Patient—date form signed, date DDMMYYYY

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# Patient—date form signed, date DDMMYYYY

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| Identifying and definitional attributes |
| Metadata item type: | Data Element |
| Short name: | Date form signed |
| METEOR identifier: | 568628 |
| Registration status: | [Indigenous](https://meteor-uat.aihw.gov.au/RegistrationAuthority/9), Standard 05/12/2017 |
| Definition: | The date on which an authorised person signs a patient's form, expressed as DDMMYYYY. |
| Data Element Concept: | [Patient—date form signed](https://meteor-uat.aihw.gov.au/content/568623)  |
| Value Domain: | [Date DDMMYYYY](https://meteor-uat.aihw.gov.au/content/270566) |

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| Value domain attributes |
| Representational attributes |
| Representation class: | Date |
| Data type: | Date/Time |
| Format: | DDMMYYYY |
| Maximum character length: | 8 |

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| 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](https://meteor-uat.aihw.gov.au/content/568610)[Indigenous](https://meteor-uat.aihw.gov.au/RegistrationAuthority/9), Standard 05/12/2017 |
| Implementation in Data Set Specifications: | [Closing the Gap/Child Health Check Initiative: Ear, nose and throat operation summary form DSS](https://meteor-uat.aihw.gov.au/content/507516)[Indigenous](https://meteor-uat.aihw.gov.au/RegistrationAuthority/9), Standard 05/12/2017***Conditional obligation:*** Conditional on a 'yes' response to [Patient—form signed indicator, yes/no code N](https://meteor-uat.aihw.gov.au/content/568610).***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. |