

Non-admitted patient emergency department service episode—triage category, code N

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Non-admitted patient emergency department service episode—triage category, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Triage category
METEOR identifier:	390392
Registration status:	Health! , Superseded 29/01/2012
Definition:	The urgency of the patient's need for medical and nursing care as assessed at triage, as represented by a code.
Data Element Concept:	Non-admitted patient emergency department service episode—triage category
Value Domain:	Triage category code N

Value domain attributes

Representational attributes

Representation class:	Code
Data type:	Number
Format:	N
Maximum character length:	1

	Value	Meaning
Permissible values:	1	Resuscitation: immediate (within seconds)
	2	Emergency: within 10 minutes
	3	Urgent: within 30 minutes
	4	Semi-urgent: within 60 minutes
	5	Non-urgent: within 120 minutes

Data element attributes

Collection and usage attributes

Collection methods: This triage classification is to be used in the emergency departments of hospitals. Patients will be triaged into one of five categories on the National Triage Scale according to the triageur's response to the question: 'This patient should wait for medical care no longer than ...?'.

The triage category is allocated by an experienced [registered nurse](#) or medical practitioner. If the triage category changes, both triage categories can be captured, but the original category must be reported in this data element.

Source and reference attributes

Origin: National Triage Scale, Australasian College for Emergency Medicine

Relational attributes

Related metadata references:	<p>Supersedes Non-admitted patient emergency department service episode—triage category, code N Health!, Superseded 22/12/2009</p> <p>Has been superseded by Non-admitted patient emergency department service episode—triage category, code N Health!, Superseded 30/01/2012</p>
Implementation in Data Set Specifications:	<p>Non-admitted patient emergency department care NMDS 2010-11 Health!, Superseded 18/01/2011</p> <p>Implementation start date: 01/07/2010 Implementation end date: 30/06/2011</p>
Implementation in Indicators:	<p>Used as Numerator</p> <p>National Healthcare Agreement: P23-Selected potentially avoidable GP-type presentations to emergency departments, 2010 Health!, Superseded 08/06/2011</p> <p>National Healthcare Agreement: P35-Waiting times for emergency department care, 2010 Health!, Superseded 08/06/2011</p> <p>National Healthcare Agreement: PB 05-By 2012–13, 80 per cent of emergency department presentations are seen within clinically recommended triage times as recommended by the Australasian College of Emergency Medicine, 2011 Health!, Superseded 30/10/2011</p> <p>National Healthcare Agreement: PB 05-By 2012–13, 80 per cent of emergency department presentations are seen within clinically recommended triage times as recommended by the Australasian College of Emergency Medicine, 2012 Health!, Retired 25/06/2013</p> <p>National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2013 Health!, Superseded 30/04/2014</p> <p>National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2014 Health!, Superseded 14/01/2015</p> <p>National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2015 Health!, Superseded 08/07/2016</p> <p>National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2013 Health!, Superseded 30/04/2014</p> <p>National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2014 Health!, Superseded 14/01/2015</p> <p>National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2015 Health!, Superseded 08/07/2016</p> <p>National Healthcare Agreement: PI 23-Selected potentially avoidable GP-type presentations to emergency departments, 2011 Health!, Superseded 31/10/2011</p> <p>National Healthcare Agreement: PI 23-Selected potentially avoidable GP-type presentations to emergency departments, 2011 Health!, Superseded 31/10/2011</p> <p>National Healthcare Agreement: PI 23-Selected potentially avoidable GP-type presentations to emergency departments, 2012 Health!, Superseded 25/06/2013</p> <p>National Healthcare Agreement: PI 35-Waiting times for emergency department care, 2011 Health!, Superseded 31/10/2011</p> <p>National Healthcare Agreement: PI 35-Waiting times for emergency department care, 2012 Health!, Superseded 25/06/2013</p>

Used as Disaggregation

[National Healthcare Agreement: P35-Waiting times for emergency department care, 2010](#)

[Health!](#), Superseded 08/06/2011

[National Healthcare Agreement: PB 05-By 2012–13, 80 per cent of emergency department presentations are seen within clinically recommended triage times as recommended by the Australasian College of Emergency Medicine, 2011](#)

[Health!](#), Superseded 30/10/2011

[National Healthcare Agreement: PB 05-By 2012–13, 80 per cent of emergency department presentations are seen within clinically recommended triage times as recommended by the Australasian College of Emergency Medicine, 2012](#)

[Health!](#), Retired 25/06/2013

[National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2013](#)

[Health!](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2014](#)

[Health!](#), Superseded 14/01/2015

[National Healthcare Agreement: PI 19-Selected potentially avoidable GP-type presentations to emergency departments, 2015](#)

[Health!](#), Superseded 08/07/2016

[National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2013](#)

[Health!](#), Superseded 30/04/2014

[National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2014](#)

[Health!](#), Superseded 14/01/2015

[National Healthcare Agreement: PI 21a-Waiting times for emergency hospital care: Proportion seen on time, 2015](#)

[Health!](#), Superseded 08/07/2016

[National Healthcare Agreement: PI 23-Selected potentially avoidable GP-type presentations to emergency departments, 2011](#)

[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 23-Selected potentially avoidable GP-type presentations to emergency departments, 2011](#)

[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 23-Selected potentially avoidable GP-type presentations to emergency departments, 2012](#)

[Health!](#), Superseded 25/06/2013

[National Healthcare Agreement: PI 35-Waiting times for emergency department care, 2011](#)

[Health!](#), Superseded 31/10/2011

[National Healthcare Agreement: PI 35-Waiting times for emergency department care, 2012](#)

[Health!](#), Superseded 25/06/2013