

Episode of admitted patient care—procedure, code (ACHI 6th edn) NNNNN-NN

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Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Procedure
METEOR identifier:	361687
Registration status:	Health! , Superseded 22/12/2009
Definition:	A clinical intervention represented by a code that: <ul style="list-style-type: none">• is surgical in nature, and/or• carries a procedural risk, and/or• carries an anaesthetic risk, and/or• requires specialised training, and/or• requires special facilities or equipment only available in an acute care setting.
Data Element Concept:	Episode of admitted patient care—procedure
Value Domain:	Procedure code (ACHI 6th edn) NNNNN-NN

Value domain attributes

Representational attributes

Classification scheme:	Australian Classification of Health Interventions (ACHI) 6th edition
Representation class:	Code
Data type:	Number
Format:	NNNNN-NN
Maximum character length:	7

Data element attributes

Collection and usage attributes

Collection methods:	Record and code all procedures undertaken during the episode of care in accordance with the ACHI (5th edition). Procedures are derived from and must be substantiated by clinical documentation.
Comments:	The National Centre for Classification in Health advises the National Health Data Committee of relevant changes to the ACHI.

Source and reference attributes

Origin:	National Centre for Classification in Health National Health Data Committee
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Relational attributes

Related metadata references:

Supersedes [Episode of admitted patient care—procedure, code \(ACHI 5th edn\) NNNNN-NN](#)

[Health!](#), Superseded 05/02/2008

Has been superseded by [Episode of admitted patient care—procedure, code \(ACHI 7th edn\) NNNNN-NN](#)

[Health!](#), Superseded 02/05/2013

[National Health Performance Authority \(retired\)](#), Retired 01/07/2016

Implementation in Data Set Specifications:

[Admitted patient care NMDS 2008-09](#)

[Health!](#), Superseded 04/02/2009

Implementation start date: 01/07/2008

Implementation end date: 30/06/2009

DSS specific information:

As a minimum requirement procedure codes must be valid codes from the Australian Classification of Health Interventions (ACHI) procedure codes and validated against the nationally agreed age and sex edits. More extensive edit checking of codes may be utilised within individual hospitals and state and territory information systems.

An unlimited number of diagnosis and procedure codes should be able to be collected in hospital morbidity systems. Where this is not possible, a minimum of 20 codes should be able to be collected.

Record all procedures undertaken during an episode of care in accordance with the ACHI (6th edition) Australian Coding Standards.

The order of codes should be determined using the following hierarchy:

- procedure performed for treatment of the principal diagnosis
- procedure performed for the treatment of an additional diagnosis
- diagnostic/exploratory procedure related to the principal diagnosis
- diagnostic/exploratory procedure related to an additional diagnosis for the episode of care.

[Admitted patient care NMDS 2009-10](#)

[Health!](#), Superseded 22/12/2009

Implementation start date: 01/07/2009

Implementation end date: 30/06/2010

DSS specific information:

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Record all procedures undertaken during an episode of care in accordance with the ACHI (6th edition) Australian Coding Standards.

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- procedure performed for treatment of the principal diagnosis
- procedure performed for the treatment of an additional diagnosis
- diagnostic/exploratory procedure related to the principal diagnosis
- diagnostic/exploratory procedure related to an additional diagnosis for the episode of care.

Implementation in Indicators:

Used as Numerator

[National Healthcare Agreement: PI 23-Unplanned hospital readmission rates, 2013](#)
[Health!](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical admissions, 2011](#)
[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical episodes of care, 2012](#)
[Health!](#), Superseded 25/06/2013

[National Healthcare Agreement: PI 48-Rates of services: Hospital procedures, 2011](#)
[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 48-Rates of services: Hospital procedures, 2012](#)
[Health!](#), Retired 25/06/2013

Used as Disaggregation

[National Healthcare Agreement: PI 23-Unplanned hospital readmission rates, 2013](#)
[Health!](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical admissions, 2011](#)
[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical episodes of care, 2012](#)
[Health!](#), Superseded 25/06/2013

[National Healthcare Agreement: PI 48-Rates of services: Hospital procedures, 2011](#)
[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 48-Rates of services: Hospital procedures, 2012](#)
[Health!](#), Retired 25/06/2013

Used as Denominator

[National Healthcare Agreement: PI 23-Unplanned hospital readmission rates, 2013](#)
[Health!](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical admissions, 2011](#)
[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 43-Unplanned/unexpected readmissions within 28 days of selected surgical episodes of care, 2012](#)
[Health!](#), Superseded 25/06/2013