Patient—clinical emergency indicator, yes/no code N



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Patient—clinical emergency indicator, yes/no code N

Identifying and definitional attributes

Metadata item type: Data Element

Short name: Clinical emergency indicator

METEOR identifier: 448126

Registration status: Health!, Standard 07/12/2011

Definition: An indicator of whether the treatment required for the patient is clinically assessed

as an emergency, as represented by a code.

Data Element Concept: Patient—clinical emergency indicator

Value Domain: Yes/no code N

Value domain attributes

Representational attributes

Representation class: Code Data type: Boolean

Format: Maximum character length: 1

> Value Meaning

Permissible values: Yes

> 2 No

Data element attributes

Collection and usage attributes

Guide for use: CODE 1

The treating clinician has assessed the waiting time for treatment cannot

exceed 24 hours.

CODE 2 No

The treating clinician has assessed the waiting time for treatment can exceed 24

hours.

Relational attributes

Related metadata

references:

WA Health, Standard 19/03/2015

See also Person with cancer—clinical emergency indicator, code A

See also Person with cancer—clinical emergency indicator, code A

WA Health, Standard 01/06/2017

Implementation in Data Set Radiotherapy waiting times DSS 2012-13

Health!, Superseded 13/11/2013 **Specifications:**

> Implementation start date: 01/07/2012 Implementation end date: 30/06/2013

> > Conditional obligation: This item must be completed if Patient—radiotherapy

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start date, DDMMYYYY exists.

DSS specific information:

Assigning the clinical urgency category is a clinical decision by the radiation oncologist.

Individual service providers may use various more detailed clinical urgency subcategories to assist in prioritising patients for treatment (e.g. semi-urgent, routine, etc), all of these sub-categories should be mapped to one of the two urgency categories provided.

If the emergency status of a course of radiotherapy treatment changes during the planning or delivery of a course of radiotherapy treatment, the new status should be reported, not the original. Each separate course delivered to a patient may have a different emergency status.

Radiotherapy waiting times DSS 2013-15

Health!, Superseded 13/11/2013 Implementation start date: 01/07/2013 Implementation end date: 30/06/2015

DSS specific information:

Assigning the clinical urgency category is a clinical decision by the radiation oncologist.

Individual service providers may use various more detailed clinical urgency subcategories to assist in prioritising patients for treatment (e.g. semi-urgent, routine, etc), all of these sub-categories should be mapped to one of the two urgency categories provided.

If the emergency status of a course of radiotherapy treatment changes during the planning of a course of radiotherapy treatment, the new status should be reported, not the original. Each separate course delivered to a patient may have a different emergency status.

Radiotherapy waiting times NMDS 2015-2018

Health!, Superseded 25/01/2018

Implementation start date: 01/07/2015 Implementation end date: 30/06/2018

DSS specific information:

Assigning the clinical urgency category is a clinical decision by the radiation oncologist.

Individual service providers may use various more detailed clinical urgency subcategories to assist in prioritising patients for treatment (e.g. semi-urgent, routine, etc), all of these sub-categories should be mapped to one of the two urgency categories provided.

If the emergency status of a course of radiotherapy treatment changes during the planning of a course of radiotherapy treatment, the new status should be reported, not the original. Each separate course delivered to a patient may have a different emergency status.

Radiotherapy waiting times NMDS 2018-

Health!, Standard 25/01/2018

Implementation start date: 01/07/2018

DSS specific information:

Assigning the clinical emergency indicator is a clinical decision by the radiation oncologist.

Individual service providers may use various more detailed clinical urgency subcategories to assist in prioritising patients for treatment (e.g. semi-urgent, routine, etc), all of these sub-categories should be mapped to one of the two emergency indicators provided.

If the emergency indicator of a course of radiotherapy treatment changes during the planning of a course of radiotherapy treatment, the new status should be reported, not the original. Each separate course delivered to a patient may have a different emergency indicator.

Implementation in Indicators:

National Healthcare Agreement Pla: Proportion of emergency radiotherapy treatment started within the emergency timeframe

Health!, Qualified 12/01/2016

National Healthcare Agreement Pla: Proportion of emergency radiotherapy treatment started within the emergency timeframe

Health!, Qualified 12/01/2016