occupant 7= MV Motorcyclist 8= MV Bicyclist 9= MV Pedestrian 10= MV Unspecified 11= Bicyclist, other 12= Pedestrian, other 13= Transport, other 14= Struck By/Against 15= Other 16= MV All 17= Drowning 18= Suffocation
		Moderate TBI Diagnosis (AIS=3)	N/A	modtbidx	0= No 1= Yes
		Pediatric Designation Level	N/A	pedslevel	0= Not Peds Designated 1= Peds Level 1 2= Peds Level 2 3= Peds Level 3
		Penetrating Step 2	N/A	penetrat	0= No 1= Yes
		POV Transfer In	N/A	povin	
		POV Transfer from ED	N/A	povout	
		Referring Facility Region	N/A	refregion	1= Central 2= North 3= North Central 4= Northwest 5= South Central 6= Southwest 7= East 8= West 9 = Out of State

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
			N/A	regfrom	1= Central 2= North 3= North Central 4= Northwest 5= South Central 6= Southwest 7= East 8= West
		State Designated Region	N/A	region	1= Central 2= North 3= North Central 4= Northwest 5= South Central 6= Southwest 7= East 8= West
		SCI Dx	N/A	scidx	0= No 1= Yes
		Spleen Procedures	N/A	spleen	0= No 1= Yes
		Splen Injury Diagnosis	N/A	spleendx	0= No 1= Yes
		Splenectomy Done?	N/A	splenectomy	0= No 1= Yes
		Step 1 Criteria Met	N/A	step1	0= No 1= Yes
		Step 2 Criteria Met	N/A	step2	0= No 1= Yes
		Traumatic Brain Injury	N/A	tbidx	0= No 1= Yes
		Internal Injury of Thorax	N/A	thoraxdx	0= No 1= Yes
		Location of Death	N/A	wheredied	1= DOA 2= ED 3= OR 4= Ward or Other In-house
		How DOH Inclusion Criteria was/wasn't Met	N/A	whydohc1	1= DOA 2= Died in ER or Hospital 3= Transfer In 4= Transfer Out 5= Trauma ICD-9-CM & LOS>48 Hours

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Section	Screen	Data Element Description	Collector Data Name	STATA/SAS Name	Definition
					6= Meets ICD-9-CM & Pediatric <15 10= Missing ICD9s But LOS <=48 11= Met ICD-9-CM But Not LOS 12= Didn't Meet ICD-9-CM 13= CHMC Not Designated 14= Isolated Hip Fracture 15= GSW w/<48 Hr LOS 16= Can't Determine: Transfer-In/Out But Missing ICD9s 17= Can't Determine: Missing LOS 18= Can't Determine: Missing All ICD9s 19= Can't Determine: Missing ICD9s & LOS 20= Trauma Team Activation ONLY
		How DOH Inclusion Criteria was/wasn't Met	N/A	whydohc2	1= DOA 2= Died in ER or Hospital 3= Transfer In 4= Transfer Out 5= Trauma ICD-9-CM & LOS>48 Hours 6= Meets ICD-9-CM & Pediatric <15 9= POV Transfer Out 10= Missing ICD9s But LOS <=48 Hrs 11= Met ICD-9-CM But Not LOS 12= Didn't Meet ICD-9-CM 13= CHMC Not Designated 14= Isolated Hip Fracture 15= GSW w/<48 Hr LOS 16= Can't Determine: Transfer-In/Out But Missing ICD9s 17= Can't Determine: Missing LOS 18= Can't Determine: Missing All ICD9s 19= Can't Determine: Missing ICD9s & LOS 20= Trauma Team Activation ONLY

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Revised June 2011

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## Appendix I

### E849.x

#### Place of Occurrence details

The E849.x series is for use to denote the place where an injury or poisoning occurred.

#### E849.0 HOME

- Apartment
- Boardinghouse
- Farmhouse
- Home premises
- House (residential)
- Noninstitutional place of residence
- Private
  - Driveway
  - Garage
  - Garden
  - Home
  - Walk
- Swimming Pool in private house or garden
- Yard of Home
- **Excludes**
  - home under construction but not yet occupied (E849.3)
  - institutional place of residence (E849.7)

#### E849.1 FARM

- Buildings
- Land under cultivation
- **Excludes** farmhouse and home premises of farm (E849.0)

#### E849.2 MINE and QUARRY

- Gravel pit
- Sand pit
- Tunnel under construction

#### E849.3 INDUSTRIAL PLACE AND PREMISES

- Building under construction
- Dockyard
- Dry dock
- Factory
  - Building
  - Premises
- Garage (place of work)
- Industrial yard
- Loading platform (factory) (store)
- Plant, Industrial
- Railway yard

- Shop (place of work)
- Warehouse
- Workhouse

#### E849.4 PLACE FOR RECREATION AND SPORT

- Amusement park
- Baseball field
- Basketball court
- Beach resort
- Cricket ground
- Fives court
- Football field
- Golf course
- Gymnasium
- Hockey field
- Holiday camp
- Ice palace
- Lake resort
- Mountain resort
- Playground, including school playground
- Public park
- Racecourse
- Resort, Not Otherwise Specified
- Riding school
- Rifle range
- Seashore resort
- Skating rink
- Sports ground
- Sports palace
- Stadium
- Swimming pool, public
- Tennis court
- Vacation resort

**Excludes** that in private house or garden (E849.0)

#### E849.5 STREET AND HIGHWAY

**E849.6 PUBLIC BUILDING:** Building (including adjacent grounds) used by the general public or by a particular group of the public, such as:

- Airport
- Bank
- Café

- Casino
- Church
- Cinema
- Clubhouse
- Courthouse
- Dance hall
- Garage building (for car storage)
- Hotel
- Market (grocery or other commodity)
- Movie house
- Music hall
- Nightclub
- Office
- Office building
- Opera house
- Post office
- Public hall
- Radio broadcasting station
- Restaurant
- School (state) (public) (private)
- Shop, commercial
- Station (bus) (railway)
- Store
- Theater
- **Excludes**
  - home garage (E849.0)
  - Industrial building or workplace (E849.3)

#### E849.7 RESIDENTIAL INSTITUTION

- Children’s home
- Dormitory
- Hospital
- Jail
- Old people’s home
- Orphanage
- Prison
- Reform school

#### E849.8 Other specified places

- Beach, Not Otherwise Specified
- Canal
- Caravan site, Not Otherwise Specified
- Derelict house

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- Desert
- Dock
- Forest
- Harbor
- Hill
- Lake, Not Otherwise Specified
- Mountain
- Parking lot

- Parking place
- Pond or pool (natural)
- Prairie
- Public place, Not Otherwise Specified
- Railway line
- Reservoir
- River
- Sea

- Seashore, Not Otherwise Specified
- Stream
- Swamp
- Trailer court
- Woods

## **E849.9 UNSPECIFIED PLACE**

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## Appendix II

### External Cause of Injury (Ecode)

800.0	Railway Collision w/ Rolling Stock - Railway Employee	806.8	Oth Spec Railway Accident - Oth Person
800.1	Railway Collision w/ Rolling Stock - Railway Passenger	806.9	Oth Spec Railway Accident - Unspec Person
800.2	Railway Collision w/ Rolling Stock - Pedestrian	807.0	Railway, Unspec Nature - Railway Employee
800.3	Railway Collision w/ Rolling Stock - Pedal Cyclist	807.1	Railway, Unspec Nature - Railway Passenger
800.8	Railway Collision w/ Rolling Stock - Oth Person	807.2	Railway, Unspec Nature - Pedestrian
800.9	Railway Collision w/ Rolling Stock - Unspec Person	807.3	Railway, Unspec Nature - Pedal Cyclist
801.0	Railway Collision w/ Oth Object - Railway Employee	807.8	Railway, Unspec Nature - Oth Person
801.1	Railway Collision w/ Oth Object - Railway Passenger	807.9	Railway, Unspec Nature - Unspec Person
801.2	Railway Collision w/ Oth Object - Pedestrian	810.0	MVA Traffic, Collision w/ Train - Driver of MV, Non MC
801.3	Railway Collision w/ Oth Object - Pedal Cyclist	810.1	MVA Traffic, Collision w/ Train - Passenger in MV, Non MC
801.8	Railway Collision w/ Oth Object - Oth Person	810.2	MVA Traffic, Collision w/ Train - Motorcyclist
801.9	Railway Collision w/ Oth Object - Unspec Person	810.3	MVA Traffic, Collision w/ Train - Passenger on Motorcycle
802.0	Railway Derailment w/o Prior Collision - Railway Employee	810.4	MVA Traffic, Collision w/ Train - Occupant of Streetcar
802.1	Railway Derailment w/o Prior Collision - Railway Passenger	810.5	MVA Traffic, Collision w/ Train - Occupant of Animal Veh
802.2	Railway Derailment w/o Prior Collision - Pedestrian	810.6	MVA Traffic, Collision w/ Train - Pedal Cyclist
802.3	Railway Derailment w/o Prior Collision - Pedal Cyclist	810.7	MVA Traffic, Collision w/ Train - Pedestrian
802.8	Railway Derailment w/o Prior Collision - Oth Person	810.8	MVA Traffic, Collision w/ Train - Oth Person
802.9	Railway Derailment w/o Prior Collision - Unspec Person	810.9	MVA Traffic, Collision w/ Train - Unspec Person
803.0	Railway Explosion, Fire, or Burning - Railway Employee	811.0	MVA Traffic, Re-entr Collision w/ MV - Driver of MV, Non MC
803.1	Railway Explosion, Fire, or Burning - Railway Passenger	811.1	MVA Traffic, Re-entr Collision w/ MV - Passenger in MV, Non MC
803.2	Railway Explosion, Fire, or Burning - Pedestrian	811.2	MVA Traffic, Re-entr Collision w/ MV - Motorcyclist
803.3	Railway Explosion, Fire, or Burning - Pedal Cyclist	811.3	MVA Traffic, Re-entr Collision w/ MV - Passenger on Motorcycle
803.8	Railway Explosion, Fire, or Burning - Oth Person	811.4	MVA Traffic, Re-entr Collision w/ MV - Occupant of Streetcar
803.9	Railway Explosion, Fire, or Burning - Unspec Person	811.5	MVA Traffic, Re-entr Collision w/ MV - Occupant of Animal Veh
804.0	Fall In, On, or From Railway Train - Railway Employee	811.6	MVA Traffic, Re-entr Collision w/ MV - Pedal Cyclist
804.1	Fall In, On, or From Railway Train - Railway Passenger	811.7	MVA Traffic, Re-entr Collision w/ MV - Pedestrian
804.2	Fall In, On, or From Railway Train - Pedestrian	811.8	MVA Traffic, Re-entr Collision w/ MV - Oth Person
804.3	Fall In, On, or From Railway Train - Pedal Cyclist	811.9	MVA Traffic, Re-entr Collision w/ MV - Unspec Person
804.8	Fall In, On, or From Railway Train - Oth Person	812.0	Oth MVA Traffic, Collision w/ MV - Driver of MV, Non MC
804.9	Fall In, On, or From Railway Train - Unspec Person	812.1	Oth MVA Traffic, Collision w/ MV - Passenger in MV, Non MC
805.0	Railway, Hit by Rolling Stock - Railway Employee	812.2	Oth MVA Traffic, Collision w/ MV - Motorcyclist
805.1	Railway, Hit by Rolling Stock - Railway Passenger	812.3	Oth MVA Traffic, Collision w/ MV - Passenger on Motorcycle
805.2	Railway, Hit by Rolling Stock - Pedestrian	812.4	Oth MVA Traffic, Collision w/ MV - Occupant of Streetcar
805.3	Railway, Hit by Rolling Stock - Pedal Cyclist	812.5	Oth MVA Traffic, Collision w/ MV - Occupant of Animal Veh
805.8	Railway, Hit by Rolling Stock - Oth Person	812.6	Oth MVA Traffic, Collision w/ MV - Pedal Cyclist
805.9	Railway, Hit by Rolling Stock - Unspec Person	812.7	Oth MVA Traffic, Collision w/ MV - Pedestrian
806.0	Oth Spec Railway Accident - Railway Employee		
806.1	Oth Spec Railway Accident - Railway Passenger		
806.2	Oth Spec Railway Accident - Pedestrian		
806.3	Oth Spec Railway Accident - Pedal Cyclist		

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812.8	Oth MVA Traffic, Collision w/ MV - Oth Person	816.1	MVA Traffic, Loss Control-No Collision - Passenger in MV, Non MC
812.9	Oth MVA Traffic, Collision w/ MV - Unspec Person	816.2	MVA Traffic, Loss Control-No Collision - Motorcyclist
813.0	MVA Traffic, Collision w/ Oth Veh - Driver of MV, Non MC	816.3	MVA Traffic, Loss Control-No Collision - Passenger on Motorcycle
813.1	MVA Traffic, Collision w/ Oth Veh - Passenger in MV, Non MC	816.4	MVA Traffic, Loss Control-No Collision - Occupant of Streetcar
813.2	MVA Traffic, Collision w/ Oth Veh - Motorcyclist	816.5	MVA Traffic, Loss Control-No Collision - Occupant of Animal Veh
813.3	MVA Traffic, Collision w/ Oth Veh - Passenger on Motorcycle	816.6	MVA Traffic, Loss Control-No Collision - Pedal Cyclist
813.4	MVA Traffic, Collision w/ Oth Veh - Occupant of Streetcar	816.7	MVA Traffic, Loss Control-No Collision - Pedestrian
813.5	MVA Traffic, Collision w/ Oth Veh - Occupant of Animal Veh	816.8	MVA Traffic, Loss Control-No Collision - Oth Person
813.6	MVA Traffic, Collision w/ Oth Veh - Pedal Cyclist	816.9	MVA Traffic, Loss Control-No Collision - Unspec Person
813.7	MVA Traffic, Collision w/ Oth Veh - Pedestrian	817.0	Noncollision MVA Traffic, Board/Alight - Driver of MV, Non MC
813.8	MVA Traffic, Collision w/ Oth Veh - Oth Person	817.1	Noncollision MVA Traffic, Board/Alight - Passenger in MV, Non MC
813.9	MVA Traffic, Collision w/ Oth Veh - Unspec Person	817.2	Noncollision MVA Traffic, Board/Alight - Motorcyclist
814.0	MVA Traffic, Collision w/ Pedestrian - Driver of MV, Non MC	817.3	Noncollision MVA Traffic, Board/Alight - Passenger on Motorcycle
814.1	MVA Traffic, Collision w/ Pedestrian - Passenger in MV, Non MC	817.4	Noncollision MVA Traffic, Board/Alight - Occupant of Streetcar
814.2	MVA Traffic, Collision w/ Pedestrian - Motorcyclist	817.5	Noncollision MVA Traffic, Board/Alight - Occupant of Animal Veh
814.3	MVA Traffic, Collision w/ Pedestrian - Passenger on Motorcycle	817.6	Noncollision MVA Traffic, Board/Alight - Pedal Cyclist
814.4	MVA Traffic, Collision w/ Pedestrian - Occupant of Streetcar	817.7	Noncollision MVA Traffic, Board/Alight - Pedestrian
814.5	MVA Traffic, Collision w/ Pedestrian - Occupant of Animal Veh	817.8	Noncollision MVA Traffic, Board/Alight - Oth Person
814.6	MVA Traffic, Collision w/ Pedestrian - Pedal Cyclist	817.9	Noncollision MVA Traffic, Board/Alight - Unspec Person
814.7	MVA Traffic, Collision w/ Pedestrian - Pedestrian	818.0	Oth Noncollision MVA Traffic - Driver of MV, Non MC
814.8	MVA Traffic, Collision w/ Pedestrian - Oth Person	818.1	Oth Noncollision MVA Traffic - Passenger in MV, Non MC
814.9	MVA Traffic, Collision w/ Pedestrian - Unspec Person	818.2	Oth Noncollision MVA Traffic – Motorcyclist
815.0	Oth MVA Traffic, Highway Collision - Driver of MV, Non MC	818.3	Oth Noncollision MVA Traffic - Passenger on Motorcycle
815.1	Oth MVA Traffic, Highway Collision - Passenger in MV, Non MC	818.4	Oth Noncollision MVA Traffic - Occupant of Streetcar
815.2	Oth MVA Traffic, Highway Collision - Motorcyclist	818.5	Oth Noncollision MVA Traffic - Occupant of Animal Veh
815.3	Oth MVA Traffic, Highway Collision - Passenger on Motorcycle	818.6	Oth Noncollision MVA Traffic - Pedal Cyclist
815.4	Oth MVA Traffic, Highway Collision - Occupant of Streetcar	818.7	Oth Noncollision MVA Traffic - Pedestrian
815.5	Oth MVA Traffic, Highway Collision - Occupant of Animal Veh	818.8	Oth Noncollision MVA Traffic - Oth Person
815.6	Oth MVA Traffic, Highway Collision - Pedal Cyclist	818.9	Oth Noncollision MVA Traffic - Unspec Person
815.7	Oth MVA Traffic, Highway Collision - Pedestrian	819.0	MVA Traffic, Unspec Nature - Driver of MV, Non MC
815.8	Oth MVA Traffic, Highway Collision - Oth Person	819.1	MVA Traffic, Unspec Nature - Passenger in MV, Non MC
815.9	Oth MVA Traffic, Highway Collision - Unspec Person	819.2	MVA Traffic, Unspec Nature - Motorcyclist
816.0	MVA Traffic, Loss Control-No Collision - Driver of MV, Non MC	819.3	MVA Traffic, Unspec Nature - Passenger on Motorcycle
		819.4	MVA Traffic, Unspec Nature - Occupant of Streetcar

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819.5	MVA Traffic, Unspec Nature - Occupant of Animal Veh	823.0	Oth MVA N-Traffic Collision,Stat Object - Driver of MV, Non MC
819.6	MVA Traffic, Unspec Nature - Pedal Cyclist	823.1	Oth MVA N-Traffic Collision,Stat Object - Passenger in MV, Non MC
819.7	MVA Traffic, Unspec Nature - Pedestrian	823.2	Oth MVA N-Traffic Collision,Stat Object - Motorcyclist
819.8	MVA Traffic, Unspec Nature - Oth Person	823.3	Oth MVA N-Traffic Collision,Stat Object - Passenger on Motorcycle
819.9	MVA Traffic, Unspec Nature - Unspec Person	823.4	Oth MVA N-Traffic Collision,Stat Object - Occupant of Streetcar
820.0	N-traffic Accident, Snow MV - Driver of MV, Non MC	823.5	Oth MVA N-Traffic Collision,Stat Object - Occupant of Animal Veh
820.1	N-traffic Accident, Snow MV - Passenger in MV, Non MC	823.6	Oth MVA N-Traffic Collision,Stat Object - Pedal Cyclist
820.2	N-traffic Accident, Snow MV - Motorcyclist	823.7	Oth MVA N-Traffic Collision,Stat Object - Pedestrian
820.3	N-traffic Accident, Snow MV - Passenger on Motorcycle	823.8	Oth MVA N-Traffic Collision,Stat Object - Oth Person
820.4	N-traffic Accident, Snow MV - Occupant of Streetcar	823.9	Oth MVA N-Traffic Collision,Stat Object - Unspec Person
820.5	N-traffic Accident, Snow MV - Occupant of Animal Veh	824.0	Oth MVA N-Traffic, Board/Alight - Driver of MV, Non MC
820.6	N-traffic Accident, Snow MV - Pedal Cyclist	824.1	Oth MVA N-Traffic, Board/Alight - Passenger in MV, Non MC
820.7	N-traffic Accident, Snow MV - Pedestrian	824.2	Oth MVA N-Traffic, Board/Alight - Motorcyclist
820.8	N-traffic Accident, Snow MV - Oth Person	824.3	Oth MVA N-Traffic, Board/Alight - Passenger on Motorcycle
820.9	N-traffic Accident, Snow MV - Unspec Person	824.4	Oth MVA N-Traffic, Board/Alight - Occupant of Streetcar
821.0	N-traffic Accident, Oth Off-Road MV - Driver of MV, Non MC	824.5	Oth MVA N-Traffic, Board/Alight - Occupant of Animal Veh
821.1	N-traffic Accident, Oth Off-Road MV - Passenger in MV, Non MC	824.6	Oth MVA N-Traffic, Board/Alight - Pedal Cyclist
821.2	N-traffic Accident, Oth Off-Road MV - Motorcyclist	824.7	Oth MVA N-Traffic, Board/Alight - Pedestrian
821.3	N-traffic Accident, Oth Off-Road MV - Passenger on Motorcycle	824.8	Oth MVA N-Traffic, Board/Alight - Oth Person
821.4	N-traffic Accident, Oth Off-Road MV - Occupant of Streetcar	824.9	Oth MVA N-Traffic, Board/Alight - Unspec Person
821.5	N-traffic Accident, Oth Off-Road MV - Occupant of Animal Veh	825.0	Oth MVA N-Traffic, Oth & Unspec Nature - Driver of MV, Non MC
821.6	N-traffic Accident, Oth Off-Road MV - Pedal Cyclist	825.1	Oth MVA N-Traffic, Oth & Unspec Nature - Passenger in MV, Non MC
821.7	N-traffic Accident, Oth Off-Road MV - Pedestrian	825.2	Oth MVA N-Traffic, Oth & Unspec Nature - Motorcyclist
821.8	N-traffic Accident, Oth Off-Road MV - Oth Person	825.3	Oth MVA N-Traffic, Oth & Unspec Nature - Passenger on Motorcycle
821.9	N-traffic Accident, Oth Off-Road MV - Unspec Person	825.4	Oth MVA N-Traffic, Oth & Unspec Nature - Occupant of Streetcar
822.0	Oth MVA N-traffic Collision,Move Object - Driver of MV, Non MC	825.5	Oth MVA N-Traffic, Oth & Unspec Nature - Occupant of Animal Veh
822.1	Oth MVA N-traffic Collision,Move Object - Passenger in MV, Non MC	825.6	Oth MVA N-Traffic, Oth & Unspec Nature - Pedal Cyclist
822.2	Oth MVA N-traffic Collision,Move Object - Motorcyclist	825.7	Oth MVA N-Traffic, Oth & Unspec Nature - Pedestrian
822.3	Oth MVA N-traffic Collision,Move Object - Passenger on Motorcycle	825.8	Oth MVA N-Traffic, Oth & Unspec Nature - Oth Person
822.4	Oth MVA N-traffic Collision,Move Object - Occupant of Streetcar		
822.5	Oth MVA N-traffic Collision,Move Object - Occupant of Animal Veh		
822.6	Oth MVA N-traffic Collision,Move Object - Pedal Cyclist		
822.7	Oth MVA N-traffic Collision,Move Object - Pedestrian		
822.8	Oth MVA N-traffic Collision,Move Object - Oth Person		
822.9	Oth MVA N-traffic Collision,Move Object - Unspec Person		

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825.9	Oth MVA N-Traffic, Oth & Unspec Nature - Unspec Person	831.6	H2OCraft Accident, Oth Injury - Dockers/Stevedores
826.0	Pedal Cycle Accident - Pedestrian	831.7	H2OCraft Accident, Oth Injury - Military watercraft, any type
826.1	Pedal Cycle Accident - Pedal Cyclist	831.8	H2OCraft Accident, Oth Injury - Oth Person
826.2	Pedal Cycle Accident - Rider of Animal	831.9	H2OCraft Accident, Oth Injury - Unspec Person
826.3	Pedal Cycle Accident - Occupant of Animal-Drawn Veh	832.0	H2O Transport, Oth Submersion/Drown - Small Boater (Unpowered)
826.4	Pedal Cycle Accident - Occupant of Streetcar	832.1	H2O Transport, Oth Submersion/Drown - Small Boater (Powered)
826.8	Pedal Cycle Accident - Oth Person	832.2	H2O Transport, Oth Submersion/Drown - Crew of Oth H2OCraft
826.9	Pedal Cycle Accident - Unspec Person	832.3	H2O Transport, Oth Submersion/Drown - Pass of Oth H2OCraft
827.0	Animal-Drawn Veh Accident - Pedestrian	832.4	H2O Transport, Oth Submersion/Drown - H2O Skier
827.2	Animal-Drawn Veh Accident - Rider of Animal	832.5	H2O Transport, Oth Submersion/Drown - Swimmer
827.3	Animal-Drawn Veh Accident - Occupant of Animal-Drawn Veh	832.6	H2O Transport, Oth Submersion/Drown - Dockers/Stevedores
827.4	Animal-Drawn Veh Accident - Occupant of Streetcar	832.7	H2O Transport, Oth Submersion/Drown - Military watercraft, any type
827.8	Animal-Drawn Veh Accident - Oth Person	832.8	H2O Transport, Oth Submersion/Drown - Oth Person
827.9	Animal-Drawn Veh Accident - Unspec Person	832.9	H2O Transport, Oth Submersion/Drown - Unspec Person
828.0	Accident, Ridden Animal - Pedestrian	833.0	H2O Transport, Stairs/Ladders Fall - Small Boater (Unpowered)
828.2	Accident, Ridden Animal - Rider of Animal	833.1	H2O Transport, Stairs/Ladders Fall - Small Boater (Powered)
828.3	Accident, Ridden Animal - Occupant of Animal-Drawn Veh	833.2	H2O Transport, Stairs/Ladders Fall - Crew of Oth H2OCraft
828.4	Accident, Ridden Animal - Occupant of Streetcar	833.3	H2O Transport, Stairs/Ladders Fall - Pass of Oth H2OCraft
828.8	Accident, Ridden Animal - Oth Person	833.4	H2O Transport, Stairs/Ladders Fall - H2O Skier
828.9	Accident, Ridden Animal - Unspec Person	833.5	H2O Transport, Stairs/Ladders Fall - Swimmer
829.0	Oth Road Veh Accidents - Pedestrian	833.6	H2O Transport, Stairs/Ladders Fall - Dockers/Stevedores
829.4	Oth Road Veh Accidents - Occupant of Streetcar	833.7	H2O Transport, Stairs/Ladders Fall - Military watercraft, any type
829.8	Oth Road Veh Accidents - Oth Person	833.8	H2O Transport, Stairs/Ladders Fall - Oth Person
829.9	Oth Road Veh Accidents - Unspec Person	833.9	H2O Transport, Stairs/Ladders Fall - Unspec Person
830.0	H2OCraft Accident, Submersion - Small Boater (Unpowered)	834.0	H2O Transport, Oth Multi-level Fall - Small Boater (Unpowered)
830.1	H2OCraft Accident, Submersion - Small Boater (Powered)	834.1	H2O Transport, Oth Multi-level Fall - Small Boater (Powered)
830.2	H2OCraft Accident, Submersion - Crew of Oth H2OCraft	834.2	H2O Transport, Oth Multi-level Fall - Crew of Oth H2OCraft
830.3	H2OCraft Accident, Submersion - Pass of Oth H2OCraft	834.3	H2O Transport, Oth Multi-level Fall - Pass of Oth H2OCraft
830.4	H2OCraft Accident, Submersion - H2O Skier	834.4	H2O Transport, Oth Multi-level Fall - H2O Skier
830.5	H2OCraft Accident, Submersion - Swimmer	834.5	H2O Transport, Oth Multi-level Fall - Swimmer
830.6	H2OCraft Accident, Submersion - Dockers/Stevedores	834.6	H2O Transport, Oth Multi-level Fall - Dockers/Stevedores
830.7	H2OCraft Accident, Submersion - Military watercraft, any type	834.7	H2O Transport, Oth Multi-level Fall - Military watercraft, any type
830.8	H2OCraft Accident, Submersion - Oth Person		
830.9	H2OCraft Accident, Submersion - Unspec Person		
831.0	H2OCraft Accident, Oth Injury - Small Boater (Unpowered)		
831.1	H2OCraft Accident, Oth Injury - Small Boater (Powered)		
831.2	H2OCraft Accident, Oth Injury - Crew of Oth H2OCraft		
831.3	H2OCraft Accident, Oth Injury - Pass of Oth H2OCraft		
831.4	H2OCraft Accident, Oth Injury - H2O Skier		
831.5	H2OCraft Accident, Oth Injury - Swimmer		

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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834.8	H2O Transport, Oth Multi-level Fall - Oth Person	838.0	Oth & Unspec H2O Transport Accident - Small Boater (Unpowered)
834.9	H2O Transport, Oth Multi-level Fall - Unspec Person	838.1	Oth & Unspec H2O Transport Accident - Small Boater (Powered)
835.0	H2O Transport, Oth & Unspec Fall - Small Boater (Unpowered)	838.2	Oth & Unspec H2O Transport Accident - Crew of Oth H2OCraft
835.1	H2O Transport, Oth & Unspec Fall - Small Boater (Powered)	838.3	Oth & Unspec H2O Transport Accident - Pass of Oth H2OCraft
835.2	H2O Transport, Oth & Unspec Fall - Crew of Oth H2OCraft	838.4	Oth & Unspec H2O Transport Accident - H2O Skier
835.3	H2O Transport, Oth & Unspec Fall - Pass of Oth H2OCraft	838.5	Oth & Unspec H2O Transport Accident - Swimmer
835.4	H2O Transport, Oth & Unspec Fall - H2O Skier	838.6	Oth & Unspec H2O Transport Accident - Dockers/Stevedores
835.5	H2O Transport, Oth & Unspec Fall - Swimmer	838.7	Oth & Unspec H2O Transport Accident - Military watercraft, any type
835.6	H2O Transport, Oth & Unspec Fall - Dockers/Stevedores	838.8	Oth & Unspec H2O Transport Accident - Oth Person
835.7	H2O Transport, Oth & Unspec Fall - Military watercraft, any type	838.9	Oth & Unspec H2O Transport Accident - Unspec Person
835.8	H2O Transport, Oth & Unspec Fall - Oth Person	840.0	Powered Aircraft, Tkoff/Land - Spacecraft Occupant
835.9	H2O Transport, Oth & Unspec Fall - Unspec Person	840.1	Powered Aircraft, Tkoff/Land - Military Aircraft Occupant
836.0	H2O Transport, Machinery Accident - Small Boater (Unpowered)	840.2	Powered Aircraft, Tkoff/Land - Ground-Ground Commercial Crew
836.1	H2O Transport, Machinery Accident - Small Boater (Powered)	840.3	Powered Aircraft, Tkoff/Land - Ground-Ground Commercial Occupant
836.2	H2O Transport, Machinery Accident - Crew of Oth H2OCraft	840.4	Powered Aircraft, Tkoff/Land - Ground-Air Commercial Occupant
836.3	H2O Transport, Machinery Accident - Pass of Oth H2OCraft	840.5	Powered Aircraft, Tkoff/Land - Oth Powered Aircraft Occupant
836.4	H2O Transport, Machinery Accident - H2O Skier	840.6	Powered Aircraft, Tkoff/Land - Unpowered Aircraft Occupant
836.5	H2O Transport, Machinery Accident - Swimmer	840.7	Powered Aircraft, Tkoff/Land - Parachutist
836.6	H2O Transport, Machinery Accident - Dockers/Stevedores	840.8	Powered Aircraft, Tkoff/Land - Ground Crew/Airline Employee
836.7	H2O Transport, Machinery Accident - Military watercraft, any type	840.9	Powered Aircraft, Tkoff/Land - Oth Person
836.8	H2O Transport, Machinery Accident - Oth Person	841.0	Oth & Unspec Powered Aircraft - Spacecraft Occupant
836.9	H2O Transport, Machinery Accident - Unspec Person	841.1	Oth & Unspec Powered Aircraft - Military Aircraft Occupant
837.0	H2OCraft Explosion, Fire, or Burning - Small Boater (Unpowered)	841.2	Oth & Unspec Powered Aircraft - Ground-Ground Commercial Crew
837.1	H2OCraft Explosion, Fire, or Burning - Small Boater (Powered)	841.3	Oth & Unspec Powered Aircraft - Ground-Ground Commercial Occupant
837.2	H2OCraft Explosion, Fire, or Burning - Crew of Oth H2OCraft	841.4	Oth & Unspec Powered Aircraft - Ground-Air Commercial Occupant
837.3	H2OCraft Explosion, Fire, or Burning - Pass of Oth H2OCraft	841.5	Oth & Unspec Powered Aircraft - Oth Powered Aircraft Occupant
837.4	H2OCraft Explosion, Fire, or Burning - H2O Skier	841.6	Oth & Unspec Powered Aircraft - Unpowered Aircraft Occupant
837.5	H2OCraft Explosion, Fire, or Burning - Swimmer	841.7	Oth & Unspec Powered Aircraft - Parachutist
837.6	H2OCraft Explosion, Fire, or Burning - Dockers/Stevedores	841.8	Oth & Unspec Powered Aircraft - Ground Crew/Airline Employee
837.7	H2OCraft Explosion, Fire, or Burning - Military watercraft, any type		
837.8	H2OCraft Explosion, Fire, or Burning - Oth Person		
837.9	H2OCraft Explosion, Fire, or Burning - Unspec Person		

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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841.9	Oth & Unspec Powered Aircraft - Oth Person	850.7	Acc Poison - Oth Non-Narcotic Analgesics
842.6	Unpowered Aircraft - Unpowered Aircraft Occupant	850.8	Acc Poison - Oth Spec Analgesics and Antipyretics
842.7	Unpowered Aircraft - Parachutist	850.9	Acc Poison - Unspec Analgesic or Antipyretic
842.8	Unpowered Aircraft - Ground Crew/Airline Employee	851.0	Acc Poison - Barbiturates
842.9	Unpowered Aircraft - Oth Person	852.0	Acc Poison - Chloral Hydrate Group
843.0	Fall In/ On/ From Aircraft - Spacecraft Occupant	852.1	Acc Poison - Paraldehyde
843.1	Fall In/ On/ From Aircraft - Military Aircraft Occupant	852.2	Acc Poison - Bromine Compounds
843.2	Fall In/ On/ From Aircraft - Ground-Ground Commercial Crew	852.3	Acc Poison - Methaqualone Compounds
843.3	Fall In/ On/ From Aircraft - Ground-Ground Commercial Occupant	852.4	Acc Poison - Glutethimide Group
843.4	Fall In/ On/ From Aircraft - Ground-Air Commercial Occupant	852.5	Acc Poison - Mixed Sedatives, NEC
843.5	Fall In/ On/ From Aircraft - Oth Powered Aircraft Occupant	852.8	Acc Poison - Oth Spec Sedatives and Hypnotics
843.6	Fall In/ On/ From Aircraft - Unpowered Aircraft Occupant	852.9	Acc Poison - Unspec Sedative or Hypnotic
843.7	Fall In/ On/ From Aircraft - Parachutist	853.0	Acc Poison - Phenothiazine-based Tranquilizers
843.8	Fall In/ On/ From Aircraft - Ground Crew/Airline Employee	853.1	Acc Poison - Butyrophenone-based Tranquilizers
843.9	Fall In/ On/ From Aircraft - Oth Person	853.2	Acc Poison - Benzodiazepine-based Tranquilizers
844.0	Oth Spec Air Transport - Spacecraft Occupant	853.8	Acc Poison - Oth Spec Tranquilizers
844.1	Oth Spec Air Transport - Military Aircraft Occupant	853.9	Acc Poison - Unspec Tranquilizer
844.2	Oth Spec Air Transport - Ground-Ground Commercial Crew	854.0	Acc Poison - Antidepressants
844.3	Oth Spec Air Transport - Ground-Ground Commercial Occupant	854.1	Acc Poison - Psychodysleptics [hallucinogens]
844.4	Oth Spec Air Transport - Ground-Air Commercial Occupant	854.2	Acc Poison - Psychostimulants
844.5	Oth Spec Air Transport - Oth Powered Aircraft Occupant	854.3	Acc Poison - Central Nervous System Stimulants
844.6	Oth Spec Air Transport - Unpowered Aircraft Occupant	854.8	Acc Poison - Oth Psychotropic Agents
844.7	Oth Spec Air Transport - Parachutist	855.0	Acc Poison - Anticonvulsant & Anti-Parkinsonism Drugs
844.8	Oth Spec Air Transport - Ground Crew/Airline Employee	855.1	Acc Poison - Oth Central Nervous System Depressants
844.9	Oth Spec Air Transport - Oth Person	855.2	Acc Poison - Local Anesthetics
845.0	Spacecraft Accident - Spacecraft Occupant	855.3	Acc Poison - Parasympathomimetics [cholinergics]
845.8	Spacecraft Accident - Ground Crew/Airline Employee	855.4	Acc Poison - Parasympatholytics/Spasmolytics
845.9	Spacecraft Accident - Oth Person	855.5	Acc Poison - Sympathomimetics [adrenergics]
846.0	Powered Veh w/in Premises of Industrial/Commercial Establishment	855.6	Acc Poison - Sympatholytics [antiadrenergics]
847.0	Accidents Involving Cable Cars Not Running on Rails	855.8	Acc Poison - Oth Spec Drugs on Central/Autonomic Nervous System
848.0	Accidents Involving Oth Veh, NEC	855.9	Acc Poison - Unspec Drugs on Central/Autonomic Nervous System
850.0	Acc Poison - Heroin	856.0	Acc Poison - Antibiotics
850.1	Acc Poison - Methadone	857.0	Acc Poison - Oth Anti-Infectives
850.2	Acc Poison - Oth Opiates and Related Narcotics	858.0	Acc Poison - Hormones and Synthetic Substitutes
850.3	Acc Poison - Salicylates	858.1	Acc Poison - Primarily Systemic Agents
850.4	Acc Poison - Aromatic Analgesics, NEC	858.2	Acc Poison - Agents Mainly Affecting Blood Constituents
850.5	Acc Poison - Pyrazole Derivatives	858.3	Acc Poison - Agents Mainly Affecting Cardiovascular System
850.6	Acc Poison - Antirheumatics [antiphlogistics]	858.4	Acc Poison - Agents Mainly Affecting Gastrointestinal System
		858.5	Acc Poison - H2O/Mineral/Uric Acid Metabolism Drugs
		858.6	Acc Poison - Agents act on Smooth, Skeletal Muscles & Respiratory
		858.7	Acc Poison -
		858.8	Acc Poison - Oth Spec Drugs

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858.9	Acc Poison - Unspec Drug	866.3	Acc Poison - Arsenic and Its Compounds and Fumes
860.0	Acc Poison - Alcoholic Beverages	866.4	Acc Poison - Oth Metals and Their Compounds and Fumes
860.1	Acc Poison - Oth/Unspec Ethyl Alcohol and Its Products	866.5	Acc Poison - Plant Foods and Fertilizers
860.2	Acc Poison - Methyl Alcohol	866.6	Acc Poison - Glues and Adhesives
860.3	Acc Poison - Isopropyl Alcohol	866.7	Acc Poison - Cosmetics
860.4	Acc Poison - Fusel Oil	866.8	Acc Poison - Oth Spec Solid or Liquid Substances
860.8	Acc Poison - Oth Spec Alcohols	866.9	Acc Poison - Unspec Solid or Liquid Substance
860.9	Acc Poison - Unspec Alcohol	867.0	Acc Poison by Gas Distributed by Pipeline
861.0	Acc Poison - Synthetic Detergents and Shampoos	868.0	Acc Poison - Liquid Petroleum Gas in Mobile Containers
861.1	Acc Poison - Soap Products	868.1	Acc Poison - Oth and Unspec Utility Gas
861.2	Acc Poison - Polishes	868.2	Acc Poison - Motor Veh Exhaust Gas
861.3	Acc Poison - Oth Cleansing and Polishing Agents	868.3	Acc Poison - Carbon Monoxide-Incomplete Combustion Domestic Fuel
861.4	Acc Poison - Disinfectants	868.8	Acc Poison - Carbon Monoxide From Oth Sources
861.5	Acc Poison - Lead Paints	868.9	Acc Poison - Unspec Carbon Monoxide
861.6	Acc Poison - Oth Paints and Varnishes	869.0	Acc Poison - Nitrogen Oxides
861.9	Acc Poison - Unspec	869.1	Acc Poison - Sulfur Dioxide
862.0	Acc Poison - Petroleum Solvents	869.2	Acc Poison - Freon
862.1	Acc Poison - Petroleum Fuels and Cleaners	869.3	Acc Poison - Lacrimogenic Gas [tear gas]
862.2	Acc Poison - Lubricating Oils	869.4	Acc Poison - Second Hand Tobacco Smoke
862.3	Acc Poison - Petroleum Solids	869.8	Acc Poison - Oth Spec Gases and Vapors
862.4	Acc Poison - Oth Spec Solvents	869.9	Acc Poison - Unspec Gases and Vapors
862.9	Acc Poison - Unspec Solvent	870.0	Cut/Hemorrhage During - Surgical Operation
863.0	Acc Poison - Insecticides of Organochlorine Compounds	870.1	Cut/Hemorrhage During - Infusion/Transfusion
863.1	Acc Poison - Insecticides of Organophosphorus Compounds	870.2	Cut/Hemorrhage During - Kidney Dialysis/Oth Perfusion
863.2	Acc Poison - Carbamates	870.3	Cut/Hemorrhage During - Injection/Vaccination
863.3	Acc Poison - Mixtures of Insecticides	870.4	Cut/Hemorrhage During - Endoscopic Examination
863.4	Acc Poison - Oth and Unspec Insecticides	870.5	Cut/Hemorrhage During - Aspiration/Puncture/Catheterization
863.5	Acc Poison - Herbicides	870.6	Cut/Hemorrhage During - Heart Catheterization
863.6	Acc Poison - Fungicides	870.7	Cut/Hemorrhage During - Administration of Enema
863.7	Acc Poison - Rodenticides	870.8	Cut/Hemorrhage During - Oth Spec Medical Care
863.8	Acc Poison - Fumigants	870.9	Cut/Hemorrhage During - Unspec Medical Care
863.9	Acc Poison - Oth and Unspec	871.0	Foreign Object Left In Body- Surgical Operation
864.0	Acc Poison - Corrosive Aromatics	871.1	Foreign Object Left In Body- Infusion/Transfusion
864.1	Acc Poison - Acids	871.2	Foreign Object Left In Body- Kidney Dialysis/Oth Perfusion
864.2	Acc Poison - Caustic Alkalis	871.3	Foreign Object Left In Body- Injection/Vaccination
864.3	Acc Poison - Oth Spec Corrosives and Caustics	871.4	Foreign Object Left In Body- Endoscopic Examination
864.4	Acc Poison - Unspec Corrosives and Caustics	871.5	Foreign Object Left In Body- Aspiration/Puncture/Catheterization
865.0	Acc Poison - Meat	871.6	Foreign Object Left In Body- Heart Catheterization
865.1	Acc Poison - Shellfish	871.7	Foreign Object Left In Body- Removal of Catheter or Packing
865.2	Acc Poison - Oth Fish	871.8	Foreign Object Left In Body- Oth Spec Procedures
865.3	Acc Poison - Berries and Seeds	871.9	Foreign Object Left In Body- Unspec Procedure
865.4	Acc Poison - Oth Spec Plants	872.0	Sterile Precautions Fail - Surgical Operation
865.5	Acc Poison - Mushrooms and Oth Fungi	872.1	Sterile Precautions Fail - Infusion/Transfusion
865.8	Acc Poison - Oth Spec Foods		
865.9	Acc Poison - Unspec Foodstuff or Poisonous Plant		
866.0	Acc Poison - Lead and Its Compounds and Fumes		
866.1	Acc Poison - Mercury and Its Compounds and Fumes		
866.2	Acc Poison - Antimony and Its Compounds and Fumes		

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872.2 Sterile Precautions Fail - Kidney Dialysis/Oth Perfusion	876.4 Oth Misadventures During - Failure, Intro/Remove Oth Instrument
872.3 Sterile Precautions Fail - Injection/Vaccination	876.5 Oth Misadventures During - Inappropriate Operation Performance
872.4 Sterile Precautions Fail - Endoscopic Examination	
872.5 Sterile Precautions Fail - Aspiration/Puncture/Catheterization	876.6 Oth Misadventures During - Patient not scheduled for surgery
872.6 Sterile Precautions Fail - Heart Catheterization	876.7 Oth Misadventures During - Correct Procedure on Wrong Side
872.8 Sterile Precautions Fail - Oth Spec Procedures	876.8 Oth Misadventures - Oth Spec Misadventures During Care
872.9 Sterile Precautions Fail - Unspec Procedure	876.9 Oth Misadventures - Unspec Misadventures During Care
	878.0 Surgery w/o Mention of Mishap - Transplant of Whole Organ
873.0 Dosage Fail - Excessive Blood/Fluid During (Trans/In)Fusion	878.1 Surgery w/o Mention of Mishap - Implant of Artificial Device
873.1 Dosage Fail - Incorrect Dilution of Fluid During Infusion	878.2 Surgery w/o Mention of Mishap - Anastomosis/Bypass/Graft-Tissue
873.2 Dosage Fail - Overdose of Radiation in Therapy	878.3 Surgery w/o Mention of Mishap - Formation of External Stoma
873.3 Dosage Fail - Accidental Radiation Exposure During Care	878.4 Surgery w/o Mention of Mishap - Oth Restorative Surgery
873.4 Dosage Fail - Dosage Fail in Electroshock/Insulin-Shock Therapy	878.5 Surgery w/o Mention of Mishap - Amputation of Limb(s)
873.5 Dosage Fail - Inappropriate Temperature in Application/Packing	878.6 Surgery w/o Mention of Mishap - Removal of Oth Organ, Part/Total
873.6 Dosage Fail - Nonadministration of Necessary Drug/Medicine	878.8 Surgery w/o Mention of Mishap - Oth Spec Surgery & Procedures
873.8 Dosage Fail - Oth Spec Dosage Fail	878.9 Surgery w/o Mention of Mishap - Unspec Surgery & Procedures
873.9 Dosage Fail - Unspec Dosage Fail	879.0 Oth Proc w/o Mention of Mishap - Cardiac Catheterization
874.0 Instrument Mechanical Fail - Surgical Operation	879.1 Oth Proc w/o Mention of Mishap - Kidney Dialysis
874.1 Instrument Mechanical Fail - Infusion/Transfusion	879.2 Oth Proc w/o Mention of Mishap - Radiology/Radiotherapy
	879.3 Oth Proc w/o Mention of Mishap - Shock Therapy
874.2 Instrument Mechanical Fail - Kidney Dialysis/Oth Perfusion	879.4 Oth Proc w/o Mention of Mishap - Aspiration of Fluid
874.3 Instrument Mechanical Fail - Endoscopic Examination	879.5 Oth Proc w/o Mention of Mishap - Insert Gastric/Duodenal Sound
874.4 Instrument Mechanical Fail - Aspiration/Puncture/Catheterization	
874.5 Instrument Mechanical Fail - Heart Catheterization	879.6 Oth Proc w/o Mention of Mishap - Urinary Catheterization
874.8 Instrument Mechanical Fail - Oth Spec Procedures	879.7 Oth Proc w/o Mention of Mishap - Blood Sampling
874.9 Instrument Mechanical Fail - Unspec Procedure	879.8 Oth Proc w/o Mention of Mishap - Oth Spec Procedures
875.0 Contaminated Blood/Fluid/Drug/Bio Matter-Transfused/Infused	879.9 Oth Proc w/o Mention of Mishap - Unspec Procedure
875.1 Contaminated Blood/Fluid/Drug/Bio Matter-Injected/Vaccination	880.0 Fall On or From Stairs/Steps - Escalator
875.2 Contaminated Blood/Fluid/Drug/Bio Matter-Administered,Oth Means	880.1 Fall On or From Stairs/Steps - Sidewalk Curb
875.8 Contaminated Blood/Fluid/Drug/Bio Matter- Oth	880.9 Fall On or From Stairs/Steps - Oth Stairs or Steps
875.9 Contaminated Blood/Fluid/Drug/Bio Matter- Unspec	881.0 Fall On or From Ladders/Scaffolding - Ladder
876.0 Oth Misadventures During - Mismatched Blood in Transfusion	881.1 Fall On or From Ladders/Scaffolding - Scaffolding
876.1 Oth Misadventures During - Wrong Fluid in Infusion	
876.2 Oth Misadventures During - Surgery Suture/Ligature Failure	
876.3 Oth Misadventures During - Endotracheal Tube Wrongly Placed	

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Revised June 2011

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882.0	Fall From or Out of Building/Other Structure	891.3	Oth/Unspec Building Conflagration- Conflagration Burning
883.0	Fall into Hole/Oth Surface Opening - Jump/Dive into H2O [pool]	891.8	Oth/Unspec Building Conflagration- Oth Conflagration Accident
883.1	Fall into Hole/Oth Surface Opening – Well	891.9	Oth/Unspec Building Conflagration- Unspec Conflagration Accident
883.2	Fall into Hole/Oth Surface Opening - Storm Drain/Manhole	892.0	Conflagration Not in Building or Structure
883.9	Fall into Hole/Oth Surface Opening - Oth Hole/Surface Opening	893.0	Clothing Ignition - Controlled Fire in Private Dwelling
884.0	Oth Multi-level Fall - Playground Equipment	893.1	Clothing Ignition - Controlled Fire in Oth Building/Structure
884.1	Oth Multi-level Fall - Cliff	893.2	Clothing Ignition - Controlled Fire Not in Building/Structure
884.2	Oth Multi-level Fall - Chair	893.8	Clothing Ignition - Oth Spec Sources
884.3	Oth Multi-level Fall - Wheelchair	893.9	Clothing Ignition - Unspec Source
884.4	Oth Multi-level Fall - Bed	894.0	Ignition of Highly Inflammable Material
884.5	Oth Multi-level Fall - Other Furniture	895.0	Accident by Controlled Fire in Private Dwelling
884.6	Oth Multi-level Fall - Commode Toilet	896.0	Accident by Controlled Fire in Oth/Unspec Building/Structure
884.9	Oth Multi-level Fall - Oth Multi-Level Fall	897.0	Accident by Controlled Fire Not in Building/Structure
885.0	Fall on Same Level - Nonmotorized Scooter (10/2002)	898.0	Accident by Oth Spec Fire and Flames - Burning Bedclothes
885.1	Fall on Same Level - Roller/In-Line Skates	898.1	Accident by Oth Spec Fire and Flames - Oth
885.2	Fall on Same Level - Skateboard	899.0	Accident by Unspec Fire
885.3	Fall on Same Level - Skis	900.0	Excessive Heat - Due to Weather Conditions
885.4	Fall on Same Level - Snowboard	900.1	Excessive Heat - Of Man-Made Origin
885.9	Fall on Same Level - Other	900.9	Excessive Heat - Of Unspec Origin
886.0	Fall From Collision/Push/Shoving By, W/ Oth Person - In Sports	901.0	Excessive Cold - Due to Weather Conditions
886.9	Fall From Collision/Push/Shoving By, W/ Oth Person - Oth/Unspec	901.1	Excessive Cold - Of Man-Made Origin
887.0	Fracture, Cause Unspec	901.8	Excessive Cold - Oth Spec Origin
888.0	Oth and Unspec Fall - Resulting in Striking Sharp Object	901.9	Excessive Cold - Of Unspec Origin
888.1	Oth and Unspec Fall - Resulting in Striking Other Object	902.0	High/Low/Changing Air Pressure - High Altitude Residence/Visit
888.8	Oth and Unspec Fall - Oth	902.1	High/Low/Changing Air Pressure - In Aircraft
888.9	Oth and Unspec Fall - Unspec	902.2	High/Low/Changing Air Pressure - Due to Diving
890.0	Private Dwelling Conflagration - Conflagration Explosion	902.8	High/Low/Changing Air Pressure - Due to Oth Spec Causes
890.1	Private Dwelling Conflagration - Fumes from PVC Combustion	902.9	High/Low/Changing Air Pressure - Unspec Cause
890.2	Private Dwelling Conflagration - Oth Smoke and Fumes	903.0	Travel and Motion
890.3	Private Dwelling Conflagration - Conflagration Burning	904.0	Hunger/Thirst/Exposure/Neglect - Infant/Helpless Persons
890.8	Private Dwelling Conflagration - Oth Conflagration Accident	904.1	Hunger/Thirst/Exposure/Neglect - Lack of Food
890.9	Private Dwelling Conflagration - Unspec Conflagration Accident	904.2	Hunger/Thirst/Exposure/Neglect - Lack of H2O
891.0	Oth/Unspec Building Conflagration- Conflagration Explosion	904.3	Hunger/Thirst/Exposure/Neglect - Exposure(to Weather), NEC
891.1	Oth/Unspec Building Conflagration- Fumes from PVC Combustion	904.9	Hunger/Thirst/Exposure/Neglect - Privation, Unqualified
891.2	Oth/Unspec Building Conflagration- Oth Smoke and Fumes	905.0	Poison/Toxic Reactions - Venomous Snakes/Lizards
		905.1	Poison/Toxic Reactions - Venomous Spiders
		905.2	Poison/Toxic Reactions - Scorpion
		905.3	Poison/Toxic Reactions - Hornets, Wasps, Bees

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905.4	Poison/Toxic Reactions - Centipede/Venomous Millipede (tropical)	910.3	Accidental Drown/Submersion - Swim/Diving for Non-Sport Purposes
905.5	Poison/Toxic Reactions - Oth Venomous Arthropods	910.4	Accidental Drown/Submersion - In Bathtub
905.6	Poison/Toxic Reactions - Venomous H2O Animals/Plants	910.8	Accidental Drown/Submersion - Oth Accidental Drown/Submersion
905.7	Poison/Toxic Reactions - Oth Plants	910.9	Accidental Drown/Submersion - Unspec Accidental Drown/Submersion
905.8	Poison/Toxic Reactions - Oth Spec	911.0	Inhalation & Ingestion of Food Causing Choking/Suffocation
905.9	Poison/Toxic Reactions - Unspec	912.0	Inhalation & Ingestion of Oth Object Causing Choking/Suffocation
906.0	Oth Injury by Animal - Dog Bite	913.0	Accidental Mechanical Suffocate- In Bed or Cradle
906.1	Oth Injury by Animal - Rat Bite	913.1	Accidental Mechanical Suffocate- By Plastic Bag
906.2	Oth Injury by Animal - Bite of Nonvenomous Snakes/Lizards	913.2	Accidental Mechanical Suffocate- Lack of Air (In Closed Place)
906.3	Oth Injury by Animal - Oth Animal Bite (Except Arthropod)	913.3	Accidental Mechanical Suffocate- By Falling Earth/Oth Substance
906.4	Oth Injury by Animal - Bite of Nonvenomous Arthropod	913.8	Accidental Mechanical Suffocate- Oth Spec Means
906.5	Oth Injury by Animal - Bite of Unspec Animal/Animal Bite NOS	913.9	Accidental Mechanical Suffocate- Unspec Means
906.8	Oth Injury by Animal - Oth Spec Injury Caused by Animal	914.0	Foreign Body Accidentally Entering Eye and Adnexa
906.9	Oth Injury by Animal - Unspec Injury Caused by Animal	915.0	Foreign Body Accidentally Entering Oth Orifice
907.0	Lightning	916.0	Struck Accidentally by Falling Object
908.0	Cataclysmic Storms - Hurricane, Storm Surge, Tidal Wave, Typhoon	917.0	Striking Against/Struck Accidentally - In Sports w/o Subseq Fall
908.1	Cataclysmic Storms - Tornado, Cyclone, Twisters	917.1	Striking Against/Struck Accidentally - Crowd Fear/Panic w/o Subseq Fall
908.2	Cataclysmic Storms - Floods, Torrential Rainfall, Flash Flood	917.2	Striking Against/Struck Accidentally - In Running H2O w/o Subseq Fall
908.3	Cataclysmic Storms - Blizzard (snow/ice)	917.3	Striking Against/Struck Accidentally - Furniture w/o Subseq Fall
908.4	Cataclysmic Storms - Dust Storm	917.4	Striking Against/Struck Accidentally - Oth Stationary Object w/o Subseq Fall
908.8	Cataclysmic Storms - Oth Cataclysmic Storms	917.5	Striking Against/Struck Accidentally - In Sports w/ Subseq Fall
908.9	Cataclysmic Storms - Unspec Cataclysmic Storms/Storm NOS	917.6	Striking Against/Struck Accidentally - Crowd,Collective Fear/Panic w/ Subseq Fall
909.0	Cataclysmic Earth - Earthquakes	917.7	Striking Against/Struck Accidentally - Furniture w/ Subseq Fall
909.1	Cataclysmic Earth - Volcanic Eruption, Burns from Lava/Ash Inhale	917.8	Striking Against/Struck Accidentally - Oth Stationary Object w/ Subseq Fall
909.2	Cataclysmic Earth - Avalanche, Landslide, Mudslide	917.9	Striking Against/Struck Accidentally - Oth w/ or w/o Subseq Fall
909.3	Cataclysmic Earth - Collapse of Dam or Man-made Structure	918.0	Caught Accidentally In or Between Objects
909.4	Cataclysmic Earth - Tidal Wave, Tidal Wave NOS, Tsunami	919.0	Machinery Accident - Agricultural Machines
909.8	Cataclysmic Earth - Oth Cataclysmic Earth Movements/Eruptions	919.1	Machinery Accident - Mining and Earth-Drilling Machinery
909.9	Cataclysmic Earth - Unspec Cataclysmic Earth Movements/Eruptions	919.2	Machinery Accident - Lifting Machines and Appliances
910.0	Accidental Drown/Submersion - While H2O-Skiing	919.3	Machinery Accident - Metalworking Machines
910.1	Accidental Drown/Submersion - Oth Sport w/ Diving Equipment	919.4	Machinery Accident - Woodworking and Forming Machines
910.2	Accidental Drown/Submersion - Oth Sport w/out Diving Equipment		

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919.5 Machinery Accident - Prime Movers, Except Electrical Motors	925.1 Accident, Electric Current - Electric Power Plants/Stations/Lines
919.6 Machinery Accident - Transmission Machinery	925.2 Accident, Electric Current - Industrial Wires/Appliance/Machinery
919.7 Machinery Accident - Earth Moving/Scraping/Oth Excavating Machine	925.8 Accident, Electric Current - Oth Electric Current
919.8 Machinery Accident - Oth Spec Machinery	925.9 Accident, Electric Current - Unspec Electric Current
919.9 Machinery Accident - Unspec Machinery	926.0 Radiation Exposure - Radiofrequency Radiation
920.0 Cutting Object Accident - Powered Lawn Mower	926.1 Radiation Exposure - Infra-red Heaters and Lamps
920.1 Cutting Object Accident - Oth Powered Hand Tools	926.2 Radiation Exposure - Visible/Ultraviolet Light Sources
920.2 Cutting Object Accident - Powered Household Appliances/Implements	926.3 Radiation Exposure - X-ray/Oth Electromagnetic Ionize Radiation
920.3 Cutting Object Accident - Knives, Swords, and Daggers	926.4 Radiation Exposure - Lasers
920.4 Cutting Object Accident - Oth Hand Tools and Implements	926.5 Radiation Exposure - Radioactive Isotopes
920.5 Cutting Object Accident - Hypodermic Needle, Contaminated Needle	926.8 Radiation Exposure - Oth Spec Radiation
920.8 Cutting Object Accident - Oth Spec Cut/Piercing Instrument/Object	926.9 Radiation Exposure - Unspec Radiation
920.9 Cutting Object Accident - Unspec Cut/Piercing Instrument/Object	927.0 Overexertion from sudden strenuous movement
921.0 Pressure Vessel Explosion Accident - Boilers	927.1 Overexertion from prolonged static position
921.1 Pressure Vessel Explosion Accident - Gas Cylinders	927.2 Excessive physical exertion from prolonged activity
921.8 Pressure Vessel Explosion Accident - Oth Spec Pressure Vessels	927.3 Cumulative trauma from repetitive motion
921.9 Pressure Vessel Explosion Accident - Unspec Pressure Vessel	927.4 Cumulative trauma from repetitive impact
922.0 Firearm Missile Accident - Handgun	927.8 Other overexertion and strenuous and repetitive movements or loads
922.1 Firearm Missile Accident - Shotgun (Automatic)	927.9 Unspecified overexertion and strenuous and repetitive movements or loads
922.2 Firearm Missile Accident - Hunting Rifle	928.0 Oth/Unspec Environmental/Accidental - Stay in Weightless Environment
922.3 Firearm Missile Accident - Military Firearms	928.1 Oth/Unspec Environmental/Accidental - Exposure to Noise
922.4 Firearm Missile Accident - Air Gun	928.2 Oth/Unspec Environmental/Accidental - Vibration
922.5 Firearm Missile Accident - Paintball Gun	928.3 Oth/Unspec Environmental/Accidental - Human Being Bite
922.8 Firearm Missile Accident - Oth Spec Firearm Missile	928.4 Oth/Unspec Environmental/Accidental - External Constriction Caused by Hair
922.9 Firearm Missile Accident - Unspec Firearm Missile	928.5 Oth/Unspec Environmental/Accidental - External Constriction Caused by Other Obj
923.0 Explosive Material Accident - Fireworks	928.6 Oth/Unspec Environmental/Accidental - Exposure to Algae/Toxin
923.1 Explosive Material Accident - Blasting Materials	928.7 Oth/Unspec Environmental/Accidental - Component of Firearm or Gun
923.2 Explosive Material Accident - Explosive Gases	928.8 Oth/Unspec Environmental/Accidental - Oth
923.8 Explosive Material Accident - Oth Explosive Materials	928.9 Oth/Unspec Environmental/Accidental - Unspec Accident
923.9 Explosive Material Accident - Unspec Explosive Material	929.0 Late Effects of Injury - MVA
924.0 Accident, Hot/Corrosive Material - Hot Liquids/Vapors/Steam	929.1 Late Effects of Injury - Oth Transport Accident
924.1 Accident, Hot/Corrosive Material - Caustic/Corrosive Substances	929.2 Late Effects of Injury - Accidental Poison
924.2 Accident, Hot/Corrosive Material - Hot (Boiling) Tap Water	929.3 Late Effects of Injury - Accidental Fall
924.8 Accident, Hot/Corrosive Material - Oth	929.4 Late Effects of Injury - Accident Caused by Fire
924.9 Accident, Hot/Corrosive Material - Unspec	929.5 Late Effects of Injury - Accident by Natural/Environment Factors
925.0 Accident, Electric Current - Domestic Wiring and Appliances	929.8 Late Effects of Injury - Oth Accidents
	929.9 Late Effects of Injury - Unspec Accident
	930.0 Adverse Effects - Penicillins

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930.1	Adverse Effects - Antifungal Antibiotics	934.5	Adverse Effects - Anticoagulant Antagonists & Oth Coagulants
930.2	Adverse Effects - Chloramphenicol Group	934.6	Adverse Effects - Gamma Globulin
930.3	Adverse Effects - Erythromycin and Oth Macrolides	934.7	Adverse Effects - Natural Blood/Blood Products
930.4	Adverse Effects - Tetracycline Group	934.8	Adverse Effects - Oth Agents Affecting Blood Constituents
930.5	Adverse Effects - Cephalosporin Group	934.9	Adverse Effects - Unspec Agent Affecting Blood Constituents
930.6	Adverse Effects - Antimycobacterial Antibiotics	935.0	Adverse Effects - Heroin
930.7	Adverse Effects - Antineoplastic Antibiotics	935.1	Adverse Effects - Methadone
930.8	Adverse Effects - Oth Spec Antibiotics	935.2	Adverse Effects - Oth Opiates & Related Narcotics
930.9	Adverse Effects - Unspec Antibiotic	935.3	Adverse Effects - Salicylates
931.0	Adverse Effects - Sulfonamides	935.4	Adverse Effects - Aromatic Analgesics, NEC
931.1	Adverse Effects - Arsenical Anti-Infectives	935.5	Adverse Effects - Pyrazole Derivatives
931.2	Adverse Effects - Heavy Metal Anti-Infectives	935.6	Adverse Effects - Antirheumatics [Antiphlogistics]
931.3	Adverse Effects - Quinoline/Hydroxyquinoline Derivatives	935.7	Adverse Effects - Oth Non-Narcotic Analgesics
931.4	Adverse Effects - Antimalarial/Drug Act on Oth Blood Protozoa	935.8	Adverse Effects - Oth Spec Analgesics/Antipyretics
931.5	Adverse Effects - Oth Antiprotozoal Drugs	935.9	Adverse Effects - Unspec Analgesic/Antipyretic
931.6	Adverse Effects - Anthelmintics	936.0	Adverse Effects - Oxazolidine Derivatives
931.7	Adverse Effects - Antiviral Drugs	936.1	Adverse Effects - Hydantoin Derivatives
931.8	Adverse Effects - Oth Antimycobacterial Drugs	936.2	Adverse Effects - Succinimides
931.9	Adverse Effects - Oth and Unspec Anti-Infectives	936.3	Adverse Effects - Oth/Unspec Anticonvulsants
932.0	Adverse Effects - Adrenal Cortical Steroids	936.4	Adverse Effects - Anti-Parkinsonism Drugs
932.1	Adverse Effects - Androgens/Anabolic Cogeners	937.0	Adverse Effects - Barbiturates
932.2	Adverse Effects - Ovarian Hormone/Synthetic Substitutes	937.1	Adverse Effects - Chloral Hydrate Group
932.3	Adverse Effects - Insulins/Antidiabetic Agents	937.2	Adverse Effects - Paraldehyde
932.4	Adverse Effects - Anterior Pituitary Hormones	937.3	Adverse Effects - Bromine Compounds
932.5	Adverse Effects - Posterior Pituitary Hormones	937.4	Adverse Effects - Methaqualone Compounds
932.6	Adverse Effects - Parathyroid/Parathyroid Derivatives	937.5	Adverse Effects - Glutethimide Group
932.7	Adverse Effects - Thyroid/Thyroid Derivatives	937.6	Adverse Effects - Mixed Sedatives, NEC
932.8	Adverse Effects - Antithyroid Agents	937.8	Adverse Effects - Oth Sedatives/Hypnotics
932.9	Adverse Effects - Oth/Unspec Hormones/Synthetic Substitutes	937.9	Adverse Effects - Unspec
933.0	Adverse Effects - Antiallergic/Antiemetic Drugs	938.0	Adverse Effects - Central Nervous System Muscle-Tone Depressants
933.1	Adverse Effects - Antineoplastic/Immunosuppressive Drugs	938.1	Adverse Effects - Halothane
933.2	Adverse Effects - Acidifying Agents	938.2	Adverse Effects - Oth Gaseous Anesthetics
933.3	Adverse Effects - Alkalizing Agents	938.3	Adverse Effects - Intravenous Anesthetics
933.4	Adverse Effects - Enzymes, NEC	938.4	Adverse Effects - Oth/Unspec General Anesthetics
933.5	Adverse Effects - Vitamins, NEC	938.5	Adverse Effects - Surface/Infiltration Anesthetics
933.6	Adverse Effects - Oral Bisphosphonate	938.6	Adverse Effects - Peripheral Nerve & Plexus-Blocking Anesthetics
933.7	Adverse Effects - IV Bisphosphonate	938.7	Adverse Effects - Spinal Anesthetics
933.8	Adverse Effects - Oth Systemic Agents, NEC	938.9	Adverse Effects - Oth/Unspec Local Anesthetics
933.9	Adverse Effects - Unspec Systemic Agent	939.0	Adverse Effects - Antidepressants
934.0	Adverse Effects - Iron and its Compounds	939.1	Adverse Effects - Phenothiazine-Based Tranquilizers
934.1	Adverse Effects - Liver Preparations/Oth Antianemic Agent	939.2	Adverse Effects - Butyrophenone-Based Tranquilizers
934.2	Adverse Effects - Anticoagulants	939.3	Adverse Effects - Oth Antipsychotic/Neuroleptic/Maj Tranquilizer
934.3	Adverse Effects - Vitamin K [Phytonadione]	939.4	Adverse Effects - Benzodiazepine-Based Tranquilizers
934.4	Adverse Effects - Fibrinolysis-Affecting Drugs	939.5	Adverse Effects - Oth Tranquilizers
		939.6	Adverse Effects - Psychodysleptics [hallucinogens]

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939.7	Adverse Effects - Psychostimulants	945.0	Adverse Effects - Oxytocic Agents
939.8	Adverse Effects - Oth Psychotropic Agents	945.1	Adverse Effects - Smooth Muscle Relaxants
939.9	Adverse Effects - Unspec Psychotropic Agent	945.2	Adverse Effects - Skeletal Muscle Relaxants
940.0	Adverse Effects - Analeptics	945.3	Adverse Effects - Oth & Unspec Drugs Acting on Muscles
940.1	Adverse Effects - Opiate Antagonists	945.4	Adverse Effects - Antitussives
940.8	Adverse Effects - Oth Spec Central Nervous System Stimulants	945.5	Adverse Effects - Expectorants
940.9	Adverse Effects - Unspec Central Nervous System Stimulant	945.6	Adverse Effects - Anti-Common Cold Drugs
941.0	Adverse Effects - Parasympathomimetics [cholinergics]	945.7	Adverse Effects - Antiasthmatics
941.1	Adverse Effects - Parasympatholytics/Spasmolytics	945.8	Adverse Effects - Oth & Unspec Respiratory Drugs
941.2	Adverse Effects - Sympathomimetics [adrenergics]	946.0	Adverse Effects - Local Anti-Infectives & Anti-Inflammatory Drug
941.3	Adverse Effects - Sympatholytics [antiadrenergics]	946.1	Adverse Effects - Antipruritics
941.9	Adverse Effects - Unspec Drug Affecting Autonomic Nervous System	946.2	Adverse Effects - Local Astringents & Local Detergents
942.0	Adverse Effects - Cardiac Rhythm Regulators	946.3	Adverse Effects - Emollients, Demulcents, and Protectants
942.1	Adverse Effects - Cardiotonic Glycosides/Similar Drugs	946.4	Adverse Effects - Keratolytics, Keratoplastics, Hair Treatments
942.2	Adverse Effects - Antilipemic/Antiartherosclerotic Drugs	946.5	Adverse Effects - Eye Anti-Infectives and Oth Eye Drugs
942.3	Adverse Effects - Ganglion-Blocking Agents	946.6	Adverse Effects - Anti-Infectives/Oth Drugs for Ear/Nose/Throat
942.4	Adverse Effects - Coronary Vasodilators	946.7	Adverse Effects - Dental Drugs Topically Applied
942.5	Adverse Effects - Oth Vasodilators	946.8	Adverse Effects - Oth Agents Affecting Skin & Mucous Membrane
942.6	Adverse Effects - Oth Antihypertensive Agents	946.9	Adverse Effects - Unspec Agent Affecting Skin & Mucous Membrane
942.7	Adverse Effects - Antivaricose Drugs/Sclerosing Agents	947.0	Adverse Effects - Dietetics
942.8	Adverse Effects - Capillary-Active Drugs	947.1	Adverse Effects - Lipotropic Drugs
942.9	Adverse Effects - Oth & Unspec Agents on Cardiovascular System	947.2	Adverse Effects - Antidotes & Chelating Agents, NEC
943.0	Adverse Effects - Antacids/Antigastric Secretion Drugs	947.3	Adverse Effects - Alcohol Deterrents
943.1	Adverse Effects - Irritant Cathartics	947.4	Adverse Effects - Pharmaceutical Excipients
943.2	Adverse Effects - Emollient Cathartics	947.8	Adverse Effects - Oth Drugs & Medicinal Substances
943.3	Adverse Effects - Oth Cathartic/Intestinal Atonia Drugs	947.9	Adverse Effects - Unspec Drug or Medicinal Substance
943.4	Adverse Effects - Digestants	948.0	Adverse Effects - BCG Vaccine
943.5	Adverse Effects - Antidiarrheal Drugs	948.1	Adverse Effects - Typhoid and Paratyphoid
943.6	Adverse Effects - Emetics	948.2	Adverse Effects - Cholera
943.8	Adverse Effects - Oth Spec Agents on Gastrointestinal System	948.3	Adverse Effects - Plague
943.9	Adverse Effects - Unspec Agent on Gastrointestinal System	948.4	Adverse Effects - Tetanus
944.0	Adverse Effects - Mercurial Diuretics	948.5	Adverse Effects – Diphtheria
944.1	Adverse Effects - Purine Derivative Diuretics	948.6	Adverse Effects - Pertussis Vaccine, Pertussis Component Combo
944.2	Adverse Effects - Carbon Acid Anhydrase Inhibitors	948.8	Adverse Effects - Oth and Unspec Bacterial Vaccines
944.3	Adverse Effects - Saluretics	948.9	Adverse Effects - Mixed Bacterial Vaccines, No Pertusis Component
944.4	Adverse Effects - Oth Diuretics	949.0	Adverse Effects - Smallpox Vaccine
944.5	Adverse Effects - Electrolytic, Caloric, H2O-Balance Agents	949.1	Adverse Effects - Rabies Vaccine
944.6	Adverse Effects - Oth Mineral Salts, NEC	949.2	Adverse Effects - Typhus Vaccine
944.7	Adverse Effects - Uric Acid Metabolism Drugs		

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949.3	Adverse Effects - Yellow Fever Vaccine	957.0	Suicide/Self Injury, Jump,High Place - Residential Premises
949.4	Adverse Effects - Measles Vaccine	957.1	Suicide/Self Injury, Jump,High Place - Oth Man-Made Structures
949.5	Adverse Effects - Poliomyelitis Vaccine	957.2	Suicide/Self Injury, Jump,High Place - Natural Sites
949.6	Adverse Effects - Oth & Unspec Viral & Rickettsial Vaccines	957.9	Suicide/Self Injury, Jump,High Place - Unspec
949.7	Adverse Effects - Mixed Viral-Rickettsial & Bacterial Vaccines	958.0	Suicide/Self Injury - Jumping or Lying Before Moving Object
949.9	Adverse Effects - Oth & Unspec Vaccines & Biological Substances	958.1	Suicide/Self Injury - Burns, Fire
950.0	Suicide/Self Poison- Analgesics, Antipyretics & Antirheumatics	958.2	Suicide/Self Injury - Scald
950.1	Suicide/Self Poison- Barbiturates	958.3	Suicide/Self Injury - Extremes of Cold
950.2	Suicide/Self Poison- Oth Sedatives & Hypnotics	958.4	Suicide/Self Injury - Electrocutation
950.3	Suicide/Self Poison- Tranquilizers/Oth Psychotropic Agents	958.5	Suicide/Self Injury - Crashing of Motor Vehicle
950.4	Suicide/Self Poison- Oth Spec Drugs/Medicinal Substances	958.6	Suicide/Self Injury - Crashing of Aircraft
950.5	Suicide/Self Poison- Unspec Drug/Medicinal Substance	958.7	Suicide/Self Injury - Caustic Substances, Except Poisoning
950.6	Suicide/Self Poison- (Agri/Horti)Cultural Chemical/Pharmaceutical	958.8	Suicide/Self Injury - Oth Spec Means
950.7	Suicide/Self Poison- Corrosive/Caustic Substances	958.9	Suicide/Self Injury - Unspec Means
950.8	Suicide/Self Poison- Arsenic and its Compounds	959.0	Late Effects of Self-Inflicted Injury
950.9	Suicide/Self Poison- Oth & Unspec Solid/Liquid Substances	960.0	Fight/Brawl/Rape - Unarmed Fight or Brawl
951.0	Suicide/Self Poison - Gas Distributed by Pipeline	960.1	Fight/Brawl/Rape - Rape
951.1	Suicide/Self Poison - Liquid Petroleum Gas (Mobile Containers)	961.0	Assault by Corrosive or Caustic Substance, Except Poisoning
951.8	Suicide/Self Poison - Oth Utility Gas	962.0	Assault by Poison - Drugs and Medicinal Substances
952.0	Suicide/Self Poison - Motor Vehicle Exhaust Gas	962.1	Assault by Poison - Oth Solid and Liquid Substances
952.1	Suicide/Self Poison - Oth Carbon Monoxide	962.2	Assault by Poison - Oth Gases and Vapors
952.8	Suicide/Self Poison - Oth Spec Gases and Vapors	962.9	Assault by Poison - Unspec Poisoning
952.9	Suicide/Self Poison - Unspec Gases and Vapors	963.0	Assault by Hanging and Strangulation
953.0	Suicide/Self Injury - Hanging	964.0	Assault by Submersion [Drowning]
953.1	Suicide/Self Injury - Suffocation by Plastic Bag	965.0	Assault by Firearms/Explosives - Handgun
953.8	Suicide/Self Injury - Oth Spec Means	965.1	Assault by Firearms/Explosives - Shotgun
953.9	Suicide/Self Injury - Unspec Means	965.2	Assault by Firearms/Explosives - Hunting Rifle
954.0	Suicide and Self-Inflicted Injury by Submersion [Drowning]	965.3	Assault by Firearms/Explosives - Military Firearms
955.0	Suicide/Self Injury - Handgun	965.4	Assault by Firearms/Explosives - Oth and Unspec Firearm
955.1	Suicide/Self Injury - Shotgun	965.5	Assault by Firearms/Explosives - Antipersonnel Bomb
955.2	Suicide/Self Injury - Hunting Rifle	965.6	Assault by Firearms/Explosives - Gasoline Bomb
955.3	Suicide/Self Injury - Military Firearms	965.7	Assault by Firearms/Explosives - Letter Bomb
955.4	Suicide/Self Injury - Oth and Unspec Firearm	965.8	Assault by Firearms/Explosives - Oth Spec Explosive
955.5	Suicide/Self Injury - Explosives	965.9	Assault by Firearms/Explosives - Unspec Explosive
955.6	Suicide/Self Injury - Air Gun	966.0	Assault by Cutting and Piercing Instrument
955.7	Suicide/Self Injury - Paintball Gun	967.0	Child/Adult Abuse by Father/Stepfather/Male Partner
955.9	Suicide/Self Injury – Unspec	967.1	Child/Adult Abuse by Oth Spec Person
956.0	Suicide and Self-Inflicted Injury by Cut/Piercing Instrument	967.2	Child/Adult Abuse by Mother/Stepmother/Female Partner
		967.3	Child/Adult Abuse by Spouse/Partner/Ex-Spouse/Ex-Partner
		967.4	Child/Adult Abuse by Child
		967.5	Child/Adult Abuse by Sibling
		967.6	Child/Adult Abuse by Grandparent
		967.7	Child/Adult Abuse by Other Relative

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967.8	Child/Adult Abuse by Non-related Caregiver	981.1	Poison, Un/Intentional - Liquid Petroleum Gas (Mobile Containers)
967.9	Child/Adult Abuse by Unspec Person	981.8	Poison, Un/Intentional - Oth Utility Gas
968.0	Assault by Oth/Unspec Means - Fire	982.0	Poison, Un/Intentional - Motor Vehicle Exhaust Gas
968.1	Assault by Oth/Unspec Means - Pushing from a High Place	982.1	Poison, Un/Intentional - Oth Carbon Monoxide
968.2	Assault by Oth/Unspec Means - Striking by Blunt/Thrown Object	982.8	Poison, Un/Intentional - Oth Spec Gases and Vapors
968.3	Assault by Oth/Unspec Means - Hot Liquid	982.9	Poison, Un/Intentional - Unspec Gases and Vapors
968.4	Assault by Oth/Unspec Means - Criminal Neglect	983.0	Hang/Strangle/Suffocate, Un/Intentional- Hanging
968.5	Assault by Oth/Unspec Means - Vehicular Assault	983.1	Hang/Strangle/Suffocate, Un/Intentional- Suffocate by Plastic Bag
968.6	Assault by Oth/Unspec Means - Air Gun	983.8	Hang/Strangle/Suffocate, Un/Intentional- Oth Spec Means
968.7	Assault by Oth/Unspec Means - Human Being Bite	983.9	Hang/Strangle/Suffocate, Un/Intentional- Unspec Means
968.8	Assault by Oth/Unspec Means - Oth Spec Means	984.0	Submersion [Drowning], Undetermined Un/Intentional
968.9	Assault by Oth/Unspec Means - Unspec Means	985.0	Firearms/Explosives, Un/Intentional - Handgun
969.0	Late Effects of Injury Purposely Inflicted by Oth Person	985.1	Firearms/Explosives, Un/Intentional - Shotgun
970.0	Injury Due to Legal Intervention by Firearms	985.2	Firearms/Explosives, Un/Intentional - Hunting Rifle
971.0	Injury Due to Legal Intervention by Explosives	985.3	Firearms/Explosives, Un/Intentional - Military Firearms
972.0	Injury Due to Legal Intervention by Gas	985.4	Firearms/Explosives, Un/Intentional - Oth/Unspec Firearm
973.0	Injury Due to Legal Intervention by Blunt Object	985.5	Firearms/Explosives, Un/Intentional - Explosives
974.0	Injury Due to Legal Intervention by Cut/Piercing Instrument	985.6	Firearms/Explosives, Un/Intentional - Air Gun
975.0	Injury Due to Legal Intervention by Oth Spec Means	985.7	Firearms/Explosives, Un/Intentional - Paintball Gun
976.0	Injury Due to Legal Intervention by Unspec Means	986.0	Injury by Cut/Piercing Instruments, Undetermined Un/Intentional
977.0	Late Effects of Injuries Due to Legal Intervention	987.0	Fall From High Place, Un/Intentional - Residential Premises
978.0	Legal Execution	987.1	Fall From High Place, Un/Intentional - Oth Man-Made Structures
979.0	Terrorism - Explosion of Marine Weapons	987.2	Fall From High Place, Un/Intentional - Natural Sites
979.1	Terrorism - Destruction of Aircraft	987.9	Fall From High Place, Un/Intentional - Unspec Site
979.2	Terrorism - Other Explosions and Fragments	988.0	Oth/Unspec Injury, Un/Intentional - Jump/Lie Before Moving Object
979.3	Terrorism - Fires, Conflagrations, and Hot Substances	988.1	Oth/Unspec Injury, Un/Intentional - Burns/Fire
979.4	Terrorism - Firearms	988.2	Oth/Unspec Injury, Un/Intentional - Scald
979.5	Terrorism - Nuclear Weapons	988.3	Oth/Unspec Injury, Un/Intentional - Extremes of Cold
979.6	Terrorism - Biological Weapons	988.4	Oth/Unspec Injury, Un/Intentional - Electrocution
979.7	Terrorism - Chemical Weapons	988.5	Oth/Unspec Injury, Un/Intentional - Crashing of Motor Vehicle
979.8	Terrorism - Other Weapons	988.6	Oth/Unspec Injury, Un/Intentional - Crashing of Aircraft
979.9	Terrorism - Secondary Effects	988.7	Oth/Unspec Injury, Un/Intentional - Caustic Substances, Not Poison
980.0	Poison, Un/Intentional- Analgesic/Anti(Pyretic/Rheumatic)	988.8	Oth/Unspec Injury, Un/Intentional - Oth Spec Means
980.1	Poison, Un/Intentional- Barbiturates	988.9	Oth/Unspec Injury, Un/Intentional - Unspec Means
980.2	Poison, Un/Intentional- Oth Sedatives and Hypnotics	989.0	Late Effects of Injury, Undetermined Un/Intentional
980.3	Poison, Un/Intentional- Tranquilizers/Psychotropic Agents	990.0	War Operations Injury - From Gasoline Bomb
980.4	Poison, Un/Intentional- Oth Spec Drugs/Medicines	990.1	War Operations Injury - From Flamethrower
980.5	Poison, Un/Intentional- Unspec Drug/Medicine		
980.6	Poison, Un/Intentional- Corrosive/Caustic Substances		
980.7	Poison, Un/Intentional- (Agri/Horti)Cultural Chemical/Pharmaceutic		
980.8	Poison, Un/Intentional- Arsenic and its Compounds		
980.9	Poison, Un/Intentional- Oth/Unspec Solids/Liquids		
981.0	Poison, Un/Intentional - Gas Distributed by Pipeline		

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990.2	War Operations Injury - From Incendiary Bullet	995.3	Injury Due to War Operations by Intentional Restriction of Airway
990.3	War Operations Injury - From Fire Casued by Conventional Weapon	995.4	Injury Due to War Operations by Unintentional Drowning
990.9	War Operations Injury - From Oth/Unspec Source	995.8	Injury Due to War Operations by Other Conventional Warfare
991.0	War Operations Injury - Rubber Bullets (Rifle)	995.9	Injury Due to War Operations by Unspecified Conventional Warfare
991.1	War Operations Injury - Pellets (Rifle)	996.0	Injury Due to War Operations by Nuclear Weapons - Direct Blast
991.2	War Operations Injury - Oth Bullets	996.1	Injury Due to War Operations by Nuclear Weapons - Indirect Blast
991.3	War Operations Injury - Antipersonnel Bomb (Fragments)	996.2	Injury Due to War Operations by Nuclear Weapons - Thermal Radiation
991.4	War Operations Injury - From Munition Fragments	996.3	Injury Due to War Operations by Nuclear Weapons - Nuclear Radiation
991.5	War Operations Injury - From Person IED	996.8	Injury Due to War Operations by Nuclear Weapons - Other
991.6	War Operations Injury - From Vehicle IED	996.9	Injury Due to War Operations by Nuclear Weapons - Unspecified
991.7	War Operations Injury - From Other IED	997.0	War Operations Injury - Lasers
991.8	War Operations Injury - From Weapon Fragments	997.1	War Operations Injury - Biological Warfare
991.9	War Operations Injury - Oth/Unspec Fragments	997.2	War Operations Injury - Gases, Fumes, and Chemicals
992.0	Injury Due to War Operations by Torpedo	997.3	War Operations Injury - Weapons of Mass Destruction, NFS
992.1	Injury Due to War Operations by Depth Charge	997.8	War Operations Injury - Oth Spec Unconventional Warfare
992.2	Injury Due to War Operations by Marine Mines	997.9	War Operations Injury - Unspec Unconventional Warfare
992.3	Injury Due to War Operations by Sea Based Artillery Shells	998.0	Injury Due to War Occur After Hostile Cessation - Mines
992.8	Injury Due to War Operations by Other Marine Weapons	998.1	Injury Due to War Occur After Hostile Cessation - Bombs
992.9	Injury Due to War Operations by Unspec Marine Weapons	998.8	Injury Due to War Occur After Hostile Cessation - Other
993.0	Injury Due to War Operations by Areal Bomb	998.9	Injury Due to War Occur After Hostile Cessation - Unspecified
993.1	Injury Due to War Operations by Guided Missle	999.0	Late Effect of Injury Due to War Operations
993.2	Injury Due to War Operations by Mortar	999.1	Late Effect of Injury Due to Terrorism
993.3	Injury Due to War Operations by Person IED		
993.4	Injury Due to War Operations by Vehicle IED		
993.5	Injury Due to War Operations by Other IED		
993.6	Injury Due to War Operations by Unintentional Detonation Own Munitions		
993.7	Injury Due to War Operations by Unintentional Discharge Own Launch Device		
993.8	Injury Due to War Operations by Other Specified Explosion		
993.9	Injury Due to War Operations by Unspec Explosion		
994.0	Injury Due to War Destruction Aircraft - Enemy Fire/Explosives		
994.1	Injury Due to War Destruction Aircraft - Unintentional Own Explosives		
994.2	Injury Due to War Destruction Aircraft - Collision Other Aircraft		
994.3	Injury Due to War Destruction Aircraft - Onboard Fire		
994.8	Injury Due to War Destruction Aircraft - Other		
994.9	Injury Due to War Destruction Aircraft - Unspecified		
995.0	Injury Due to War Operations by Unarmed Hand-to-hand Combat		
995.1	Injury Due to War Operations by Struck by Blunt Object		
995.2	Injury Due to War Operations by Piercing Object		

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## Appendix III

### Ecode Activities

1	Activities involving walking, marching and hiking	6.3	Activities involving bowling
1.1	Activities involving running	6.4	Activities involving bike riding
2	Activities involving swimming	6.5	Activities involving jumping rope
2.1	Activities involving springboard and platform diving	6.6	Activities involving non-running track and field events
2.2	Activities involving water polo	6.9	Other activity involving other sports and athletics played individually
2.3	Activities involving water aerobics and water exercise	7	Activities involving american tackle football
2.4	Activities involving underwater diving and snorkeling	7.1	Activities involving american flag or touch football
2.5	Activities involving rowing, canoeing, kayaking, rafting and tubing	7.2	Activities involving rugby
2.6	Activities involving water skiing and wake boarding	7.3	Activities involving baseball
2.7	Activities involving surfing, windsurfing and boogie boarding	7.4	Activities involving lacrosse and field hockey
2.8	Activities involving water sliding	7.5	Activities involving soccer
2.9	Other activity involving water and watercraft	7.6	Activities involving basketball
3	Activities involving ice skating	7.7	Activities involving volleyball (beach) (court)
3.1	Activities involving ice hockey	7.8	Activities involving physical games during school recess and summer camp
3.2	Activities w/ snow skiing/snowboarding/sledding/tobogganing & snow tubing	7.9	Other activity involving other sports and athletes played as a team
3.3	Activities involving cross country skiing	8	Activities involving boxing
3.9	Other activity involving ice and snow	8.1	Activities involving wrestling
4	Activities involving mountain climbing, rock climbing and wall climbing	8.2	Activities involving racquet and hand sports
4.1	Activities involving rappelling	8.3	Activities involving frisbee
4.2	Activities involving BASE jumping	8.4	Activities involving martial arts
4.3	Activities involving bungee jumping	8.9	Other specified sports and athletics activity
4.4	Activities involving hang gliding	9	Activity involving exercise machines primarily for aerobic conditioning
4.9	Other activity involving climbing, rappelling and jumping off	9.1	Activity involving calisthenics
5	Activities involving dancing	9.2	Activity involving aerobic and step exercise
5.1	Activities involving yoga	9.3	Activity involving circuit training
5.2	Activities involving gymnastics	9.4	Activity involving obstacle course
5.3	Activities involving trampoline	9.5	Activity involving grass drills
5.4	Activities involving cheerleading	9.9	Other activity involving cardiorespiratory exercise
5.9	Other activity involving dancing and other rhythmic movements	10	Activity involving exercise machines primarily for muscle strengthening
6	Activities involving roller skating (inline) and skateboarding	10.1	Activity involving push-ups, pull-ups, sit-ups
6.1	Activities involving horseback riding	10.2	Activity involving free weights
6.2	Activities involving golf	10.3	Activity involving pilates

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10.9	Other activity involving other muscle strengthening exercises	19.2	Activities involving grooming and shearing an animal
11	Activities involving computer keyboarding	19.9	Other activity involving animal care
11.1	Activities involving hand held interactive electronic device	29	Refereeing a sports activity
11.9	Other activity involving computer technology and electronic devices	29.1	Spectator at an event
12	Activities involving knitting and crocheting	29.2	Rough housing and horseplay
12.1	Activities involving sewing	29.9	Other activity
12.2	Activities involving furniture building and finishing	30	Unspecified activity
12.9	Activity involving other arts and handcrafts		
13	Activities involving personal bathing and showering		
13.1	Activities involving laundry		
13.2	Activities involving vacuuming		
13.3	Activities involving ironing		
13.4	Activities involving floor mopping and cleaning		
13.5	Activities involving residential relocation		
13.8	Other personal hygiene activity		
13.9	Other household maintenance		
14	Caregiving involving bathing		
14.1	Caregiving involving lifting		
14.9	Other activity involving person providing caregiving		
15	Activities involving food preparation and clean up		
15.1	Activities involving grilling and smoking food		
15.2	Activities involving cooking and baking		
15.9	Other activity involving cooking and grilling		
16	Activities involving digging, shoveling and raking		
16.1	Activities involving gardening and landscaping		
16.2	Activities involving building and construction		
16.9	Other activity with property/land maintenance/building & construction		
17	Roller coaster riding		
17.9	Other activity involving external motion		
18	Activities involving piano playing		
18.1	Activities involving drum and other percussion instrument playing		
18.2	Activities involving string instrument playing		
18.3	Activities involving winds and brass instrument playing		
19	Activities involving walking an animal		
19.1	Activities involving milking an animal		

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## Appendix IV

### Operative ICD-9-CM Procedure coding:

#### Operations on the Nervous System

01.24 Craniotomy, Other  
01.25 Craniectomy, Other  
01.31 Incision, Cerebral Meninges  
01.39 Incision, Brain, Other  
01.59 Excision, Brain, Other  
02.02 Elevation, Skull Fracture Fragments  
02.12 Repair, Cerebral Meninges, Other  
02.39 Insertion, Ventricular Shunt to Other  
02.93 Implantation, Neurostimulator  
02.94 Insertion/Replacement, Skull Tongs/Halo Traction  
02.99 Operation, Skull/Brain/Meninges, Other  
03.09 Exploration/Decompression, Spinal Canal, Other  
03.4 Excision/Destruction, Spinal Cord/Meninges  
03.53 Repair, Fx, Vertebra  
03.99 Operation, Spinal Cord/Canal, Other  
04.07 Excision/Avulsion, Cranial/Peripheral Nerve, Other  
04.3 Suture, Cranial/Peripheral Nerve, Other  
04.49 Decompression/Lysis, Periph Nerve/Ganglion, Other  
04.74 Anastomosis, Cranial/Peripheral Nerve, Other  
04.79 Neuroplasty, Other

#### Operations on the Endocrine System

Defined by each hospital

#### Operations on the Eye

08.61 Reconstruction, Eyelid, Skin Flap/Graft  
08.70 Reconstruction, Eyelid, Not Otherwise Specified  
08.81 Repair, Eyelid/Eyebrow, Linear  
08.84 Repair, Eyelid Margin, Full Thickness  
08.85 Repair, Eyelid, Full Thickness, Other  
11.51 Suture, Cornea  
14.30 Repair of Retinal Tear  
16.49 Enucleation, Eyeball, Other  
16.89 Repair, Eyeball/Orbit Injury, Other

#### Operations on the Ear

18.4 Suture, External Ear  
18.71 Construction, Ear Auricle  
18.79 Repair, External Ear, Other

#### Operations on the Nose, Mouth, Pharynx

21.71 Reduction, Fx, Nose, Closed  
21.72 Reduction, Fx, Nose, Open  
21.81 Suture, Nose  
22.64 Sphenoidectomy  
22.79 Repair, Nasal Sinus, Other  
23.5 Implantation, Tooth  
24.32 Suture, Gum  
24.7 Application, Orthodontic Appliance  
25.51 Suture, Tongue  
27.51 Suture, Lip

#### Operations on the Respiratory System

31.1 Tracheostomy, Temporary  
31.29 Tracheostomy, Permanent  
31.64 Repair, Larynx  
31.71 Suture, Trachea  
32.3 Resection, Lung, Segment  
32.5 Pneumonectomy, Complete  
33.43 Suture, Lung  
33.49 Repair, Lung, Other  
34.02 Thoracotomy, Exploratory  
34.04 Insertion, Intercostal Drainage Catheterf1  
34.09 Incision, Pleura, Other  
34.71 Suture, Chest Wall  
34.82 Suture, Diaphragm  
34.84 Repair, Diaphragm, Other

#### Operations on the Cardiovascular System

Operations on Valves and Septa  
35.71 Other, Unspecified Repair of Atrial Septal Defect  
35.72 Other, Unspecified Repair - Ventricular Septal Defect

#### Operations on Vessels of Heart

36.99 Other Operations on Vessels of Heart

#### Other Operations on Heart and Pericardium

37.12 Pericardiectomy  
37.4 Repair, Heart/Pericardium  
37.91 Cardiac Massage, Open Chest

#### Incision, Excision, and Occlusion of Vessels

38.38 Resection/Anastomosis, Lower Limb Artery  
38.44 Resection/Replacement, Aorta  
38.45 Resection/Replacement, Thoracic Vessel, Other  
38.64 Excision, Aorta, Not Otherwise Specified  
38.7 Plication, Vena Cava  
38.80 Occlusion, Blood Vessel, Unspecified  
38.81 Occlusion, Intracranial Vessel  
38.82 Occlusion, Head/Neck Vessel, Other  
38.83 Occlusion, Upper Limb Vessel  
38.84 Occlusion, Aorta  
38.85 Occlusion, Thoracic Vessel  
38.86 Occlusion, Abdomen Artery  
38.87 Occlusion, Abdominal Vessel  
38.88 Occlusion, Lower Limb Artery  
38.89 Occlusion, Lower Limb Vein  
38.91 Arterial Catheterization  
38.93 Venous Catheterization, Not Elsewhere Classified

#### Other Operations on Vessels

39.30 Suture, Vessel, Unspecified  
39.31 Suture, Artery  
39.32 Suture, Vein  
39.59 Repair, Vessel, Other  
39.98 Hemorrhage Control, Vessel, Not Otherwise Spec

#### Operations on the Hemic and Lymphatic System

41.5 Splenectomy, Total  
41.95 Repair, Spleen

#### Operations on the Digestive System

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43.1 Gastrostomy, Temporary

43.19 Other Gastrostomy

44.61 Suture, Stomach

45.33 Local Excision of Lesion/Tissue Small Intestine

45.62 Resection, Small Intestine, Partial, Other

45.71 Resection, Large Intestine, Multiple Segmental

45.79 Excision, Large Intestine, Partial

45.94 Anastomosis, Intestine, Large-to-Large

46.10 Colostomy, Not Otherwise Specified

46.39 Enterostomy, Other

46.72 Suture, Duodenum

46.73 Suture, Small Intestine

46.75 Suture, Large Intestine

46.79 Repair, Intestine, Other

48.66 Resection, Rectum, Hartmann

50.11 Biopsy, Liver, Percutaneous

50.29 Destruction, Liver, Other

50.61 Repair, Liver

51.22 Cholecystectomy, Total

52.09 Pancreatotomy, Other

52.59 Pancreatectomy, Partial

52.95 Repair, Pancreas, Other

53.80 Repair, Diaphragmatic Hernia

54.11 Laparotomy, Exploratory

54.19 Laparotomy, Other

54.61 Reclosure Postoperative Disruption/Abdominal Wall

54.63 Suture, Abdomen Wall, Other

54.72 Repair, Abdomen Wall, Other

54.75 Repair, Mesentery

54.92 Removal, Foreign Body, Peritoneal Cavity

### Operations on the Urinary System

55.51 Nephroureterectomy

57.81 Suture, Bladder

57.89 Repair, Bladder, Other

57.94 Insertion, Urinary Catheter, Indwelling

### Operations on the Male Genital Organ

Defined by each hospital

### Operations on the Female Genital Organ

Defined by each hospital

### Obstetrical Procedures

74.99 Caesarean Section, Other/Unspecified

### Operations on the Musculoskeletal System

#### Operations on Facial Bones and Joints

76.72 Reduction, Fx, Malar/Zygoma, Open

76.73 Reduction, Fx, Maxilla, Closed

76.74 Reduction, Fx, Maxilla, Open

76.75 Reduction, Fx, Mandible, Closed

76.76 Reduction, Fx, Mandible, Open

76.77 Reduction, Fx, Alveolus, Open

76.79 Reduction, Fx, Face, Open, Other

#### Incision, Excision, and Division of Other Bones

Defined by each hospital

#### Other Operations on Bones, Except Facial Bones

78.07 Bone Graft, Tibia/Fibula

78.27 Epiphyseal Stapling, Tibia/Fibula

78.55 Internal Fixation, Femur, w/o Reduction

78.57 Internal Fixation, Tibia/Fibula, w/o Reduction

#### Reduction of Fracture and Dislocation

Closed Reduction of Fracture with/without Internal Fixation

79.01 Reduction, Fx, Humerus, w/o Int Fix, Closed

79.02 Reduction, Fx, Radius/Ulna, w/o Int Fix, Closed

79.03 Reduction, Fx, Carp/Metacarp, w/o Int Fix, Closed

79.04 Reduction, Fx, Phal, Hand, w/o Int Fix, Closed

79.05 Reduction, Fx, Femur, w/o Int Fix, Closed

79.06 Reduction, Fx, Tibia/Fibula, w/o Int Fix, Closed

79.07 Reduction, Fx, Tars/Metatars, w/o Int Fix, Closed

79.08 Reduction, Fx, Phal, Foot, w/o Int Fix, Closed

79.09 Reduction, Fx, Other Spec, w/o Int Fix, Closed

79.11 Reduction, Fx, Humerus, w/ Int Fix, Closed

79.12 Reduction, Fx, Radius/Ulna, w/ Int Fix, Closed

79.13 Reduction, Fx, Carp/Metacarp, w/ Int Fix, Closed

79.14 Reduction, Fx, Phal, Hand, w/ Int Fix, Closed

79.15 Reduction, Fx, Femur, w/ Int Fix, Closed

79.16 Reduction, Fx, Tibia/Fibula, w/ Int Fix, Closed

79.17 Reduction, Fx, Tars/Metatars, w/ Int Fix, Closed

79.18 Reduction, Fx, Phal, Foot, w/ Int Fix, Closed

79.19 Reduction, Fx, Other Spec, w/ Int Fix, Closed

#### Open Reduction of Fracture with/without Internal Fixation

79.21 Reduction, Fx, Humerus, w/o Int Fix, Open

79.22 Reduction, Fx, Radius/Ulna, w/o Int Fix, Open

79.23 Reduction, Fx, Carp/Metacarp, w/o Int Fix, Open

79.24 Reduction, Fx, Phal, Hand, w/o Int Fix, Open

79.25 Reduction, Fx, Femur, w/o Int Fix, Open

79.26 Reduction, Fx, Tibia/Fibula, w/o Int Fix, Open

79.27 Reduction, Fx, Tars/Metatars, w/o Int Fix, Open

79.28 Reduction, Fx, Phal, Foot, w/o Int Fix, Open

79.29 Reduction, Fx, Other Spec, w/o Int Fix, Open

79.31 Reduction, Fx, Humerus, w/ Int Fix, Open

79.32 Reduction, Fx, Radius/Ulna, w/ Int Fix, Open

79.33 Reduction, Fx, Carp/Metacarp, w/ Int Fix, Open

79.34 Reduction, Fx, Phal, Hand, w/ Int Fix, Open

79.35 Reduction, Fx, Femur, w/ Int Fix, Open

79.36 Reduction, Fx, Tibia/Fibula, w/ Int Fix, Open

79.37 Reduction, Fx, Tars/Metatars, w/ Int Fix, Open

79.38 Reduction, Fx, Phal, Foot, w/ Int Fix, Open

79.39 Reduction, Fx, Other Spec, w/ Int Fix, Open

Closed/Open Reduction of Separated Epiphysis

Defined by each hospital

#### Debridement of Open Fracture Site

79.61 Debridement, Fx, Humerus, Open

79.62 Debridement, Fx, Radius/Ulna, Open

79.63 Debridement, Fx, Carp/Metacarp, Open

79.64 Debridement, Fx, Phal, Hand, Open

79.65 Debridement, Fx, Femur, Open

79.66 Debridement, Fx, Tibia/Fibula, Open

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79.67 Debridement, Fx, Tars/Metatars, Open  
79.68 Debridement, Fx, Phal, Foot, Open  
79.69 Debridement, Fx, Other Spec, Open

### Closed Reduction of Dislocation

79.71 Reduction, Disloc, Shoulder, Closed  
79.72 Reduction, Disloc, Elbow, Closed  
79.73 Reduction, Disloc, Wrist, Closed  
79.74 Reduction, Disloc, Hand/Finger, Closed  
79.75 Reduction, Disloc, Hip, Closed  
79.76 Reduction, Disloc, Knee, Closed  
79.77 Reduction, Disloc, Ankle, Closed  
79.78 Reduction, Disloc, Foot/Toe, Closed  
79.79 Reduction, Disloc, Other Spec, Closed

### Open Reduction of Dislocation

79.81 Reduction, Disloc, Shoulder, Open  
79.82 Reduction, Disloc, Elbow, Open  
79.83 Reduction, Disloc, Wrist, Open  
79.84 Reduction, Disloc, Hand/Finger, Open  
79.85 Reduction, Disloc, Hip, Open  
79.86 Reduction, Disloc, Knee, Open  
79.87 Reduction, Disloc, Ankle, Open  
79.88 Reduction, Disloc, Foot/Toe, Open  
79.89 Reduction, Disloc, Other Spec, Open

### Unspecified Operation on Bone Injury

Defined by each hospital

### Incision and Excision of Joint Structures

80.26 Arthroscopy, Knee  
80.46 Division, Capsule/Ligament/Cartilage, Knee  
80.5 Excision/Destruction, Intervertebral Disc  
80.51 Excision of intervertebral Disc

### Repair and Plastic Operation on Joint Structures

81.01 Fusion, Fx, Spine, Atlas/Axis  
81.02 Fusion, Fx, Spine, Other Cervical  
81.03 Fusion, Fx, Spine, Thoracic  
81.04 Fusion, Fx, Spine, Thoracolumbar w/ Harrington Rod  
81.05 Fusion, Fx, Spine, Other Thoracolumbar  
81.06 Fusion, Fx, Spine, Lumbar  
81.07 Fusion, Fx, Spine, Lumbosacral  
81.08 Refusion, Fx, Spine  
81.09 Fusion, Fx, Spine  
81.45 Repair, Cruciate Ligaments, Other  
81.46 Repair, Collateral Ligaments, Other  
81.47 Repair, Knee, Other  
81.51 Replacement, Hip, Total w/ Methyl Methacrylate  
81.83 Other Repair of Shoulder  
81.96 Repair, Joint, Other

### Operations on Muscle, Tendon, and Fascia of Hand

82.41 Suture, Hand, Tendon Sheath

### Operations on Muscle, Tendon, Fascia, & Bursa, Except Hand

83.09 Other Incision of Soft Tissue  
83.14 Fasciotomy  
83.61 Suture, Tendon Sheath  
83.63 Repair, Rotator Cuff  
83.64 Suture, Tendon, Other  
83.73 Reattachment, Tendon  
83.88 Plastic Operation, Tendon, Other

### Other Procedures on Musculoskeletal System

84.05 Amputation, Through Forearm  
84.07 Amputation, Through Humerus  
84.11 Amputation, Toe  
84.13 Disarticulation of Ankle  
84.15 Amputation, Below Knee, Other  
84.17 Amputation, Above Knee  
84.21 Reattachment, Thumb  
84.22 Reattachment, Finger  
84.23 Reattachment, Forearm, Wrist, Hand  
84.24 Reattachment, Arm  
84.25 Reattachment, Toe  
84.26 Reattachment, Foot  
84.27 Reattachment, Leg/Ankle  
84.28 Reattachment, Thigh  
84.29 Reattachment, Other Extremity

### Operations on the Integumentary System

86.05 Incision, Skin/Subcutaneous Tissue, w/ FB Removal  
86.09 Incision, Skin/Subcutaneous Tissue, Other  
86.22 Debridement, Skin/Subcutaneous Wound  
86.28 Nonexcisional Debridement of Wound, Infection, Burn  
86.3 Excision/Destruction, Skin/Subcut Tissue, Other  
86.51 Replantation, Scalp  
86.59 Suture, Skin/Subcutaneous Tissue, Other Sites  
86.60 Free Skin Graft, Not Otherwise Specified  
86.66 Homograft to Skin  
86.69 Skin Graft to Other Sites, Other  
86.89 Repair, Skin/Subcutaneous Tissue, Other

### Diagnostic and Nonsurgical Procedures

87.76 Retrograde Cystourethrogram  
87.77 Other Cystogram  
93.51 Application, Cast, Plaster Jacket  
93.53 Application, Cast, Other  
93.55 Wiring, Dental  
93.59 Immobilization/Pressure/Attention, Wound, Other  
96.59 Irrigation, Wound, Other  
98.29 Removal, Foreign Body, Lower Limb, w/o Incision

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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## Appendix V

### Injury Coding Diagnosis 9 (ICD9) Codes:

800.0	CLOSED SKULL VAULT FX*	800.34	Closed skull vault Fx, intracranial hemorrhage, prolonged coma with return
800.00	Fracture of vault of skull closed	800.35	Closed skull vault fx, intracranial hemorrhage, LOC >24 hrs with no return
800.01	Closed skull vault fx no LOC	800.36	Closed skull vault fx w/ intracranial hemorrhage and LOC NFS duration
800.02	Closed skull vault fx, brief coma	800.39	Closed skull vault Fx, concussion NOS, intracranial hemorrhage
800.03	Closed skull vault Fx, moderate coma	800.4	CL SKL VLT FX/BR INJ NEC*
800.04	Closed skull vault Fx, prolonged coma with return	800.40	Closed skull vault Fx, intracranial injury NEC
800.05	Closed skull vault fx, LOC >24 hrs with no return	800.41	Closed skull vault fx with intracranial inj and no LOC
800.06	Closed skull vault fx, LOC unspecified duration	800.42	Closed skull vault fx with intracranial inj and brief coma
800.09	Closed skull vault Fx, concussion NOS	800.43	Closed skull vault Fx, brain inj NEC, moderate coma
800.1	CL SKL VLT FX/CEREBR LAC*	800.44	Closed skull vault Fx, brain inj NEC, prolonged coma with return
800.10	Closed skull vault Fx, cerebral contusion	800.45	Closed skull vault fx with intracranial inj & LOC >24 hrs with no return
800.11	Closed skull vault fx with cerebral contusion with no LOC	800.46	Closed skull vault fx with intracranial inj and LOC unspecified duration
800.12	Closed skull vault fx with cerebral contusion and brief coma	800.49	Closed skull vault Fx, brain inj NEC, concussion NOS
800.13	Closed skull vault Fx, cerebral contusion, moderate coma	800.5	OPN SKULL VAULT FRACTURE*
800.14	Closed skull vault Fx, cerebral contusion, prolonged coma with return	800.50	Open skull vault fracture
800.15	Closed skull vault fx w/ cerebral contusion and LOC >24 hrs w/ no return	800.51	Open skull vault fx with no LOC
800.16	Closed skull vault fx with cerebral contusion & LOC unspecified duration	800.52	Open skull vault fx with brief coma
800.19	Closed skull vault Fx, cerebral contusion concussion NOS	800.53	Open skull vault Fx, moderate coma
800.2	CL SKL VLT FX/MENING HEM*	800.54	Open skull vault Fx, prolonged coma with return
800.20	Closed skull vault Fx, SAH, EDH, or SDH	800.55	Open skull vault fx with LOC >24 hrs with no return
800.21	Closed skull vault fx with SAH, EDH, or SDH and no LOC	800.56	Open skull vault fx with LOC unspecified duration
800.22	Closed skull vault fx with SAH, EDH, or SDH and brief coma	800.59	Open skull vault Fx, concussion NOS
800.23	Closed skull vault Fx, SAH, SDH, or EDH, moderate coma	800.6	OPN SKL VLT FX/CEREB LAC*
800.24	Closed skull vault Fx, SAH, EDH, or SDH, prolonged coma with return	800.60	Open skull vault Fx, cerebral contusion
800.25	Closed skull vault fx with SAH, EDH, or SDH & LOC >24 hrs with no return	800.61	Open skull vault fx with cerebral contusion and no LOC
800.26	Closed skull vault fx with SAH, SDH, or EDH and LOC unspecified duration	800.62	Open skull vault fx with cerebral contusion and brief coma
800.29	Closed skull vault Fx, concussion NOS, SAH, SDH, or EDH	800.63	Open skull vault Fx, cerebral contusion, moderate coma
800.3	CL SKULL VLT FX/HEM NEC*	800.64	Open skull vault Fx, cerebral contusion, prolonged coma with return
800.30	Closed skull vault Fx, intracranial hemorrhage NEC	800.65	Open skull vault fx with cerebral contusion & LOC >24 hrs with no return
800.31	Closed skull vault fx with intracranial hemorrhage and no LOC	800.66	Open skull vault fx with cerebral contusion and LOC unspecified duration
800.32	Closed skull vault fx with intracranial hemorrhage and brief coma	800.69	Open skull vault Fx, concussion NOS
800.33	Closed skull vault Fx, intracranial hemorrhage, moderate coma	800.7	OPN SKL VLT FX/MENIN HEM*
		800.70	Open skull vault Fx, SAH, SDH, or EDH
		800.71	Open skull vault fx with SAH, SDH, or EDH and no LOC
		800.72	Open skull vault fx with SAH, SDH, or EDH and brief coma

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800.73	Open skull vault Fx, SAH, SDH, or EDH moderate coma	801.12	Closed skull base fx, cerebral contusion, brief coma
		801.13	Closed skull base fx, cerebral contusion, LOC 1-23 hrs
800.74	Open skull vault Fx, SAH, SDH, or EDH prolonged coma with return	801.14	Closed skull base fx, cerebral contusion, prolonged coma with return
800.75	Open skull vault fx with SAH, SDH, or EDH and LOC >24 hrs with no return	801.15	Closed skull base fx, cerebral contusion, LOC >24 hrs with no return
800.76	Open skull vault fx with SAH, SDH, or EDH and LOC unspecified duration	801.16	Closed skull base fx, cerebral contusion, LOC unspecified duration
800.79	Open skull vault Fx, concussion NOS, SDH, SDH, or EDH	801.19	Closed skull base Fx, concussion NOS cerebral contusion
800.8	OPN SKULL VLT FX/HEM NEC*	801.2	CL SKL BASE FX/MENIN HEM*
800.80	Open skull vault fx with intracranial hemorrhage	801.20	Closed skull base Fx, SAH, SDH, or EDH
800.81	Open skull vault fx with intracranial hemorrhage and no LOC	801.21	Closed skull base fx with SAH, SDH, or EDH no LOC
800.82	Open skull vault fx with intracranial hemorrhage and brief coma	801.22	Closed skull base fx, SAH, SDH, or EDH brief coma
800.83	Open skull vault Fx, intracranial hemorrhage, moderate coma	801.23	Closed skull base fx, SAH, SDH, or EDH moderate coma
800.84	Open skull vault Fx, intracranial hemorrhage, prolonged coma with return	801.24	Closed skull base fx, SAH, SDH, or EDH prolonged coma with return
800.85	Open skull vault fx w/ intracranial hemorrhage & LOC >24 hrs w/ no return	801.25	Closed skull base fx, SAH, SDH, or EDH, LOC >24 hrs with no return
800.86	Open skull vault fx w/ intracranial hemorrhage and LOC NFS duration	801.26	Closed skull base fx, SAH, SDH, or EDH, LOC unspecified duration
800.89	Open skull vault Fx, concussion NOS intracranial hemorrhage	801.29	Closed skull base Fx, concussion NOS, SAH, SDH, or EDH
800.9	OP SKL VLT FX/BR INJ NEC*	801.3	CL SKULL BASE FX/HEM NEC*
800.90	Open skull vault fx with intracranial injury	801.30	Closed skull base Fx, intracranial hemorrhage NEC
800.91	Open skull vault fx with intracranial inj and no LOC	801.31	Closed skull base fx with intracranial hemorrhage and no LOC
800.92	Open skull vault fx with intracranial inj and brief coma	801.32	Closed skull base fx with intracranial hemorrhage and brief coma
800.93	Open skull vault Fx, brain inj NEC, moderate coma	801.33	Closed skull base Fx, intracranial hemorrhage, moderate coma
800.94	Open skull vault Fx, brain inj NEC, prolonged coma with return	801.34	Closed skull base Fx, intracranial hemorrhage, prolonged coma with return
800.95	Open skull vault fx with intracranial inj and LOC >24 hrs with no return	801.35	Closed skull base fx, intracranial hemorrhage, LOC >24 hrs with no return
800.96	Open skull vault fx with intracranial inj and LOC unspecified duration	801.36	Closed skull base fx w/ intracranial hemorrhage and LOC NFS duration
800.99	Open skull vault Fx, brain inj NEC, concussion NOS	801.39	Closed skull base Fx, concussion NOS, intracranial hemorrhage
801.0	CLOS SKULL BASE FRACTURE*	801.4	CL SK BASE FX/BR INJ NEC*
801.00	Closed skull base fracture	801.40	Closed skull base Fx, intracranial injury NEC
801.01	Closed skull base fx no LOC	801.41	Closed skull base fx with intracranial inj and no LOC
801.02	Closed skull base fx, brief coma	801.42	Closed skull base fx with intracranial inj and brief coma
801.03	Closed skull base fx, moderate coma	801.43	Closed skull base Fx, brain inj NEC, moderate coma
801.04	Closed skull base fx, prolonged coma with return	801.44	Closed skull base Fx, brain inj NEC, prolonged coma with return
801.05	Closed skull base fx, LOC >24 hrs with no return	801.45	Closed skull base fx with intracranial inj & LOC >24 hrs with no return
801.06	Closed skull base fx, LOC unspecified duration		
801.09	Closed skull base Fx, concussion NOS		
801.1	CL SKL BASE FX/CEREB LAC*		
801.10	Closed skull base Fx, cerebral contusion		
801.11	Closed skull base fx with cerebral contusion and no LOC		

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801.46	Closed skull base fx with intracranial inj and LOC unspecified duration	801.84	Open skull base Fx, intracranial hemorrhage, prolonged coma with return
801.49	Closed skull base Fx, brain inj NEC, concussion NOS	801.85	Open skull base fx w/ intracranial hemorrhage & LOC >24 hrs w/ no return
801.5	OPEN SKULL BASE FRACTURE*	801.86	Open skull base fx w/ intracranial hemorrhage & LOC unspecified duration
801.50	Open skull base fracture	801.89	Open skull base Fx, concussion NOS intracranial hemorrhage
801.51	Open skull base fx with no LOC	801.9	OP SK BASE FX/BR INJ NEC*
801.52	Open skull base fx with brief coma	801.90	Open skull base fx with intracranial injury
801.53	Open skull vault Fx, moderate coma	801.91	Open skull base fx with intracranial inj and no LOC
801.54	Open skull base Fx, prolonged coma with return	801.92	Open skull base fx with intracranial inj and brief coma
801.55	Open skull base fx with LOC >24 hrs with no return	801.93	Open skull base Fx, brain inj NEC, moderate coma
801.56	Open skull base fx with LOC unspecified duration	801.94	Open skull base Fx, brain inj NEC, prolonged coma with return
801.59	Open skull base Fx, concussion NOS	801.95	Open skull base fx with intracranial inj and LOC >24 hrs with no return
801.6	OP SKL BASE FX/CEREB LAC*	801.96	Open skull base fx with intracranial inj and LOC unspecified duration
801.60	Open skull base Fx, cerebral contusion	801.99	Open skull base Fx, brain inj NEC, concussion NOS
801.61	Open skull base fx with cerebral contusion and no LOC	802.0	Nasal bone fx, closed
801.62	Open skull base fx with cerebral contusion and brief coma	802.1	Nasal bone fx, open
801.63	Open skull base Fx, cerebral contusion, moderate coma	802.2	MANDIBLE FRACTURE-CLOSED*
801.64	Open skull base Fx, cerebral contusion, prolonged coma with return	802.20	Mandible Fx NOS, closed
801.65	Open skull base fx with cerebral contusion & LOC >24 hrs with no return	802.21	Fx condylar process mandible, closed
801.66	Open skull base fx with cerebral contusion and LOC unspecified duration	802.22	Subcondylar Fx, mandible, closed
801.69	Open skull base Fx, concussion NOS	802.23	Fx coronoid process, mandible, closed
801.7	OP SKL BASE FX/MENIN HEM*	802.24	Fx ramus NOS, closed, mandible
801.70	Open skull base Fx, SAH, SDH, or EDH	802.25	Fx angle of jaw, closed
801.71	Open skull base fx with SAH, SDH, or EDH and no LOC	802.26	Fx symphysis mandible body, closed
801.72	Open skull base fx with SAH, SDH, or EDH and brief coma	802.27	Fx alveolar border mandible, closed
801.73	Open skull base Fx, SAH, SDH, or EDH moderate coma	802.28	Fx mandible body NEC, closed
801.74	Open skull base Fx, SAH, SDH, or EDH prolonged coma with return	802.29	Multiple fx mandible, closed
801.75	Open skull base fx with SAH, SDH, or EDH and LOC >24 hrs with no return	802.3	MANDIBLE FRACTURE-OPEN*
801.76	Open skull base fx with SAH, SDH, or EDH and LOC unspecified duration	802.30	Mandible Fx NOS, open
801.79	Open skull base Fx, concussion NOS, SDH, SDH, or EDH	802.31	Fx condylar process mandible, open
801.8	OPN SKUL BASE FX/HEM NEC*	802.32	Subcondylar Fx, mandible, open
801.80	Open skull base fx with intracranial hemorrhage	802.33	Fx coronoid process, mandible, open
801.81	Open skull base fx with intracranial hemorrhage and no LOC	802.34	Fx ramus NOS, open mandible
801.82	Open skull base fx with intracranial hemorrhage and brief coma	802.35	Fx angle of jaw, open
801.83	Open skull base Fx, intracranial hemorrhage, moderate coma	802.36	Fx symphysis mandible body, open
		802.37	Fx alveolar border mandible, open
		802.38	Fx mandible body NEC, open
		802.39	Multiple Fx mandible, open
		802.4	Fx malar/maxillary, closed
		802.5	Fx malar/maxillary, open
		802.6	Fx orbital floor, closed
		802.7	Fx orbital floor, open
		802.8	Fx facial bone NEC, closed
		802.9	Fx facial bone NEC, open
		803.0	CLOSE SKULL FRACTURE NEC*
		803.00	Closed skull fracture NEC

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803.01	Closed skull fracture NEC	803.40	Closed skull Fx NEC, intracranial inj NEC
803.02	Closed skull Fx NEC, brief coma	803.41	Closed skull Fx NEC, intracranial inj, no LOC
803.03	Closed skull Fx NEC, moderate coma	803.42	Closed skull Fx NEC, intracranial inj, brief coma
803.04	Closed skull Fx NEC, prolonged coma	803.43	Closed skull Fx NEC, intracranial inj, moderate coma
803.05	Closed skull Fx NEC, LOC >24 hrs with no return	803.44	Closed skull Fx NEC, intracranial inj, prolonged coma
803.06	Closed skull Fx NEC, LOC unspecified duration	803.45	Closed skull Fx NEC, intracranial inj, LOC >24 hrs with no return
803.09	Closed skull Fx NEC, concussion NOS	803.46	Closed skull Fx NEC, intracranial inj, LOC unspecified duration
803.1	CL SKL FX NEC/CEREBR LAC*	803.49	Closed skull Fx NEC, concussion NOS Intracranial injury
803.10	Closed skull Fx NEC, cerebral contusion	803.5	OPEN SKULL FRACTURE NEC*
803.11	Closed skull Fx NEC with cerebral contusion, no LOC	803.50	Open skull fracture NEC
803.12	Closed skull Fx NEC, cerebral contusion, brief coma	803.51	Open skull fracture NEC, no LOC
803.13	Closed skull Fx NEC, cerebral contusion, LOC 1-23 hrs	803.52	Open skull fracture NEC, brief coma
803.14	Closed skull Fx NEC, cerebral contusion, prolonged coma	803.53	Open skull fracture NEC, moderate coma
803.15	Closed skull Fx NEC, cerebral contusion, LOC >24 hrs with no return	803.54	Open skull Fx NEC, prolonged coma
803.16	Closed skull Fx NEC, cerebral contusion, LOC unspecified duration	803.55	Open skull Fx NEC, LOC >24 hrs with no return
803.19	Closed skull Fx NEC, concussion NOS, cerebral contusion	803.56	Open skull Fx NEC, LOC unspecified duration
803.2	CL SKL FX NEC/MENING HEM*	803.59	Open skull Fx NEC, concussion NOS
803.20	Closed skull Fx NEC, SAH, EDH, or SDH	803.6	OPN SKL FX NEC/CEREB LAC*
803.21	Closed skull Fx NEC, SAH, SDH, or EDH, no LOC	803.60	Open skull Fx NEC, cerebral contusion
803.22	Closed skull Fx NEC, SAH, SDH, or EDH, brief coma	803.61	Open skull Fx NEC, cerebral contusion, no LOC
803.23	Closed skull Fx NEC, SAH, SDH, or EDH moderate coma	803.62	Open skull Fx NEC, cerebral contusion, brief coma
803.24	Closed skull Fx NEC, SAH, SDH, or EDH prolonged coma with return	803.63	Open skull Fx NEC, cerebral contusion, LOC 1-23 hrs
803.25	Closed skull Fx NEC, SAH, SDH, or EDH, LOC >24 hrs with no return	803.64	Open skull Fx NEC, cerebral contusion, prolonged coma
803.26	Closed skull Fx NEC, SAH, SDH, or EDH, LOC unspecified duration	803.65	Open skull Fx NEC, cerebral contusion, LOC >24 hrs with no return
803.29	Closed skull Fx NEC, concussion NOS, SAH, SDH, or EDH	803.66	Open skull Fx NEC, cerebral contusion, LOC unspecified duration
803.3	CL SKULL FX NEC/HEM NEC*	803.69	Open skull Fx NEC, concussion NOS cerebral contusion
803.30	Closed skull Fx NEC, intracranial hemorrhage	803.7	OPN SKL FX NEC/MENIN HEM*
803.31	Closed skull Fx NEC, intracranial hemorrhage, no LOC	803.70	Open skull Fx NEC, SAH, SDH, or EDH
803.32	Closed skull Fx NEC, intracranial hemorrhage, brief coma	803.71	Open skull Fx NEC, SAH, no LOC
803.33	Closed skull Fx NEC, intracranial hemorrhage, moderate coma	803.72	Open skull Fx NEC, SAH, brief coma
803.34	Closed skull Fx NEC, intracranial hemorrhage, prolonged coma	803.73	Open skull Fx NEC, SAH, moderate coma
803.35	Closed skull Fx NEC, intracranial hemorrhage, LOC >24 hrs with no return	803.74	Open skull Fx NEC, SAH, prolonged coma
803.36	Closed skull Fx NEC, intracranial hemorrhage, LOC unspecified duration	803.75	Open skull Fx NEC, SAH, LOC >24 hrs with no return
803.39	Closed skull Fx NEC, concussion NOS, Intracranial hemorrhage	803.76	Open skull Fx NEC, SAH, LOC unspecified duration
803.4	CL SKL FX NEC/BR INJ NEC*	803.79	Open skull Fx NEC, concussion NOS, SAH
		803.8	OPN SKULL FX NEC/HEM NEC*
		803.80	Open skull Fx NEC, intracranial hemorrhage NEC
		803.81	Open skull Fx NEC, intracranial hemorrhage NEC, no LOC
		803.82	Open skull Fx NEC, intracranial hemorrhage, brief coma
		803.83	Open skull Fx NEC, intracranial hemorrhage, moderate coma

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803.84	Open skull Fx NEC, intracranial hemorrhage, prolonged coma	804.19	Mult fx skull or face with other, cl, cereb cont, concussion
803.85	Open skull Fx NEC, intracranial hemorrhage, LOC >24 hrs with no return	804.2	CL SKL/OTH FX/MENING HEM*
803.86	Open skull Fx NEC, intracranial hemorrhage, LOC unspecified duration	804.20	Mult fx skull or face with other bones, closed with SAH
803.89	Open skull Fx NEC, concussion NOS Intracranial hemorrhage	804.21	Mult fx skull or face with other bones, cl, SAH, no coma
803.9	OP SKL FX NEC/BR INJ NEC*	804.22	Mult fx skull or face with other bones, cl, SAH, brief coma
803.90	Open skull Fx NEC, intracranial inj NEC	804.23	Mult fx skull or face with other bones, cl, SAH, moderate coma
803.91	Open skull Fx NEC, intracranial inj, no LOC	804.24	Mult fx skull or face with other bones, cl, SAH, prolonged coma
803.92	Open skull Fx NEC, intracranial inj, brief coma	804.25	Mult fx skull or face with other bones, cl, SAH, LOC >24 hrs no return
803.93	Open skull Fx NEC, intracranial inj, moderate coma	804.26	Mult fx skull or face with other bones, cl, SAH, LOC unspec duration
803.94	Open skull Fx NEC, intracranial inj, prolonged coma	804.29	Mult fx skull or face with other bones, cl, SAH, concussion NOS
803.95	Open skull Fx NEC, intracranial inj, LOC >24 hrs with no return	804.3	CL SKUL W OTH FX/HEM NEC*
803.96	Open skull Fx NEC, intracranial inj, LOC unspecified duration	804.30	Mult fx skull or face with other bones, cl, intracranial hemorrhage
803.99	Open skull Fx NEC, concussion NOS Intracranial injury	804.31	Mult fx skull or face with other bones, cl, ICH, no coma
804.0	CL SKUL FX W OTH BONE FX*	804.32	Mult fx skull or face with other bones, cl, ICH, brief coma
804.00	Multiple fractures, skull or face with other bones, closed	804.33	Mult fx skull or face with other bones, cl, ICH, moderate coma
804.01	Mult fx skull or face with other bones, closed, no coma	804.34	Mult fx skull or face with other, cl, ICH, prolong LOC w/return
804.02	Mult fx skull or face with other bones, closed, brief coma	804.35	Mult fx skull or face with other, cl, ICH, LOC>24 hrs no return
804.03	Mult fx skull or face with other bones, closed, moderate coma	804.36	Mult fx skull or face with other, cl, ICH, LOC unspec duration
804.04	Mult fx skull or face with other bones, closed, prolonged coma	804.39	Mult fx skull or face with other bones, cl, ICH, concussion NOS
804.05	Mult fx skull or face with other bones, closed, coma >24 hrs no return	804.4	CL SKL/OTH FX/BR INJ NEC*
804.06	Mult fx skull or face with other bones, closed, LOC unspecified duration	804.40	Mult fx skull or face with other bones, cl, brain inj NEC
804.09	Mult fx skull or face with other bones, closed, concussion NOS	804.41	Mult fx skull or face, other bones, cl, brain inj NEC, no coma
804.1	CL SK W OTH FX/CEREB LAC*	804.42	Mult fx skull or face, other bones, cl, brain inj NEC, brief coma
804.10	Mult fx skull or face with other bones, cl, cerebral contusion	804.43	Mult fx skull or face, other bones, cl, brain inj NEC, moderate coma
804.11	Mult fx skull or face with other bones, cl, cerebral contusion, no coma	804.44	Mult fx skull or face, with other, cl, brain inj, prolong LOC w/return
804.12	Mult fx skull or face w/ other bones, cl, cerebral contusion, brief coma	804.45	Mult fx skull or face, other, cl, brain inj, LOC>24 hrs no return
804.13	Mult fx skull or face w/ other bones cerebral contusion moderate coma	804.46	Mult fx skull or face, other, cl, brain inj, LOC unspec duration
804.14	Mult fx skull or face with other, cl, cereb cont, prolong coma w/return	804.49	Mult fx skull or face, other bones, cl, brain inj NEC, concussion NOS
804.15	Mult fx skull or face w/ other, cl, cereb cont, coma >24 hrs w/ no return	804.5	OPN SKULL FX/OTH BONE FX*
804.16	Mult fx skull or face with other, cl, cereb cont, LOC unspec duration	804.50	Mult fx skull or face with other bones, open

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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804.51	Mult fx skull or face with other bones, open, no coma	804.82	Mult fx skull or face w/ other open intracranial hemorrhage brief LOC
804.52	Mult fx skull or face with other bones, open, brief coma	804.83	Mult fx skull/face w/ other open intracranial hemorrhage moderate LOC
804.53	Mult fx skull or face with other bones, open, moderate coma	804.84	Mult fx skull/face w/ other open intracranial hemorrhage prolonged LOC
804.54	Mult fx skull or face, other bones,, open, prolonged coma	804.85	Mult fx skull/face other open intracranial bleed LOC > 24 hrs w/ no return
804.55	Mult fx skull or face, other bones, open, coma >24 hrs with no return	804.86	Mult fx skull/face other bones open intracranial hemorrhage NFS LOC
804.56	Mult fx skull or face, other bones, open, LOC unspecified duration	804.89	Mult fx skull or face w/ other open intracranial hemorrhage concussion
804.59	Mult fx skull or face, other bones, open, concussion NOS	804.9	OP SKL/OTH FX/BR INJ NEC*
804.6	OPN SKL/OTH FX/CEREB LAC*	804.90	Mult fx skull or face with other bones, open, brain inj NEC
804.60	Mult fx skull or face, other bones, open, with cerebral lac		
804.61	Mult fx skull or face, other bones, open, with cerebral lac, no LOC	804.91	Mult fx skull or face with other bones, open, brain inj NEC, no LOC
804.62	Mult fx skull or face, other bones, open, with cerebral lac, brief LOC	804.92	Mult fx skull or face with other bones, open, brain inj NEC, brief LOC
804.63	Mult fx skull or face, other bones, open, w/ cerebral lac, moderate LOC	804.93	Mult fx skull or face w/ other bones, open, brain inj NEC, moderate LOC
804.64	Mult fx skull or face, other bones, open, w/ cerebral lac, prolonged LOC	804.94	Mult fx skull or face w/ other bones, open, brain inj NEC, prolonged LOC
804.65	Mult fx skull/face other open w/ cerebral lac coma > 24 hrs w/o return	804.95	Mult fx skull/face other open brain inj NEC LOC > 24 hrs w/ no return
804.66	Mult fx skull or face, other bones, open, w/ cerebral lac, NFS LOC	804.96	Mult fx skull or face w/ other bones, open, brain inj NEC, NFS LOC
804.69	Mult fx skull or face, other bones, open, with cerebral lac, concussion	804.99	Mult fx skull or face with other bones, open, brain inj NEC, concussion
804.7	OPN SKL/OTH FX/MENIN HEM*	805.0	FX CERVICAL VERTEBRA-CL*
804.70	Mult fx skull or face with other bones, open with SAH	805.00	Fx cervical vertebra NOS, closed
804.71	Mult fx skull or face with other bones, open with SAH, no coma	805.01	Fx C1 vertebra, closed
804.72	Mult fx skull or face with other bones, open with SAH, brief coma	805.02	Fx C2 vertebra, closed
804.73	Mult fx skull or face with other bones, open with SAH, moderate coma	805.03	Fx C3 vertebra, closed
804.74	Mult fx skull or face with other bones, open with SAH, prolonged coma	805.04	Fx C4 vertebra, closed
804.75	Mult fx skull or face w/ other bones open w/ SAH LOC > 24 hrs w/ no return	805.05	Fx C5 vertebra, closed
804.76	Mult fx skull or face with other bones, open with SAH, unspecified LOC	805.06	Fx C6 vertebra, closed
804.79	Mult fx skull or face with other bones, open with SAH, concussion	805.07	Fx C7 vertebra, closed
804.8	OPN SKL W OTH FX/HEM NEC*	805.08	Fx multiple cervical vertebra, closed
804.80	Mult fx skull or face with other bones, open, intracranial hemorrhage	805.1	FX CERVICAL VERTEBRA-OPN*
804.81	Mult fx skull or face w/ other bones open intracranial hemorrhage no LOC	805.10	Fx cervical vertebra NOS, open
		805.11	Fx C1 vertebra, open
		805.12	Fx C2 vertebra, open
		805.13	Fx C3 vertebra, open
		805.14	Fx C4 vertebra, open
		805.15	Fx C5 vertebra, open
		805.16	Fx C6 vertebra, open
		805.17	Fx C7 vertebra, open
		805.18	Fx multiple cervical vertebra, open
		805.2	Fx dorsal vertebra, closed
		805.3	Fx dorsal vertebra, open

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805.4	Fx lumbar vertebra, closed	806.6	FX SACRUM-CL W CORD INJ*
805.5	Fx lumbar vertebra, open	806.60	Fx sacrum closed, cord injury NOS
805.6	Fx sacrum/coccyx, closed	806.61	Fx sacrum closed, complete cauda equina lesion
805.7	Fx sacrum/coccyx, open	806.62	Fx sacrum closed, incomplete cauda equina injury NEC
805.8	@Vertebral Fx NOS, closed	806.69	Fx sacrum closed, other cord injury NEC
805.9	@Vertebral Fx NOS, open	806.7	FX SACRUM-OPN W CORD INJ*
806.0	CLOS CERV FX W CORD INJ*	806.70	Fx sacrum open, cord injury NOS
806.00	C1-4 fx closed, cord injury NOS	806.71	Fx sacrum open, complete cauda equina lesion
806.01	C1-4 fx closed, complete cord lesion	806.72	Fx sacrum open, incomplete cauda equina injury NEC
806.02	C1-4 fx closed, ant cord syndrome	806.79	Fx sacrum open, other cord injury NEC
806.03	C1-4 fx closed, central cord syndrome	806.8	@Vertebral Fx NOS closed w/cord injury
806.04	C1-4 fx closed, incomplete cord injury NEC	806.9	@Vertebral Fx NOS open w/cord injury
806.05	C5-7 fx closed, cord injury NOS	807.0	FRACTURE OF RIB-CLOSED*
806.06	C5-7 fx closed, complete cord lesion	807.00	Rib fx closed, NFS
806.07	C5-7 fx closed, ant cord syndrome	807.01	Rib fx closed, one rib
806.08	C5-7 fx closed, central cord syndrome	807.02	Rib fx closed, two ribs
806.09	C5-7 fx closed, incomplete cord injury NEC	807.03	Rib fix closed, three ribs
806.1	OPEN CERV FX W CORD INJ*	807.04	Rib fix closed, four ribs
806.10	C1-4 fx open, cord injury NOS	807.05	Rib fix closed, five ribs
806.11	C1-4 fx open, complete cord lesion	807.06	Rib fix closed, six ribs
806.12	C1-4 fx open, ant cord syndrome	807.07	Rib fix closed, seven ribs
806.13	C1-4 fx open, central cord syndrome	807.08	Rib fix closed, eight or more ribs
806.14	C1-4 fx open, incomplete cord injury NEC	807.09	Rib fix closed, multiple ribs NFS
806.15	C5-7 fx open, cord injury NOS	807.1	FRACTURE OF RIB-OPEN*
806.16	C5-7 fx open, complete cord lesion	807.10	Rib fx open, NFS
806.17	C5-7 fx open, ant cord syndrome	807.11	Rib fx open, one rib
806.18	C5-7 fx open, central cord syndrome	807.12	Rib fx open, two ribs
806.19	C5-7 fx open, incomplete cord injury NEC	807.13	Rib fix open, three ribs
806.2	CL DORSAL FX W CORD INJ*	807.14	Rib fix open, four ribs
806.20	T1-6 fx closed, cord injury NOS	807.15	Rib fix open, five ribs
806.21	T1-6 fx closed, complete cord lesion	807.16	Rib fix open, six ribs
806.22	T1-6 fx closed, ant cord syndrome	807.17	Rib fix open, seven ribs
806.23	T1-6 fx closed, central cord syndrome	807.18	Rib fix open, eight or more ribs
806.24	T1-6 fx closed, incomplete cord injury NEC	807.19	Rib fix open, multiple ribs NFS
806.25	T7-12 fx closed, cord injury NOS	807.2	Sternum fx closed
806.26	T7-12 fx closed, complete cord lesion	807.3	Sternum fx open
806.27	T7-12 fx closed, ant cord syndrome	807.4	Flail chest
806.28	T7-12 fx closed, central cord syndrome	807.5	Fx of the larynx or trachea closed (includes hyoid fx)
806.29	T7-12 fx closed, incomplete cord injury NEC	807.6	Fx of the larynx or trachea open (includes hyoid fx)
806.3	OPN DORSAL FX W CORD INJ*	808.0	Fx acetabulum closed
806.30	T1-6 fx open, cord injury NOS	808.1	Fx acetabulum open
806.31	T1-6 fx open, complete cord lesion	808.2	Fx pubis closed
806.32	T1-6 fx open, ant cord syndrome	808.3	Fx pubis open
806.33	T1-6 fx open, central cord syndrome	808.4	OTH PELVIC FRACTURE-CLOS*
806.34	T1-6 fx open, incomplete cord injury NEC	808.41	Fx ilium closed
806.35	T7-12 fx open, cord injury NOS	808.42	Fx ischium closed
806.36	T7-12 fx open, complete cord lesion	808.43	Multiple pelvic fxs with disruption of pelvic circle closed
806.37	T7-12 fx open, ant cord syndrome	808.49	Other pelivc fx closed
806.38	T7-12 fx open, central cord syndrome	808.5	OTH PELVIC FRACTURE-OPEN*
806.39	T7-12 fx open, incomplete cord injury NEC	808.51	Fx ilium open
806.4	Closed lumbar Fx w/cord injury	808.52	Fx ischium open
806.5	Open lumbar Fx w/cord injury		

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808.53 Multiple pelvic fxs with disruption of pelvic circle open	812.49 Fx humerus lower end closed other
808.59 Other pelivc fx open	812.5 FX LOWER HUMERUS-OPEN*
808.8 Unspecified pelvic fx closed	812.50 Fx humerus lower end open NFS
808.9 Unspecified pelvic fx open	812.51 Fx humerus lower end open supracondylar
809.0 Fx of bones of trunk closed NFS	812.52 Fx humerus lower end open lateral condylar
809.1 Fx of bones of trunk open NFS	812.53 Fx humerus lower end open medial condylar
810.0 FRACTURE CLAVICLE-CLOSED*	812.54 Fx humerus lower end open condyles unspecified
810.00 Fx clavicle closed NFS	812.59 Fx humerus lower end open other
810.01 Fx clavicle closed sternal end	813.0 FX UPPER RADIUS/ULNA-CL*
810.02 Fx clavicle closed shaft	813.00 Fx upper end of radius or ulna unspecified closed
810.03 Fx clavicle closed acromial end	813.01 Fx olecranon process of ulna closed
810.1 FRACTURE CLAVICLE-OPEN*	813.02 Fx coronoid process of ulna closed
810.10 Fx clavicle open NFS	813.03 Monteggia's fx closed
810.11 Fx clavicle open sternal end	813.04 Other and unspecified fx of proximal end of ulna closed
810.12 Fx clavicle open shaft	813.05 Fx head of radius closed
810.13 Fx clavicle open acromial end	813.06 Fx neck of radius closed
811.0 FRACTURE SCAPULA-CLOSED*	
811.00 Fx scapula closed NFS	813.07 Other and unspecified fx of proximal end of radius closed
811.01 Fx scapula closed acromial process	813.08 Fx of radius with ulna proximal end any part closed
811.02 Fx scapula closed coracoid process	813.1 FX UPPER RADIUS/ULNA-OPN*
811.03 Fx scapula closed glenoid cavity and neck of scapula	813.10 Fx upper end of radius or ulna unspecified open
811.09 Fx scapula closed other	813.11 Fx olecranon process of ulna open
811.1 FRACTURE OF SCAPULA-OPEN*	813.12 Fx coronoid process of ulna open
811.10 Fx scapula open NFS	813.13 Monteggia's fx open
811.11 Fx scapula open acromial process	813.14 Other and unspecified fx of proximal end of ulna open
811.12 Fx scapula open coracoid process	813.15 Fx head of radius open
811.13 Fx scapula open glenoid cavity and neck of scapula	813.16 Fx neck of radius open
811.19 Fx scapula open other	813.17 Other and unspecified fx of proximal end of radius open
812.0 FX UPPER HUMERUS-CLOSED*	813.18 Fx of radius with ulna proximal end any part open
812.00 Fx humerus upper end closed NFS	813.2 FX RADIUS/ULNA SHAFT-CL*
812.01 Fx humerus upper end closed surgical neck	813.20 Fx of radius or ulna unspecified closed
812.02 Fx humerus upper end closed anatomical neck	813.21 Fx of radius shaft closed
812.03 Fx humerus upper end closed greater tuberosity	813.22 Fx of ulna shaft closed
812.09 Fx humerus upper end closed other	813.23 Fx of ulna shaft and radial shaft closed
812.1 FX UPPER HUMERUS-OPEN*	813.3 FX RADIUS/ULNA SHAFT-OPN*
812.10 Fx humerus upper end open NFS	813.30 Fx of radius or ulna unspecified open
812.11 Fx humerus upper end open surgical neck	813.31 Fx of radius shaft open
812.12 Fx humerus upper end open anatomical neck	813.32 Fx of ulna shaft open
812.13 Fx humerus upper end open greater tuberosity	813.33 Fx of ulna shaft and radial shaft open
812.19 Fx humerus upper end open other	813.4 FX LOWER RADIUS/ULNA-CL*
812.2 FX HUMERUS SHAFT/NOS-CL*	813.40 Fx of radius or ulna distal end closed
812.20 Fx humerus unspecified part closed	813.41 Colles' fx (Smith's fx) closed
812.21 Fx humerus shaft closed	813.42 Other fx of distal end of radius closed
812.3 FX HUMERUS SHAFT/NOS-OPN*	813.43 Fx of ulna distal end closed
812.30 Fx humerus unspecified part open	813.44 Fx of radius with ulna distal end closed
812.31 Fx humerus shaft open	813.45 Torus fracture of radius (alone)
812.4 FX LOWER HUMERUS-CLOSED*	813.46 Torus fracture of ulna (alone)
812.40 Fx humerus lower end closed NFS	813.47 Torus fracture of radius and ulna
812.41 Fx humerus lower end closed supracondylar	813.5 FX LOW RADIUS W/ULNA-OPN*
812.42 Fx humerus lower end closed lateral condylar	
812.43 Fx humerus lower end closed medial condylar	
812.44 Fx humerus lower end closed condyles unspecified	

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813.50 Fx of radius or ulna distal end open	815.12 Fx of metacarpal bone open base of other metacarpal
813.51 Colles' fx (Smith's fx) open	815.13 Fx of metacarpal bone open shaft of metacarpal
813.52 Other fx of distal end of radius open	815.14 Fx of metacarpal bone open neck of metacarpal
813.53 Fx of ulna distal end open	815.19 Fx of metacarpal bone open multiple sites
813.54 Fx of radius with ulna distal end open	816.0 FX PHALANGES, HAND-CLOSE*
813.8 FX RADIUS/ULNA NOS-CLOSE*	816.00 Fx of phalanges closed phalanx or phalanges NFS
813.80 Fx of radius or ulna closed unspecified	816.01 Fx of phalanges closed middle or proximal phalanx or phalanges
813.81 Fx of radius closed unspecified	816.02 Fx of phalanges closed distal phalanx or phalanges
813.82 Fx of ulna closed unspecified	816.03 Fx of phalanges closed multiple sites
813.83 Fx of radius with ulna closed unspecified	816.1 FX PHALANGES, HAND-OPEN*
813.9 FX RADIUS/ULNA NOS-OPEN*	816.10 Fx of phalanges open phalanx or phalanges NFS
813.90 Fx of radius or ulna open unspecified	816.11 Fx of phalanges open middle or proximal phalanx or phalanges
813.91 Fx of radius open unspecified	816.12 Fx of phalanges open distal phalanx or phalanges
813.92 Fx of ulna open unspecified	816.13 Fx of phalanges open multiple sites
813.93 Fx of radius with ulna open unspecified	817.0 Multiple fxs of hand bones closed
814.0 FRACTURE CARPAL BONE-CL*	817.1 Multiple fxs of hand bones open
814.00 Fx of carpal bone unspecified closed	818.0 Ill defined fxs of upper limb closed
814.01 Fx of carpal bone navicular (scaphoid) closed	818.1 Ill defined fxs of upper limb open
814.02 Fx of carpal bone lunate (semilunar) closed	819.0 Multiple/unspecified fx both UE w/ rib/sternum fx closed
814.03 Fx of carpal bone triquetral (cuneiform) closed	819.1 Multiple/unspecified fx both UE w/ rib/sternum fx open
814.04 Fx of carpal bone pisiform closed	820.0 TRANSCERV FX FEMUR-CLOSE*
814.05 Fx of carpal bone trapezium (larger multangular) closed	820.00 Fx femur intracapsular NOS, closed
814.06 Fx or carpal bone trapezoid (smaller multangular) closed	820.01 Fx femur epiphysis closed
814.07 Fx of carpal bone capitate (os magnum) closed	820.02 Fx femur mid-cervical section closed
814.08 Fx of carpal bone hamate (unciform) closed	820.03 Fx femur base of neck closed
814.09 Fx of carpal bone other bone closed	820.09 Fx femur other (head) closed
814.1 FRACTURE CARPAL BONE-OPN*	820.1 TRANSCERV FX FEMUR-OPEN*
814.10 Fx of carpal bone unspecified open	820.10 Fx femur intracapsular NOS, open
814.11 Fx of carpal bone navicular (scaphoid) open	820.11 Fx femur epiphysis open
814.12 Fx of carpal bone lunate (semilunar) open	820.12 Fx femur mid-cervical section open
814.13 Fx of carpal bone triquetral (cuneiform) open	820.13 Fx femur base of neck open
814.14 Fx of carpal bone pisiform open	820.19 Fx femur other (head) open
814.15 Fx of carpal bone trapezium (larger multangular) open	820.2 PERTROCHANTERIC FX-CLOS*
814.16 Fx or carpal bone trapezoid (smaller multangular) open	820.20 Trochanteric Fx NOS, closed
814.17 Fx of carpal bone capitate (os magnum) open	820.21 Intertrochanteric Fx, closed
814.18 Fx of carpal bone hamate (unciform) open	820.22 Subtrochanteric Fx, closed
814.19 Fx of carpal bone other bone open	820.3 PERTROCHANTERIC FX-OPEN*
815.0 FRACTURE METACARPAL-CLOS*	820.30 Trochanteric Fx NOS, open
815.00 Fx of metacarpal bone closed NFS	820.31 Intertrochanteric Fx, open
815.01 Fx of metacarpal bone closed base of thumb (1st metacarpal)	820.32 Subtrochanteric Fx, open
815.02 Fx of metacarpal bone closed base of other metacarpal	820.8 Fx femur - unspecified part of neck closed
815.03 Fx of metacarpal bone closed shaft of metacarpal	820.9 Fx femur - unspecified part of neck open
815.04 Fx of metacarpal bone closed neck of metacarpal	821.0 FX FEMUR SHAFT/NOS-CLOSE*
815.09 Fx of metacarpal bone closed multiple sites	821.00 Fx femur - unspecified part closed
815.1 FRACTURE METACARPAL-OPEN*	821.01 Fx femur - shaft closed
815.10 Fx of metacarpal bone open NFS	821.1 FX FEMUR SHAFT/NOS-OPEN*
815.11 Fx of metacarpal bone open base of thumb (1st metacarpal)	821.10 Fx femur - unspecified part open
	821.11 Fx femur - shaft open
	821.2 FX LOWER END FEMUR-CLOSE*
	821.20 Fx femur - lower end - unspecified part closed

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821.21	Fx femur - lower end - condyle closed	825.20	Fx unspecified bone of foot closed
821.22	Fx femur - lower end - epiphysis closed	825.21	Fx astragalus (talus) closed
821.23	Fx femur - lower end - supracondylar closed	825.22	Fx navicular (scaphoid) of foot closed
821.29	Fx femur - lower end - other closed	825.23	Fx cuboid of foot closed
821.3	<b>FX LOWER END FEMUR-OPEN*</b>	825.24	Fx cuneiform closed
821.30	Fx femur - lower end - unspecified part open	825.25	Fx metatarsal bone(s) closed
821.31	Fx femur - lower end - condyle open	825.29	Fx metatarsal with tarsal bone(s) closed
821.32	Fx femur - lower end - epiphysis open	825.3	<b>FX TARS/METATARS NEC-OPN*</b>
821.33	Fx femur - lower end - supracondylar open	825.30	Fx unspecified bone of foot open
821.39	Fx femur - lower end - other open	825.31	Fx astragalus (talus) open
822.0	Fx patella closed	825.32	Fx navicular (scaphoid) of foot open
822.1	Fx patella open	825.33	Fx cuboid of foot open
823.0	<b>FX UPPER TIBIA/FIBULA-CL*</b>	825.34	Fx cuneiform open
823.00	Fx tibia upper end closed	825.35	Fx metatarsal bone(s) open
823.01	Fx fibula upper end closed	825.39	Fx metatarsal with tarsal bone(s) open
823.02	Fx tibia and fibula upper end closed	826.0	Fx one or more phalanges of foot closed
823.1	<b>FX UPPER TIBIA/FIBULA-OP*</b>	826.1	Fx one or more phalanges of foot open
823.10	Fx tibia upper end open	827.0	Other multiple and ill defined fx of lower limb closed
823.11	Fx fibula upper end open	827.1	Other multiple and ill defined fx of lower limb open
823.12	Fx tibia and fibula upper end open	828.0	Multiple fxs w/ both LE, lower w/ UE, and LE w/ sternum closed
823.2	<b>FX SHAFT TIB/FIB-CLOSED*</b>	828.1	Multiple fxs w/ both LE, lower w/ UE, and LE w/ sternum open
823.20	Fx tibia shaft closed	829.0	Fx of unspecified bone(s) closed
823.21	Fx fibula shaft closed	829.1	Fx of unspecified bone(s) open
823.22	Fx tibia and fibula shaft closed	830.0	Dislocation of jaw closed
823.3	<b>FX TIBIA/FIBULA SHAFT-OP*</b>	830.1	Dislocation of jaw open
823.30	Fx tibia shaft open	831.0	<b>DISLOCAT SHOULDER-CLOSED*</b>
823.31	Fx fibula shaft open	831.00	Dislocation of shoulder unspecified closed
823.32	Fx tibia and fibula shaft open	831.01	Dislocation of anterior humerus closed
823.40	Fx tibia torus	831.02	Dislocation of posterior humerus closed
823.41	Fx fibula torus	831.03	Dislocation of inferior humerus closed
823.42	Fx tibia and fibula torus	831.04	Acromioclavicular joint (includes clavicle) dislocation closed
823.8	<b>FX TIBIA/FIBULA NOS-CLOS*</b>	831.09	Other dislocation of shoulder closed
823.80	Fx tibia unspecified closed	831.1	<b>DISLOCAT SHOULDER-OPEN*</b>
823.81	Fx fibula unspecified closed	831.10	Dislocation of shoulder unspecified open
823.82	Fx tibia and fibula unspecified closed	831.11	Dislocation of anterior humerus open
823.9	<b>FX TIBIA/FIBULA NOS-OPEN*</b>	831.12	Dislocation of posterior humerus open
823.90	Fx tibia unspecified open	831.13	Dislocation of inferior humerus open
823.91	Fx fibula unspecified open	831.14	Acromioclavicular joint (includes clavicle) dislocation open
823.92	Fx tibia and fibula unspecified open	831.19	Other dislocation of shoulder open
824.0	Fx medial malleolus closed	832.0	<b>DISLOCATION ELBOW-CLOSED*</b>
824.1	Fx medial malleolus open	832.00	Dislocation of elbow unspecified closed
824.2	Fx lateral malleolus closed	832.01	Anterior dislocation of elbow closed
824.3	Fx lateral malleolus open	832.02	Posterior dislocation of elbow closed
824.4	Fx bimalleolar closed	832.03	Medial dislocation of elbow closed
824.5	Fx bimalleolar open	832.04	Lateral dislocation of elbow closed
824.6	Fx trimalleolar closed	832.09	Other dislocation of elbow closed
824.7	Fx trimalleolar open	832.1	<b>DISLOCATION ELBOW-OPEN*</b>
824.8	Fx ankle NOS closed	832.10	Dislocation of elbow unspecified open
824.9	Fx ankle NOS open		
825.0	Fx calcaneus closed		
825.1	Fx calcaneus open		
825.2	<b>FX TARSL/METATARS NEC-CL*</b>		

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Revised June 2011

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832.11	Anterior dislocation of elbow open	836.59	Other dislocation of knee closed
832.12	Posterior dislocation of elbow open	836.6	OTH DISLOCAT KNEE-OPEN*
832.13	Medial dislocation of elbow open	836.60	Dislocation of knee unspecified open
832.14	Lateral dislocation of elbow open	836.61	Anterior dislocation of tibia proximal end open
832.19	Other dislocation of elbow open	836.62	Posterior dislocation of tibia proximal end open
832.2	Subluxation of radial head in elbow (nursemaid's elbow)	836.63	Medial dislocation of tibia proximal end open
833.0	DISLOCATION WRIST-CLOSED*	836.64	Lateral dislocation of tibia proximal end open
833.00	Dislocation of wrist unspecified part closed	836.69	Other dislocation of knee open
833.01	Dislocation of radioulnar joint closed	837.0	Dislocation of ankle closed
833.02	Dislocation of radiocarpal joint closed	837.1	Dislocation of ankle open
833.03	Dislocation of midcarpal joint closed	838.0	DISLOCATION FOOT-CLOSED*
833.04	Dislocation of carpal-metacarpal joint closed	838.00	Dislocation of foot unspecified closed
833.05	Dislocation of metacarpal proximal closed	838.01	Dislocation tarsal joint unspecified closed
833.09	Other dislocation of wrist closed	838.02	Dislocation midtarsal joint closed
833.1	DISLOCATION WRIST-OPEN*	838.03	Dislocation tarsometatarsal joint closed
833.10	Dislocation of wrist unspecified part open	838.04	Dislocation metatarsal joint unspecified closed
833.11	Dislocation of radioulnar joint open	838.05	Dislocation metatarsophalangeal joint closed
833.12	Dislocation of radiocarpal joint open	838.06	Dislocation interphalangeal joint closed
833.13	Dislocation of midcarpal joint open	838.09	Dislocation of foot other closed
833.14	Dislocation of carpal-metacarpal joint open	838.1	DISLOCATION FOOT-OPEN*
833.15	Dislocation of metacarpal proximal open	838.10	Dislocation of foot unspecified open
833.19	Other dislocation of wrist open	838.11	Dislocation tarsal joint unspecified open
834.0	DISLOCAT FINGER-CLOSED*	838.12	Dislocation midtarsal joint open
834.00	Dislocation of finger unspecified part closed	838.13	Dislocation tarsometatarsal joint open
834.01	Dislocation of metacarpophalangeal joint closed	838.14	Dislocation metatarsal joint unspecified open
834.02	Dislocation of interphalangeal joint closed	838.15	Dislocation metatarsophalangeal joint open
834.1	DISLOCAT FINGER-OPEN*	838.16	Dislocation interphalangeal joint open
834.10	Dislocation of finger unspecified part open	838.19	Dislocation of foot other open
834.11	Dislocation of metacarpophalangeal joint open	839.0	DISLOC CERVICAL VERT-CL*
834.12	Dislocation of interphalangeal joint open	839.00	Cervical vertebrae dislocation unspecified closed
835.0	DISLOCATION HIP-CLOSED*	839.01	C1 vertebra dislocation closed
835.00	Dislocation of hip unspecified closed	839.02	C2 vertebra dislocation closed
835.01	Posterior dislocation of hip closed	839.03	C3 vertebra dislocation closed
835.02	Obturator dislocation of hip closed	839.04	C4 vertebra dislocation closed
835.03	Other anterior dislocation of hip closed	839.05	C5 vertebra dislocation closed
835.1	DISLOCATION HIP-OPEN*	839.06	C6 vertebra dislocation closed
835.10	Dislocation of hip unspecified open	839.07	C7 vertebra dislocation closed
835.11	Posterior dislocation of hip open	839.08	Multiple cervical vertebrae dislocation closed
835.12	Obturator dislocation of hip open	839.1	DISLOC CERVICAL VERT-OPN*
835.13	Other anterior dislocation of hip open	839.10	Cervical vertebrae dislocation unspecified open
836.0	Tear of medial cartilage or meniscus of knee	839.11	C1 vertebra dislocation open
836.1	Tear of lateral cartilage or meniscus of knee	839.12	C2 vertebra dislocation open
836.2	Other tear of cartilage or meniscus of knee	839.13	C3 vertebra dislocation open
836.3	Dislocation of patella closed	839.14	C4 vertebra dislocation open
836.4	Dislocation of patella open	839.15	C5 vertebra dislocation open
836.5	OTH DISLOCAT KNEE-CLOSED*	839.16	C6 vertebra dislocation open
836.50	Dislocation of knee unspecified closed	839.17	C7 vertebra dislocation open
836.51	Anterior dislocation of tibia proximal end closed	839.18	Multiple cervical vertebrae dislocation open
836.52	Posterior dislocation of tibia proximal end closed	839.2	DISLOC THOR/LUMB VERT-CL*
836.53	Medial dislocation of tibia proximal end closed	839.20	Lumbar vertebra dislocation closed
836.54	Lateral dislocation of tibia proximal end closed	839.21	Thoracic vertebra dislocation closed
		839.3	DISL THORA/LUMB VERT-OPN*

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839.30	Lumbar vertebra dislocation open	843.8	Sprain/strain other specified site of hip/thigh
839.31	Thoracic vertebra dislocation open	843.9	Sprain/strain unspecified site of hip/thigh
839.4	OTH DISLOCAT VERTEBRA-CL*	844.0	Sprain/strain lateral collateral ligament of knee
839.40	Dislocation vertebra unspecified site closed	844.1	Sprain/strain medial collateral ligament of knee
839.41	Dislocation coccyx closed	844.2	Sprain/strain cruciate ligament of knee
839.42	Dislocation sacrum closed	844.3	Sprain/strain tibiofibular (joint/ligament) superior
839.49	Dislocation other vertebra closed	844.8	Sprain/strain other specified site of knee and leg
839.5	OTH DISLOC VERTEBRA-OPEN*	844.9	Sprain/strain unspecified site of knee and leg
839.50	Dislocation vertebra unspecified site open	845.0	SPRAIN OF ANKLE*
839.51	Dislocation coccyx open	845.00	Sprain/strain ankle unspecified site
839.52	Dislocation sacrum open	845.01	Sprain/strain ankle deltoid ligament (internal collateral)
839.59	Dislocation other vertebra open	845.02	Sprain/strain ankle calcaneofibular ligament
839.6	DISLOCAT OTH SITE-CLOSED*	845.03	Sprain/strain ankle tibiofibular (distal) ligament
839.61	Dislocation sternum closed	845.09	Sprain/strain ankle other specified site
839.69	Dislocation other closed	845.1	SPRAIN OF FOOT*
839.7	DISLOCAT OTH SITE-OPEN*	845.10	Sprain/strain foot unspecified site
839.71	Dislocation sternum open	845.11	Sprain/strain foot tarsometatarsal joint/ligament
839.79	Dislocation other open	845.12	Sprain/strain foot metatarsophalangeal joint
839.8	Multiple and ill defined dislocations closed	845.13	Sprain/strain foot interphalangeal joint (toe)
839.9	Multiple and ill defined dislocations open	845.19	Sprain/strain foot other specified site
840.0	Acromioclavicular joint sprain/strain	846.0	Sprain/strain lumbosacral joint/ligament
840.1	Coracoclavicular ligament sprain/strain	846.1	Sprain/strain sacroiliac joint/ligament
840.2	Coracohumeral ligament sprain/strain	846.2	Sprain/strain sacrospinatus ligament
840.3	Infraspinatus muscle/tendon sprain/strain	846.3	Sprain/strain sacrotuberous ligament
840.4	Rotator cuff (capsule) sprain/strain	846.8	Sprain/strain other specified site of the sacroiliac region
840.5	Subscapularus (muscle) sprain/strain	846.9	Sprain/strain unspecified site of the sacroiliac region
840.6	Supraspinatus muscle/tendon sprain/strain	847.0	Sprain/strain neck
840.7	Superior glenoid labrum lesion	847.1	Sprain/strain thoracic back
840.8	Other specified sites of shoulder and upper arm sprain/strain	847.2	Sprain/strain lumbar back
840.9	Unspecified sites of shoulder and upper arm sprain/strain	847.3	Sprain/strain sacral back
841.0	Radial collateral ligament sprain/strain	847.4	Sprain/strain coccyx back
841.1	Ulnar collateral ligament sprain/strain	847.9	Sprain/strain unspecified site of back
841.2	Radiohumeral joint sprain/strain	848.0	Sprain/stain septal cartilage of nose
841.3	Ulnohumeral joint sprain/strain	848.1	Sprain/strain jaw
841.8	Other specified sites of elbow and forearm sprain/strain	848.2	Sprain/strain thyroid region
841.9	Unspecified site of elbow and forearm sprain/strain	848.3	Sprain/strain rib(s)
842.0	SPRAIN OF WRIST*	848.4	SPRAIN OF STERNUM*
842.00	Sprain/strain wrist unspecified site	848.40	Sprain/strain sternum unspecified site
842.01	Sprain/strain carpal joint	848.41	Sprain/strain sternoclavicular joint/ligament
842.02	Sprain/strain radiocarpal (joint/ligament)	848.42	Sprain/strain chondrosternal joint
842.09	Sprain/strain wrist other site	848.49	Sprain/strain sternum other
842.1	SPRAIN OF HAND*	848.5	Sprain/strain pelvis
842.10	Sprain/strain hand unspecified site	848.8	Sprain/strain other specified sites
842.11	Sprain/strain carpometacarpal joint	848.9	Sprain/strain unspecified site
842.12	Sprain/strain metacarpophalangeal joint	850.0	Concussion with no loc
842.13	Sprain/strain interphalangeal joint	850.1	CONCUSSION-BRIEF COMA*
842.19	Sprain/strain hand other site	850.11	Concussion with loc < 30 mins
843.0	Sprain/strain iliofemoral ligament	850.12	Concussion with loc 31-59 mins
843.1	Sprain/strain ischiocapsular ligament	850.2	Concussion with moderate loc
		850.3	Concussion with prolonged loc with return
		850.4	Concussion with prolonged loc without return

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850.5	Concussion with loc unspecified	851.45	Cerebellar/brain stem contusion prolonged loc with no return
850.9	Concussion unspecified	851.46	Cerebellar/brain stem contusion loc unspecified duration
851.0	<b>CORTEX CONTUSION*</b>	851.49	Cerebellar/brain stem contusion prolonged concussion
851.00	Cortex (cerebral) contusion unspecified loc	851.5	<b>CEREBEL CONTUS W OPN WND*</b>
851.01	Cortex (cerebral) contusion no loc	851.50	Cerebellar/brain stem contusion open
851.02	Cortex (cerebral) contusion brief loc	851.51	Cerebellar/brain stem contusion open no loc
851.03	Cortex (cerebral) contusion moderate loc	851.52	Cerebellar/brain stem contusion open brief loc
851.04	Cortex (cerebral) contusion prolonged loc	851.53	Cerebellar/brain stem contusion open moderate loc
851.05	Cortex (cerebral) contusion prolonged loc with no return	851.54	Cerebellar/brain stem contusion open prolonged loc
851.06	Cortex (cerebral) contusion loc unspecified duration	851.55	Cerebellar/brain stem contusion open prolonged loc with no return
851.09	Cortex (cerebral) contusion with concussion	851.56	Cerebellar/brain stem contusion open loc unspecified duration
851.1	<b>CORTEX CONTUSION/OPN WND*</b>	851.59	Cerebellar/brain stem contusion open prolonged concussion
851.10	Cortex (cerebral) contusion open with unspecified loc	851.6	<b>CEREBEL/BRAIN STEM LACER*</b>
851.11	Cortex (cerebral) contusion open with no loc	851.60	Cerebellar/brain stem laceration closed
851.12	Cortex (cerebral) contusion open with brief loc	851.61	Cerebellar/brain stem laceration closed no loc
851.13	Cortex (cerebral) contusion open with moderate loc	851.62	Cerebellar/brain stem laceration closed brief loc
851.14	Cortex (cerebral) contusion open with prolonged loc	851.63	Cerebellar/brain stem laceration closed moderate loc
851.15	Cortex (cerebral) contusion open with prolonged loc with no return	851.64	Cerebellar/brain stem laceration closed prolonged loc
851.16	Cortex (cerebral) contusion open with loc unspecified duration	851.65	Cerebellar/brain stem laceration closed prolonged loc with no return
851.19	Cortex (cerebral) contusion open with concussion	851.66	Cerebellar/brain stem laceration closed unspecified loc
851.2	<b>CEREBRAL CORTEX LACERAT*</b>	851.69	Cerebellar/brain stem laceration closed concussion
851.20	Cortex (cerebral) laceration unspecified loc	851.7	<b>CEREBEL LACER W OPEN WND*</b>
851.21	Cortex (cerebral) laceration no loc	851.70	Cerebellar/brain stem laceration open
851.22	Cortex (cerebral) laceration brief loc	851.71	Cerebellar/brain stem laceration open no loc
851.23	Cortex (cerebral) laceration moderate loc	851.72	Cerebellar/brain stem laceration open brief loc
851.24	Cortex (cerebral) laceration prolonged loc	851.73	Cerebellar/brain stem laceration open moderate loc
851.25	Cortex (cerebral) laceration prolonged loc with no return	851.74	Cerebellar/brain stem laceration open prolonged loc
851.26	Cortex (cerebral) laceration loc unspecified duration	851.75	Cerebellar/brain stem laceration open prolonged loc with no return
851.29	Cortex (cerebral) laceration with concussion	851.76	Cerebellar/brain stem laceration open unspecified loc
851.3	<b>CORTEX LACER W OPN WOUND*</b>	851.79	Cerebellar/brain stem laceration open concussion
851.30	Cortex (cerebral) laceration open loc unspecified	851.8	<b>CEREBRAL LACERATION NEC*</b>
851.31	Cortex (cerebral) laceration open no loc	851.80	Cerebral injury NFS closed
851.32	Cortex (cerebral) laceration open brief loc	851.81	Cerebral injury NFS closed no loc
851.33	Cortex (cerebral) laceration open moderate loc	851.82	Cerebral injury NFS closed brief loc
851.34	Cortex (cerebral) laceration open prolonged loc	851.83	Cerebral injury NFS closed moderate loc
851.35	Cortex (cerebral) laceration open prolonged loc with no return	851.84	Cerebral injury NFS closed prolonged loc
851.36	Cortex (cerebral) laceration open loc unspecified duration	851.85	Cerebral injury NFS closed prolonged loc with no return
851.39	Cortex (cerebral) laceration open concussion	851.86	Cerebral injury NFS closed unspecified loc
851.4	<b>CEREBEL/BRAIN STM CONTUS*</b>	851.89	Cerebral injury NFS closed concussion
851.40	Cerebellar/brain stem contusion	851.9	<b>BRAIN LAC NEC W OPEN WND*</b>
851.41	Cerebellar/brain stem contusion no loc	851.90	Cerebral injury NFS open
851.42	Cerebellar/brain stem contusion brief loc	851.91	Cerebral injury NFS open no loc
851.43	Cerebellar/brain stem contusion moderate loc	851.92	Cerebral injury NFS open brief loc
851.44	Cerebellar/brain stem contusion prolonged loc	851.93	Cerebral injury NFS open moderate loc

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851.94 Cerebral injury NFS open prolonged loc	852.52 EDH open brief loc
851.95 Cerebral injury NFS open prolonged loc with no return	852.53 EDH open moderate loc
851.96 Cerebral injury NFS open unspecified loc	852.54 EDH open prolonged loc
851.99 Cerebral injury NFS open concussion	852.55 EDH open prolonged loc with no return
852.0 TRAUM SUBARACHNOID HEM*	852.56 EDH open prolonged loc unspecified duration
852.00 SAH closed	852.59 EDH open concussion
852.01 SAH closed no loc	853.0 TRAUMATIC BRAIN HEM NEC*
852.02 SAH closed brief loc	853.00 Other intracranial hemorrhage closed
852.03 SAH closed moderate loc	853.01 Other intracranial hemorrhage closed no loc
852.04 SAH closed prolonged loc	853.02 Other intracranial hemorrhage closed brief loc
852.05 SAH closed prolonged loc with no return	853.03 Other intracranial hemorrhage closed moderate loc
852.06 SAH closed loc unspecified	853.04 Other intracranial hemorrhage closed prolonged loc
852.09 SAH closed concussion	853.05 Other intracranial hemorrhage closed prolonged loc with no return
852.1 SUBARACH HEM W OPN WOUND*	853.06 Other intracranial hemorrhage closed loc unspecified
852.10 SAH open	853.09 Other intracranial hemorrhage closed concussion
852.11 SAH open no loc	853.1 BRAIN HEM NEC W OPN WND*
852.12 SAH open brief loc	853.10 Other intracranial hemorrhage open
852.13 SAH open moderate loc	853.11 Other intracranial hemorrhage open no loc
852.14 SAH open prolonged loc	853.12 Other intracranial hemorrhage open brief loc
852.15 SAH open prolonged loc with no return	853.13 Other intracranial hemorrhage open moderate loc
852.16 SAH open loc unspecified	853.14 Other intracranial hemorrhage open prolonged loc
852.19 SAH open concussion	853.15 Other intracranial hemorrhage open prolonged loc with no return
852.2 TRAUMATIC SUBDURAL HEM*	853.16 Other intracranial hemorrhage open loc unspecified
852.20 SDH closed	853.19 Other intracranial hemorrhage open concussion
852.21 SDH closed no loc	854.0 BRAIN INJURY NEC*
852.22 SDH closed brief loc	854.00 Intracranial injury NOS closed
852.23 SDH closed moderate loc	854.01 Intracranial injury NOS closed no loc
852.24 SDH closed prolonged loc	854.02 Intracranial injury NOS closed brief loc
852.25 SDH closed prolonged loc with no return	854.03 Intracranial injury NOS closed moderate loc
852.26 SDH closed loc unspecified	854.04 Intracranial injury NOS closed prolonged loc
852.29 SDH closed concussion	854.05 Intracranial injury NOS closed prolonged loc no return
852.3 SUBDURAL HEM W OPN WOUND*	854.06 Intracranial injury NOS closed loc unspecified duration
852.30 SDH open	854.09 Intracranial injury NOS closed concussion
852.31 SDH open no loc	854.1 BRAIN INJ NEC W OPN WND*
852.32 SDH open brief loc	854.10 Intracranial injury NOS open
852.33 SDH open moderate loc	854.11 Intracranial injury NOS open no loc
852.34 SDH open prolonged loc	854.12 Intracranial injury NOS open brief loc
852.35 SDH open prolonged loc with no return	854.13 Intracranial injury NOS open moderate loc
852.36 SDH open loc unspecified	854.14 Intracranial injury NOS open prolonged loc
852.39 SDH open concussion	854.15 Intracranial injury NOS open prolonged loc no return
852.4 TRAUMATIC EXTRADURAL HEM*	854.16 Intracranial injury NOS open loc unspecified duration
852.40 EDH closed	854.19 Intracranial injury NOS open concussion
852.41 EDH closed no loc	860.0 Traumatic pneumothorax, closed
852.42 EDH closed brief loc	860.1 Traumatic pneumothorax, open
852.43 EDH closed moderate loc	860.2 Traumatic hemothorax, closed
852.44 EDH closed prolonged loc	860.3 Traumatic hemothorax, open
852.45 EDH closed prolonged loc with no return	860.4 Traumatic pneumohemothorax, closed
852.46 EDH closed prolonged loc unspecified duration	860.5 Traumatic pneumohemothorax, open
852.49 EDH closed concussion	861.0 HEART INJURY-CLOSED*
852.5 EXTRADURAL HEM W OPN WND*	861.00 Injury to heart closed
852.50 EDH open	
852.51 EDH open no loc	

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861.01	Contusion of heart closed	863.51	Ascending right colon injury open
861.02	Laceration of heart without penetration of chambers closed	863.52	Transverse colon injury open
861.03	Laceration of heart with penetration of chambers closed	863.53	Descending left colon injury open
861.1	HEART INJURY-OPEN*	863.54	Sigmoid colon injury open
861.10	Injury to heart open	863.55	Rectum injury open
861.11	Contusion of heart open	863.56	Colon and rectum injury open
861.12	Laceration of heart without penetration of chambers open	863.59	Injury to large intestine other open
861.13	Laceration of heart with penetration of chambers open	863.8	GI INJURY NEC-CLOSED*
861.2	LUNG INJURY-CLOSED*	863.80	GI tract injury unspecified closed
861.20	Lung injury closed	863.81	Pancreas head injury closed
861.21	Lung contusion closed	863.82	Pancreas body injury closed
861.22	Lung laceration closed	863.83	Pancreas tail injury closed
861.3	LUNG INJURY-OPEN*	863.84	Pancreas unspecified injury closed
861.30	Lung injury open	863.85	Appendix injury closed
861.31	Lung contusion open	863.89	Other injury to GI Tract closed
861.32	Lung laceration open	863.9	GI INJURY NEC-OPEN*
862.0	Injury diaphragm closed	863.90	GI tract injury unspecified open
862.1	Injury diaphragm open	863.91	Pancreas head injury open
862.2	OTH INTRATHORACIC INJ-CL*	863.92	Pancreas body injury open
862.21	Injury to bronchus closed	863.93	Pancreas tail injury open
862.22	Injury to esophagus closed	863.94	Pancreas unspecified injury open
862.29	Injury to other intrathoracic organs closed	863.95	Appendix injury open
862.3	OTH INTRATHORAC INJ-OPEN*	863.99	Other injury to GI Tract open
862.31	Injury to bronchus open	864.0	LIVER INJURY-CLOSED*
862.32	Injury to esophagus open	864.00	Liver injury NFS closed
862.39	Injury to other intrathoracic organs open	864.01	Liver hematoma or contusion closed
862.8	Unspecified injury to intrathoracic organs closed	864.02	Liver laceration minor closed
862.9	Unspecified injury to intrathoracic organs closed	864.03	Liver laceration moderate closed
863.0	Injury to stomach closed	864.04	Liver laceration major closed
863.1	Injury to stomach open	864.05	Liver laceration unspecified closed
863.2	SMALL INTESTINE INJ-CLOS*	864.09	Liver injury other closed
863.20	Injury to small intestine unspecified closed	864.1	LIVER INJURY-OPEN*
863.21	Injury to duodenum closed	864.10	Liver injury NFS open
863.29	Injury to small intestine other site closed	864.11	Liver hematoma open
863.3	SMALL INTESTINE INJ-OPEN*	864.12	Liver laceration minor open
863.30	Injury to small intestine unspecified open	864.13	Liver laceration moderate open
863.31	Injury to duodenum open	864.14	Liver laceration major open
863.39	Injury to small intestine other site open	864.15	Liver laceration unspecified open
863.4	COLON INJURY-CLOSED*	864.19	Liver injury other open
863.40	Injury to colon unspecified site injury closed	865.0	SPLEEN INJURY-CLOSED*
863.41	Ascending right colon injury closed	865.00	Spleen injury NFS closed
863.42	Transverse colon injury closed	865.01	Spleen hematoma without rupture of capsule closed
863.43	Descending left colon injury closed	865.02	Spleen injury with rupture of capsule closed
863.44	Sigmoid colon injury closed	865.03	Spleen laceration extending into parenchyma closed
863.45	Rectum injury closed	865.04	Spleen laceration with massive parenchymal disruption closed
863.46	Colon and rectum injury closed	865.09	Spleen injury other closed
863.49	Injury to large intestine other closed	865.1	SPLEEN INJURY-OPEN*
863.5	COLON INJURY-OPEN*	865.10	Spleen injury NFS open
863.50	Injury to colon unspecified site injury open	865.11	Spleen hematoma without rupture of capsule open
		865.12	Spleen injury with rupture of capsule open
		865.13	Spleen laceration extending into parenchyma open

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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865.14 Spleen laceration with massive parenchymal disruption open	871.3 Avulsion of eye
865.19 Spleen injury other open	871.4 Unspecified laceration of eye
866.0 KIDNEY INJURY-CLOSED*	871.5 Penetration of eyeball with magnetic foreign body
866.00 Kidney injury NFS closed	871.6 Penetration of eyeball with non-magnetic foreign body
866.01 Kidney hematoma without rupture of capsule closed	871.7 Unspecified ocular penetration
866.02 Kidney laceration closed	871.9 Unspecified open wound of eyeball
866.03 Kidney complete disruption closed	872.0 OPEN WOUND EXTERNAL EAR*
866.1 KIDNEY INJURY-OPEN*	872.00 Open wound of external ear unspecified site
866.10 Kidney injury NFS open	872.01 Open wound of external ear pinna or auricle
866.11 Kidney hematoma without rupture of capsule open	872.02 Open wound of auditory canal
866.12 Kidney laceration open	872.1 OPEN WOUND EXT EAR-COMPL*
866.13 Kidney complete disruption open	872.10 Open wound of external ear unspecified site complicated
867.0 Bladder or urethra injury closed	872.11 Open wound of external ear pinna or auricle complicated
867.1 Bladder or urethra injury open	872.12 Open wound of auditory canal complicated
867.2 Ureter injury closed	872.6 OPEN WOUND OF EAR NEC*
867.3 Ureter injury open	872.61 Open wound of ear drum
867.4 Uterus injury closed	872.62 Open wound of ossicles
867.5 Uterus injury open	872.63 Open wound of eustachian tube
867.6 Other specified pelvic organ injury closed	872.64 Open wound of cochlea
867.7 Other specified pelvic organ injury open	872.69 Other open wound of ear
867.8 Unspecified pelvic organ injury closed	872.7 OPEN WOUND EAR NEC-COMPL*
867.9 Unspecified pelvic organ injury open	872.71 Open wound of ear drum complicated
868.0 OTH INTRA-ABD INJ-CLOSED*	872.72 Open wound of ossicles complicated
868.00 Unspecified intra-abdominal organ injury closed	872.73 Open wound of eustachian tube complicated
868.01 Adrenal gland injury closed	872.74 Open wound of cochlea complicated
868.02 Gallbladder injury closed	872.79 Other open wound of ear complicated
868.03 Peritoneum injury closed	872.8 Open wound of ear NOS
868.04 Retroperitoneum injury closed	872.9 Open wound of ear NOS complicated
868.09 Other and multiple intra-abdominal organs injury closed	873.0 Open wound of scalp
868.1 OTH INTRA-ABD INJ-OPEN*	873.1 Open wound of scalp complicated
868.10 Unspecified intra-abdominal organ injury open	873.2 OPEN WOUND OF NOSE*
868.11 Adrenal gland injury open	873.20 Open wound of nose unspecified site
868.12 Gallbladder injury open	873.21 Open wound of nasal septum
868.13 Peritoneum injury open	873.22 Open wound of nasal cavity
868.14 Retroperitoneum injury open	873.23 Open wound of nasal sinus
868.19 Other and multiple intra-abdominal organs injury open	873.29 Open wound nose multiple sites
869.0 Internal injury to unspecified or ill defined organ closed	873.3 OPEN WOUND NOSE-COMPL*
869.1 Internal injury to unspecified or ill defined organ open	873.30 Open wound of nose unspecified site complicated
870.0 Laceration of skin of eyelid and periocular area	873.31 Open wound of nasal septum complicated
870.1 Laceration of eyelid full thickness	873.32 Open wound of nasal cavity complicated
870.2 Laceration of eyelid full thickness involving the lacrimal passages	873.33 Open wound of nasal sinus complicated
870.3 Penetrating wound of orbit no foreign body	873.39 Open wound nose multiple sites complicated
870.4 Penetrating wound of orbit with foreign body	873.4 OPEN WOUND OF FACE*
870.8 Other specified open wound of ocular adnexa	873.40 Open wound of face unspecified site
870.9 Unspecified open wound of ocular adnexa	873.41 Open wound of cheek
871.0 Ocular laceration w/o prolapse of intraocular tissue	873.42 Open wound of forehead
871.1 Ocular laceration with prolapse or exposure of intraocular tissue	873.43 Open wound of lip
871.2 Rupture of eye with partial loss of intraocular tissue	873.44 Open wound of jaw
	873.49 Open wound to face other and multiple sites
	873.5 OPEN WOUND FACE-COMPL*

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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873.50	Open wound of face unspecified site complicated	878.4	Open wound of vulva
873.51	Open wound of cheek complicated	878.5	Open wound of vulva complicated
873.52	Open wound of forehead complicated	878.6	Open wound of vagina
873.53	Open wound of lip complicated	878.7	Open wound of vagina complicated
873.54	Open wound of jaw complicated	878.8	Open wound genitalia unspecified
873.59	Open wound to face other and multiple sites complicated	878.9	Open wound genitalia unspecified complicated
873.6	OPN WOUND INTERNAL MOUTH*	879.0	Open wound of breast
873.60	Open wound to mouth unspecified site	879.1	Open wound of breast complicated
873.61	Open wound to buccal mucosa	879.2	Open wound of anterior abdominal wall
873.62	Open wound of gum	879.3	Open wound of anterior abdominal wall complicated
873.63	Open wound of tooth	879.4	Open wound of lateral abdominal wall
873.64	Open wound of tongue and floor of mouth	879.5	Open wound of lateral abdominal wall complicated
873.65	Open wound of palate	879.6	Open wound of trunk unspecified
873.69	Other wound of mouth	879.7	Open wound of trunk unspecified complicated
873.7	OPEN WND INT MOUTH-COMPL*	879.8	Open wound NOS
873.70	Open wound to mouth unspecified site complicated	879.9	Open wound NOS complicated
873.71	Open wound to buccal mucosa complicated	880.0	OPN WND SHOULDR/UPPR ARM*
873.72	Open wound of gum complicated	880.00	Open wound of shoulder
873.73	Open wound of tooth complicated	880.01	Open wound of scapular region
873.74	Open wound of tongue and floor of mouth complicated	880.02	Open wound of axillary region
873.75	Open wound of palate complicated	880.03	Open wound of upper arm
873.79	Other wound of mouth complicated	880.09	Open wound of shoulder or upper arm NFS
873.8	Other and unspecified open wound of head without mention of complication	880.1	OPN WND SHLD/UP ARM-COMP*
873.9	Other and unspecified open wound of head, complicated	880.10	Open wound of shoulder complicated
874.0	OPN WOUND LARYNX/TRACHEA*	880.11	Open wound of scapular region complicated
874.00	Open wound of larynx with trachea	880.12	Open wound of axillary region complicated
874.01	Open wound of larynx	880.13	Open wound of upper arm complicated
874.02	Open wound of trachea	880.19	Open wound of shoulder or upper arm NFS complicated
874.1	OPN WND LARYNX/TRACH-COMP*	880.2	OPN WND SHLD/UP ARM-TEND*
874.10	Open wound of larynx with trachea complicated	880.20	Open wound of shoulder with tendon involvement
874.11	Open wound of larynx complicated	880.21	Open wound of scapular region with tendon involvement
874.12	Open wound of trachea complicated	880.22	Open wound of axillary region with tendon involvement
874.2	Open wound of thyroid	880.23	Open wound of upper arm with tendon involvement
874.3	Open wound of thyroid complicated	880.29	Open wound of shoulder or upper arm NFS with tendon involvement
874.4	Open wound of pharynx	881.0	OPEN WOUND OF LOWER ARM*
874.5	Open wound of pharynx complicated	881.00	Open wound forearm
874.8	Open wound of neck NFS	881.01	Open wound elbow
874.9	Open wound of neck NFS complicated	881.02	Open wound wrist
875.0	Open wound of chest wall	881.1	OPEN WOUND LOW ARM-COMPL*
875.1	Open wound of chest wall complicated	881.10	Open wound forearm complicated
876.0	Open wound of back	881.11	Open wound elbow complicated
876.1	Open wound of back complicated	881.12	Open wound wrist complicated
877.0	Open wound of buttock	881.2	OPN WND LOW ARM W TENDON*
877.1	Open wound of buttock complicated	881.20	Open wound forearm with tendon involvement
878.0	Open wound of penis	881.21	Open wound elbow with tendon involvement
878.1	Open wound of penis complicated	881.22	Open wound wrist with tendon involvement
878.2	Open wound of scrotum or testes	882.0	Open wound of hand
878.3	Open wound of scrotum or testes complicated	882.1	Open wound of hand complicated
		882.2	Open wound of hand with tendon involvement

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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883.0	Open wound of finger or thumb	897.5	Traumatic amputation of leg - unilateral NFS complicated
883.1	Open wound of finger or thumb complicated	897.6	Traumatic amputation of leg - bilateral any level
883.2	Open wound of finger or thumb with tendon involvement	897.7	Traumatic amputation of leg - bilateral any level complicated
884.0	Open wound upper limb NOS	900.0	CAROTID ARTERY INJURY*
884.1	Open wound upper limb NOS complicated	900.00	Injury of carotid artery NFS
884.2	Open wound upper limb NOS complicated	900.01	Injury of carotid artery common
885.0	Traumatic amputation of thumb	900.02	Injury of carotid artery external
885.1	Traumatic amputation of thumb complicated	900.03	Injury of carotid artery internal
886.0	Traumatic amputation of other finger	900.1	Injury of internal jugular vein
886.1	Traumatic amputation of other finger complicated	900.8	INJ HEAD/NECK VESSEL NEC*
887.0	Traumatic amputation of forearm or hand	900.81	Injury of external jugular vein
887.1	Traumatic amputation of forearm or hand complicated	900.82	Injury of multiple blood vessels of head/neck
887.2	Traumatic amputation of upper arm	900.89	Injury of other blood vessels of head/neck
887.3	Traumatic amputation of upper arm complicated	900.9	Injury unspecified blood vessel of head/neck
887.4	Traumatic amputation of arm or hand NFS	901.0	Injury of thoracic aorta
887.5	Traumatic amputation of arm or hand NFS complicated	901.1	Injury of braciocephalic or subclavian artery
887.6	Traumatic amputation of arm or hand NFS bilateral	901.2	Injury of superior vena cava
887.7	Traumatic amputation of arm or hand NFS bilateral complicated	901.3	Injury of braciocephalic or subclavian vein
890.0	Open wound of hip or thigh	901.4	INJURY PULMONARY VESSEL *
890.1	Open wound of hip or thigh complicated	901.40	Injury to pulmonary vessel NFS
890.2	Open wound of hip or thigh with tendon involvement	901.41	Injury to pulmonary artery
891.0	Open wound of knee, leg, or ankle	901.42	Injury to pulmonary vein
891.1	Open wound of knee, leg, or ankle complicated	901.8	INJ THORACIC VESSEL NEC*
891.2	Open wound of knee, leg, or ankle with tendon involvement	901.81	Injury to intercostal artery or vein
892.0	Open wound of foot	901.82	Injury to internal mammary artery or vein
892.1	Open wound of foot complicated	901.83	Injury to multiple blood vessels of thorax
892.2	Open wound of foot with tendon involvement	901.89	Injury to other blood vessels of thorax
893.0	Open wound of toe	901.9	Injury to other blood vessels of thorax nec
893.1	Open wound of toe complicated	902.0	Injury to abdominal aorta
893.2	Open wound of toe with tendon involvement	902.1	INJ INFERIOR VENA CAVA*
894.0	Unspecified wound of lower extremity	902.10	Injury to inferior vena cava NFS
894.1	Unspecified wound of lower extremity complicated	902.11	Injury to hepatic vein
894.2	Unspecified wound of lower extremity with tendon involvement	902.19	Injury to other vena cava NFS
895.0	Traumatic amputation of toe	902.2	INJ CELIAC/MESENTER ART*
895.1	Traumatic amputation of toe complicated	902.20	Injury to celiac or mesentary artery NFS
896.0	Traumatic amputation of foot - unilateral	902.21	Injury to gastric artery
896.1	Traumatic amputation of foot - unilateral complicated	902.22	Injury to hepatic artery
896.2	Traumatic amputation of foot - bilateral	902.23	Injury to splenic artery
896.3	Traumatic amputation of foot - bilateral complicated	902.24	Injury to other specified branches of celiac axis
897.0	Traumatic amputation of leg - unilateral below knee	902.25	Injury to superior mesenteric artery
897.1	Traumatic amputation of leg - unilateral below knee complicated	902.26	Injury to primary branches of superior mesenteric artery
897.2	Traumatic amputation of leg - unilateral at or above knee	902.27	Injury to inferior mesenteric artery
897.3	Traumatic amputation of leg - unilateral at or above knee complicated	902.29	Injury to other celiac or mesenteric arteries
897.4	Traumatic amputation of leg - unilateral NFS	902.3	PORTAL/SPLENIC VEIN INJ*
		902.31	Injury to superior mesenteric vein primary subdivision
		902.32	Injury to inferior mesenteric vein
		902.33	Injury to portal vein
		902.34	Injury to splenic vein
		902.39	Injury to other portal and splenic veins

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902.4	RENAL VESSEL INJURY*	905.1	Late effect of fracture of spine and trunk without spinal cord lesion
902.40	Injury to renal vessel	905.2	Late effect of fracture of upper extremities
902.41	Injury to renal artery	905.3	Late effect of fracture of neck of femur
902.42	Injury to renal vein	905.4	Late effect of fracture of lower extremities
902.49	Injury to other renal blood vessel	905.5	Late effect of fracture of multiple and unspecified bones
902.5	ILIAC VESSEL INJURY*	905.6	Late effect of dislocation
902.50	Injury to iliac vessel NFS	905.7	Late effect of sprain and strain without tendon injury
902.51	Injury to hypogastric artery	905.8	Late effect of tendon injury
902.52	Injury to hypogastric vein	905.9	Late effect of traumatic amputation
902.53	Injury to iliac artery	906.0	Late effect of open wound of head neck and trunk
902.54	Injury to iliac vein	906.1	Late effect of open wound of extremities without tendon injury
902.55	Injury to uterine artery	906.2	Late effect of superficial injury
902.56	Injury to uterine vein	906.3	Late effect of contusion
902.59	Injury to other iliac blood vessels	906.4	Late effect of crushing
902.8	INJ ABDOMINAL VESSEL NEC*	906.5	Late effect of burn of eye face head and neck
902.81	Injury to ovarian artery	906.6	Late effect of burn of wrist and hand
902.82	Injury to ovarian vein	906.7	Late effect of burn of other extremities
902.87	Injury to multiple blood vessels of abdomen or pelvis	906.8	Late effect of burns of other specified sites
902.89	Injury to other blood vessels of abdomen or pelvis	906.9	Late effect of burn of unspecified site
902.9	Injury to unspecified blood vessel of abdomen or pelvis	907.0	Late effect of intracranial injury without skull fracture
903.0	INJURY AXILLARY VESSELS*	907.1	Late effect of injury to cranial nerve
903.00	Injury to axillary vessel NFS	907.2	Late effect of spinal cord injury
903.01	Injury to axillary artery	907.3	Late effect of injury to nerve root spinal plexus & other nerves of trunk
903.02	Injury to axillary vein	907.4	Late effect of injury to peripheral nerve of shoulder girdle & upper limb
903.1	Injury to brachial blood vessel	907.5	Late effect of injury to peripheral nerve of pelvic girdle & lower limb
903.2	Injury to radial blood vessel	907.9	Late effect of injury to other and unspecified nerve
903.3	Injury to ulnar blood vessel	908.0	Late effect of internal injury to chest
903.4	Injury to palmar artery	908.1	Late effect of internal injury to intra-abdominal organs
903.5	Injury to digital blood vessels	908.2	Late effect of internal injury to other internal organs
903.8	Injury to other specified blood vessels of upper extremity	908.3	Late effect of injury to blood vessel of head neck and extremities
903.9	Injury to unspecified blood vessels of upper extremity	908.4	Late effect of injury to blood vessel of thorax abdomen and pelvis
904.0	Injury to common femoral artery	908.5	Late effect of foreign body in orifice
904.1	Injury to superficial femoral artery	908.6	Late effect of certain complications of trauma
904.2	Injury to femoral vein	908.9	Late effect of unspecified injury
904.3	Injury to saphenous vein	909.0	Late effect of poisoning due to drug medicinal or biological substance
904.4	INJURY POPLITEAL VESSEL*	909.1	Late effect of toxic effects of nonmedical substances
904.40	Injury to popliteal vessel NFS	909.2	Late effect of radiation
904.41	Injury to popliteal artery	909.3	Late effect of complications of surgical and medical care
904.42	Injury to popliteal vein	909.4	Late effect of certain other external causes
904.5	INJURY TIBIAL VESSELS*		
904.50	Injury to tibial vessel NFS		
904.51	Injury to anterior tibial artery		
904.52	Injury to anterior tibial vein		
904.53	Injury to posterior tibial artery		
904.54	Injury to posterior tibial vein		
904.6	Injury deep plantar blood vessels		
904.7	Injury of other specified blood vessels of lower extremity		
904.8	Injury of unspecified blood vessels of lower extremity		
904.9	Injury of unspecified blood vessels NOS		
905.0	Late effect of fracture of skull and face bones		

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909.5	Late effect of adverse effect of drug medicinal or biological substance	914.6	Superficial foreign body in hand
909.9	Late effect of other and unspecified external causes	914.7	Superficial foreign body in hand infected
910.0	Abrasion face, neck or scalp	914.8	Other superficial in hand
910.1	Abrasion face, neck or scalp infected	914.9	Other superficial in hand infected
910.2	Blister face, neck or scalp	915.0	Abrasion in finger
910.3	Blister face, neck or scalp infected	915.1	Abrasion in finger infected
910.4	Insect bite face, neck, or scalp	915.2	Blister in finger
910.5	Insect bite face, neck, or scalp infected	915.3	Blister in finger infected
910.6	Superficial foreign body face, neck, or scalp	915.4	Insect bite in finger
910.7	Superficial foreign body face, neck, or scalp infected	915.5	Insect bite in finger infected
910.8	Other superficial injuries of face, neck, or scalp	915.6	Superficial foreign body in finger
910.9	Other superficial injuries of face, neck, or scalp infected	915.7	Superficial foreign body in finger infected
911.0	Abrasion of trunk	915.8	Other superficial in finger
911.1	Abrasion of trunk infected	915.9	Other superficial in finger infected
911.2	Blister trunk	916.0	Abrasion in hip, thigh, leg, or ankle
911.3	Blister trunk infected	916.1	Abrasion in hip, thigh, leg, or ankle infected
911.4	Insect bite of trunk	916.2	Blister in hip, thigh, leg, or ankle
911.5	Insect bite of trunk infected	916.3	Blister in hip, thigh, leg, or ankle infected
911.6	Superficial foreign body of trunk	916.4	Insect bite in hip, thigh, leg, or ankle
911.7	Superficial foreign body of trunk infected	916.5	Insect bite in hip, thigh, leg, or ankle infected
911.8	Other superficial injury of trunk	916.6	Superficial foreign body in hip, thigh, leg, or ankle
911.9	Other superficial injury of trunk infected	916.7	Superficial foreign body in hip, thigh, leg, or ankle infected
912.0	Abrasion in upper arm and shoulder	916.8	Other superficial in hip, thigh, leg, or ankle
912.1	Abrasion in upper arm and shoulder infected	916.9	Other superficial in hip, thigh, leg, or ankle infected
912.2	Blister in upper arm and shoulder	917.0	Abrasion in foot or toe
912.3	Blister in upper arm and shoulder infected	917.1	Abrasion in foot or toe infected
912.4	Insect bite in upper arm and shoulder	917.2	Blister in foot or toe
912.5	Insect bite in upper arm and shoulder infected	917.3	Blister in foot or toe infected
912.6	Superficial foreign body in upper arm and shoulder	917.4	Insect bite in foot or toe
912.7	Superficial foreign body in upper arm and shoulder infected	917.5	Insect bite in foot or toe infected
912.8	Other superficial in upper arm and shoulder	917.6	Superficial foreign body in foot or toe
912.9	Other superficial in upper arm and shoulder infected	917.7	Superficial foreign body in foot or toe infected
913.0	Abrasion in elbow, forearm, and wrist	917.8	Other superficial in foot or toe
913.1	Abrasion in elbow, forearm, and wrist infected	917.9	Other superficial in foot or toe infected
913.2	Blister in elbow, forearm, and wrist	918.0	Superficial injury of eyelid and periorcular area
913.3	Blister in elbow, forearm, and wrist infected	918.1	Superficial injury of cornea
913.4	Insect bite in elbow, forearm, and wrist	918.2	Superficial injury of conjunctiva
913.5	Insect bite in elbow, forearm, and wrist infected	918.9	Other and unspecified superficial injury of eye
913.6	Superficial foreign body in elbow, forearm, and wrist	919.0	Abrasion in other, multiple or unspecified sites
913.7	Superficial foreign body in elbow, forearm, and wrist infected	919.1	Abrasion in other, multiple or unspecified sites infected
913.8	Other superficial in elbow, forearm, and wrist	919.2	Blister in other, multiple or unspecified sites
913.9	Other superficial in elbow, forearm, and wrist infected	919.3	Blister in other, multiple or unspecified sites infected
914.0	Abrasion in hand	919.4	Insect bite in other, multiple or unspecified sites
914.1	Abrasion in hand infected	919.5	Insect bite in other, multiple or unspecified sites infected
914.2	Blister in hand	919.6	Superficial foreign body in other, multiple or unspecified sites
914.3	Blister in hand infected	919.7	Superficial foreign body in other, multiple or NFS sites infected
914.4	Insect bite in hand	919.8	Other superficial in other, multiple or unspecified sites
914.5	Insect bite in hand infected		

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

**General Definitions:**

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919.9	Other superficial in other, multiple or unspecified sites infected	926.12	Crush buttock
920	Contusion of face scalp and neck except eye(s)	926.19	Crush other sites of trunk
921.0	Black eye	926.8	Crush multiple sites of trunk
921.1	Contusion of eyelid and periocular area	926.9	Crush unspecified site of trunk
921.2	Contusion of orbital tissues	927.0	CRUSH INJ SHOULDER & ARM*
921.3	Contusion of eyeball	927.00	Crush shoulder
921.9	Unspecified contusion of eye	927.01	Crush scapular region
922.0	Contusion of breast	927.02	Crush axillary region
922.1	Contusion of chest wall	927.03	Crush upper arm
922.2	Contusion of abdominal wall	927.09	Crush multiple of shoulder and upper arm
922.3	CONTUSION OF BACK*	927.1	CRUSH INJ ELBOW/FOREARM*
922.31	Contusion of back	927.10	Crush forearm
922.32	Contusion of buttock	927.11	Crush elbow
922.33	Contusion of interscapular region	927.2	CRUSHING INJ WRIST/HAND*
922.4	Contusion of genital organs	927.20	Crush hand
922.8	Contusion of trunk multiple sites	927.21	Crush wrist
922.9	Contusion of trunk NFS	927.3	Crush finger
923.0	CONTUSION SHOULDER/ARM*	927.8	Crush multiple sites of upper limb
923.00	Contusion of shoulder region	927.9	Crush unspecified site of upper limb
923.01	Contusion of scapular region	928.0	CRUSHING INJ HIP/THIGH*
923.02	Contusion of axillary region	928.00	Crush thigh
923.03	Contusion of upper arm	928.01	Crush hip
923.09	Contusion multiple sites of upper arm	928.1	CRUSH INJ KNEE/LOWER LEG*
923.1	CONTUSION ELBOW/FOREARM*	928.10	Crush lower leg
923.10	Contusion forearm	928.11	Crush knee
923.11	Contusion of elbow	928.2	CRUSHING INJ ANKLE/FOOT*
923.2	CONTUSION OF WRIST/HAND*	928.20	Crush foot
923.20	Contusion of hand	928.21	Crush ankle
923.21	Contusion of wrist	928.3	Crush toe
923.3	Contusion of finger	928.8	Crush multiple sites of lower limb
923.8	Contusion multiple sites of upper limb	928.9	Crush lower limb NOS
923.9	Contusion upper limb NOS	929.0	Crush multiple sites NEC
924.0	CONTUSION OF HIP & THIGH*	929.9	Crush unspecified site
924.00	Contusion of thigh	930.0	Foreign body in cornea
924.01	Contusion of hip	930.1	Foreign body in conjunctival sac
924.1	CONTUSION KNEE/LOWER LEG*	930.2	Foreign body in lacrimal punctum
924.10	Contusion of lower leg	930.8	Foreign body in other and combined sites of the eye
924.11	Contusion of knee	930.9	Foreign body in unspecified site of the eye
924.2	CONTUSION ANKLE & FOOT*	931	Foreign body in ear
924.20	Contusion of foot	932	Foreign body in nose
924.21	Contusion of ankle	933.0	Foreign body in pharynx
924.3	Contusion of toe	933.1	Foreign body in larynx
924.4	Contusion of multiple sites lower limb	934.0	Foreign body in trachea
924.5	Contusion of lower limb NOS	934.1	Foreign body in main bronchus
924.8	Contusion of multiple sites NEC	934.8	Foreign body in other specified parts bronchus and lung
924.9	Contusion of unspecified site	934.9	Foreign body in respiratory tree unspecified
925.1	Crush face or scalp	935.0	Foreign body in mouth
925.2	Crush neck	935.1	Foreign body in esophagus
926.0	Crush external genitalia	935.2	Foreign body in stomach
926.1	OTH TRUNK CRUSHING INJ*	936	Foreign body in intestine and colon
926.11	Crush back	937	Foreign body in anus and rectum

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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938 Foreign body in digestive system unspecified	941.3 3RD DEGREE BURN HEAD*
939.0 Foreign body in bladder and urethra	941.30 Third degree burn NOS of unspecified site of face and head
939.1 Foreign body in uterus any part	941.31 Third degree burn NOS of ear (any part)
939.2 Foreign body in vulva and vagina	941.32 Third degree burn NOS of eye (with other parts of face head and neck)
939.3 Foreign body in penis	941.33 Third degree burn NOS of lip(s)
939.9 Foreign body in unspecified site in genitourinary tract	941.34 Third degree burn NOS of chin
940.0 Chemical burn of eyelids and periocular area	941.35 Third degree burn NOS of nose (septum)
940.1 Other burns of eyelids and periocular area	941.36 Third degree burn NOS of scalp (any part)
940.2 Alkaline chemical burn of cornea and conjunctival sac	941.37 Third degree burn NOS of forehead and cheek
940.3 Acid chemical burn of cornea and conjunctival sac	941.38 Third degree burn NOS of neck
940.4 Other burn of cornea and conjunctival sac	941.39 Third degree burn NOS of multiple sites except w/ eye of face head & neck
940.5 Burn with resulting rupture and destruction of eyeball	941.4 DEEP 3RD DEG BURN HEAD*
940.9 Unspecified burn of eye and adnexa	941.40 Deep third degree burn NFS site of face and head w/o loss of body part
941.0 BURN NOS HEAD/FACE/NECK*	941.41 Deep third degree burn of ear (any part) without loss of ear
941.00 Burn NOS of unspecified site of face and head	941.42 Deep 3rd degree burn of eye w/o loss of body part
941.01 Burn NOS of ear (any part)	941.43 Deep third degree burn of lip(s) without loss of lip(s)
941.02 Burn NOS of eye (with other parts of face head and neck)	941.44 Deep third degree burn of chin without loss of chin
941.03 Burn NOS of lip(s)	941.45 Deep third degree burn of nose (septum) without loss of nose
941.04 Burn NOS of chin	941.46 Deep third degree burn of scalp (any part) without loss of scalp
941.05 Burn NOS of nose (septum)	941.47 Deep third degree burn of forehead & cheek w/o loss of forehead & cheek
941.06 Burn NOS of scalp (any part)	941.48 Deep third degree burn of neck without loss of neck
941.07 Burn NOS of forehead and cheek	941.49 Deep 3rd degree burn multiple sites of face/head/neck w/o loss body part
941.08 Burn NOS of neck	941.5 3RD DEG BURN W LOSS-HEAD*
941.09 Burn NOS of multiple sites (except with eye) of face head and neck	941.50 Deep third degree burn of face and head NFS site w/ loss of body part
941.1 1ST DEGREE BURN HEAD*	941.51 Deep third degree burn of ear (any part) with loss of ear
941.10 First degree burn of unspecified site of face and head	941.52 Deep 3rd degree burn of eye w/ loss of a body part
941.11 First degree burn of ear (any part)	941.53 Deep third degree burn of lip(s) with loss of lip(s)
941.12 First degree burn of eye (with other parts face head and neck)	941.54 Deep third degree burn of chin with loss of chin
941.13 First degree burn of lip(s)	941.55 Deep third degree burn of nose (septum) with loss of nose
941.14 First degree burn of chin	941.56 Deep third degree burn of scalp (any part) with loss of scalp
941.15 First degree burn of nose (septum)	941.57 Deep third degree burn of forehead & cheek w/ loss of forehead & cheek
941.16 First degree burn of scalp (any part)	941.58 Deep third degree burn of neck with loss of neck
941.17 First degree burn of forehead and cheek	941.59 Deep 3rd degree burn multiple sites of face/head/neck w/ loss body part
941.18 First degree burn of neck	942.0 BURN NOS TRUNK*
941.19 First degree burn of multiple sites (except w/ eye) of face head & neck	942.00 Burn NOS of unspecified site of trunk
941.2 2ND DEGREE BURN HEAD*	942.01 Burn NOS of breast
941.20 Second degree burn of face and head unspecified site	942.02 Burn NOS of chest wall excluding breast and nipple
941.21 Second degree burn of ear (any part)	
941.22 Second degree burn of eye (with other parts of face head and neck)	
941.23 Second degree burn of lip(s)	
941.24 Second degree burn of chin	
941.25 Second degree burn of nose (septum)	
941.26 Second degree burn of scalp (any part)	
941.27 Second degree burn of forehead and cheek	
941.28 Second degree burn of neck	
941.29 Second degree burn of multiple sites (except w/ eye) of face head & neck	

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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942.03	Burn NOS of abdominal wall	942.50	Deep third degree burn of NFS site of trunk w/ loss of body part
942.04	Burn NOS of back (any part)	942.51	Deep third degree burn of breast with loss of breast
942.05	Burn NOS of genitalia	942.52	Deep 3rd degree burn of chest wall excluding breast w/ loss of chest wall
942.09	Burn NOS of other and multiple sites of trunk	942.53	Deep third degree burn of abdominal wall with loss of abdominal wall
942.1	1ST DEGREE BURN TRUNK*	942.54	Deep third degree burn of back (any part) with loss of back
942.10	First degree burn of unspecified site of trunk	942.55	Deep third degree burn of genitalia with loss of genitalia
942.11	First degree burn of breast	942.59	Deep 3rd degree burn other/multiple sites of trunk w/ loss of a body part
942.12	First degree burn of chest wall excluding breast and nipple	943.0	BURN NOS ARM*
942.13	First degree burn of abdominal wall	943.00	Burn NOS of unspecified site of upper limb
942.14	First degree burn of back (any part)	943.01	Burn NOS of forearm
942.15	First degree burn of genitalia	943.02	Burn NOS of elbow
942.19	First degree burn of other and multiple sites of trunk	943.03	Burn NOS of upper arm
942.2	2ND DEGREE BURN TRUNK*	943.04	Burn NOS of axilla
942.20	Second degree burn of unspecified site of trunk	943.05	Burn NOS of shoulder
942.21	Second degree burn of breast	943.06	Burn NOS of scapular region
942.22	Second degree burn of chest wall excluding breast and nipple	943.09	Burn NOS multiple sites of upper limb except wrist and hand
942.23	Second degree burn of abdominal wall	943.1	1ST DEGREE BURN ARM*
942.24	Second degree burn of back (any part)	943.10	First degree burn of unspecified site of upper limb
942.25	Second degree burn of genitalia	943.11	First degree burn of forearm
942.29	Second degree burn of other and multiple sites of trunk	943.12	First degree burn of elbow
942.3	3RD DEGREE BURN TRUNK*	943.13	First degree burn of upper arm
942.30	Third degree burn NOS of unspecified site of trunk	943.14	First degree burn of axilla
942.31	Third degree burn NOS of breast	943.15	First degree burn of shoulder
942.32	Third degree burn NOS of chest wall excluding breast and nipple	943.16	First degree burn of scapular region
942.33	Third degree burn NOS of abdominal wall	943.19	First degree burn of multiple sites of upper limb except wrist and hand
942.34	Third degree burn NOS of back (any part)	943.2	2ND DEGREE BURN ARM*
942.35	Third degree burn NOS of genitalia	943.20	Second degree burn of unspecified site of upper limb
942.39	Third degree burn NOS of other and multiple sites of trunk	943.21	Second degree burn of forearm
942.4	DEEP 3RD DEG BURN TRUNK*	943.22	Second degree burn of elbow
942.40	Deep third degree burn of trunk unspecified site w/o loss of body part	943.23	Second degree burn of upper arm
942.41	Deep third degree burn of breast without loss of breast	943.24	Second degree burn of axilla
942.42	Deep 3rd degree burn of chest wall excluding breast w/o loss of chest wall	943.25	Second degree burn of shoulder
942.43	Deep third degree burn of abdominal wall without loss of abdominal wall	943.26	Second degree burn of scapular region
942.44	Deep third degree burn of back (any part) without loss of back	943.29	Second degree burn of multiple sites of upper limb except wrist and hand
942.45	Deep third degree burn of genitalia without loss of genitalia	943.3	3RD DEGREE BURN ARM*
942.49	Deep 3rd degree burn other/multiple sites of trunk w/o loss of body part	943.30	Third degree burn NOS of unspecified site of upper limb
942.5	3 DEG BURN W LOSS-TRUNK*	943.31	Third degree burn NOS of forearm
		943.32	Third degree burn NOS of elbow
		943.33	Third degree burn NOS of upper arm
		943.34	Third degree burn NOS of axilla

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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943.35	Third degree burn NOS of shoulder	944.13	First degree burn of two or more digits of hand not including thumb
943.36	Third degree burn NOS of scapular region	944.14	First degree burn of two or more digits of hand including thumb
943.39	Third degree burn NOS of multiple sites of upper limb except wrist & hand	944.15	First degree burn of palm of hand
943.4	DEEP 3RD DEG BURN ARM*	944.16	First degree burn of back of hand
943.40	Deep third degree burn of NFS site of upper limb w/o loss of a body part	944.17	First degree burn of wrist
943.41	Deep third degree burn of forearm without loss of forearm	944.18	First degree burn of multiple sites of wrist(s) and hand(s)
943.42	Deep third degree burn of elbow without loss of elbow	944.2	2ND DEGREE BURN HAND*
943.43	Deep third degree burn of upper arm without loss of upper arm	944.20	Second degree burn of unspecified site of hand
943.44	Deep necrosis of underlying tissues from burn of axilla w/o loss of axilla	944.21	Second degree burn of single digit (finger (nail)) other than thumb
943.45	Deep third degree burn of shoulder without loss of shoulder	944.22	Blisters w/ epidermal loss due to burn of (second degree) of thumb (nail)
943.46	Deep third degree burn of scapular region without loss of scapula	944.23	Second degree burn of two or more digits of hand not including thumb
943.49	Deep 3rd degree burn multiple sites of UE except wrist/hand w/o loss of UE	944.24	Second degree burn of two or more digits of hand including thumb
943.5	3RD DEG BURN W LOSS-ARM*	944.25	Second degree burn of palm of hand
943.50	Deep third degree burn of NFS site of upper limb w/ loss of a body part	944.26	Second degree burn of back of hand
943.51	Deep third degree burn of forearm with loss of forearm	944.27	Second degree burn of wrist
943.52	Deep third degree burn of elbow with loss of elbow	944.28	Second degree burn of multiple sites of wrist(s) and hand(s)
943.53	Deep third degree burn of upper arm with loss of upper arm	944.3	3RD DEGREE BURN HAND*
943.54	Deep third degree burn of axilla with loss of axilla	944.30	Third degree burn NOS of unspecified site of hand
943.55	Deep third degree burn of shoulder with loss of shoulder	944.31	Third degree burn NOS of single digit (finger (nail)) other than thumb
943.56	Deep third degree burn of scapular region with loss of scapula	944.32	Third degree burn NOS of thumb (nail)
943.59	Deep 3rd degree burn multiple sites of UE except wrist & hand w/ loss UE	944.33	Third degree burn NOS of two or more digits of hand not including thumb
944.0	BURN NOS HAND & WRIST*	944.34	Third degree burn NOS of two or more digits of hand including thumb
944.00	Burn NOS of unspecified site of hand	944.35	Third degree burn NOS of palm of hand
944.01	Burn NOS of single digit (finger (nail)) other than thumb	944.36	Third degree burn NOS of back of hand
944.02	Burn NOS of thumb (nail)	944.37	Third degree burn NOS of wrist
944.03	Burn NOS of two or more digits of hand not including thumb	944.38	Third degree burn NOS of multiple sites of wrist(s) and hand(s)
944.04	Burn NOS of two or more digits of hand including thumb	944.4	DEEP 3RD DEG BURN HAND*
944.05	Burn NOS of palm of hand	944.40	Deep third degree burn of unspecified site of hand without loss of hand
944.06	Burn NOS of back of hand	944.41	Deep 3rd degree burn of single digit other than thumb w/o loss of finger
944.07	Burn NOS of wrist	944.42	Deep third degree burn of thumb (nail) without loss of thumb
944.08	Burn NOS of multiple sites of wrist(s) and hand(s)	944.43	Deep 3rd degree burn >=2 digits of hand excluding thumb w/o fingers
944.1	1ST DEGREE BURN HAND*	944.44	Deep 3rd degree burn >=2 digits of hand incl thumb w/o loss of fingers
944.10	First degree burn of unspecified site of hand	944.45	Deep third degree burn of palm of hand without loss of palm
944.11	First degree burn of single digit (finger (nail)) other than thumb		
944.12	First degree burn of thumb (nail)		

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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944.46 Deep third degree burn of back of hand without loss of back of hand	945.30 Third degree burn NOS of unspecified site of lower limb
944.47 Deep third degree burn of wrist without loss of wrist	945.31 Third degree burn NOS of toe(s) (nail)
944.48 Deep 3rd degree burn of multiple sites wrist/hand w/o loss of a body part	945.32 Third degree burn NOS of foot
944.5 3RD DEG BURN W LOSS-HAND*	945.33 Third degree burn NOS of ankle
944.50 Deep third degree burn of unspecified site of hand with loss of hand	945.34 Third degree burn NOS of lower leg
944.51 Deep 3rd degree burn of single digit other than thumb w/ loss of finger	945.35 Third degree burn NOS of knee
944.52 Deep third degree burn of thumb (nail) with loss of thumb	945.36 Third degree burn NOS of thigh (any part)
944.53 Deep 3rd degree burn >=2 digits of hand not incl thumb w/ loss of fingers	945.39 Third degree burn NOS of multiple sites of lower limb(s)
944.54 Deep 3rd degree burn >=2 digits of hand including thumb w/ loss of fingers	945.4 DEEP 3RD DEGREE BURN LEG*
944.55 Deep third degree burn of palm of hand with loss of palm of hand	945.40 Deep third degree burn NFS site lower limb (leg) w/o loss of a body part
944.56 Deep third degree burn of back of hand with loss of back of hand	945.41 Deep third degree burn of toe(s) (nail) without loss of toe(s)
944.57 Deep third degree burn of wrist with loss of wrist	945.42 Deep third degree burn of foot without loss of foot
944.58 Deep 3rd degree burn multiple sites of wrist/hand w/ loss of a body part	945.43 Deep third degree burn of ankle without loss of ankle
945.0 BURN NOS LEG*	945.44 Deep third degree burn of lower leg without loss of lower leg
945.00 Burn NOS of unspecified site of lower limb (leg)	945.45 Deep third degree burn of knee without loss of knee
945.01 Burn NOS of toe(s) (nail)	945.46 Deep third degree burn of thigh (any part) without loss of thigh
945.02 Burn NOS of foot	945.49 Deep 3rd degree burn multiple sites lower limb(s) w/o loss body part
945.03 Burn NOS of ankle	945.5 3RD DEG BURN W LOSS-LEG*
945.04 Burn NOS of lower leg	945.50 Deep third degree burn NFS site lower limb (leg) w/ loss of a body part
945.05 Burn NOS of knee	945.51 Deep third degree burn of toe(s) (nail) with loss of toe(s)
945.06 Burn NOS of thigh (any part)	945.52 Deep third degree burn of foot with loss of foot
945.09 Burn NOS of multiple sites of lower limb(s)	945.53 Deep third degree burn of ankle with loss of ankle
945.1 1ST DEGREE BURN LEG*	945.54 Deep third degree burn of lower leg with loss of lower leg
945.10 First degree burn of unspecified site of lower limb (leg)	945.55 Deep third degree burn of knee with loss of knee
945.11 First degree burn of toe(s) (nail)	945.56 Deep third degree burn of thigh (any part) with loss of thigh
945.12 First degree burn of foot	945.59 Deep third degree burn multiple sites of lower limb(s) w/ loss body part
945.13 First degree burn of ankle	946.0 Burns of multiple specified sites unspecified degree
945.14 First degree burn of lower leg	946.1 First degree burn of multiple specified sites
945.15 First degree burn of knee	946.2 Second degree burn of multiple specified sites
945.16 First degree burn of thigh (any part)	946.3 Third degree burn NOS of multiple specified sites
945.19 First degree burn of multiple sites of lower limb(s)	946.4 Deep third degree burn multiple specified sites w/o loss of a body part
945.2 2ND DEGREE BURN LEG*	946.5 Deep third degree burn of multiple specified sites w/ loss of a body part
945.20 Blisters epidermal loss (second degree) of NFS site of lower limb (leg)	947.0 Burn of mouth and pharynx
945.21 Second degree burn of toe(s) (nail)	947.1 Burn of larynx trachea and lung
945.22 Second degree burn of foot	947.2 Burn of esophagus
945.23 Second degree burn of ankle	947.3 Burn of gastrointestinal tract
945.24 Second degree burn of lower leg	947.4 Burn of vagina and uterus
945.25 Second degree burn of knee	
945.26 Second degree burn of thigh (any part)	
945.29 Second degree burn of multiple sites of lower limb(s)	
945.3 3RD DEGREE BURN LEG*	

# Washington State Hospital Data Dictionary – Version CVW4

Revised June 2011

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947.8	Burn of other specified sites of internal organs	948.85	Burn 80 to 89%, 50 to 59% 3rd degree
947.9	Burn of internal organ unspecified site	948.86	Burn 80 to 89%, 60 to 69% 3rd degree
948.0	BODY SURFACE BURN < 10%*	948.87	Burn 80 to 89%, 70 to 79% 3rd degree
948.00	Burn less than 10% TBSA any degree	948.88	Burn 80 to 89%, 80 to 89% 3rd degree
948.1	10-19% BODY SURFACE BURN*	948.9	90% OR MORE BDY SURF BRN*
948.10	Burn 10 to 19%, less than 10% 3rd degree	948.90	Burn 90 to 100%, less than 10% 3rd degree
948.11	Burn 10 to 19%, 10 to 19% 3rd degree	948.91	Burn 90 to 100%, 10 to 19% 3rd degree
948.2	20-29% BODY SURFACE BURN*	948.92	Burn 90 to 100%, 20 to 29% 3rd degree
948.20	Burn 20 to 29%, less than 10% 3rd degree	948.93	Burn 90 to 100%, 30 to 39% 3rd degree
948.21	Burn 20 to 29%, 10 to 19% 3rd degree	948.94	Burn 90 to 100%, 40 to 49% 3rd degree
948.22	Burn 20 to 29%, 20 to 29% 3rd degree	948.95	Burn 90 to 100%, 50 to 59% 3rd degree
948.3	30-39% BODY SURFACE BURN*	948.96	Burn 90 to 100%, 60 to 69% 3rd degree
948.30	Burn 30 to 39%, less than 10% 3rd degree	948.97	Burn 90 to 100%, 70 to 79% 3rd degree
948.31	Burn 30 to 39%, 10 to 19% 3rd degree	948.98	Burn 90 to 100%, 80 to 89% 3rd degree
948.32	Burn 30 to 39%, 20 to 29% 3rd degree	948.99	Burn 90 to 100%, 90 to 100% 3rd degree
948.33	Burn 30 to 39%, 30 to 39% 3rd degree	949.0	Burn of unspecified site unspecified degree
948.4	40-49% BODY SURFACE BURN*	949.1	Erythema due to burn (first degree) unspecified site
948.40	Burn 40 to 49%, less than 10% 3rd degree	949.2	Blisters with epidermal loss due to burn (second degree) NFS site
948.41	Burn 40 to 49%, 10 to 19% 3rd degree	949.3	Full-thickness skin loss due to burn (third degree nos) unspecified site
948.42	Burn 40 to 49%, 20 to 29% 3rd degree	949.4	Deep 3rd degree unspecified site w/o loss of a body part
948.43	Burn 40 to 49%, 30 to 39% 3rd degree	949.5	Deep 3rd degree unspecified site w/ loss of a body part
948.44	Burn 40 to 49%, 40 to 49% 3rd degree	950.0	Injury to optic nerve
948.5	50-59% BODY SURFACE BURN*	950.1	Injury to optic chiasm
948.50	Burn 50 to 59%, less than 10% 3rd degree	950.2	Injury to optic pathways
948.51	Burn 50 to 59%, 10 to 19% 3rd degree	950.3	Injury to visual cortex
948.52	Burn 50 to 59%, 20 to 29% 3rd degree	950.9	Injury to optic nerve and pathways NOS
948.53	Burn 50 to 59%, 30 to 39% 3rd degree	951.0	Injury to oculomotor nerve
948.54	Burn 50 to 59%, 40 to 49% 3rd degree	951.1	Injury to trochlear nerve
948.55	Burn 50 to 59%, 50 to 59% 3rd degree	951.2	Injury to trigeminal nerve
948.6	60-69% BODY SURFACE BURN*	951.3	Injury to abducens nerve
948.60	Burn 60 to 69%, less than 10% 3rd degree	951.4	Injury to facial nerve
948.61	Burn 60 to 69%, 10 to 19% 3rd degree	951.5	Injury to acoustic nerve
948.62	Burn 60 to 69%, 20 to 29% 3rd degree	951.6	Injury to spinal accessory nerve
948.63	Burn 60 to 69%, 30 to 39% 3rd degree	951.7	Injury to hypoglossal nerve
948.64	Burn 60 to 69%, 40 to 49% 3rd degree	951.8	Injury to other specified cranial nerve
948.65	Burn 60 to 69%, 50 to 59% 3rd degree	951.9	Injury to unspecified cranial nerve
948.66	Burn 60 to 69%, 60 to 69% 3rd degree	952.0	CERVICAL SPINAL CORD INJ*
948.7	70-79% BODY SURFACE BURN*	952.00	C1 to C4 injury NFS
948.70	Burn 70 to 79%, less than 10% 3rd degree	952.01	C1 to C4 complete lesion
948.71	Burn 70 to 79%, 10 to 19% 3rd degree	952.02	C1 to C4 anterior cord syndrome
948.72	Burn 70 to 79%, 20 to 29% 3rd degree	952.03	C1 to C4 central cord syndrome
948.73	Burn 70 to 79%, 30 to 39% 3rd degree	952.04	C1 to C4 with other specified cord injury
948.74	Burn 70 to 79%, 40 to 49% 3rd degree	952.05	C5 to C7 injury NFS
948.75	Burn 70 to 79%, 50 to 59% 3rd degree	952.06	C5 to C7 complete lesion
948.76	Burn 70 to 79%, 60 to 69% 3rd degree	952.07	C5 to C7 anterior cord syndrome
948.77	Burn 70 to 79%, 70 to 79% 3rd degree	952.08	C5 to C7 central cord syndrome
948.8	80-89% BODY SURFACE BURN*	952.09	C5 to C7 with other specified cord injury
948.80	Burn 80 to 89%, less than 10% 3rd degree		
948.81	Burn 80 to 89%, 10 to 19% 3rd degree		
948.82	Burn 80 to 89%, 20 to 29% 3rd degree		
948.83	Burn 80 to 89%, 30 to 39% 3rd degree		
948.84	Burn 80 to 89%, 40 to 49% 3rd degree		

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952.1	DORSAL SPINAL CORD INJUR*	956.4	Cutaneous sensory nerve lower limb injury
952.10	T1 to T6 injury NFS	956.5	Other specified nerves of pelvic girdle and lower limb injury
952.11	T1 to T6 complete lesion	956.8	Multiple nerves of pelvic girdle and lower limb injury
952.12	T1 to T6 anterior cord syndrome	956.9	Unspecified nerve of pelvic girdle and lower limb injury
952.13	T1 to T6 central cord syndrome	957.0	Superficial nerves of head and neck injury
952.14	T1 to T6 other specified cord injury	957.1	Other specified nerves injury
952.15	T7 to T12 injury NFS	957.8	Multiple nerves in several parts injury
952.16	T7 to T12 complete lesion	957.9	Nerve injury NOS
952.17	T7 to T12 anterior cord syndrome	958.0	Air embolism
952.18	T7 to T12 central cord syndrome	958.1	Fat embolism as an early complication of trauma
952.19	T7 to T12 other specified cord injury	958.2	Secondary and recurrent hemorrhage as an early complication of trauma
952.2	Lumbar spinal cord injury	958.3	Posttraumatic wound infection NEC
952.3	Sacral cord injury	958.4	Traumatic shock
952.4	Cauda Equina cord injury	958.5	Traumatic anuria
952.8	Spinal cord injury multiple sites	958.6	Volkman's ischemic contracture
952.9	Spinal cord injury unspecified site	958.7	Traumatic subcutaneous emphysema
953.0	Cervical root injury	958.8	Other early complications of trauma
953.1	Dorsal root injury	958.90	Compartment syndrome, unspecified
953.2	Lumbar root injury	958.91	Traumatic compartment syndrome of upper extremity
953.3	Sacral root injury	958.92	Traumatic compartment syndrome of lower extremity
953.4	Brachial plexus injury	958.93	Traumatic compartment syndrome of abdomen
953.5	Lumbosacral plexus injury	958.99	Traumatic compartment syndrome of other sites
953.8	Injury to nerve root multiple sites	959.0	FACE AND NECK INJURY NOS*
953.9	Injury to nerve root unspecified site	959.01	Head Injury NOS
954.0	Cervical sympathetic nerve injury	959.09	Face/Neck Injury NOS
954.1	Other sympathetic nerve injury	959.1	TRUNK INJURY NOS*
954.8	Other specified nerve of trunk injury	959.11	Other injury of chest wall
954.9	Unspecified nerve of trunk injury	959.12	Other injury of abdomen
955.0	Axillary nerve injury	959.13	Fx corpus cavernosum penis
955.1	Median nerve injury	959.14	Other injury of external genitals
955.2	Ulnar nerve injury	959.19	Other injury of other site of trunk
955.3	Radial nerve injury	959.2	Shoulder or upper arm injury NOS
955.4	Musculocutaneous nerve injury	959.3	Elbow, forearm, or wrist injury NOS
955.5	Cutaneous sensory nerve upper limb injury	959.4	Hand injury NOS
955.6	Digital nerve injury	959.5	Finger injury NOS
955.7	Other specified nerves of shoulder girdle and upper limb	959.6	Hip or thigh injury NOS
955.8	Multiple nerves of shoulder girdle and upper limb	959.7	Knee, leg, ankle, or foot injury NOS
955.9	Unspecified nerve of shoulder girdle and upper limb	959.8	Other and unspecified injury to other specified sites
956.0	Sciatic nerve injury		
956.1	Femoral nerve injury		
956.2	Posterior tibial nerve injury		
956.3	Peroneal nerve injury		

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## Appendix VI

### Abbreviated Injury Scale (AIS) 2005

#### Injury Diagnosis Codes

AIS 2005 Injury codes can be accessed using the DI Coder module, from the F9 Injury Diagnosis screen in Collector, or the AIS coding manual may be purchased through the following website:

[www.carcrash.org/publications\\_books.htm](http://www.carcrash.org/publications_books.htm)

## Appendix VII:

### AIS and ICD9 Diagnosis Codes for Brain or Facial Injury:

AIS 2005 Code	Injury Description		
	<b>Brain Injuries</b>		
113000.6	Crush injury, head		
116000.3	Penetrating Injury to Skull NFS		
116002.3	Penetrating Injury to Skull, superficial, ≤ 2 cm. beneath entrance		
116004.5	Penetrating Injury to Skull, major; > 2 cm. penetration		
120199.3	Artery NFS		
120299.3	Anterior cerebral artery NFS		
120202.5	Anterior cerebral artery laceration		
120204.3	Anterior cerebral artery thrombosis; occlusion		
120205.4	Anterior cerebral artery thrombosis; occlusion - bilateral		
120206.3	Anterior cerebral artery traumatic aneurysm		
120499.4	Basilar artery NFS		
120402.5	Basilar artery laceration		
120404.5	Basilar artery thrombosis; occlusion		
120406.5	Basilar artery traumatic aneurysm		
121099.3	Internal carotid artery NFS		
121002.5	Internal carotid artery laceration		
121003.6	Internal carotid artery laceration, bilateral		
121004.4	Internal carotid artery thrombosis; occlusion		
121005.5	Internal carotid artery thrombosis; occlusion - bilateral		
121006.3	Internal carotid artery traumatic aneurysm		
121499.3	Middle cerebral artery NFS		
121402.5	Middle cerebral artery laceration		
121404.4	Middle cerebral artery thrombosis; occlusion		
121405.5	Middle cerebral artery, bilateral thrombosis; occlusion		
121406.3	Middle cerebral artery traumatic aneurysm		
121699.3	Other artery NFS [branch of anterior, posterior, or middle cerebral artery, or branch of basilar or vertebral artery]		
121602.4	Other artery laceration [branch of anterior, posterior, or middle cerebral artery, or branch of basilar or vertebral artery]		
121604.3	Other artery thrombosis; occlusion [branch of anterior,		
		121606.3	posterior, or middle cerebral artery, or branch of basilar or vertebral artery]
			Other artery traumatic aneurysm [branch of anterior, posterior, or middle cerebral artery, or branch of basilar or vertebral artery]
		121899.3	Posterior cerebral artery NFS
		121802.5	Posterior cerebral artery laceration
		121804.3	Posterior cerebral artery thrombosis; occlusion
		121805.4	Posterior cerebral artery bilateral thrombosis; occlusion
		121806.3	Posterior cerebral artery traumatic aneurysm
		122899.3	Vertebral artery NFS
		122802.5	Vertebral artery laceration
		122803.6	Vertebral artery laceration, bilateral
		122804.3	Vertebral artery thrombosis; occlusion
		122805.4	Vertebral artery bilateral thrombosis; occlusion
		122806.3	Vertebral artery traumatic aneurysm
		122299.3	Sinus (intracranial) NFS
		122202.4	Sinus (intracranial) laceration
		122204.3	Sinus (intracranial) thrombosis; occlusion
		120602.4	Carotid-cavernous fistula
		120603.4	Carotid-cavernous fistula bilateral
		120899.3	Cavernous sinus NFS
		120802.4	Cavernous sinus laceration
		120804.5	Cavernous sinus open laceration (bleeding externally or segmental loss
		120806.3	Cavernous sinus thrombosis; occlusion
		122099.4	Sigmoid sinus NFS
		122002.4	Sigmoid sinus laceration
		122003.5	Sigmoid sinus laceration bilateral
		122004.5	Sigmoid sinus open laceration (bleeding externally) or segmental loss
		122005.6	Sigmoid sinus open laceration (bleeding externally) or segmental loss bilateral
		122006.4	Sigmoid sinus thrombosis; occlusion
		122007.5	Sigmoid sinus thrombosis; occlusion bilateral
		123099.4	Straight sinus NFS
		123002.4	Straight sinus laceration
		123003.5	Straight sinus open laceration (bleeding externally) or segmental loss
		123004.5	Straight sinus thrombosis; occlusion
		122499.3	Superior longitudinal (sagittal) sinus NFS
		122402.4	Superior longitudinal (sagittal) sinus laceration

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122404.5	Superior longitudinal (sagittal) sinus open laceration (bleeding externally) or segmental loss	140405.5	Cerebellum contusion extensive; massive; total volume > 30 cc
122406.4	Superior longitudinal (sagittal) sinus thrombosis; occlusion	140414.3	Cerebellum hematoma (hemorrhage) NFS
122407.4	Superior longitudinal (sagittal) sinus thrombosis; occlusion anterior half of sinus	140416.2	Cerebellum hematoma (hemorrhage) epidural or extradural tiny; < 0.6 cm thick
122408.5	Superior longitudinal (sagittal) sinus thrombosis; occlusion posterior half of sinus	140418.4	Cerebellum hematoma (hemorrhage) epidural or extradural small; moderate; ≤ 30 cc or ≤ 15 cc if ≤ age 10; 0.6 – 1 cm thick
122699.3	Transverse sinus NFS	140422.5	Cerebellum hematoma (hemorrhage) epidural or extradural large; massive; extensive; > 30 cc or > 15 cc if ≤ age 10; > 1 cm thick
122602.4	Transverse sinus laceration	140426.3	Cerebellum hematoma (hemorrhage) intracerebellar including petechial and subcortical NFS [include perilesional edema for size]
122603.5	Transverse sinus laceration bilateral	140428.2	Cerebellum hematoma (hemorrhage) intracerebellar including petechial and subcortical tiny; 0.6 cm diameter [includes radiographic “shearing” lesions]
122604.5	Transverse sinus open laceration (bleeding externally) or segmental loss	140430.4	Cerebellum hematoma (hemorrhage) intracerebellar including petechial and subcortical small; ≤ 15cc; 0.6-3 cm diameter
122605.6	Transverse sinus open laceration (bleeding externally) or segmental loss bilateral	140434.5	Cerebellum hematoma (hemorrhage) intracerebellar including petechial and subcortical large; > 15 cc; > 3 cm diameter
122607.6	Transverse sinus open laceration (bleeding externally) or segmental loss torcular	140438.3	Cerebellum hematoma (hemorrhage) subdural NFS
122606.4	Transverse sinus thrombosis; occlusion	140440.2	Cerebellum hematoma (hemorrhage) subdural tiny; < 0.6 cm thick
122608.5	Transverse sinus thrombosis; occlusion bilateral	140442.4	Cerebellum hematoma (hemorrhage) subdural small; moderate; ≤ 30 cc or ≤ 15 cc if ≤ age 10; 0.6-1 cm thick
122399.3	Vein NFS (Intracranial)	140446.5	Cerebellum hematoma (hemorrhage) subdural large; massive; extensive; > 30 cc or > 15 cc if ≤ age 10; > 1 cm thick
122599.3	Vein, major NFS [includes Galen, Labbe, Trolard, Rosenthal or internal cerebral]	140474.3	Cerebellum laceration [not from penetrating injury] NFS
122502.4	Vein, major [includes Galen, Labbe, Trolard, Rosenthal or internal cerebral] laceration	140473.3	Cerebellum laceration [not from penetrating injury] ≤ 2 cm length or depth
122504.3	Vein, major [includes Galen, Labbe, Trolard, Rosenthal or internal cerebral] thrombosis; occlusion	140472.4	Cerebellum laceration [not from penetrating injury] > 2 cm length or depth
122799.3	Vein, non-major NFS [any named vein that is not major]	140478.3	Cerebellum penetrating injury NFS
122702.4	Vein, non-major [any named vein that is not major] laceration	140477.3	Cerebellum penetrating injury ≤ 2 cm deep
122704.3	Vein, non-major [any named vein that is not major] thrombosis; occlusion	140476.5	Cerebellum penetrating injury > 2 cm deep
140299.5	Brain stem [hypothalamus, medulla, midbrain, pons] NFS	140466.2	Cerebellum subarachnoid hemorrhage
140202.5	Brain stem [hypothalamus, medulla, midbrain, pons] compression [includes transtentorial (uncal) or cerebellar tonsillar herniation]	140470.2	Cerebellum subpial hemorrhage
140204.5	Brain stem [hypothalamus, medulla, midbrain, pons] contusion	140699.3	Cerebrum NFS [includes basal ganglia, thalamus, putamen, globus pallidus]
140208.5	Brain stem [hypothalamus, medulla, midbrain, pons] infarction	140602.3	Cerebrum contusion NFS [include perilesional edema for size]
140210.5	Brain stem [hypothalamus, medulla, midbrain, pons] injury involving hemorrhage	140604.3	Cerebrum contusion single NFS
140212.6	Brain stem [hypothalamus, medulla, midbrain, pons] laceration	140605.2	Cerebrum contusion single tiny; < 1 cm diameter
140214.6	Brain stem [hypothalamus, medulla, midbrain, pons] massive destruction (crush-type injury)	140606.3	Cerebrum contusion single small; superficial; ≤ 30 cc or ≤ 15 cc if < age 10; 1-4 cm diameter or 1-2 cm diameter if ≤ age 10; midline shift ≤ 5 mm
140216.6	Brain stem [hypothalamus, medulla, midbrain, pons] penetrating injury	140608.4	Cerebrum contusion single large; deep; 30 – 50 cc or 15 - 30 cc if ≤ age 10; > 4 cm diameter or 2 - 4 cm diameter if age ≤ 10; midline shift > 5 mm
140218.6	Brain stem [hypothalamus, medulla, midbrain, pons] transection	140610.5	Cerebrum contusion single extensive; massive; total volume > 50 cc or > 30 cc if ≤ age 10
140499.3	Cerebellum NFS	140611.3	Cerebrum contusion multiple NFS
140402.3	Cerebellum contusion, single or multiple, NFS [include perilesional edema for size]	141612.3	Cerebrum contusion multiple, on same side but NFS
140407.2	Cerebellum contusion tiny; < 1 cm diameter	140613.2	Cerebrum contusion multiple, on same side, tiny; each
140403.2	Cerebellum contusion small; superficial; ≤ 15 cc; 1-3 cm diameter		
140404.4	Cerebellum contusion large; 15-30 cc; > 3 cm diameter		

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<p>140614.3 Cerebrum contusion multiple, on same side, small; superficial; total volume ≤ 30 cc or ≤ 15 cc if ≤ age 10; midline shift ≤ 5 mm</p> <p>140616.4 Cerebrum contusion multiple, on same side, large; total volume 30 – 50 cc or 15 – 30 cc if ≤ age 10; midline shift &gt; 5 mm</p> <p>140618.5 Cerebrum contusion multiple, on same side, extensive; massive; total volume &gt; 50 cc or &gt; 30 cc if ≤ age 10</p> <p>140620.3 Cerebrum contusion multiple, at least one on each side but NFS</p> <p>140621.2 Cerebrum contusion multiple, at least one on each side, tiny; each &lt; 1 cm diameter</p> <p>140622.3 Cerebrum contusion multiple, at least one on each side, small; superficial; total volume ≤ 30 cc or ≤ 15 cc if ≤ age 10</p> <p>140624.4 Cerebrum contusion multiple, at least one on each side, large; total volume 30 - 50 cc or 15 -30 cc if ≤ age 10</p> <p>140626.5 Cerebrum contusion multiple, at least one on each side, extensive; massive; total volume &gt; to cc of &gt; 30 cc if ≤ age 10</p> <p>140628.4 Cerebrum diffuse axonal injury (DAI) NFS [requires coma &gt; 6 hours or, if fatal within 6 hours, diagnosis is made by pathological examination]</p> <p>140625.4 Cerebrum DAI confined to white matter or basal ganglia</p> <p>140627.5 Cerebrum DAI involving corpus callosum</p> <p>140629.3 Cerebrum hematoma (hemorrhage) NFS</p> <p>140630.3 Cerebrum hematoma (hemorrhage) epidural or extradural [include perilesional edema for size]</p> <p>140631.2 Cerebrum hematoma (hemorrhage) epidural or extradural, tiny; &lt; 0.6 cm thick</p> <p>140632.4 Cerebrum hematoma (hemorrhage) epidural or extradural, small; moderate; ≤ 50 cc or ≤ 25 cc if ≤ age 10; 0.6 – 1 cm thick</p> <p>140634.5 Cerebrum hematoma (hemorrhage) epidural or extradural, small; moderate; bilateral</p> <p>140636.5 Cerebrum hematoma (hemorrhage) epidural or extradural, large; massive; extensive; &gt; 50 cc or &gt; 25 cc if ≤ age 10; &gt; 1 cm thick</p> <p>140638.3 Cerebrum hematoma (hemorrhage), intracerebral NFS [include perilesional edema for size]</p> <p>140639.2 Cerebrum hematoma (hemorrhage), intracerebral, tiny; single or multiple &lt; 2 cm diameter</p> <p>140642.2 Cerebrum hematoma (hemorrhage), intracerebral, tiny; single or multiple &lt; 2 cm diameter, petechial hemorrhage(s) [includes radiographic “shearing” lesions]</p> <p>140643.2 Cerebrum hematoma (hemorrhage), intracerebral, tiny; single or multiple &lt; 2 cm diameter, petechial hemorrhage(s) [includes radiographic “shearing” lesions] not associated with coma &gt; 6 hours</p> <p>140645.4 Cerebrum hematoma (hemorrhage), intracerebral, tiny; single or multiple &lt; 2 cm diameter, petechial hemorrhage(s) [includes radiographic “shearing” lesions] associated with coma &gt; 6 hours</p> <p>140640.4 Cerebrum hematoma (hemorrhage), intracerebral small; ≤ 30 cc or ≤ 15 cc if age ≤ 10; 1 – 4 cm diameter</p>	<p>140647.3</p> <p>140649.4</p> <p>140646.5</p> <p>140648.5</p> <p>140641.5</p> <p>140650.3</p> <p>140651.3</p> <p>140652.4</p> <p>140654.4</p> <p>140655.5</p> <p>140655.5</p> <p>140688.3</p> <p>140687.3</p> <p>140686.4</p> <p>140690.3</p> <p>140691.3</p> <p>140692.5</p> <p>140678.2</p> <p>140675.2</p> <p>140677.4</p> <p>140693.2</p> <p>140694.2</p> <p>140695.3</p> <p>140696.2</p> <p>140697.2</p> <p>140698.3</p> <p>140799.3</p> <p>161007.4</p> <p>161008.4</p> <p>161011.5</p> <p>161012.5</p>	<p>or ≤ 1 cm if ≤ age 10; subcortical hemorrhage</p> <p>Cerebrum hematoma (hemorrhage), intracerebral small; ≤ 30 cc or ≤ 15 cc if age ≤ 10; 1 – 4 cm diameter or ≤ 1 cm if ≤ age 10; subcortical hemorrhage, not associated with coma &gt; 6 hours</p> <p>Cerebrum hematoma (hemorrhage), intracerebral small; ≤ 30 cc or ≤ 15 cc if age ≤ 10; 1 – 4 cm diameter or ≤ 1 cm if ≤ age 10; subcortical hemorrhage, associated with coma &gt; 6 hours</p> <p>Cerebrum hematoma (hemorrhage), intracerebral small; ≤ 30 cc or ≤ 15 cc if age ≤ 10; 1 – 4 cm diameter or ≤ 1 cm if ≤ age 10; subcortical hemorrhage, bilateral</p> <p>Cerebrum hematoma (hemorrhage), intracerebral, large; &gt; 30 cc or &gt; 15 cc if ≤ age 10; &gt; 4 cm or &gt; 1 cm diameter if ≤ age 10</p> <p>Cerebrum hematoma (hemorrhage), intracerebral, large; &gt; 30 cc or &gt; 15 cc if ≤ age 10; &gt; 4 cm or &gt; 1 cm diameter if ≤ age 10, bilateral [each &gt; 4 cm]</p> <p>Cerebrum hematoma, subdural NFS</p> <p>Cerebrum hematoma, subdural, tiny; &lt; 0.6 cm thick [includes tentorial (subdural) blood one or both sides]</p> <p>Cerebrum hematoma, subdural, small; moderate; ≤ 50 cc or ≤ 25 cc if age ≤ 10; 0.6 – 1 cm thick</p> <p>Cerebrum hematoma, subdural, small; moderate; ≤ 50 cc or ≤ 25 cc if age ≤ 10; 0.6 – 1 cm thick, bilateral [both sides 0.6 – 1 cm thick]</p> <p>Cerebrum hematoma, subdural, large; massive; extensive; &gt; 50 cc or &gt; 25 cc if age ≤ 10; &gt; 1 cm thick</p> <p>Cerebrum hematoma, subdural, large; massive; extensive; &gt; 50 cc or &gt; 25 cc if age ≤ 10; &gt; 1 cm thick, bilateral [at least one side &gt; 1 cm thick]</p> <p>Cerebrum laceration NFS [not from penetrating injury]</p> <p>Cerebrum laceration ≤ 2 cm length or depth</p> <p>Cerebrum laceration &gt; 2 cm length or depth</p> <p>Cerebrum penetrating injury NFS</p> <p>Cerebrum penetrating injury ≤ 2 cm deep</p> <p>Cerebrum penetrating injury &gt; 2 cm deep</p> <p>Cerebrum intraventricular hemorrhage</p> <p>Cerebrum intraventricular hemorrhage not associated with coma &gt; 6 hours</p> <p>Cerebrum intraventricular hemorrhage associated with coma &gt; 6 hours</p> <p>Cerebrum subarachnoid hemorrhage NFS</p> <p>Cerebrum subarachnoid hemorrhage not associated with coma &gt; 6 hours</p> <p>Cerebrum subarachnoid hemorrhage associated with coma &gt; 6 hours</p> <p>Cerebrum subpial hemorrhage NFS</p> <p>Cerebrum subpial hemorrhage not associated with coma &gt; 6 hours</p> <p>Cerebrum subpial hemorrhage associated with coma &gt; 6 hours</p> <p>Pituitary injury</p> <p>Diffuse axonal injury (prolonged traumatic coma LOC &gt; 6 hours not due to mass lesion) NFS</p> <p>Diffuse axonal injury LOC 6 – 24 hours (mild DAI)</p> <p>Diffuse axonal injury LOC &gt; 24 hours NFS</p> <p>Diffuse axonal injury LOC &gt; 24 hours without brainstem signs (moderate DAI)</p>
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Revised June 2011

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161013.5	Diffuse axonal injury LOC > 24 hours with brainstem signs (severe DAI)	803.4	Other and unqualified skull fractures, closed with intracranial injury of other and unspecified nature
	<b>Face Injuries</b>	803.6	Other and unqualified skull fractures, open with cerebral laceration and contusion
216000.1	Penetrating injury NFS	803.7	Other and unqualified skull fractures, open with subarachnoid, subdural, and extradural hemorrhage
216002.1	Penetrating injury, minor; superficial	803.8	Other and unqualified skull fractures, open with other and unspecified intracranial hemorrhage
216004.2	Penetrating injury with tissue loss > 25 cm <sup>2</sup>	803.9	Other and unqualified skull fractures, open with intracranial injury of other and unspecified nature
216006.3	Penetrating injury with blood loss > 20% by volume	804.1	Multiple fractures involving skull or face with other bones, closed with cerebral laceration and contusion
216008.4	Penetrating injury, massive destruction of whole face including both eyes	804.2	Multiple fractures involving skull or face with other bones, closed with subarachnoid, subdural, and extradural hemorrhage
220200.1	External carotid artery branch(es) laceration NFS [includes facial, temporal, and internal maxillary]	804.3	Multiple fractures involving skull or face with other bones, closed with other unspecified intracranial hemorrhage
220202.1	External carotid artery branch(es) laceration minor; superficial	804.4	Multiple fractures involving skull or face with other bones, closed with intracranial injury of other and unspecified nature
220204.3	External carotid artery branch(es) laceration major; transection; blood loss > 20% by volume	804.6	Multiple fractures involving skull or face with other bones, open with cerebral laceration and contusion

ICD9-CM Code	Injury Descriptors		
	<b>Brain Injuries</b>		
800.1	Fracture of vault of skull, closed with cerebral laceration and contusion	804.7	Multiple fractures involving skull or face with other bones, open with subarachnoid, subdural, and extradural hemorrhage
800.2	Fracture of vault of skull, closed with subarachnoid, subdural, and extradural hemorrhage	804.8	Multiple fractures involving skull or face with other bones, open with other unspecified intracranial hemorrhage
800.3	Fracture of vault of skull, closed with other and unspecified intracranial hemorrhage	804.9	Multiple fractures involving skull or face with other bones, open with intracranial injury of other and unspecified nature
800.4	Fracture of vault of skull, closed with intracranial injury of other and unspecified nature	851	Cerebral laceration and contusion
800.6	Fracture of vault of skull, open with cerebral laceration and contusion	851.0	Cortex (cerebral) contusion without mention of open intracranial wound
800.7	Fracture of vault of skull, open with subarachnoid, subdural, and extradural hemorrhage	851.1	Cortex (cerebral) contusion with open intracranial wound
800.8	Fracture of vault of skull, open with other and unspecified intracranial hemorrhage	851.2	Cortex (cerebral) laceration without mention of open intracranial wound
800.9	Fracture of vault of skull, open with intracranial injury of other and unspecified nature	851.3	Cortex (cerebral) laceration with open intracranial wound
801.1	Fracture of base of skull, closed with cerebral laceration and contusion	851.4	Cerebellar or brain stem contusion without mention of open intracranial wound
801.2	Fracture of base of skull, closed with subarachnoid, subdural, and extradural hemorrhage	851.5	Cerebellar or brain stem contusion with open intracranial wound
801.3	Fracture of base of skull, closed with other and unspecified intracranial hemorrhage	851.6	Cerebellar or brain stem laceration without mention of open intracranial wound
801.4	Fracture of base of skull, closed with intracranial injury of other and unspecified nature	851.7	Cerebellar or brain stem laceration with open intracranial wound
801.6	Fracture of base of skull, open with cerebral laceration and contusion	851.8	Other and unspecified cerebral laceration and contusion, without mention of open intracranial wound
801.7	Fracture of base of skull, open with subarachnoid, subdural, and extradural hemorrhage	851.9	Other and unspecified cerebral laceration and contusion, with open intracranial wound
801.8	Fracture of base of skull, open with other and unspecified intracranial hemorrhage	852	Subarachnoid, subdural, and extradural hemorrhage, following injury
801.9	Fracture of base of skull, open with intracranial injury of other and unspecified nature	852.0	Subarachnoid hemorrhage following injury without mention of open intracranial wound
803.1	Other and unqualified skull fractures, closed with cerebral laceration and contusion	852.1	Subarachnoid hemorrhage following injury with open intracranial wound
803.2	Other and unqualified skull fractures, closed with subarachnoid, subdural, and extradural hemorrhage		
803.3	Other and unqualified skull fractures, closed with other and unspecified intracranial hemorrhage		

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<p>852.2 Subarachnoid hemorrhage following injury without mention of open intracranial wound</p> <p>852.3 Subdural hemorrhage following injury with open intracranial wound</p> <p>852.4 Extradural hemorrhage following injury without mention of open intracranial wound</p> <p>852.5 Extradural hemorrhage following injury with open intracranial wound</p> <p>853 Other and unspecified intracranial hemorrhage following injury</p> <p>853.0 Other and unspecified intracranial hemorrhage following injury without mention of open intracranial wound</p> <p>853.1 Other and unspecified intracranial hemorrhage following injury with open intracranial wound</p> <p>854 Intracranial injury of other and unspecified nature</p> <p>854.0 Intracranial injury of other and unspecified nature</p>	<p>854.1 Intracranial injury of other and unspecified nature with open intracranial wound</p> <p>900 Injury to blood vessels of head and neck</p> <p>900.0 Injury to carotid artery, unspecified</p> <p>900.01 Injury to common carotid artery</p> <p>900.02 Injury to external carotid artery</p> <p>900.03 Injury to internal carotid artery</p> <p>900.1 Injury to internal jugular vein</p> <p>900.8 Injury to other specified blood vessels of head and neck</p> <p>900.81 Injury to external jugular vein</p> <p>900.82 Injury to multiple blood vessels of head and neck</p> <p>900.9 Injury to unspecified blood vessel of head and neck</p>
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**Appendix VIII**

**Legacy Data Elements (No Longer on Screen):**

Section	Screen	Data Element Description	Collector Data Name	Definition
Pre-H/Transfer	F3.2	Nailbed	NAILBED	The time for capillary refill, as measured by “nail pinch”. 1= Two Seconds or Less 2= More than Two Seconds 3= No Response
Pre-H/Transfer	F3.2	Pupils	PUPILS	Pupil size 1= Equal 2= Not Equal
Pre-H/Transfer	F3.2	Pre-Hospital Consciousness	PHI_CONSC	The “consciousness” component of the Pre-Hospital index (PHI) field triage score. Use the <b>worst</b> value if several are available. 1= Normal 2= Confused or Combative 3= No Intelligible Words U= Unknown
Pre-H/Transfer	F3.2	Pre-Hospital Respirations	PHI_RESP	The “respirations” component of the Pre-Hospital index (PHI) field triage score. Use the <b>worst</b> value if several are available. 1= Normal 2= Labored or Shallow 3= <10/Minute (or needs intubation) U= Unknown
Pre-H/Transfer	F3.2	Prehospital Index (PHI) score	PHI	This field is calculated by Collector. A field triage score determining triage protocols. PI components are; 1-Systolic Blood Pressure, 2- Pulse, 3- Respirations, 4- Consciousness, 5-Penetrating vs. not penetrating wound.
Pre-H/Transfer	F3.2	TRIAG_S_1	Triagcr1	The most important criteria used to identify a patient as a major trauma victim as recorded on the pre-hospital run form. Vital Signs and Level of Consciousness Anatomy of Injury Biomechanics of Injury Other Risk Factors Gut Feeling of Medic