

Data Elements	UHDDS (Uniform Hospital Discharge Data Set)
Personal Identifier	A unique number identifying the patient, applicable to the individual regardless of health care source or third-party arrangement.
Date of Birth	4 digits for year of birth but 3 digits are adequate to capture the century
Sex	Male
Race Ethnicity	Race: American Indian/Eskimo/Aleut Asian or Pacific Islander Black White Other Race Unknown Ethnicity: Spanish/Hispanic Origin Not of Spanish/Hispanic Origin Unknown
Residence	Usual residence, full address and zip code (nine digit zip code, if available)
Hospital Identification	A unique institutional number across data systems, to allow for tracking and linkage of multiple records; preferably the Medicare provider number
Admission Date	Month, day, and year. Clarification is added to this data item to note that for emergency and observation type patients, the time of admission is guided by the time that the physician gives the order to admit the patient as an inpatient.
Type of Admission	Scheduled: defined as an arrangement with the admissions office at least 24 hours prior to admission. Unscheduled: all other admissions
Discharge Date	Month, day and year.
Physician Identification: Attending	Each physician should have a unique identification number across all hospitals and data systems. The Medicare Unique Physician Identification (UPIN) is recommended.
Physician Identification: Operating	As above
Principal Diagnosis	The condition established after study to be chiefly responsible for occasioning the admission of the patient to the hospital for care. Qualifier: All substantiated diagnoses that affect the current hospital stay. Code to the highest degree of certainty.
Other Diagnoses	All conditions that coexist at the time of admission, or develop subsequently, which affect the treatment received and/or the length of stay. Diagnoses that relate to an earlier episode which have no bearing on the current hospital stay are to be excluded. Qualifier: All substantiated diagnoses that affect the current hospital stay. Code to the highest degree of certainty.
Qualifier for other diagnoses	A qualifier is given for each diagnosis coded under "other diagnoses" to indicate whether the onset of the diagnosis preceded or followed admission to the hospital. The option "uncertain" is permitted
External Cause of Injury Code	The ICD-9-CM code for the external cause of injury, poisoning, or adverse effect. Hospitals should complete this item whenever there is a diagnosis of an injury, poisoning or adverse effect.

Birth Weight of Neonate	The specific birth weight of the newborn, preferably recorded in grams.
Procedures and Dates	<p>All significant procedures are to be reported. A significant procedure is one that is: surgical in nature; carries a procedural risk; carries an aesthetic risk; or requires specialized training. The date of each significant procedure must be reported.</p> <p>When multiple procedures are reported, the principal procedure is designated. The principal procedure is one that was performed for definitive treatment rather than one performed for diagnostic or exploratory purposes or was necessary to take care of a complication. If two or more procedures are equally related to the principal diagnosis, the most resource intensive or complex procedure is usually designated as principal procedure.</p>
Disposition of Patient	<p>Discharged to home or self care Discharged to acute care hospital Discharged to a nursing facility Discharged home to be under the care of a home health service agency Discharged to other health care facility Left against medical advice Alive, other, or alive, not stated Died</p>
Expected Source of Payment	<p>Primary source: the primary source that is expected to be responsible for the largest percentage of the patient's current bill Other source(s): other sources, if any, that are expected to be responsible for a portion of the patient's current bill. More than one can be identified. Blue Cross/Blue Shield Other health insurance company Other liability insurance Medicare Medicaid Workers' Compensation Self-insured employer plan Health Maintenance Organization CHAMPUS CHAMP/VA Other government payers Self pay No charge (free, charity, special research or teaching) Other</p>
Total Charges	All charges billed by the hospital for this hospitalization. Professional charges for individual patient care by physicians are excluded.