

Emergency department stay—type of visit to emergency department, 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.

Emergency department stay—type of visit to emergency department, code N

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Type of visit to emergency department
METEOR identifier:	474195
Registration status:	Independent Hospital Pricing Authority , Standard 31/10/2012 Health! , Superseded 21/11/2013 National Health Performance Authority (retired) , Retired 01/07/2016
Definition:	The reason the patient presents to an emergency department, as represented by a code.
Context:	Emergency department care.
Data Element Concept:	Emergency department stay—type of visit to emergency department
Value Domain:	Emergency department visit type code N

Value domain attributes

Representational attributes

Representation class:	Code	
Data type:	Number	
Format:	N	
Maximum character length:	1	
	Value	Meaning
Permissible values:	1	Emergency presentation: attendance for an actual or suspected condition which is sufficiently serious to require acute unscheduled care.
	2	Return visit, planned: presentation is planned and is a result of a previous emergency department presentation or return visit.
	3	Pre-arranged admission: a patient who presents at the emergency department for either clerical, nursing or medical processes to be undertaken, and admission has been pre-arranged by the referring medical officer and a bed allocated.
	4	Patient in transit: the emergency department is responsible for care and treatment of a patient awaiting transport to another facility.
	5	Dead on arrival: a patient who is dead on arrival and an emergency department clinician certifies the death of the patient.

Data element attributes

Collection and usage attributes

Comments:	Required for analysis of emergency department services.
------------------	---

Source and reference attributes

Submitting organisation: National Institution Based Ambulatory Model Reference Group

Origin: National Health Data Committee

Relational attributes

Related metadata references: Supersedes [Emergency department stay—type of visit to emergency department, code N](#)

[Health!](#), Superseded 30/01/2012

Has been superseded by [Emergency department stay—type of visit to emergency department, code N](#)

[Health!](#), Superseded 11/04/2014

Implementation in Data Set Specifications: [Activity based funding: Emergency department care DSS 2013-2014](#)
[Independent Hospital Pricing Authority](#), Superseded 01/03/2013

Implementation start date: 01/07/2013

Implementation end date: 30/06/2014

[Activity based funding: Emergency service care DSS 2013-2014](#)

[Independent Hospital Pricing Authority](#), Standard 31/10/2012

Implementation start date: 01/07/2013

Implementation end date: 30/06/2014

[Emergency department care activity based funding DSS 2012-2013](#)

[Independent Hospital Pricing Authority](#), Superseded 31/10/2012

Implementation start date: 01/07/2012

Implementation end date: 30/06/2013

[Emergency services activity based funding DSS 2012-2013](#)

[Independent Hospital Pricing Authority](#), Superseded 31/10/2012

Implementation start date: 01/07/2012

Implementation end date: 30/06/2013

[Non-admitted patient emergency department care NMDS 2012-13](#)

[Health!](#), Superseded 07/02/2013

Implementation start date: 01/07/2012

Implementation end date: 30/06/2013

[Non-admitted patient emergency department care NMDS 2013-14](#)

[Health!](#), Superseded 11/04/2014

Implementation start date: 01/07/2013

Implementation end date: 30/06/2014

**Implementation in
Indicators:**

Used as Numerator

[National Health Performance Authority, Healthy Communities: After-hours emergency department attendances, 2013–14](#)

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

[National Health Performance Authority, Healthy Communities: In-hours emergency department attendances, 2013–14](#)

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

[National Health Performance Authority, Hospital Performance: Percentage of patients who commenced treatment within clinically recommended time 2014](#)

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

[National Partnership Agreement on Improving Public Hospital Services: Unplanned re-attendances to the emergency department within 48 hours of previous attendances](#)

[Health!](#), Standard 07/08/2014

Used as Denominator

[National Health Performance Authority, Hospital Performance: Percentage of patients who commenced treatment within clinically recommended time 2014](#)

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

[National Partnership Agreement on Improving Public Hospital Services: Unplanned re-attendances to the emergency department within 48 hours of previous attendances](#)

[Health!](#), Standard 07/08/2014