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

Exported from METEOR (AIHW's Metadata Online Registry)

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:	550725
Registration status:	Health!, Superseded 25/01/2018
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
	2	Return visit, planned
	3	Pre-arranged admission
	5	Dead on arrival

Collection and usage attributes

Guide for use:	CODE 1 Emergency presentation

Where a patient presents to the emergency department for an actual or suspected condition which is sufficiently serious to require acute unscheduled care. This includes patients awaiting transit to another facility who receive clinical care in the emergency department, and patients for whom resuscitation is attempted.

Exclusion: Where patients are awaiting transit to another facility and do not receive clinical care in the emergency department, the patient should not be recorded.

CODE 2   Return visit, planned

Where a patient presents to the emergency department for a return visit, as a result of a previous emergency department presentation (Code 1) or return visit (Code 2). The return visit may be for planned follow-up treatment, as a consequence of test results becoming available indicating the need for further treatment, or as a result of a care plan initiated at discharge.

Exclusion: Where a visit follows general advice to return if feeling unwell, this should not be recorded as a planned visit.

CODE 3   Pre-arranged admission

Where a patient presents to the emergency department for an admission to either a non-emergency department ward or other admitted patient care unit that has been arranged prior to the patient's arrival, and the patient receives clinical care in the emergency department.

Exclusion: Where a patient presents for a pre-arranged admission and only clerical services are provided by the emergency department, the patient should not be recorded.

CODE 5   Dead on arrival

Where a patient is dead on arrival and an emergency department clinician certifies the death of the patient.

Exclusion: Where resuscitation of the patient is attempted, this should be recorded as an emergency presentation (Code 1).

Note: Where Code 5 is recorded for a patient, an Episode end status Code 7 (Dead on arrival) should also be recorded.

Data element attributes

Collection and usage attributes

Comments:	Required for analysis of emergency department services.

Source and reference attributes

Submitting organisation:	National Health Information Standards and Statistics Committee
Origin:	National Health Data Committee

Relational attributes

Related metadata references:	Supersedes Emergency department stay—type of visit to emergency department, code N
	Health!, Superseded 11/04/2014
	Has been superseded by Emergency department stay—type of visit to emergency department, code N
	Health!, Superseded 20/10/2021

Implementation in Data Set Specifications:

[Non-admitted patient emergency department care DSS 2014-15](#)
[Health!](#), Superseded 04/02/2015
Implementation start date: 01/07/2014
Implementation end date: 30/06/2015

[Non-admitted patient emergency department care DSS 2015-16](#)
[Health!](#), Superseded 02/12/2015
Implementation start date: 01/07/2015
Implementation end date: 30/06/2016

[Non-admitted patient emergency department care NBEDS 2016-17](#)
[Health!](#), Superseded 05/10/2016
Implementation start date: 01/07/2016
Implementation end date: 30/06/2017

[Non-admitted patient emergency department care NBEDS 2017-18](#)
[Health!](#), Superseded 12/12/2018
Implementation start date: 01/07/2017
Implementation end date: 30/06/2018

Implementation in Indicators:

Used as Numerator
[National Healthcare Agreement: PI 19–Selected potentially avoidable GP-type presentations to emergency departments, 2019](#)
[Health!](#), Superseded 13/03/2020

[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: Proportion seen on time, 2019](#)
[Health!](#), Superseded 13/03/2020

Used as Denominator
[National Healthcare Agreement: PI 21a–Waiting times for emergency hospital care: Proportion seen on time, 2019](#)
[Health!](#), Superseded 13/03/2020