



AUSTRALASIAN REHABILITATION OUTCOMES CENTRE

AMBULATORY DATA DICTIONARY V4.2 FOR IT DEVELOPERS – NEW ZEALAND VERSION

*For technical queries
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Ambulatory Data Dictionary for Developers

BACKGROUND

This data dictionary includes all of the data items that are in the AROC Ambulatory V4.1 dataset. Each data item is listed, along with the definition, justification and guide for use. The language and information is aimed to assist clinically trained staff in using and understanding the AROC data. AROC recommends that this dictionary is used as a support document for staff members collecting data on our [data collection forms](#). If you find that this dictionary does not adequately clarify your query of a data item, please contact aroc@uow.edu.au.

AMBULATORY DATA DICTIONARY VERSION

| Version | Date | Nature of change |
|---------|---------------|---|
| 4.2 | July 2022 | Overall review incorporating updates to Definition, Justification and Guide for use sections to provide clarity and add more examples. Addition of COVID impairment codes |
| 4.14 | June 2019 | Update to formatting. |
| 4.13 | April 2019 | Minor dataset changes to the following items: <i>10 metre walk +/- aid test start date</i> and <i>10 metre walk +/- aid test end date</i> . |
| 4.12 | December 2018 | Minor dataset changes to the following item: <i>AROC Impairment Code</i> . |
| 4.11 | November 2018 | Minor codeset changes to the following item group: <i>de Morton Mobility Index (DEMMI)</i> . |

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AROC Ambulatory Data Dictionary for Developers (NZ) V4.2

| Data Item | ID | Tab | Column | Page |
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| Path | PATH | 1 | A | 5 |
| Establishment ID | F1 | 2 | B | 6 |
| Establishment name | F2 | 3 | C | 7 |
| Team ID | F3 | 4 | D | 8 |
| Team name | F4 | 5 | E | 9 |
| Unique record number | D1 | 6 | F | 10 |
| Date of birth | D4 | 7 | G | 11 |
| Date of birth estimate | D5 | 8 | H | 12 |
| Letters of name | D3 | 9 | I | 13 |
| Sex | D6 | 10 | J | 14 |
| Indigenous status (NZ) | D7B | 11 | K | 15 |
| Episode begin date | E10 | 12 | L | 16 |
| Episode end date | E113 | 13 | M | 17 |
| Ethnicity | D8 | 14 | N | 18 |
| Geographical residence (NZ) | D9B | 15 | O | 19 |
| Postcode | D10 | 16 | P | 20 |
| Funding source (NZ) | D11B | 17 | Q | 21 |
| Blank Item 1 (NZ) | BL01 | 18 | R | 22 |
| Blank Item 2 (NZ) | BL02 | 19 | S | 23 |
| AROC impairment code | E40 | 20 | T | 24 |
| Date of injury/impairment onset | E26 | 21 | U | 27 |
| Time since onset or acute exacerbation of chronic condition | E27 | 22 | V | 28 |
| Date of relevant inpatient episode | E28 | 23 | W | 29 |
| Referral date | E1 | 24 | X | 30 |
| Mode of episode start | E29D | 25 | Y | 31 |
| Is this the first direct care rehabilitation episode for this impairment/exacerbation of a chronic condition? | E24 | 26 | Z | 32 |
| Need for interpreter service? | D13 | 27 | AA | 33 |
| Type of accommodation prior to this impairment (NZ) | E11B | 28 | AB | 34 |
| Carer status prior to this impairment | E12 | 29 | AC | 35 |
| Employment status prior to this impairment | E23 | 30 | AD | 36 |
| Type of accommodation during ambulatory episode (NZ) | E41B | 31 | AE | 37 |
| Carer status during ambulatory episode | E42 | 32 | AF | 38 |
| Is there an existing comorbidity interfering with this episode | E103 | 33 | AG | 39 |
| Comorbidities interfering with rehabilitation episode (Item Group) | E104-E107 | 34-37 | AH-AK | 40 |
| Cognitive impairment impacting on rehabilitation participation | ET03 | 38 | AL | 41 |
| Date multi-disciplinary team rehabilitation plan established | E25 | 39 | AM | 42 |
| Date episode start Lawton's Assessed | E62 | 40 | AN | 43 |
| Lawton's admission scores (items 1-6) (Item Group) | E63-E68 | 41-46 | AO-AT | 44 |
| Lawton's admission scores (items 7-8) (Item Group) | E69-E70 | 47-48 | AU-AV | 45 |
| Date episode end Lawton's Assessed | E91 | 49 | AW | 46 |
| Lawton's discharge scores (items 1-6) (Item Group) | E92-E97 | 50-55 | AX-BC | 47 |
| Lawton's discharge scores (items 7-8) (Item Group) | E98-E99 | 56-57 | BD-BE | 48 |
| Mode of episode end | E114D | 58 | BF | 49 |
| Final destination (NZ) | E116B | 59 | BG | 50 |
| Carer status post discharge | E117 | 60 | BH | 51 |
| Employment status after, or anticipated employment status after discharge | E71 | 61 | BI | 52 |

| Data Item | ID | Tab | Column | Page |
|---|-----------|------------|---------------|-------------|
| Return to pre-impairment leisure and recreational activities | E144 | 62 | BJ | 53 |
| Total number of days seen | E118 | 63 | BK | 54 |
| Total number of occasions of service | E119 | 64 | BL | 55 |
| Disciplines involved in therapy (Item Group) | E120-E129 | 65-74 | BM-BV | 56 |
| Was rehabilitation aimed at upper limb function | EA01 | 75 | BW | 57 |
| Was rehabilitation aimed at gait retraining | EA02 | 76 | BX | 58 |
| Was rehabilitation aimed at aphasia | EA03 | 77 | BY | 59 |
| Upper Limb Motor Assessment Scale (ULMAS) start date | EU01 | 78 | BZ | 60 |
| Upper Limb Motor Assessment Scale (ULMAS) start scores (Item Group) | EU02-EU04 | 79-81 | CA-CC | 61 |
| Upper Limb Motor Assessment Scale (ULMAS) end date | EU05 | 82 | CD | 62 |
| Upper Limb Motor Assessment Scale (ULMAS) end scores (Item Group) | EU06-EU08 | 83-85 | CE-CG | 63 |
| 10 metre walk +/- aid test start date | A19 | 86 | CH | 64 |
| Admission 10 metre walk +/- aid test | A20 | 87 | CI | 65 |
| 10 metre walk +/- aid test end date | A21 | 88 | CJ | 66 |
| Discharge 10 metre walk +/- aid test | A22 | 89 | CK | 67 |
| Level of SCI Start | A04 | 90 | CL | 68 |
| de Morton Mobility Index (DEMMI) start date | ED01 | 91 | CM | 69 |
| de Morton Mobility Index (DEMMI) start scores (Item Group) | ED02-ED17 | 92-107 | CN-DC | 70 |
| de Morton Mobility Index (DEMMI) end date | ED18 | 108 | DD | 71 |
| de Morton Mobility Index (DEMMI) end scores (Item Group) | ED19-ED34 | 109-124 | DE-DT | 72 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) start date | EM01 | 125 | DU | 73 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Abilities start scores (Item Group) | EM03-EM15 | 126-138 | DV-EH | 74 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Adjustment start scores (Item Group) | EM29-EM37 | 139-147 | EI-EQ | 75 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Participation start scores (Item Group) | EM47-EM55 | 148-156 | ER-EZ | 76 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) end date | EM02 | 157 | FA | 77 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Abilities end scores (Item Group) | EM16-EM28 | 158-170 | FB-FN | 78 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Adjustment end scores (Item Group) | EM38-EM46 | 171-179 | FO-FW | 79 |
| Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Participation end scores (Item Group) | EM56-EM64 | 180-188 | FX-GF | 80 |
| Amputee care start phase | A09 | 189 | GG | 81 |
| Phase of amputee care during episode - Delayed wound? | A10 | 190 | GH | 82 |
| Phase of amputee care during episode - Pre prosthetic? | A11 | 191 | GI | 83 |
| Phase of amputee care during episode - Prosthetic? | A12 | 192 | GJ | 84 |
| Phase of amputee care at episode end | A13 | 193 | GK | 85 |
| Prosthetic device fitted? | A14 | 194 | GL | 86 |
| Ready for casting date | A08 | 195 | GM | 87 |
| Date of first prosthetic fitting | A15 | 196 | GN | 88 |
| Reason for delay in first prosthetic fitting | A16 | 197 | GO | 89 |
| Discharge timed up and go test | A17 | 198 | GP | 90 |
| Discharge 6 minute walk test | A18 | 199 | GQ | 91 |
| Goal Attainment Scale (GAS) descriptions (Item Group) | EG02-EG06 | 200-204 | GR-GV | 92 |
| Goal Attainment Scale (GAS) start date | EG01 | 205 | GW | 93 |
| Goal Attainment Scale (GAS) start scores (Item Group) | EG17-EG21 | 206-210 | GX-HB | 94 |
| Goal Attainment Scale (GAS) end date | EG22 | 211 | HC | 95 |
| Goal Attainment Scale (GAS) end scores (Item Group) | EG23-EG27 | 212-216 | HD-HH | 96 |
| General comments | Z1 | 217 | HI | 97 |

Data Element Name: Path

Data Element ID: PATH

Short Name: Path

Definition: Pathway of care being provided for this episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 1 (A) | Episode | Mandatory |

Business Rules: PATH = 4

Related data items: N/A

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

4 Ambulatory care

Data Element Name: Establishment ID

Data Element ID: F1

Short Name: Facld

Definition: A code which represents the facility.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 10 | 2 (B) | Facility | Mandatory |

Business Rules: Where available use the Provider Unit Number (AU) / Health Facility Code (NZ). Alternate code available from AROC.

NOTE: For this data item Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case) and the 10 numerals

Related data items: F2, F3, F4

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Establishment name**Data Element ID:** F2**Short Name:** FacName

Definition: The name of the facility collecting and submitting the data.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 40 | 3 (C) | Facility | Mandatory |

Business Rules: NOTE: For this data item Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case), 10 numerals and standard punctuation marks, such as - - — . , : ; () / ‘

DO NOT USE carriage returns, tabs or double quote

Related data items: F1, F3, F4

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Data Element Name: Team ID**Data Element ID:** F3**Short Name:** TeamID

Definition: A code representing an ambulatory rehabilitation ward/team.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 10 | 4 (D) | Facility | Optional |

Business Rules: It is not mandatory to collect F3 (Team ID), particularly if the service has only one ambulatory rehabilitation team.
When Team ID is collected the code MUST be used consistently for each team, noting that Team ID codes are case sensitive.

NOTE: For this data item Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case) and the 10 numerals

Related data items: F1, F2, F4

Key Dates: **Effective:** 01/07/2007 **Revision:** N/A

Data Element Name: Team name

Data Element ID: F4

Short Name: TeamName

Definition: The name of an ambulatory rehabilitation ward/team within a service.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|--------------|-------|-------------------|----------|------------|
| | Alphanumeric | 40 | 5 (E) | Facility | Optional |

Business Rules: It is not mandatory to collect Team Name, particularly if the facility has only one ambulatory rehabilitation team.
When Team ID (F3) is collected Team Name should also be collected.

NOTE: For this data item Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case), 10 numerals and standard punctuation marks, such as - - — . , ; () / ‘

DO NOT USE carriage returns, tabs or double quote

Related data items: F1, F2, F3

Key Dates: **Effective:** 01/07/2007 **Revision:** N/A

Data Element Name: Unique record number**Data Element ID:** D1**Short Name:** URN

Definition: Unique record number established by the facility to enable communication regarding data quality issues pertaining to that episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 12 | 6 (F) | Demographic | Mandatory |

Business Rules: NOTE: For this data item Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case), 10 numerals and standard punctuation marks, such as - - — . , ; () / '

DO NOT USE carriage returns, tabs or double quotes

Related data items: N/A

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Date of birth**Data Element ID:** D4**Short Name:** DOB

Definition: The date of birth of the patient being treated by the facility.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 7 (G) | Demographic | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).
If unknown day of birth use 01 (record D5 as estimated)
If unknown month of birth use 01 (record D5 as estimated)
If unknown year of birth enter best estimate (record D5 as estimated)

Related data items: D5

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Date of birth estimate

Data Element ID: D5

Short Name: DOBest

Definition: Flag to indicate if date of birth item is a known or estimated value.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|-------------|------------|
| | Numeric | 1 | 8 (H) | Demographic | Mandatory |

Business Rules: N/A

Related data items: D4

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

- 1 Estimated
- 2 Not estimated

Data Element Name: Letters of name**Data Element ID:** D3**Short Name:** LON**Definition:** This is a 5 letter character string made up of the 2nd, 3rd and 5th letters of the patient's surname, followed by the 2nd and 3rd letters of the patient's first name.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 5 | 9 (1) | Demographic | Mandatory |

Business Rules: In the first three characters record the 2nd, 3rd and 5th letters of the patient's Family name/surname. In the following two characters, record the 2nd and 3rd letters of the patient's first given name.

NOTE 1: If either of the person's names includes non-alphabetic characters such as hyphens (Lee-Archer), apostrophes (O'Mara) or blank spaces (Eu Jin) these nonalphabetic characters should be ignored when counting the position of each character.

NOTE 2: If either the Family name/surname or the first given name of the person is not long enough to supply the requested letters (i.e. a surname of less than five letters or a first name of less than three letters) then substitute the number '2' in the Letters of name field to reflect the missing letters.

NOTE 3: If a person's surname is missing altogether, record 2s for all three spaces associated with the family name/surname. Similarly, if the person's first name is missing altogether substitute 2s for the two spaces associated with the first given name.

For this data item Alphanumeric characters should be limited to the 26 alphabetic uppercase characters and the numeral 2.

Related data items: N/A**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A

Data Element Name: Sex**Data Element ID:** D6**Short Name:** Sex

Definition: The biological differences between males and females, as represented by a code.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 10 (J) | Demographic | Mandatory |

Business Rules: N/A**Related data items:** N/A

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A**Codeset values:**

| | |
|---|---------------------------------|
| 1 | Male |
| 2 | Female |
| 3 | Indeterminate |
| 9 | Not stated/inadequately defined |

Data Element Name: Indigenous status (NZ)**Data Element ID:** D7B**Short Name:** IndStat

Definition: Indigenous status is a measure of whether a patient identifies as being of Maori or Non-Maori origin.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 11 (K) | Demographic | Optional |

Business Rules: N/A

Related data items: N/A

Key Dates: **Effective:** 01/09/2003 **Revision:** 2012-07-01

Codeset values:

| | |
|---|------------------------------------|
| 1 | Maori |
| 4 | Non-Maori |
| 9 | Not stated or inadequately defined |

Data Element Name: Episode begin date**Data Element ID:** E10**Short Name:** BegDate

Definition: The begin date for an ambulatory episode of care is the date that the patient's care is transferred to a rehabilitation physician or physician with an interest in rehabilitation and it's recorded in the medical record that the ambulatory rehabilitation team has commenced the rehabilitation program/provision of care.

In the case of ambulatory shared care, it is the date the patient, who is receiving care from a clinical service provider (e.g. GP), was first seen by a member of the rehabilitation team and there is documented evidence in the medical record that the two services have agreed on a shared care arrangement that includes joint care planning and exchange of clinical information.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 12 (L) | Episode | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).**Related data items:** E113**Key Dates:** **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Episode end date**Data Element ID:** E113**Short Name:** EndDate

Definition: The date the patient completed their ambulatory rehabilitation episode.
The ambulatory rehabilitation episode ends when the patient is discharged from the ambulatory rehabilitation program.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 13 (M) | Episode | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E10

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Ethnicity**Data Element ID:** D8**Short Name:** Ethnicity

Definition: Ethnicity is defined as a social group whose members have one or more of the following four characteristics: they share a sense of common origins, claim a common and distinctive history and destiny, possess one or more dimensions of collective cultural individuality and/or feel a sense of unique collective solidarity.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 2 | 14 (N) | Demographic | Mandatory |

Business Rules: N/A**Related data items:** N/A**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

| | |
|----|---|
| 10 | European not further defined |
| 11 | New Zealand European/Pakeha |
| 12 | Other European |
| 21 | Maori |
| 30 | Pacific Peoples not further defined |
| 31 | Samoan |
| 32 | Cook Island Maori |
| 33 | Tongan |
| 34 | Niuean |
| 35 | Tokelauan |
| 36 | Fijian |
| 37 | Other Pacific Peoples |
| 40 | Asian not further defined |
| 41 | Southeast Asian |
| 42 | Chinese |
| 43 | Indian |
| 44 | Other Asian |
| 51 | Middle Eastern |
| 52 | Latin American/ Hispanic |
| 53 | African (or cultural group of African origin) |
| 61 | Other Ethnicity |
| 94 | Patient doesn't know |
| 95 | Refused to Answer |
| 97 | Response Unidentifiable |
| 99 | Not stated |

Data Element Name: Geographical residence (NZ)**Data Element ID:** D9B**Short Name:** State_Region**Definition:** Geographical residence is the region that the patient usually resides in.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 2 | 15 (O) | Demographic | Mandatory |

Business Rules: N/A**Related data items:** D10**Key Dates:** **Effective:** 01/07/2002 **Revision:** 2012-07-01**Codeset values:**

| | |
|----|---|
| 11 | Northland |
| 12 | Auckland |
| 13 | Waikato |
| 14 | Bay of Plenty |
| 15 | Gisborne |
| 16 | Hawkes Bay |
| 17 | Taranaki |
| 18 | Manawatu-Wanganui |
| 19 | Wellington |
| 20 | Tasman |
| 21 | Nelson |
| 22 | Marlborough |
| 23 | West Coast |
| 24 | Canterbury |
| 25 | Otago |
| 26 | Southland |
| 27 | Chatham Islands, Kermadecs and Subantarctic Islands |
| 28 | Not NZ |

Data Element Name: Postcode**Data Element ID:** D10**Short Name:** postcode

Definition: Postcode is the numeric descriptor for a postal delivery area, aligned with locality, suburb or place for the address of patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 4 | 16 (P) | Demographic | Mandatory |

Business Rules: Record the four digit postcode of the patient's usual place of residence.
8888= not applicable
9999= not known

Related data items: D9

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Funding source (NZ)**Data Element ID:** D11B**Short Name:** Funding**Definition:** The principal source of funding for the patient's rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 2 | 17 (Q) | Demographic | Mandatory |

Business Rules: N/A**Related data items:** N/A**Key Dates:** **Effective:** 01/07/2002 **Revision:** 2012-07-01**Codeset values:**

| | |
|----|--|
| 1 | NZ Ministry of Health (public patient) |
| 2 | Private health insurance |
| 3 | Self-funded |
| 4 | Workers compensation |
| 5 | Motor vehicle third party personal claim |
| 6 | Other compensation (eg public liability, common law, medical negligence) |
| 10 | Other hospital or public authority (contracted care) |
| 11 | Reciprocal health care agreement (other countries) |
| 12 | NZ Disability |
| 13 | Accident Compensation Corporation |
| 98 | Other |
| 99 | Not known |

Data Element Name: Blank Item 1 (NZ)

Data Element ID: BL01

Short Name: BlankItemNZ1

Definition: The AROC V4.1 ambulatory data set includes some country specific data items - the item in this tab relates only to Australia.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Null | 0 | 18 (R) | Blank | Mandatory |

Business Rules: Leave blank tab in the file for BL01

Related data items: N/A

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Data Element Name: Blank Item 2 (NZ)

Data Element ID: BL02

Short Name: BlankItemNZ2

Definition: The AROC V4.1 ambulatory data set includes some country specific data items - the item in this tab relates only to Australia.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Null | 0 | 19 (S) | Blank | Mandatory |

Business Rules: Leave blank tab in the file for BL02

Related data items: N/A

Key Dates: **Effective:** **Revision:** 2017-07-01

Data Element Name: AROC impairment code**Data Element ID:** E40**Short Name:** Impair**Definition:** The AROC impairment codes are used to classify rehabilitation episodes into like clinical groups. The Australian codes are based on the Uniform Data System for Medical Rehabilitation (UDSMR) codes. The selected code should reflect the primary reason for the current episode of rehabilitation care.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 7 | 20 (T) | Episode | Mandatory |

Business Rules: This data item is formatted as xx.xxxx

If E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29) then EA01-EA03 are mandatory (stroke)

If E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2) then EM01-EM64 are mandatory (brain + MMT)

If E40 = (4.111, 4.112, 4.1211, 4.1212, 4.1221, 4.1222, 4.13, 4.211, 4.212, 4.2211, 4.2212, 4.2221, 4.2222, 4.23, 14.1, 14.3) then A04 is mandatory (spinal cord + MMT)

If E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29) then A08-A17 are mandatory AND A18 and A22 are optional (amputee)

If E40 = (8.111 - 8.19, 8.211 - 8.26, 8.3) then A19-A22 are mandatory (orthopaedic)

If E40 = (16.1, 16.2, 16.3) then ED01-ED34 are mandatory (reconditioning)

Related data items: EA01-EA03, EU01-EU08, A04, A08-A22, ED01-ED34, EM01-EM64**Key Dates:** **Effective:** 01/07/2002 **Revision:** 2012-07-01**Codeset values:**

| | |
|--------|--|
| 1.11 | Stroke, Haemorrhagic, Left Body Involvement (Right Brain) |
| 1.12 | Stroke, Haemorrhagic, Right Body Involvement (Left Brain) |
| 1.13 | Stroke, Haemorrhagic, Bilateral Involvement |
| 1.14 | Stroke, Haemorrhagic, No Paresis |
| 1.19 | Other haemorrhagic stroke |
| 1.21 | Stroke, Ischaemic, Left Body Involvement (Right Brain) |
| 1.22 | Stroke, Ischaemic, Right Body Involvement (Left Brain) |
| 1.23 | Stroke, Ischaemic, Bilateral Involvement |
| 1.24 | Stroke, Ischaemic, No Paresis |
| 1.29 | Other ischaemic stroke |
| 2.11 | Brain Dysfunction, Non traumatic, subarachnoid haemorrhage |
| 2.12 | Brain Dysfunction, Non traumatic, Anoxic brain damage |
| 2.13 | Other non-traumatic brain dysfunction |
| 2.21 | Brain Dysfunction, Traumatic, open injury |
| 2.22 | Brain Dysfunction, Traumatic, closed injury |
| 3.1 | Neurological conditions, Multiple sclerosis |
| 3.2 | Neurological conditions, Parkinsonism |
| 3.3 | Neurological conditions, Polyneuropathy |
| 3.4 | Neurological conditions, Guillain-Barre |
| 3.5 | Neurological conditions, Cerebral palsy |
| 3.8 | Neurological conditions, Neuromuscular disorders |
| 3.9 | Other neurological conditions |
| 4.111 | Spinal Cord Dysfunction, Non-traumatic, Paraplegia, incomplete |
| 4.112 | Spinal Cord Dysfunction, Non-traumatic, Paraplegia, complete |
| 4.1211 | Spinal Cord Dysfunction, Non-traumatic, Quadriplegia incomplete C1-4 |
| 4.1212 | Spinal Cord Dysfunction, Non-traumatic, Quadriplegia incomplete C5-8 |
| 4.1221 | Spinal Cord Dysfunction, Non-traumatic, Quadriplegia complete C1-4 |
| 4.1222 | Spinal Cord Dysfunction, Non-traumatic, Quadriplegia complete C5-8 |
| 4.13 | Other non-traumatic spinal cord dysfunction |
| 4.211 | Spinal Cord Dysfunction, Traumatic, Paraplegia, incomplete |
| 4.212 | Spinal Cord Dysfunction, Traumatic, Paraplegia, complete |
| 4.2211 | Spinal Cord Dysfunction, Traumatic, Quadriplegia incomplete C1-4 |

| | |
|--------|---|
| 4.2212 | Spinal Cord Dysfunction, Traumatic, Quadriplegia incomplete C5-8 |
| 4.2221 | Spinal Cord Dysfunction, Traumatic, Quadriplegia complete C1-4 |
| 4.2222 | Spinal Cord Dysfunction, Traumatic, Quadriplegia complete C5-8 |
| 4.23 | Other traumatic spinal cord dysfunction |
| 5.11 | Amputation of Limb, Non traumatic, Single upper amputation above the elbow |
| 5.12 | Amputation of Limb, Non traumatic, Single upper amputation below the elbow |
| 5.13 | Amputation of Limb, Non traumatic, Single lower amputation above the knee |
| 5.14 | Amputation of Limb, Non traumatic, Single lower amputation below the knee |
| 5.15 | Amputation of Limb, Non traumatic, Double lower amputation above the knee |
| 5.16 | Amputation of Limb, Non traumatic, Double lower amputation above/below the knee |
| 5.17 | Amputation of Limb, Non traumatic, Double lower amputation below the knee |
| 5.18 | Amputation of Limb, Non traumatic, Partial foot amputation (includes single/double) |
| 5.19 | Other non-traumatic amputation |
| 5.21 | Amputation of Limb, Traumatic, Single upper I amputation above the elbow |
| 5.22 | Amputation of Limb, Traumatic, Single upper amputation below the elbow |
| 5.23 | Amputation of Limb, Traumatic, Single lower amputation above the knee |
| 5.24 | Amputation of Limb, Traumatic, Single lower amputation below the knee |
| 5.25 | Amputation of Limb, Traumatic, Double lower amputation above the knee |
| 5.26 | Amputation of Limb, Traumatic, Double lower amputation above/below the knee |
| 5.27 | Amputation of Limb, Traumatic, Double lower amputation below the knee |
| 5.28 | Amputation of Limb, Traumatic, Partial foot amputation (includes single/double) |
| 5.29 | Other traumatic amputation |
| 6.1 | Arthritis, Rheumatoid arthritis |
| 6.2 | Arthritis, Osteoarthritis |
| 6.9 | Other arthritis |
| 7.1 | Pain, Neck pain |
| 7.2 | Pain, Back pain |
| 7.3 | Pain, Extremity pain |
| 7.4 | Pain, Headache (includes migraine) |
| 7.5 | Pain, Multi-site pain |
| 7.9 | Other pain |
| 8.111 | Orthopaedic Conditions, Fracture of hip, unilateral (includes #NOF) |
| 8.112 | Orthopaedic Conditions, Fracture of hip, bilateral (includes #NOF) |
| 8.12 | Orthopaedic Conditions, Fracture of shaft of femur (excludes femur involving knee joint) |
| 8.13 | Orthopaedic Conditions, Fracture of pelvis |
| 8.141 | Orthopaedic Conditions, Fracture of knee (includes patella, femur involving knee joint, tibia or fibula involving knee joint) |
| 8.142 | Orthopaedic Conditions, Fracture of leg, ankle, foot |
| 8.15 | Orthopaedic Conditions, Fracture of upper limb (includes hand, fingers, wrist, forearm, arm, shoulder) |
| 8.16 | Orthopaedic Conditions, Fracture of spine (excludes where the major disorder is pain) |
| 8.17 | Orthopaedic Conditions, Fracture of multiple sites |
| 8.19 | Other orthopaedic fracture |
| 8.211 | Post orthopaedic surgery, Unilateral hip replacement |
| 8.212 | Post orthopaedic surgery, Bilateral hip replacement |
| 8.221 | Post orthopaedic surgery, Unilateral knee replacement |
| 8.222 | Post orthopaedic surgery, Bilateral knee replacement |
| 8.231 | Post orthopaedic surgery, Knee and hip replacement same side |
| 8.232 | Post orthopaedic surgery, Knee and hip replacement different sides |
| 8.24 | Post orthopaedic surgery, Shoulder replacement or repair |
| 8.25 | Post orthopaedic surgery, Post spinal surgery |
| 8.26 | Other orthopaedic surgery |
| 8.3 | Soft tissue injury |
| 9.1 | Cardiac, Following recent onset of new cardiac impairment |

| | |
|-------------|---|
| 9.2 | Cardiac, Chronic cardiac insufficiency |
| 9.3 | Cardiac, Heart or heart/lung transplant |
| 10.1 | Pulmonary, Chronic obstructive pulmonary disease |
| 10.2 | Pulmonary, Lung transplant |
| 10.9 | Other pulmonary |
| 11 | Burns |
| 12.1 | Congenital Deformities, Spina bifida |
| 12.9 | Other congenital |
| 13.1 | Other Disabling Impairments, Lymphoedema |
| 13.3 | Other Disabling Impairments, Conversion disorder |
| 13.9 | Other disabling impairments. This classification should rarely be used. |
| 14.1 | Major Multiple Trauma, Brain + spinal cord injury |
| 14.2 | Major Multiple Trauma, Brain + multiple fracture/amputation |
| 14.3 | Major Multiple Trauma, Spinal cord + multiple fracture/ amputation |
| 14.9 | Other multiple trauma |
| 15.1 | Developmental disabilities |
| 16.1 | Reconditioning following surgery |
| 16.2 | Reconditioning following medical illness |
| 16.3 | Cancer rehabilitation |
| 18.1 | COVID-19 with pulmonary issues |
| 18.2 | COVID-19 with deconditioning |
| 18.9 | COVID-19 all other |

Data Element Name: Date of injury/impairment onset**Data Element ID:** E26**Short Name:** OnsetDate

Definition: This is the date of the injury or impairment that has directly driven the need for the current episode of rehabilitation. For example, the date the patient fractured their hip, or the date the patient had a stroke, or the date the patient had a limb amputated.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 21 (U) | Episode | Mandatory |

Business Rules: If the exact date is unknown, leave blank and collect E27
If the exact date is known, use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E27

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Data Element Name: Time since onset or acute exacerbation of chronic condition**Data Element ID:** E27**Short Name:** OnsetTime

Definition: The time that has elapsed since the onset of the patient's condition that is the reason for this episode of rehabilitation care.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 22 (V) | Episode | Conditional |

Business Rules: Only collect if E26 is unknown. If E26 is known, leave blank.

Related data items: E26

Key Dates: **Effective:** 01/07/2007 **Revision:** N/A

Codeset values:

| | |
|---|--------------------------------|
| 1 | Less than one month ago |
| 2 | 1 month to less than 3 months |
| 3 | 3 months to less than 6 months |
| 4 | 6 months to less than a year |
| 5 | 1 year to less than 2 years |
| 6 | 2 years to less than 5 years |
| 7 | 5 or more years |
| 9 | Unknown |

Data Element Name: Date of relevant inpatient episode**Data Element ID:** E28**Short Name:** InpatientEpisodeDate

Definition: The date of discharge from an acute inpatient admission or an inpatient rehabilitation episode relevant to the current episode of ambulatory rehabilitation.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 23 (W) | Episode | Mandatory |

Business Rules: If E28 is within three months prior to E10 (episode begin date) record date, use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).
If E28 is more than three months prior to E10 (episode begin date) record 07/07/7777
If E28 does not exist (there was no prior inpatient admission) record 08/08/8888

Related data items: E10

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Data Element Name: Referral date**Data Element ID:** E1**Short Name:** Referral

Definition: The date that the rehabilitation team received a referral for the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 24 (X) | Episode | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: N/A

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Data Element Name: Mode of episode start**Data Element ID:** E29D**Short Name:** StartMode**Definition:** This item records the referral source of the patient for the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 25 (Y) | Episode | Mandatory |

Business Rules: N/A**Related data items:** N/A**Key Dates:** **Effective:** 01/07/2002 **Revision:** 2012-07-01**Codeset values:**

- | | |
|---|---|
| 1 | Referred by GP |
| 2 | Referred by therapist |
| 3 | Referred directly from specialist rooms |
| 4 | Referred from ED |
| 5 | Referred from acute specialist unit |
| 6 | Referred from acute inpatient care same hospital |
| 7 | Referred from acute inpatient care different hospital |
| 8 | Referred from sub-acute care (SAC) same service |
| 9 | Referred from sub-acute care (SAC) different service |

Data Element Name: Is this the first direct care rehabilitation episode for this impairment/exacerbation of a chronic condition?

Data Element ID: E24

Short Name: FirstAdm

Definition: This item relates to the patient's impairment and setting, not the particular facility.

"Direct care" is when the patient is under the direct care of the rehabilitation physician or team, i.e. they hold medical governance over the patient. An episode of direct care can be provided in the inpatient rehabilitation setting or ambulatory rehabilitation setting (e.g. outpatient and/ or community).

The first direct care rehabilitation episode for this impairment considers only those episodes occurring in this setting regardless of facility i.e. it aims to identify those patients that have repeated rehabilitation admissions/discharges within the one setting as subsequent episodes are typically quite different to primary episodes

Subsequent direct rehabilitation episodes of care are more common in certain impairments such as brain injury, spinal cord injury and/or amputee, where the patient often has multiple rehabilitation episodes across a variety of settings.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 1 | 26 (Z) | Episode | Mandatory |

Business Rules: N/A

Related data items: N/A

Key Dates: **Effective:** 01/09/2003 **Revision:** 2012-07-01

Codeset values:

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Need for interpreter service?**Data Element ID:** D13**Short Name:** Interp

Definition: The identification by the patient (or family/carer) of the need for an interpreter service. An interpreter service can be paid or unpaid and includes the use of family members to assist the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 27 (AA) | Demographic | Mandatory |

Business Rules: N/A

Related data items: N/A

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Codeset values:

- | | |
|---|-----------------------------|
| 1 | Yes - Interpreter needed |
| 2 | No - Interpreter not needed |

Data Element Name: Type of accommodation prior to this impairment (NZ)**Data Element ID:** E11B**Short Name:** AccomPrior

Definition: The type of accommodation the patient lived in prior to this impairment.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 28 (AB) | Episode | Mandatory |

Business Rules: If E11= 1, private residence, then E12-E22 must be completed.

Related data items: N/A

Key Dates: **Effective:** 01/07/2012 **Revision:** 2017-07-01

Codeset values:

- | | |
|---|---|
| 1 | Private residence (including unit in retirement village) |
| 2 | Rest home level care / Hospital level care (requires 24hr nursing care) |
| 3 | Supported living |
| 8 | Other |

Data Element Name: Carer status prior to this impairment**Data Element ID:** E12**Short Name:** CarerPrior

Definition: The level of carer support the patient received prior to their impairment or exacerbation of impairment. This includes both paid and/or unpaid carer support received. Paid carer support including both government funded and private health funded carers. Unpaid carer support including care provided by a relative, friend and/or partner of the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 29 (AC) | Episode | Conditional |

Business Rules: Only complete if E11=1 "Private residence".
Leave blank if E11>1 (i.e. not 'Private residence').

Related data items: E11

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

- | | |
|---|-----------------------------------|
| 1 | NO CARER and DOES NOT need one |
| 2 | NO CARER and NEEDS one |
| 3 | CARER NOT living in |
| 4 | CARER living in, NOT co-dependent |
| 5 | CARER living in, co-dependent |

Data Element Name: Employment status prior to this impairment**Data Element ID:** E23**Short Name:** EmpStatPrior

Definition: This item records the patient's employment status before their impairment or exacerbation of impairment.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 30 (AD) | Episode | Mandatory |

Business Rules: If E23=1 and E114=1 or 2, then E71 must also be collected.

Related data items: E71

Key Dates: **Effective:** 01/07/2002 **Revision:** 2012-07-01

Codeset values:

- | | |
|---|------------------------|
| 1 | Employed |
| 2 | Unemployed |
| 3 | Student |
| 4 | Not in labour force |
| 5 | Retired for age |
| 6 | Retired for disability |

Data Element Name: Type of accommodation during ambulatory episode (NZ)

Data Element ID: E41B

Short Name: AccomDuring

Definition: Record the type of accommodation in which the patient resides during this episode of ambulatory rehabilitation.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 1 | 31 (AE) | Episode | Mandatory |

Business Rules: Only code 1 if the patient is residing in at the same address as for item E11. For private residence, but different address to usual accommodation, specify reason for change using either code 2,3 or 4

Related data items: E11, E42

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

- | | |
|---|---|
| 1 | Pre impairment accommodation |
| 2 | Interim accommodation due to geographical (access) issue (may be private residence, rest home level care/hospital level care or supported living) |
| 3 | Interim accommodation due to increased support required (may be private residence, rest home level care/hospital level care or supported living) |
| 8 | Other |

Data Element Name: Carer status during ambulatory episode**Data Element ID:** E42**Short Name:** CarerDuring

Definition: The level of carer support the patient receives during their ambulatory episode of care, including both paid and/or unpaid carers. Paid carer support including both government funded and private health funded carers. Unpaid carer support including care provided by a relative, friend and/or partner of the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 32 (AF) | Episode | Mandatory |

Business Rules: N/A**Related data items:** E41

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

- | | |
|---|-----------------------------------|
| 1 | NO CARER and DOES NOT need one |
| 2 | NO CARER and needs one |
| 3 | CARER not living in |
| 4 | CARER living in, NOT co-dependent |
| 5 | CARER living in, co-dependent |

Data Element Name: Is there an existing comorbidity interfering with this episode

Data Element ID: E103

Short Name: ComorbFlag

Definition: A comorbidity is defined as any other significant existing illness/impairment, not part of the principal presenting condition, which interfered with the process of rehabilitation.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 1 | 33 (AG) | Episode | Mandatory |

Business Rules: If 'E103=1 (Yes), then specify up to four comorbidities in E104-E107

Related data items: E104-E107

Key Dates: **Effective:** 01/07/2007 **Revision:** N/A

Codeset values:

- 1 Yes
- 2 No

Element Group Name: Comorbidities interfering with rehabilitation episode**Data Element ID Range:** E104-E107**Definition:** This item identifies which comorbidities interfered with the rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 2 | 34-37 (AH - AK) | Episode | Conditional |

Business Rules: If E103 = 1 (Yes) then at least one comorbidity and up to four must be entered - leave E105-E107 blank if not required.
If E103 = 2 (No) then leave E104- E107 blank.

Related data items: E103**Key Dates:** **Effective:** 2003-09-01 **Revision:** 2012-07-01**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|------|---|-------------------|
| E104 | Comorbidities Interfering with Rehabilitation Episode 1 | 34 (AH) |
| E105 | Comorbidities Interfering with Rehabilitation Episode 2 | 35 (AI) |
| E106 | Comorbidities Interfering with Rehabilitation Episode 3 | 36 (AJ) |
| E107 | Comorbidities Interfering with Rehabilitation Episode 4 | 37 (AK) |

Codeset values:

| | |
|----|------------------------------|
| 1 | Cardiac disease |
| 2 | Respiratory disease |
| 3 | Drug and alcohol abuse |
| 4 | Dementia |
| 5 | Delirium, pre-existing |
| 6 | Mental health problem |
| 7 | Renal failure with dialysis |
| 8 | Renal failure NO dialysis |
| 9 | Epilepsy |
| 10 | Parkinson's disease |
| 11 | Stroke |
| 12 | Spinal cord injury/disease |
| 13 | Brain injury |
| 14 | Multiple sclerosis |
| 15 | Hearing impairment |
| 16 | Diabetes mellitus |
| 17 | Morbid obesity |
| 18 | Inflammatory arthritis |
| 19 | Osteoarthritis |
| 20 | Osteoporosis |
| 21 | Chronic pain |
| 22 | Cancer |
| 23 | Pressure ulcer, pre-existing |
| 24 | Visual impairment |
| 25 | Acute COVID (1-4 weeks) |
| 26 | Post COVID (5-12 weeks) |
| 27 | Long COVID (13+ weeks) |
| 99 | Other |

Data Element Name: Cognitive impairment impacting on rehabilitation participation

Data Element ID: ET03

Short Name: Flag_CogImpairmentImpactRehab

Definition: This item identifies whether the patient had a cognitive impairment, not part of the principal presenting condition, which impacted on the process of rehabilitation.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 1 | 38 (AL) | Episode | Mandatory |

Business Rules: If ET03 = 1 (Yes) enable the recording of the facility's outcome measure of choice in Z1 (Comments) - record tool name, start and end scores

Related data items: Z1

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Codeset values:

- 1 Yes
- 2 No

Data Element Name: Date multi-disciplinary team rehabilitation plan established**Data Element ID:** E25**Short Name:** TeamPlanDate

Definition: A multidisciplinary team rehabilitation plan comprises a series of documented and agreed initiatives/treatments (specifying program goals and time frames), which has been established through multidisciplinary consultation and consultation with the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 39 (AM) | Episode | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: N/A

Key Dates: **Effective:** 01/07/2007 **Revision:** N/A

Data Element Name: Date episode start Lawton's Assessed**Data Element ID:** E62**Short Name:** StartLawtonsDate

Definition: The date on which the Australian modified Lawton's assessment was scored at episode start (admission).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 40 (AN) | Episode | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E63-E70

Key Dates: **Effective:** 01/12/2008 **Revision:** N/A

Element Group Name: Lawton's admission scores (items 1-6)**Data Element ID Range:** E63-E68**Definition:** The Australian Modified Lawton's score on admission to ambulatory rehabilitation (items 1-6 of 8).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 41-46 (AO - AT) | Episode | Mandatory |

Business Rules: N/A**Related data items:** E62, E69, E70**Key Dates:** **Effective:** 2008-12-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--|--------------------------|
| E63 | Score episode start Lawton's for telephone | 41 (AO) |
| E64 | Score episode start Lawton's for shopping | 42 (AP) |
| E65 | Score episode start Lawton's for food preparation | 43 (AQ) |
| E66 | Score episode start Lawton's for housekeeping | 44 (AR) |
| E67 | Score episode start Lawton's for laundry excluding ironing | 45 (AS) |
| E68 | Score episode start Lawton's for mode of transportation | 47 (AU) |

Codeset values:

| | |
|----------|--|
| 1 | Not able to perform activity of daily living (ADL) |
| 2 | Requires moderate assistance to perform ADL |
| 3 | Requires some assistance to perform ADL |
| 4 | Capable of independently performing ADL |

Element Group Name: Lawton's admission scores (items 7-8)**Data Element ID Range:** E69-E70**Definition:** The Australian Modified Lawton's score on admission to ambulatory rehabilitation (items 7-8 of 8).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 47-48 (AU - AV) | Episode | Mandatory |

Business Rules: N/A**Related data items:** E62-E68**Key Dates:** **Effective:** 2008-12-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|---|--------------------------|
| E69 | Score episode start Lawton's for responsibility for own medications | 47 (AU) |
| E70 | Score episode start Lawton's for ability to handle finances | 48 (AV) |

Codeset values:

- | | |
|----------|--|
| 1 | Not able to perform activity of daily living (ADL) |
| 2 | Requires some assistance to perform ADL |
| 3 | Capable of independently performing ADL |

Data Element Name: Date episode end Lawton's Assessed**Data Element ID:** E91**Short Name:** EndLawtonsDate

Definition: The date on which the Australian Modified Lawton's assessment was scored at episode end (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 49 (AW) | Episode | Mandatory |

Business Rules: Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E92-E99

Key Dates: **Effective:** 01/12/2008 **Revision:** N/A

Element Group Name: Lawton's discharge scores (items 1-6)**Data Element ID Range:** E92-E97**Definition:** The Australian Modified Lawton's score at end of ambulatory rehabilitation (items 1-6 of 8).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 50-55 (AX - BC) | Episode | Mandatory |

Business Rules: N/A**Related data items:** E91, E98, E99**Key Dates:** **Effective:** 2008-12-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--|--------------------------|
| E92 | Score episode end Lawton's for telephone | 50 (AX) |
| E93 | Score episode end Lawton's for shopping | 51 (AY) |
| E94 | Score episode end Lawton's for food preparation | 52 (AZ) |
| E95 | Score episode end Lawton's for housekeeping | 53 (BA) |
| E96 | Score episode end Lawton's for laundry excluding ironing | 54 (BB) |
| E97 | Score episode end Lawton's for mode of transportation | 55 (BC) |

Codeset values:

- | | |
|----------|--|
| 1 | Not able to perform activity of daily living (ADL) |
| 2 | Requires moderate assistance to perform ADL |
| 3 | Requires some assistance to perform ADL |
| 4 | Capable of independently performing ADL |

Element Group Name: Lawton's discharge scores (items 7-8)**Data Element ID Range:** E98-E99**Definition:** The Australian Modified Lawton's score at end of ambulatory rehabilitation (items 7-8 of 8).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 56-57 (BD - BE) | Episode | Mandatory |

Business Rules: N/A**Related data items:** E91-E97**Key Dates:** **Effective:** 2008-12-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|---|--------------------------|
| E98 | Score episode end Lawton's for responsibility for own medications | 56 (BD) |
| E99 | Score episode end Lawton's for ability to handle finances | 57 (BE) |

Codeset values:

- | | |
|----------|--|
| 1 | Not able to perform activity of daily living (ADL) |
| 2 | Requires some assistance to perform ADL |
| 3 | Capable of independently performing ADL |

Data Element Name: Mode of episode end**Data Element ID:** E114D**Short Name:** EndMode

Definition: This item records data about where the patient was discharged to at the end of their ambulatory rehabilitation episode. There are two broad categories reflecting where the patient can go:

1. Remain in the community
2. Return to the hospital system

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 58 (BF) | Episode | Mandatory |

Business Rules: If E114=1 or 2, complete E116 — all RELEVANT outcome measure END scores are mandatory.
If E114 > 2, leave E116 blank — all RELEVANT outcome measure END scores are optional.

Related data items: E116;EU05-08;A17-18,21-22;ED18-34;EM02,16-28,38-46,56-64;EG22-27

Key Dates: **Effective:** 01/07/2002 **Revision:** 2017-07-01

Codeset values:

- | | |
|---|---|
| 1 | Discharged to final destination |
| 2 | Discharged to interim destination |
| 3 | Death |
| 4 | Admitted to hospital as sub acute/non acute inpatient |
| 5 | Admitted to hospital as an acute inpatient |
| 8 | Discharged at own risk |
| 9 | Other and unspecified |

Data Element Name: Final destination (NZ)**Data Element ID:** E116B**Short Name:** AccomFinal

Definition: Final destination may be defined as the accommodation that a patient is discharged to that is the most appropriate long-term accommodation for the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 59 (BG) | Episode | Conditional |

Business Rules: If E114=1 or 2, then E116 must be completed.
If E116=1 (Private residence) then E117 must be completed.

Related data items: E115, E117

Key Dates: **Effective:** 01/09/2003 **Revision:** 2017-07-01**Codeset values:**

- | | |
|---|---|
| 1 | Private residence (including unit in retirement village) |
| 2 | Rest home level care / Hospital level care (requires 24hrs nursing) |
| 3 | Supported living |
| 8 | Other |
| 9 | Unknown |

Data Element Name: Carer status post discharge**Data Element ID:** E117**Short Name:** DisCarer**Definition:** The level of carer support the patient receives post discharge from their ambulatory rehabilitation episode of care, including both paid and/or unpaid carers. Paid carer support includes both government funded and private health funded carers. Unpaid carer support includes care provided by a relative, friend and/or partner of the patient.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 60 (BH) | Episode | Conditional |

Business Rules: Complete only if E116=1 (Private residence), otherwise leave blank.**Related data items:** E116**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

- | | |
|---|-----------------------------------|
| 1 | NO CARER and DOES NOT need one |
| 2 | NO CARER and NEEDS one |
| 3 | CARER NOT living in |
| 4 | CARER living in, NOT co-dependent |
| 5 | CARER living in, co-dependent |

Data Element Name: Employment status after, or anticipated employment status after discharge

Data Element ID: E71

Short Name: EmpStatPost

Definition: The patient's employment status, or anticipated employment status, after discharge.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 61 (BI) | Episode | Conditional |

Business Rules: Only complete if E23=1 (Employed) and E114 = (1 or 2), else leave blank

Related data items: E23, E114

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

- | | |
|---|--|
| 1 | Same or similar job, same or similar hours |
| 2 | Same or similar job, reduced hours |
| 3 | Different job by choice |
| 4 | Different job due to reduced function |
| 5 | Not able to work |
| 6 | Chosen to retire |
| 7 | Too early to determine |

Data Element Name: Return to pre-impairment leisure and recreational activities

Data Element ID: E144

Short Name: ReturnToActivities

Definition: The patient's level of return to participation in pre-impairment leisure and recreational activities.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 1 | 62 (BJ) | Episode | Mandatory |

Business Rules: Only complete if E114 = (1 or 2), else leave blank

Related data items: E114

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Codeset values:

- | | |
|---|--|
| 1 | Normal participation (ie pre-impairment level) |
| 2 | Mild difficulty in these activities but maintains normal participation |
| 3 | Mildly limited participation |
| 4 | Moderately limited participation |
| 5 | No or rare participation |

Data Element Name: Total number of days seen

Data Element ID: E118

Short Name: DaysSeen

Definition: The total number of days that service(s) were provided to the patient during their episode of care.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 3 | 63 (BK) | Episode | Mandatory |

Business Rules: N/A

Related data items: E119, E120-E129

Key Dates: **Effective:** 01/07/2002 **Revision:** N/A

Data Element Name: Total number of occasions of service**Data Element ID:** E119**Short Name:** OOS

Definition: The total number of occasions of service to the patient. An occasion of service may be defined as "each time therapy is provided to the patient; one therapy provider may provide an occasion of service to one or many patients at the same time (individual vs. group therapy). A patient may receive a number of occasions of service on the same day (e.g. physiotherapy in the morning and speech pathology in the afternoon).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 3 | 64 (BL) | Episode | Mandatory |

Business Rules: N/A

Related data items: E118, E120-E129

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Element Group Name: Disciplines involved in therapy**Data Element ID Range:** E120-E129**Definition:** The type(s) of health professional or other care provider who provided treatment to the patient during their ambulatory rehabilitation episode of care.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 2 | 65-74 (BM - BV) | Episode | Mandatory |

Business Rules: E120 and E121 must be completed, E122-E129 may be left blank if not required
If E120-E129 = 98 (Other) please specify in Z1 (comments)**Related data items:** E118, E119, Z1**Key Dates:** **Effective:** 2012-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|------|--|-------------------|
| E120 | Staff type providing therapy during episode of care 1 | 65 (BM) |
| E121 | Staff type providing therapy during episode of care 2 | 66 (BN) |
| E122 | Staff type providing therapy during episode of care 3 | 67 (BO) |
| E123 | Staff type providing therapy during episode of care 4 | 68 (BP) |
| E124 | Staff type providing therapy during episode of care 5 | 69 (BQ) |
| E125 | Staff type providing therapy during episode of care 6 | 70 (BR) |
| E126 | Staff type providing therapy during episode of care 7 | 71 (BS) |
| E127 | Staff type providing therapy during episode of care 8 | 72 (BT) |
| E128 | Staff type providing therapy during episode of care 9 | 73 (BU) |
| E129 | Staff type providing therapy during episode of care 10 | 74 (BV) |

Codeset values:

| | |
|----|--|
| 1 | Aboriginal/Maori Liaison Worker |
| 2 | Audiologist |
| 3 | Case Manager |
| 4 | Clinical Nurse Consultant |
| 5 | Clinical Nurse Specialist |
| 6 | Community support worker |
| 7 | Dietitian |
| 8 | Enrolled nurse |
| 9 | Exercise physiologist / Remedial Gymnast |
| 10 | Educational tutor |
| 11 | Hydrotherapist |
| 12 | Interpreter |
| 13 | Medical Officer |
| 14 | Nurse Practitioner |
| 15 | Neuro-psychologist |
| 16 | Occupational Therapist |
| 17 | Physiotherapist |
| 18 | Podiatrist |
| 19 | Psychologist |
| 20 | Registered Nurse |
| 21 | Recreational Therapist |
| 22 | Speech Pathologist/Therapist |
| 23 | Social Worker |
| 24 | Therapy Aide |
| 25 | Vocational Co-ordinator |
| 98 | Other |

Data Element Name: Was rehabilitation aimed at upper limb function

Data Element ID: EA01

Short Name: AimedAtUpperLimb

Definition: Indicates if the ambulatory stroke rehabilitation was aimed at upper limb function

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 75 (BW) | Episode | Conditional |

Business Rules: Only collect EA1 if E40 = (1.11, 1.12, 1.13, 1.14,1.19, 1.21, 1.22, 1.23,1.24,1.29), else leave blank.
Complete EU01-EU04 if EA01=1 (Yes)
Complete EU05-EU08 if EA01=1 (Yes) and E114=1 or 2

Related data items: E40, EU01-EU08, E114

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Codeset values:

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Was rehabilitation aimed at gait retraining**Data Element ID:** EA02**Short Name:** AimedAtGaitRetrain**Definition:** Indicates if ambulatory stroke rehabilitation was aimed at gait training.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 76 (BX) | Episode | Conditional |

Business Rules: Only collect EA2 if E40 = (1.11, 1.12, 1.13, 1.14,1.19, 1.21, 1.22, 1.23,1.24,1.29), else leave blank.
 Complete A19-A20 if EA02=1 (Yes)
 Complete A21-A22 if EA02=1 (Yes) and E114=1 or 2

Related data items: E40, A19-A22, E114**Key Dates:** **Effective:** 01/07/2017 **Revision:** N/A**Codeset values:**

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Was rehabilitation aimed at aphasia**Data Element ID:** EA03**Short Name:** AimedAtAphasia

Definition: Indicates whether ambulatory stroke rehabilitation was aimed at aphasia.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 77 (BY) | Episode | Conditional |

Business Rules: Only collect EA3 if E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29), else leave blank. If EA03 = 1 (Yes) enable the recording of the facility's outcome measure of choice in Z1 (Comments) - record tool name, start and end scores

Related data items: E40, Z1

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A**Codeset values:**

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Upper Limb Motor Assessment Scale (ULMAS) start date**Data Element ID:** EU01**Short Name:** ULMASStartDate

Definition: The date the Upper Limb Motor Assessment Scale (ULMAS) was scored at episode start (admission).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 78 (BZ) | Episode | Conditional |

Business Rules: Only collect EU01 if E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29) and EA01 = 1 (Yes), else leave blank.
Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E40, EA01

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: Upper Limb Motor Assessment Scale (ULMAS) start scores**Data Element ID Range:** EU02-EU04**Definition:** The Upper Limb Motor Assessment Scale (ULMAS) scores for each of the three assessment items, at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 79-81 (CA - CC) | Episode | Conditional |

Business Rules: Only collect EU02-EU04 if E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29) and EA01 = 1 (Yes), else leave blank.**Related data items:** E40, EA01**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--------------------------------|--------------------------|
| EU02 | ULMAS Start Upper Arm Function | 79 (CA) |
| EU03 | ULMAS Start Hand Movements | 80 (CB) |
| EU04 | ULMAS Start Hand Activities | 81 (CC) |

Codeset values:

| | |
|----------|--------------------|
| 0 | 0 No function |
| 1 | 1 Minimal function |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 | 5 |
| 6 | 6 Maximal function |

Data Element Name: Upper Limb Motor Assessment Scale (ULMAS) end date**Data Element ID:** EU05**Short Name:** ULMASendDate

Definition: The date that the Upper Limb Motor Assessment Scale (ULMAS) was scored at episode end (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 82 (CD) | Episode | Conditional |

Business Rules: Only collect EU06-EU08 if E40 = (1.11, 1.12, 1.13, 1.14,1.19, 1.21, 1.22, 1.23,1.24,1.29) and E114 = (1 or 2) and EA01 = 1 (Yes), else leave blank.
Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E40, E114, EA01

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: Upper Limb Motor Assessment Scale (ULMAS) end scores**Data Element ID Range:** EU06-EU08**Definition:** The Upper Limb Motor Assessment Scale (ULMAS) scores for each of the three assessment items, at the end of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 83-85 (CE - CG) | Episode | Conditional |

Business Rules: Only collect EU06-EU08 if E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29) and E114 = (1 or 2) and EA01 = 1 (Yes), else leave blank.**Related data items:** E40, E114, EA01**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|------------------------------|--------------------------|
| EU06 | ULMAS End Upper Arm Function | 83 (CE) |
| EU07 | ULMAS End Hand Movements | 84 (CF) |
| EU08 | ULMAS End Hand Activities | 85 (CG) |

Codeset values:

| | |
|----------|--------------------|
| 0 | 0 No function |
| 1 | 1 Minimal function |
| 2 | 2 |
| 3 | 3 |
| 4 | 4 |
| 5 | 5 |
| 6 | 6 Maximal function |

Data Element Name: 10 metre walk +/- aid test start date**Data Element ID:** A19**Short Name:** MetresWalkedStartDate

Definition: The date that the 10 metre walk +/- aid test was assessed at episode start (admission).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 86 (CH) | Episode | Conditional |

Business Rules: Only collect A19 if E40 = (1.11, 1.12, 1.13, 1.14,1.19, 1.21, 1.22, 1.23,1.24,1.29) and EA02 = 1 (Yes) OR if E40 = (8.111 - 8.19, 8.211 - 8.26, 8.3), else leave blank.

Related data items: E40, EA02

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Data Element Name: Admission 10 metre walk +/- aid test**Data Element ID:** A20**Short Name:** MetresWalkedStart

Definition: The time taken in completed seconds at commencement of the ambulatory rehabilitation program.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 4 | 87 (CI) | Episode | Conditional |

Business Rules: Only collect A20 if E40 = (1.11, 1.12, 1.13, 1.14,1.19, 1.21, 1.22, 1.23,1.24,1.29) and EA02 = 1 (Yes) OR if E40 = (8.111 - 8.19, 8.211 - 8.26, 8.3), else leave blank.

Related data items: E40, EA02

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Data Element Name: 10 metre walk +/- aid test end date**Data Element ID:** A21**Short Name:** MetresWalkedEndDate**Definition:** The date that the 10 metre walk +/- aid test was assessed at episode end (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 88 (CJ) | Episode | Conditional |

Business Rules: Only collect A21 if E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29) and E114 = (1 or 2) and EA02 = 1 (Yes)
OR
If E40 = (8.111 - 8.19, 8.211 - 8.26, 8.3) and E114 = (1 or 2), else leave blank.

Related data items: E40, E114, EA02**Key Dates:** **Effective:** 01/07/2017 **Revision:** N/A

Data Element Name: Discharge 10 metre walk +/- aid test**Data Element ID:** A22**Short Name:** MetresWalkedEnd

Definition: The time taken in completed seconds just before patient is discharged from the ambulatory rehabilitation program.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 4 | 89 (CK) | Episode | Conditional |

Business Rules: Only collect A22 if E40 = (1.11, 1.12, 1.13, 1.14, 1.19, 1.21, 1.22, 1.23, 1.24, 1.29) and E114 = (1 or 2) and EA02 = 1 (Yes)
OR
If E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29 or 8.111 - 8.19, 8.211 - 8.26, 8.3) and E114 = (1 or 2), else leave blank.

Related data items: E40, E114, EA02

Key Dates: **Effective:** 01/07/2012 **Revision:** 2017-07-01

Data Element Name: Level of SCI Start**Data Element ID:** A04**Short Name:** LevelOfSCIStart**Definition:** The level of spinal cord injury (SCI) at the start of the patient's ambulatory episode of care.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 2 | 90 (CL) | Episode | Conditional |

Business Rules: Only collect A04 if E40 = (4.111, 4.112, 4.1211, 4.1212, 4.1221, 4.1222, 4.13, 4.211, 4.212, 4.2211, 4.2212, 4.2221, 4.2222, 4.23, 14.1, 14.3), else leave blank.**Related data items:** E40**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

| | |
|----|-----|
| 1 | C1 |
| 2 | C2 |
| 3 | C3 |
| 4 | C4 |
| 5 | C5 |
| 6 | C6 |
| 7 | C7 |
| 8 | C8 |
| 9 | T1 |
| 10 | T2 |
| 11 | T3 |
| 12 | T4 |
| 13 | T5 |
| 14 | T6 |
| 15 | T7 |
| 16 | T8 |
| 17 | T9 |
| 18 | T10 |
| 19 | T11 |
| 20 | T12 |
| 21 | L1 |
| 22 | L2 |
| 23 | L3 |
| 24 | L4 |
| 25 | L5 |
| 26 | S1 |
| 27 | S2 |
| 28 | S3 |
| 29 | S4 |
| 30 | S5 |

Data Element Name: de Morton Mobility Index (DEMMI) start date**Data Element ID:** ED01**Short Name:** DEMMISStartDate

Definition: The date that the de Morton Mobility Index (DEMMI) was assessed at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 91 (CM) | Episode | Conditional |

Business Rules: Only collect ED01 if E40 = (16.1, 16.2, 16.3), else leave blank.
Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E40

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: de Morton Mobility Index (DEMMI) start scores**Data Element ID Range:** ED02-ED17**Definition:** The patient's de Morton Mobility Index (DEMMI) scores for each of the 15 assessment items at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 92-107 (CN - DC) | Episode | Conditional |

Business Rules: Only collect ED02-ED17 If E40 = (16.1, 16.2, 16.3), else leave blank.**** IMPORTANT NOTE ****

The following items have a different codeset to the other items, as follows:

ED13 (DEMMI Start Gait Aid)

1=nil / 2=frame / 3=stick / 4=other

ED04 (DEMMI Start Lying to Sitting)

ED06 (DEMMI Start Sit To Stand From Chair)

ED12 (DEMMI Start Walking Distance)

ED14 (DEMMI Start Walking Independence)

0=score 0 / 1=score 1 / 2=score 2

Related data items: E40**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|------|---------------------------------------|-------------------|
| ED02 | DEMMI Start Bridge | 92 (CN) |
| ED03 | DEMMI Start Roll Onto Side | 93 (CO) |
| ED04 | DEMMI Start Lying To Sitting** | 94 (CP) |
| ED05 | DEMMI Start Sit Unsupported in Chair | 95 (CQ) |
| ED06 | DEMMI Start Sit To Stand From Chair** | 96 (CR) |
| ED07 | DEMMI Start Sit To Stand No Arms | 97 (CS) |
| ED08 | DEMMI Start Stand Unsupported | 98 (CT) |
| ED09 | DEMMI Start Stand Feet Together | 99 (CU) |
| ED10 | DEMMI Start Stand On Toes | 100 (CV) |
| ED11 | DEMMI Start Tandem Stand | 101 (CW) |
| ED12 | DEMMI Start Walking Distance** | 102 (CX) |
| ED13 | DEMMI Start Gait Aid** | 103 (CY) |
| ED14 | DEMMI Start Walking Independence** | 104 (CZ) |
| ED15 | DEMMI Start Pick Up Pen | 105 (DA) |
| ED16 | DEMMI Start Walks 4 Steps Back | 106 (DB) |
| ED17 | DEMMI Start Jump | 107 (DC) |

Codeset values:

| | |
|---|---------|
| 0 | Score 0 |
| 1 | Score 1 |

Data Element Name: de Morton Mobility Index (DEMMI) end date**Data Element ID:** ED18**Short Name:** DEMMIEndDate

Definition: The date that the de Morton Mobility Index (DEMMI) was assessed at the end of the ambulatory rehabilitation episode (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 108 (DD) | Episode | Conditional |

Business Rules: Only collect ED18 if E40 = (16.1, 16.2, 16.3) and E114 = (1 or 2), else leave blank. Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E40, E114

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: de Morton Mobility Index (DEMMI) end scores

Data Element ID Range: ED19-ED34

Definition: The patient's de Morton Mobility Index (DEMMI) scores for each of the 15 assessment items at the end of the ambulatory rehabilitation episode (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 109-124 (DE - DT) | Episode | Conditional |

Business Rules: Only collect ED19-ED34 If E40 = (16.1, 16.2, 16.3) and E114 = (1 or 2), else leave blank.

**** IMPORTANT NOTE ****

The following items have a different codeset to the other items, as follows:

ED30 (DEMMI End Gait Aid)

1=nil / 2=frame / 3=stick / 4=other

ED21 (DEMMI End Lying to Sitting)

ED23 (DEMMI End Sit To Stand From Chair)

ED29 (DEMMI End Walking Distance)

ED31 (DEMMI End Walking Independence)

0=score 0 / 1=score 1 / 2=score 2

Related data items: E40, E114

Key Dates: **Effective:** 2017-07-01 **Revision:** N/A

Data Items:

| ID | Data Element Name | Tab Pos. / Column |
|------|-------------------------------------|-------------------|
| ED19 | DEMMI End Bridge | 109 (DE) |
| ED20 | DEMMI End Roll Onto Side | 110 (DF) |
| ED21 | DEMMI End Lying To Sitting** | 111 (DG) |
| ED22 | DEMMI End Sit Unsupported in Chair | 112 (DH) |
| ED23 | DEMMI End Sit To Stand From Chair** | 113 (DI) |
| ED24 | DEMMI End Sit To Stand No Arms | 114 (DJ) |
| ED25 | DEMMI End Stand Unsupported | 115 (DK) |
| ED26 | DEMMI End Stand Feet Together | 116 (DL) |
| ED27 | DEMMI End Stand On Toes | 117 (DM) |
| ED28 | DEMMI End Tandem Stand | 118 (DN) |
| ED29 | DEMMI End Walking Distance** | 119 (DO) |
| ED30 | DEMMI End Gait Aid** | 120 (DP) |
| ED31 | DEMMI End Walking Independence** | 121 (DQ) |
| ED32 | DEMMI End Pick Up Pen | 122 (DR) |
| ED33 | DEMMI End Walks 4 Steps Back | 123 (DS) |
| ED34 | DEMMI End Jump | 124 (DT) |

Codeset values:

| | |
|----------|---------|
| 0 | Score 0 |
| 1 | Score 1 |

Data Element Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) start date**Data Element ID:** EM01**Short Name:** MPAI4StartDate

Definition: The date that the Mayo-Portland Adaptability Inventory - 4 (MPAI-4) was assessed at ambulatory episode start (admission).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 125 (DU) | Episode | Conditional |

Business Rules: Only collect EM01 if E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2), else leave blank. Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: E40

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Abilities start scores**Data Element ID Range:** EM03-EM15**Definition:** The patient's Mayo-Portland Adaptability Inventory - 4 (MPAI-4) - Abilities scores at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 126-138 (DV - EH) | Episode | Conditional |

Business Rules: Only collect EM03-EM15 If E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2), else leave blank.**Related data items:** E40**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|---------------------------------------|--------------------------|
| EM03 | MPAI4 A-Start Mobility | 126 (DV) |
| EM04 | MPAI4 A-Start Use Of Hands | 127 (DW) |
| EM05 | MPAI4 A-Start Vision | 128 (DX) |
| EM06 | MPAI4 A-Start Audition | 129 (DY) |
| EM07 | MPAI4 A-Start Dizziness | 130 (DZ) |
| EM08 | MPAI4 A-Start Motor Speech | 131 (EA) |
| EM09 | MPAI4 A-Start Verbal Communication | 132 (EB) |
| EM10 | MPAI4 A-Start Nonverbal Communication | 133 (EC) |
| EM11 | MPAI4 A-Start Attention/Concentration | 134 (ED) |
| EM12 | MPAI4 A-Start Memory | 135 (EE) |
| EM13 | MPAI4 A-Start Fund Of Information | 136 (EF) |
| EM14 | MPAI4 A-Start Novel Problem Solving | 137 (EG) |
| EM15 | MPAI4 A-Start Visuospatial abilities | 138 (EH) |

Codeset values:

| | |
|----------|---|
| 0 | None |
| 1 | Mild problem but does not interfere with activities or function |
| 2 | Mild problem; interferes with activities to some degree |
| 3 | Moderate problem |
| 4 | Severe problem |

Element Group Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Adjustment start scores**Data Element ID Range:** EM29-EM37**Definition:** The patient's Mayo-Portland Adaptability Inventory - 4 (MPAI-4) - Adjustment scores at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 139-147 (EI - EQ) | Episode | Conditional |

Business Rules: Only collect EM29-EM37 if E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2) else leave blank.**Related data items:** E40**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--|--------------------------|
| EM29 | MPAI4 B-Start Anxiety | 139 (EI) |
| EM30 | MPAI4 B-Start Depression | 140 (EJ) |
| EM31 | MPAI4 B-Start Irritability | 141 (EK) |
| EM32 | MPAI4 B-Start Pain Headache | 142 (EL) |
| EM33 | MPAI4 B-Start Fatigue | 143 (EM) |
| EM34 | MPAI4 B-Start Sensitivity to Mild Symptoms | 144 (EN) |
| EM35 | MPAI4 B-Start Inappropriate Social interaction | 145 (EO) |
| EM36 | MPAI4 B-Start Impaired Self-Awareness | 146 (EP) |
| EM37 | MPAI4 B-Start Family | 147 (EQ) |

Codeset values:

| | |
|----------|---|
| 0 | None |
| 1 | Mild problem but does not interfere with activities or function |
| 2 | Mild problem; interferes with activities to some degree |
| 3 | Moderate problem |
| 4 | Severe problem |

Element Group Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Participation start scores

Data Element ID Range: EM47-EM55

Definition: The patient's Mayo-Portland Adaptability Inventory - 4 (MPAI-4) – Participation scores at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|----------|-------|-------------------|----------|-------------|
| | N umeric | 1 | 148-156 (ER - EZ) | Episode | Conditional |

Business Rules: Only collect EM47-EM55 If E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2), else leave blank.

** NOTE: only one employment option (EM53 OR EM54) can be rated by end user as appropriate for the client, therefore:
 If EM53 is entered EM54 should be disabled and left blank
 If EM54 is entered EM53 should be disabled and left blank

Related data items: E40

Key Dates: **Effective:** 2017-07-01 **Revision:** N/A

Data Items:

| ID | Data Element Name | Tab Pos. / Column |
|------|----------------------------------|-------------------|
| EM47 | MPAI4 C-Start Initiation | 148 (ER) |
| EM48 | MPAI4 C-Start Social Contact | 149 (ES) |
| EM49 | MPAI4 C-Start Leisure | 150 (ET) |
| EM50 | MPAI4 C-Start Self Care | 151 (EU) |
| EM51 | MPAI4 C-Start Residence | 152 (EV) |
| EM52 | MPAI4 C-Start Transportation | 153 (EW) |
| EM53 | MPAI4 C-Start Paid Employment** | 154 (EX) |
| EM54 | MPAI4 C-Start Other Employment** | 155 (EY) |
| EM55 | MPAI4 C-Start Finances | 156 (EZ) |

Codeset values:

- 0 None
- 1 Mild problem but does not interfere with activities or function
- 2 Mild problem; interferes with activities to some degree
- 3 Moderate problem
- 4 Severe problem

Data Element Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) end date

Data Element ID: EM02

Short Name: MPAI4EndDate

Definition: The date that the Mayo-Portland Adaptability Inventory - 4 (MPAI-4) was assessed at ambulatory episode end (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|------------|-------|-------------------|----------|-------------|
| | DD/MM/YYYY | 10 | 157 (FA) | Episode | Conditional |

Business Rules: Only collect EM02 if E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2) and E114 = (1 or 2), else leave blank. Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976)

Related data items: E40, E114

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Abilities end scores

Data Element ID Range: EM16-EM28

Definition: The patient's Mayo-Portland Adaptability Inventory - 4 (MPAI-4) - Abilities scores at the end of the ambulatory rehabilitation episode (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 158-170 (FB - FN) | Episode | Conditional |

Business Rules: Only collect EM16-EM28 if E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2) and E114 = (1 or 2), else leave blank.

Related data items: E40, E114

Key Dates: **Effective:** 2017-07-01 **Revision:** N/A

Data Items:

| ID | Data Element Name | Tab Pos. / Column |
|------|-------------------------------------|-------------------|
| EM16 | MPAI4 A-End Mobility | 158 (FB) |
| EM17 | MPAI4 A-End Use Of Hands | 159 (FC) |
| EM18 | MPAI4 A-End Vision | 160 (FD) |
| EM19 | MPAI4 A-End Audition | 161 (FE) |
| EM20 | MPAI4 A-End Dizziness | 162 (FF) |
| EM21 | MPAI4 A-End Motor Speech | 163 (FG) |
| EM22 | MPAI4 A-End Verbal Communication | 164 (FH) |
| EM23 | MPAI4 A-End Nonverbal Communication | 165 (FI) |
| EM24 | MPAI4 A-End Attention/Concentration | 166 (FJ) |
| EM25 | MPAI4 A-End Memory | 167 (FK) |
| EM26 | MPAI4 A-End Fund Of Information | 168 (FL) |
| EM27 | MPAI4 A-End Novel Problem Solving | 169 (FM) |
| EM28 | MPAI4 A-End Visuospatial abilities | 170 (FN) |

Codeset values:

| | |
|---|---|
| 0 | None |
| 1 | Mild problem but does not interfere with activities or function |
| 2 | Mild problem; interferes with activities to some degree |
| 3 | Moderate problem |
| 4 | Severe problem |

Element Group Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Adjustment end scores**Data Element ID Range:** EM38-EM46**Definition:** The patient's Mayo-Portland Adaptability Inventory - 4 (MPAI-4) - Adjustment scores at the end of the ambulatory rehabilitation episode (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 171-179 (FO - FW) | Episode | Conditional |

Business Rules: Only collect EM38-EM46 if E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2) and E114 = (1 or 2), else leave blank.**Related data items:** E40, E114**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--|--------------------------|
| EM38 | MPAI4 B-End Anxiety | 171 (FO) |
| EM39 | MPAI4 B-End Depression | 172 (FP) |
| EM40 | MPAI4 B-End Irritability | 173 (FQ) |
| EM41 | MPAI4 B-End Pain Headache | 174 (FR) |
| EM42 | MPAI4 B-End Fatigue | 175 (FS) |
| EM43 | MPAI4 B-End Sensitivity to Mild Symptoms | 176 (FT) |
| EM44 | MPAI4 B-End Inappropriate Social Interaction | 177 (FU) |
| EM45 | MPAI4 B-End Impaired Self | 178 (FV) |
| EM46 | MPAI4 B-End Family | 179 (FW) |

Codeset values:

| | |
|----------|---|
| 0 | None |
| 1 | Mild problem but does not interfere with activities or function |
| 2 | Mild problem; interferes with activities to some degree |
| 3 | Moderate problem |
| 4 | Severe problem |

Element Group Name: Mayo-Portland Adaptability Inventory - 4 (MPAI-4) Participation end scores

Data Element ID Range: EM56-EM64

Definition: The patient's Mayo-Portland Adaptability Inventory - 4 (MPAI-4) - Participation scores at the end of the ambulatory rehabilitation episode (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 180-188 (FX - GF) | Episode | Conditional |

Business Rules: Only collect EM56-EM64 if E40 = (2.11, 2.12, 2.13, 2.21, 2.22, 14.1, 14.2) and E114 = (1 or 2), else leave blank.

****NOTE:** only one employment option (EM62 OR EM63) can be rated by end user as appropriate for the client, therefore:
 If EM62 is entered EM63 should be disabled and left blank
 If EM63 is entered EM62 should be disabled and left blank

Related data items: E40, E114

Key Dates: **Effective:** 2017-07-01 **Revision:** N/A

Data Items:

| ID | Data Element Name | Tab Pos. / Column |
|------|--------------------------------|-------------------|
| EM56 | MPAI4 C-End Initiation | 180 (FX) |
| EM57 | MPAI4 C-End Social Contact | 181 (FY) |
| EM58 | MPAI4 C-End Leisure | 182 (FZ) |
| EM59 | MPAI4 C-End Self Care | 183 (GA) |
| EM60 | MPAI4 C-End Residence | 184 (GB) |
| EM61 | MPAI4 C-End Transportation | 185 (GC) |
| EM62 | MPAI4 C-End Paid Employment** | 186 (GD) |
| EM63 | MPAI4 C-End Other Employment** | 187 (GE) |
| EM64 | MPAI4 C-End Finances | 188 (GF) |

Codeset values:

- 0** None
- 1** Mild problem but does not interfere with activities or function
- 2** Mild problem; interferes with activities to some degree
- 3** Moderate problem
- 4** Severe problem

Data Element Name: Amputee care start phase**Data Element ID:** A09**Short Name:** StartPhase**Definition:** The phase of amputee care the patient is in at ambulatory rehabilitation episode start (admission).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 189 (GG) | Episode | Conditional |

Business Rules: Only collect A09 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29), else leave blank.**Related data items:** E40, A10, A11, A12, A13**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

- | | |
|---|----------------|
| 1 | Pre-operative |
| 2 | Delayed wound |
| 3 | Pre-prosthetic |
| 4 | Prosthetic |
| 5 | Follow-up |

Data Element Name: Phase of amputee care during episode - Delayed wound?

Data Element ID: A10

Short Name: PhaseWound

Definition: Identifies whether the amputee patient passed through the phase “delayed wound” during their rehabilitation episode. The phase “delayed wound” is the phase where problems with wound healing occur and additional interventions should be considered including: revision surgery, vascular and infection evaluation, aggressive local wound care and hyperbaric oxygen.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 1 | 190 (GH) | Episode | Conditional |

Business Rules: Only collect A10 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29), else leave blank.

Related data items: E40, A9, A11, A12, A13

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Phase of amputee care during episode - Pre prosthetic?

Data Element ID: A11

Short Name: PhasePreProsthetic

Definition: Identifies whether the amputee patient passed through the phase “pre-prosthetic” during their rehabilitation episode. Pre-prosthetic phase is the phase where a patient is discharged from acute care and enters inpatient rehabilitation program or is treated in an ambulatory setting. Postoperative assessment to review patient’s status, including physical and functional assessment; completion of FIM baseline and other relevant assessments are completed. Rehabilitation goals are determined, rehabilitation treatment plan is established and updated and patient education is provided. Physical and functional interventions are provided and decisions are made on the appropriateness of a prosthesis to improve a patient’s functioning and meet their rehabilitation goals.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 191 (GI) | Episode | Conditional |

Business Rules: Only collect A11 If E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29), else leave blank.

Related data items: E40, A9, A10, A12, A13

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

- 1 Yes
- 2 No

Data Element Name: Phase of amputee care during episode - Prosthetic?**Data Element ID:** A12**Short Name:** PhaseProsthetic

Definition: Identifies whether the amputee patient passed through the phase “prosthetic” during their rehabilitation episode. Prosthetic phase is the phase where functional goals of prosthetic fitting are determined. A prosthesis is prescribed based on current or potential level of ambulation. Patient receives interim or permanent prosthetic fitting and training, and early rehabilitation management. Prosthetic gait training and patient education on functional use of prosthesis for transfers, balance and safety is provided. Physical and functional interventions are provided and decisions are made on the appropriateness of a prosthesis to improve a patient’s functioning and meet their rehabilitation goals.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 192 (GJ) | Episode | Conditional |

Business Rules: Only collect A12 If E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29), else leave blank.

Related data items: E40, A9, A10, A11, A13

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Phase of amputee care at episode end

Data Element ID: A13

Short Name: EndPhase

Definition: The phase of amputee care just before discharge from the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 193 (GK) | Episode | Conditional |

Business Rules: Only collect A13 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29), else leave blank.

Related data items: E40, A9, A10, A11, A12

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Codeset values:

- | | |
|---|----------------|
| 1 | Pre-operative |
| 2 | Delayed wound |
| 3 | Pre-prosthetic |
| 4 | Prosthetic |
| 5 | Follow-up |

Data Element Name: Prosthetic device fitted?**Data Element ID:** A14**Short Name:** Prosthetic**Definition:** A patient is deemed "prosthetic" if they already have a prosthetic device fitted, or will have one fitted in the future. A patient is deemed "non-prosthetic" if there is no intention to fit a limb.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 194 (GL) | Episode | Conditional |

Business Rules: Only collect A14 If E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29), else leave blank.

If A14 = 1 (Yes) you must collect A08, A15 and A16

If A09 = (3 or 4) OR A11 = 1 OR A12 = 1 OR A13 = (3 or 4) then it would be expected that A14 = 1

Related data items: E40, A08, A15, A16**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

| | |
|---|-----|
| 1 | Yes |
| 2 | No |

Data Element Name: Ready for casting date**Data Element ID:** A08**Short Name:** CastDate**Definition:** The date the treating rehabilitation physician or team deems the stump is ready for casting.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 195 (GM) | Episode | Conditional |

Business Rules: Only collect A08 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29) and A14 = 1, else leave blank.
Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

If casting is planned but the date is not yet known A08 = 07/07/7777.

If casting is not clinically appropriate A08 = 08/08/8888.

Related data items: E40, A14, A15, A16**Key Dates:** **Effective:** 01/07/2017 **Revision:** N/A

| | | | | | |
|----------------------------|---|--------------|--------------------------|-----------------|-------------------|
| Data Element Name: | Date of first prosthetic fitting | | | | |
| Data Element ID: | A15 | | | | |
| Short Name: | FittingDate | | | | |
| Definition: | The date of the first interim prosthetic fitting. | | | | |
| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
| | DD/MM/YYYY | 10 | 196 (GN) | Episode | Conditional |
| Business Rules: | <p>Only collect A15 If E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29) and A14 = 1, else leave blank. Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).</p> <p>If a prosthetic fitting is planned but the date not yet known A15 = 07/07/7777. If the patient has a prosthetic device fitted but the date of fitting is not known A15 = 09/09/9999.</p> | | | | |
| Related data items: | E40, A14, A08, A16 | | | | |
| Key Dates: | Effective: | 01/07/2012 | Revision: | N/A | |

Data Element Name: Reason for delay in first prosthetic fitting**Data Element ID:** A16**Short Name:** FittingDelay**Definition:** The reason for the delay in first interim prosthetic fitting.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|-------------|
| | Numeric | 1 | 197 (GO) | Episode | Conditional |

Business Rules: Only collect A16 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29) and A14 = 1, else leave blank.

If A16 = 6, provide details in Z1 (comments)

Related data items: E40, A08, A14, A15, Z1**Key Dates:** **Effective:** 01/07/2012 **Revision:** N/A**Codeset values:**

| | |
|---|--|
| 0 | No Delay |
| 1 | Issues around wound healing |
| 2 | Other issues around the stump |
| 3 | Other health issues of the patient |
| 4 | Issues around availability of componentry |
| 5 | Issues around availability of the service |
| 6 | All other issues (to be specified in the AROC comment section) |

Data Element Name: Discharge timed up and go test**Data Element ID:** A17**Short Name:** TUG

Definition: The time in completed seconds to complete the Timed Up and Go (TUG) test as assessed just before patient is discharged.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 4 | 198 (GP) | Episode | Conditional |

Business Rules: Only collect A17 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29) and E114 = (1 or 2), else leave blank.

If the patient is unable to complete the test or the test is non applicable for this episode of care, A17 = 9999.

Related data items: E40, E114

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Data Element Name: Discharge 6 minute walk test**Data Element ID:** A18**Short Name:** MinutesWalked

Definition: The distance in metres achieved in the 6 minute walk test completed just before patient is discharged.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 5 | 199 (GQ) | Episode | Optional |

Business Rules: Only collect A18 if E40 = (5.11, 5.12, 5.13, 5.14, 5.15, 5.16, 5.17, 5.18, 5.19, 5.21, 5.22, 5.23, 5.24, 5.25, 5.26, 5.27, 5.28, 5.29) and E114 = (1 or 2), else leave blank.

The format of this data element is xxx.x

If the patient is unable to complete the test or the test is non applicable for this episode of care, A18 999.9.

Related data items: E40, E114

Key Dates: **Effective:** 01/07/2012 **Revision:** N/A

Element Group Name: Goal Attainment Scale (GAS) descriptions

Data Element ID Range: EG02-EG06

Definition: Goal Attainment Scale (GAS) descriptions - up to five rehabilitation goals can be entered.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 50 | 200-204 (GR - GV) | Episode | Optional |

Business Rules: If EG02 has a goal entered then EG01, EG17, EG22 and EG23 required
 If EG03 has a goal entered then EG18 and EG24 required
 If EG04 has a goal entered then EG19 and EG25 required
 If EG05 has a goal entered then EG20 and EG26 required
 If EG06 has a goal entered then EG21 and EG27 required

NOTE: For these data items Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case), 10 numerals and standard punctuation marks, such as - - — . , ; () / ' .

DO NOT USE carriage returns, tabs or double quotes

Related data items: EG01-EG27

Key Dates: **Effective:** 2017-07-01 **Revision:** N/A

Data Items:

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--------------------------|--------------------------|
| EG02 | GAS Goal 1 Description | 200 (GR) |
| EG03 | GAS Goal 2 Description | 201 (GS) |
| EG04 | GAS Goal 3 Description | 202 (GT) |
| EG05 | GAS Goal 4 Description | 203 (GU) |
| EG06 | GAS Goal 5 Description | 204 (GV) |

Data Element Name: Goal Attainment Scale (GAS) start date**Data Element ID:** EG01**Short Name:** GASStartDate

Definition: The date that the Goal Attainment Scale (GAS) was scored at the beginning of the ambulatory rehabilitation episode (admission).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 205 (GW) | Episode | Optional |

Business Rules: If EG02 has a goal entered then EG01 required
Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: EG02-EG27

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: Goal Attainment Scale (GAS) start scores**Data Element ID Range:** EG17-EG21**Definition:** The patient's Goal Attainment Scale (GAS) scores for each of the nominated goals at the beginning of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | Numeric | 2 | 206-210 (GX - HB) | Episode | Optional |

Business Rules: If EG02 has a goal entered then EG01, EG17, EG22 and EG23 required
 If EG03 has a goal entered then EG18 and EG24 required
 If EG04 has a goal entered then EG19 and EG25 required
 If EG05 has a goal entered then EG20 and EG26 required
 If EG06 has a goal entered then EG21 and EG27 required

Related data items: EG01-EG27**Key Dates:** **Effective:** 2017-07-01 **Revision:** N/A**Data Items:**

| ID | Data Element Name | Tab Pos. / Column |
|-----------|--------------------------|--------------------------|
| EG17 | GAS Goal 1 Start Score | 206 (GX) |
| EG18 | GAS Goal 2 Start Score | 207 (GY) |
| EG19 | GAS Goal 3 Start Score | 208 (GZ) |
| EG20 | GAS Goal 4 Start Score | 209 (HA) |
| EG21 | GAS Goal 5 Start Score | 210 (HB) |

Codeset values:

| | |
|----|---------------|
| -2 | No Function |
| -1 | Some Function |

Data Element Name: Goal Attainment Scale (GAS) end date**Data Element ID:** EG22**Short Name:** GASEndDate

Definition: The date that the Goal Attainment Scale (GAS) was scored at the end of the ambulatory rehabilitation episode (discharge).

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|-------------|--------------|--------------------------|-----------------|-------------------|
| | DD/MM/YYYY | 10 | 211 (HC) | Episode | Optional |

Business Rules: If EG02 has a goal entered then EG22 required.
Use leading zeros for days and/or months less than 10 (e.g. 07/01/1976).

Related data items: EG01-EG27

Key Dates: **Effective:** 01/07/2017 **Revision:** N/A

Element Group Name: Goal Attainment Scale (GAS) end scores

Data Element ID Range: EG23-EG27

Definition: The patient's Goal Attainment Scale (GAS) scores for each of the nominated goals at the end of the ambulatory rehabilitation episode.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|---------|---------|-------|-------------------|----------|------------|
| | Numeric | 2 | 212-216 (HD - HH) | Episode | Optional |

Business Rules: If EG02 has a goal entered then EG01, EG17, EG22 and EG23 required
 If EG03 has a goal entered then EG18 and EG24 required
 If EG04 has a goal entered then EG19 and EG25 required
 If EG05 has a goal entered then EG20 and EG26 required
 If EG06 has a goal entered then EG21 and EG27 required

Related data items: EG01-EG27

Key Dates: **Effective:** 2017-07-01 **Revision:** N/A

Data Items:

| ID | Data Element Name | Tab Pos. / Column |
|------|----------------------|-------------------|
| EG23 | GAS Goal 1 End Score | 212 (HD) |
| EG24 | GAS Goal 2 End Score | 213 (HE) |
| EG25 | GAS Goal 3 End Score | 214 (HF) |
| EG26 | GAS Goal 4 End Score | 215 (HG) |
| EG27 | GAS Goal 5 End Score | 216 (HH) |

Codeset values:

- 2 Much worse than expected level
- 1 Somewhat worse than expected level
- 0 Achieved expected level
- 1 Somewhat better than expected level
- 2 Much better than expected level

Data Element Name: General comments**Data Element ID:** Z1**Short Name:** Comment**Definition:** Comment relevant to this episode of care.

| Format: | Type | Width | Tab Pos. / Column | Category | Obligation |
|----------------|--------------|--------------|--------------------------|-----------------|-------------------|
| | Alphanumeric | 200 | 217 (HI) | Episode | Optional |

Business Rules: Z1 may contain:
 * the tool used if the patient had a cognitive impairment which impacted on their ability to participate in rehabilitation
 * the tool used if the patient had a stroke and was receiving ambulatory rehabilitation aimed at aphasia
 * any further details for any 'other' code used
 * any further details useful to the facility

For this data item Alphanumeric characters should be limited to the 26 alphabetic characters (upper or lower case), 10 numerals and standard punctuation marks, such as - — . , ; () / ' `

DO NOT USE carriage returns, tabs or double quotes

Z1 MAY NOT CONTAIN PATIENT NAMES

Related data items: D11, D12, E11, E41, E104-E107, ET03, E114, E116, EA03**Key Dates:** **Effective:** 01/09/2003 **Revision:** N/A