

Patient—date form signed, date DDMMYYYY

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Patient—date form signed, date DDMMYYYY

Identifying and definitional attributes

Metadata item type:	Data Element
Short name:	Date form signed
METEOR identifier:	568628
Registration status:	Indigenous , Standard 05/12/2017
Definition:	The date on which an authorised person signs a patient's form, expressed as DDMMYYYY.

Data element concept attributes

Identifying and definitional attributes

Data element concept:	Patient—date form signed
METEOR identifier:	568623
Registration status:	Indigenous , Standard 05/12/2017
Definition:	The date on which an authorised person signs a patient's form.
Object class:	Patient
Property:	Date form signed

Source and reference attributes

Submitting organisation:	Department of Health Australian Institute of Health and Welfare
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Value domain attributes

Identifying and definitional attributes

Value domain:	Date DDMMYYYY
METEOR identifier:	270566
Registration status:	Health! , Standard 01/03/2005 Community Services (retired) , Standard 01/03/2005 Housing assistance , Standard 01/03/2005 Early Childhood , Standard 21/05/2010 Homelessness , Standard 23/08/2010 Independent Hospital Pricing Authority , Standard 31/10/2012 WA Health , Standard 06/03/2014 Indigenous , Standard 11/08/2014 Disability , Standard 07/10/2014 Commonwealth Department of Health , Standard 14/10/2015 National Health Performance Authority (retired) , Retired 01/07/2016 Tasmanian Health , Standard 31/08/2016 Children and Families , Standard 22/11/2016 Youth Justice , Standard 15/02/2022
Definition:	The day of a particular month and year.

Representational attributes

Representation class:	Date
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Data type: Date/Time
Format: DDMMYYYY
Maximum character length: 8

Data element attributes

Source and reference attributes

Submitting organisation: Department of Health
Australian Institute of Health and Welfare

Relational attributes

Related metadata references: See also [Patient—form signed indicator, yes/no code N Indigenous](#), Standard 05/12/2017

Implementation in Data Set Specifications: [Closing the Gap/Child Health Check Initiative: Ear, nose and throat operation summary form DSS Indigenous](#), Standard 05/12/2017

Conditional obligation:

Conditional on a 'yes' response to [Patient—form signed indicator, yes/no code N](#).

DSS specific information:

This data element is used to record the date the ENT Operation summary form was completed and signed by the health-care professional.