Person—lower limb amputation due to vascular disease, code N

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# Person—lower limb amputation due to vascular disease, code N

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| Identifying and definitional attributes | |
| Metadata item type: | Data Element |
| Short name: | Lower limb amputation due to vascular disease |
| METEOR identifier: | 270162 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 01/03/2005 |
| Definition: | Whether a person has undergone an amputation of toe, forefoot or leg (above or below knee), due to vascular disease, as represented by a code. |
| Data Element Concept: | [Person—lower limb amputation due to vascular disease](https://meteor-uat.aihw.gov.au/content/269623) |
| Value Domain: | [Lower limb amputation due to vascular disease code N](https://meteor-uat.aihw.gov.au/content/270740) |

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| Value domain attributes | | |
| Representational attributes | | |
| Representation class: | Code | |
| Data type: | Number | |
| Format: | N | |
| Maximum character length: | 1 | |
|  | **Value** | **Meaning** |
| Permissible values: | 1 | Lower limb amputation - occurred in the last 12 months |
|  | 2 | Lower limb amputation - occurred prior to the last 12 months |
|  | 3 | Lower limb amputation - occurred both in and prior to the last 12 months |
|  | 4 | No history of lower limb amputation due to vascular disease |
| Supplementary values: | 9 | Not stated/inadequately described |

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| Collection and usage attributes | |
| Collection methods: | Ask the individual if he/she has had an amputated toe or forefoot or leg (above or below knee), not due to trauma or causes other than vascular disease. If so determine when it was undertaken; within or prior to the last 12 months (or both). Alternatively obtain this information from appropriate documentation. |



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| Data element attributes | |
| Source and reference attributes | |
| Submitting organisation: | National Diabetes Data Working Group |
| Origin: | National Diabetes Outcomes Quality Review Initiative (NDOQRIN) data dictionary. |
| Reference documents: | Duffy MD, John C and Patout MD, Charles A. 1990. Management of the Insensitive Foot in Diabetes: Lessons from Hansen's Disease. Military Medicine, 155:575-579. Edmonds M, Boulton A, Buckenham T et al. Report of the Diabetic Foot and Amputation Group. Diabet Med 1996; 13: S27-42. Sharon R O'Rourke and Stephen Colagiuri: The Lower Limb in People With Diabetes; Content 1997/98 Australian Diabetes Society. Colagiuri S, Colagiuri R, Ward J. National Diabetes Strategy and Implementation Plan. Canberra: Diabetes Australia, 1998. |
| Relational attributes | |
| Related metadata references: | Is re-engineered from  [Lower limb amputation due to vascular disease, version 1, DE, NHDD, NHIMG, Superseded 01/03/2005.pdf](https://meteor-uat.aihw.gov.au/content/273871)  (17.6 KB)  *No registration status* |
| Implementation in Data Set Specifications: | [Diabetes (clinical) DSS](https://meteor-uat.aihw.gov.au/content/273054)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Superseded 21/09/2005  ***DSS specific information:***  In people with diabetes, amputations are 15 times more common than in people without diabetes, and 50% of all amputations occur in people with diabetes (The Lower Limb in People With Diabetes; 1997/98 Australian Diabetes Society).  Diabetic foot disease is the most common cause of hospitalisation in people with diabetes. Diabetic foot complications are common in the elderly, and amputation rates increase with age: by threefold in those aged 45 - 74 years and sevenfold in population aged over 75 years. As stated by Duffy and authors the rate of lower extremity amputations can be reduced by 50% by the institution of monofilament testing in a preventive care program.  [Diabetes (clinical) NBPDS](https://meteor-uat.aihw.gov.au/content/304865)  [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 21/09/2005  ***DSS specific information:***  In people with diabetes, amputations are 15 times more common than in people without diabetes, and 50% of all amputations occur in people with diabetes (The Lower Limb in People With Diabetes; 1997/98 Australian Diabetes Society).  Diabetic foot disease is the most common cause of hospitalisation in people with diabetes. Diabetic foot complications are common in the elderly, and amputation rates increase with age: by threefold in those aged 45 - 74 years and sevenfold in population aged over 75 years. As stated by Duffy and authors the rate of lower extremity amputations can be reduced by 50% by the institution of monofilament testing in a preventive care program. |