

**DECISION SUPPORT SYSTEM (DSS)  
FY 2012 EXTRACTS**

**MEDICAL RECORDS  
DATA DEFINITIONS GUIDE**



**Software Version 3.0  
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**Department of Veterans Affairs  
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# Introduction

The Decision Support System (DSS) Fiscal Year Extracts software provides a means of exporting data from selected VistA software modules and transmitting it to a Decision Support System (DSS) database residing at the Austin Information Technology Center (AITC). This transfer is accomplished through a set of extract routines, intermediate files, and transmission routines. Data from VistA packages is stored by the extract routines in the intermediate files, where it is temporarily available for local use and auditing. The data is then transmitted to the AITC, where it is formatted and uploaded into commercial software. After the data has been successfully uploaded into the commercial software, it is purged from the intermediate files.

This document is designed to:

- Provide DSS Teams with technical information regarding each extract.
- Detail the source from which the data element in each extract is obtained.
- Provide DSS Teams with the tools to perform additional data validation.

The changes made to this document in support of the software changes in the DSS Extract FY12 release are identified in the below table.

Extract File Name	Extract Abbreviated Name/File	VistA Field Number /Name	RSD ID
ADMISSION EXTRACT	ADM / 727.802	32 PRINCIPAL DIAGNOSIS	1.2.22
ADMISSION EXTRACT	ADM / 727.802	91 ADMIT SOURCE	1.2.28
BAR CODE MEDICATION ADMINISTRATION EXTRACT	BCM/ 727.833	35 ACTION STATUS	1.2.31
CLINIC EXTRACT	CLI/ 727.827	96 SECONDARY PROVIDER #1	1.2.1
CLINIC EXTRACT	CLI / 727.827	97 SECONDARY PROVIDER #1 PC	1.2.2
CLINIC EXTRACT	CLI / 727.827	98 SECONDARY PROVIDER #1 NPI	1.2.3
CLINIC EXTRACT	CLI / 727.827	99 SECONDARY PROVIDER #2	1.2.4
CLINIC EXTRACT	CLI / 727.827	100 SECONDARY PROVIDER #2 PC	1.2.5
CLINIC EXTRACT	CLI / 727.827	101 SECONDARY PROVIDER #2 NPI	1.2.6
CLINIC EXTRACT	CLI / 727.827	102 SECONDARY PROVIDER #3	1.2.7
CLINIC EXTRACT	CLI / 727.827	103 SECONDARY PROVIDER #3 PC	1.2.8
CLINIC EXTRACT	CLI / 727.827	104 SECONDARY PROVIDER #3 NPI	1.2.9
CLINIC EXTRACT	CLI / 727.827	105 SECONDARY PROVIDER #4	1.2.10
CLINIC EXTRACT	CLI / 727.827	106 SECONDARY PROVIDER #4 PC	1.2.11
CLINIC EXTRACT	CLI / 727.827	107 SECONDARY PROVIDER #4 NPI	1.2.12
CLINIC EXTRACT	CLI / 727.827	108 SECONDARY PROVIDER #5	1.2.13
CLINIC EXTRACT	CLI / 727.827	109 SECONDARY PROVIDER #5 PC	1.2.14
CLINIC EXTRACT	CLI / 727.827	110 SECONDARY PROVIDER #5 NPI	1.2.15
EVENT CAPTURE LOCAL EXTRACT	ECS / 727.815	100 PROVIDER #4	1.2.16
EVENT CAPTURE LOCAL EXTRACT	ECS / 727.815	101 PROVIDER #4 PERSON CLASS	1.2.17
EVENT CAPTURE LOCAL EXTRACT	ECS / 727.815	102 PROVIDER #4 NPI	1.2.18

<b>Extract File Name</b>	<b>Extract Abbreviated Name/File</b>	<b>VistA Field Number /Name</b>	<b>RSD ID</b>
EVENT CAPTURE LOCAL EXTRACT	ECS / 727.815	103 PROVIDER #5	1.2.19
EVENT CAPTURE LOCAL EXTRACT	ECS / 727.815	104 PROVIDER #5 PERSON CLASS	1.2.20
EVENT CAPTURE LOCAL EXTRACT	ECS / 727.815	105 PROVIDER #5 NPI	1.2.21
LABORATORY EXTRACT	LAB / 727.813	45 DATA NAME	1.2.32
PROSTHETICS EXTRACT	PRO / 727.826	9 FDR LOC	1.2.23
PROSTHETICS EXTRACT	PRO / 727.826	14 PCE CPT/HCPCS CODE	1.2.24
QUASAR EXTRACT	ECQ / 727.825	100 PROVIDER #4	1.2.16
QUASAR EXTRACT	ECQ / 727.825	101 PROVIDER #4 PERSON CLASS	1.2.17
QUASAR EXTRACT	ECQ / 727.825	102 PROVIDER #4 NPI	1.2.18
QUASAR EXTRACT	ECQ / 727.825	103 PROVIDER #5	1.2.19
QUASAR EXTRACT	ECQ / 727.825	104 PROVIDER #5 PERSON CLASS	1.2.20
QUASAR EXTRACT	ECQ / 727.825	105 PROVIDER #5 NPI	1.2.21
SURGERY EXTRACT	SUR / 727.811	121 DATE OF BIRTH	1.2.36

# Medical Records Data Definitions

## #727.802 - ADMISSION EXTRACT (ADM) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the MAS Admission extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.802,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.802,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.802,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.802,3 FACILITY	An identifier for the station and division.	It is derived from the DIVISION field (#3.5) in the HOSPITAL LOCATION file (#44) for the entry identified in the LOCATION field (#.04) in the OUTPATIENT ENCOUNTER file (#409.68). This field is a pointer to the MEDICAL CENTER DIVISION file (#40.8).
727.802,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.802,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.802,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.

Field # and Name	Description	Technical Description
727.802,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to "I" if an inpatient status is found based on these calls.
727.802,8 DAY	Date when the patient admission occurred.  Format: YYYYMMDD	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01). If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.802,9 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the DATE/TIME field (#.01) from the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to TEAM file (#404.51) is transmitted.
727.802,10 SEX	Patient's gender  Values: M = Male F = Female	Using the patient pointer (DFN), this data element is taken from the SEX field (#.02) in the PATIENT file (#2).
727.802,11 DATE OF BIRTH	Patient's date of birth  Format: YYYYMMDD	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)



Field # and Name	Description	Technical Description
727.802,12 RELIGION	<p>The current religious preference of this patient.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>1 JUDAISM</li> <li>2 EASTERN ORTHODOX</li> <li>3 BAPTIST</li> <li>4 METHODIST</li> <li>5 LUTHERAN</li> <li>6 PRESBYTERIAN</li> <li>7 UNITED CHURCH OF CHRIST</li> <li>8 EPISCOPALIAN</li> <li>9 ADVENTIST</li> <li>10 ASSEMBLY OF GOD</li> <li>11 BRETHREN</li> <li>12 CHRISTIAN SCIENTIST</li> <li>13 CHURCH OF CHRIST</li> <li>14 CHURCH OF GOD</li> <li>15 DISCIPLES OF CHRIST</li> <li>16 EVANGELICAL COVENANT</li> <li>17 FRIENDS</li> <li>18 JEHOVAH'S WITNESSES</li> <li>19 LATTER DAY SAINTS</li> <li>20 ISLAM</li> <li>21 NAZARENE</li> <li>22 OTHER</li> <li>23 PENTECOSTAL</li> <li>24 PROTESTANT</li> <li>25 PROTESTANT, NO DENOMINATION</li> <li>26 REFORMED</li> <li>27 SALVATION ARMY</li> <li>28 UNITARIAN-UNIVERSALISM</li> <li>99 ROMAN CATHOLIC CHURCH</li> <li>100 NATIVE AMERICAN</li> <li>101 ZEN BUDDHISM</li> <li>102 UNKNOWN/NO PREFERENCE</li> <li>103 AFRICAN RELIGIONS</li> <li>104 AFRO-CARIBBEAN RELIGIONS</li> <li>105 AGNOSTICISM</li> <li>106 ANGLICAN</li> <li>107 ANIMISM</li> <li>108 ATHEISM</li> <li>109 BABI &amp; BAHAI FAITHS</li> <li>110 BON</li> <li>111 CAO DAI</li> </ul>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4) in the ADMISSION EXTRACT file (#727.802), RELIGION data is derived from the RELIGIOUS PREFERENCE field (#.08) in the PATIENT file (#2). It is a pointer to the RELIGION file (#13).</p>

Field # and Name	Description	Technical Description
	112 CELTICISM 113 CHRISTIAN (NON-SPECIFIC) 114 CONFUCIANISM 115 CONGREGATIONAL 116 CYBERCULTURE RELIGIONS 117 DIVINATION 118 FOURTH WAY 119 FREE DAISM 120 FULL GOSPEL 121 GNOSIS 122 HINDUISM 123 HUMANISM 124 INDEPENDENT 125 JAINISM 126 MAHAYANA 127 MEDITATION 128 MESSIANIC JUDAISM 129 MITRAISM 130 NEW AGE 131 NON-ROMAN CATHOLIC 132 OCCULT 133 ORTHODOX 134 PAGANISM 135 PROCESS, THE 136 REFORMED/PRESBYTERIAN 137 SATANISM 138 SCIENTOLOGY 139 SHAMANISM 140 SHIITE (ISLAM) 141 SHINTO 142 SIKISM 143 SPIRITUALISM 144 SUNNI (ISLAM) 145 TAOISM 146 THERAVADA 147 UNIVERSAL LIFE CHURCH 148 VAJRAYANA (TIBETAN) 149 VEDA 150 VODOO 151 WICCA 152 YAOHUSHUA 153 ZOROASTRIANISM 154 ASKED BUT DECLINED TO ANSWER	

Field # and Name	Description	Technical Description
727.802,13 EMPLOYMENT STATUS	<p>Patient's current employment status</p> <p>Values:</p> <p>1 = Employed Full Time 2 = Employed Part Time 3 = Not Employed 4 = Self Employed 5 = Retired 6 = Active Military Duty 9 = Unknown</p>	Using the patient pointer (DFN), EMPLOYMENT STATUS data is derived from the EMPLOYMENT STATUS field (#.31115) in the PATIENT file (#2).
727.802,14 HEALTH INSURANCE	<p>Identifies if patient is covered by health insurance</p> <p>Values:</p> <p>Y = Yes N = No Unknown</p>	Using the patient pointer (DFN), a call is made to the Integrated Billing API, INSURED^IBCNS1. The API returns 1 if the patient is insured or 0 if the patient is not insured.
727.802,15 STATE	Federal Information Processing Standard (FIPS) numeric code for the state where the patient resides.	Using the patient pointer (DFN), STATE data is derived from the STATE field (#.115) in the PATIENT file (#2) which points to the STATE file (#5). For the STATE file entry, data transmitted is the two character VA STATE CODE, field (#2).
727.802,16 COUNTY	The FIPS numeric code for the county where the patient resides	Using the patient pointer (DFN), COUNTY data is derived from the COUNTY field (#.117) in the PATIENT file (#2). The data transmitted is the three character VA COUNTY CODE field (#2) within the COUNTY field (#3) multiple of the STATE file (#5).
727.802,17 ZIP+4	The zip code for where the patient resides using format of nnnnn-nnnn. The five-character zip code is provided if zip + 4 is not available.	Using the patient pointer (DFN), ZIP CODE data is derived from the ZIP+4 field (#.1112) PATIENT file (#2).

Field # and Name	Description	Technical Description
727.802,18 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to National Patient Care Database (NPCD) Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC - VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	<p>Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.</p>
727.802,19 VETERAN	<p>Patient's Veteran status</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Is a Veteran</li> <li>N = Is not a Veteran</li> </ul>	<p>Using the patient pointer (DFN), VETERAN data is derived from the VETERAN (Y/N) field (#1901) in the PATIENT file (#2). The status indicator is returned by SVC^VADPT.</p>
727.802,20 VIETNAM	<p>Indicates if patient claims to be a Vietnam Veteran</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Yes</li> <li>N = No</li> <li>Unknown</li> </ul>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. -DFN field (4) in the ADMISSION EXTRACT file (#727.802), VIETNAM data is derived from the VIETNAM SERVICE INDICATED field (.32101) in the PATIENT file (#2).</p>
727.802,21 AGENT ORANGE STATUS	<p>Indicates whether patient was exposed to Agent Orange</p> <ul style="list-style-type: none"> <li>Y = Patient was exposed to Agent Orange</li> <li>N = Patient not exposed to Agent Orange</li> <li>U = Unknown</li> </ul>	<p>Derived from the PATIENT file (#2), AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.</p>
727.802,22 RADIATION STATUS	<p>Indicates if patient claims exposure to ionizing radiation</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Patient claims exposure to ionizing radiation</li> <li>N = Patient does not claim exposure to ionizing radiation</li> <li>Unknown</li> </ul>	<p>Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.</p>

Field # and Name	Description	Technical Description
727.802,23 POW STATUS	Indicates if patient was confined as a Prisoner of War  Values: Y = Patient was confined as a Prisoner of War N = Patient was not confined as a Prisoner of War Unknown	Derived from the PATIENT file (#2) POW STATUS INDICATED field (#.525). The status indicator is returned by SVC^VADPT.
727.802,24 PERIOD OF SERVICE	Indicates the period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.  Values: A = Army-Active Duty B = Navy, Marine-Active Duty C = Air Force-Active Duty D = Coast Guard- Active Duty E = Retired, Uniformed Services F = Medical Remedial Enlist G = Merchant Seaman-USPHS H = Other USPHS Beneficiaries I = Observation/Examination J = Office of Workers Comp K = Job Corps/Peace Corps L = Railroad Retirement M = Beneficiaries -Foreign Government N = Humanitarian (Non-Vet) O = Champus Restore P = Other Reimbursement. (Non-Vet) Q = Other Federal Dependant R = Donors (Non-Vet) S = Special Studies (Non-Vet) T = Other Non-Veteran U = CHAMPVA-Spouse, Child V = CHAMPUS W = Czechoslovakia/Poland Svc X = Persian Gulf War Y = CAV/NPS Z = Merchant Marine 0 = Korean 1 = World War I 2 = World War II 3 = Spanish American 4 = Pre-Korean 5 = Post-Korean 6 = Operation Desert Shield 7 = Vietnam ERA 8 = Post-Vietnam 9 = Other or None	Derived from the PERIOD OF SERVICE field (#.323) in the PATIENT file (#2). The data is derived from the CODE field (#.03) in the PERIOD OF SERVICE file (#21). This code is a single alphanumeric character.
727.802,25 MEANS TEST	The current means test category for this patient  Values: A = Category A B = Category B C = Category C P = Pending Adjudication R = Requires Means Test N = Means Test not Required E = Exempt I = Incomplete L = No Longer Applicable M = Non-Exempt	Using the patient pointer (DFN), MEANS TEST data is derived from the CURRENT MEANS TEST STATUS field (#.14) in the PATIENT file (#2). This field is a pointer to the MEANS TEST STATUS file (#408.32). Using the means test pointer, the data is derived from the CODE field (#.02) in the MEANS TEST STATUS file (#408.32).

Field # and Name	Description	Technical Description
727.802,26 MARITAL STATUS	Patient's expressed marital status.  Values: 1 = Divorced 2 = Married 4 = Widow/Widower 5 = Separated 6 = Never Married 7 = Unknown	Using the patient pointer (DFN), MARITAL STATUS data is derived from the MARITAL STATUS field (#.05) in the PATIENT file (#2). MARITAL STATUS is a pointer to the MARITAL STATUS file (#11).
727.802,27 WARD	Current ward where the patient is located.	Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), WARD data is derived from the WARD LOCATION field (#.06) in the PATIENT MOVEMENT file (#405). This ward data is a pointer to the WARD LOCATION file (#42). Using the ward pointer, the data is derived from the HOSPITAL LOCATION FILE POINTER field (#44) in the WARD LOCATION file (#42) which is a pointer to the HOSPITAL LOCATION file (#44).
727.802,28 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.	Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), TREATING SPECIALTY data is derived from the FACILITY TREATING SPECIALTY field (#.09) in the PATIENT MOVEMENT file (#405). This facility treating specialty data is a pointer to the FACILITY TREATING SPECIALTY file (#45.7). Using the SPECIALTY field (#1) in the FACILITY TREATING SPECIALTY file (#45.7), the pointer to the SPECIALTY file (#42.4) is obtained. Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.802,29 ATTENDING PHYSICIAN	The attending physician assigned to this patient at the time of admission.  Value is an IEN preceded by "2".	Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), ATTENDING PHYSICIAN data is derived from the ATTENDING PHYSICIAN field (#.19) in the PATIENT MOVEMENT file (#405). This attending physician data is a pointer to the NEW PERSON file (#200).
727.802,30 MOVEMENT FILE #	A number used as an index into the patient movement file.	Pointer to the PATIENT MOVEMENT file (#405). Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), this is a pointer to the file (#405) record for the patient's admission.
727.802,31 DRG	The VistA Diagnostic Related Group (DRG) for this admission.  Value from DRG file (#80.2)	Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), DRG data is derived from the PTF ENTRY field (#.16) in PATIENT MOVEMENT file (#405). This PTF entry data is a pointer to the PTF file (#45). It uses the TRANSFER DRG field (#20) within the 501 field (#50) multiple in the PTF file (#45) to obtain the pointer value to the DRG file (#80.2).

Field # and Name	Description	Technical Description
727.802,32 PRINCIPAL DIAGNOSIS	The International Classification of Disease code for this admission.  Value from ICD DIAGNOSIS file (#80)	Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), DIAGNOSIS data is derived from the PTF ENTRY field (#.16) in the PATIENT MOVEMENT file (#405). This PTF entry data is a pointer to the PTF file (#45). Uses the ICD 1 field (#5) within the 501 field (#50) multiple in the PTF file (#45) to obtain the pointer value to the ICD DIAGNOSIS file (#80). This ICD diagnosis pointer value is used to pull the DIAGNOSIS data from the CODE NUMBER field (#.01) in the ICD DIAGNOSIS file (#80).
727.802,33 TIME	The time when this admission occurred  Format: HHMMSS	PATIENT MOVEMENT file (#405) DATE/TIME field (#.01). This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default.
727.802,34 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the DATE/TIME field (#.01) from the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number in the NEW PERSON file (#200).
727.802,35 RACE	Observed Race Code for this patient. In compliance with OBM instructions, field is no longer updated in VistA. Values remain in VistA and are posted to DSS in case RACE1 field is not populated. See also RACE 1.  Only a single value is allowed.  Values: 3 = American Indian or Alaska Native A = Asian B = Black or African American D = Declined to Answer H = Native Hawaiian or Other Pacific U = Unknown by Patient W = White Null	Using the patient pointer (DFN), RACE data is shown as the ABBREVIATION field (#2) of the RACE file (#10) entry pointed to by the RACE field (#.06) in the PATIENT file (#2).
727.802,36 PRIMARY WARD PROVIDER	The provider assigned to the ward where the patient is located at the time of admission.  Value is IEN preceded by 2.	Derived from the PRIMARY CARE PHYSICIAN field (#.08) associated with the PATIENT MOVEMENT file (#405) record for the Treating Specialty Change record related to the Admission record. The value obtained is a pointer to the NEW PERSON file (#200).
727.802,37 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from SE(\$GETICN^MPIF001(DFN), "V" )

Field # and Name	Description	Technical Description
727.802,38 DSS DEPT.	The DSS Department code for the ward associated with the admission movement record. Must contain at least four characters to be a valid code. May be NULL.	This code is found in the DSS WARD file (#727.4) using the value of the WARD LOCATION field (#.06) of the PATIENT MOVEMENT file (#405) record for the patient's admission movement. The value found in WARD LOCATION is a pointer to the WARD LOCATION file (#42). Each record in file (#727.4) has a (#.01) field which points to a record in file (#42), and the internal entry number of the File (#727.4) is set to be the same as the record in file (#42) to which it points. Therefore, the WARD LOCATION field (#.06) can be used as a pointer to file (#727.4).
727.802, 39 PLACEHOLDER	Currently Null	Currently Null
727.802,40 PLACEHOLDER	Currently Null	Currently Null
727.802, 41 PLACEHOLDER	Currently Null	Currently Null
727.802,42 ADMISSION ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to National Patient Care Database (NPCD) Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC - VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.
727.802, 43 MST STATUS	<p>The Military Sexual Trauma (MST) status of a patient on the date of the patient's admission</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Screened, reports MST</li> <li>N = Screened, does not report MST</li> <li>D = Screened, declines to answer</li> </ul>	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients' MST status is stored in the MST STATUS field (#3). A call is be made to \$\$GETSTAT^DGMSTAPI (DFN, DGDTE) using the DFN in the PATIENT NO. DFN field (#4) and the date in the day field
727.802,44 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).



Field # and Name	Description	Technical Description
727.802,45 SHARING AGREEMENT PAYOR	An indicator used for patients participating in sharing agreements.  Values: A = Sharing Agreement B = TRICARE C = CAT C / Category C D = CHAMPVA E = CHAMPUS NULL	The ALIAS sub-field (#.01) of the ALIAS multiple field (#1) of the PATIENT file (#2) is used to indicate a patient who participates in a sharing agreement. If the (#.01) field contains any one of the specified key words, then the patient is considered to be included for Sharing Agreement information.  Field (#.01) must contain any one of the following key words: SHARING AGREEMENT CHAMPVA TRICARE CAT C CATEGORY C
727.802,46 SHARING AGREEMENT INSURANCE	Indicates the first insurer for patients who participate in sharing agreements.  .	Data is taken from the INSURANCE TYPE sub-field (#.01) of the INSURANCE TYPE field (#.3121), sub-file (#2.312), of the PATIENT file (#2). This is a pointer value for the INSURANCE COMPANY file (#36). Only the first insurance found in the multiple field is used. The data is stored as free text.
727.802,47 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.802, 48 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. This field holds the VA codes associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.802, 49 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by "2".	A standard unique life-long identifier of the primary care provider. This field has a length of fifteen characters. The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.802, 50 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Derived from the NEW PERSON file (#200), field (#5): file (#8932.1). Active Person Class is determined by \$\$GET^XUA4A72 (PERS, DATE), where PERS is the IEN from file (#200).
727.802, 51 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.802,52 DOM, PR RTP AND SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes
727.802,53 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the Enrollment Status found in this extract. PATIENT ENROLLMENT file (#27.11) CATEGORY (DFN, STATUS)
727.802, 54 ENROLLMENT STATUS	Patient's enrollment status  Values: 1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.802, 55 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".

Field # and Name	Description	Technical Description																
727.802, 56 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.																
727.802, 57 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator Y = Patient is an Observation Patient. N = Patient is not an Observation Patient.	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the first 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.																
727.802, 58 ENCOUNTER NUMBER	<p>The unique number assigned for DSS to each patient admission or clinic visit.</p> <p>The number is left justified in the field and is determined by the following: <u>Inpatients</u> - the concatenation of SSN + Admit Date + letter I <u>Outpatients</u> - the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value <u>Observation Encounters</u> - receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty.</p> <p>The observation treating specialty to stop code translation is:</p> <table><tr><th>Treating Specialty</th><th>Stop Code</th></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the ADM extract, all encounter numbers are for inpatients, except observation cases. Both follow the rules detailed in the paragraph above.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.802, 59 AGENT ORANGE LOCATION	Indicates the location where the patient was exposed to Agent Orange.  Values: K = Korean DMZ V = Vietnam	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT FILE (#2)																

Field # and Name	Description	Technical Description
727.802, 60 PRODUCTION DIVISION CODE	Identifies the division/facility where the patient is located.	Data comes from the WARD LOCATION field (#.06) in the PATIENT MOVEMENT file (#405). This value is a pointer to the WARD LOCATION file (#42) which in turn is used to get the DIVISION field (#.015) in the WARD LOCATION file (#42), a pointer to the MEDICAL CENTER DIVISION file (#40.8). This value is then used to call the API GETDIV^ECXDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).
727.802, 61 POW LOCATION	If POW Status is indicated, then this is the POW confinement location/period.  Values: 1 = World War I 2 = World War II - Europe 3 = World War II - Pacific 4 = Korean 5 = Vietnam 6 = Other	Derived from the PATIENT file (#2) POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.
727.802, 62 SOURCE OF ADMISSION	Indicates where the admission took place  Values: 1 = Hospital 2 = NHC 3 = Domiciliary 4 = Military Hospital 5 = Community Nursing Home	Obtained via the PTF file (#2), SOURCE OF ADMISSION field (#20), which is a pointer to the SOURCE OF ADMISSION file (#45.1), PLACE OF ADMISSION field (#11)
727.802, 63 HEAD & NECK CANCER INDICATOR	Identifies whether patient has head and/or neck cancer Y = Yes N = No	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), using API \$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)
727.802, 64 ETHNICITY	The patient's ethnicity code Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.  Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2). The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to null.

Field # and Name	Description	Technical Description
727.802, 65 RACE 1	<p>Self-reported by patient as recorded in VistA patient file. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.</p> <p>Values:            3 = American Indian or Alaska Native            8 = Asian            9 = Black or African American            A = Native Hawaiian or other Pacific Islander            B = White            C = Declined to answer            D = Unknown by Patient            Null</p>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), RACE 1 is derived from the PTF VALUE field (#5) of the RACE file (#10) pointed to by the RACE INFORMATION field (#.01) of the RACE INFORMATION sub file (#2.02) of the PATIENT file (#2).</p> <p>Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), is included in the RACE 1 field. If any of the RACE INFORMATION values returned are "C" (DECLINED TO ANSWER) that will be the only value included in the RACE1 field.</p>
727.802, 66 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:            1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions.            2 = VA-rated service-connected disabilities 30% or 40%            3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151            4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled            5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs            6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)            7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays            8 = Others</p>	<p>Derives the enrollment priority group and the enrollment priority subgroup from the PATIENT ENROLLMENT file (#27.11)</p>

Field # and Name	Description	Technical Description
	<p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.802, 67 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U"
727.802, 68 PATIENT TYPE	<p>Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.</p> <p>Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare</p>	Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)

Field # and Name	Description	Technical Description
727.802, 69 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 - qualifies as a CV 0 - does not qualify as a CV -1 - bad DFN or date
727.802, 70 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2nd piece is the Combat Vet End Date.
727.802, 71 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 - vet was eligible on date specified (or DT) 0 - vet was not eligible on date specified (or DT)
727.802, 72 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes - Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROOT".
727.802, 73 ATTENDING PHYSICIAN PC	The VA code of the Person Class of the Attending Physician as of the date of this extract record. (In DSS this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly 7 characters.	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from NEW PERSON file (#200).
727.802, 74 PRIMARY WARD PROVIDER PC	The VA code of the Person Class of the Primary Ward Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from NEW PERSON file (#200).

Field # and Name	Description	Technical Description
727.802, 75 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions.  Y = Yes N = No U = Unknown	Derived from the SOUTHWEST ASIA CONDITIONS field (#.322013) in the Patient file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT.
727.802, 76 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.802, 77 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: Y = Yes N = No Null	Using the VISIT FILE ENTRY field (.27) in the PATIENT MOVEMENT file (#405), a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the agent orange indicator stored in the AGENT ORANGE EXPOSURE field (#80002) in the VISIT file (#9000010).
727.802, 78 ENCOUNTER SWAC	Indicates the appropriate response for exposure to Southwest Asia conditions as related to this patient's episode of care.  Values: Y = Yes N = No Null	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405), a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Southwest Asia conditions indicator stored at the SW ASIA CONDITIONS field (#80004) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "PGE".
727.802, 79 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: Y = Yes N = No Null	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405), a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the head/neck cancer data stored at the HEAD AND/OR NECK CANCER field (#80006) in the VISIT file (#9000010).
727.802, 80 ENCOUNTER MST	Indicates whether service provided during this patient encounter is related to military sexual trauma.  Values: Y = Yes N = No Null	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the military sexual trauma data stored at the MILITARY SEXUAL TRAUMA field (#80005) in the VISIT file (#9000010)..
727.802, 81 RADIATION ENCOUNTER INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to ionizing radiation.  Values: Y = Yes N = No U = Unknown Null	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405), a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the ionizing radiation exposure indicator stored in the IONIZING RADIATION EXPOSURE field (#80003) in the VISIT file (#9000010).



Field # and Name	Description	Technical Description
727.802, 82 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	Derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2).
727.802, 83 OEF/OEF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.802, 84 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.802, 85 ATTENDING PHYSICIAN NPI	A standard, unique life-long identifier of the attending physician	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.802, 86 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.802, 87 PRIMARY WARD PROVIDER NPI	A standard, unique life-long identifier of the primary ward provider	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.802, 88 ADMIT OUTPATIENT TX FLAG	This field contains the patient's source of admission flag. YES, if admit outpatient treatment ('1P'). NO, otherwise.  1 for Yes 0 for No Null	The value of this field is determined at the run time of the extract. It is set to 1 or YES when the PTF Code is "1P" (or Admit Type is "Direct", Place of Admission is "Hospital" and Name or Source of Admission is "Outpatient Treatment").
727.802, 89 COUNTRY CODE	The value is the code for the country associated with the address.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.

Field # and Name	Description	Technical Description
7 27,802,90 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>

Field # and Name	Description	Technical Description
727.802.91 ADMIT SOURCE	<p>This field contains the source of admission for the PTF entry. This is a two character code in the format of 1 numeric and 1 alphanumeric.</p> <p>Values: Field Value(s): PTF code Values: 1D = VA Nursing Home 1E = VA Domicillary 1G = Contract CNH (Under VA Auspices) 1H = Community Nursing Home not under VA auspices 1J = Govnt (non-Fed)_ Mental Hosp not under VA auspices 1K = All other non-VA Hosp not under VA auspices 1L = State Home (Dom or NHC) 1M = Other Direct 1P = Outpatient Treatment 1R = Research - Veteran 1T = Research Non-Veteran 2A = Non-Veteran other than Military 2B = Military Pers not directly from Milt Hosp 2C = Military Pers by transfer from a Milt Hosp 3A = Transfer in from another VA Hospital 3B = Transfer in from other Fed Hosp under VA ausp 3C = Trans in from any other non-VA Hosp under VA ausp 3D = Trans from VAMC to military fac. under VA ausp 3E = Trans from VAH-VAH-Cont Hos since 7/1/86 or Prior 4A = From a VA Hospital 4B = From VA Hospital on non-bed-care 4C = From VA Nursing Home Care Unit 4D = From another VA Dom 4E = Trans from Dom-Dom-Cont Hosp since 7/1/86 or prior 4F = From Community hospital under VA auspices 4G = From Community Hospital not under VA auspices 4H = From Community Nursing Home under VA auspices 4J = From Community Nursing Home not under VA auspices 4K = From State Home Dom 4L = From State Nursing Home Care 4M = From Military Hosp</p>	<p>Obtained via the PTF file (#45), SOURCE OF ADMISSION field (#20) which is a pointer to the SOURCE OF ADMISSION file (#45.1), PTF CODE field (#.01). This is up to three characters long to account for any PTF code field expansion.</p>

Field # and Name	Description	Technical Description
	<p>4N = From other Federal Hosp under VA ausp Clinic</p> <p>4P = From other federal hosp not under VA auspices</p> <p>4Q = From other gov hospi (non-fed) not underVA auspices</p> <p>4R = Other government hosp (non-fed) under VA auspices</p> <p>4S = Referred by Outpatient Clinic</p> <p>4T = Referred by Welfare Agency (local or regional)</p> <p>4U = Referred by national serv organ (local or reg)</p> <p>4W = Self-Walkin</p> <p>4Y = All other sources, unknown or no info</p> <p>5A = VA Medical Center</p> <p>5B = Non-VA Hospital under VA auspices</p> <p>5C = VA Domicillary</p> <p>5E = TRANSFER IN FROM ANOTHER VA NHC</p> <p>5F = TRANSFER IN FROM COMMUNITY HOME UNDER VA AUSPICES</p> <p>5G = DIRECT ADMISSION FROM ALL OTHER SOURCES</p>	

## #727.833 – BAR CODE MEDICATION ADMINISTRATION EXTRACT (BCM) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Bar Code Medication Administration extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.833,.01 SEQUENCE NUMBER	The record number for this extract entry.	The internal entry number (IEN) for this record. This entry is DINUMed.
727.833,1 YEAR MONTH	A six character string representing the year and the month for which this extract was performed.	The format is YYYYMM, and typically contains the current date unless the extract has been queued to run on a different date.
727.833,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract.	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.833,3 FACILITY	This field identifies the Facility Number from which this extract was run.	Using the NAME (#.01) field, which is a pointer to the INSTITUTION (#4) file, from the DSS EXTRACTS (#728) file, this field is derived from the STATION NUMBER (#99) field.
727.833,4 PATIENT NO. – DFN	An identifying number for the patient at the local site.	Derived from the PATIENT (#.01) field in the BCMA MEDICATION LOG (#53.79) file. PATIENT NO. - DFN is a pointer to the NAME (#.01) field of the PATIENT (#2) file. This data represents the patient DFN.
727.833,5 SSN	This is the patient's social security number.	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN (#4) field in this file, SSN data is derived from the SOCIAL SECURITY NUMBER (#.09) field in the PATIENT (#2) file. "Test" patient status is determined in PAT^ECXUTL3. Any patient with an SSN beginning with "00000" will not be included in the extract.
727.833,6 NAME	The first four characters of the patient's last name.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.

Field # and Name	Description	Technical Description
727.833,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this extract entry. Values: I = Inpatient O = Outpatient	This field formerly contained the pointer to the LOCATION TYPE (#40.9) file which was either 1=Outpatient or 3=Inpatient. Pointing to this file has become obsolete, and in FY2002 this field has been changed.
727.833,8 DAY	An 8-character date on which the patient was administered medication. Format: YYYYMMDD	This field is taken from the ACTION DATE/TIME (#.06) field from the BCMA MEDICATION LOG (#53.79) file. It is parsed so that only the date portion is stored in YYYYMMDD format. The time portion of the ACTION DATE/TIME is stored in the TIME (#29) field of this file.
727.833,9 DATE OF BIRTH	The patient's date of birth represented by an 8 character numeric string.	The data is derived by using the Patient No. - DFN (#4) field of this file to retrieve the DATE OF BIRTH (#.03) field from the PATIENT (#2) file. If Date of Birth cannot be determined, then January 1, 1942, is used as default. The data element is always exactly 8 numeric characters in length. The Format is YYYYMMDD.
727.833,10 SEX	Patient's gender  Values: M = Male F = Female	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN (#4) field in this file, this data is derived from the SEX (#.02) field in the PATIENT (#2) file.
727.833,11 STATE	Federal Information Processing Standard (FIPS) numeric code for the state where the patient resides.	This is a numeric code (2 characters in length) which many packages transmit as to Austin to represent the state a patient resides or receives treatment in.
727.833,12 COUNTY	The FIPS numeric code for the county where the patient resides	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN (#4) field in this file, data is taken from the COUNTY (#.117) field in the PATIENT (#2) file, which points to a subfile record in the COUNTY (#3) multiple field of the STATE (#5) file. The three character VA COUNTY CODE (#2) field within the COUNTY (#3) multiple field is used.
727.833,13 ZIP +4	The zip code for where the patient resides using format of nnnnn-nnnn. The five-character zip code is provided if zip + 4 is not available.	Patient's Zip code which is pulled from THE ZIP+4 (#.1112) field of the PATIENT (#2) file.
727.833,14 COUNTRY CODE	This is the 3 character code of the Patient's Country of residence.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file which is pointed to by the COUNTRY (#.1173) field in the PATIENT (#2) file.

Field # and Name	Description	Technical Description
727.833,15 WARD	This is the ward location of the patient when he received the medication.	This field is initialized to a null, indicating an outpatient status. A call to IN5^VADPT using the patient IEN and the event date (DAY (#8) field in FM format) is made. If data is returned identifying an inpatient episode, the value of VAIP(5), ward location, is used to get the HOSPITAL LOCATION FILE POINTER (#44) field in the WARD LOCATION (#42) file which is a pointer to the HOSPITAL LOCATION (#44) file.
727.833,16 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.	This field is initialized to a null, indicating an outpatient status. A call to IN5^VADPT using the patient IEN and the event date (DAY (#8) field in FM format) is made. If data returns a patient movement number (indicating inpatient status), then the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY (#45.7) file, is used to get the SPECIALTY (#1) field which points to the SPECIALTY (#42.4) file. Then, the PTF Code (#7) field of the SPECIALTY (#42.4) file is obtained and stored instead of the IEN of the specialty.
727.833,17 PROVIDER	The provider assigned to this patient or entity.	Derived by calling API, EN^PSJBCMA1, using the ORDER REFERENCE NUMBER (#26) from this file. Provider will be returned in the 1st piece of the returning ^TMP(PTMP,\$J,1) global. It is extracted from the PHARMACY PATIENT (#55) File by either the PROVIDER (#1) field of its Unit Dose (#62) multiple. Or the PROVIDER (#.06) field of its IV (#100) multiple. The provider IEN is a pointer to the NEW PERSON (#200) File.
727.833,18 PROVIDER PERSON CLASS	The VA Code of the Person Class of the Primary Care Provider associated with this record.	The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record. The VA Code is always of the form "V" _six numeric digits; exactly 7 characters in length.
727.833,19 PROVIDER NPI	A standard unique life-long identifier of the individuals providing health care services.	The qualified identifier shall be retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.833,20 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient.	Using the ACTION DATE/TIME (#.06) field from the BCMA MEDICATION LOG (#53.79) file and the patient pointer (DFN) stored in the PATIENT NO. - DFN (#4) field in this file, a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON (#200) file. A "2" is prefixed to the pointer value to indicate that the source file is the NEW PERSON (#200) file. The customer has come to expect the "2" as a prefix to this field in other extracts. The routine that accomplishes this is PRIMARY^ECXUTL2.
727.833,21 PRIMARY CARE PROVIDER PC	VA Code of the Person Class of the Primary Care Provider associated with this record.	The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record. The VA Code is always of the form "V" _six numeric digits; exactly 7 in length.
727.833,22 PRIMARY CARE PROVIDER NPI	A standard unique life-long identifier of the primary care provider.	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.833,23 PRIMARY CARE TEAM	The primary care team assigned to this patient.	Using the DAY (#8) field (in FM format) and the patient pointer (DFN) stored in the PATIENT NO. - DFN (#4) field in this file, a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM (#404.51) file. Only the pointer to the TEAM (#404.51) file is transmitted.
727.833,24 ORDERING STOP CODE	The field contains the stop code with the order.	For outpatients the stop code is the primary stop code for the clinic (first 3 characters of the DSS Identifier field of this extract). If none exists, the value is set to null. For observation patients the stop code is translated using the following table. Treating Specialty    Observation Code 18                      293 23                      295 24                      290 36                      296 41                      294 65                      291 94                      292 1J                      297
727.833,25 PLACE ORDER NUMBER	This is the order number of the Patient's Barcode Medication Administration record.	This is the IEN of the BCMA MEDICATION LOG (#53.79) file. Derived from using the 'AADT' cross reference of the BCMA MEDICATION LOG (#53.79) file, based on the start and end dates of the extract.
727.833,26 ORDER REFERENCE NUMBER	Contains the IEN to the actual order in the PHARMACY PATIENT (#55) followed by a U for Unit Dose or V for IV.	This field is derived by using the ORDER REFERENCE NUMBER (#.11) field of the BCMA MEDICATION LOG (#53.79) file, as pointed to by the PLACE ORDER NUMBER (#25) field of this file.
727.833,27 ROUTE	This is the route of administration for Unit Dose or IV medication for a patient.	This field is extracted from the PHARMACY PATIENT (#55) File by either the MED ROUTE (#3) field of its Unit Dose (#62) multiple. Or, the MED ROUTE (#132) field of its IV (#100) multiple.
727.833,29 ACTION TIME	This field contains the actual time the medication was administered.	This field is taken from the ACTION DATE/TIME (#.06) field from the BCMA MEDICATION LOG (#53.79) file. It is parsed so that only the time portion of the field is stored in HHMMSS format. The date portion is stored in the DAY (#8) field of this file.
727.833,30 COMPONENT CODE	The COMPONENT CODE contains either the dispensed drug, IV additive or IV solution that was administered for this patient.	This is a variable pointer field used to identify either the DRUG (#50), IV ADDITIVES (#52.6), or the IV SOLUTIONS (#52.7) files.  Enter one of the following:  A.EntryName to select a IV ADDITIVES (#52.6) file. D.EntryName to select a DRUG (#50) file. S.EntryName to select a IV SOLUTIONS (#52.7) file.  The COMPONENT TYPE (#34) field will contain the variable pointer letter (A=IV ADDITIVES, D=DRUG, S=IV SOLUTIONS) from this field
727.833,31 COMPONENT DOSE ORDERED	COMPONENT DOSE ORDERED contains either the dispensed drug, IV additive, or IV solution dose ordered, to which, this medication was administered for this patient.	Its value is free text derived from the DOSE ORDERED (#.02) field of the subfile #.5, #.6, #.7 multiples of the BCMA MEDICATION LOG (#53.79) file.



Field # and Name	Description	Technical Description
727.833,32 COMPONENT DOSE GIVEN	The COMPONENT DOSE GIVEN contains either the dispensed drug, IV additive, or IV solutions dose given, to which, this medication was administered for this patient.	This field's value is free text derived from the DOSE GIVEN (#.03) field of the subfile #.5, #.6, #.7 multiples of the BCMA MEDICATION LOG (#53.79) file.
727.833,33 COMPONENT UNITS	The Component Units contains either the dispensed drug, IV additive, or IV solutions unit of administration, to which this medication was administered for this patient.	The Component Units value is free text derived from the Unit of Administration (#.04) field of the subfile #.5, #.6, #.7 multiples of the BCMA Medication Log (#53.79) File.
727.833,34 COMPONENT TYPE	The Component Type is determined by the value destination of the Component Code. Values: D = Dispensed Drug A = Additives S = Solutions	This field is derived based on the COMPONENT CODE (#30) field of this file. If the component code is from the DRUG (#50) file, it will be "D", if it's from the IV ADDITIVES (#52.6) file it will be "A", and if it is from IV SOLUTIONS (#52.7) file it will be "S".
727.833,35 ACTION STATUS	This is the status of the medication administration. 'G' FOR GIVEN; 'S' FOR STOPPED; 'C' FOR COMPLETED;	This field is derived from the ACTION STATUS (#.09) field of the BCMA MEDICATION LOG (#53.79) file.
727.833,36 ADMINISTRATION MEDICATION	ADMINISTRATION MEDICATION is a pointer to ORDERABLE ITEM (#50.7) containing the medication entered for the order.	This field is derived from the ADMINISTRATION MEDICATION (#.08) field of the BCMA MEDICATION LOG (#53.79) File.
727.833,37 SCHEDULED ADMINISTRATION DATE	If a continuous order this field will contain the actual administration date the medication was ordered for.	Derived from the date value of the SCHEDULED ADMINISTRATION TIME field #.13 of the BCMA MEDICATION LOG (#53.79) File. It is parsed so that only the date portion is stored in format YYYYMMDD.
727.833,38 SCHEDULED ADMINISTRATION TIME	If a continuous order this field will contain the actual administration time the medication was ordered for.	The time is derived from the time value of the SCHEDULED ADMINISTRATION TIME (#.13) field of the BCMA MEDICATION LOG (#53.79) File. It is parsed so that only the time portion is returned in format HHMMSS.
727.833,39 ORDER SCHEDULE	This is the schedule type of the order 'C' FOR CONTINUOUS 'P' FOR PRN 'O' FOR ONE-TIME 'OC' FOR ON-CALL	Derived from the SCHEDULE ORDER field #.12 of the BCMA MEDICATION LOG (#53.79) File.
727.833,40 IV UNIQUE ID	This is the unique ID number of an IV bag, which is generated from Inpatient Medications.	Derived from the IV UNIQUE ID field #.26 of the BCMA MEDICATION LOG (#53.79) File.
727.833,41 INFUSION RATE	This is the infusion rate for an IV bag, which is passed by Inpatient Medications.	The infusion rate is derived from the INFUSION RATE field #.35 of the BCMA MEDICATION LOG (#53.79) File.
727.833,42 PRODUCTION DIVISION CODE	This is the facility of the ward where the patient received medication.	Derived by getting the PATIENT DIVISION (#.03) field from the BCMA MEDICATION LOG (#53.79) File, which is a pointer, to the INSTITUTION (#4) File. This value is then used to call the API RADDIV^ECXDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).
727.833,43 DRUG IEN	This is the drug administered to the patient.	This field is derived from the COMPONENT CODE (#30) field of this file. If it's a dispensed drug, it is a copy of the pointer to the DRUG (#50) file. Otherwise, it's a copy of the GENERIC DRUG (#1) field from either the IV ADDITIVES (#52.6) or the IV SOLUTIONS (#52.7) file.

Field # and Name	Description	Technical Description
727.833,44 NDC	This is the National Drug Code for the drug/supply item in this order.	<p>For sites running a version of Inpatient Medications prior to V. 4.5: Derived from the NDC (#31) field in the DRUG (#50) file for the drug identified by the GENERIC DRUG (#1) field in either the IV ADDITIVES (#52.6) file for additives or the IV SOLUTIONS (#52.7) file for solutions.</p> <p>Using the "AC" cross reference on the IV STATS (#50.8) file and a ^TMP( array built from the "AC" cross reference, GENERIC DRUG is derived from the following:</p> <ul style="list-style-type: none"> <li>the IV DRUG (#.01) field,</li> <li>the TYPE (#6) field, and</li> <li>the IEN of the additive or solution for the IV DRUG within the IV DRUG multiple (#2) field of the DATE multiple (2#) field of the IV STATS (#50. ) file.</li> </ul> <p>For sites running Inpatient Medications V.4.5 or higher: Derived from the NDC (#31) field in the DRUG (#50) file.</p>
727.833,45 INVESTIGATIONAL (DEA SPECIAL HANDLING)	This field indicates whether the DEA has labeled the drug as investigational.	This field is derived by checking the DEA, SPECIAL HDLG (#3) field of the DRUG (#50) file. If that field contains the letter 'I', this field is set to 'I', otherwise it is NULL.
727.833,46 VA DRUG CLASSIFICATION	This is the VA Drug Classification for the item in this order.	This field is derived from the VA CLASSIFICATION (#2) field of the DRUG (#50) file.
727.833,47 MASTER PATIENT INDEX	Unique national VA patient identifier	This field is derived by calling the API \$\$GETICN^MPIF001 passing the Patient's IEN from the PATIENT (#2) file. Which is stored in this file as the Patient No. - DFN (#4) field. The API returns the first piece of the "MPI" cross reference.
727.833,48 DOM,PRRTP & SAARTP INDICATOR	<p>This indicates if the Patient is admitted to a DOM (Domiciliary Care), PRRTP (Psychosocial Residential Rehabilitation Treatment Program) or SARRTP (Substance Abuse Residential Rehabilitation Treatment Program) at time of service.</p> <p>Values:</p> <p>P = Gen. PRRTP T = PTSD PRRTP S = Dom PRRTP H = Homeless CWT/TR A = SA CWT/TR D = Domiciliary B = PTSD CWT/TR C = Gen. CWT/TR</p>	This field is derived by retrieving the DOM/PRRTP/SARRTP CODE (#2) field from the DSS TREATING SPECIALTY TRANSLATION (#727.831) file based on the Patient's admission site's SPECIALTY (#1) field in the FACILITY TREATING SPECIALTY (#45.7) file.
727.833,49 OBSERVATION PATIENT INDICATOR	This field indicates whether or not the patient is an Extended Outpatient.	This field is derived by retrieving the OBSERVATION PAT INDICATOR (#4) field of the DSS TREATING SPECIALTY TRANSLATION (#727.831) file.

Field # and Name	Description	Technical Description
727.833,50 ENCOUNTER NUMBER	The field is derived from the inpatient/outpatient status, SSN, day, treating specialty, observation patient indicator, and DSS identifier or feeder key values in the record.	<p>Determined by the following: If the IN/OUT PATIENT INDICATOR (#7) field = "I", the ENCOUNTER NUMBER is the Patient SSN concatenated with the DAY (#8) field (in format YYMMDD) of this file concatenated with the letter "I".</p> <p>If the IN/OUT PATIENT INDICATOR (#7) field is "O" and the OBSERVATION PATIENT INDICATOR (#49) field is "NO", then encounter is presumed to be an Outpatient Encounter and the ENCOUNTER NUMBER field is the SSN (#5) field concatenated with the DAY (#8) field (in Julian date format YYDDD) concatenated with the letters "PHA" which is constant for the BCMA Extract.</p> <p>If the IN/OUT PATIENT INDICATOR (#7) field is 'O' and the OBSERVATION PATIENT INDICATOR (#49) field is equal to "YES", then the ENCOUNTER NUMBER is the SSN (#5) field concatenated with the DAY (#8) field (in Julian format YYDDD) concatenated with the Ordering Stop Code (#24) field.</p> <p>*NOTE: The length of this field is based on SSN always being 9 characters in length, even though SSN (#5) field in this file can be 9 or 10 characters long. If an SSN is a pseudo SSN (ending with the letter "P" and being 10 characters long) the letter "P" is removed so that the field is 9 characters long.</p>
727.833,51 MEANS TEST	This field contains the Patient's Means Test status code. The means test determines veterans copay responsibilities and helps to determine enrollment priority.	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN (#4) field in this file, MEANS TEST data is derived from the CURRENT MEANS TEST STATUS (#.14) field in the PATIENT (#2) file. This field is a pointer to the MEANS TEST STATUS (#408.32) file. Using the means test pointer, the data is derived from the CODE (#.02) field in the MEANS TEST STATUS (#408.32) file.
727.833,52 ELIGIBILITY	Patient's Primary Eligibility converted to NPCD eligibility code	<p>Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8) which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1).</p> <p>The pointer value to file #8.1 is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD. This code is composed of two or three numeric characters.</p>

Field # and Name	Description	Technical Description
727.833,53 ENROLLMENT LOCATION	This is the Patient's Station number.	The PREFERRED FACILITY (#27.02) field of the PATIENT (#2) file is defined as the facility that the patient chooses to designate as his preferred location for care. The PREFERRED FACILITY (# 27.02) field is a pointer to the INSTITUTION (#4) file. From that file, the value in the STATION NUMBER (#99) field is used.
727.833,54 ENROLLMENT CATEGORY	Patient's enrollment category. Values: E = Enrolled N = Not Enrolled P = In Process	ENROLLMENT CATEGORY is derived from the standard call \$\$CATEGORY^DGENA4 using the INPUT patient DFN and the ENROLLMENT STATUS (#55) field.
727.833,55 ENROLLMENT STATUS	Patient's enrollment status. Values: 1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co-pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	ENROLLMENT STATUS is derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04).
727.833,56 ENROLLMENT PRIORITY	This field contains the enrollment priority group and the enrollment priority subgroup.	<p>ENROLLMENT PRIORITY field contains the enrollment priority group (#.07) field and the enrollment priority subgroup (#.12) field from the Patient Enrollment File #27.11.</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:</p> <p>'1' FOR GROUP 1 '2' FOR GROUP 2 '3' FOR GROUP 3 '4' FOR GROUP 4 '5' FOR GROUP 5 '6' FOR GROUP 6 '7' FOR GROUP 7 '8' FOR GROUP 8</p> <p>ENROLLMENT PRIORITY Subgroups determined for a patient enrollment include:</p> <p>'a' FOR 1 'c' FOR 3 'e' FOR 5 'g' FOR 7</p>

Field # and Name	Description	Technical Description
727.833,57 USER ENROLLEE	Indicates wheter a Veteran has user enrollee status for the current or future FY. Values: U = Yes Null = No (includes past date or no date)	User enrollee is determined by checking the Patient Enrollment (#27.11) file. When a user has a current or future fiscal year in the VistA User Enrollee Status (#.04) field the value is set to 'U' and Null if no date or a past year's value is contained. Determined by the use of an API: \$\$UESTAT^EASUSER where the Patient Identifier (DFN) is passed in.
727.833,58 ETHNICITY	Indicates the patient's Ethnicity, based on the PTF (Patient Treatment File) definitions	Using the patient pointer (DFN) ETHNICITY is derived from the PTF VALUE (#5) field of the ETHNICITY (#10.2) file pointed to by the ETHNICITY INFORMATION (#.01) field of the ETHNICITY INFORMATION (#2.06) subfile of the PATIENT (#2) file. The PTF VALUE (#5) field is just 1 character, this field holds up to 6 self-identified ethnicities.  The above will occur only if the METHOD OF COLLECTION (#.02) field of the ETHNICITY INFORMATION (#2.06) subfile is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY with be set to null.
727.833,59 RACE 1	This field is the Patient's race code(s). Valid PTF values are: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient	Using the patient pointer (DFN) this field is derived from the Patient Treatment File (PTF) VALUE (#5) field of the RACE (#10) file pointed to by the RACE INFORMATION (#.01) field of the RACE INFORMATION (#2.02) subfile of the PATIENT (#2) file. The PTF VALUE (#5) field is just 1 character, this field holds up to 6 self-identified races.  Only those RACE INFORMATION values in the RACE INFORMATION (#2.03) subfile where the METHOD OF COLLECTION (#.02) field is set to 1 (SELF-IDENTIFICATION), will be included in the RACE 1 field. If any of the RACE INFORMATION values returned is "C" (DECLINED TO ANSWER), that will be the only value included in the RACE1 field.
727.833,60 VETERAN	The field indicates if the Patient is a Veteran or not. Values: Y = Veteran N = Not Veteran	Using the patient pointer (DFN) this field is derived by reading the VETERAN (Y/N)? (#1901) field in the PATIENT (#2) file.
727.833,61 PERIOD OF SERVICE	The period of service, which best classifies this patient based on eligibility code	This field is derived by pulling the Period of Service (#.323) field from the Patient (#2) file. The Period of Service (#.323) field is a pointer to the Period of Service (#21) file. This field is derived from the CODE (#.03) field of that file.
727.833,62 POW STATUS	This field indicates if the patient was ever a Prisoner Of War (POW). Values: Y = Yes POW N = No POW U = Unknown	This field is derived by checking the POW STATUS INDICATED? (#.525) field in the PATIENT (#2) file. The status indicator is returned by SVC^VADPT.
727.833,63 POW LOCATION	This is the location/period where the patient was a POW.	This field is a pointer derived by reading the POW CONFINEMENT LOCATION (#.526) field from the PATIENT (#2) file. The location is retrieved by calling SVC^VADPT.

Field # and Name	Description	Technical Description
727.833,64 RADIATION STATUS	This field indicates if the Patient was exposed to Ionizing radiation. Values: Y = Ionizing Radiation exposure N = No Ionizing Radiation exposure U = Unknown	The field is derived by pulling the RADIATION EXPOSURE INDICATED? (#.32103) field from the PATIENT (#2) file. The status indicator is returned by calling SVC^VADPT.
727.833,65 AGENT ORANGE STATUS	This field indicates a patient's Agent Orange Exposure status.	The field is derived by pulling the AGENT ORANGE EXPOS. INDICATED? (#.32102) field from the PATIENT (#2) file. The status indicator is returned by SVC^VADPT.
727.833,66 AGENT ORANGE LOCATION	If this AGENT ORANGE indicator is yes, then this field indicates where the exposure took place. Values: K = Korean DMZ V = Vietnam	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION (#.3213) field of the PATIENT (#2) file. The value is returned from the API SVC^VADPT.
727.833,67 PURPLE HEART INDICATOR	This field Indicates whether or not a patient is a Purple Heart recipient. Values: Y = Yes N = No	The Purple Heart Indicator is derived by calling SVC^VADPT which returns the CURRENT PH INDICATOR (#.531) field from the PATIENT (#2) file.
727.833,68 MST STATUS	This field indicates if the patient suffered Military Sexual Trauma (MST).  'Y' FOR Yes, Screened reports MST; 'N' FOR No, Screened does not report MST; 'U' FOR Unknown, not screened; 'D' FOR Screened Declines to answer;	The field will be derived by pulling the MST STATUS (#3) field from the MST HISTORY (#29.11) file. A call will be made to \$\$GETSTAT^DGMSTAPI passing the Patient Identifier (DFN).
727.833,69 CNH/SH STATUS	This field indicates if the Patient is in a Contract Nursing Home (CNH). Values: Y = Yes N = No	This field is determined by pulling the CNH CURRENT (#148) field from the PATIENT (#2) file.
727.833,70 HEAD & NECK CANCER INDICATOR	Identifies whether treatment was for Head and/or Neck Cancer. Indicator is "Y" for yes the treatment was for Head/Neck Cancer or "N" for no it is not related to Head/Neck cancer.	This indicator is derived by passing the patient pointer (DFN) to the API \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX (#2.01) field of the NOSE AND THROAT RADIUM HISTORY (#28.11) file.
727.833,71 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard And Defense (SHAD). Values: Y = Yes N = No	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN). Which returns the PROJ 112/SHAD (#.32115) field from the Patient (#2) file.
727.833,72 PATIENT TYPE	PATIENT TYPE refers to the various types of patient which might be seen at a VA facility. AC= ACTIVE DUTY AL= ALLIED VETERAN CO= COLLATERAL EM= EMPLOYEE IN= INELIGIBLE MI= MILITARY RETIREE NO= NON-VETERAN (OTHER) NS= NSC VETERAN SC= SC VETERAN TR= TRICARE	Patient type is determined by the TYPE (#391) the TYPE OF PATIENT (#391) file entries. Every patient added to the system must have a TYPE specified. It best classifies a patient as one of the following values listed below. PATIENT TYPE field value shall contain only the first two characters:

Field # and Name	Description	Technical Description
727.833,73 CV STATUS ELIGIBILITY	This field indicates whether or not a patient can be considered a Combat Veteran (CV) at the time of treatment. Values: Y = Yes E= Eligibility expired	The CV STATUS ELIGIBILITY is determined by the use of API \$\$CVEDT^DGCV (DFN, DAY (#8) field in FM format) that checks the Combat Vet End Date (#.5295) field from the Patient (#2) file to determine CV Status. API returns three pieces i.e. 1^3010106^0, the first piece is resolved as follows.  1 - qualifies as a CV 0 - does not qualify as a CV -1 - bad DFN or date  If this field is null it indicates that the patient is not eligible.
727.833,74 CV ELIGIBILITY END DATE	This field is the patient's Combat Veteran (CV) eligibility end date.	The CV ELIGIBILITY END DATE is determined by the use of API \$\$CVEDT^DGCV (DFN, DAY (#8) in FM format) that checks the Combat Vet End Date (#.5295) field from the Patient (#2) file to determine CV Status. The API returns three pieces (i.e. 1^3010106^0) the 2nd piece is the Combat Vet End Date which is stored in YYYYMMDD format.
727.833,75 ENCOUNTER CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns:  1 - vet was eligible on date specified (or DT) 0 - vet was not eligible on date specified (or DT)  Based on these returns, the value for this field is Y =Yes, or Null.	ENCOUNTER CV is determined by the use of API \$\$CVEDT^DGCV (DFN, DAY #(8) in FM format) that checks the Combat Vet End Date (#.5295) field, from the Patient (#2) file to determine CV Status using the DAY (#8) field. The API returns three pieces (i.e. 1^3010106^0).  The third piece returns:  1 - vet was eligible on date specified 0 – vet was not eligible on date specified  Based on these returns, the value for this field shall be Y =Yes, or null.
727.833,76 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes – Category 1 flag present and active  Otherwise, value is Null.	NATIONAL PATIENT RECORD FLAG is located in the PRF National Flag File (# 26.15). It is retrieved via an API \$\$GETACT^DGPFAPI (DFN,TARGET_ROOT.
727.833,77 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA).	This field is extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2).
727.833,78 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions.  The South West Asia Theater of operations is defined as:  Iraq, Kuwait, Saudi Arabia, the neutral zone between Iraq and Saudi Arabia, Bahrain, Qatar, the United Arab Emirates, Oman, the Gulf of Aden, the Gulf of Oman, the Persian Gulf, the Arabian Sea, the Red Sea and the airspace above these locations. Possible field values: 'Y' = Yes 'N' = No 'U' = Unknown	This field is derived from the SOUTHWEST ASIA CONDITIONS? field (#.322013) in the Patient File (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.833,79 OEF/OIF	The Military Operation(s) in which the patient was in combat. This field is a length of nine characters and reflects the OEF or OIF where this patient was in combat.	The value of this field is derived from the LOCATION OF SERVICE field (#.01) of the SERVICE [OEF OR OIF] (#2.3215) sub-file located in the PATIENT (#2) file. DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field. Possible field values are one or more combinations of the following: OEF = Operation Enduring Freedom OIF = Operation Iraqi Freedom UNK = Unknown OEF/OIF
727.833,80 OEF/OIF RETURN DATE	The date the patient left the OEF/OIF area, if known. Otherwise, it is the end date of military pay for this OEF/OIF deployment. This date field has a format equal to YYYYMMDD. In cases of multiple OEF/OIF tours, this field contains only most recent return date.	The value of this field is derived of the OEF/OIF TO DATE field (#.03) of the SERVICE [OEF OR OIF] (#.3215) subfile located in the PATIENT file (#2).
727.833,81 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>



## #727.829 - BLOOD BANK EXTRACT (LBB) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Blood Bank extract from existing VistA files. Entries into this file are made by extracting data from the sub file (#63.017), TRANSFUSION RECORD, of the LAB DATA file (#63) and from the PATIENT file (#2). Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. This file is intended to be used for validation purposes only. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the "AC" cross reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.829,.01 SEQUENCE NUMBER	The record number for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.829,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Not transmitted to the AAC. Part of header for extract record.
727.829,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.829,3 FACILITY	Identifier for the station and division.	An indicator of the division where this event happened. Using the NAME field (#.01) pointer from the DSS EXTRACTS file (#728), FACILITY is derived from the STATION NUMBER field (#99) for that pointer number in the INSTITUTION file (#4).
727.829,4 PATIENT NO. - DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.829,5 SSN	The patient's social security number (Pseudo SSNs are indicated by a trailing 'P' or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.829,6 NAME	The first four characters of the patient's last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first ", " piece are used, padded with trailing spaces if necessary.
727.829,7 IN/OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	Free text Determined by a call to IN5^VADPT

Field # and Name	Description	Technical Description																
727.829,8 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the LBB, extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Visit Date = Date Transfused and Stop Code = 108.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.829,9 DATE OF TRANSFUSION	Date blood component(s) transfused. Format: YYYYMMDD	Derived from field (#.01) of the TRANSFUSION RECORD sub-file (#63.017) of the LAB DATA file (#63)																
727.829,10 TIME OF TRANSFUSION	Time of blood component transfused. Format is HHMMSS. If time cannot be determined, use 000001 as default	If time cannot be determined, use 000001 as a default. Field (#.01) of the TRANSFUSION RECORD sub-file (#63.017) of the LAB DATA file (#63).																
727.829,11 COMPONENT	Blood component transfused	Obtained from field (#.02) of the TRANSFUSION RECORD sub-file (#63.017) of the LAB DATA file (#63) which is a pointer to the Blood Bank Product file (#66)																
727.829,12 COMPONENT ABBREVIATION	Abbreviation of blood component	Use COMPONENT field (#.02) of the TRANSFUSION RECORD sub-file (#63.017) to obtain COMPONENT ABBREVIATION from field (#.02) of the BLOOD PRODUCT file (#66)																
727.829,13 NUMBER OF UNITS	Number of pooled units transfused. If units pooled is blank, use a default of '1'.	Derived from Field (#.07) of the TRANSFUSION RECORD sub-file (#63.017) of the LAB DATA file (#63). If units are blank use default of 1.																
727.829,14 VOLUME	The volume, in milliliters, of the component or unit transfused.	Derived from Field (#.1) of the TRANSFUSION RECORD sub-file (#63.017) of the LAB DATA file (#63)																
727.829,15 REACTION	Indicate transfusion reaction occurred.  Values: Y = Yes N = No	Derived from Field (#.08) of the TRANSFUSION RECORD sub-file (#63.017) of the LAB DATA file (#63)																

Field # and Name	Description	Technical Description
727.829,16 REACTION TYPE	Type of transfusion reaction.  Values: 53 = IMMEDIATE HEMOLYTIC 57 = DELAYED HEMOLYTIC 58 = FEBRILE NONHEMOLYTIC 59 = ALLERGIC (IgA) 60 = NO SUSPECTED REACTION 61 = POST TRANSFUSION HEPATITIS 63 = UNRELATED TO TRANSFUSION 66 = URTICARIA (ALLERGIC, NON-IgA) 67 = POSSIBLE ATYPICAL TX RXN 68 = VOLUME OVERLOAD 69 = LEUKOAGGLUTININ 70 = TRANSFUSION RELATED ACUTE LUNG INJURY	Derived from the TRANSFUSION REACTION TYPE field (#.11) of the TRANSFUSION RECORDS sub file (#63.017) of the LAB DATA file (#63) which is a pointer to field (#.01) of the BLOOD BANK UTILITY file (#65.4)
727.829,17 FEEDER LOCATION	Feeder Location in Blood Bank extract is Blood Bank concatenated with the Facility.	Feeder Location in Blood Bank extract is Blood Bank concatenated with the Facility
727.829,18 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.829,19 DSS IP #	Currently Null	Currently Null
727.829,20 ORDERING PROVIDER	Provider of the patient transfused.  Value: VistA file (#200) IEN preceded by "2"	This field is extracted from the PHYSICIAN field (#6.2) located in the BLOOD INVENTORY file (#65)
727.829,21 ORDERING PROVIDER PERSON CLASS	The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The data is derived from the NEW PERSON file (#200), field (#5), PERSON CLASS file (#8932.1). Active Person is determined by SEX=\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from NEW PERSON file (#200).
727.829,22 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.829,23 UNIT MODIFIED	Indicates if Unit of Blood was modified.  Values: Y = Yes N = No	Retrieves the data from the DISPOSITION field (#4.1) from the BLOOD INVENTORY File (#65). A "disposition" of "modify" triggers a value of "Y" in this field. Otherwise, the field value is set to "N".

Field # and Name	Description	Technical Description
727.829,24 UNIT MODIFICATION	Type of Unit Modification performed. This field is a length of two (value & blank) and left justified.  Values: D = DIVIDED P = POOLED W = WASHED F = FROZEN L = LEUKOCYTE POOR R = REJUVENATED G = DEGLYCEROLIZED I = IRRADIATED S = SEPARATED	Field takes the unit IDs from the UNIT ID field (#.01) in the BLOOD INVENTORY File (#65) that have a "disposition" of "modify" in the (UNIT MODIFIED) field and retrieves the modification value(s) from the MODIFY TO field (#3) and the MODIFICATION CRITERIA field (#.06)
727.829,25 REQUESTING PROVIDER	The provider who requested the transfusion. The value of this field is an IEN preceded by a '2'.	Value is extracted from the PROVIDER field (#6.5), Sub file (#68.02). Sub file (#68.02) is the ACCESSION NUMBER field (#1) in Sub file (#68.01). Sub file (#68.01) is the DATE field (#2).
727.829,26 REQUESTING PROVIDER PC	The VA code associated with the active person class of the Requesting Provider.  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Data comes from the PROVIDER field (#6.5) of Sub file (#68.02). Sub file (#68.02) is the ACCESSION NUMBER field (#1) in Sub file (#68.01) is the DATE field (#2) in the ACCESSION file (#68). The Person Class is determined by calling the API \$\$GET^XUA4A71. The Person Class must be active.
727.829,27 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Data is derived from the DIV field (#26) of Sub file (#68.02). Sub file (#68.02) is the ACCESSION NUMBER field #1 in Sub file (#68.01). Sub file (#68.01) is the DATE field (#2) in the ACCESSION file (#68).
727.829,28 ORDERING PROVIDER NPI	A standard, unique life-long identifier of the provider who ordered the intravenous product, lab test, type & cross match or patient feeding	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.829,29 REQUESTING PROVIDER NPI	A standard, unique life-long identifier of the provider who requested the transfusion	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.829,30 PATCAT	This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.  Values: AD = Active Duty ADD = Active Duty Dependent FNRS = Former Non-Remarried Spouse RET = Retiree RETD = Retiree Dependent RES = Reservist REC = Recruit TDRL = Temporary Disability TFL = TRICARE for Life	If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.  FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.

## #727.827 - CLINIC EXTRACT (CLI) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Clinic Visit extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the "AC" cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.827,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.827,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Right now, in the system, there is neither a description or technical description defined for this field. If we must be some information here in this cell, I would suggest we go with : The format is YYYYMM, and typically contains the current date unless the extract has been queued to run on a different date
727.827,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.827,3 FACILITY	Identifier for the station and division.	It is derived from the DIVISION field (#3.5) in the HOSPITAL LOCATION file (#44) for the entry identified in the LOCATION field (#.04) in the OUTPATIENT ENCOUNTER file (#409.68). This field is a pointer to the MEDICAL CENTER DIVISION file (#40.8).
727.827,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.827,5 SSN	The patient's social security number (Pseudo SSNs are indicated by a trailing 'P' or 5 leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2). The logic changed for FY08 to eliminate invalid SSNs.
727.827,6 NAME	The first four characters of the patient's last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first ", " piece are used, padded with trailing spaces if necessary.
727.827,7 IN/OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	Inpatient (3) or Outpatient (1) status on the date of the encounter. Text value is determined by a call to IN5^VADPT.

Field # and Name	Description	Technical Description
727.827,8 DAY	Date when the clinic visit occurred. Format: YYYYMMDD	For scheduled appointments, appended EKG visits, dispositions, standalones, and appended lab and x-ray visits -- OUTPATIENT ENCOUNTER file (#409.68); DATE field (#.01). For appointments which were no-showed – PATIENT file (#2) APPOINTMENT multiple file (#1900). If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.827,9 FEEDER KEY	Code that uniquely identifies a DSS product.  Format is SSSCCCTTTPPPN: SSS = Primary Stop Code CCC = Secondary Stop Code (or 000) TTT = Appointment length in minutes PPPP = Four character code (or 0000) N = no-show indicator (value 0 or N)  Action Codes are assigned by DSS personnel to each clinic entry on the Clinics and Stop Codes Worksheet (VistA file # 728.44) to build the CLI feeder key field to be used for every CLI extract record for this clinic.  If Action Code: 1 = Primary Stop Code (with 000 in Secondary position and 0000 as 4 character code) 2 = Not used 3 = Not used 4 = Primary Stop Code and Secondary Stop Code and 4 character code value Secondary Stop Code may be entered as 000 Four character code is from National Clinic file (#728.441) 5 = Primary Stop Code and Secondary Stop Code (with 0000 as 4 character code) 6 = Do not build CLI Feeder Key. Do not send record in CLI extract for this clinic.	One of the Action Code types may be assigned to the clinic in the CLINICS AND STOP CODES file (#728.44).  For all Action Code, SSS and CCC are taken from the CLINICS AND STOP CODES file (#728.44). The DSS STOP CODE field (#3) and DSS CREDIT STOP CODE field (#4) are used for SSS and CCC respectively. If field (#3) is Null, the STOP CODE field (#1) and CREDIT STOP CODE field (#2) are used. If field (#1) is Null, data is taken from the STOP CODE NUMBER field (#8) and the CREDIT STOP CODE field (#2503) of the HOSPITAL LOCATION file (#44). If field (#8) is Null, both SSS and CCC are set to "000".  For Action Code type 1, CCC is always "000" and PPPP is always "0000".  For Action Code type 4, PPPP is the National Clinic code assigned to this clinic; it is taken from the NATIONAL CLINIC field (#7) of file (#728.44). The original source if this data is the NATIONAL CLINIC file (#728.441).  For Action Code type 5, PPPP is always "0000".  In all Action Code types, N is set to "N" if the STATUS field (#3) in the APPOINTMENT sub-file (# 2.98) of the PATIENT file (#2) is set to "NO-SHOW". In all styles SSS, CCC, TTT and PPPP are padded with leading zeroes as needed; the Feeder is always exactly 14 characters.
727.827, 10 OVERBOOKED INDICATOR	Indicates if this was an overbook for this appointment. Values: O = Overbooked Null for anything else	Derived from the OVERBOOK field (#9) of the PATIENT field (#2) multiple within in the APPOINTMENT field (#1900) multiple of the HOSPITAL LOCATION file (#44).
727.827, 11 CLINIC NAME	The specific clinic associated with the patient encounter. Value is an IEN, a number between 1 and 99999999.	Internal entry number of the clinic from the HOSPITAL LOCATION file (#44)

Field # and Name	Description	Technical Description
727.816,12 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.  NULL for outpatients, except if observation patient.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.827, 13 TIME	Time for this clinic visit. Format: HHMMSS	For scheduled appointments and appended EKG visits -- TIME is derived from HOSPITAL LOCATION file (#44); APPOINTMENT sub-file (#44.001), APPOINTMENT DATE/TIME field (#.01).  For dispositions, standalones, and appended lab and x-ray visits --TIME is derived from the OUTPATIENT ENCOUNTER file (#409.68); DATE field (#.01).
727.827, 14 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the DATE/TIME field (#.01) from the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to file (#404.51) is transmitted.
727.827, 15 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the DATE/TIME field (#.01) from the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name in the NEW PERSON file (#200).
727.827, 16 PRIMARY CARE PRV PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. This field holds the VA codes associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.827, 17 PROVIDER	The provider associated with the patient encounter.  This number is IEN preceded by "2".	Using the internal entry number for the encounter in the OUTPATIENT ENCOUNTER file (#409.68), the VISIT file (#9000010), ENTRY field (#.05) is determined. This entry is used to make a call to the Patient Care Encounter API, ENCEVENT^PXAPI. The API returns all visit data in the ^TMP("PXKENC",\$J) array. The first provider identified as "primary" from the array is used. A default value of Null is used if no "primary" provider is found.
727.827, 18 PROVIDER PERSON CLASS	The VA Code of the Person Class of the Provider for this record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	The Patient Care Encounter API, ENCEVENT^PXAPI returns provider data. The Kernel function of GET^XUA4A72 returns the data specific Person Class data for a given provider. The field holds the VA Code associated with the active Person Class of the primary Provider associated with the extracted clinic visit.

Field # and Name	Description	Technical Description
727.827, 19 CPT CODE QTY & MODIFIERS #1	The first 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data. If no CPT codes are found a default value of 99199 is used.
727.827, 20 CPT CODE QTY & MODIFIERS #2	The second 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 21 CPT CODE QTY & MODIFIERS #3	The third 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 22 CPT CODE QTY & MODIFIERS #4	The fourth 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 23 CPT CODE QTY & MODIFIERS #5	The fifth 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 24 CPT CODE QTY & MODIFIERS #6	The sixth 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 25 CPT CODE QTY & MODIFIERS #7	The seventh 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 26 CPT CODE QTY & MODIFIERS #8	The eighth 5-character CPT Code for procedure performed, the Quantity, or how many times the unique code appears in the record, and up to 5 two-character CPT modifiers.	The supported call GETCPT^SDOE returns this data
727.827, 27 PRIMARY ICD9 CODE	<p>Primary ICD-9 (diagnosis) code for this clinic visit</p> <p>ICD is an international standard diagnostic classification system providing the basis for national morbidity and mortality statistical data collection to improve the management of healthcare. This system classifies diseases and other health conditions documented on various types of medical records.</p>	<p>Using a pointer to the VISIT file (#9000010) a call to the PCE API, ENCEVENT^PXAPI, is made. This returns ICD-9 data as pointers to the ICD DIAGNOSIS file (#80).</p> <p>The remaining ICD-9 pointer values are used to obtain secondary ICD-9 codes, up to 8 secondary codes.</p> <p>Each ICD-9 code is composed of a minimum of 4 characters. There may be fewer than 9 ICD-9 codes for a visit record.</p>
727.827, 28 SECONDARY ICD9 1	First Secondary ICD9 code for this clinic visit.	The diagnostic code is derived from PCE API ENCEVENT^PXAPI (which calls ENCEVENT^PXKENC). The patient's encounter, stored in the Visit file (#9000010), is data input which the API uses. The API retrieves diagnosis information from the V POV (Purpose of Visit) file (#9000010.07). This file links back to the Visit file using the Visit field (#.03) and links forward to the ICD Diagnosis file (#80) using the POV field (#.01). The primary/secondary status is determined using the Primary/Secondary field (#.12).



Field # and Name	Description	Technical Description
727.827, 29 SECONDARY ICD9 2	Second Secondary ICD9 code for this clinic visit.	The diagnostic code is derived from PCE API ENCEVENT^PXAPI (which calls ENCEVENT^P XKENC). The patient's encounter, stored in the Visit file (#9000010), is data input which the API uses. The API retrieves diagnosis information from the V POV (Purpose of Visit) file (#9000010.07). This file links back to the Visit file using the Visit field (#.03) and links forward to the ICD Diagnosis file (#80) using the POV field (#.01). The primary/secondary status is determined using the Primary/Secondary field (#.12).
727.827, 30 SECONDARY ICD9 3	Third Secondary ICD9 code for the clinic visit.	The diagnostic code is derived from PCE API ENCEVENT^PXAPI (which calls ENCEVENT^P XKENC). The patient's encounter, stored in the Visit file (#9000010), is data input which the API uses. The API retrieves diagnosis information from the V POV (Purpose of Visit) file (#9000010.07). This file links back to the Visit file using the Visit field (#.03) and links forward to the ICD Diagnosis file (#80) using the POV field (#.01). The primary/secondary status is determined using the Primary/Secondary field (#.12)..
727.827, 31 SECONDARY ICD9 4	Fourth Secondary ICD9 code for this clinic visit.	The diagnostic code is derived from PCE API ENCEVENT^PXAPI (which calls ENCEVENT^P XKENC). The patient's encounter, stored in the Visit file (#9000010), is data input which the API uses. The API retrieves diagnosis information from the V POV (Purpose of Visit) file (#9000010.07). This file links back to the Visit file using the Visit field (#.03) and links forward to the ICD Diagnosis file (#80) using the POV field (#.01). The primary/secondary status is determined using the Primary/Secondary field (#.12).
727.827,32 DATE OF BIRTH	Patient's date of birth Format: YYYYMMDD	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)

Field # and Name	Description	Technical Description
727.827,33 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC - VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.
727.827,34 VETERAN	<p>Patient's veteran status</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Is a veteran</li> <li>N = Is not a veteran</li> </ul>	Using the patient pointer (DFN), VETERAN data is derived from the VETERAN (Y/N) field (#1901) in the PATIENT file (#2). The status indicator is returned by SVC^VADPT.
727.827,35 RACE	<p>Observed Race Code for this patient. In compliance with OBM instructions, field is no longer updated in VistA. Values remain in VistA and are posted to DSS in case RACE1 field is not populated. See also RACE 1.</p> <p>Only a single value is allowed.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>3 = American Indian or Alaska Native</li> <li>A = Asian</li> <li>B = Black or African American</li> <li>D = Declined to Answer</li> <li>H = Native Hawaiian or Other Pacific</li> <li>U = Unknown by Patient</li> <li>W = White</li> <li>Null</li> </ul>	Using the patient pointer (DFN), RACE data is shown as the ABBREVIATION field (#2) of the RACE file (#10) entry pointed to by the RACE field (#.06) in the PATIENT file (#2)
727.827,36 POW STATUS	<p>Indicates if patient was confined as a Prisoner of War</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Patient was confined as a Prisoner of War</li> <li>N = Patient was not confined as a Prisoner of War</li> </ul>	Derived from the PATIENT file (#2), POW STATUS INDICATED field (#.525). The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.827,37 POW LOCATION	If POW Status is indicated, then this is the POW confinement location/period.  Values: 1 = World War I 2 = World War II - Europe 3 = World War II - Pacific 4 = Korean 5 = Vietnam 6 = Other	Derived from the PATIENT file (#2), POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.
727.827,38 RADIATION STATUS	Indicates if patient claims exposure to ionizing radiation  Values: Y= Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.827, 39 RADIATION ENCOUNTER INDICATOR	This indicates whether service provided during this patient encounter is related to exposure to ionizing radiation.  Values: Y = Yes N = No	Derived from the VISIT file (#9000010), IONIZING RADIATION EXPOSURE field (#80003)  The Status indicator is returned by API = D ENCEVENT^PXAPI(VISIT)
727.827,40 AGENT ORANGE STATUS	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.827, 41 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: Y = Yes N = No	Derived from the VISIT file (#9000010), AGENT ORANGE EXPOSURE field (#80002)  The Status indicator is returned by API = D ENCEVENT^PXAPI(VISIT)
727.827,42 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.827,43 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.827,44 SEX	Gender  Values: M = Male F = Female	Using the patient pointer (DFN), this data element is taken from the SEX field (#.02) in the PATIENT file (#2)
727.827,45 ZIP+4	Zip + 4 is the zip code for where the patient resides using format of nnnnn-xxxx. The 5-character zip code is provided if zip + 4 is not available.	Using the patient pointer (DFN), ZIP CODE data is derived from the ZIP+4 field (#.1112) PATIENT file (#2)
727.827, 46 PLACEHOLDER	Currently Null	Currently Null
727.827, 47 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.827,48 ENCOUNTER ELIGIBILITY	<p>Eligibility code for the encounter based on the purpose of the encounter and the patient's eligibility.</p> <p>NPCD Code Values:</p> <p>10 = SC 50-100%  20 = Aid &amp; Attendance  21 = Housebound  22 = Mexican Border War  23 = WWI  24 = POW  30 = SC 40-49%  31 = SC 30-39%  32 = SC 20-29%  33 = SC 10-19%  34 = SC less than 10%  40 = NSC - VA Pension  50 = NSC  60 = Catastrophic Disability  101 = ChampVA  102 = Collateral of Veteran  103 = Employee  104 = Other Federal Agency  105 = Allied Veteran  106 = Humanitarian Emergency  107 = Sharing Agreement  108 = Reimbursable Insurance  109 = Tricare/Champus</p>	<p>In the OUTPATIENT ENCOUNTER file (#409.68), the ELIGIBILITY OF ENCOUNTER field (#.13) points to the ELIGIBILITY CODE file (#8). Then the MAS ELIGIBILITY CODE field (#8) of file (#8) points to the MAS ELIGIBILITY CODE file (#8.1).</p> <p>The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD. This code is composed of two or three numeric characters.</p>
727.827,49 MST STATUS	<p>Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter</p> <p>Values:</p> <p>Y = Yes, screened reports MST  N = Screened, does not report MST  D = Screened, declines to answer.  U = Unknown</p>	<p>The MST history file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients' MST status is stored in the MST status field (#3). A call is made to \$\$GETSTAT^DGMSTAPI (DFN, DGDATE) using the DFN in the PATIENT NO. DFN field (#4) and the date in the day field.</p>
727.827,50 MST ENCOUNTER INDICATOR	<p>Indicates whether treatment was related to Military Sexual Trauma.</p> <p>Values:</p> <p>Y = Yes  N = No</p>	<p>Using a pointer to the VISIT file (#9000010) a call to the PCE API, ENCEVENT^PXAPI, is made. This call returns visit data, including whether the visit was related to the patient's military sexual trauma.</p>
727.827,51 SHARING AGREEMENT PAYOR	<p>An indicator used for patients participating in sharing agreements.</p> <p>Values:</p> <p>A = Sharing Agreement  B = TRICARE  C = CAT C / Category C  D = CHAMPVA  E = CHAMPUS  NULL</p>	<p>The ALIAS sub-field (#.01) of the ALIAS multiple field (#1) of the PATIENT file (#2) is used to indicate a patient who participates in a sharing agreement.</p> <p>If the (#.01) field contains any one of the specified key words, then the patient is considered included for Sharing Agreement information.</p> <p>Field (#.01) must contain any one of the following key words:  SHARING AGREEMENT  CHAMPVA  TRICARE  CAT C  CATEGORY C</p>

Field # and Name	Description	Technical Description
727.827,52 SHARING AGREEMENT INSURANCE CO	Indicates the first insurer for patients who participate in sharing agreements.	Data is taken from the INSURANCE TYPE sub-field (#.01) of the INSURANCE TYPE field (#.3121), sub-file (#2.312), of the PATIENT file (#2). This is a pointer value for the INSURANCE COMPANY file (#36). Only the first insurance found in the multiple field is used. The data is stored as free text.
727.827,53 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.827,54 STATE CODE	FIPS 2 character code for the state where the patient resides.	Using the patient pointer (DFN), STATE data is derived from the STATE field (#.115) in the PATIENT file (#2) which points to the STATE file (#5). For the STATE file entry, data transmitted is the two character VA STATE CODE, field (#2).
727.827,55 COUNTY CODE	The FIPS county code for where the patient resides	Using the patient pointer (DFN), COUNTY data is derived from the COUNTY field (#.117) in the PATIENT file (#2). The data transmitted is the three character VA COUNTY CODE, field (#2) within the COUNTY field (#3) multiple of the STATE file (#5).
727.827,56 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by “2”.	This is a reference to the NEW PERSON file (#200) for the provider, who is the patient’s Associate Provider for Primary Care as assigned with the PCMM application
727.827, 57 ASSOCIATE PC PROV PERSON CLASS	VA Code of the Person Class of the patient’s Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	Derived from the NEW PERSON file (#200), field (#5): file (#8932.1). Active Person Class is determined by \$\$GET^XU4A72 (PERS, DATE), where PERS is the IEN from file (#200).
727.827,58 PLACEHOLDER	Currently Null	Currently Null
727.827, 59 DOM, PR RTP AND SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in DSS TREATING SPECIALTY TRANSLATION file (#727.831) which holds a set of codes
727.827, 60 ENROLLMENT CATEGORY	Patient’s enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the Enrollment Status found in this extract. PATIENT ENROLLMENT file (#27.11) CATEGORY (DFN, STATUS)

Field # and Name	Description	Technical Description
727.827, 61 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.827, 62 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.827, 63 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.827, 64 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values:</p> <p>A = Army-Active Duty  B = Navy, Marine-Active Duty  C = Air Force-Active Duty  D = Coast Guard- Active Duty  E = Retired, Uniformed Services  F = Medical Remedial Enlist  G = Merchant Seaman-USPHS  H = Other USPHS Beneficiaries  I = Observation/Examination  J = Office of Workers Comp  K = Job Corps/Peace Corps  L = Railroad Retirement  M = Beneficiaries -Foreign Government  N = Humanitarian (Non-Vet)  O = Champus Restore  P = Other Reimbursement. (Non-Vet)  Q = Other Federal Dependant  R = Donors (Non-Vet)  S = Special Studies (Non-Vet)  T = Other Non-Veteran  U = CHAMPVA-Spouse, Child  V = CHAMPUS  W = Czechoslovakia/Poland Svc  X = Persian Gulf War  Y = CAV/NPS  Z = Merchant Marine  0 = Korean  1 = World War I  2 = World War II  3 = Spanish American  4 = Pre-Korean  5 = Post-Korean  6 = Operation Desert Shield  7 = Vietnam ERA  8 = Post-Vietnam  9 = Other or None</p>	<p>Derived from the PERIOD OF SERVICE field (#.323) in the PATIENT file (#2). The data is derived from the CODE field (#.03) in the PERIOD OF SERVICE file (#21). This code is a single alphanumeric character.</p>
727.827, 65 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator</p> <p>Y = Patient is an Observation Patient.  N = Patient is not an Observation Patient.</p>	<p>Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the first 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.</p>

Field # and Name	Description	Technical Description																
727.827, 66 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u> - the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u> - the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u> - receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the CLI, extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Visit Date and Stop Code value of the Primary Stop Code associated with the clinic in which the encounter occurred.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.827, 67 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values: K = Korean DMZ V = Vietnam</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT file (#2)																
727.827, 68 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Identifies the Division/facility where the clinic is located. Value is retrieved from field (#3.5) of the HOSPITAL LOCATION file (#44) which is a pointer to the INSTITUTION file (#4) and then it uses the RADDIV^ECXDEPT API to retrieve the STATION NUMBER field (#99) in the INSTITUTION file (#4).																
727.827, 69 APPOINTMENT TYPE	<p>Indicates the type of appointment for which the patient is scheduled</p> <p>1 = Compensation &amp; Pension 2 = Class II Dental 3 = Organ Donors 4 = Employee 5 = Prima Facia 6 = Research 7 = Collateral of Veteran 8 = Sharing Agreement 9 = Regular 10 = Computer Generated</p>	Obtained from the PATIENT file (#2), APPOINTMENT sub-file (#2.98), APPOINTMENT TYPE field (#9.5) which is a pointer to the APPOINTMENT TYPE file (#409.1)																



Field # and Name	Description	Technical Description
727.827, 70 PURPOSE OF VISIT	Indicates the reason for the appointment.  Values: 1 = C&P Exam 2 = 10-10 3 = Scheduled Appointment 4 = Unscheduled Visit	Obtained from the PATIENT file (#2), APPOINTMENT sub-file (#2.98), PURPOSE OF VISIT field (#9)
727.827, 71 MEANS TEST	The current means test category for this patient  Values: A = Category A B = Category B C = Category C P = Pending Adjudication R = Requires Means Test N = Means Test not Required E = Exempt I = Incomplete L = No Longer Applicable M = Non-Exempt	Using the patient pointer (DFN), MEANS TEST data is derived from the CURRENT MEANS TEST STATUS field (#.14) in the PATIENT file (#2). This field is a pointer to the MEANS TEST STATUS file (#408.32). Using the means test pointer, the data is derived from the CODE field (#.02) in the MEANS TEST STATUS file (#408.32).
727.827, 72 HEAD & NECK CANCER INDICATOR	Identifies whether patient has head and/or neck cancer Y = Yes N = No	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), using API - \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)
727.827, 73 ETHNICITY	The patient's ethnicity code Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.  Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2). The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.
727.827, 74 RACE 1	Self- reported by patient as recorded in VistA patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. . See also RACE field.  Values: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient Null	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), RACE 1 is derived from the PTF VALUE field (#5) of the RACE file (#10) pointed to by the RACE INFORMATION field (#.01) of the RACE INFORMATION sub file (#2.02) of the PATIENT file (#2).  Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), is included in the RACE 1 field. If any of the RACE INFORMATION values returned are "C", (DECLINED TO ANSWER) that is the only value included in the RACE1 field. Identifies what is the race of the patient. Method of collection is only self-identification.
727.827, 75 CBOC STATUS INDICATOR	Indicates if the patient was seen at a Community Based Outpatient Clinic (CBOC)  Values: Y = Yes Null = No	Is a pointer to the FACILITY TYPE file (#4.1). CBOC STATUS INDICATOR field is Derived from the FACILITY TYPE field (#13) of the INSTITUTION file (#4).

Field # and Name	Description	Technical Description
727.827, 76 DSS IP #	Currently Null	Currently Null
727.827, 77 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:</p> <p>1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions.</p> <p>2 = VA-rated service-connected disabilities 30% or 40%</p> <p>3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151</p> <p>4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled</p> <p>5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs</p> <p>6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)</p> <p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or</p>	Derives the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)

Field # and Name	Description	Technical Description
	<p>VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.827, 78 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	<p>Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U"</p>
727.827, 79 PATIENT TYPE	<p>Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.</p> <p>Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare</p>	<p>Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)</p>
727.827, 80 CV STATUS ELIGIBILITY	<p>Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo).</p> <p>Values: Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV</p>	<p>Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece</p> <p>1 - qualifies as a CV 0 - does not qualify as a CV -1 - bad DFN or date</p>

Field # and Name	Description	Technical Description
727.827, 81 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2nd piece is the Combat Vet End Date.
727.827, 82 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 - vet was eligible on date specified (or DT) 0 - vet was not eligible on date specified (or DT)
727.827, 83 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes - Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15), this file contains a list of the Category 1 (National) Patient Record Flags that can be assigned to a patient. Category I flags are established at a National level. It is retrieved via an API \$\$GETACT^DGPFAP (DFN,"TARGET_ROOT").
727.827, 84 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions.  Y = Yes N = No U = Unknown	This field is derived from the SOUTHWEST ASIA CONDITIONS? field (#.322013) in the Patient File (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT.
727.827, 85 ENCOUNTER SWAC	This field indicates whether treatment provided during this patient encounter is related to exposure to Southwest Asia conditions while serving in the Southwest Asia Theater of operations.  Values: Y = Yes	Using a pointer to the VISIT file (#90000.10) a call to the PCE API, ENCEVENT^PXAPI, is made. This call returns visit data, including whether the visit was related to the patient's exposure to Southwest Asia conditions while serving in the Southwest Asia Theater of operations.
727.827, 86 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	This field is extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.827, 87 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: Y = Yes N = No	Using the VISIT FILE ENTRY field (#.05) in the OUTPATIENT ENCOUNTER file (#409.68) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the head/neck cancer data stored in the HEAD AND/OR NECK CANCER field (#80006) in the VISIT file (#9000010).

Field # and Name	Description	Technical Description
727.827, 88 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2).
727.827, 89 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Value of this field is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.827, 90 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.827, 91 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.827, 92 PROVIDER NPI	A standard, unique life-long identifier for individuals providing health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.827, 93 COUNTRY CODE	The value is the code for the country associated with the address.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.
727.827,94 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".

Field # and Name	Description	Technical Description
727.827,95 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>
727.827,96 SECONDARY PROVIDER #1	<p>The first assisting provider associated with the clinic visit (2-11 chars). This character string is an IEN for the NEW PERSON file (#200); a "2" has been appended to the beginning of the character string. It represents the first assisting provider associated with this clinic visit.</p>	<p>Data is derived by making a call to the ENCEVENT^PXAPI (DBIA1889-F) API using the clinic encounter, returning the secondary provider IEN.  A character string of format "3"_IEN, where IEN is the internal entry number for the secondary provider in the NEW PERSON file (#200).</p>
727.827,97 SECONDARY PROVIDER #1 PC	<p>The VA code of the Person Class of the first assisting provider as of the date of this record.</p>	<p>Derived by calling \$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) File. Copied from field VA CODE (%) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file</p>
727.827,98 SECONDARY PROVIDER #1NPI	<p>A standard unique life-long identifier of the first assisting provider associated with this clinic visit</p>	<p>The NPI is retrieved via the supporting Kernel API: \$NPI^XUSNPI.</p>
727.827,99 SECONDARY PROVIDER #2	<p>The second assisting provider associated with this clinic visit (2-11 chars). This character string is an IEN for the NEW PERSON FILE (#200); a '2' has been appended to the beginning of the character string. It represents the second assisting provider associated with t this clinic visit.</p>	<p>Data is derived by making a call to the ENCEVENT^PXAPI (DBIA1889-f) API using the clinic encounter, returning the secondary provider IEN.  A character string of format "2"_IEN, where IEN is the internal entry number for the secondary provider in the NEW PERSON file (#200).</p>
727.827,100 SECONDARY PROVIDER #2 PC	<p>The VA code of the Person Class of the second assisting provider as of the date of this record.</p>	<p>Derived by calling \$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) File. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.</p>
727.827,101 SECONDARY PROVIDER #2 NPI	<p>A standard unique life-long identifier of the second assisting provider associated with this clinic visit.</p>	<p>The NPI is retrieved via the supporting Kernel API: \$NPI^XUSNPI.</p>

Field # and Name	Description	Technical Description
727.827,102 SECONDARY PROVIDER #3	The third assisting provider associated with this clinic visit (2-11 chars). This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the third assisting provider associated with this clinic visit.	Data is derived by making a call to the ENCEVENT^PXAPI (DBIA1889-F) API using the clinic encounter, returning the secondary provider IEN. A character string of format "2" _ IEN, where IEN is the internal entry number for the secondary provider in the NEW PERSON file (#200).
727.827,103 SECONDARY PROVIDER #3 PC	The VA code of the Person Class of the third assisting provider as of the date of this record.	Derived by calling \$\$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) File. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.
727.827,104 SECONDARY PROVIDER #3 NPI	A standard unique life-long identifier of the third assisting provider associated with this clinic visit.	The NPI is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.827,105 SECONDARY PROVIDER #4	The fourth assisting provider associated with this clinic visit (2-11 chars) This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the fourth assisting provider associated with this clinic visit.	Data is derived by making a call to the ENCEVENT^PXAPI (DBIA1889-F) API using the clinic encounter, returning the secondary provider IEN. A character string of format "2" _ IEN, where IEN is the internal entry number for the secondary provider in the NEW PERSON file (#200).
727.827,106 SECONDARY PROVIDER #4 PC	The VA code of the Person Class of the fourth assisting provider as of the date of this record.	Derived by calling \$\$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) File. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.
727.827,107 SECONDARY PROVIDER #4 NPI	A standard unique life-long identifier of the fourth assisting provider associated with this clinic visit.	The NPI is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.827,108 SECONDARY PROVIDER #5	The fifth assisting provider associated with this clinic visit 92-11 chars). This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the fifth assisting provider associated with this clinic visit.	Data is derived by making a call to the ENCEVENT^PXAPI (DBIA1889-F) API using the clinic encounter, returning the secondary provider IEN. A character string of format "2" _ IEN, where IEN is the internal entry number for the secondary provider in the NEW PERSON file (#200).
727.827,109 SECONDARY PROVIDER #5 PC	The VA code of the Person Class of the fifth assisting provider as of the date of this record.	Derived by calling \$\$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) File. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.
727.827,110 SECONDARY PROVIDER #5 NPI	A standard unique life-long identifier of the fifth assisting provider associated with the clinic visit.	The NPI is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

## #727.815 - EVENT CAPTURE LOCAL EXTRACT (ECS) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Event Capture extract from the existing Event Capture VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Only the extract load should make entries routine.

Since the local site will determine validation techniques, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.815,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.815,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.815,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.815,3 FACILITY	Identifier for the station and division.	A free text field that represents the STATION NUMBER field (#99) from the INSTITUTION file (#4). It is derived from the LOCATION field (#3) in the EVENT CAPTURE PATIENT file (#721).
727.815,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.815,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.815,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.
727.815,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	Inpatient (3) or Outpatient (1) status on the date of the encounter is determined by a call to IN5^VADPT; this is a free text file.
727.815,8 DAY	Date when procedure was performed. Format: YYYYMMDD Note: In some instances, Day may reflect date of entry or end of month.	Date is pulled from the DATE/TIME OF PROCEDURE field (#2) in the EVENT CAPTURE PATIENT file (#721).  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with “01” for the day (DD) portion.



Field # and Name	Description	Technical Description
727.815,9 DSS UNIT	A locally defined group of work products entered for a specific DSS Department  Format: IEN of the DSS Unit.	A pointer to the DSS UNIT file (#724) DSS unit pointer is pulled from the DSS UNIT field (#6) in the EVENT CAPTURE PATIENT file (#721)
727.815,10 CATEGORY	Optional grouping below DSS Unit level.  Not widely used or recommended.  Value is an IEN.	The IEN of the Category in the EVENT CAPTURE CATEGORY file (#726). Category is pulled from the CATEGORY field (#7) in the EVENT CAPTURE PATIENT file (#721).
727.815,11 PROCEDURE	This field contains the name of the procedure selected for this extract record.  (1) The value of this field can be either a national or local product code without quantity or modifiers or a CPT code with quantity and up to five modifiers.  (2) If the Procedure Code is a National, append an 'N' to the code.  (3) If the Procedure Code is a Local Procedure, append an 'L' to the code.	The procedure pointer is pulled from the PROCEDURE field (#8) in the EVENT CAPTURE PATIENT file (#721). It is the CPT code for procedures from the CPT file (#81). For national procedures from the EC NATIONAL PROCEDURE file (#725), it is the NATIONAL NUMBER field (#1)_ "N" For local procedures from the EC NATIONAL PROCEDURE file (#725), it is the NATIONAL NUMBER field (#1)_ "L"
727.815,12 VOLUME	The number of days, or number of timed-specified units, or number of times the procedure was performed.  Value is a number between 1 and 9999; no decimal digits.	Numeric volume for this procedure associated with this extract record. Volume is pulled from the VOLUME field (#9) in the EVENT CAPTURE PATIENT file (#721).
727.815,13 COST CENTER	The cost center associated with the DSS unit for this extract record.	A pointer to the COST CENTER file (#420.1) Cost center is derived from the COST CENTER field (#3) in the DSS UNIT file (#724)
727.815,14 ORDERING SECTION	The IEN of the Ordering Section.	This character string is the IEN of the Ordering Section in the MEDICAL SPECIALTY file (#723). The Ordering Section is pulled from the ORDERING SECTION field (#11) in the EVENT CAPTURE PATIENT file (#721).
727.815,15 SECTION	This is the IEN in file (#723) of the Medical Specialty of the DSS Unit associated with this extract record.	This character string represents an IEN in the MEDICAL SPECIALTY file (#723). The data is pulled from the SECTION field (#5) in the EVENT CAPTURE PATIENT file (#721).
727.815,16 PROVIDER	The provider associated with the patient encounter.  This character string is an IEN for the NEW PERSON file (#200); a "2" has been appended to the beginning of the character string. It represents the primary Provider who performed the procedure associated with the Event Capture Patient record.	A character string of format "2"_IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200) Data is derived by the returning local array (first node) of the calling \$\$GETPRV^ECPRVMUT API (DBIA #4460) that returns the (#42) PROVIDER MULTIPLE from the EVENT CAPTURE PATIENT file(#721).f).
727.815, 17 PROVIDER PERSON CLASS	Provider Person class is the VA code of the Person Class of the Provider as of the date of this record.	Provider Person Class is derived from the New Person file (#200), field (#5): file (#8932.1)

Field # and Name	Description	Technical Description
727.815,18 PROVIDER #2	Second provider associated with the patient encounter. This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the second assisting Provider who performed the procedure associated with the Event Capture Patient record.	A character string of format "2" _ IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is derived by returning local array (second node) of the calling \$\$GETPRV^ECPRVMUT API (DBIA #4460) that returns the (#42) PROVIDER MULTIPLE from the EVENT CAPTURE PATIENT File (#721).
727.815, 19 PROVIDER #2 PERSON CLASS	Provider #2 Person class is the VA code of the Person Class of the Provider as of the date of this record.	Provider Person Class is derived from the New Person file (#200), field (#5), file (#8932.1.)
727.815,20 PROVIDER #3	This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the third assisting Provider who performed the procedure associated with the Event Capture Patient record.	A character string of format "2" _ IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is derived by the returning local array (third node) of the calling \$\$GETPRV^ECPRVMUT API (DBIA #4460) that returns the (#42) PROVIDER MULTIPLE from the EVENT CAPTURE PATIENT File (#721).
727.815, 21 PROVIDER #3 PERSON CLASS	The VA Code of the Person Class of the third Provider for this record (In DSS, this is called Provider Type) Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Derived from the New Person file (#200), field (#5), file (#8932.1.)
727.815, 22 PLACEHOLDER4	Currently Null	Currently Null
727.815,23 MOVEMENT FILE #	A number used as an index into patient movement file.	Pointer to the PATIENT MOVEMENT file (#405). Using the "ATT1" cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), this is a pointer to the file (#405) record for the patient's admission.
727.815,24 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record. Only applicable if the patient was an inpatient on the date of the procedure.  NULL for outpatients, except if observation patient.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), then the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.815,25 TIME	Time that the Event Capture procedure was performed. Format: HHMMSS	Time is extracted from the date information pulled from the DATE/TIME OF PROCEDURE field (#2) in the EVENT CAPTURE PATIENT file (#721).  A default of "000300" will be used if field (#2) of file (#721) does not have a time portion.

Field # and Name	Description	Technical Description
727.815,26 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the DATE/TIME field (#.01) from the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to file (#404.51) is transmitted.
727.815,27 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the DATE/TIME field (#.01) from the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.815,28 PCE CPT CODE & MODIFIERS	Five character CPT Code from PCE, the Quantity or how many times the unique code appears in the record, and up five two- character CPT modifiers.	Derived from the PCE CPT CODE field (#19) in the EVENT CAPTURE PATIENT file (#721).  The source of CPT modifiers is the MODIFIER field (#.01) of the CPT MODIFIER file (#81.3).
727.815,29 ICD-9 CODE	ICD-9 Diagnostic Code for the procedure performed.	Derived from the ICD-9 CODE field (#20) in the EVENT CAPTURE PATIENT file (#721), which points to the ICD DIAGNOSIS file (#80).
727.815, 30 SECONDARY ICD9 CODE #1	First of the Secondary ICD9 codes for this clinic visit.	Derived from the ICD-9 CODE field (#20) in the EVENT CAPTURE PATIENT file (#721) which points to the ICD DIAGNOSIS file (#80)
727.815, 31 SECONDARY ICD9 CODE #2	Second of the Secondary ICD9 code for this clinic visit.	Derived from the ICD-9 CODE field (#20) in the EVENT CAPTURE PATIENT file (#721) which points to the ICD DIAGNOSIS file (#80)
727.815, 32 SECONDARY ICD9 CODE #3	Third of the Secondary ICD9 codes for this clinic visit.	Derived from the ICD-9 CODE field (#20) in the EVENT CAPTURE PATIENT file (#721) which points to the ICD DIAGNOSIS file (#80)
727.815, 33 SECONDARY ICD9 CODE #4	Fourth of the Secondary ICD9 code for this clinic visit.	Derived from the ICD-9 CODE field (#20) in the EVENT CAPTURE PATIENT file (#721) which points to the ICD DIAGNOSIS file (#80)
727.815,34 AGENT ORANGE	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.815,35 RADIATION EXPOSURE	Indicates if patient claims exposure to ionizing radiation  Values: Y= Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation Unknown	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.815,36 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions. Y = Yes N = No U = Unknown	This field is derived from the SOUTHWEST CONDITIONS? Field (#.322013) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT which is called by PAT^ECXUTL3.

Field # and Name	Description	Technical Description
727.815,37 SERVICE CONNECTED	Indicates if this patient is service connected  Values: Y = This patient is service connected N = This patient is not service connected	Derived from the SERVICE CONNECTED field (#24) in the EVENT CAPTURE PATIENT file (#721)
727.815,38 SENT TO PCE	This field flags data that has been sent from Event Capture to PCE.  Values: Y = Yes N = No	The value for this field is extracted from the EVENT CAPTURE file (#721) SENT TO PCE field (#25) which contains a set of codes: 1: YES 0: NO Translated to Y or N for transmission to AAC.
727.815, 39 PLACEHOLDER5	Currently Null	Currently Null
727.815,40 DSS IDENTIFIER	This data element is always exactly 6 characters in length. The DSS Identifier represents the primary and secondary stop codes of the Associated Clinic OR Associated Stop Code of the DSS Unit. Changed for FY2003 to ensure that records pertaining to observation cases contain the correct value.  Format: <b>DSS Identifier = PPPSSS</b> Where PPP is Primary Stop Code and SSS is the Secondary Stop Code of the associated clinic in the Event Capture record.  <b>DSS Identifier = PPP000</b> Where PPP is Primary Stop Code and 000 is appended when Secondary Stop Code is not specified, unknown or DSS Unit is set to "NOT send to PCE."  <b>DSS Identifier = 000000</b> Primary Stop Code is not known or the DSS Unit does not have an Associated Stop Code.	Derived from: (1) EVENT CAPTURE PATIENT file (#721); ASSOCIATED CLINIC field (#26) (2) HOSPITAL LOCATION field (#44); STOP CODE NUMBER field (#8) and CREDIT STOP CODE field (#2503) (3) CLINIC STOP file (#40.7); AMIS REPORTING STOP CODE field (#1)  OR Derived from: (1) EVENT CAPTURE PATIENT file (#721); DSS UNIT field (#6) (2) DSS UNIT file (#724); ASSOCIATED STOP CODE field (#9) (3) CLINIC STOP file (#40.7); AMIS REPORTING STOP CODE field (#1)
727.815, 41 PLACEHOLDER	Currently Null	Currently Null
727.815, 42 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$(GETICN^MPIF001(DFN), "V" )
727.815, 43 DSS PRODUCT DEPARTMENT	The nationally defined DSS Department Code designated for the patient care product.	Obtained from the DSS UNIT field (#6), EVENT CAPTURE PATIENT file (#721), which is a pointer to the UNIT NUMBER field (#4) of the DSS Unit file (#724)
727.815, 44 PLACEHOLDER	Currently Null	Currently Null
727.815, 45 PLACEHOLDER	Currently Null	Currently Null
727.815, 46 PLACEHOLDER	Currently Null	Currently Null
727.815,47 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. This field will hold the VA codes associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.815, 48 PLACEHOLDER	Currently Null.	Currently Null

Field # and Name	Description	Technical Description
727.815, 49 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by “2”.	This is a reference to the NEW PERSON file (#200) for the provider, who is the patient’s Associate Provider for Primary Care as assigned with the PCMM application
727.815, 50 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient’s Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	Derived from the NEW PERSON file (#200), field #5; file (#8932.1). Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file (#200).
727.815, 51 PLACEHOLDER	Currently Null.	Currently Null
727.815, 52 DIVISION	Currently Null	Currently Null
727.815, 53 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer. U = Unknown	The MST history file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients’ MST status is stored in the MST status field (#3). A call will be made to \$\$GETSTAT^DGMSTAPI (DFN, DGDATE) using the DFN in the PATIENT NO. DFN field (#4) and the date in the DAY field (#8).
727.815, 54 DOM, PR RTP AND SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes
727.815, 55 DATE OF BIRTH	Patient’s date of birth Format: YYYYMMDD	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)
727.815, 56 ENROLLMENT CATEGORY	Patient’s enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the Enrollment STATUS found in this extract.  Uses PATIENT ENROLLMENT file (#27.11), CATEGORY (DFN, STATUS)

Field # and Name	Description	Technical Description
727.815,57 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment	Derived from the PATIENT ENROLLMENT file (#27.11), ENROLLMENT STATUS field (#.04), which is a pointer to the ENROLLMENT STATUS file (#27.15).  In the enrollment field located in PATIENT ENROLLMENT file (#27.11)
727.815, 58 Placeholder	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.815, 59 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values:</p> <p>A = Army-Active Duty  T = Other Non-Veteran  B = Navy, Marine-Active Duty  U = CHAMPVA-Spouse, Child  C = Air Force-Active Duty  V = CHAMPUS  D = Coast Guard- Active Duty  W = Czechoslovakia/Poland Svc  E = Retired, Uniformed Services  X = Persian Gulf War  F = Medical Remedial Enlist  Y = CAV/NPS  G = Merchant Seaman-USPHS  Z = Merchant Marine  H = Other USPHS Beneficiaries  0 = Korean  I = Observation/Examination  1 = World War I  J = Office of Workers Comp  2 = World War II  K = Job Corps/Peace Corps  3 = Spanish American  L = Railroad Retirement  4 = Pre-Korean  M = Beneficiaries –Foreign Government  5 = Post-Korean  N = Humanitarian (Non-Vet)  6 = Operation Desert Shield  O = Champus Restore  7 = Vietnam ERAQ = Other Federal Dependant  P = Other Reimbursement. (Non-Vet)  8 = Post-Vietnam  R = Donors (Non-Vet)  9 = Other or None  S = Special Studies (Non-Vet)</p>	<p>Derived from the PERIOD OF SERVICE field (#.323) in the PATIENT file (#2). The data is derived from the CODE field (#.03) in the PERIOD OF SERVICE file (#21). This code is a single alphanumeric character.</p>
727.815, 60 PURPLE HEART INDICATOR	<p>Indicates whether or not the patient is a Purple Heart recipient</p> <p>Values:</p> <p>Y = Yes Purple Heart recipient  N = No not Purple Heart recipient</p>	<p>Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.</p>
727.815, 61 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator. (Y,N). Indicates that a patient is an Extended Outpatient.</p> <p>Y=Yes  N=No</p>	<p>Derived from other fields in this extract. If the TREATING SPECIALTY field #10 contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO.'</p>

Field # and Name	Description	Technical Description																
727.815, 62 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the ECS extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Visit Date and Stop Code value = Stop Code value associated the ECS DSS Unit.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + “I” (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.815, 63 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values: K = Korean DMZ V = Vietnam</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT FILE (#2)																
727.815, 64 ORDERING DIVISION	Currently Null	Currently Null																
727.815, 65 CONTRACT START DATE	Currently Null	Currently Null																
727.815, 66 CONTRACT END DATE	Currently Null	Currently Null																
727.815, 67 CONTRACT TYPE	Currently Null	Currently Null																
727.815, 68 CNH/SH STATUS	<p>Community Nursing Home/ State Home (CNH/SH) Indicator</p> <p>Values: Y = Yes N = No Null</p>	Derived from the CNH CURRENT field (#148) of the PATIENT file (#2) using the Patient DFN																
727.815, 69 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	The value is retrieved from the EVENT CAPTURE PATIENT file (#721), LOCATION field (#3) which is a pointer to the INSTITUTION file (#4). It then uses the RADDIV^ECXDEPT DSS API to retrieve the STATION NUMBER field (#99) in the INSTITUTION file (#4).																



Field # and Name	Description	Technical Description
727.815, 70 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC – VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	<p>Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.</p>
727.815, 71 HEAD & NECK CANCER INDICATOR	<p>Identifies whether patient has head and/or neck cancer</p> <p>Y = Yes N = No</p>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)</p>
727.815, 72 ETHNICITY	<p>The patient's ethnicity code</p> <p>Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>D = Declined to Answer</li> <li>H = Hispanic or Latino</li> <li>N = Not Hispanic or Latino</li> <li>U = Unknown by Patient</li> </ul>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2). The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.</p>

Field # and Name	Description	Technical Description
727.815, 73 RACE 1	<p>Self-reported by patient as recorded in Vista patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.</p> <p>Values:  3 = American Indian or Alaska Native  8 = Asian  9 = Black or African American  A = Native Hawaiian or other Pacific Islander  B = White  C = Declined to answer  D = Unknown by Patient  Null</p>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), RACE 1 is derived from the PTF VALUE field (#5) of the RACE file (#10) pointed to by the RACE INFORMATION field (#.01) of the RACE INFORMATION sub file (#2.02) of the PATIENT file (#2).</p> <p>Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), will be included in the RACE 1 field. If any of the RACE INFORMATION values returned are “C” (DECLINED TO ANSWER) that will be the only value included in the RACE1 field. Identifies what is the race of the patient. Method of collection is only self-identification.</p>
727.815, 74 ENROLLMENT LOCATION	<p>The facility that the patient chooses to designate as his preferred location for care.</p> <p>Values:  Station Number</p>	<p>Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).</p>
727.815, 75 DSS IP #	Currently Null	Currently Null
727.815, 76 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:  1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions.  2 = VA-rated service-connected disabilities 30% or 40%  3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151  4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled  5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disabled by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs  6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits</p>	<p>Contains the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)</p>

Field # and Name	Description	Technical Description
	<p>for 5 years post discharge). Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)</p> <p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment</p> <p>Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.815, 77 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	<p>Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U"</p>
727.815, 78 PATIENT TYPE	<p>Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.</p> <p>Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare</p>	<p>Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)</p>

Field # and Name	Description	Technical Description
727.815, 79 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 – qualifies as a CV 0 – does not qualify as a CV -1 – bad DFN or date
727.815, 80 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2 <sup>nd</sup> piece is the Combat Vet End Date.
727.815, 81 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 – vet was eligible on date specified (or DT) 0 – vet was not eligible on date specified (or DT)  Based on these returns, the value for this field shall be Y =Yes, or Null.
727.815, 82 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes – Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROOT"
727.815, 83 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	This field is extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.815, 84 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: Y = Yes N = No Null	Using the VISIT field (#28) in the EVENT CAPTURE PATIENT file (#721) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the agent orange indicator stored at the AGENT ORANGE EXPOSURE field (#80002) in the VISIT file (#9000010).

Field # and Name	Description	Technical Description
727.815, 85 ENCOUNTER SWAC	Indicates the appropriate response for Southwest Asia conditions as related to this patient's episode of care.  Values: Y = Yes N = No Null	Using the VISIT field (#28) in the EVENT CAPTURE PATIENT file (#721) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Southwest Asia conditions indicator stored at the SW ASIA CONDITIONS field (#80004) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "PGE".
727.815, 86 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: Y = Yes N = No Null	Using the VISIT field (#28) in the EVENT CAPTURE PATIENT file (#721) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the head/neck cancer data stored in the HEAD AND/OR NECK CANCER field (#80006) in the VISIT file (#9000010).
727.815, 87 ENCOUNTER MST	Indicates whether service provided during this patient encounter is related to military sexual trauma.  Values: Y = Yes N = No Null	Using the VISIT field (#28) in the EVENT CAPTURE PATIENT file (#721) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the military sexual trauma data stored at the MILITARY SEXUAL TRAUMA field (#80005) in the VISIT file (#9000010).
727.815, 88 RADIATION ENCOUNTER INDICATOR	This indicates whether service provided during this patient encounter is related to exposure to ionizing radiation.  Values: Y = Yes N = No Null	Using the VISIT field (#28) in the EVENT CAPTURE PATIENT file (#721) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the ionizing radiation exposure indicator stored at the IONIZING RADIATION EXPOSURE field (#80003) in the VISIT file (#9000010).
727.815, 89 NUTRITION DIAGNOSIS	Currently Null	Currently Null
727.815, 90 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.815, 91 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	The value of this field is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.815, 92 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.815, 93 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.815, 94 PROVIDER NPI	A standard, unique life-long identifier for individuals providing health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.815, 95 PROVIDER #2 NPI	A standard, unique life-long identifier for the second assisting provider of health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.815, 96 PROVIDER #3 NPI	A standard, unique life-long identifier for the third assisting provider of health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.815,97 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.815,98 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".
727.815,99 PATCAT	This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.  Values: AD = Active Duty ADD = Active Duty Dependent FNRS = Former Non-Remarried Spouse RET = Retiree RETD = Retiree Dependent RES = Reservist REC = Recruit TDRL = Temporary Disability TFL = TRICARE for Life	If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.  FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.
727.815,100 PROVIDER #4	This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the fourth assisting Provider who performed the procedure associated with the Event Capture Patient record.	A character string of format "3"_IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is derived by the returning local array (fourth node) of the calling \$\$GETPRV^ECPRVMUT API (DBIA #4460) that returns the (#42) PROVIDER MULTIPLE FROM THE EVENT CAPTURE PATIENT File (#721).
727.815,101 PROVIDER #4 PERSON CLASS	This is the VA code of the Person Class of the fourth assisting Provider as of the date of this record	Derived by calling \$\$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the New Person (#200) File. Copied from field VA Code (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.
727.815,102 PROVIDER #4 NPI	A standard unique life-long identifier of the fourth assisting provider of health care services.	The NPI is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.815,103 PROVIDER #5	This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the fifth assisting Provide who performed the procedure associated with the Event Capture Patient record.	A character string of format "3"-IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is derived by the returning local array (fifth node) of the calling \$\$GTPRV^ECPRVMUT API (DBIA #4460) that returns the (#43) PROVIDER MULTIPLE from the EVENT CAPTURE PATIENT FILE (#721).
727.815,104 PROVIDER #5 PERSON CLASS	This is the VA code of the Person Class of the fifth assisting Provider as of the date of this record	Derived by calling \$\$PRVCLASS^ECXUTL(IEN<DATE), where IEN is the IEN of the NEW PERSON (#200) File. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.
727.815,105 PROVIDER #5 NPI	A standard unique life-long identifier of the fifth assisting provider of health care services.	The NPI is retrieved via the supporting Kernel API: \$\$NPI&XUSNPI.

## #727.813 - LABORATORY EXTRACT (LAB) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Laboratory extract from existing VistA files. Entries into this file are made by extracting data by two different methods depending upon whether or not LMIP codes are used. Using LMIP codes, the data are extracted in large part from the WKLD LOG file (#64.03) which is populated by a routine provided by the Laboratory development team. Not using LMIP codes, the data are derived from several Lab files as well as from several other VistA files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the "AC" cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.813,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.813,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.813,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.813,3 FACILITY	Identifier for the station and division.	Using the NAME field (#.01) pointer from the DSS EXTRACTS file (#728), FACILITY is derived from the STATION NUMBER field (#99) for that pointer number in the INSTITUTION file (#4)
727.813,4 PATIENT NO. - DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	Internal entry number (IEN) in the PATIENT file (#2) or the REFERRAL PATIENT file (#67). Derived from the NAME field (#.03) as defined from the PARENT FILE field (#.02) in the LAB DATA file (#63).
727.813,5 SSN IDENTIFYING NUMBER	Patient's Social Security Number or the identifying number for a referral-patient.	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.813,6 NAME	The first four characters of the patient's last name, left justified.	If the PATIENT field (#9) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1) is a. PATIENT file (#2) = NAME field (#.01) in the PATIENT file (#2)



Field # and Name	Description	Technical Description
727.813,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to "I" if an inpatient status is found based on these calls.
727.813,8 DAY	Date Lab Test/Specimen was collected. Format: YYYYMMDD	Date is inserted in this field by Laboratory routine ECXLBN and is derived from WKLD LOG file (#64.03) DATE/TIME COLLECTED field (#12).  The value in DATE/TIME COLLECTED field (#12) of WKLD LOG file (#64.03) originated from routine LRCAPDSS and is derived from WKLD DATA file (#64.1); sub-file ACCESSION WKLD CODE TIME (#64.1111); INVERSE DATE COMPLETED field (#21).  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with '01' for the day (DD) portion.
727.813,9 ACCESSION AREA	The accession area location indicating where lab specimen was received.	Derived from either: 1) HOSPITAL LOCATION field (#14) WKLD LOG file (#64.03), MAJ. SECT. file (#6), ACCESSION WKLD CODE TIME sub-file (#64.1111), WKLD CODE sub-file (#64.111), DATE sub-file (#64.11), WKLD DATA file (#64.1) or HOSPITAL LOCATION field (#14) WKLD LOG file (#64.03), AGENCY CODE Field (#95), INSTITUTION file (#4)  For laboratory procedure on a routine medical center patient, this field will contain the internal record number of the Accession Area in the ACCESSION file (#68). For procedure on a referral patient, this field will contain the 2-character Agency Code from the AGENCY CODE field (#95) of the INSTITUTION file (#4) record that represents the referring Institution.
727.813,10 ABBREVIATION	Abbreviation for the accession area location indicating where lab specimen was received.	Derived from the ABBREVIATION field (#.09) in the ACCESSION file (#68) as pointed to by the MAJ. SECT. field (#6) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1)
727.813,11 TEST	Code for test performed.	Derived from the NAME field (#.01) in the LABORATORY TEST FILE (#60) as pointed to by the LAB TEST field (#1) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1)

Field # and Name	Description	Technical Description
727.813,12 URGENCY OF TEST	Turnaround time requested.	Derived from the URGENCY field (#.01) in the URGENCY FILE (#62.05) as pointed to by the URGENCY field (#22) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1)
727.813,13 TREATING SPECIALTY	Indicates treating specialty PTF CODE for this patient or entity. Will be set to Null for outpatients.	Derived from the NAME field (#.01) in the SPECIALTY file (#42.4), as pointed to by the NAME field (#.01) in the FACILITY TREATING SPECIALTY file (#45.7), as pointed to by the TREATING SPECIALTY field (#16) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.813,14 LOCATION	Location of patient.  If the "File" field in this record = 2, then the location of the patient is a pointer to ward or clinic.  If the "File" field in this record = 67, then the location of the patient is the referral station number or the non-VA referral site name.	Derived from the NAME field (#.01) of the HOSPITAL LOCATION file (#44) as pointed to by the ORDERING LOCATION field (#20) of the ACCESSION WKLD CODE TIME field (#1) multiple within the CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1). Pointer to patient HOSPITAL LOCATION file (#44), or Referral Station Number from INSTITUTION file (#4), or Non VA Referral Site Name.
727.813,15 PROVIDER	The ordering provider for this test for this patient  This number is IEN preceded by "2"	Derived from the NAME field (#.01) of the PROVIDER file (#6) or the NAME field (#.01) of the NEW PERSON file (#200) as pointed to by the PROVIDER field (#15) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1)
727.813,16 MOVEMENT FILE #	A number used as an index into patient movement file.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), this field is set to the value of VAIP(1), which is the pointer to the PATIENT MOVEMENT file (#405).
727.813,17 FILE	Parent file number from which test was extracted  Values: 2 = if from PATIENT file 67 = if from REFERRAL PATIENT file (#67).	If the PATIENT field (#9) of the ACCESSION WKLD CODE TIME field (#1) multiple within the WKLD CODE field (#1) multiple within the DATE field (#.03) contains a. ^DPT= PATIENT file (#2) b. ^LRT(67, = REFERRAL PATIENT file (#67)

Field # and Name	Description	Technical Description
727.813,18 TIME	The time the specimen was collected. Format: HHMMSS	1. Data is inserted in this field by Laboratory routine ECXLBN and is derived from WKLD LOG file (#64.03) DATE/TIME COLLECTED field (#12).  2. The value in field (#12) of file (#64.03) originated from routine LRCAPDSS and is derived from WKLD DATA file (#64.1), ACCESSION WKLD CODE TIME sub-file (#64.1111), INVERSE DATE COMPLETED field (#21).
727.813,19 WORKLOAD CODE	The LMIP/NLT workload code for this record. MAY correspond to a College of American Pathologists (CAP) code.	Derived from the WKLD CODE field (#1) of the WKLD CODE file (#64) as pointed to by the WKLD CODE field (#.01) of the WKLD CODE field (#1) multiple within the DATE field (#.03) multiple of the WKLD DATA file (#64.1)
727.813,20 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the ACCESSION DATE and the patient pointer (DFN) a call is made to the Scheduling API, OUTPTTM^SDUTL3. Only the pointer (IEN) to TEAM file (#404.51) is used.
727.813,21 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application on the accession date.  This number is IEN preceded by “2”	Using the ACCESSION DATE and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.813, 22 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from SE(\$GETICN^MPIF001(DFN), “V” )
727.813, 23 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.813, 24 PLACEHOLDER	Currently Null	Currently Null
727.813,25 PLACEHOLDER	Currently Null	Currently Null
727.813, 26 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.813, 27 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by “2”.	Using the ACCESSION DATE and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTAP^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.813, 28 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	Derived from the NEW PERSON file (#200), field #5); file (#8932.1). Active Person Class is determined by \$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file (#200).
727.813, 29 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description																
727.813, 30 DOM, PR RTP AND SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SAR RTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SAR RTP CODE field in file (#727.831) which holds a set of codes																
727.813, 31 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator  Y = Patient is an Observation Patient. N = Patient is not an Observation Patient	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.																
727.813, 32 ENCOUNTER NUMBER	The unique number assigned to each encounter within DSS.  The number is left justified in the field and is determined by the following: • <u>Inpatients</u> - the concatenation of SSN + Admit Date + letter I • <u>Outpatients</u> - the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value • <u>Observation encounters</u> - receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is: <table><tr><th>Treating Specialty</th><th>Stop Code</th></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table>  In the LAB extract encounter numbers for inpatients & observation cases as above. Outpatient encounter numbers should be built with the Date field and Stop Code value = 108.	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)  <u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7- character Julian value from the DAY field (#8)  <u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	

Field # and Name	Description	Technical Description
727.813, 33 ORDERING STOP CODE	Ordering Stop Code Numeric values '101' through '999'.	Derived from the pointer in the HOSPITAL LOCATION field (#14) of the WKLD LOG file (#64.03). Using this pointer to the HOSPITAL LOCATION file (#44), the ORDERING STOP CODE is then obtained from the STOP CODE field (#1) of the appropriate entry in the CLINIC AND STOP CODES file (#728.44).  If the Treating Specialty field is 18 or 23 or 24 or 41 or 65 or 94 or 1J then fill the ORDERING STOP CODE field with the corresponding Observation Stop Code. Please see table below: Treating Specialty    Observation Code 18                      293 23                      295 24                      290  41                      296 65                      291 94                      292 1J                      297
727.813, 34 ORDERING DATE	Date test was ordered.	Derived from the DATE ORDERED field (#13) of the WKLD LOG FILE (#64.03)
727.813, 35 PRODUCTION DIVISION	Identifies the division/facility where the work was performed.	Derived from DSS Extracts file (#728) NAME field (#.01) which is a pointer to INSTITUTION file (#4). It then uses the INSTITUTION file pointer to retrieve the value for STATION NUMBER field (#99). It then uses the station number and the "D" cross-reference from INSTITUTION file (#4) to get the IEN for the production division. It then uses RADDIV^ECXDEPT DSS API to get the value from the STATION NUMBER field (#99) in the INSTITUTION file (#4).
727.813, 36 DSS IP #	Currently Null	Currently Null
727.813, 37 ORDERING PROVIDER PERSON CLASS	The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	Value is based on the PROVIDER field (#13). LABORATORY file (#63) points to the NEW PERSON file (#200) for PROVIDER. File (#200) points to the PERSON CLASS file (#8932.1) for Person Class. The ORDERING PROVIDER PERSON CLASS is derived via the LABORATORY file (#63) which points to the NEW PERSON file (#200) for PROVIDER file (#200) points to the PERSON CLASS file (#8932.1) for Person Class.
727.813, 38 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.813, 39 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.813, 40 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.813, 41 PROVIDER NPI	A standard, unique life-long identifier for individuals providing health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.813, 42 LOINC CODE	A universal standard for identifying laboratory observations.	Derived by finding Test (field #11 above) on the LABORATORY TEST file (#60).
727.813,43 LAB BILLABLE PROCEDURE	If a "Y" is entered it will indicate that the test is considered a billable LMIP procedure (lab billable means Lab staff workload).	This field indicates if the test is considered to be a billable LMIP procedure or not (lab billable means Lab staff workload).  This field is derived from the BILLABLE PROCEDURE (#4) field of the WKLD CODE (#64) file.
X727.813,44 DSS FEEDER KEY	If a "Y" is entered it indicates the WKLD Code should be used for DSS Laboratory data collection.	This field indicates that the Wkld Code should be used for DSS Laboratory data collection. Codes that are defined as 'Y' (YES) will be extracted and passed to the DSS Laboratory API.  This field is based on the value of the DSS FEEDER KEY (#14) field of the WKLD CODE (#64) file.
X727.813,45 DATA NAME	This field is the Lab Test Data name. This field will allow lab management and DSS staff to know whether the entry is a panel test and if it has been designated as a separately billable test. If this field has a value then it is not a panel test and is individually billable. If this field does not have a value then it's a panel test and is billable as a unit.	This field indicates the actual data name (test name) expressed in the NAME (#.01) field of the LABORATORY TEST File (#60), and is only populated if a test is a non-panel test and is part of the CHEM, HEM, TOX, SER, RIA, etc.area. See RSD
727.813,46 DATA LOCATION	The Data Location field is only populated if a test is a non-panel test and is part of the CHEM, HEM, TOX, SER, RIA, etc. area.	This field is derived from the LOCATION (DATA NAME)(#5) field of the LABORATORY(#60) file.
727.813,47 PATCAT	This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.  Values: AD = Active Duty ADD = Active Duty Dependent FNRS = Former Non-Remarried Spouse RET = Retiree RETD = Retiree Dependent RES = Reservist REC = Recruit TDRL = Temporary Disability TFL = TRICARE for Life	If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.  FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.

## #727.824 - LAB RESULTS EXTRACT (LAR) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Laboratory Results extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the "AC" cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.824,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.824,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.824,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.824,3 FACILITY	Identifier for the station and division.	This is an indicator of the division where this event happened. Using the NAME field (#.01) pointer from the DSS EXTRACTS file (#728), FACILITY is derived from the STATION NUMBER field (#99) for that pointer number in the INSTITUTION file (#4).
727.824,4 PATIENT NO. - DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.824,5 SSN	The patient's social security number (Pseudo SSNs are indicated by a trailing 'P' or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.824,6 NAME	The first four characters of the patient's last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first "," piece are used, padded with trailing spaces if necessary.
727.824,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to "I" if an inpatient status is found based on these calls.

Field # and Name	Description	Technical Description
727.824,8 DAY	Date Lab Test/Specimen was collected. Format: YYYYMMDD	Derived from SPECIMEN COLLECTION DATE field (#10) of LAB DSS LAR EXTRACT file (#64.036) which is retrieved from file LAB DATA file (#63), BLOOD BANK sub file (#63.01), DATE/TIME SPECIMEN TAKEN field (#.01).  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.824,9 TEST CODE	Coded value of the lab test as specified by the vendor (Eclipsys).	The internal entry number of the lab test in the DSS LAB TEST file (#727.2) padded with leading zeroes to four characters
727.824,10 RESULTS	Result of the lab test (a number between -10000 and 10000; 4 decimal digits).	Results of the test identified in the CHEM, HEM, TOX, RIA, SER, etc. multiple (#4) within the LAB DATA file (#63). (First "^" piece of ^LR(LRDFN,"CH",INVERSE_DATE,TEST_I EN)
727.824,11	***Field not used DSO aware***	***Field not used DSO aware***
727.824,12 HI/LO INDICATOR	Indicates High or Low test result.  Values: H = High L = Low Null	Derived from the Results indicator of the test identified in the CHEM, HEM, TOX, RIA, SER, etc. multiple (#4) within the LAB DATA file (#63) (Second "^" piece of ^LR(LRDFN,"CH",INVERSE_DATE,TEST_I EN)
727.824,13 DATE ORDERED	Date on which the Laboratory test was ordered. YYYYMMDD	Derived from the LAB DSS LAR EXTRACT file (#64.036), DATE ORDERED field (#3)  This field is always exactly 8 numeric characters in length. If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.824,14 TIME ORDERED	Time of day at which the Laboratory test was ordered (6-digit military time).	Derived from the LAB DSS LAR EXTRACT file (#64.036), TIME ORDERED field (#4)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default
727.824,15 DATE RESULTS READY	Date on which the Laboratory test result was ready for reporting.	Derived from the LAB DSS LAR EXTRACT file (#64.036), DATE RESULTS AVAIL field (#5)  This field is always exactly 8 numeric characters in length. If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.824,16 TIME RESULTS READY	Time of day at which the Laboratory test result was ready for reporting.	Derived from the LAB DSS LAR EXTRACT file (#64.036), TIME RESULTS AVAIL field (#6)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default.



Field # and Name	Description	Technical Description
727.824, 17 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP(1), which is a pointer to the PATIENT MOVEMENT file (#405).
727.824, 18 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.  NULL for outpatients	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.824, 19 WORKLOAD CODE	The LMIP/NLT workload code for this record. MAY correspond to a College of American Pathologists (CAP) code.	Derived from the WKLD CODE field (#1) of the WKLD CODE file (#64) as pointed to by the NATIONAL VA LAB CODE field (#64) of the LABORATORY TEST file (#60) as pointed to by the LOCAL LAB TEST NAME field (#1) multiple within the DSS LAB TEST field (#1) multiple of the DSS LAB TESTS file (#727.2)
727.824, 20 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from SE(\$GETICN^MPIF001(DFN), "V" )
727.824, 21 DSS DEPT	Currently Null	Currently Null
727.824, 22 DOM, PR RTP AND SA RTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SAR RTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SAR RTP CODE field in file (#727.831) which holds a set of codes
727.824, 23 TIME COLLECTED	The time the specimen was collected. Format: HHMMSS	Derived from the LAR API file (#64.036) time portion of the new DATE/TIME COLLECTED field (#12)
727.824, 24 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator  Y = Patient is an Observation Patient. N = Patient is not an Observation Patient.	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.

Field # and Name	Description	Technical Description																
727.824, 25 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the LAR extract, encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and Stop Code value = 108.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.824, 26 PRODUCTION DIVISION	Identifies the division/facility where the work was performed.	The value is derived from DSS EXTRACTS file (#728) NAME field (#.01) which is a pointer to INSTITUTION file (#4). It then uses the INSTITUTION file (#4) pointer to retrieve the value for STATION NUMBER field (#99). It then uses the station number, and the "D" cross-reference from INSTITUTION file (#4) to get the IEN for the production division. It then uses RADDIV^ECXDEPT DSS API to get the value from the STATION NUMBER field (#99) in the INSTITUTION file (#4).																
727.824, 27 LAB RESULTS TRANSLATION	<p>Derived from a translation table that converts the results field from free text to a numeric value for certain tests.</p> <p>Converted Values: 0 = Negative, Non-Reactive 1 = Positive, Reactive 2 = Borderline, Indeterminate 3 = Test not performed, Qty not sufficient or other reason. 5 = Result cannot be translated</p>	For free text results entered in the RESULTS field (#10), the LAB RESULTS TRANSLATION field (#27) is derived from the TRANSLATION CODE field (#1) of the LAB RESULTS TRANSLATION file (#727.7)																
727.824, 28 ORDERING PROVIDER	<p>Provider ordering this LAB test.</p> <p>Value: VistA file (#200) IEN preceded by "2"</p>	Derived by pointing to the NEW PERSON file (#200) for the field indicating Provider																

Field # and Name	Description	Technical Description
727.824, 29 ORDERING PROVIDER PERSON CLASS	The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS, this is called Provider Type)  Format: "V999999". Start with a V and then pad zeros to the left of the numerals, if needed, to get exactly seven characters.	Derived by first pointing to the NEW PERSON file (#200) for provider, File NEW PERSON (#200) then points to the PERSON CLASS file (# 8932.1) to check for Person Class
727.824, 30 ORDERING PROVIDER NPI	A standard, unique life-long identifier of the provider who ordered the intravenous product, lab test, type & cross match or patient feeding	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.824, 31 LOINC CODE	A universal coding standard for identifying laboratory observations.	Derived from the LAB DSS LAR EXTRACT file (#64.036), LOINC CODE field.
727.824,32 PATCAT	This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.  Values: AD = Active Duty ADD = Active Duty Dependent FNRS = Former Non-Remarried Spouse RET = Retiree RETD = Retiree Dependent RES = Reservist REC = Recruit TDRL = Temporary Disability TFL = TRICARE for Life	If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.  FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.

## #727.832 – NUTRITION EXTRACT (NUT) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Nutrition extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.832,01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.832,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM..
727.832,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.832,3 FACILITY	Identifier for the station and division.	An indicator of the division where this event happened. Using the NAME field (#.01) pointer from the DSS EXTRACTS file (#728), FACILITY is derived from the STATION NUMBER field (#99) for that pointer number in the INSTITUTION file (#4).
727.832,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	Derived from the PATIENT field (#.01) in the NUTRITION PERSON file (#115). PATIENT NO. – DFN/IEN is a pointer to the NAME field (.01) of the PATIENT file (#2) or a pointer to the NEW PERSON file (#200). This data represents the patient DFN or the NEW PERSON file IEN.
727.832,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the NUTRITION EXTRACT file (#727.832), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.832,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the NUTRITION EXTRACT file (#727.832), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2)
727.832,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	Using the date and patient’s DFN, a call is made to the Registration’s API IN5^VADPT to determine if the patient was an inpatient on the day the meal was provided

Field # and Name	Description	Technical Description
727.832,8 DAY	Date on which the service was provided. Format: YYYYMMDD	If date is present in (#115.16.01), or (#115.17.01), or (#115.18.01), use the date (record is an outpatient). Otherwise use date in (#115.1.01) in the proper admission multiple. (record is an inpatient)
727.832,9 TIME	Time the service was provided. (6-digit military time). Use Time from DAY/TIME fields in the DAY field	Use Time from DAY/TIME fields in the DAY field
727.832,10 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record from the SPECIALTY file (#42.4).  NULL for outpatients, except if observation patient.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), then the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.832,11 ORDERING PROVIDER	Provider ordering the patient feeding.  Value: VistA file (#200) IEN preceded by "2"	The NEW PERSON file (#200) IEN for the provider that ordered the diet for the patient. Inpatient diets, inpatient supplemental feedings, inpatient tube feedings use the entry number for the ORDER file (#100) and use it to retrieve CURRENT AGENT/PROVIDER field (#1) which is a pointer to the NEW PERSON file (#200). Inpatient standing orders have no ordering provider. Outpatient recurring meals use the entry number for the ORDER file (#100) and use it to retrieve CURRENT AGENT/PROVIDER field (#1) which is a pointer to the NEW PERSON file (#200). Outpatient tube feedings, outpatient special meals and outpatient guest meals have no ordering provider. In DSS, this is called Provider Type.
727.832,12 ORDERING PROVIDER PERSON CLASS	The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Derived from the NEW PERSON file (#200), field (#5) from Person Class file (#8932.1) using GET^XUA4A72
727.832,13 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the patient's DFN and the date of service a call is made to the OUTPTPR^SDUTL3 API to retrieve the primary care team provider. The API returns the IEN for the NEW PERSON file (#200).
727.832,14 PRIMARY CARE PVR PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Derived from the New Person File (#200), field (#5) from Person Class file (#8932.1) using GET^XUA4A72 Kernel's API

Field # and Name	Description	Technical Description
727.832,15 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the patient's IEN from file (#2) and the date of encounter a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to File (#404.51) is transmitted.
727.832,16 MASTER PATIENT INDEX	Unique national VA patient identifier	Using the patient IEN for the patient file (#2) a call is made to the GETICN^MPIF001 API to retrieve the patient's ICN
727.832,17 DATE OF BIRTH	Patient's date of birth Format: YYYYMMDD If Date of Birth cannot be determined, then January 1, 1942, is used as default. The data element is always exactly 8 numeric characters in length.	Derived from the PATIENT file (#2); DATE OF BIRTH field (#.03)
727.832,18 SEX	Gender  Values: M = Male F = Female	Using the patient pointer (DFN), this data is derived from the SEX field (#.02) in the PATIENT file (#2)
727.832,19 RACE 1	Self- reported by patient as recorded in VistA patient file. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.  Values: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient Null	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), RACE 1 is derived from the PTF VALUE field (#5) of the RACE file (#10) pointed to by the RACE INFORMATION field (#.01) of the RACE INFORMATION sub file (#2.02) of the PATIENT file (#2). Only those RACE INFORMATION values in the RACE INFORMATION sub file (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), is included in the RACE 1 field. If any of the RACE INFORMATION values returned are "C" (DECLINED TO ANSWER) that will be the only value included in the RACE 1 field.
727.832,20 ETHNICITY	The patient's ethnicity code Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.  Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2). The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.
727.832,21 VETERAN	Patient's veteran status  Values: Y = Is a veteran N = Is not a veteran	Using the patient pointer (DFN), VETERAN data is derived from the VETERAN (Y/N) field (#1901) in the PATIENT file (#2). The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.832,22 ENROLLMENT STATUS	<p>Patient's enrollment status</p> <ul style="list-style-type: none"> <li>1 = Unverified</li> <li>2 = Verified</li> <li>3 = Inactive</li> <li>4 = Rejected</li> <li>5 = Suspended</li> <li>6 = Deceased</li> <li>7 = Cancelled/Declined</li> <li>8 = Expired</li> <li>9 = Pending</li> <li>10 = Not Eligible</li> <li>11 = Rejected; Fiscal Year</li> <li>12 = Rejected; Mid-cycle</li> <li>13 = Rejected; Stop New Enrollments</li> <li>14 = Rejected; Initial Application by VAMC</li> <li>15 = Pending; No Eligibility Code in VIVA</li> <li>16 = Pending; Means Test Required</li> <li>17 = Pending; Eligibility Status is Unverified</li> <li>18 = Pending; Other</li> <li>19 = Not Eligible; Refused to pay co pay</li> <li>20 = Not Eligible; Ineligible Date</li> <li>21 = Pending; Purple Heart Unconfirmed</li> <li>22 = Rejected; Below Enrollment Group Threshold</li> </ul>	Derived from the Patient Enrollment file (#27.11)
727.832,23 ENROLLMENT LOCATION	<p>The facility that the patient chooses to designate as his preferred location for care.</p> <p>Values: Station Number</p>	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.832,24 ENROLLMENT CATEGORY	<p>Patient's enrollment category</p> <p>Values: E = Enrolled N = Not Enrolled P = In Process</p>	Derived from the Patient Enrollment file (#27.11)
727.832,25 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:</p> <ul style="list-style-type: none"> <li>1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions.</li> <li>2 = VA-rated service-connected disabilities 30% or 40%</li> <li>3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151</li> <li>4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled</li> <li>5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs</li> <li>6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing</li> </ul>	Derives the enrollment priority group and the enrollment priority subgroup from the PATIENT ENROLLMENT file (#27.11)

Field # and Name	Description	Technical Description
	<p>Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)</p> <p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment</p> <p>Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	



Field # and Name	Description	Technical Description
727.832,26 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC – VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	<p>Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD. This code is composed of two or three numeric characters.</p>

Field # and Name	Description	Technical Description
727.832,27 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values:</p> <p>A = Army-Active Duty            B = Navy, Marine-Active Duty            C = Air Force-Active Duty            D = Coast Guard- Active Duty            E = Retired, Uniformed Services            F = Medical Remedial Enlist            G = Merchant Seaman-USPHS            H = Other USPHS Beneficiaries            I = Observation/Examination            J = Office of Workers Comp            K = Job Corps/Peace Corps            L = Railroad Retirement            M = Beneficiaries –Foreign Government            N = Humanitarian (Non-Vet)            O = Champus Restore            P = Other Reimbursement. (Non-Vet)            Q = Other Federal Dependant            R = Donors (Non-Vet)            S = Special Studies (Non-Vet)            T = Other Non-Veteran            U = CHAMPVA-Spouse, Child            V = CHAMPUS            W = Czechoslovakia/Poland Svc            X = Persian Gulf War            Y = CAV/NPS            Z = Merchant Marine            0 = Korean            1 = World War I            2 = World War II            3 = Spanish American            4 = Pre-Korean            5 = Post-Korean            6 = Operation Desert Shield            7 = Vietnam ERA            8 = Post-Vietnam            9 = Other or None</p>	Derived from the PERIOD OF SERVICE field (#.323) in the PATIENT file (#2). The data is derived from the CODE field (#.03) in the PERIOD OF SERVICE file (#21). This code is a single alphanumeric character.
727.832,28 AGENT ORANGE STATUS	<p>Indicates whether patient was exposed to Agent Orange</p> <p>Y = Patient was exposed to Agent Orange            N = Patient not exposed to Agent Orange            U = Unknown</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT file (#2)
727.832,29 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values:</p> <p>K = Korean DMZ            V = Vietnam</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT FILE (#2)
727.832,30 RADIATION STATUS	<p>Indicates if patient claims exposure to ionizing radiation</p> <p>Values:</p> <p>Y= Patient claims exposure to ionizing radiation            N = Patient does not claim exposure to ionizing radiation</p>	Derived from the PATIENT file (#2), RADIATION EXPOSURE INDICATED field (#.32103). The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.832,31 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions. Y = Yes N = No U = Unknown	This field is derived from the SOUTHWEST ASIA CONDITIONS? Field (#.322013) in the PATIENT file (#2) using the patient DFN. The status indicator is returned by SVC^VADPT. The SVC^VADPT call is made from routine PAT^ECXUTL3.
727.832,32 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer. U = Unknown	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients' MST status is stored in the MST STATUS field (#3). A call is made to \$\$GETSTAT^DGMSTAPI (DFN, DGDATE) using the DFN in the PATIENT NO. DFN field (#4) and the date in the day field
727.832,33 HEAD & NECK CANCER INDICATOR	Identifies whether patient has head and/or neck cancer Y = Yes N = No	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), using API \$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)
727.832,34 POW STATUS	Indicates if patient was confined as a Prisoner of War  Values: Y = Patient was confined as a Prisoner of War N = Patient was not confined as a Prisoner of War	Derived from the PATIENT file (#2), POW STATUS INDICATED field (#.525). The status indicator is returned by SVC^VADPT.
727.832,35 POW LOCATION	If POW Status is indicated, then this is the POW confinement location/period.  Values: 1 = World War I 2 = World War II – Europe 3 = World War II – Pacific 4 = Korean 5 = Vietnam 6 = Other	Derived from the PATIENT file (#2), POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.
727.832,36 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient	PATIENT file (#2); CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.
727.832,37 MEANS TEST	The current means test category for this patient  Values: A = Category A B = Category B C = Category C P = Pending Adjudication R = Requires Means Test N = Means Test not Required E = Exempt I = Incomplete L = No Longer Applicable M = Non-Exempt	Using the patient pointer (DFN), MEANS TEST data is derived from the CURRENT MEANS TEST STATUS field (#.14) in the PATIENT file (#2). This field is a pointer to the MEANS TEST STATUS file (#408.32). Using the means test pointer, the data is derived from the CODE field (#.02) in the MEANS TEST STATUS file (#408.32).

Field # and Name	Description	Technical Description
727.832,38 STATE CODE	FIPS 2 character numeric code for the state where the patient resides.	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the NUTRITION EXTRACT file (#727.832), data is derived from the STATE field (#115) in the PATIENT file (#2) which points to the STATE file (#5). From the STATE file record, use the two character VA STATE CODE (#2).
727.832,39 COUNTY CODE	The FIPS county code for where the patient resides	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the NUTRITION EXTRACT File (#727.832), data is taken from the COUNTY field (#117) in the PATIENT file (#2) which points to a sub file record in the COUNTY multiple field (#3) of the STATE file (#5). A pointer to the STATE file (#5) is obtained from the STATE field (#.115) of the file (#2) record. From the sub file record of field (#3) of file (#5) use the value of the VA COUNTY CODE field (#2).
727.832,40 ZIP +4	Zip + 4 is the zip code for where the patient resides using format of nnnnn-nnnn. The 5-character zip code is provided if zip + 4 is not available.	The patient zip code with optional 4 digit extension as found in the ZIP+4 field (#.1112) of the patient's record in the PATIENT file (#2)
727.832,41 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator  Y = Patient is an Observation Patient. N = Patient is not an Observation Patient	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the first 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.
727.832,42 RRTP, PR RTP AND SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	Pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes

Field # and Name	Description	Technical Description																
727.832,43 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS. The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the NUT extract, encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and Stop Code value = NUT.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + “I” (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.832,44 PATIENT DIVISION	Division in which patient’s bed is located	Using the movement record, identify the ward associated with the record and retrieve the facility associated with the ward which is a pointer to the MEDICAL CENTER DIVISION file (#40.8), then use field (#.07) which is a pointer to the INSTITUTION file (#4). Use the GETDIV^ECXDEPT API and retrieve the value from the STATION NUMBER field (#99).																
727.832,45 FOOD PRODUCTION DIVISION	Division in which the kitchen is located.	Take the value in the PRODUCTION LOCATION field located on the DSS Nutrition Division Worksheet and return the value of the division determined there																
727.832,46 DELIVERY DIVISION	Division to which the meal was delivered.	Take the value in the DELIVERY LOCATION field located on the DSS Nutrition Division Worksheet and return the value of the division that is determined there. Using the Delivery Location go to the DSS NUTRITION DIVISION WORKSHEET file (#727.46). Find the location name and retrieve the designated division mapped to the Delivery Location.																
727.832,47 PRODUCT FEEDER KEY	<p>Product delivered (1 of 12 possible DSS Products) In all cases, the extract logic should take both the value for the product field and the source file to the worksheet to obtain the correct Feeder Key value. Some items (Ensure, Cranberry Juice, etc) may appear in different source files and will need different Feeder Key values.</p> <p>12 possible DSS Products: National Diet Products</p>	<p><u>Inpatient Meals</u> RECORD = One record per meal (breakfast, lunch, dinner) between Begin Date and End Date: value = DSS Product Feeder Key which is derived from DSS Nutrition Product Worksheet from the Diet DIET = Take value in (#115.1.3.12) to be used in the DSS Nutrition Product Worksheet to determine value reported in Feeder Key QUANTITY = 1 (one) BEGIN DATE = (#115.1.3.8) (EFFECTIVE</p>																

Field # and Name	Description	Technical Description
	<p>REGULAR FULL LIQS CLEAR LIQS PUREE DYSPH National Supplemental Feeding products SUPP FEED SUPP FEED NC National Tube Feeding Products TF LESS 1 TF MORE 1 TF MIX LESS 1 TF MIX MORE 1 DSS National Standing Order Products ST ORDER ST ORDER NC</p> <p>Records created as follows:</p> <p>INPATIENT MEALS – One record per meal (breakfast, lunch, dinner) between Begin Date and End Date.</p> <p>INPATIENT STANDING ORDERS – One record per standing order for each day between Begin Date and End Date (inclusive).</p> <p>INPATIENT SUPPLEMENTAL FEEDINGS – One record per supplemental feeding (may be up to 12 per day) for each day between Begin Date and End Date (inclusive).</p> <p>INPATIENT TUBE FEEDINGS – One record per product per day for each calendar day between Begin Date and End Date (including both days), (may have multiple records/day if patient is on multiple products).</p> <p>OUTPATIENT RECURRING MEALS – One record per meal.</p> <p>OUTPATIENT TUBE FEEDINGS – One record per day for each product for each day of the month being extracted.</p> <p>OUTPATIENT GUEST MEALS – One record per each guest meal record.</p>	<p>DATE) END DATE = (#115.1.3.9) (CANCEL DATE) or (#115.1.3.17) (DELETE DATE)</p> <p><u>Inpatient Standing Orders</u> RECORD = One record per standing order for each day between Begin Date and End Date (inclusive) PRODUCT = Take value in (#115.1.30.1) to be used in DSS Nutrition Product Worksheet to determine value reported in Feeder Key QUANTITY = 1 (one) BEGIN DATE = (#115.1.30.3) END DATE = (#115.1.30.5)</p> <p><u>Inpatient Supplemental Feedings</u> RECORD = One record per supplemental feeding (may be up to 12 per day) for each day between Begin Date and End Date (inclusive) PRODUCT = take values in (#115.1.20.10); (#115.1.20.12); (#115.1.20.14); (#115.1.20.16); (#115.1.20.18); (#115.1.20.20); (#115.1.20.22); (#115.1.20.24); (#115.1.20.26); (#115.1.20.28); (#115.1.20.30); (#115.1.20.32) to be used in DSS Nutrition Product Worksheet to determine value reported in Feeder Key QUANTITY = 1 (one) BEGIN DATE = (#115.1.20.1) END DATE = (#115.1.20.42)</p> <p><u>Inpatient Tube Feedings</u> RECORD = one record per product per day for each calendar day between Begin Date and End Date (including both days), (may have multiple records/day if patient is on multiple products). Value on extract is from DSS Nutrition Product Worksheet PRODUCT = (#115.1.40.3.01) (PRODUCT) which points to the DSS Nutrition Product Worksheet QUANTITY = (#115.1.40.3.3) (ML per day per product) BEGIN DATE = Take (#115.1.40.13).to point to file (#100), field (#21) START DATE END DATE = (#115.1.40.11) (DATE CANCEL)</p> <p><u>Outpatient Recurring Meals</u> RECORD = One record per meal PRODUCT = (#115.16.1) points to (#111.4) which points to PRODUCTION DIET (#116.2.01) which then points to the DSS Nutrition Product Worksheet QUANTITY = 1 (one) BEGIN DATE = (#115.16.01) (Each day's order is entered separately) END DATE = None</p> <p><u>Outpatient Tube Feedings</u> RECORD = One record per day for each product for each day of the month being extracted that is in the multiple .01, below PRODUCT = (#115.16.19.01) QUANTITY = (#115.16.19.3) (Total ML per day per day)</p>

Field # and Name	Description	Technical Description
		BEGIN DATE = (#115.16.01) END DATE = None  <u>Outpatient Guest Meals</u> RECORD = One record per each guest meal record PRODUCT = (#115.18.50) QUANTITY = 1 (one) BEGIN DATE = Use (#115.18.01) (DAY/TIME) for date of event END DATE = None
727.832,48 FOOD PRODUCTION FACILITY	Kitchen location where product was prepared.	If inpatient = from DIETETIC WARD (#115.1.13) points to NUTRITION LOCATION (#119.6) which points to PRODUCTION FACILITY (#119.72.2) or If outpatient = If OUTPATIENT RECURRING MEAL (#115.16.1) is present, then use OUTPATIENT LOCATION (#115.16.2) to point to NUTRITION LOCATION (#119.6) which points to PRODUCTION FACILITY (#119.72.2) or If OUTPATIENT TUBE FEEDING (#115.16.19) is present then use OUTPATIENT LOCATION (#115.17.2) use to point to NUTRITION LOCATION (#119.6) which points to PRODUCTION FACILITY (#119.72.2) or If OUTPATIENT GUEST MEAL (#115.18.5) is present then use OUTPATIENT LOCATION (#115.18.4) to point to NUTRITION LOCATION (#119.6) which points to PRODUCTION FACILITY (#119.72.2)
727.832,49 DELIVERY LOCATION TYPE	Delivery point for product associated with the specific diet that was delivered on the date in the DAY field.  Values: T= Tray C= Cafeteria D = Dining Room	Use the NUTRITION PATIENT file (#115), ADMISSION field (#1), DIET field (#3), TYPE OF SERVICE field (#7). It is associated with the specific diet that was delivered on the date in the DAY field.

Field # and Name	Description	Technical Description
727.832,50 DELIVERY FEEDER LOCATION	Patient location where product was delivered which depends on the value in DELIVERY LOCATION TYPE.	Depends on value in DELIVERY LOCATION TYPE. IF DELIVERY LOCATION TYPE = "C", Use DIETETIC WARD file (#115.1.13) to point to the NUTRITION LOCATION file (#119.6) to point to the SERVICE POINT file (#119.72). Otherwise, if the DELIVERY LOCATION TYPE = "T" or "D" for inpatients, the DIETETIC WARD (#115.1.13) shall be used to point to the ASSOCIATED MAS WARD (#2.5) multiple (#119.63) in the NUTRITION LOCATION file (#119.6) which includes the ASSOCIATED MAS WARD sub-field (#.01). The .01 field is a pointer to the HOSPITAL LOCATION FILE POINTER field (#44) in the WARD LOCATION file (#42), which is a pointer to HOSPITAL LOCATION file (#44).  If the DELIVERY LOCATION TYPE = "T" or "D" for outpatients, the DIETETIC WARD (#115.1.13) shall be used to point to the ASSOCIATED HOSPITAL LOCATION (#2.6) multiple (#119.64) in the NUTRITION LOCATION file (#119.6) which includes the ASSOCIATED HOSPITAL LOCATION sub-field (#.01). The .01 field is pointer to the HOSPITAL LOCATION file (#44).
727.832,51 QUANTITY	Product quantity. If tube feeding, then fill with ml's delivered. Otherwise quantity = 1.	There are two source fields for this quantity information. For tube feedings with grams use the QUANTITY field; for tube feeding liquid use PRODUCT ML'S/DAY field.  Outpatient – if outpatient tube feeding is present (#115.16.19) and QUANTITY in (#115.16.19.2) is populated and contains "GM" then use this value. Otherwise fill with value from PRODUCT ML'S/DAY (#115.16.19.3) and if Null fill with "1" (one).  Inpatient – if TUBE FEEDING (#115.1.40) is present and QUANTITY in (#115.1.40.3.2) is populated and contains "GM" then use this value. Otherwise fill with value with PRODUCT ML'S/DAY field (#115.1.40.3.3) and if Null fill with "1" (one).
727.832,52 CBOC STATUS	Indicates if the patient was seen at a Community Based Outpatient Clinic (CBOC)  Values: Y = Yes Null = No	Is a pointer to the FACILITY TYPE file (#4.1). CBOC STATUS INDICATOR field is derived from the FACILITY TYPE field (#13) of the INSTITUTION file (#4).
727.832,53 USER ENROLLEE	Indicates whether a veteran has User Enrollee status for the current or future fiscal year.  Values: U = Yes Null = No (includes past date or no date)  SC Veterans 50% or over are not required to enroll.	Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U".- If a veteran has a User Enrollee status for the current or future fiscal year, field is set to "U" . If there is a past date or no date, send Null.



Field # and Name	Description	Technical Description
727.832,54 PATIENT TYPE	Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.  Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare	Determined by looking at the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (# 391). PATIENT TYPE best classifies a patient.
727.832,55 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the PATIENT file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 – qualifies as a CV 0 – does not qualify as a CV -1 – bad DFN or date Based on these returns, the value for this field shall be Y =Yes, E=Eligibility Expired or Null
727.832,56 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes – Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF NATIONAL FLAG file (# 26.15). It is retrieved via an API: \$\$GETACT^DGPFAPL.
727.832,57 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.832,58 ADMISSION DATE	This 8-character numeric string represents the date on which the patient's admission occurred. Format:YYYYMMDD.	Retrieved from the NUTRITION PERSON file (#115), ADMISSION field (#.01)
727.832,59 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.

Field # and Name	Description	Technical Description
727.832,60 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	The value of this field is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date
727.832,61 TF UNITS	Indicates the unit of measurement used for the tube feeding. Values: GM ML Null	If this record is for a tube feeding and if the value in the NUT Extract QUANTITY VistA field (#51)/DSS field (#49) is from the QUANTITY field from (#115.1.40.3), then the value for this field is GM. Otherwise, a check is made to validate that the record is a tube feeding; and, if it is, the value for this field is ML.
727.832,62 ORDERING PROVIDER NPI	A standard, unique life-long identifier of the provider who ordered the intravenous product, lab test, type & cross match or patient feeding	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.832,63 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.832, 64 COUNTRY CODE	The value is the code for the country associated with the address.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.
727.832,65 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.832,66 PATCAT	This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.  Values: AD = Active Duty ADD = Active Duty Dependent FNRS = Former Non-Remarried Spouse RET = Retiree RETD = Retiree Dependent RES = Reservist REC = Recruit TDRL = Temporary Disability TFL = TRICARE for Life	If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.  FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.

## #727.819 – PHARMACY IV DETAIL EXTRACT (IVP) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Pharmacy IV extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.819,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.819,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.819,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.819,3 FACILITY	Identifier for the station and division.	For inpatients: Derived from the DIVISION field (#3.5) in the HOSPITAL LOCATION file (#44) for the ward identified in the WARD LOCATION file (#42). For outpatients with IV orders: Derived from the DIVISION field (#.02) in the IV ROOM file(#59.5) for the IV room identified by the IV ROOM field (#.22) in the IV multiple (#100) of the PHARMACY PATIENT file (#55).
727.819,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.819,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.819,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.

Field # and Name	Description	Technical Description
727.819,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call to look up the INPAT/OUTPAT CODE field (#5) located in the DSS TREATING SPECIALTY TRANSLATION file (#727.831). The INPAT/OUTPAT code contains the inpatient/outpatient status which is based on the treating specialty value of the record.
727.819,8 DAY	Date on which the IV medication was dispensed. Format: YYYYMMDD	Derived from the IV EXTRACT DATA file (#728.113), DATE/TIME field (#4) which is set by routine PSIVSTAT and is always the current date/time, i.e., NOW  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.819,9 VA DRUG CLASSIFICATION	VA Drug Classification for the item in this order.	Derived from the VA CLASSIFICATION field (#2) in the DRUG file (#50) for the drug identified by the DRUG field (#3) in the IV EXTRACT DATA file (#728.113)
727.819,10 QUANTITY	Drug quantity dispensed in the unit of issue for that drug. Unit of issue may vary from product to product and site to site. Most common units of issue are milliliters, liters, grams, grams/ml, etc.	Quantity is calculated by incrementing a counter based upon the value found in the TRANSACTION TYPE field (#5) in the IV EXTRACT DATA file (#728.113). If TRANSACTION TYPE equals 1 for DISPENSED, the counter is incremented by 1; if 4 for CANCELED, no change is made to the counter; if 2 for RETURNED or 3 for DESTROYED, the counter is decreased by 1.
727.819,11 WARD	Current ward where the patient is located.	A call is made to IN5^VADPT using the patient IEN and the event date. If an inpatient episode, the value of VAIP (5) ward location is used to get the HOSPITAL LOCATION FILE POINTER field (#44) in the WARD LOCATION file (#42) which is a pointer to the HOSPITAL LOCATION file (#44).
727.819,12	***Field not used DSO aware***	*** Field not used DSO aware***
727.819,13 COST	VistA Pharmacy supply cost of drug dispensed.  Value is the dollar amount between 0 and 10000; 2 decimal digits.	Calculated by multiplying the COST field (#12) in the IV EXTRACT DATA file (#728.113) by the QUANTITY field (#10) in the IV DETAIL EXTRACT file (#727.819) above
727.819,14 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP (1), which is a pointer to the PATIENT MOVEMENT file (#405).
727.819,15 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.  NULL for outpatients, except if observation patient.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.

Field # and Name	Description	Technical Description
727.819,16 NDC	National Drug Code for the drug/supply item in this order (1 to 15 characters in length).	Derived from the NDC field (#31) in the DRUG file (#50) for the drug identified by the DRUG field (#3) in the IV EXTRACT DATA file (#728.113)
727.819,17 INVESTIGATIONAL (DEA SPECIAL HANDLING)	Indicates if the drug in this record is Investigational.  Values: I = Investigational Null	Derived from the DEA, SPECIAL HDLG field (#3) in the DRUG file (#50). If the DEA, SPECIAL HDLG field contains an I, this field is set to I.
727.819,18 PHARMACY IV DISPENSING FEE	The type of IV dispensed:  Values: A = Admixture C = Chemotherapy H = Hyperalimentation P = Piggyback S = Syringe	Derived from the TYPE field (#11) of the IV EXTRACT DATA file (#728.113). TYPE is the type of IV dispensed. If the TYPE is H for Hyperal (TPN), the SOLUTION VOLUME is calculated.  This field is sent as H1 if the volume is less than or equal 1000 ML; H2 if the volume is less than or equal 2000 ML; and H3 if the volume is greater than 2000 ML.
727.819,19 NEW FEEDER KEY	Code that uniquely identifies a DSS drug/supply product.  The feeder key is a seventeen-digit number made up of the pointer to the NATIONAL DRUG file padded to five digits and the twelve digits National Drug Code.	Derived for the drug identified by the DRUG field (#6) in the PRESCRIPTION file (#52), which is a pointer to the DRUG file (#50)  The PSNDF VA PRODUCT NAME ENTRY field (#22) from the DRUG file (#50), which is a pointer to the VA PRODUCT file (#50.68), is padded to 5 digits. This is concatenated with a 12-digit code derived from the NDC field (#31) from the DRUG file (#50) to form a 17-digit Feeder Key.
727.819,20 TOTAL DOSES PER DAY	Total doses per day including units. Users holding the “ECXPVE” security key can edit this field in the extract in order to make corrections.	1) For additives, TOTAL DOSES PER DAY is derived from the ADDITIVE STRENGTH field (#6) and the ADDITIVE STRENGTH UNITS field (#7) from the IV EXTRACT DATA file (#728.113). 2) For solutions, TOTAL DOSES PER DAY is derived from the SOLUTION VOLUME field (#8), recorded in MLs, from the IV EXTRACT DATA file (#728.113).
727.819,21 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	DATE is defined by the DATE/TIME field (#4) of the IV EXTRACT DATA file (#728.113). Using the DATE and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. Only the pointer (IEN) to File (#404.51) is used.
727.819,22 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by “2”.	DATE is defined by the DATE/TIME field (#4) of the IV EXTRACT DATA file (#728.113). Using the DATE and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider’s internal entry number and name from the NEW PERSON file (#200).
727.819,23 IVP TIME	Time of day when the IV medication was dispensed (6-digit military time).	Derived from the IV EXTRACT DATA file (#728.113), DATE/TIME field (#4) which is set by routine PSIVSTAT and is always the current date/time, i.e., NOW.  This field is always exactly 6 numeric characters in length; if time cannot be determined, “000300” is used as default.

Field # and Name	Description	Technical Description
727.819,24 ADMISSION DATE	This 8-character numeric string represents the date on which the patient's admission occurred. Format is YYYYMMDD.	Derived from the PATIENT MOVEMENT file (#405), TE/TIME field (#.01)  This field is always exactly 8 numeric characters in length. If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.819,25 ADMISSION TIME	Time of day at which the patient admission occurred. Format is HHMMSS.	Derived from the PATIENT MOVEMENT file (#405), DATE/TIME field (#.01)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default.
727.819,26 DSS IDENTIFIER FOR ENCOUNTER	Primary and secondary stop codes associated with the clinic, if IV dispensed to outpatient.	File (#728.113) contains a pointer to HOSPITAL LOCATION file (#44). Using this pointer, obtain the primary and secondary clinic stop codes from the CLINIC AND STOP CODES file (#728.44).
727.819, 27 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.819, 28 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.819,29 PLACEHOLDER	Currently Null	Currently Null
727.819, 30 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.819, 31 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by "2".	DATE is defined by the DATE/TIME field (#4) of the IV EXTRACT DATA file (#728.113). Using the DATE and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTAP^SDUTL3.
727.819, 32 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	Derived from the NEW PERSON file (#200), field (#5), file (#8932.1). Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file (#200).
727.819, 33 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description																
727.819, 34 DOM, PR RTP AND SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes																
727.819, 35 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator  Y = Patient is an Observation Patient. N = Patient is not an Observation Patient	OBSERVATION PATIENT INDICATOR is derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, 23, 41, 1J or if the first 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.																
727.819, 36 ENCOUNTER NUMBER	The unique number assigned to each encounter within DSS.  The number is left justified in the field and is determined by the following: • Inpatients- the concatenation of SSN + Admit Date + letter I • Outpatients- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value • Observation encounters- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is: <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table>  In the IVP extract encounter numbers for inpatients & observation cases as above. Outpatient encounter numbers should be built with the Visit Date and Stop Code value = PHA.	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)  <u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)  <u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	

Field # and Name	Description	Technical Description																
727.816, 37 ORDERING PROVIDER	Provider who ordered the IV Product.  Value: VistA file (#200) IEN preceded by “2”	Derived from PROVIDER field (#9) of the IV EXTRACT DATA file (#728.113) which is populated from the PROVIDER field (#.06) within the IV MULTIPLE (#.01) of the PHARMACY PATIENT file (#55) preceded by a ‘2’. ORDERING PROVIDER is a pointer to the NEW PERSON file (#200).																
727.816, 38 ORDERING STOP CODE	Ordering Stop Code Numeric values ‘101’ through ‘999’.	<p>The value is obtained by locating the CLINIC field (#136) on the Pharmacy Patient file (#55), IV multiple (#55.01), which points to the Hospital Location file (#44) field (#8) STOP CODE NUMBER to capture the stop code. The stop code value is placed in the ORDERING STOP CODE field.</p> <p>If the Treating Specialty field is 18 or 23 or 24 or 41 or 65 or 94 1J then fill the ORDERING STOP CODE field with the corresponding Observation Stop Code. See table below:</p> <table><tr><td>Treating Specialty</td><td>Observation Code</td></tr><tr><td>18</td><td>293</td></tr><tr><td>23</td><td>295</td></tr><tr><td>24</td><td>290</td></tr><tr><td>41</td><td>296</td></tr><tr><td>65</td><td>291</td></tr><tr><td>94</td><td>292</td></tr><tr><td>1J</td><td>297</td></tr></table>	Treating Specialty	Observation Code	18	293	23	295	24	290	41	296	65	291	94	292	1J	297
Treating Specialty	Observation Code																	
18	293																	
23	295																	
24	290																	
41	296																	
65	291																	
94	292																	
1J	297																	
727.816, 39 ORDERING DATE	Date order was verified by Nurse.	Derived from the DATE VERIFIED BY NURSE field (#17) within the IV MULTIPLE (#.01) of the PHARMACY PATIENT file (#55), if Null, then derived from the date portion of the LOG IN DATE/TIME field (#.21) within the IV MULTIPLE (#.01) of the PHARMACY PATIENT file (#55)																
727.816, 40 REQUESTING PHYSICIAN	Currently Null. See Ordering Provider Field.	Currently Null																
727.816, 41 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Data comes from the DIVISION field (#.02) of the IV ROOM file (#59.5), which is a pointer to the MEDICAL CENTER DIVISION file (#40.8). This value is then used to call the API GETDIV^ECXDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).																
727.816, 42 MEANS TEST	<p>The current means test category for this patient</p> <p>Values: A = Category A B = Category B C = Category C P = Pending Adjudication R = Requires Means Test N = Means Test not Required E = Exempt I = Incomplete L = No Longer Applicable M = Non-Exempt</p>	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the IV DETAIL EXTRACT file (#727.819), MEANS TEST data is derived from the CURRENT MEANS TEST STATUS field (#.14) in the PATIENT file (#2). This field is a pointer to the MEANS TEST STATUS file (#408.32). Using the means test pointer, the data is derived from the CODE field (#.02) in the MEANS TEST STATUS file (#408.32).																



Field # and Name	Description	Technical Description
727.816, 43 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC – VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD. This code is composed of two or three numeric characters.
727.816, 44 DATE OF BIRTH	<p>Patient's date of birth</p> <p>Format: YYYYMMDD</p>	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)
727.816, 45 SEX	<p>Gender</p> <p>Values:</p> <ul style="list-style-type: none"> <li>M = Male</li> <li>F = Female</li> </ul>	Using the patient pointer (DFN), this data element is taken from the SEX field (#.02) in the PATIENT file (#2)
727.816, 46 STATE	FIPS 2 character numeric code for the state where the patient resides.	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the IV DETAIL EXTRACT file (#727.819), data is derived from the STATE field (#.115) in the PATIENT file (#2) which points to the STATE file (#5). From the STATE file record, use the two-character VA STATE CODE field (#2).
727.816, 47 COUNTY	The FIPS county code for where the patient resides	Using the patient pointer (DFN) data is taken from the COUNTY field (#.117) in the PATIENT file (#2) which points to a subfile record in the COUNTY multiple field (#3) of the STATE file (#5). A pointer to the STATE file (#5) is obtained from the STATE field (#.115) of the file (#2) record.
727.816, 48 ZIP+4	Zip + 4 is the zip code for where the patient resides using format of nnnnn- nnnn. The 5-character zip code is provided if zip + 4 is not available.	Using the patient pointer (DFN), ZIP CODE data is derived from the ZIP+4 field (#.1112) PATIENT file (#2)
727.816, 49 VETERAN	<p>Patient's veteran status</p> <p>Values:</p> <ul style="list-style-type: none"> <li>Y = Is a veteran</li> <li>N = Is not a veteran</li> </ul>	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the IV DETAIL EXTRACT file (#727.819), VETERAN data is derived from the VETERAN (Y/N). field (#1901) in the PATIENT file (#2)

Field # and Name	Description	Technical Description
727.816, 50 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values:</p> <p>A = Army-Active Duty  B = Navy, Marine-Active Duty  C = Air Force-Active Duty  D = Coast Guard- Active Duty  E = Retired, Uniformed Services  F = Medical Remedial Enlist  G = Merchant Seaman-USPHS  H = Other USPHS Beneficiaries  I = Observation/Examination  J = Office of Workers Comp  K = Job Corps/Peace Corps  L = Railroad Retirement  M = Beneficiaries –Foreign Government  N = Humanitarian (Non-Vet)  O = Champus Restore  P = Other Reimbursement. (Non-Vet)  Q = Other Federal Dependant  R = Donors (Non-Vet)  S = Special Studies (Non-Vet)  T = Other Non-Veteran  U = CHAMPVA-Spouse, Child  V = CHAMPUS  W = Czechoslovakia/Poland Svc  X = Persian Gulf War  Y = CAV/NPS  Z = Merchant Marine  0 = Korean  1 = World War I  2 = World War II  3 = Spanish American  4 = Pre-Korean  5 = Post-Korean  6 = Operation Desert Shield  7 = Vietnam ERA  8 = Post-Vietnam  9 = Other or None</p>	Period of Service is derived from the Period of Service field (#.323) in the Patient file (#2)
727.816, 51 POW STATUS	<p>Indicates if patient was confined as a Prisoner of War</p> <p>Values:</p> <p>Y = Patient was confined as a Prisoner of War  N = Patient was not confined as a Prisoner of War  U= Unknown</p>	Derived from the PATIENT file (#2), POW STATUS INDICATED field (#.525). The status indicator is returned by SVC^VADPT.
727.816, 52 POW LOCATION	<p>If POW Status is indicated, then this is the POW confinement location/period.</p> <p>Values:</p> <p>1 = World War I  2 = World War II – Europe  3 = World War II – Pacific  4 = Korean  5 = Vietnam  6 = Other</p>	Derived from the PATIENT file (#2), POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.816, 53 RADIATION STATUS	Indicates if patient claims exposure to ionizing radiation  Values: Y= Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation Unknown	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.816, 54 AGENT ORANGE STATUS	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.816, 55 AGENT ORANGE LOCATION	Indicates the location where the patient was exposed to Agent Orange.  Values: K = Korean DMZ V = Vietnam	Derived from the PATIENT file (#2), AGENT ORANGE EXPOSURE LOCATION field (#.3213). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.  Or  If Agent Orange Status is indicated then this is the Agent Orange Exposure location. Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (.3213) of the PATIENT FILE #2.
727.816, 56 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.
727.816, 57 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer.	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients MST status is stored in the MST STATUS field (#3). A call will be made to \$\$GETSTAT^DGMSTAPI(DFN,DGDATE) using the DFN in the PATIENT NO. DFN field and the date in the DAY field
727.819, 58 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.819, 59 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the ENROLLMENT STATUS

Field # and Name	Description	Technical Description
727.819, 60 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.819, 61 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.819, 62 CNH/SH STATUS	Community Nursing Home/ State Home (CNH/SH) Indicator  Values: Y = Yes N = No	Derived from the CNH CURRENT field (#148) of the PATIENT file (#2) using the Patient DFN
727.819, 63 PLACEHOLDER	Currently Null	Currently Null
727.819, 64 HEAD & NECK CANCER INDICATOR	Identifies whether patient has head and/or neck cancer Y = Yes N = No	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)
727.819, 65 ETHNICITY	The patient's ethnicity code Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.  Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2).  The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.

Field # and Name	Description	Technical Description
727.819, 66 RACE 1	Self- reported by patient as recorded in VistA patient file. In 2006, VIREC study concluded more than 30% of records contained no values. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. Users requiring more detail should check VIREC website for published material. See also RACE field.  Values: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient Null	Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), will be include in the RACE 1 field. If any of the RACE INFORMATION values returned are "C" (DECLINED TO ANSWER) that will be the only value included in the RACE1 field.
727.819, 67 BCMA DRUG DISPENSED	Currently Null	Currently Null
727.819, 68 BCMA DOSE GIVEN	Currently Null	Currently Null
727.819, 69 BCMA UNIT OF ADMINISTRATION	Currently Null	Currently Null
727.819, 70 BCMA ICU FLAG	Currently Null.	Currently Null
727.819, 71 ORDERING PROVIDER PERSON CLASS	The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	The Active Person which is determined by \$\$GET^AU4A71(PERS,DATE), where PERS is the IEN from NEW PERSON file (#200)
727.819, 72 DSS IP #	Currently Null	Currently Null
727.819, 73 ENROLLMENT PRIORITY	This field contains the enrollment priority group and the enrollment priority subgroup  ENROLLMENT PRIORITY Groups determined for a patient enrollment include: 1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions. 2 = VA-rated service-connected disabilities 30% or 40% 3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151 4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled 5 = Non-service connected Veterans and non compensable service connected Veterans	Field contains the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)

Field # and Name	Description	Technical Description
	<p>rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs</p> <p>6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)</p> <p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment</p> <p>Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.819, 74 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	<p>Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U"</p>

Field # and Name	Description	Technical Description
727.819, 75 PATIENT TYPE	Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.  Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare	Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)
727.819, 76 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 – qualifies as a CV 0 – does not qualify as a CV -1 – bad DFN or date
727.819, 77 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2 <sup>nd</sup> piece is the Combat Vet End Date.
727.819, 78 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 – vet was eligible on date specified (or DT) 0 – vet was not eligible on date specified (or DT).
727.819, 79 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes – Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROOT". Field value is "Y" if the Category I flag is present and active, otherwise it is NULL.

Field # and Name	Description	Technical Description
727.819,80 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	This field is extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.819,81 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions.  Values: 'Y' = Yes 'N' = No 'U' = Unknown	This field is derived from the SOUTHWEST ASIA CONDITIONS? Field (#.322013) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT.
727.819,82 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	Value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.819,83 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Value of this field is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.819,84 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.819,85 ORDERING PROVIDER NPI	A standard unique life-long identifier of the provider who ordered the intravenous product	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.819,86 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.819, 87 COUNTRY CODE	The value is the code for the country associated with the address.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.



Field # and Name	Description	Technical Description
727.819,88 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>

## #727.808 – PHYSICAL MOVEMENT EXTRACT (MOV) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the MAS Physical Movement (Transfer and Discharge) extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should only be made by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.808,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.808,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.808,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.808,3 FACILITY	Identifier for the station and division.	An indicator of the division where this event happened. It is derived from the DIVISION field (#.015) of the WARD LOCATION file (#42) which points to the MEDICAL CENTER DIVISION file (#40.8). This field is a pointer to the MEDICAL CENTER DIVISION file (#40.8).
727.808,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.808,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.808,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.
727.808,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	For the Physical Movement extract, this field is set to 3. Text value is determined by a call to IN5^VADPT.

Field # and Name	Description	Technical Description
727.808,8 DAY	Date when this physical movement (from one ward to another or some type of discharge) occurred. Format: YYYYMMDD	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01). If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with “01” for the day (DD) portion
727.808,9 PRODUCT	Currently Null	Currently Null
727.808,10 ADMISSION DATE	This 8-character numeric string represents the date on which the patient’s admission occurred. Format is YYYYMMDD.	Derived from the PATIENT MOVEMENT file (#405); ADMISSION/CHECK-IN MOVEMENT field (#.14) PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)
727.808,11 DISCHARGE DATE	Final discharge date for this VistA admission. [Admissions to Nursing Homes, RRTP’s (DOM), Acute Care create a new admission in VistA and DSS].  Format: YYYYMMDD	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)
727.808,12 MOVEMENT FILE #	A number used as an index into patient movement file.	Pointer to the PATIENT MOVEMENT file (#405). Using the “ATT1” cross-reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN), this is a pointer to the file (#405) record for the patient’s admission.
727.808,13 TYPE	The type of movement for this patient  Values: 3 = Transfer 2 = Discharge	Using the “ATT”_TYPE cross-reference
727.808,14 LOSING WARD	Indicates the ward the patient is moving from.  Value is a pointer.	Derived from HOSPITAL LOCATION FILE POINTER field (#44) of the WARD LOCATION file (#42) as pointed to by the WARD LOCATION field (#.06) of the PATIENT MOVEMENT file (#405). LOSING WARD is a pointer to the HOSPITAL LOCATION file (#44).
727.808,15 TREATING SPECIALTY	Currently Null	Currently Null
727.808,16 LOSING WARD LOS	Length of stay on losing ward	Calculated as current movement date minus the date (DATE/TIME field (#.01) of the PATIENT MOVEMENT file (#405)) of the previous physical movement OR Calculated as current movement date minus the date (DATE/TIME field (#.01) of the PATIENT MOVEMENT file (#405) record pointed to by the ADMISSION/CHECK-IN MOVEMENT field (#.14) of the current movement record
727.808,17 PLACEHOLDER1	Currently Null	Currently Null
727.808,18 MOVEMENT TYPE	The MAS code for this movement.	Derived from the MAS MOVEMENT TYPE field (#.18) of the PATIENT MOVEMENT file (#405). It is a pointer to the MAS MOVEMENT TYPE file (#405.2).
727.808,19 MOV TIME	Time when this patient moved from the losing ward to the gaining ward. (6-digit military time)	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)  This field is always exactly 6 numeric characters in length. If time cannot be determined, “000300” is used as default.

Field # and Name	Description	Technical Description
727.808,20 GAINING WARD	Indicates the ward the patient moved to.  Value is a pointer.	Derived from the HOSPITAL LOCATION FILE POINTER field (#44) of the WARD LOCATION file (#42) as pointed to by the WARD LOCATION field (#.06) of the PATIENT MOVEMENT file (#405). GAINING WARD is a pointer to the HOSPITAL LOCATION file (#44)
727.808,21 ADMISSION TIME	Time of day at which the patient admission occurred. Format is HHMMSS.	Derived from the PATIENT MOVEMENT file (#405); ADMISSION/CHECK-IN MOVEMENT field (#.14)  PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default
727.808,22 PLACEHOLDER2	Currently Null	Currently Null
727.808,23 PLACEHOLDER3	Currently Null	Currently Null
727.808, 24 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.808,25 DSS DEPT.	DSS Dept. for the patient's gaining ward	Associated with the physical movement record. This code is found in the DSS WARD file (#727.4) using the value of the WARD LOCATION field (#.06) of the PATIENT MOVEMENT file (#405) record for the patient's physical movement. The value found in WARD LOCATION is a pointer to the WARD LOCATION file (#42).  Each record in file (#727.4) has a (#.01) field which points to a record in file (#42), and the internal entry number of the file (#727.4) is set to be the same as the record in file (#42) to which it points. Therefore, the WARD LOCATION field (#.06) can be used as a pointer to file (#727.4) as well. Data for this field is taken from the DSS DEPARTMENT field (#1) of the file (#727.4) record for the Losing Ward.
727.808, 26 DOM, PR RTP and SAARTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes

Field # and Name	Description	Technical Description																		
727.808, 27 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator</p> <p>This field provides a one-character flag for identifying observation case records.</p> <p>Analogous to Medicare rules, DSS considers Observation cases to be outpatient encounters. An outpatient encounter number is built according to the admitting Treating Specialty with the STOP CODE value being 290-296. The In/Out Code = O.</p> <p>Observation Stop Codes equate to Treating Specialty Values:</p> <table><tr><th><u>Treating Specialty</u></th><th><u>Stop Code</u></th></tr><tr><td>18</td><td>293 – Neurology</td></tr><tr><td>23</td><td>295 – SCI</td></tr><tr><td>24</td><td>290 – Medicine</td></tr><tr><td>–</td><td></td></tr><tr><td>41</td><td>296 – Rehab Med</td></tr><tr><td>65</td><td>291 – Surgery</td></tr><tr><td>94</td><td>292 – Psychiatry</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>Observation Indicator Values: Y = Patient is an Observation Patient. N = Patient is not an Observation Patient Null</p>	<u>Treating Specialty</u>	<u>Stop Code</u>	18	293 – Neurology	23	295 – SCI	24	290 – Medicine	–		41	296 – Rehab Med	65	291 – Surgery	94	292 – Psychiatry	1J	297 (Emergency Dept)	<p>Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to ‘YES’. Otherwise, this field is set to ‘NO.’</p>
<u>Treating Specialty</u>	<u>Stop Code</u>																			
18	293 – Neurology																			
23	295 – SCI																			
24	290 – Medicine																			
–																				
41	296 – Rehab Med																			
65	291 – Surgery																			
94	292 – Psychiatry																			
1J	297 (Emergency Dept)																			
727.808, 28 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><th><u>Treating Specialty</u></th><th><u>Stop Code</u></th></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the MOV extract, all encounter numbers are for inpatients, except observation cases. Both use the above rules.</p>	<u>Treating Specialty</u>	<u>Stop Code</u>	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + “I” (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>		
<u>Treating Specialty</u>	<u>Stop Code</u>																			
18	293 (Neurology)																			
23	295 (SCI)																			
24	290 (Medicine)																			
41	296 (Rehab Med)																			
65	291 (Surgery)																			
94	292 (Psychiatry)																			
1J	297 (Emergency Dept)																			

Field # and Name	Description	Technical Description
727.808, 29 DISCHARGE PC	Patient's primary care provider from the losing ward. Will be Null unless the patient is physically discharged from the hospital.	DISCHARGE PRIMARY PROVIDER is derived using the DAY field (#8) of this extract and the PATIENT DFN (#4). A call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200). A '2' is will be prefixed to the pointer value.
727.808, 30 DISCHARGE PC TEAM	Patient's primary care team from the losing ward. Will be Null unless the patient is physically discharged from the hospital.	DISCHARGE PRIMARY CARE TEAM is derived using the DAY field (#8) of this extract and the PATIENT DFN field (#4). A call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to File #404.51 is extracted.
727.808, 31 DISCHARGE ASSOC PC PROVIDER	Currently Null	Currently Null
727.808, 32 PRODUCTION DIVISION CODE	Identifies the division/facility where the patient is located.	Data comes from the WARD AT DISCHARGE field (#200) in the PATIENT MOVEMENT file (#405). This value is then used to get the NAME field (#.01) in the WARD LOCATION file (#42) which in turn is used to get the DIVISION field (#.015) in the WARD LOCATION file (#42) which is a pointer to the MEDICAL CENTER DIVISION file (#40.8). This value is then used to call the API GETDIV^ECXDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).
727.808, 33 DISCHARGE PC PROV PERSON CLASS	Person Class of the patient's primary care provider from the losing ward. Will be Null unless the patient is physically discharged from the hospital.	DISCHARGE PC PROV PERSON CLASS is seven characters in length and contains the VA code associated with the active person class of the Discharge Primary Care Provider. The format of the field is V999999, where the 999999 shall be six numeric digits. The data shall be derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$GET^XUA4A72(PERS,DATE) where PERS is the Internal Entry Number (IEN) from the NEW PERSON file (#200).
727.808, 34 DISCHARGE ASSOC PC PROVIDER PC	Currently Null	Currently Null
727.808, 35 DISCH ASSOC PC PROV NPI	A standard, unique life-long identifier of the patient's associate primary care provider from the losing ward	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.808, 36 DISCHARGE PC PROVIDER NPI	A standard, unique life-long identifier of the patient's primary care provider from the losing ward	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.808,37 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>

## #727.81 – PRESCRIPTION EXTRACT (PRE) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Pharmacy Outpatient (Prescription) extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.81,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.81,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.81,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.81,3 FACILITY	Identifier for the station and division.	An indicator of the division where this event happened. Using the NAME field (#.01) pointer from the DSS EXTRACTS file (#728), FACILITY is derived from the STATION NUMBER field (#99) for that pointer number in the INSTITUTION file (#4).
727.81,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.81,5 SSN	The patient’s social security number - (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.81,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.
727.81,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an “O”, indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to “I” if an inpatient status is found based on these calls.  If the MAIL field (#12) value = 1, then the IN OUT code values for this encounter shall be set to “O” (for Outpatient).



Field # and Name	Description	Technical Description
727.81,8 DAY	Date on which the Prescription fill/refill was released. Format: YYYYMMDD	Derived from the PRESCRIPTION file (#52), REFILL sub-file (#52.1), RELEASED DATE/TIME field (#17) or PRESCRIPTION file (#52), PARTIAL DATE sub-file (#52.2), RELEASED DATE/TIME field (#8).  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.81,9 DIVISION	The outpatient pharmacy site for this extract record	For new prescriptions, DIVISION is derived from the DIVISION field (#20) of the PRESCRIPTION file (#52).  For refill prescriptions, DIVISION is derived from the DIVISION field (#8) within the REFILL multiple (#52) of the PRESCRIPTION file (#52).  For partial prescriptions, DIVISION is derived from the DIVISION field (#.09) within the PARTIAL DATE multiple (#60) of the PRESCRIPTION file (#52). DIVISION is a pointer to the OUTPATIENT SITE file (#59).
727.81,10 PROVIDER	The provider who wrote the prescription for new, refill and partial fills  This number is IEN preceded by "2".	Derived from the PROVIDER field (#4) in the PRESCRIPTION file (#52) for new prescriptions, or from the PROVIDER field (#15) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions, or from the PROVIDER field (#6) within the PARTIAL DATE multiple (#60) in the PRESCRIPTION file (#52) for partial prescriptions
727.81,11 VA DRUG CLASSIFICATION	VA Drug Classification for the drug/supply item in this prescription.	Derived from the VA CLASSIFICATION field (#2) in the DRUG file (#50) for the drug identified by the DRUG field (#6) in the PRESCRIPTION file (#52)
727.81,12 MAIL	Identifies if prescription was mailed. Values: 1 = mailed from the VAMC 2 = mailed from a CMOP	Derived from the MAIL/WINDOW field (#11) in the PRESCRIPTION file (#52) for new prescriptions, or from the MAIL/WINDOW field (#2) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions, or from the MAIL/WINDOW field (#.02) within the PARTIAL DATE multiple (#60) in the PRESCRIPTION file (#52) for partial prescriptions
727.81,13 PROVIDER PERSON CLASS	VA code associated with the active Person Class of the provider. (In DSS this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	A call to \$\$GET^XUA4A72(PERS,DATE) will be made using the IEN in the PROVIDER and the date in the DAY field

Field # and Name	Description	Technical Description
727.81,14 NEW	Identifies if this is a new prescription. Values: 1= new prescription	1. Examine the “AL” cross-reference on the RELEASED DATE/TIME field (#31) of the PRESCRIPTION file (#52) for new prescriptions or the RELEASED DATE/TIME field (#17) within the REFILL multiple (#52) of the PRESCRIPTION file (#52) for refill prescriptions. Cross-reference is ^PSRX(“AL”,DATE,D0,REFILL# or 0 for new RX). 2. Examine the “AM” cross-reference on the RELEASED DATE/TIME field (#8) within the PARTIAL DATE multiple (#60) of the PRESCRIPTION file (#52) for partial prescriptions. Cross-reference is ^PSRX(“AM”,DATE,D0,PARTIAL_REFILL#).
727.81,15 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.81,16 QUANTITY	Drug quantity dispensed in the unit of issue for that drug. Unit of issue may vary from product to product and site to site. Quantities may include the number of pills, number of boxes, kits or bottles, or the volume of the bottle in milliliters or liters or other units of issue.	Derived from the QTY field (#7) in the PRESCRIPTION file (#52) for new prescriptions, or from the QTY field (#1) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions, or from the QTY field (#.04) within the PARTIAL DATE multiple (#60) in the PRESCRIPTION file (#52) for partial prescriptions
727.81,17 COST	VistA Pharmacy supply cost of drug dispensed.  Value is the dollar amount between 0 and 10000; 2 decimal digits.	Cost is calculated as quantity multiplied by the price.  Quantity is derived from the QTY field (#7) in the PRESCRIPTION file (#52) for new prescriptions, or from the QTY field (#1) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions, or from the QTY field (#.04) within the PARTIAL DATE multiple (#60) in the PRESCRIPTION file (#52) for partial prescriptions.  Price is derived from the UNIT PRICE OF DRUG is field (#17) in the PRESCRIPTION file (#52) for new prescriptions, or from the CURRENT UNIT PRICE OF DRUG field (#1.2) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions, or from the CURRENT UNIT PRICE OF DRUG field (#.042) within the PARTIAL DATE multiple (#60) in the PRESCRIPTION file (#52) for partial prescriptions.
727.81,18 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".

Field # and Name	Description	Technical Description
727.81,19 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP(1), which is a pointer to the PATIENT MOVEMENT file (#405).
727.81,20 TREATING SPECIALTY	The treating specialty PTF CODE assigned to this patient when the prescription was issued, if the patient was an inpatient at that time.  Otherwise, this field is Null.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.81,21 PLACEHOLDER4	Currently Null	Currently Null
727.81,22 UNIT OF ISSUE	Units in which this item was dispensed (1-10 characters).	Derived from the DISPENSE UNIT field (#14.5) in the DRUG file (#50) for the item identified by the DRUG field (#6) in the PRESCRIPTION file (#52)
727.81,23 DATE OF BIRTH	Patient's date of birth Format: YYYYMMDD	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)
727.81,24 ELIGIBILITY	A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.  Values: 10 = SC 50-100% 20 = Aid & Attendance 21 = Housebound 22 = Mexican Border War 23 = WWI 24 = POW 30 = SC 40-49% 31 = SC 30-39% 32 = SC 20-29% 33 = SC 10-19% 34 = SC less than 10% 40 = NSC – VA Pension 50 = NSC 60 = Catastrophic Disability 101 = CHAMPVA 102 = Collateral of Veteran 103 = Employee 104 = Other Federal Agency 105 = Allied Veteran 106 = Humanitarian Emergency 107 = Sharing Agreement 108 = Reimbursable Insurance 109 = Tricare/CHAMPUS	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.
727.81,25 VETERAN	Patient's veteran status  Values: Y = Is a veteran N = Is not a veteran	Using the patient pointer (DFN), VETERAN data is derived from the VETERAN (Y/N). Field (#1901) in the PATIENT file (#2)

Field # and Name	Description	Technical Description
727.81,26 COPAY	Indicates whether this prescription was billed for copay Values: 1 = Yes 0 = No	Derived from the existence of the IB NUMBER field (#106) in the PRESCRIPTION file (#52) for new prescriptions or from the IB NUMBER field (#9) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions. If that field is not Null, the prescription was billed for copay and this field is set to 1.
727.81,27 FEEDER KEY	Code that uniquely identifies a DSS drug/supply product.  The feeder key is a seventeen-digit number made up of the pointer to the NATIONAL DRUG file padded to five digits and the twelve digits National Drug Code.	Derived for the drug identified by the DRUG field (#6) in the PRESCRIPTION file (#52), which is a pointer to the DRUG file (#50).  The PSNDF VA PRODUCT NAME ENTRY field (#22) from the DRUG file (#50), which is a pointer to the VA PRODUCT file (#50.68) is padded to 5 digits. This is concatenated with a 12-digit code derived from the NDC field (#31) from the DRUG file (#50) to form a 17-digit Feeder Key.
727.81,28 INVESTIGATIONAL (DEA Special Handling)	Indicates if the drug in this record is Investigational.  Values: I = Investigational	Derived from the DEA, SPECIAL HDLG field (#3) in the DRUG file (#50). If the DEA, SPECIAL HDLG field contains an I, this field is set to I.
727.81,29 DAYS SUPPLY	Number of days covered by this prescription (a number between 1 and 31; 0 decimal digits).	Derived from the DAYS SUPPLY field (#8) in the PRESCRIPTION file (#52) for new prescriptions, or from the DAYS SUPPLY field (#1.1) within the REFILL multiple (#52) in the PRESCRIPTION file (#52) for refill prescriptions, or from the DAYS SUPPLY field (#.041) within the PARTIAL DATE multiple (#60) in the PRESCRIPTION file (#52) for partial prescriptions
727.81,30 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the RELEASED DATE/TIME field from the PRESCRIPTION file (#52) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to file (#404.51) is transmitted.
727.81,31 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the RELEASED DATE/TIME field from the PRESCRIPTION file (#52) and the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the PRESCRIPTION EXTRACT file (#727.81), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.81,32 TIME	Time of day when the prescription fill/refill was released. Format: HHMMSS	Derived from the PRESCRIPTION file (#52), REFILL sub-file (#52.1), RELEASED DATE/TIME field (#17) or PRESCRIPTION file (#52), PARTIAL DATE sub-file (#52.2), RELEASED DATE/TIME field (#8)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default.

Field # and Name	Description	Technical Description
727.81,33 RACE	Observed Race Code for this patient. In compliance with OBM instructions, field is no longer updated in VistA. Values remain in VistA and are posted to DSS in case RACE1 field is not populated. See also RACE 1.  Only a single value is allowed.  Values: 3 = American Indian or Alaska Native A = Asian B = Black or African American D = Declined to Answer H = Native Hawaiian or Other Pacific U = Unknown by Patient W = White Null	Using the patient pointer (DFN), RACE data is shown as the ABBREVIATION field (#2) of the RACE file (#10) entry pointed to by the RACE field (#.06) in the PATIENT file (#2)
727.81, 34 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.81, 35 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.81,36 SEX	Gender  Values: M = Male F = Female	Using the patient pointer (DFN), this data element is taken from the SEX field (#.02) in the PATIENT file (#2)
727.81,37 ZIP+4	Zip + 4 is the zip code for where the patient resides using format of nnnnn- nnnn. The 5-character zip code is provided if zip + 4 is not available.	Using the patient pointer (DFN), ZIP CODE data is derived from the ZIP+4 field (#.1112) PATIENT file (#2)
727.81,38 PLACEHOLDER	Currently Null	Currently Null
727.81,39 PLACEHOLDER	Currently Null	Currently Null
727.81,40 STATE	FIPS 2 character numeric code for the state where the patient resides.	Using the patient pointer (DFN), data is derived from the STATE field (#.115) in the PATIENT file (#2) which points to the STATE file (#5). From the STATE file record, use the two-character VA STATE CODE field (#2).
727.81,41 COUNTY	The FIPS county code for where the patient resides	Using the patient pointer (DFN), COUNTY data is derived from the COUNTY field (#.117) in the PATIENT file (#2). The data transmitted is the three character VA COUNTY CODE, field (#2) within the COUNTY field (#3) multiple of the STATE file (#5).
727.81, 42 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V9999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.

Field # and Name	Description	Technical Description
727.81, 43 POW STATUS	Indicates if patient was confined as a Prisoner of War  Values: Y = Patient was confined as a Prisoner of War N = Patient was not confined as a Prisoner of War U = Unknown	Derived from the PATIENT file (#2), POW STATUS INDICATED Field (#.525). The status indicator is returned by SVC^VADPT.
727.81, 44 POW LOCATION	If POW Status is indicated, then this is the POW confinement location/period.  Values: 1 = World War I 2 = World War II – Europe 3 = World War II – Pacific 4 = Korean 5 = Vietnam 6 = Other	Derived from the PATIENT file (#2), POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.
727.81, 45 RADIATION STATUS	Indicates if patient claims exposure to ionizing radiation  Values: Y = Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation U = Unknown	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.81, 46 AGENT ORANGE STATUS	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.81, 47 SHARING AGREEMENT PAYOR	An indicator used for patients participating in sharing agreements. Field rarely contains data.  Values: A = Sharing Agreement B = TRICARE C = CAT C / Category C D = CHAMPVA E = CHAMPUS NULL	The ALIAS sub-field (#.01) of the ALIAS multiple field (#1) of the PATIENT file (#2) is used to indicate a patient who participates in a sharing agreement. If the (#.01) field contains any one of the specified key words, then the patient is considered included for Sharing Agreement information.  Field (#.01) must contain any one of the following key words: SHARING AGREEMENT CHAMPVA TRICARE CAT C CATEGORY C
727.81, 48 SHARING AGREEMENT INSURANCE	Indicates the first insurer for patients who participate in sharing agreements.  Field rarely contains data.	Data is taken from the INSURANCE TYPE sub-field (#.01) of the INSURANCE TYPE field (#.3121), sub-file (#2.312), of the PATIENT file (#2). This is a pointer value for the INSURANCE COMPANY file (#36). Only the first insurance found in the multiple field is used. The data is stored as free text.

Field # and Name	Description	Technical Description
727.81, 49 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer. U = Unknown	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients MST status is stored in the MST STATUS field (#3). A call is made to GETSTAT^DGMSTAPI(DFN,DGDATE) using the patient pointer (DFN) and the date in the DAY field.
727.81, 50 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.81, 51 ASSOCIATE PC PROVIDER	Currently Null	Currently Null.
727.81, 52 ASSOC. PC PROV. PERSON CLASS	Currently Null	Currently Null
727.81, 53 PLACEHOLDER	Currently Null	Currently Null
727.81, 54 DOM, PR RTP AND SA RTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SAR RTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SAR RTP CODE field in file (#727.831) which holds a set of codes
727.81, 55 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient U = Unknown	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.
727.81, 56 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the Enrollment STATUS found in this extract

Field # and Name	Description	Technical Description
727.81, 57 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.81, 58 PLACEHOLDER	Currently Null	Currently Null
727.81, 59 CNHU STATUS	Identifies if patient resides in a contract nursing home unit	Derived from field (#148) CNHU STATUS of the PATIENT file (#2).



Field # and Name	Description	Technical Description
727.81, 60 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values;</p> <p>A = Army-Active Duty  B = Navy, Marine-Active Duty  C = Air Force-Active Duty  D = Coast Guard- Active Duty  E = Retired, Uniformed Services  F = Medical Remedial Enlist  G = Merchant Seaman-USPHS  H = Other USPHS Beneficiaries  I = Observation/Examination  J = Office of Workers Comp  K = Job Corps/Peace Corps  L = Railroad Retirement  M = Beneficiaries –Foreign Government  N = Humanitarian (Non-Vet)  O = Champus Restore  P = Other Reimbursement. (Non-Vet)  Q = Other Federal Dependant  R = Donors (Non-Vet)  S = Special Studies (Non-Vet)  T = Other Non-Veteran  U = CHAMPVA-Spouse, Child  V = CHAMPUS  W = Czechoslovakia/Poland Svc  X = Persian Gulf War  Y = CAV/NPS  Z = Merchant Marine  0 = Korean  1 = World War I  2 = World War II  3 = Spanish American  4 = Pre-Korean  5 = Post-Korean  6 = Operation Desert Shield  7 = Vietnam ERA  8 = Post-Vietnam  9 = Other or None</p>	<p>Derived from the Period of Service field (#.323) in the Patient file (#2)</p>
727.81, 61 OBSERVATION PATIENT INDICATOR	<p>This field is derived from the inpatient/outpatient status, treating specialty, DSS Identifier or feeder key and Mail values in the record.</p> <p>Null  Y = Patient is an Observation Patient.  N = Patient is not an Observation Patient</p>	<p>If the Mail field (#12) for the outpatient encounter has a value of “1” or “2”, then regardless of the treating specialty the derived value of the Observation Patient Indicator field (#61) is Null. Otherwise the value for Observation Patient Indicator field should be derived based upon the existing logic and rules.</p> <p>Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to ‘YES’. Otherwise, this field is set to ‘NO’.</p>

Field # and Name	Description	Technical Description																								
727.81, 62 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td><td></td></tr><tr><td>18</td><td>293</td><td>(Neurology)</td></tr><tr><td>23</td><td>295</td><td>(SCI)</td></tr><tr><td>24</td><td>290</td><td>(Medicine)</td></tr><tr><td>41</td><td>296</td><td>(Rehab Med)</td></tr><tr><td>65</td><td>291</td><td>(Surgery)</td></tr><tr><td>94</td><td>292</td><td>(Psychiatry)</td></tr><tr><td>1J</td><td>297</td><td>(Emergency Dept)</td></tr></table> <p>In the PRE extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and Stop Code value = PHA.</p>	Treating Specialty	Stop Code		18	293	(Neurology)	23	295	(SCI)	24	290	(Medicine)	41	296	(Rehab Med)	65	291	(Surgery)	94	292	(Psychiatry)	1J	297	(Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																									
18	293	(Neurology)																								
23	295	(SCI)																								
24	290	(Medicine)																								
41	296	(Rehab Med)																								
65	291	(Surgery)																								
94	292	(Psychiatry)																								
1J	297	(Emergency Dept)																								
727.81, 63 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values: K = Korean DMZ V = Vietnam</p>	<p>Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT file (#2)</p>																								
727.81, 64 ORDERING PHYSICIAN	Currently Null	Currently Null																								
727.81, 65 ORDERING STOP CODE	<p>Ordering Stop Code Numeric values 101 through 999</p>	<p>Derived from the CLINIC field (#5) of the PRESCRIPTION and is a pointer to the HOSPITAL LOCATION file (#44). Using this pointer, the ORDERING STOP CODE is then obtained from the appropriate entry in the CLINIC AND STOP CODES file (#728.44).</p> <p>If the Treating Specialty field is 18 or 23 or 24 or 41 or 65 or 94 or 1J then fill the ORDERING STOP CODE field with the corresponding Observation Stop Code. Please see table below.</p> <table><tr><td>Treating Specialty</td><td>Observation Code</td></tr><tr><td>18</td><td>293</td></tr><tr><td>23</td><td>295</td></tr><tr><td>24</td><td>290</td></tr><tr><td>41</td><td>296</td></tr><tr><td>65</td><td>291</td></tr><tr><td>94</td><td>292</td></tr><tr><td>1J</td><td>297</td></tr></table>	Treating Specialty	Observation Code	18	293	23	295	24	290	41	296	65	291	94	292	1J	297								
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23	295																									
24	290																									
41	296																									
65	291																									
94	292																									
1J	297																									
727.81, 66 ORDERING DATE	<p>Ordering Date Format: YYYYMMDD</p>	<p>Derived from the ISSUE DATE field (#1) of the PRESCRIPTION file (#52)</p>																								

Field # and Name	Description	Technical Description
727.81, 67 CNH/SH STATUS	Community Nursing Home/ State Home (CNH/SH) Indicator  Values: Y = Yes N = No Null = Null	Derived from the CNH CURRENT field (#148) of the PATIENT file (#2) using the Patient DFN
727.81, 68 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Data comes from either the a) DIVISION field (#20) of the PRESCRIPTION file (#52) or b) the DIVISION field (#.09) of Sub file (#52.2) PARTIAL DATE field (#60). These fields point to the OUTPATIENT SITE file (#59). This value is then used to call the API PREDIV^ECXDEPT RADDIV^ECXDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).
727.81, 69 MEANS TEST	The current means test category for this patient  Values: A = Category A B = Category B C = Category C P = Pending Adjudication R = Requires Means Test N = Means Test not Required E = Exempt I = Incomplete L = No Longer Applicable M = Non-Exempt	Using the patient pointer (DFN), MEANS TEST data is derived from the CURRENT MEANS TEST STATUS field (#.14) in the PATIENT file (#2). This field is a pointer to the MEANS TEST STATUS file (#408.32). Using the means test pointer, the data is derived from the CODE field (#.02) in the MEANS TEST STATUS file (#408.32).
727.81, 70 HEAD & NECK CANCER INDICATOR	Identifies whether patient has head and/or neck cancer Y = Yes N = No	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)
727.81, 71 ETHNICITY	The patient's ethnicity code Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.  Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient	Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2).  The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.

Field # and Name	Description	Technical Description
727.81, 72 RACE 1	<p>Self-reported by patient as recorded in VistA patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.</p> <p>Values:  3 = American Indian or Alaska Native  8 = Asian  9 = Black or African American  A = Native Hawaiian or other Pacific Islander  B = White  C = Declined to answer  D = Unknown by Patient  Null</p>	Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), will be include in the RACE 1 field. If any of the RACE INFORMATION values returned are “C” (DECLINED TO ANSWER) that will be the only value included in the RACE1 field.
727.81, 73 DSS IP #	Currently Null	Currently Null
727.81, 74 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:  1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions.  2 = VA-rated service-connected disabilities 30% or 40%  3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151  4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled  5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs  6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)</p>	Contains the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)

Field # and Name	Description	Technical Description
	<p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.81, 75 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	<p>Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA= "U"</p>
727.81, 76 PATIENT TYPE	<p>Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.</p> <p>Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare</p>	<p>Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)</p>

Field # and Name	Description	Technical Description
727.81, 77 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo)  Values: Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 – qualifies as a CV 0 – does not qualify as a CV -1 – bad DFN or date
727.81, 78 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2 <sup>nd</sup> piece is the Combat Vet End Date.
727.81, 79 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 – vet was eligible on date specified (or DT) 0 – vet was not eligible on date specified (or DT).
727.81, 80 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes – Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROOT").
727.81, 81 RX PATIENT STATUS	Indicates the status of the patient at the time the medication was filled. Values: SC = SERVICE CONNECTED AA = A&A OTH = OTHER INP = INPATIENT NON = NON-VA	RX Patient Status is extracted from the Rx PATIENT STATUS file (#53), field (#6) entitled: SC/A&A/OTHER/INPATIENT/NVA. The 3-character value for this field shall be an abbreviated version of the DATA TYPE/set of codes of this required field.
727.81, 82 NON-VA PRESCRIBER	The one character value for this field shall be "Y" or NULL based on the following data types/set of codes: Values: Y = YES Null = NO	Extracted from the New Person file (#200), field (#53.91)
727.81, 83 RX ORDER NUMBER	The prescription number, which is a whole number between 1 and 999999999.	Populated from the RX# field (#.01) located on the Prescription file (#52)

Field # and Name	Description	Technical Description
727.81, 84 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#181) located in the PATIENT file (#2)
727.81, 85 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: Y = Yes N = No Null	Retrieved from the AGENT ORANGE EXPOSURE field (#118) in the PRESCRIPTION file (#52)
727.81, 86 ENCOUNTER SWAC	Indicates the appropriate response for Southwest Asia conditions as related to this patient's episode of care.  Values: Y = Yes N = No Null	Retrieved from the SOUTHWEST ASIA CONDITIONS field (#120) in the PRESCRIPTION file (#52)
727.81, 87 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: Y = Yes N = No Null	Retrieved from the HEAD AND/OR NECK CANCER field (#121) in the PRESCRIPTION file (#52)
727.81, 88 ENCOUNTER MST	Indicates whether service provided during this patient encounter is related to military sexual trauma.  Values: Y = Yes N = No Null	Retrieved from the MILITARY SEXUAL TRAUMA field (#117) in the PRESCRIPTION file (#52)
727.81, 89 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions.  Values: Y = Yes N = No U = Unknown	Derived from the SOUTHWEST ASIA CONDITIONS? Field (#.322013) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. The SVC^VADPT call is made from routine PAT^ECXUTL3.
727.81, 90 RADIATION ENCOUNTER INDICATOR	This indicates whether service provided during this patient encounter is related to exposure to ionizing radiation.  Values: Y = Yes N = No Null	Retrieved from the IONIZING RADIATION EXPOSURE field (#119) in the PRESCRIPTION file (#52)
727.81, 91 SERVICE CONNECTED RX	Indicates whether the prescription is for a Service Connected condition. Values: Y = Yes N = No	Retrieved from the PRESCRIPTION file (#52), SERVICE CONNECTED field (#116)

Field # and Name	Description	Technical Description
727.81, 92 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.81, 93 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	The value of this field is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.81, 94 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.81, 95 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.81, 96 PROVIDER NPI	A standard, unique life-long identifier for individuals providing health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.81, 97 COUNTRY CODE	The value is the code for the country associated with the address.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.
727.81,98 PATCAT	This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.  Values: AD = Active Duty ADD = Active Duty Dependent FNRS = Former Non-Remarried Spouse RET = Retiree RETD = Retiree Dependent RES = Reservist REC = Recruit TDRL = Temporary Disability TFL = TRICARE for Life	If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.  FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.



## #727.826 – PROSTHETICS EXTRACT (PRO) File Data Definition

This file contains the data elements as specified by the Decision Support Office (DSO) for the Prosthetics Extract from existing VistA files. Entries into this file are made by extracting data that originates in the Prosthetics RECORD OF PROS APPLIANCE/REPAIR file (#660). Information respective to the patient for which Prosthetic information is extracted is pulled from the PATIENT file (#2). Once the extracts (making up the records in this file) are approved by the extract manager, entries in this file are loaded into mail messages and transmitted to the commercial vendor. Entries in this file should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.826,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.826,1 YEAR MONTH	A 6-character string representing the year and month for which this extract was performed. Format: YYYYMM	Generated by the extract software (ECXTRAC and ECXPRO).
727.826,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.826,3 FACILITY	Identifier for the station and division.	It is derived from the DIVISION field (#3.5) in the HOSPITAL LOCATION file (#44) for the entry identified in the LOCATION field (#.04) in the OUTPATIENT ENCOUNTER file (#409.68). This field is a pointer to the MEDICAL CENTER DIVISION file (#40.8).
727.826,4 PATIENT NO. DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	Derived from the PATIENT NAME field (#.02) of the RECORD OF PROS APPLIANCE/REPAIR file (#660). This in turn points to the NAME field (#.01) of the PROSTHETICS PATIENT file (#665). This then points to the NAME field (#.01) of the PATIENT file (#2).
727.826,5 SSN	The patient's social security number (Pseudo SSNs are indicated by a trailing 'P' or five leading zeros)	Derived from the PATIENT NAME field (#.02) of the RECORD OF PROS APPLIANCE/REPAIR file (#660). This in turn points to the NAME field (#.01) of the PROSTHETICS PATIENT file (#665). This then points to the SSN field (#.09) of the PATIENT file  The logic changed for FY08 to eliminate invalid SSNs.
727.826,6 NAME	The first four characters of the patient's last name, left justified.	Derived from the PATIENT NAME field (#.02) of the RECORD OF PROS APPLIANCE/REPAIR file (#660). This in turn points to the NAME field (#.01) of the PROSTHETICS PATIENT file (#665).

Field # and Name	Description	Technical Description
727.826,7 IN OUTPATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to "I" if an inpatient status is found based on these calls.
727.826,8 DATE OF SERVICE	Date on which the new or repaired prosthetic appliance was delivered and accepted by the patient. Format: YYYYMMDD	Derived from the DELIVERY DATE field (#10) in the RECORD OF PROS APPLIANCE/REPAIR file (#660)
727.826,9 FEEDER LOCATION	<p>Location within a facility where the product is produced.</p> <p>If this is a Prosthetics Lab Transaction and the extract header and/or Prosthetic Station is equal to the Receiving Station, the FEEDER LOCATION is constructed as follows: 3-digit station number of the Receiving Station, concatenated with LAB. An example is XXXLAB, where XXX is the Receiving Station number, or 5-digit station number of the Receiving Station (includes the 2-letter division suffix) concatenated with LAB. An example is XXXXXLAB, where XXXXX is the Receiving Station number.</p> <p>If this is a Prosthetics Lab Transaction and the extract header and/or Prosthetic Station is equal to the Requesting Station, the FEEDER LOCATION is constructed as follows: 3-digit station number of the Requesting Station, concatenated with ORD. An example is XXXORD, where XXX is the Requesting Station number, or 5-digit station number of the Requesting Station (includes the 2-letter division suffix) concatenated with ORD. An example is XXXXXORD, where XXXXX is the Requesting Station number.</p> <p>If this is not a Prosthetics Lab Transaction, the FEEDER LOCATION is constructed as follows: 3-digit Station number concatenated with NONL. An example is XXXNONL, where XXX is the Station number, or 5-digit Station number (includes the 2-letter division suffix); concatenated with NONL. An example is XXXXXNONL, where XXXXX is the Station number.</p>	<p>Derived from the RECORD OF PROS APPLIANCE/REPAIR file (#660). Depending on how the FEEDER LOCATION is constructed, data is derived from the following fields in the RECORD OF PROS APPLIANCE/REPAIR file (#660):</p> <p>RECEIVING STATION (#70) RECEIVING STATION is a pointer to the INSTITUTION file (#4). REQUESTING STATION (#40) RECEIVING STATION is a pointer to the INSTITUTION file (#4). STATION (#8) This is a pointer to the INSTITUTION file (#4).</p>

Field # and Name	Description	Technical Description
727.826,10 FEEDER KEY	<p>Code that uniquely identifies a DSS product.</p> <p>Format is: HHHHHTSsta_5RRR            HHHHH = HCPCS Code            T = Transaction type            S = Source            sta_5 = Three or five character station number            RRR = Requesting or Receiving Station</p> <p>HCPCS Code – The 5-character HCPCS Code.</p> <p>Transaction Type Code Values:            X = Repair (X)            N = Initial Issue (I), Replace (R), or Spare (S)            If the Type of Transaction in the patient's prosthetic record is "5" (Rental), the Type of Transaction code in the FEEDER KEY is R.</p> <p>Source Values:            V = VA            C = Commercial</p> <p>sta_5 and RRR Values:            If this is not a Prosthetics Lab Transaction, this is Null.</p> <p>If this is a Prosthetics Lab Transaction and FEEDER LOCATION ends in ORD:            3 or 5 character Receiving Station concatenated with REC.</p> <p>If this is a Prosthetics Lab Transaction and FEEDER LOCATION ends in LAB:            3 or 5 character Requesting Station concatenated with REQ.</p>	<p>Derived from the RECORD OF PROS APPLIANCE/REPAIR file (#660). Depending how the FEEDER KEY is constructed, the components for the FEEDER KEY are derived from the following fields in the RECORD OF PROS APPLIANCE/REPAIR file (#660):            HCPCS (#4.1-) - HCPCS is a pointer to the CPT CODE field (#.01) of the CPT file (#81)            TYPE OF TRANSACTION (#2)            SOURCE (#12)            RECEIVING STATION (#70) RECEIVING STATION is a pointer to the INSTITUTION file (#4).            REQUESTING STATION (#40)            REQUESTING STATION is a pointer to the INSTITUTION file (#4).            STATION (#8) STATION is a pointer to the INSTITUTION file (#4).</p>
727.826,11 QUANTITY	<p>The number of units issue or units repaired as indicated in the patient's prosthetic record. Unit of issue may vary from product to product and site to site. Right justified padded with leading zeros. Zero decimal digits. (Integers only)</p>	<p>Derived from the QTY field (#5) in the RECORD OF PROS APPLIANCE/REPAIR file (#660) If the quantity is not known, a default value of 1 will be assigned to the extract record</p>
727.826,12 PRIMARY CARE TEAM	<p>The IEN of the primary care team assigned to this patient in the PCMM module.</p>	<p>Using the DATE OF SERVICE field and the patient's DFN, OUTPTTM^SDUTL3 returns the teams IEN from the TEAM file (#404.51)</p>
727.826,13 PRIMARY CARE PROVIDER	<p>The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.</p> <p>Value is the IEN preceded by "2".</p>	<p>Using the DATE OF SERVICE field and the patient's DFN, OUTPTPR^SDUTL3 returns the provider's New Person file record internal entry number</p>
727.826,14 PCE CPT/HCPCS CODE & MODIFIERS	<p>HCPCS code for the item you are selecting.</p>	<p>Derived from the HCPCS (#4.1) field in the RECORD OF PROS APPLIANCE/REPAIR file (#660). HCPCS (#4.1) is a pointer to the respective CPT CODE field (#.01) in the CPT file (#81).</p> <p>The source of CPT modifiers is the MODIFIER field (#.01) of the CPT MODIFIER file (#81.3).</p>

Field # and Name	Description	Technical Description
727.826,15 ICD-9 CODE	Currently Null ICD-9 code is not available in PRO.	Currently Null
727.826, 16 SECONDARY ICD9 CODE #1	Currently Null ICD-9 code is not available in PRO.	Currently Null
727.826, 17 SECONDARY ICD9 CODE #2	Currently Null ICD-9 code is not available in PRO.	Currently Null
727.826, 18 SECONDARY ICD9 CODE #3	Currently Null ICD-9 code is not available in PRO.	Currently Null
727.826, 19 SECONDARY ICD9 CODE #4	Currently Null ICD-9 code is not available in PRO.	Currently Null
727.826,20 AGENT ORANGE STATUS	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.826,21 RADIATION EXPOSURE STATUS	Indicates if patient claims exposure to ionizing radiation  Values: Y= Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation U = Unknown	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.826,22 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions.  Y = Yes N = No U = Unknown	This field is derived from the SOUTHWEST ASIA CONDITIONS. field (#.322013) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT which is called by PAT^ECXUTL3. The field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.826,23 PATIENT ELIGIBILITY	Patients Primary Eligibility Code.	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD. This code is composed of two or three numeric characters.

Field # and Name	Description	Technical Description
727.826,24 COST OF TRANSACTION	<p>Cost to produce the prosthetic.</p> <p>The value is determined in one of three ways:</p> <p>1) The value found in VistA TOTAL COST in the patient's prosthetic record when the Form Requested On indicates a commercial acquisition method.</p> <p>2) The value found in VistA TOTAL LAB COST in the patient's prosthetic record when the value in the FORM REQUESTED ON field is a Lab Transaction (i.e., #2529-3).</p> <p>3) Has a value of zero when the Form Requested On indicates a stock or inventory issue</p>	<p>Derived from the RECORD OF PROS APPLIANCE/REPAIR file (#660). Depending on how the COST OF TRANSACTION is constructed, data is derived from the following fields in the RECORD OF PROS APPLIANCE/REPAIR file (#660):</p> <p>1) TOTAL COST (#14)</p> <p>2) TOTAL LAB COST (#48)</p> <p>3) FORM REQUESTED ON (#11)</p>
727.826,25 LAB LABOR COST	Total cost of the labor to perform the job.	<p>Derived from the TOTAL LABOR COST field (#46) in the RECORD OF PROS APPLIANCE/REPAIR file (# 660). The following algorithm is defined:</p> <p>a) If the patient's prosthetic record indicates a Lab Transaction, the value of LAB LABOR COST is equal to the value found for TOTAL LABOR COST.</p> <p>b) If the patient's prosthetic record is not a Lab Transaction, the value of LAB LABOR COST is zero.</p> <p>c) If LAB LABOR COST is not known, and the patient's prosthetic record indicates a Lab Transaction, a zero value is assigned to the extract record.</p>
727.826,26 LAB MATERIAL COST	Cost of all materials to perform the job.	<p>Derived from the RECORD OF PROS APPLIANCE/REPAIR according to the following algorithm:</p> <p>a) If the patient's prosthetic record indicates a Lab Transaction, the value of LAB MATERIAL COST is equal to the value found for TOTAL MATERIAL COST.</p> <p>b) If the patient's prosthetic record is not a Lab Transaction, the value of LAB MATERIAL COST is zero.</p> <p>c) If LAB MATERIAL COST is not known, and the patient's prosthetic record indicates a Lab Transaction, a zero value is assigned to the extract record.</p> <p>d) LAB MATERIAL COST shall allow for values, which are reported in dollars and cents. The actual value shall be extracted, including the decimal point.</p>
727.826,27 BILLING STATUS	<p>Utilization Status.</p> <p>Values:</p> <p>1 = SC/OP</p> <p>2 = SC/IP</p> <p>3 = NSC/IP</p> <p>4 = NSC/OP</p> <p>5 = OTHER</p>	<p>Derived from the PATIENT CATEGORY field (#62) in the RECORD OF PROS APPLIANCE/REPAIR file (#660) for the prosthetic device record extracted</p>

Field # and Name	Description	Technical Description
727.826,28 VET/NON VET	Patient's veteran status  Values: Y = Is a veteran N = Is not a veteran	Pulled from the VETERAN (Y/N) field (#1901) in the PATIENT file (#2). If the veteran's status is not known, a NULL value will be assigned to the VET/NON VET field.
727.826,29 TYPE OF TRANSACTION	Code that best describes the prosthetic transaction.  Values: I = Initial Issue R = Replace S = Spare X = Repair 5 = Rental	Derived from the TYPE OF TRANSACTION field (#2) in the RECORD OF PROS APPLIANCE/REPAIR file (#660). If the TYPE OF TRANSACTION is not known, NULL is assigned to the field.
727.826,30 REQUESTING STATION	Facility that initiates the request for a Lab prosthetic.	Derived by pulling the REQUESTING STATION field (#40) in the RECORD OF PROS APPLIANCE/REPAIR file (#660), which is a pointer to the INSTITUTION file (#4)
727.826,31 RECEIVING STATION	Lab facility that fills the Lab request and provides the prosthetic to the requesting station	Derived by pulling the RECEIVING STATION field (#70) in the RECORD OF PROS APPLIANCE/REPAIR file (#660), which is a pointer to the INSTITUTION file (#4)
727.826,32 PSAS HCPCS CODE	This field is used to hold the PSAS VA HCPCS 5- character CPT Code, the Quantity or how many times the unique code appears in the record, and up to up to 5 two-character CPT modifiers. Field length in Vista is 15.	The PSAS HCPCS field (#4.5) of the RECORD OF PROS APPLIANCE/REPAIR file (#660) is used. It is a pointer to the PROSTHETICS HCPCS file (#661.1). The HCPCS field (#.01) of file (#661.1) is placed in this extract record field.
727.826,33 ZIP CODE	Zip + 4 is the zip code for where the patient resides using format of nnnnn-nnnn. The 5-character zip code is provided if zip + 4 is not available.	Using the patient pointer (DFN), ZIP CODE data is derived from the ZIP+4 field (#.1112) PATIENT file (#2)
727.826,34 DATE OF BIRTH	Patient's date of birth Format: YYYYMMDD	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)
727.826,35 SEX	Gender  Values: M = Male F = Female	Using the patient pointer (DFN), this data element is taken from the SEX field (#.02) in the PATIENT file (#2)
727.826,36 AMIS GROUPE	Number that indicates what items combine to create a prosthetic device.	Derived from the AMIS GROUPE field (#68) in the RECORD OF PROS APPLIANCE/REPAIR file (#660). The field is used to sort prosthetic items that combine to create a prosthesis. Decimals are not allowed.
727.826,37 PLACEHOLDER	Currently Null	Currently Null
727.826,38 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.826,39 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.826, 40 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Forma“: "V999999". Start with a V and then pad zeros to the left of the numerals, if needed, to get exactly 7 characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.826, 41 RACE	Observed Race Code for this patient. In compliance with OBM instructions, field is no longer updated in VistA. Values remain in VistA and are posted to DSS in case RACE1 field is not populated. See also RACE 1. Only a single value is allowed.  Values: 3 = American Indian or Alaska Native A = Asian B = Black or African American D = Declined to Answer H = Native Hawaiian or Other Pacific U = Unknown by Patient W = White Null	Using the patient pointer (DFN), RACE data is shown as the ABBREVIATION field (#2) of the RACE file (#10) entry pointed to by the RACE field (#.06) in the PATIENT file (#2). Patient race is returned by DEM^VADPT.
727.826, 42 POW STATUS	Indicates if patient was confined as a Prisoner of War  Values: Y = Patient was confined as a Prisoner of War N = Patient was not confined as a Prisoner of War U = Unknown	Derived from the PATIENT file (#2), POW STATUS INDICATED field (#.525). The status indicator is returned by SVC^VADPT.
727.826, 43 POW LOCATION	If POW Status is indicated, then this is the POW confinement location/period.  Values: 1 = World War I 2 = World War –I - Europe 3 = World War –I - Pacific 4 = Korean 5 = Vietnam 6 = Other	Derived from the PATIENT file (#2); POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.
727.826, 44 SHARING AGREEMENT PAYOR	An indicator used for patients participating in sharing agreements. Field rarely contains data.  Values: A = Sharing Agreement B = TRICARE C = CAT C / Category C D = CHAMPVA E = CHAMPUS NULL	The ALIAS sub-field (#.01) of the ALIAS multiple field (#1) of the PATIENT file (#2) is used to indicate a patient who participates in a sharing agreement. If the (#.01) field contains any one of the specified key words, then the patient is considered included for Sharing Agreement information.  Field (#.01) must contain any one of the following key words: SHARING AGREEMENT CHAMPVA TRICARE CAT C CATEGORY C

Field # and Name	Description	Technical Description
727.826, 45 SHARING AGREEMENT INSURANCE	Indicates the first insurer for patients who participate in sharing agreements.  Field rarely contains data.	Data is taken from the INSURANCE TYPE sub-field (#.01) of the INSURANCE TYPE field (#.3121), sub-file (#2.312), of the PATIENT file (#2). This is a pointer value for the INSURANCE COMPANY file (#36). Only the first insurance company found in the multiple field is used. The data is stored as free text.
727.826, 46 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer. U = Unknown	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The MST status is stored in the MST STATUS field (#3). A call is made to \$\$GETSTAT^DGMSTAPI(DFN,DGDATE) using the patient DFN and the date in the DAY field.
727.826, 47 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.826, 48 STATE	FIPS 2- character numeric code for the state where the patient resides.	Using the patient pointer (DFN), data is derived from the STATE field (#.115) in the PATIENT file (#2) which points to the STATE file (#5). From the STATE file record, the two-character VA STATE CODE field (#2) is used.
727.826, 49 COUNTY	The FIPS county code for where the patient resides	Using the patient pointer (DFN), data is derived from the COUNTY field (#.117) in the PATIENT file (#2), which points to a subfile record in the COUNTY multiple field (#3) of the STATE file (#5). The three-character VA COUNTY CODE field (#2) within the COUNTY multiple field is used.
727.826, 50 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by "2".	From the DATE OF SERVICE field and the patient's DFN, OUTPTAP^SDUTL3 returns the provider's New Person file record internal entry number
727.826, 51 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format is V999999. Start with a V followed by 6 digits. Pad with zeros to the left of the digits if needed to get exactly 7 characters.	Derived from the NEW PERSON file (#200), field (#5), and file (#8932.1). Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file (#200).
727.826, 52 PLACEHOLDER	Currently Null	Currently Null



Field # and Name	Description	Technical Description
727.826, 53 DOM, PR RTP, AND SAARTP	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SAR RTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SAR RTP CODE field in file (#727.831) which holds a set of codes
727.826, 54 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the ENROLLMENT STATUS (#55), found in this extract
727.826, 55 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11), ENROLLMENT STATUS field (#.04), which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.826, 56 PLACEHOLDER	Currently Null	Currently Null
727.826,57 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.826, 58 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Value-Description  A = Army-Active Duty  B = Navy, Marine-Active Duty  C = Air Force-Active Duty  D = Coast Guard- Active Duty  E = Retired, Uniformed Services  F = Medical Remedial Enlist  G = Merchant Seaman-USPHS  H = Other USPHS Beneficiaries  I = Observation/Examination  J = Office of Workers Comp  K = Job Corps/Peace Corps  L = Railroad Retirement  M = Beneficiaries-s -Foreign Government  N = Humanitarian (Non-Vet)  O = Champus Restore  P = Other Reimbursement. (Non-Vet)  Q = Other Federal Dependant  R = Donors (Non-Vet)  S = Special Studies (Non-Vet)  T = Other Non-Veteran  U = CHAMPVA-Spouse, Child  V = CHAMPUS  W = Czechoslovakia/Poland Svc  X = Persian Gulf War  Y = CAV/NPS  Z = Merchant Marine  0 = Korean  1 = World War I  2 = World War II  3 = Spanish American  4 = Pre-Korean  5 = Post-Korean  6 = Operation Desert Shield  7 = Vietnam ERA  8 = Post-Vietnam  9 = Other or None</p>	<p>Derived from the PERIOD OF SERVICE field (#.323) in the PATIENT file (#2). The data is derived from the CODE field (#.03) in the PERIOD OF SERVICE file (#21). This code is a single alphanumeric character.</p>
727.826, 59 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator</p> <p>Y = Patient is an Observation Patient.  N = Patient is not an Observation Patient</p>	<p>Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.</p>

Field # and Name	Description	Technical Description																
727.826, 60 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the PRO extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and Stop Code value = 423.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date “+ ”I” (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.826, 61 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values: K = Korean DMZ V = Vietnam</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT file (#2)																
727.826, 62 CNH/SH STATUS (Community Nursing Home/ State Home)	<p>Community Nursing Home/ State Home (CNH/SH) Indicator</p> <p>Values: Y = Yes N = No Null = Null</p>	Derived from the CNH CURRENT field (#148) of the PATIENT file (#2) using the Patient DFN																
727.826, 63 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	The value is derived from the RECORD OF PROS APPLIANCE/REPAIR file (#660), STATION field (#8), which is a pointer to the INSTITUTION file (#4). The RADDIV^ECXDEPT DSS API retrieves the STATION NUMBER field (#99) from the INSTITUTION file (#4).																
727.826, 64 HEAD AND NECK CANCER INDICATOR	<p>Identifies whether patient has head and/or neck cancer</p> <p>Y = Yes N = No</p>	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)																

Field # and Name	Description	Technical Description
727.826, 65 ETHNICITY	<p>The patient's ethnicity code</p> <p>Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.</p> <p>Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient</p>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2).</p> <p>The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.</p>
727.826, 66 RACE 1	<p>Self-reported by patient as recorded in VistA patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.</p> <p>Values: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient Null</p>	<p>Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), will be included in the RACE 1 field. If any of the RACE INFORMATION values returned are "C" (DECLINED TO ANSWER) that will be the only value included in the RACE1 field.</p>
727.826, 67 DSS IP #	Currently Null	Currently Null
727.826, 68 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include: 1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions. 2 = VA-rated service-connected disabilities 30% or 40% 3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151 4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled 5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disabled by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs 6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were</p>	<p>Contains the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)</p>

Field # and Name	Description	Technical Description
	<p>discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits through 1/27/11)</p> <p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment</p> <p>Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.826, 69 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUES"A""U"

Field # and Name	Description	Technical Description
727.826, 70 PATIENT TYPE	Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.  Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare	Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)
727.826, 71 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece -1 - qualifies as a CV -0 - does not qualify as a CV -1 - bad DFN or date
727.826, 72 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2nd piece is the Combat Vet End Date.
727.826, 73 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 - vet was eligible on date specified (or DT) 0 - vet was not eligible on date specified (or DT).
727.826, 74 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes - Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROT").

Field # and Name	Description	Technical Description
727.826, 75 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#181) located in the PATIENT file (#2)
727.826, 76 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: Y = Yes N = No Null	Using the PCE field (#8.12) in the RECORD OF PROS APPLIANCE/REPAIR file (#606) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the agent orange indicator stored at the AGENT ORANGE EXPOSURE field (#80002) in the VISIT file (#9000010).
727.826, 77 ENCOUNTER SWAC	Indicates the appropriate response for Southwest Asia conditions as related to this patient's episode of care.  Values: Y = Yes N = No Null	Using the PCE field (#8.12) in the RECORD OF PROS APPLIANCE/REPAIR file (#606) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Southwest Asia conditions indicator stored at the SW ASIA CONDITIONS field (#80004) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "PGE".
727.826, 78 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: Y = Yes N = No Null	Using the PCE field (#8.12) in the RECORD OF PROS APPLIANCE/REPAIR file (#606), a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the head/neck cancer data stored in the HEAD AND/OR NECK CANCER field (#80006) in the VISIT file (#9000010).
727.826, 79 ENCOUNTER MST	Indicates whether service provided during this patient encounter is related to military sexual trauma.  Values: Y = Yes N = No Null	Using the PCE field (#8.12) in the RECORD OF PROS APPLIANCE/REPAIR file (#606) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the military sexual trauma data stored in the MILITARY SEXUAL TRAUMA field (#80005) in the VISIT file (#9000010).
727.826, 80 RADIATION ENCOUNTER INDICATOR	This indicates whether service provided during this patient encounter is related to exposure to ionizing radiation.  Values: Y = Yes N = No U = Unknown Null	Using the PCE field (#8.12) in the RECORD OF PROS APPLIANCE/REPAIR file (#606) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the ionizing radiation exposure indicator stored at the IONIZING RADIATION EXPOSURE field (#80003) in the VISIT file (#9000010).

Field # and Name	Description	Technical Description
727.826, 81 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.826, 82 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Value is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.826, 83 NPPD CODE	The National Prosthetics Product Database report line number to which the HCPCS are assigned	Value is derived from the PROSTHETIC HCPCS File (#661.1), field (#5) NPPD REPAIR CODE, if the record is a repair record. The value is derived from the PROSTHETIC HCPCS File (#661.1) field (#6) NPPD NEW CODE if the record is for a new issue. Note: The PROSTHETICS (PRO) EXTRACT File (#727.826) already stores whether the record is for repair or a new issue in the TYPE OF TRANSACTION field (#29)
727.826, 84 NPPD ENTRY DATE	The date the entry was first made in the VistA Prosthetics Package	The date value is retrieved from the PROSTHETICS HCPCS File (#660), field (#.01) ENTRY DATE
727.826, 85 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.826, 86 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.826, 87 COUNTRY CODE	The value is the code for the country associated with the address	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.
727.826,88 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.826,89 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".
727.826,90 LABOR HOURS	This is the number of hours spent on the job	Derived from the TOTAL LABOR HOURS field (#45) of the RECORD OF PROS APPLIANCE/REPAIR File (#660)



Field # and Name	Description	Technical Description
727.827,91 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>

## #727.825 - QUASAR EXTRACT (ECQ) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the QUASAR extract from existing QUASAR VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the "AC" cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.825,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.825,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.825,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.825,3 FACILITY	Identifier for the station and division.	A free text field that represents the facility NAME (#.01) from the INSTITUTION file (#4). It is derived from the SITE NAME field (#.01) in the A&SP SITE PARAMETER file (#509850.8).
727.825,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.825,5 SSN	The patient's social security number (Pseudo SSNs are indicated by a trailing 'P' or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.825,6 NAME	The first four characters of the patient's last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first "," piece are used, padded with trailing spaces if necessary.
727.825,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to "I" if an inpatient status is found based on these calls.
727.825,8 DAY	Date when speech and audiology procedure was performed. Format: YYYYMMDD	Derived from the A&SP CLINIC VISIT file (#509850.6), DATE field (#.01)  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.

Field # and Name	Description	Technical Description
727.825,9 DSS UNIT	A locally defined group of work products entered for a specific DSS Department  Format: IEN of the DSS Unit.	A pointer to the DSS UNIT file (#724). The DSS unit pointer is derived from the AUDIOLOGY DSS UNIT LINK field (#727.8251) or from the SPEECH PATHOLOGY DSS UNIT LINK field (#727.8252) in the A&SP SITE PARAMETER file (#509850.8).
727.825,10 CATEGORY	Currently Null.	Currently Null
727.825,11 PROCEDURE	This field contains the name of the procedure selected for this extract record.  (1) The value of this field can be either a national or local product code without quantity or modifiers or a CPT code with quantity and up to five modifiers.  (2) If the Procedure Code is a National, append an 'N' to the code.  (3) If the Procedure Code is a Local Procedure, append an 'L' to the code.	Derived from the PROCEDURE CODE field (#10) in the A&SP CLINIC VISIT file (#509850.6). It is the CPT code for procedures from the CPT file (#81).
727.825,12 VOLUME	The number of times this specific procedure was performed.  Value is a number between 1 and 9999; no decimal digits.	Numeric volume for this procedure associated with this extract record
727.825,13 COST CENTER	The cost center associated with the DSS unit for this extract record.	Derived from the COST CENTER field (#3) in the DSS UNIT file (#724). The DSS unit pointer is derived from the AUDIOLOGY DSS UNIT LINK field (#727.8251) or from the SPEECH PATHOLOGY DSS UNIT LINK field (#727.8252) in the A&SP SITE PARAMETER file (#509850.8).
727.825,14 ORDERING SECTION	The IEN of the Ordering Section.	This character string is the IEN of the Ordering Section in the MEDICAL SPECIALTY file (#723). The Ordering Section comes from the MEDICAL SPECIALTY field (#2) in the DSS UNIT file (#724). The DSS unit pointer is derived from the AUDIOLOGY DSS UNIT LINK field (#727.8251) or from the SPEECH PATHOLOGY DSS UNIT LINK field (#727.8252) in the A&SP SITE PARAMETER file (#509850.8).
727.825,15 SECTION	This is the IEN in file (#723) of the Medical Specialty of the DSS Unit associated with this extract record.	This character string represents an IEN in the MEDICAL SPECIALTY file (#723). This data element is derived from the MEDICAL SPECIALTY field (#2) in the DSS UNIT file (#724). The DSS unit pointer is derived from the AUDIOLOGY DSS UNIT LINK field (#727.8251) or from the SPEECH PATHOLOGY DSS UNIT LINK field (#727.8252) in the A&SP SITE PARAMETER file (#509850.8).
727.825,16 PROVIDER	The provider associated with the patient encounter. This character string is an IEN for the NEW PERSON file (#200); a '2' has been appended to the beginning of the character string. It represents the Provider who performed the procedure associated with the A&SP Clinic Visit record.  This number is IEN preceded by "2".	A character string of format "2" _ IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is obtained by the existence of the (#.07) EVENT CAPTURE CODE POINTER of the first (#20) PROCEDURE CODE multiple. If the pointer exists, the data is derived from the (#.05) EC PROCEDURE PROVIDER of the (#15) EVENT CAPTURE PROCEDURE pointer multiple. If the pointer doesn't exist, the data is derived from the (#.05) PROCEDURE PROVIDER of the first (#10) PROCEDURE CODE multiple.

Field # and Name	Description	Technical Description
727.825, 17 PROVIDER PERSON CLASS	This is the VA Code of the Person Class of the Provider as of the date of this record. (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	Provider Person Class is derived from the New Person file (#200), field (#5): file (#8932.1)
727.825,18 PROVIDER #2	The second provider associated with the patient encounter. It represents an assisting Provider who performed the procedure associated with the A&SP Clinic Visit record	A character string of format “@”_IEN, where IEN is the internal entry number for the Provider in the New Person file (#200). Data is pulled from the first (#2.7) SECONDARY PROVIDER multiple in the A&SP CLINIC VISIT file (#509850.6)
727.825, 19 PROVIDER #2 PERSON CLASS	This is the VA code of the Person Class of the second assisting Provider as of the date of this record	
727.825,20 PROVIDER #3	The third provider associated with the patient encounter. It represents an assisting Provider who performed the procedure associated with the A&SP Clinic Visit record	A character string of format “2”_IEN, where IEN is the internal entry number for the Provider in the NEW PEROSN file (#200). Data is pulled from the second (#2.7) SECONDARY PROVIDER multiple in the A&SP CLINIC VISIT FILE (#509850.6).
727.825, 21 PROVIDER #3 PERSON CLASS	This is the VA code of the Person Class of the third assisting Provider as of the date of this record	
727.825,22 PLACEHOLDER4	Currently Null	Currently Null
727.825,23 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP (1), which is a pointer to the PATIENT MOVEMENT file (#405).
727.825,24 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record. Only applicable if the patient was an inpatient on the date of the procedure.  NULL for outpatients, except if observation patient.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.825,25 TIME	Time when the procedure was performed. Format: HHMMSS	A six-character string of format HHMMSS that represents the time (military time) when the procedure was performed. A default of "000000" will be used in this field.
727.825,26 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the DATE field (#.01) from the A&SP CLINIC VISIT file (#509850.6) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to file (#404.51) is transmitted.
727.825,27 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by “2”.	Using the DATE field (#.01) from the A&SP CLINIC VISIT file (#509850.6) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).

Field # and Name	Description	Technical Description
727.825,28 PCE CPT CODE & MODIFIERS	Five character CPT Code from PCE, the Quantity (or how many times the unique code appears in the record), and up to five two-character CPT modifiers.	Derived from the PROCEDURE CODE field (#10) in the A&SP CLINIC VISIT file (#509850.6). It is the CPT code for procedures from the CPT file (#81). The source of CPT modifiers is the MODIFIER field (#.01) of the CPT MODIFIER file (#81.3).
727.825,29 ICD-9 CODE	Primary ICD-9 (diagnosis) code for this clinic visit	Derived from the first entry in the DIAGNOSTIC CODE field (#3) in the A&SP CLINIC VISIT file (#509850.6). It is a pointer to the A&SP DIAGNOSTIC CONDITION file (#509850.1), which is a DINUMed pointer to the ICD DIAGNOSIS file (#80).  The first code entered is always assumed the primary diagnosis. Subsequent codes are assumed secondary diagnoses. Using the pointer, ICD-9 CODE is derived from the ICD DIAGNOSIS file (#80).
727.825, 30 SECONDARY ICD9 CODE #1	First of the Secondary ICD9 codes for this clinic visit.	The diagnostic code pointer is derived from the first entry in the DIAGNOSTIC CODE field (#38) in the A&SP CLINIC VISIT file (#509850.6). It is a pointer to the A&SP DIAGNOSTIC CONDITION file (#509850.1) which is a DINUMed pointer to the ICD DIAGNOSIS file (#80).
727.825, 31 SECONDARY ICD9 CODE #2	Second of the Secondary ICD9 code for this clinic visit.	The diagnostic code pointer is derived from the first entry in the DIAGNOSTIC CODE field (#38) in the A&SP CLINIC VISIT file (#509850.6). It is a pointer to the A&SP DIAGNOSTIC CONDITION file (#509850.1) which is a DINUMed pointer to the ICD DIAGNOSIS file (#80).
727.825, 32 SECONDARY ICD9 CODE #3	Third of the Secondary ICD9 codes for this clinic visit.	The diagnostic code pointer is derived from the first entry in the DIAGNOSTIC CODE field (#38) in the A&SP CLINIC VISIT file (#509850.6). It is a pointer to the A&SP DIAGNOSTIC CONDITION file (#509850.1) which is a DINUMed pointer to the ICD DIAGNOSIS file (#80).
727.825, 33 SECONDARY ICD9 CODE #4	Fourth of the Secondary ICD9 code for this clinic visit.	The diagnostic code pointer is derived from the first entry in the DIAGNOSTIC CODE field (#38) in the A&SP CLINIC VISIT file (#509850.6). It is a pointer to the A&SP DIAGNOSTIC CONDITION file (#509850.1) which is a DINUMed pointer to the ICD DIAGNOSIS file (#80).
727.825,34 AGENT ORANGE STATUS	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.825,35 RADIATION EXPOSURE	Indicates if patient claims exposure to ionizing radiation  Values: Y= Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation Unknown	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.

Field # and Name	Description	Technical Description
727.825,36 SW ASIA CONDITIONS	The field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia Conditions. Y = Yes N = No U = Unknown	Southwest Asia conditions data is derived from the SOUTHWEST ASIA CONDITIONS? field (23) in the EVENT CAPTURE PATIENT file (#721).
727.825,37 SERVICE CONNECTED	Indicates if this patient is service connected  Values: Y = This patient is service connected N = This patient is not service connected	Derived from the PATIENT file (#2), SERVICE CONNECTED field (#.301). The percentage is returned by SVC^VADPT.
727.825,38 SENT TO PCE	This field flags data that has been sent to PCE Values: Y = Yes N = No	Record is flagged Y when sent to PCE, N or null if not sent.
727.825,39 PLACEHOLDER5	Currently Null	Currently Null
727.825,40 DSS IDENTIFIER	This data element is always exactly six characters in length. The DSS Identifier represents the primary and secondary stop codes (if the secondary exists) of the Associated Clinic. Changed for FY2003 to ensure that records pertaining to observation cases contain the correct value.  Format: DSS Identifier = PPPSSS Where PPP is Primary Stop Code and SSS is the Secondary Stop Code of the A&SP Clinic visit.  DSS Identifier = PPP000 Where PPP is Primary Stop Code and 000 is appended when Secondary Stop Code is not specified, unknown or DSS Unit is set to "NOT send to PCE."  DSS Identifier = 000000 Primary Stop Code is not known or the DSS Unit does not have an Associated Stop Code.	Derived from: (1) A&SP CLINIC VISIT file (#509850.6) CLINIC LOCATION field (#2.6) (2) HOSPITAL LOCATION file (#44) STOP CODE NUMBER field (#8) and CREDIT STOP CODE field (#2503) (3) CLINIC STOP file (#40.7) AMIS REPORTING STOP CODE field (#1)
727.825, 41 PLACEHOLDER1	Currently Null	Currently Null
727.825, 42 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.825, 43 DSS PRODUCT DEPARTMENT	The nationally defined DSS Department Code designated for the patient care product/	Derived from the UNIT NUMBER field (#4) of the DSS UNIT file (#724)
727.825, 44 PLACEHOLDER	Currently Null	Currently Null
727.825, 45 PLACEHOLDER	Currently Null	Currently Null
727.825, 46 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.825,47 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V and then pad zeros to the left of the numerals, if needed, to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the data specific Person Class data for a given provider. The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.825, 48 PLACEHOLDER	Currently Null	Currently Null
727.825, 49 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by "2".	Using the DATE field (#.01) from the A&SP CLINIC VISIT file (#509850.6) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTAP^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.825, 50 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V and then pad zeros to the left of the numerals, if needed, to get exactly seven characters.	Derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person Class is determined by. \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file (#200).
727.825, 51 PLACEHOLDER	Currently Null	Currently Null
727.825, 52 DIVISION	The Division associated with the QUASAR record.	Is pulled from the DIVISION field (#60) of the A&SP CLINIC VISIT file (#509850.6). The Division field there is a pointer (IEN) to the MEDICAL CENTER DIVISION file (#40.8).
727.825, 53 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer. U = Unknown	The MST history file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients' MST status is stored in the MST status field (#3). A call is made to \$\$GETSTAT^DGMSTAPI (DFN, DGDATE) using the DFN in the PATIENT NO. DFN field (#4) and the date in the day field
727.825, 54 DOM, PR RTP AND SA RTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes
727.825, 55 DATE OF BIRTH	Patient's date of birth Format: YYYYMMDD	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)

Field # and Name	Description	Technical Description
727.825, 56 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the Enrollment STATUS found in this extract
727.825, 57 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.825, 58 PLACEHOLDER	Currently Null	Currently Null



Field # and Name	Description	Technical Description
727.825, 59 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values:</p> <p>A = Army-Active Duty            B = Navy, Marine-Active Duty            C = Air Force-Active Duty            D = Coast Guard- Active Duty            E = Retired, Uniformed Services            F = Medical Remedial Enlist            G = Merchant Seaman-USPHS            H = Other USPHS Beneficiaries            I = Observation/Examination            J = Office of Workers Comp            K = Job Corps/Peace Corps            L = Railroad Retirement            M = Beneficiaries -Foreign Government            N = Humanitarian (Non-Vet)            O = Champus Restore            P = Other Reimbursement. (Non-Vet)            Q = Other Federal Dependant            R = Donors (Non-Vet)            S = Special Studies (Non-Vet)            T = Other Non-Veteran            U = ChampVA-Spouse, Child            V = Champus            W = Czechoslovakia/Poland Svc            X = Persian Gulf War            Y = CAV/NPS            Z = Merchant Marine            0 = Korean            1 = World War I            2 = World War II            3 = Spanish American            4 = Pre-Korean            5 = Post-Korean            6 = Operation Desert Shield            7 = Vietnam ERA            8 = Post-Vietnam            9 = Other or None</p>	<p>Using the patient pointer (DFN), PERIOD OF SERVICE data is derived from the PERIOD OF SERVICE field (#.323) in the PATIENT file (#2). This field is a pointer to the PERIOD OF SERVICE file (#21). Using the period of service pointer, the data is derived from the CODE field (#.03) in the PERIOD OF SERVICE file (#21). This code is a single alphanumeric character.</p>
727.825, 60 PURPLE HEART INDICATOR	<p>Indicates whether or not the patient is a Purple Heart recipient</p> <p>Values:</p> <p>Y = Yes Purple Heart recipient            N = No not Purple Heart recipient</p>	<p>Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.</p>
727.825, 61 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator</p> <p>Y = Patient is an Observation Patient.            N = Patient is not an Observation Patient</p>	<p>OBSERVATION PATIENT INDICATOR is derived from other fields in this extract. If the TREATING SPECIALTY field (#24) contains values equal to 24, 65, 94, 18, 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.</p>

Field # and Name	Description	Technical Description																
727.825, 62 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the ECQ extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Visit Date and Stop Code value = first 3 characters in the DSS IDENTIFIER field (#727.825.40).</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.825, 63 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values: K = Korean DMZ V = Vietnam</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (#.3213) of the PATIENT file (#2)																
727.825, 64 ORDERING DIVISION	Currently Null	Currently Null																
727.825, 65 CONTRACT START DATE	Currently Null	Currently Null																
727.825, 66 CONTRACT END DATE	Currently Null	Currently Null																
727.825, 67 CONTRACT TYPE	Currently Null	Currently Null																
727.825, 68 CNH/SH STATUS	<p>Community Nursing Home/ State Home (CNH/SH) Indicator</p> <p>Values: Y = Yes N = No Null = Null</p>	Derived from the CNH CURRENT field (#148) of the PATIENT file (#2) using the Patient DFN																
727.825, 69 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Identifies the Division/facility in which the patient is located. Value is retrieved from the A&SP CLINIC VISIT file (#509850.6), DIVISION field (#60), which is a pointer to the INSTITUTION file (#4) and then it uses the RADDIV^ECXDEPT API to retrieve the STATION NUMBER field (#99) in the INSTITUTION file (#4).																

Field # and Name	Description	Technical Description
727.825, 70 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC - VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.
727.825,71 HEAD & NECK INDICATOR	<p>Identifies whether patient has head and/or neck cancer</p> <p>Y = Yes</p> <p>N = No</p>	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)
727.825, 72 ETHNICITY	<p>The patient's ethnicity code</p> <p>Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>D = Declined to Answer</li> <li>H = Hispanic or Latino</li> <li>N = Not Hispanic or Latino</li> <li>U = Unknown by Patient</li> </ul>	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2)
727.825, 73 RACE 1	<p>Self-reported by patient as recorded in VistA patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>3 = American Indian or Alaska Native</li> <li>8 = Asian</li> <li>9 = Black or African American</li> <li>A = Native Hawaiian or other Pacific Islander</li> <li>B = White</li> <li>C = Declined to answer</li> <li>D = Unknown by Patient</li> <li>Null</li> </ul>	Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION) will be include in the RACE 1 field. If any of the RACE INFORMATION values returned, are "C" (DECLINED TO ANSWER), that will be the only value included in the RACE1 field.

Field # and Name	Description	Technical Description
727.825, 74 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.825, 75 DSS IP #	Currently Null	Currently Null
727.825, 76 ENROLLMENT PRIORITY	This field contains the enrollment priority group and the enrollment priority subgroup  ENROLLMENT PRIORITY Groups determined for a patient enrollment include: 1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions. 2 = VA-rated service-connected disabilities 30% or 40% 3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151 4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled 5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs 6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11) 7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays 8 = Others  ENROLLMENT PRIORITY Subgroup for Priority 8. 8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and	Contains the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)

Field # and Name	Description	Technical Description
	<p>who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.825, 77 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U"
727.825, 78 PATIENT TYPE	<p>Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.</p> <p>Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare</p>	Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)
727.825, 79 CV STATUS ELIGIBILITY	<p>Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo)</p> <p>Values: Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV</p>	<p>Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece</p> <p>1 - qualifies as a CV 0 - does not qualify as a CV -1 - bad DFN or date</p>

Field # and Name	Description	Technical Description
727.825, 80 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2nd piece is the Combat Vet End Date.
727.825, 81 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 - vet was eligible on date specified (or DT) 0 - vet was not eligible on date specified (or DT).
727.825, 82 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes - Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROOT")
727.825, 83 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.825, 84 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: 'Y' = Yes 'N' = No Null	Using the PCE VISIT IEN field (#125) in the A&SP CLINIC VISIT file (#509850.6) a call shall be made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the agent orange indicator stored at the AGENT ORANGE EXPOSURE field (#80002) in the VISIT file (#9000010).
727.825, 85 ENCOUNTER SWAC	This field indicates whether treatment provided during this patient encounter is related to exposure to Southwest Asia conditions while serving in the Southwest Asia Theater of operations.  Values: 'Y' = Yes 'N' = No Null	Using the PCE VISIT IEN field (#125) in the A&SP CLINIC VISIT file (#509850.6) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Southwest Asia conditions indicator stored at the SW ASIA CONDITIONS field (#80004) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "PGE".

Field # and Name	Description	Technical Description
727.825, 86 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: 'Y' = Yes 'N' = No Null	Using the PCE VISIT IEN field (#125) in the A&SP CLINIC VISIT file (#509850.6) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the head/neck cancer data stored in the HEAD AND/OR NECK CANCER field (#80006) in the VISIT file (#9000010).
727.825, 87 ENCOUNTER MST	Indicates whether service provided during this patient encounter is related to military sexual trauma.  Values: 'Y' = Yes 'N' = No Null	Using the PCE VISIT IEN field (#125) in the A&SP CLINIC VISIT file (#509850.6) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the military sexual trauma stored at the MILITARY SEXUAL TRAUMA field (#80005) in the VISIT file (#9000010).
727.825, 88 RADIATION ENCOUNTER INDICATOR	This indicates whether service provided during this patient encounter is related to exposure to ionizing radiation.  Values: Y = Yes N = No Null	Using the PCE VISIT IEN field (#125) in the A&SP CLINIC VISIT file (#509850.6) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the ionizing radiation exposure indicator stored in the IONIZING RADIATION EXPOSURE field (#80003) in the VISIT file (#9000010).
727.825, 89 NUTRITION DIAGNOSIS	Currently Null	Currently Null
727.825, 90 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	Value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.825, 91 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Value of this field is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.825, 92 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.825, 93 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.825, 94 PROVIDER NPI	A standard, unique life-long identifier for individuals providing health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.825, 95 PROVIDER #2 NPI	A standard, unique life-long identifier for the second assisting provider of health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.825, 96 PROVIDER #3 NPI	A standard, unique life-long identifier for the third assisting provider of health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.825,97 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.825,98 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".
727.825,99 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>
727.825,100 PROVIDER #4	The fourth provider associated with the patient encounter. It represents an assisting Provider who performed the procedure associated with the A&SP Clinic Visit record.	A character string of format "2"_IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is pulled from the third (#2.7) SECONDARY PROVIDER multiple in the A&SP CLINIC VISIT file (#509850.6).
727.825,101 PROVIDER #4 PERSON CLASS	This is the VA code of the Person Class of the fourth assisting Provider as of the date of this record.	Derived by calling \$\$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) file. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW OERSON (#200) file.
727.825,102 PROVIDER #4 NPI	A standard unique life-long identifier of the fourth assisting provider of health care service.	The NPI is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.825,103 PROVIDER #5	The fifth provider associated with the patient encounter. It represents an assisting Provider who performed the procedure associated with the A&SP Clinic Visit record.	A character string of format "2"_IEN, where IEN is the internal entry number for the Provider in the NEW PERSON file (#200). Data is pulled from the third (#2.7) SECONDARY PROVIDER multiple in the A&SP CLINIC VISIT file (#509850.6).



Field # and Name	Description	Technical Description
727.825,104 PROVIDER #5 PERSON CLASS	This is the VA code of the Person Class of the fifth assisting Provider as of the date of this record.	Derived by calling \$\$PRVCLASS^ECXUTL(IEN,DATE), where IEN is the IEN of the NEW PERSON (#200) file. Copied from field VA CODE (#5) of the PERSON CLASS (#8932.1) file, as pointed to by the Person Class (#.01) field of the PERSON CLASS (#8932.1) multiple of the NEW PERSON (#200) file.
727.825,015 PROVIDER #5 NPI	A standard unique life-long identifier of the fifth assisting provider of health care service.	The NPI is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

## #727.814 – RADIOLOGY EXTRACT (RAD) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Radiology extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains a nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.814,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.814,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.814,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.814,3 FACILITY	Identifier for the station and division.	Derived from the HOSPITAL DIVISION field (#3) within the REGISTERED EXAMS multiple (#2) in the RADIOLOGY PATIENT file (#70) HOSPITAL DIVISION points to the RADIOLOGY DIVISION file (#79) which in turn points to the INSTITUTION file (#4)
727.814,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.814,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.814,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.
727.814,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to a 1, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number, the field is reset to a 3 indicating inpatient status.
727.814,8 DAY	Date on which the Radiology procedure was performed. Format: YYYYMMDD	RAD/NUC MED PATIENT file (#70) REGISTERED EXAMS sub-file (#70.02); EXAM DATE field (#.01)  The default date value is the value of the YEAR MONTH field (#1) concatenated with “01” for the day (DD) portion

Field # and Name	Description	Technical Description
727.814,9 CPT CODE & MODIFIERS	Five character CPT Code, the Quantity, (or how many times the unique code appears in the record), and up to 5 two character CPT modifiers.	Derived from the CPT CODE field (#9) in the RADIOLOGY PROCEDURES file (#71) for the procedure identified in the RADIOLOGY PROCEDURE field (#2) of the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) in the RADIOLOGY PATIENT file (#70). CPT CODE is a pointer to the CPT CODE field (#01) in the CPT file (#81).
727.814,10 PROCEDURE	The radiology procedure (CPT) associated with this case.	Derived from the RADIOLOGY PROCEDURE field (#2) within the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) of the RAD/NUC MED PATIENT file (#70). This field is a pointer to the RADIOLOGY PROCEDURES file (#71).
727.814,11 IMAGING LOCATION	The imaging location where this radiology exam was performed	Derived from the IMAGING LOCATION field (#4) within the REGISTERED EXAMS multiple (#2) of the RAD/NUC MED PATIENT file (#70). It is a pointer to the RADIOLOGY LOCATIONS file (#79.1).
727.814,12 LOCATION (WARD OR CLINIC)	The patient's ward or clinic location	Derived from the WARD field (#6) within the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) of the RADIOLOGY PATIENT file (#70). Using this WARD LOCATION file (#42) pointer, the data is derived from the HOSPITAL LOCATION FILE POINTER field (#44) in the WARD LOCATION file (#42), which is a pointer to the HOSPITAL LOCATION file (#44). If the patient is not assigned to a ward, data is derived from the PRINCIPAL CLINIC field (#8) within the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) of the RAD/NUC MED PATIENT file (#70). PRINCIPAL CLINIC is a pointer to the HOSPITAL LOCATION file (#44).
727.814,13 SERVICE	Indicates the name of the service treating the patient	Derived from the SERVICE field (#7) within the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) of the RAD/NUC MED PATIENT file (#70) SERVICE is a pointer to the HOSPITAL SERVICE file (#49)
727.814,14 DIAGNOSTIC CODE	Indicates the diagnostic code associated with this exam	Derived from the PRIMARY DIAGNOSTIC CODE field (#13) within the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) of the RADIOLOGY PATIENT file (#70) DIAGNOSTIC CODE is a pointer to the DIAGNOSTIC CODES file (#78.3)
727.814,15 REQUESTING PHYSICIAN	Indicates the person requesting this radiology exam.  This number is IEN preceded by "2".	Derived from the REQUESTING PHYSICIAN field (#14) within the EXAMINATIONS multiple (#50) of the REGISTERED EXAMS multiple (#2) of the RAD/NUC MED PATIENT file (#70). If REQUESTING PHYSICIAN is a pointer to the NEW PERSON file (#200), it is stored as "2"__pointer value. If REQUESTING PHYSICIAN is a pointer to the PROVIDER file (#6), it is stored as "6"__pointer value.

Field # and Name	Description	Technical Description
727.814,16 MODIFIERS	Indicates radiology modifiers associated with this exam	Derived from the MODIFIERS field (#.01) within the MODIFIERS multiple (#125) of the EXAMINATIONS multiple (#50) within the REGISTERED EXAMS multiple (#2) of the RAD/NUC MED PATIENT file (#70). This field consists of a string of pointers to the PROCEDURE MODIFIERS file (#71.2) separated by semi-colons (;).
727.814,17 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP(1), which is a pointer to the PATIENT MOVEMENT file (#405).
727.814,18 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.  NULL for outpatients.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.814,19 TIME	Time of day when this procedure was performed. Format: HHMMSS	Derived from the RAD/NUC MED PATIENT file (#70), REGISTERED EXAMS sub-file (#70.02), EXAM DATE field (#.01)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default.
727.814,20 IMAGING TYPE	Indicates the type of imaging used for this radiology exam.	Derived from the TYPE OF IMAGING field (#2) within the REGISTERED EXAMS multiple (#2) of the RADIOLOGY PATIENT file (#70). It is a pointer to the IMAGING TYPE file (#79.2).
727.814,21 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the EXAM DATE field (#.01) within the REGISTERED EXAMS multiple (#2) of the RADIOLOGY PATIENT file (#70) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to file (#404.51) is transmitted.
727.814,22 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the EXAM DATE field (#.01) within the REGISTERED EXAMS multiple (#2) of the RADIOLOGY PATIENT file (#70) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.814, 23 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from SE(\$GETICN^MPIF001(DFN), "V" )
727.814, 24 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.814, 25 PLACEHOLDER	Currently Null	Currently Null
727.814,26 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.814, 27 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. The field will hold the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.814, 28 ASSOCIATE PC PROVIDER (Associate Primary Care Provider)	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by "2".	Using the EXAM DATE field (#01) within the REGISTERED EXAMS multiple (#2) of the RADIOLOGY PATIENT file (#70) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTAP^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.814, 29 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Derived from the NEW PERSON file (#200), field (#5), file (#8932.1). Active Person Class is determined by \$\$GET^XUA4A72 (PERS,DATE), where PERS is the IEN from file (#200).
727.814, 30 PLACEHOLDER	Currently Null	Currently Null
727.814, 31 DOM, PR RTP AND SA RTP	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes
727.814, 32 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator  Y = Patient is an Observation Patient. N = Patient is not an Observation Patient	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.

Field # and Name	Description	Technical Description																
727.814, 33 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the RAD extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and the Stop Code value dependent on the value in the IMAGING TYPE field. If IMAGING TYPE = 2, then use Stop Code 109 (Nuclear Medicine) to build the encounter number. Otherwise use Stop Code = 105 to build the Encounter Number. (The Stop Code used in the Encounter Number is not necessarily related to the values reported in the RAD STOP CODE or ORDERING STOP CODE fields.)</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + “I” (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.814, 34 RAD STOP CODE	The stop code associated with the order.	The stop code is based on the IMAGING TYPE field (#20). Examples of stop codes shall include 149, 150 etc.																
727.814, 35 ORDERING DATE	Date exam was ordered.	Derived from date portion of the REQUEST ENTERED DATE/TIME field ( #16) of the RAD/NUC MED ORDERS file (#75.1)																
727.814, 36 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	The value is retrieved from RAD/NUC MED PATIENT file (#70) HOSPITAL DIVISION field (#3) which is a pointer to RAD/NUC MED DIVISION file (#79) which is a pointer to the INSTITUTION file (#4). The RADDIV^ECXDEPT DSS API retrieves the STATION NUMBER field (#99) in the INSTITUTION file (#4).																
727.814, 37 DSS IP #	Currently Null	Currently Null																

Field # and Name	Description	Technical Description
727.814, 38 ORDERING PROVIDER PERSON CLASS	The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	Value shall be based on the REQUESTING PHYSICIAN field (#13). Once this is located, then the New Person file (#200) points to the Person Class file (#8932.1) for person class.
727.814, 39 INTERPRETING RADIOLOGIST	The IEN of the person interpreting this radiology exam.	Contains the IEN of the NEW PERSON file (#200) entry and indicates the person interpreting this radiology exam. The IEN of the NEW PERSON file (#200)
727.814, 40 INTERPRETING RADIOLOGIST PC	The VA code of the Person Class of the interpreting radiologist as of the date of this extract record. (In DSS, this is called Provider Type).  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from NEW PERSON file (#200).
727.814, 41 CLINIC NAME	The specific clinic ordering the radiology exams. Value is an IEN, a number between 1 and 99999999.	Retrieved from the Hospital Location file (#44). The field value is a number between 1 and 99999999.
727.814, 42 CLINIC STOP CODE	The ordering stop code of the clinic that ordered the radiology exam.	Retrieved from the Hospital Location file (#44) field (#8) STOP CODE NUMBER and it is a pointer to the CLINIC STOP file (#40.7). The field must be 3 characters in length.
727.814, 43 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.814, 44 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.814, 45 INTERPRETING RADIOLOGIST NPI	A standard, unique life-long identifier of the radiologist who interpreted the radiology exam	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.814, 46 PRIMARY CARE PROVIDER NPI	A standard unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.814, 47 REQUESTING PHYSICIAN NPI	A standard, unique life-long identifier of the physician who requested the radiology exam	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.814,48 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>



## #727.811 – SURGERY EXTRACT (SUR) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Surgery extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.811,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.811,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.811,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.811,3 FACILITY	Identifier for the station and division.	If there is data in the DIVISION field (#50) of the SURGERY file (#130) for the extract record, this is a pointer to the INSTITUTION file (#4).  Otherwise, using the NAME field (#.01) pointer from the DSS EXTRACTS file (#728), FACILITY is derived from the STATION NUMBER field (#99) for that pointer number in the INSTITUTION file (#4).
727.811,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.811,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.811,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.
727.811,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an “O”, indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to “I” if an inpatient status is found based on these calls.

Field # and Name	Description	Technical Description
727.811,8 DAY	Date on which the procedure associated with this Surgery case was performed. Format: YYYYMMDD	Derived from the SURGERY file (#130) DATE OF OPERATION field (#.09)  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with “01” for the day (DD) portion.
727.811,9 CASE NUMBER	Unique number for surgical case.  Value is a pointer.	The internal entry number (IEN) of the entry from the SURGERY file (#130) for this extract record
727.811,10 SURGICAL SPECIALTY	Surgical specialty credited for doing this operative procedure.  Values: 048 = Cardiac Surgery 049 = Transplantation 050 = General (OR when not defined below) 051 = Gynecology 052 = Neurosurgery 053 = Ophthalmology 054 = Orthopedics 055 = Otorhinolaryngology (ENT) 056 = Plastic Surgery (Includes Head and Neck) 057 = Proctology 058 = Thoracic Surgery (Inc. Cardiac Surg.) 059 = Urology 060 = Oral Surgery (Dental) 061 = Podiatry 062 = Peripheral Vascular 078 = Anesthesiology	Derived from the NATIONAL SURGICAL SPECIALTY field (#1) in the LOCAL SURGICAL SPECIALTY file (#137.45) for the pointer value found in the SURGERY SPECIALTY field (#.04) of the SURGERY file (#130). SURGICAL SPECIALTY is the three-digit CODE field (#.01) from the SURGICAL SPECIALTY file (#45.3). If no surgical specialty is found, this field is sent as 999.
727.811,11 OR ROOM NUMBER	Indicates the OR Room used for the case.  Value is a pointer.	Derived from the OPERATING ROOM field (#.02) in the SURGERY file (#130). Field #.02 points to the OPERATING ROOM file (#131.7), which in turn is a pointer to the HOSPITAL LOCATION file (#44). The character string stored in this field represents an IEN in file (#44).
727.811,12 SURGEON	Person who performed the surgery. Format: IEN preceded by 2.	Derived from the SURGEON field (#.14) in the SURGERY file (#130) for the surgical case. If the case is a non-OR surgical procedure, the PROVIDER field (#123) from the SURGERY file (#130) is used. In either occurrence, it is a pointer to the NEW PERSON file (#200).
727.811,13 ATTENDING SURGEON	Person who oversaw and/or signed off on this surgery. (May be Null if same as Surgeon.) Format: IEN preceded by 2.	Derived from the ATTEND SURG field (#.164) in the SURGERY file (#130) for the surgical case. If the case is a non-OR surgical procedure, the ATTEND PROVIDER field (#124) from the SURGERY file (#130) is used. In either occurrence, it is a pointer to the NEW PERSON file (#200).
727.811,14 ANESTHESIA SUPERVISOR	Person who oversaw and/or signed off on the anesthesia for this case. (May be Null if same as Principle Anesthetist.) Format: IEN preceded by 2.	Derived from the ANESTHESIOLOGIST SUPVR field (#.34) in the SURGERY file (#130) for the surgical case. This field is a pointer to the NEW PERSON file (#200).

Field # and Name	Description	Technical Description
727.811,15 ANESTHESIA TECHNIQUE	Code corresponding to the type of anesthesia technique used during this case.  Values: S = Spinal E = Epidural O = Other G = General M = Monitored Anesthesia Care L = Local	Derived from the ANESTHESIA TECHNIQUE field (#.01) within the ANESTHESIA TECHNIQUE multiple (#.37) of the SURGERY file (#130). This anesthesia technique is the principal technique.
727.811,16 PRIMARY/ SECONDARY/ PROSTHETICS	Indicator for extract record type.  Values: P = Primary Procedure S = Secondary Procedure I = Implant	Principal procedure indicator is derived from SURGERY File (#130), PRINCIPAL PROCEDURE field (#26). Secondary procedure indicator is derived from SURGERY File (#130), sub-file (#130.16), OTHER PROCEDURE field (#.01). Prosthetics (implant) indicator is derived from SURGERY File (#130), Prosthesis Installed sub-file (#130.01), PROSTHESIS ITEM field (#.01).
727.811,17 CPT	Currently Null	Currently Null
727.811,18 PLACEHOLDER1	Currently Null	Currently Null
727.811,19 PATIENT TIME	The time, in 15-minute increments, the patient was in the OR. Divided by two if concurrent surgery.	Derived from the TIME PAT OUT OR field (#.232) minus the TIME PAT IN OR field (#.205) in the SURGERY file (#130)
727.811,20 OPERATION TIME	The time, in 15-minute increments, of the principal operative procedure.	Derived from the TIME OPERATION ENDS field (#.23) minus the TIME OPERATION BEGAN field (#.22) in the SURGERY file (#130) for the surgical case. If the case is a non-OR surgical procedure, OPERATION TIME is derived from the TIME PROCEDURE ENDED field (#122) minus the TIME PROCEDURE BEGAN field (#121) in the SURGERY file (#130).
727.811,21 ANESTHESIA TIME	The time, in 15-minute increments, of the anesthesia care administered. Divide by two if concurrent surgery	Derived from the ANES CARE END TIME field (#.24) minus the ANES CARE START TIME field (#.21) in the SURGERY file (#130)
727.811,22 PROSTHESIS	Describes which locally defined implant (if any) was used.  Value is a pointer.	Derived from the PROSTHESIS ITEM field (#.01) within the PROSTHESIS INSTALLED multiple (#.47) in the SURGERY file (#130). PROSTHESIS ITEM is a pointer to the PROSTHESIS file (#131.9). The character string in this field represents an IEN in the PROSTHESIS file (#130.9).
727.811,23 QUANTITY	Currently Null See New Quantity field	Currently Null
727.811,24 PLACEHOLDER2	Currently Null	Currently Null
727.811,25 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP(1), which is a pointer to the PATIENT MOVEMENT file (#405).

Field # and Name	Description	Technical Description
727.811,26 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.  NULL for outpatients.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). That pointer value is stored here as a character string; this field represents and IEN in file (# 42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.
727.811,27 CANCELLED	Indicates if the surgery was cancelled or aborted.  Values: C = Cancelled	Determined by:  If the CANCEL DATE field (#17) of the SURGERY File (#130) and the NON OR DSS IDENTIFIER field (#31) of the DSS SURGERY EXTRACT file (#727.811) are both populated, then the value for this field is "A".  If the CANCEL DATE field (#17) of the SURGERY File (#130) and the TIME PAT IN OR field (#.205) of the SURGERY File (#130) are both populated, then the value for this field is "A".  If the CANCEL DATE field (#17) of the SURGERY File (#130) is populated, and neither the NON OR DSS IDENTIFIER field (#31) of the DSS SURGERY EXTRACT file (#727.811) nor TIME PAT IN OR field (#.205) of the SURGERY File (#130) is populated, then the value for this field is "C".
727.811,28 TIME	Time when the patient entered the OR. Format: HHMMSS	Derived from the SURGERY file (#130); TIME PAT IN OR field (#.205)  The character string always consists of exactly 6 numerics. The field default is "000300".
727.811,29 OR TYPE	Type of Operating Room used for this surgery case.  Values: 1 = General Purpose 2 = Orthopedic 3 = Cardiac 4 = Neurosurgery 5 = Cardiac/Neuro 6 = Ambulatory 7 = Intensive Care Unit 8 = Endoscopy Room 9 = Cystoscopy Room 10 = Ward 11 = Clinic 12 = Dedicated Room 13 = Other Location	For the OPERATING ROOM field (#.02) identified in the SURGERY file (#130), OR TYPE is derived from the TYPE field (#9) in the OPERATING ROOM file (#131.7). It is a pointer to the OPERATING ROOM TYPE file (#134), which is a national standard operating room types list. That pointer value is stored here as a character string. This field represents an IEN in file 134.

Field # and Name	Description	Technical Description
727.811,30 ATTENDING'S SERVICE	Service of the Surgeon.  Value is a pointer.	An IEN in the NATIONAL SERVICE file (#730). It is derived from the SERVICE/SECTION field (#29) in the NEW PERSON file (#200) for the ATTENDING SURGEON field (#13) in the SURGERY EXTRACT file (#727.811), which is a pointer to the SERVICE/SECTION file (#49). The pointer value found in the NATIONAL SERVICE field (#730) of the SERVICE/SECTION file (#49) points to the NATIONAL SERVICE file (#730). The pointer value to file (#730) is stored in this field as a character string. The character string in this field represents an IEN in the NATIONAL SERVICE file (#730).
727.811,31 NON-OR DSS IDENTIFIER	Identifies the non-OR location for this procedure if the non-OR portion of the Surgery Package is used.	For a non-OR procedure, the NON-OR LOCATION field (#119) in the SURGERY file (#130) points to the HOSPITAL LOCATION file (#44). The pointer is used to examine the DSS UNIT IDENTIFIER field (#8) in the CLINIC AND STOP CODES file (#728.44), to determine if this clinic is used for non-OR surgical procedures.
727.811,32 RECOVERY ROOM (PACU) TIME	Time, in 15-minute increments that the patient spent in the post anesthesia care unit.	Derived from the PAC(U) DISCH TIME field (#1.18) minus the ADMIT PAC(U) TIME field (#1.17) in the SURGERY file (#130).
727.811,33 PLACEHOLDER3	Currently Null	Currently Null
727.811,34 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the DATE OF OPERATION field (.09) from the SURGERY file (#130) and the patient pointer (DFN) stored in the PATIENT NO. – DFN field (4) in the SURGERY EXTRACT file (#727.811), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to TEAM File (# 404.51) is transmitted.
727.811,35 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by "2".	Using the DATE OF OPERATION field (#.09) from the SURGERY file (#130) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.811,36 ADMISSION DATE	This 8-character numeric string represents the date on which the patient's admission occurred. Format is YYYYMMDD.	Source: Field (#.01) MOVEMENT file (#405)  If the patient on whom the surgical procedure was performed was an inpatient on the procedure date, then a call to IN5^VADPT returns the Admission Date in VAIP(13,1)
727.811, 37 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), "V" )
727.811, 38 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.811, 39 PLACEHOLDER	Currently Null	Currently Null
727.811, 40 PLACEHOLDER	Currently Null	Currently Null
727.811, 41 PLACEHOLDER	Currently Null	Currently Null
727.811,42 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.811, 43 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V and then pad zeros to the left of the numerals, if needed, to get exactly 7 characters.	The Kernel function of GET^XUA4A72 returns the date specific Person Class data for a given provider. The field holds the VA Code associated with the active Person Class of the patient's Primary Care Provider as of the date of this extract record.
727.811, 44 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by "2".	Using the DATE OF OPERATION field (#.09) from the SURGERY file (#130) and the patient pointer (DFN), a call is made to the Scheduling API, OUTPTAP^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.811, 45 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format is V999999. Start with a V followed by 6 digits. Pad with zeros to the left of the digits if needed to get exactly 7 characters.	Derived from the NEW PERSON file (#200), Field (#5); file (#8932.1) Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file (#200).
727.811, 46 PLACEHOLDER	Currently Null	Currently Null
727.811, 47 CPT CODE QUANTITY MODIFIERS	5- character CPT Code, the Quantity (or how many times the unique code appears in the record), and up to up to 5 two character CPT modifiers.	For the principal procedure, CPT Code is derived from the PRINCIPAL PROCEDURE CODE field(#27) in the SURGERY file (#130).  If the extract record is for a secondary procedure, CPT Code is derived from the OTHER PROCEDURE CPT CODE field (#3) within the OTHER PROCEDURES multiple (#.42) in the SURGERY file (#130).
727.811, 48 DOM, PR RTP AND SA RTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SARRTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SARRTP CODE field in file (#727.831) which holds a set of codes
727.811, 49 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the Enrollment STATUS found in this extract

Field # and Name	Description	Technical Description
727.811, 50 ENROLLMENT STATUS	Patient's enrollment status  1 = Unverified 2 = Verified 3 = Inactive 4 = Rejected 5 = Suspended 6 = Deceased 7 = Cancelled/Declined 8 = Expired 9 = Pending 10 = Not Eligible 11 = Rejected; Fiscal Year 12 = Rejected; Mid-cycle 13 = Rejected; Stop New Enrollments 14 = Rejected; Initial Application by VAMC 15 = Pending; No Eligibility Code in VIVA 16 = Pending; Means Test Required 17 = Pending; Eligibility Status is Unverified 18 = Pending; Other 19 = Not Eligible; Refused to pay co pay 20 = Not Eligible; Ineligible Date 21 = Pending; Purple Heart Unconfirmed 22 = Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11) ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.811, 51 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.811, 52 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values:</p> <p>A = Army-Active Duty            B = Navy, Marine-Active Duty            C = Air Force-Active Duty            D = Coast Guard- Active Duty            E = Retired, Uniformed Services            F = Medical Remedial Enlist            G = Merchant Seaman-USPHS            H = Other USPHS Beneficiaries            I = Observation/Examination            J = Office of Workers Comp            K = Job Corps/Peace Corps            L = Railroad Retirement            M = Beneficiaries –Foreign Government            N = Humanitarian (Non-Vet)            O = Champus Restore            P = Other Reimbursement. (Non-Vet)            Q = Other Federal Dependant            R = Donors (Non-Vet)            S = Special Studies (Non-Vet)            T = Other Non-Veteran            U = ChampVA-Spouse, Child            V = Champus            W = Czechoslovakia/Poland Svc            X = Persian Gulf War            Y = CAV/NPS            Z = Merchant Marine            0 = Korean            1 = World War I            2 = World War II            3 = Spanish American            4 = Pre-Korean            5 = Post-Korean            6 = Operation Desert Shield            7 = Vietnam ERA            8 = Post-Vietnam            9 = Other or None</p>	Derived from the Period of Service field (#.323) in the Patient file (#2)
727.811, 53 PURPLE HEART INDICATOR	<p>Indicates whether or not the patient is a Purple Heart recipient</p> <p>Values:</p> <p>Y = Yes Purple Heart recipient            N = No not Purple Heart recipient            U = Unknown</p>	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.
727.811, 54 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator</p> <p>Y= Patient is an Observation Patient            N = Patient is not an Observation Patient</p>	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO'.



Field # and Name	Description	Technical Description																
727.811, 55 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the SUR extract encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and the Stop Code value: For the SUR Extract the Stop Code will be the value of ASSOCIATED CLINIC field (#.021) of the SURGERY file (#130).if populated, else Stop Code field (#82) if populated, else if the SURGICAL SPECIALTY field #8 is 59 indicating Urology, set Stop Code = '430', else set Stop Code = '429'.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.811, 56 AGENT ORANGE LOCATION	<p>Indicates the location where the patient was exposed to Agent Orange.</p> <p>Values: K = Korean DMZ V = Vietnam</p>	Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (.3213) of the PATIENT FILE (#2)																
727.811, 57 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Data comes from the DIVISION field (#50) of the SURGERY file (#130) which is a pointer to the INSTITUTION field (#4). This value is then used to call the API RADDIV^ECDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).																
727.811, 58 HEAD & NECK CANCER INDICATOR	<p>Identifies whether patient has head and/or neck cancer Y = Yes N = No</p>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11).</p> <p>HEAD &amp; NECK CANCER INDICATOR is derived from PTF file (#45), TREATMENT FOR HEAD/NECK CANCER field (#.30).</p>																

Field # and Name	Description	Technical Description
727.811, 59 ETHNICITY	<p>The patient's ethnicity code</p> <p>Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.</p> <p>Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient</p>	<p>Using the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2).</p> <p>The above occurs only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.</p>
727.811, 60 RACE 1	<p>Self-reported by patient as recorded in VistA patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. . See also RACE field.</p> <p>Values: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient Null</p>	<p>Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), will be include in the RACE 1 field. If any of the RACE INFORMATION values returned, are "C" (DECLINED TO ANSWER), that will be the only value included in the RACE1 field.</p>
727.811,61 NEW QUANTITY	<p>Quantity of the prosthetic device(s) used for the operative procedure(s). Numbers are between 1 and 99999).</p>	<p>Derived from the QUANTITY field (#7) within the PROSTHESIS INSTALLED multiple (#.47) in the SURGERY file (#130) for the PROSTHESIS ITEM referred to in the PROSTHESIS field (#22) of this file</p>
727.811,62 DSS IP #	Currently Null	Currently Null
727.811,63 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include: 1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions. 2 = VA-rated service-connected disabilities 30% or 40% 3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151 4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled 5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs</p>	<p>Contains the enrollment priority group and the enrollment priority subgroup from the PATIENT ENROLLMENT file (#27.11)</p>

Field # and Name	Description	Technical Description
	<p>6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible for enhanced benefits through 1/27/11)</p> <p>7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays</p> <p>8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.</p> <p>8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.</p> <p>8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status</p> <p>8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.</p> <p>8e = Not eligible for enrollment Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.</p> <p>8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.811,64 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values: U = Yes Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	<p>Determined by the use of an API: I \$\$UESTAT^EASUER(DFN) S ECXEUESTA="U"</p>

Field # and Name	Description	Technical Description
727.811,65 PATIENT TYPE	Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.  Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare	Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)
727.811,66 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 – qualifies as a CV 0 – does not qualify as a CV -1 – bad DFN or date
727.811,67 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2 <sup>nd</sup> piece is the Combat Vet End Date.
727.811,68 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN, DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 – vet was eligible on date specified (or DT) 0 – vet was not eligible on date specified (or DT).
727.811,69 ROOM CLEANING TIME	The time (converted to 15-minute increments) required to clean the room. Divide by 2 if concurrent surgery.	This is derived from the Room Cleaning Time associated with the case for which the record is being created; in the OR CLEAN UP TIME field. If the value in OR CLEAN UP TIME = 0 or Null, place "2" (2 15-minute increments) in the new extract field

Field # and Name	Description	Technical Description
727.811,70 HOLDING AREA TIME	HOLDING AREA TIME field shall contain the time (in 15-minute increments) that the patient spent in the holding area. Divide by 2 if concurrent surgery.	This is derived by subtracting the TIME PT IN HOLD AREA from TIME PT IN OR and converting the result into the number of 15-minute increments. If the TIME PT IN HOLD AREA = 0 or Null, fill the extract field with a Null.
727.811,71 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes – Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). It is retrieved via an API \$\$GETACT^DGPFAPI(DFN,"TARGET_ROOT").
727.811,72 PRINCIPAL ANESTHETIST	The principal anesthesiologist or Certified Registered Nurse Anesthetist (CRNA) (or surgeon, if local anesthesia).	This field is extracted from field (#31) PRINCIPAL ANESTHETIST located in the Surgery file (#130). Field value is preceded by a '2'.
727.811,73 SURGEON PERSON CLASS	SURGEON PERSON CLASS is seven characters in length and contains the VA code associated with the active person class of the Surgeon. Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200).
727.811,74 ATTENDING SURGEON PC	ATTENDING SURGEON PC is seven characters in length and contains the VA code associated with the active person class of the Attending Surgeon. Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200)
727.811,75 ANESTHESIA SUPERVISOR PC	ANESTHESIA SUPERVISOR PC is seven characters in length and contains the VA code associated with the active person class of the Anesthesia Supervisor. Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200)
727.811,76 PRINCIPAL ANESTHETIST PC	PRINCIPLE ANESTHETIST PC is seven characters in length and contains the VA code associated with the active person class of the Principle Anesthetist. Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.	The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from NEW PERSON file (#200).
727.811,77 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)

Field # and Name	Description	Technical Description
727.811,78 AGENT ORANGE ENC INDICATOR	Indicates whether service provided during this patient encounter is related to exposure to Agent Orange.  Values: Y = Yes N = No Null	Using the VISIT field (#.015) in the SURGERY file (#130) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the agent orange indicator stored in the AGENT ORANGE EXPOSURE field (#80002) in the VISIT file (#9000010).
727.811,79 ENC HEAD/NECK CA	Indicates whether service provided during this patient encounter is related to head and/or neck cancer.  Values: Y = Yes N = No Null	Using the VISIT field (#.015) in the SURGERY file (#130), a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the head/neck cancer data stored in the HEAD AND/OR NECK CANCER field (#80006) in the VISIT file (#9000010).
727.811, 80 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field.  Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.811, 81 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Value is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.811, 82 CLINIC POINTER	The IEN to Hospital Location file (#44) identifies clinic associated with Surgery Specialty (field #.04 in Surgery file #130) for this case. Information can be used to confirm Stop Code. Up to 6 digits.	* If a case is for Non-OR portion of the Surgery package, the value for the CLINIC POINTER is retrieved from the ASSOCIATED CLINIC field (#.021) located in the SURGERY file (#130). If that value in the ASSOCIATED CLINIC is NULL, then the value is obtained from the NON-OR LOCATION field (#119) which is a pointer to the HOSPITAL LOCATION file (#44) located in the SURGERY file (#130).  * If a case is not for Non-OR portion of the Surgery package, the value for the CLINIC POINTER is retrieved from the SURGICAL SPECIALTY field (#.04) located in the SURGERY file (#130) which is a pointer to the LOCAL SURGICAL SPECIALTY file (#137.45) for the ASSOCIATED CLINIC field (#2).
727.811, 83 CREDIT STOP	Identifies the Credit Stop Code of the clinic associated with the Surgery Specialty for this case.	The clinic associated with the Surgery Specialty is a pointer to the HOSPITAL LOCATION File (#44). CREDIT STOP is field (#2503) in the HOSPITAL LOCATION File (#44). Follow pointer to clinic entry in Clinic Stop File (#40.7) to obtain three-character code.

Field # and Name	Description	Technical Description
727.811, 84 STOP CODE	Identifies the Primary Stop Code of the clinic associated with the Surgery Specialty for this case.	The clinic associated with the Surgery Specialty is a pointer to the HOSPITAL LOCATION file (#44). STOP CODE is field (#8) in the HOSPITAL LOCATION file (#44).
727.811, 85 PRIC POSTOP DIAGNOSIS CODE	The POST-OP diagnosis for the Principal Procedure	The value for this field is retrieved from the PRIN POSTOP DIAGNOSIS CODE field (#03) which is a pointer to the ICD DIAGNOSIS file (#80) located in the SURGERY PROCEDURE/DIAGNOSIS CODES file (#136)
727.811, 86 OTHER POSTOP DIAGNOSIS CODE #1	The first associated diagnosis for the Principal Procedure.	The value for this field is retrieved from the OTHER POSTOP DIAGNOSIS CODES field (#4) which is a pointer to Multiple (#136.04). The OTHER POSTOP DIAGNOSIS CODE field (#01) located on MULTIPLE (#136.04) points to the ICD Diagnosis File (#80).
727.811, 87 OTHER POSTOP DIAGNOSIS CODE #2	The second associated diagnosis for the Principal Procedure.	The value for this field is retrieved from the OTHER POSTOP DIAGNOSIS CODES field (#4) which is a pointer to Multiple (#136.04). The OTHER POSTOP DIAGNOSIS CODE field (#01) located on MULTIPLE (#136.04) points to the ICD Diagnosis File (#80).
727.811, 88 OTHER POSTOP DIAGNOSIS CODE #3	The third associated diagnosis for the Principal Procedure.	The value for this field is retrieved from the OTHER POSTOP DIAGNOSIS CODES field (#4) which is a pointer to Multiple (#136.04). The OTHER POSTOP DIAGNOSIS CODE field (#01) located on MULTIPLE (#136.04) points to the ICD Diagnosis File (#80).
727.811, 89 OTHER POSTOP DIAGNOSIS CODE #4	The fourth associated diagnosis for the Principal Procedure.	The value for this field is retrieved from the OTHER POSTOP DIAGNOSIS CODES field (#4) which is a pointer to Multiple (#136.04). The OTHER POSTOP DIAGNOSIS CODE field (#01) located on MULTIPLE (#136.04) points to the ICD Diagnosis File (#80).
727.811, 90 OTHER POSTOP DIAGNOSIS CODE #5	The fifth associated diagnosis for the Principal Procedure.	The value for this field is retrieved from the OTHER POSTOP DIAGNOSIS CODES field (#4) which is a pointer to Multiple (#136.04). The OTHER POSTOP DIAGNOSIS CODE field (#01) located on MULTIPLE (#136.04) points to the ICD Diagnosis File (#80).
727.811, 91 ANESTHESIA SUPERVISOR NPI	A standard, unique life-long identifier of the person who oversaw and/or signed off on the anesthesia for the surgical procedure	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.811, 92 ASSOCIATE PC PROVIDER NPI	A standard unique life-long identifier of the associate primary care provider.	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.811, 93 ATTENDING SURGEON NPI	A standard, unique life-long identifier of the person who oversaw and/or signed off on the surgical procedure	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.811, 94 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.811, 95 PRINCIPAL ANESTHETIST NPI	A standard, unique life-long identifier of the principal anesthesiologist or Certified Registered Nurse Anesthetist (CRNA) who provided anesthesia for the surgical procedure	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.811, 96 SURGEON NPI	A standard, unique life-long identifier of the person who performed the surgical procedure	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI

Field # and Name	Description	Technical Description
727.811,97 ENCOUNTER SWAC	Indicates if treatment provided during this patient encounter is related to exposure to Southwest Asia conditions while serving in the Southwest Asia Theater of operations. Values: Y = YES N = NO	Using the pointer to the VISIT file (#90000.10) a call to the PCE API ENCEVENT^PXAPI is made. This call returns visit data, including the SW ASIA CONDITIONS field (#80004) in the VISIT file (#9000010).
727.811,98 ENCOUNTER IONIZING RAD	Indicates if treatment provided during this patient encounter is related to exposure to ionizing radiation. Values: Y = YES N = NO	Using the Surgery VISIT field (#.015) in the SURGERY file (#130) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns visit data, including the IONIZING RADIATION EXPOSURE field (#80003) in the VISIT file (#9000010).
727.811,99 ENCOUNTER MST	Indicates if treatment provided during this patient encounter is related to Military Sexual Trauma. Values: Y = YES N = NO	Using a pointer to the VISIT file (#9000010) a call to the PCE API, ENCEVENT^PXAPI, is made. This call returns visit data, including the MST ENCOUNTER INDICATOR field (#80005) in the VISIT file (#9000010).
727.811,100 ENCOUNTER SC	Indicates if treatment provided during this patient encounter is Service Connected. Values: Y = YES N = NO	Using a pointer to the VISIT file (#9000010) a call to the PCE API, ENCEVENT^PXAPI, is made. This call returns visit data, including the SERVICE CONNECTED field (#80001) in the VISIT file (#9000010).
727.811,101 AGENT ORANGE STATUS	Indicates if patient was exposed to Agent Orange. Values: Y = YES N = NO U = UNKNOWN	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.811,102 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia conditions. Values: Y = YES N = NO U = UNKNOWN	This field is derived from the SOUTHWEST ASIA CONDITIONS? Field (#.322013) in the Patient file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT which is called by PAT^ECXUTL3. The field will have a NULL value if the Patient file (#2) record does not indicate a status.
727.811,103 RADIATION STATUS	Indicates if patient claims exposure to ionizing radiation. Values: Y = YES N = NO	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.811,104 MST STATUS	Indicates if patient claims Military Sexual Trauma Values: Y = SCREENED, REPORTS MST N = SCREENED, DOES NOT REPORT MST D = SCREENED, DECLINES TO ANSWER U = UNKNOWN	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The MST status is stored in the MST STATUS field (#3). A call is made to \$\$GETSTAT^DGMSTAPI(DFN,DGDATE) using the patient DFN and the date in the DAY field.
727.811,105 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (4) in the ADMISSION EXTRACT file (#727.802), Shipboard Hazard and Defense data is derived from using DBIA #4462 GETSHAD^DGUTL3(DFN).



Field # and Name	Description	Technical Description
727.811,106 ENCOUNTER SHAD	Indicates if treatment provided during this patient encounter is related to exposure PROJ 112/SHAD condition. Values: Y=YES, N=NO	Using the VISIT FILE ENTRY field (#.27) in the PATIENT MOVEMENT file (#405) a call is made to API VISIT^ECXSCX1 which in turn calls ENCEVENT^PXAPI. The ENCEVENT^PXAPI returns the Shipboard Hazard and Defense conditions indicator stored at the PROJ 112/SHAD field (#80008) in the VISIT file (#9000010). The value will be stored in the output array subscripted by "SHAD".
727.811,107 FIRST ASST	This is the name of the person assisting the surgeon during the operative procedure.	Derived from the FIRST ASST field (.15) in the SURGERY file (#130) for the surgical case. It is a pointer to the NEW PERSON file (#200). The data is stored as "2" _pointer value.
727.811,108 FIRST ASST PERSON CLASS	The VA Code of the Person Class of the First Asst associated with this record. The VA Code is always of the form "V" _six numeric digits; exactly 7.	Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file #200.
727.811,109 FIRST ASST NPI	A standard unique life-long identifier of the First Assistant. This field has a length of 15 characters.	A standard unique life-long identifier of the First Assistant. This field has a length of 15 characters. The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.811,110 SECOND ASST	This is the name of the second person assisting the surgeon during the operative procedure.	Derived from the SECOND ASST field (.16) in the SURGERY file (#130) for the surgical case. It is a pointer to the NEW PERSON file (#200). The data is stored as "2" _pointer value.
727.811,111 SECOND ASST PC	The VA Code of the Person Class of the Second Asst associated with this record. The VA Code is always of the form "V" _six numeric digits; exactly 7.	Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file #200.
727.811,112 SECOND ASST NPI	A standard unique life-long identifier of the Second Assistant. This field has a length of 15 characters.	A standard unique life-long identifier of the Second Assistant. This field has a length of 15 characters. The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.811,113 PERFUSIONIST	This is the name of the person operating the cardio-pulmonary or organ perfusion apparatus.	Derived from the PERFUSIONIST field (.167) in the SURGERY file (#130) for the surgical case. It is a pointer to the NEW PERSON file (#200). The data is stored as "2" _pointer value.
727.811,114 PERFUSIONIST PC	The VA Code of the Person Class of the Perfusionist associated with this record. The VA Code is always of the form "V" _six numeric digits; exactly 7.	Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file #200.
727.811,115 PERFUSIONIST NPI	A standard unique life-long identifier of the Perfusionist. This field has a length of 15 characters.	A standard unique life-long identifier of the Perfusionist. This field has a length of 15 characters. The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.
727.811,116 ASST PERFUSIONIST	This is the name of the person assisting the perfusionist. If applicable, this information may be valuable in documentation of this case.	Derived from the ASST PERFUSIONIST field (.168) in the SURGERY file (#130) for the surgical case. It is a pointer to the NEW PERSON file (#200). The data is stored as "2" _pointer value.
727.811,117 ASST PERFUSIONIST PC	The VA Code of the Person Class of the Asst Perfusionist associated with this record. The VA Code is always of the form "V" _six numeric digits; exactly 7.	Active Person Class is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from file #200.
727.811,118 ASST PERFUSIONIST NPI	A standard unique life-long identifier of the Asst Perfusionist. This field has a length of 15 characters.	A standard unique life-long identifier of the Asst Perfusionist. This field has a length of 15 characters. The qualified identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI.

Field # and Name	Description	Technical Description
727.811,119 ANESTHESIA SEVERITY ASSESSMENT (ASA)	<p>NSQIP Definition (2004): Record the American Society of Anesthesiology (ASA) Physical Status Classification of the patient's present physical condition on a scale from 1-6 as it appears on the anesthesia record. Most likely there will be a 2nd assessment of the ASA class prior to anesthesia induction. If this is available, report this most recent assessment. The definitions are:</p> <p>ASA 1 - A normal healthy patient            ASA 2 - A patient with mild systemic disease            ASA 3 - A patient with severe systemic disease            ASA 4 - A patient with severe systemic disease that is a constant threat to life            ASA 5 - A moribund patient who is not expected to survive without the operation            ASA 6 - A declared brain-dead patient whose organs are being removed for donor purposes            ASA 6 cases should be excluded.</p> <p>Classification numbers followed by an 'E' indicate an emergency.</p>	Derived from the ASA CLASS field (1.13) in the SURGERY file (#130) for the surgical case.
727.811,120 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:            AD = Active Duty            ADD = Active Duty Dependent            FNRS = Former Non-Remarried Spouse            RET = Retiree            RETD = Retiree Dependent            RES = Reservist            REC = Recruit            TDRL = Temporary Disability            TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>
727.811,121 DATE OF BIRTH	The patient's date of birth represented by an 8 character numeric string.	The data is derived by using the Patient No. – DFN (#4) field of this file to retrieve the DATE OF BIRTH (#.03) field from the PATIENT (#2) file. If Date of Birth cannot be determined, then January 1, 1942, is used as default.

## #727.817- TREATING SPECIALTY CHANGE EXTRACT (TRT) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the MAS Treating Specialty Change extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the “AC” cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.817,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.817,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.817,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.817,3 FACILITY	Currently Null	Currently Null
727.817,4 PATIENT NO. – DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.817,5 SSN	The patient’s social security number (Pseudo SSNs are indicated by a trailing ‘P’ or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.817,6 NAME	The first four characters of the patient’s last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first “,” piece are used, padded with trailing spaces if necessary.
727.817,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an “O”, indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to “I” if an inpatient status is found based on these calls.
727.817,8 DAY	Date on which the Treating Specialty change took place. Format: YYYYMMDD	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with “01” for the day (DD) portion. .

Field # and Name	Description	Technical Description
727.817,9 PRODUCT	Currently Null	Currently Null
727.817,10 ADMISSION DATE	This 8-character numeric string represents the date on which the patient's admission occurred. Format is YYYYMMDD.	Derived from the PATIENT MOVEMENT file (#405); ADMISSION/CHECK-IN MOVEMENT field (#.14) PATIENT MOVEMENT FILE (#405); DATE/TIME (#.01)  This field is always exactly 8 numeric characters in length. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.817,11 DISCHARGE DATE	Patient's discharge date	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)  This field is always exactly 8 numeric characters in length. If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.817,12 MOVEMENT FILE #	A number used as an index into patient movement file.	The ^DGPM("ATT3" or "ATT6",DATE,D0) cross-reference is used to obtain the current movement number associated with this patient. It is a pointer to the PATIENT MOVEMENT file (#405).
727.817,13 TYPE	The type of movement for this patient  Value: 6 = Specialty Change	Using the "ATT" _TYPE cross-reference where TYPE=6 (specialty change)
727.817,14 NEW TREATING SPECIALTY	The treating specialty code for this patient at the time and date of this record.	Internal entry number of SPECIALTY file (#42.4) derived from SPECIALTY field (#1) of FACILITY TREATING SPECIALTY file (#45.7) record pointed to by FACILITY TREATING SPECIALTY field (#.09) of PATIENT MOVEMENT file (#405) record. The movement record is the current treating specialty movement.
727.817,15 LOSING TREATING SPECIALTY	The patient's treating specialty code from prior Treating Specialty Record.	Using the "ATT3" or "ATT6" cross reference on the PATIENT MOVEMENT file (#405) and the patient pointer (DFN) stored in the PATIENT NO. – DFN field (4) in the TREATING SPECIALTY CHANGE EXTRACT file (#727.817), NEW TREATING SPECIALTY data is derived from the FACILITY TREATING SPECIALTY field (#.09) in the PATIENT MOVEMENT file (#405). This facility treating specialty data is a pointer to the FACILITY TREATING SPECIALTY file (#45.7). Using the SPECIALTY field (#1) in the FACILITY TREATING SPECIALTY file (#45.7), the pointer to the SPECIALTY file (#42.4) is obtained. This Specialty is then the LOSING Specialty for the Treating Specialty change occurring on the date in the TRT extract record.

Field # and Name	Description	Technical Description
727.817,16 LOSING TREATING SPECIALTY LOS	The length of stay on the prior treating specialty. (A number between 0 and 5000; 0 decimal digits)	Calculated as current treating specialty date minus the date (DATE/TIME field (#.01) of the PATIENT MOVEMENT file (#405)) of the last treating specialty change. This field will only be used for actual treating specialty changes. For file (#405) records, which reflect provider-only changes, this field will be Null.
727.817,17 LOSING ATTENDING PHYSICIAN	The Attending Physician associated with the previous treating specialty change record in File #405.	Derived from the ATTENDING PHYSICIAN field (#.19) of the PATIENT MOVEMENT file (#405) – If ATTENDING PHYSICIAN is a pointer to the NEW PERSON file (#200), it is stored as “2”_pointer value. If ATTENDING PHYSICIAN is a pointer to the PROVIDER file (#6), it is stored as “6”_pointer value.
727.817,18 MOVEMENT TYPE	The MAS code for this movement.	Derived from the MAS MOVEMENT TYPE field (#.18) of the PATIENT MOVEMENT file (#405). It is a pointer to the MAS MOVEMENT TYPE file (#405.2).
727.817,19 TRT TIME	Time when this change in treating specialty occurred (6-digit military time)	Derived from the PATIENT MOVEMENT file (#405); DATE/TIME field (#.01). This field is always exactly 6 numeric characters in length; if time cannot be determined, “000300” is used as default.
727.817,20 ADMISSION TIME	Time of day at which the patient admission occurred. Format is HHMMSS.	Derived from the PATIENT MOVEMENT file (#405); ADMISSION/CHECK-IN MOVEMENT field (#.14) PATIENT MOVEMENT FILE (#405); DATE/TIME (#.01)  This field is always exactly 6 numeric characters in length; if time cannot be determined, “000300” is used as default.
727.817,21 NEW PRIMARY WARD PROVIDER	The new Primary Provider associated with the current patient movement record in file #405	Internal entry number of NEW PERSON file (#200) derived from the PRIMARY CARE PHYSICIAN field (#.08) of the PATIENT MOVEMENT file (#405). The movement record here is the current treating specialty movement.
727.817,22 NEW ATTENDING PHYSICIAN	The new Attending Physician associated with the current patient movement record in file #405	Internal entry number of NEW PERSON file (#200) derived from the ATTENDING PHYSICIAN field (#.19) of the PATIENT MOVEMENT file (#405). The movement record here is the current treating specialty movement.
727.817,23 LOSING PRIMARY WARD PROVIDER	The losing Primary Provider for the patient movement; (i.e., the Primary Provider of the previous treating specialty change record).	Internal entry number of NEW PERSON file (#200) derived from the PRIMARY CARE PHYSICIAN field (#.08) of the PATIENT MOVEMENT file (#405). The movement record is not the current treating specialty movement, but the one that corresponds to the previous treating specialty or provider change.
727.817, 24 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), “V” )
727.817, 25 DSS DEPT.	Currently Null	Currently Null
727.817, 26 PLACEHOLDER	Currently Null	Currently Null
727.817, 27 PLACEHOLDER	Currently Null	Currently Null
727.817, 28 PLACEHOLDER	Currently Null	Currently Null

Field # and Name	Description	Technical Description
727.817, 29 PLACEHOLDER	Currently Null	Currently Null
727.817,30 ATTENDING PHYSICIAN LOS	Length of stay with the losing attending physician. Max. value = 9999	Calculated as current Attending Physician date minus the date (DATE/TIME field (#.01) of the PATIENT MOVEMENT file (#405) of the last Attending Physician change
727.817,31 PRIMARY WARD PROVIDER LOS	The patient's length of stay with the losing primary ward provider. Max. value = 9999	Calculated as current Ward Provider date minus the date (DATE/TIME field (#.01) of the PATIENT MOVEMENT file (#405) of the last Ward Provider change
727.817, 32 DOM, PR RTP AND SA RTP INDICATOR	Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SAR RTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)  Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR	The value is pulled from the DOM/PR RTP/SAR RTP CODE field in file (#727.831) which holds a set of codes
727.817, 33 OBSERVATION PATIENT INDICATOR	Re-labeled field from Extended OP to Observation Patient Indicator  Y = Patient is an Observation Patient. N = Patient is not an Observation Patient	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to 'YES'. Otherwise, this field is set to 'NO.'

Field # and Name	Description	Technical Description																
727.817, 34 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18</td><td>293 (Neurology)</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24</td><td>290 (Medicine)</td></tr><tr><td>41</td><td>296 (Rehab Med)</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94</td><td>292 (Psychiatry)</td></tr><tr><td>1J</td><td>297 (Emergency Dept)</td></tr></table> <p>In the TRT extract, all encounter numbers are for inpatients, except observation cases. Both follow the rules detailed in the paragraph above.</p>	Treating Specialty	Stop Code	18	293 (Neurology)	23	295 (SCI)	24	290 (Medicine)	41	296 (Rehab Med)	65	291 (Surgery)	94	292 (Psychiatry)	1J	297 (Emergency Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																	
18	293 (Neurology)																	
23	295 (SCI)																	
24	290 (Medicine)																	
41	296 (Rehab Med)																	
65	291 (Surgery)																	
94	292 (Psychiatry)																	
1J	297 (Emergency Dept)																	
727.817, 35 PRODUCTION DIVISION CODE	Currently Null	Currently Null																
727.817, 36 LOSING ATTENDING PHYSICIAN PC	<p>The active person class of the Losing Attending Physician.</p> <p>Format: V999999.</p> <p>Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.</p>	<p>The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S</p> <p>ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200).</p>																
727.817, 37 NEW PRIMARY WARD PROVIDER PC	<p>The active person class of the New Primary Ward Provider.</p> <p>Format: V999999.</p> <p>Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.</p>	<p>The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S</p> <p>ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200).</p>																
727.817, 38 NEW ATTENDING PHYSICIAN PC	<p>The active person class of the New Attending Physician. The format of the field is V999999, where the 999999 is six numeric digits.</p>	<p>The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S</p> <p>ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200).</p>																
727.817, 39 LOSING PRIMARY WARD PROV PC	<p>The active person class of the Losing Primary Ward Provider. The format of the field is V999999, where the 999999 is six numeric digits.</p>	<p>The data is derived from the NEW PERSON file (#200), field (#5); file (#8932.1). Active Person is determined by S</p> <p>ECX=\$\$GET^XUA4A72(PERS,DATE) where PERS is the IEN from the NEW PERSON file (#200).</p>																
727.817, 40 LOSING ATTENDING PHYSICIAN NPI	<p>A standard, unique life-long identifier of the attending physician associated the with previous treating specialty change record in File (#405)</p>	<p>Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI</p>																

Field # and Name	Description	Technical Description
727.817, 41 LOSING PRIM WARD PROV NPI	A standard, unique life-long identifier of the losing primary provider for the patient movement (i.e., the Primary Provider of the previous treating specialty change record)	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.817, 42 NEW ATTENDING PHYSICIAN NPI	A standard, unique life-long identifier of the new attending physician associated with the current patient movement record in File (#405)	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.817, 43 NEW PRIMARY WARD PROVIDER NPI	A standard, unique life-long identifier of the new primary provider associated with the current patient movement record in File (#405)	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.817,44 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>



## #727.809 -- UNIT DOSE LOCAL EXTRACT (UDP) File Data Definition

This file contains data elements as specified by the Decision Support Office (DSO) for the Pharmacy Unit Dose extract from existing VistA files. Entries into this file are made by extracting data from several files. Once approved by the DSS site manager, entries in this file are loaded into an electronic mail message and sent to the commercial vendor. Entries should be made only by the extract load routine.

Since validation techniques will be determined by the local site, it is intended that the site add whatever cross-references are deemed necessary. However, this file contains one nationally determined cross-reference, the "AC" cross-reference on the EXTRACT NUMBER field (#2). This cross-reference is used by the DSS Extracts software package as an essential feature for managing and purging data in this file and should not be modified.

This file should *NOT* be modified directly using VA FileMan.

Field # and Name	Description	Technical Description
727.809,.01 SEQUENCE NUMBER	The record for this extract entry	The internal entry number (IEN) for this record. This entry is DINUMed.
727.809,1 YEAR MONTH	A six-character string representing the year and month for which this extract was performed. Format: YYYYMM	Format is YYYYMM; Year 2000 compliant per vendor.
727.809,2 EXTRACT NUMBER	The corresponding entry in the DSS EXTRACT LOG file (#727) for this extract	A pointer to the DSS EXTRACT LOG file (#727). The primary purpose is to pick up the header for the mail message.
727.809,3 FACILITY	Identifier for the station and division.	An indicator of the division where this event happened. It is derived from the DIVISION field (#.015) of the WARD LOCATION file (#42) which points to the MEDICAL CENTER DIVISION file (#40.8).
727.809,4 PATIENT NO. - DFN	An identifying number for the patient at the local site. Value is an IEN from PATIENT file (#2) (DFN).	The internal record number for the patient in the PATIENT file (#2)
727.809,5 SSN	The patient's social security number (Pseudo SSNs are indicated by a trailing 'P' or five leading zeros)	Using the patient pointer (DFN), SSN data is derived from the SOCIAL SECURITY NUMBER field (#.09) in the PATIENT file (#2).  The logic changed for FY08 to eliminate invalid SSNs.
727.809,6 NAME	The first four characters of the patient's last name, left justified.	Using the patient pointer (DFN), NAME data is derived from the NAME field (#.01) in the PATIENT file (#2). The first four characters of the first ", " piece are used, padded with trailing spaces if necessary.
727.809,7 IN OUT PATIENT INDICATOR	Indicates whether the patient was an inpatient or an outpatient for this record.  Values: I = Inpatient O = Outpatient	This field is initialized to an "O", indicating an outpatient status. The software then calls IN5^VADPT (using the patient IEN and the event date) and also makes a call which looks up the inpatient/outpatient indicator from the DSS TREATING SPECIALTY TRANSLATION file (#727.831) based on the treating specialty. The field is set to "I" if an inpatient status is found based on these calls.

Field # and Name	Description	Technical Description
727.809,8 DAY	Date on which the Unit Dose was dispensed or returned. Format: YYYYMMDD	Derived from one of these methods:  (1) UNIT DOSE EXTRACT DATA file (#728.904); DATE field (#2). Data is inserted in this field by Pharmacy routines PSGPLF and PSGAMSA.  (2) UNIT DOSE PICK LIST STATS file (#57.6); DATE field (#.01) PICK LIST file (#53.5); START DATE/TIME field (#.03) or DT (i.e., FileMan variable for Today's Date).  If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.809,9 VA DRUG CLASSIFICATION	VA Drug Classification for the item in this order.	Derived from the VA CLASSIFICATION field (#2) in the DRUG file (#50) for the drug identified by the DRUG field (#3) in the UNIT DOSE EXTRACT DATA file (#728.904)
727.809,10 QUANTITY	Drug quantity dispensed in the unit of issue for that drug. Unit of issue may vary from product to product and site to site. Quantities may include the number of pills, number of boxes, kits or bottles or the volume of the bottle in milliliters or liters, or other units of issue.	Derived from the QUANTITY field (#4) of the UNIT DOSE EXTRACT DATA file (#728.904)
727.809,11 WARD	Current ward where the patient is located.	Derived from the WARD field (#5) in the UNIT DOSE EXTRACT DATA file (#728.904) which is a pointer to the WARD LOCATION file (#42). Using the ward pointer, the data is derived from the HOSPITAL LOCATION FILE POINTER field (#44) in the WARD LOCATION file (#42) which is a pointer to the HOSPITAL LOCATION file (#44).
727.809,12 PROVIDER	The provider assigned to this patient. This number is IEN preceded by "2".	Derived from the PROVIDER field (#6) of the UNIT DOSE EXTRACT DATA file (#728.904). It is a pointer to the NEW PERSON file (#200).
727.809,13 COST	VistA Pharmacy supply cost of drug dispensed.  Value is the dollar amount between 0 and 10000; 2 decimal digits.	Derived from the TOTAL COST field (#7) of the UNIT DOSE EXTRACT DATA file (#728.904)
727.809,14 MOVEMENT FILE #	A number used as an index into patient movement file.	A call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status). This field is set to the value of VAIP (1), which is a pointer to the PATIENT MOVEMENT file (#405).
727.809,15 TREATING SPECIALTY	The PTF CODE of the treating specialty associated with this extract record.  NULL for outpatients, except if observation patient.	This field is initialized to a Null, indicating an outpatient status. If a call to IN5^VADPT (using the patient IEN and the event date) returns a patient movement number (indicating inpatient status), the value of VAIP(8), which is the pointer to the FACILITY TREATING SPECIALTY file (#45.7), is used to get the SPECIALTY field (#1) which points to the SPECIALTY file (#42.4). Then, the PTF Code is obtained and stored instead of the actual specialty code.

Field # and Name	Description	Technical Description
727.809,16 NDC	National Drug Code for the drug/supply item in this order (1 to 15 characters in length).	Derived from the NDC field (#31) in the DRUG file (#50) for the drug identified by the DRUG field (#3) in the UNIT DOSE EXTRACT DATA file (#728.904)
727.809,17 NEW FEEDER KEY	Code that uniquely identifies a DSS drug/supply product.  The feeder key is a seventeen-digit number made up of the pointer to the NATIONAL DRUG file padded to five digits and the twelve digits National Drug Code.	Derived for the drug identified by the DRUG field (#6) in the PRESCRIPTION file (#52), which is a pointer to the DRUG file (#50)  The PSNDF VA PRODUCT NAME ENTRY field (#22) from the DRUG file (#50), which is a pointer to the VA PRODUCT file (#50.68), is padded to 5 digits. This is concatenated with a 12-digit code derived from the NDC field (#31) from the DRUG file (#50) to form a 17-digit Feeder Key.
727.809,18 INVESTIGATIONAL (DEA Special Handling)	Indicates if the drug in this record is Investigational.  Values: I = Investigational Null	Derived from the DEA, SPECIAL HDLG field (#3) in the DRUG file (#50). If the DEA, SPECIAL HDLG field contains an I, this field is set to I.
727.809,19 UDP TIME	Time that the drug was dispensed. (6-digit military time)	(1) UNIT DOSE EXTRACT DATA file (#728.904); DATE field (#2) Data is inserted in this field by Pharmacy routines PSGPLF and PSGAMSA.  (2) UNIT DOSE PICK LIST STATS file (#57.6); DATE field (#.01) PICK LIST file (#53.5); START DATE/TIME field (#.03) where only the 1st "." piece (date) is used for DT (i.e., FileMan variable for Today's Date). The source for this data element does NOT provide any time information; only date is provided. Consequently, the UDP TIME field is always set to "000000".
727.809,20 ADMISSION DATE	This 8-character numeric string represents the date on which the patient's admission occurred. Format:YYYYMMDD.	Derived from the UNIT DOSE EXTRACT DATA file (#728.904) DFN field (#1), PATIENT MOVEMENT file (#405), DATE/TIME field (#.01)  This field is always exactly 8 numeric characters in length. If the date cannot be determined, a default is used. The default date value is the value of the YEAR MONTH field (#1) concatenated with "01" for the day (DD) portion.
727.809,21 ADMISSION TIME	Time of day at which the patient admission occurred. Format is HHMMSS.	A call to IN5^VADPT (using the patient IEN and the event date) returns the internal file number of the admission associated with this movement. ADMISSION TIME is derived from the DATE/TIME field (#.01) of the PATIENT MOVEMENT file (#405) for the movement found in VAIP (13). ADMISSION TIME is padded with trailing zeros to six digits.  UNIT DOSE EXTRACT DATA file (#728.904); DFN field (#1) PATIENT MOVEMENT file (#405); DATE/TIME field (#.01)  This field is always exactly 6 numeric characters in length; if time cannot be determined, "000300" is used as default.

Field # and Name	Description	Technical Description
727.809, 22 MASTER PATIENT INDEX	Unique national VA patient identifier	The Master Patient Index is extracted from \$E(\$GETICN^MPIF001(DFN), “V” )
727.809, 23 DSS PRODUCT DEPARTMENT	Currently Null	Currently Null
727.809,24 PLACEHOLDER	Currently Null	Currently Null
727.809, 25 DOM, PR RTP, AND SA RTP	<p>Indicates if the patient is admitted to either a RRTP (formerly DOM), PR RTP, or SAR RTP at time care is provided. DOM is no longer used. It has changed to Residential Rehabilitation Treatment Program (RRTP)</p> <p>Values: P = GEN PR RTP D = RRTP (DOMICILIARY) S = PR RTP T = PTSD PR RTP H = HOMELESS CWT/TR A = SA CWT/TR B = PTSD CWT/TR C = GEN CWT/TR</p>	The value is pulled from the DOM/PR RTP/SAR RTP CODE field in file (#727.831) which holds a set of codes
727.809, 26 OBSERVATION PATIENT INDICATOR	<p>Re-labeled field from Extended OP to Observation Patient Indicator</p> <p>Y = Patient is an Observation Patient. N = Patient is not an Observation Patient</p>	Derived from other fields in this extract. If the TREATING SPECIALTY field (#10) contains values equal to 24, 65, 94, 18, , 23, 41, 1J or if the First 3 characters of the value in the FEEDER KEY field (#7) contains values equal to 290-296, then the OBSERVATION PATIENT INDICATOR field is set to ‘YES’. Otherwise, this field is set to ‘NO’.

Field # and Name	Description	Technical Description																		
727.809, 27 ENCOUNTER NUMBER	<p>The unique number assigned to each encounter within DSS.</p> <p>The number is left justified in the field and is determined by the following:</p> <ul style="list-style-type: none"><li>• <u>Inpatients</u>- the concatenation of SSN + Admit Date + letter I</li><li>• <u>Outpatients</u>- the concatenation of the SSN + Visit Date (Julian format) + Primary Stop Code value</li><li>• <u>Observation encounters</u>- receive an outpatient encounter number with the date of the visit = the Admit Date and the stop code value dependent on the observation treating specialty. The observation treating specialty to stop code translation is:</li></ul> <table><tr><td>Treating Specialty</td><td>Stop Code</td></tr><tr><td>18 (Neurology)</td><td>293</td></tr><tr><td>23</td><td>295 (SCI)</td></tr><tr><td>24 (Medicine)</td><td>290</td></tr><tr><td>41 (Med)</td><td>296 (Rehab</td></tr><tr><td>65</td><td>291 (Surgery)</td></tr><tr><td>94 (Psychiatry)</td><td>292</td></tr><tr><td>1J (Emergency</td><td>297</td></tr><tr><td></td><td>Dept)</td></tr></table> <p>In the UDP extract, encounter numbers for inpatients &amp; observation cases as above. Outpatient encounter numbers should be built with the Date field and Stop Code value = PHA.</p>	Treating Specialty	Stop Code	18 (Neurology)	293	23	295 (SCI)	24 (Medicine)	290	41 (Med)	296 (Rehab	65	291 (Surgery)	94 (Psychiatry)	292	1J (Emergency	297		Dept)	<p><u>Inpatient</u> If In Out Patient Indicator field (#7) = I (inpatient), concatenate SSN + Current Admit Date + "I" (letter I) where SSN is from the SSN field (#5) and Admission Date is from the Admission Date field (#58)</p> <p><u>Outpatient</u> If In Out Patient Indicator field (#7) = O (outpatient), concatenate SSN + Date + Primary Stop Code where SSN is from extract field (#5) and the date is the 7-character Julian value from the DAY field (#8)</p> <p><u>Observation</u> If Observation Patient Indicator field (#57) = Y (yes), concatenate SSN + Admit Date + stop code as derived from Treating Specialty.</p>
Treating Specialty	Stop Code																			
18 (Neurology)	293																			
23	295 (SCI)																			
24 (Medicine)	290																			
41 (Med)	296 (Rehab																			
65	291 (Surgery)																			
94 (Psychiatry)	292																			
1J (Emergency	297																			
	Dept)																			
727.809, 28 PRODUCTION DIVISION CODE	Identifies the division/facility where the work was performed.	Data comes from the WARD field (#5) of the UNIT DOSE EXTRACT DATA file (#727.904), which is a pointer to the WARD LOCATION file (#42). This value is then used to get the DIVISION field (#.015), a pointer to the MEDICAL CENTER DIVISION file (#40.8), which is then used to call API GETDIV^ECXDEPT to get the STATION NUMBER field (#99) from the INSTITUTION file (#4).																		
727.809, 29 MEANS TEST	<p>The current means test category for this patient</p> <p>Values:</p> <p>A = Category A B = Category B C = Category C P = Pending Adjudication R = Requires Means Test N = Means Test not Required E = Exempt I = Incomplete L = No Longer Applicable M = Non-Exempt</p>	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4) in the UNIT DOSE LOCAL EXTRACT file (#727.809), MEANS TEST data is derived from the CURRENT MEANS TEST STATUS field (#.14) in the PATIENT file (#2). This field is a pointer to the MEANS TEST STATUS file (#408.32). Using the means test pointer, the data is derived from the CODE field (#.02) in the MEANS TEST STATUS file (#408.32).																		

Field # and Name	Description	Technical Description
727.809, 30 ELIGIBILITY	<p>A two or three digit numeric code indicating the Patient's Primary Eligibility. Converted to NPCD Eligibility Code from different VistA coding schemes.</p> <p>Values:</p> <ul style="list-style-type: none"> <li>10 = SC 50-100%</li> <li>20 = Aid &amp; Attendance</li> <li>21 = Housebound</li> <li>22 = Mexican Border War</li> <li>23 = WWI</li> <li>24 = POW</li> <li>30 = SC 40-49%</li> <li>31 = SC 30-39%</li> <li>32 = SC 20-29%</li> <li>33 = SC 10-19%</li> <li>34 = SC less than 10%</li> <li>40 = NSC - VA Pension</li> <li>50 = NSC</li> <li>60 = Catastrophic Disability</li> <li>101 = CHAMPVA</li> <li>102 = Collateral of Veteran</li> <li>103 = Employee</li> <li>104 = Other Federal Agency</li> <li>105 = Allied Veteran</li> <li>106 = Humanitarian Emergency</li> <li>107 = Sharing Agreement</li> <li>108 = Reimbursable Insurance</li> <li>109 = Tricare/CHAMPUS</li> </ul>	Using the patient pointer (DFN), ELIGIBILITY data is derived from the PRIMARY ELIGIBILITY CODE field (#.361) in the PATIENT file (#2). PRIMARY ELIGIBILITY CODE is a pointer to the ELIGIBILITY CODE file (#8). The data is derived from the MAS ELIGIBILITY CODE field (#8) in the ELIGIBILITY CODE file (#8), which in turn is a pointer to the MAS ELIGIBILITY CODE file (#8.1). The pointer value to file (#8.1) is converted by ELIG^ECXUTL3 to the corresponding eligibility code used by NPCD.
727.809, 31 DATE OF BIRTH	<p>Patient's date of birth</p> <p>Format: YYYYMMDD</p>	Derived from PATIENT file (#2); DATE OF BIRTH field (#.03)
727.809, 32 SEX	<p>Gender</p> <p>Values:</p> <ul style="list-style-type: none"> <li>M = Male</li> <li>F = Female</li> </ul>	Using the patient pointer (DFN), this data element is taken from the SEX field (#.02) in the PATIENT file (#2)
727.809, 33 STATE	FIPS 2 character numeric code for the state where the patient resides.	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4) in the UNIT DOSE LOCAL EXTRACT file (#727.809), data is derived from the STATE field (#.115) in the PATIENT file (#2) which points to the STATE file (#5). From the STATE file record, use the two-character VA STATE CODE field (#2).
727.809, 34 COUNTY	The FIPS county code for where the patient resides	Using the patient pointer (DFN) data is taken from the COUNTY field (#.117) in the PATIENT file (#2) which points to a subfile record in the COUNTY multiple field (#3) of the STATE file (#5). A pointer to the STATE file (#5) is obtained from the STATE field (#.115) of the file (#2) record. From the subfile record of field (#3) of file (#5), use the value of the VA COUNTY CODE field (#2).
727.809, 35 ZIP + 4	Zip + 4 is the zip code for where the patient resides using format of nnnnn- nnnn. The 5-character zip code is provided if zip + 4 is not available.	Using the patient pointer (DFN), ZIP CODE data is derived from the ZIP+4 field (#.1112) PATIENT file (#2)

Field # and Name	Description	Technical Description
727.809, 36 VETERAN	<p>Patient's veteran status</p> <p>Values: Y = Is a veteran N = Is not a veteran</p>	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4) in the UNIT DOSE LOCAL EXTRACT file (#727.809), VETERAN data is derived from the VETERAN (Y/N). Field (#1901) in the PATIENT file (#2)
727.809, 37 PERIOD OF SERVICE	<p>The period of service that classifies this patient based on eligibility. This code is a single alphanumeric character.</p> <p>Values: A = Army-Active Duty B = Navy, Marine-Active Duty C = Air Force-Active Duty D = Coast Guard- Active Duty E = Retired, Uniformed Services F = Medical Remedial Enlist G = Merchant Seaman-USPHS H = Other USPHS Beneficiaries I = Observation/Examination J = Office of Workers Comp K = Job Corps/Peace Corps L = Railroad Retirement M = Beneficiaries -Foreign Government N = Humanitarian (Non-Vet) O = Champus Restore P = Other Reimbursement. (Non-Vet) Q = Other Federal Dependant R = Donors (Non-Vet) S = Special Studies (Non-Vet) T = Other Non-Veteran U = CHAMPVA-Spouse, Child V = CHAMPUS W = Czechoslovakia/Poland Svc X = Persian Gulf War Y = CAV/NPS Z = Merchant Marine 0 = Korean 1 = World War I 2 = World War II 3 = Spanish American 4 = Pre-Korean 5 = Post-Korean 6 = Operation Desert Shield 7 = Vietnam ERA 8 = Post-Vietnam 9 = Other or None</p>	Period of Service
727.809, 38 POW STATUS	<p>Indicates if patient was confined as a Prisoner of War</p> <p>Values: Y = Patient was confined as a Prisoner of War N = Patient was not confined as a Prisoner of War U= Unknown</p>	Derived from the PATIENT file (#2), POW STATUS INDICATED Field (#.525). The status indicator is returned by SVC^VADPT.

Field # and Name	Description	Technical Description
727.809, 39 POW LOCATION	If POW Status is indicated, then this is the POW confinement location/period.  Values: 1 = World War I 2 = World War II - Europe 3 = World War II - Pacific 4 = Korean 5 = Vietnam 6 = Other	Derived from the PATIENT file (#2); POW CONFINEMENT LOCATION field (#.526). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.
727.809, 40 RADIATION STATUS	Indicates if patient claims exposure to ionizing radiation  Values: Y= Patient claims exposure to ionizing radiation N = Patient does not claim exposure to ionizing radiation	Derived from the RADIATION EXPOSURE INDICATED field (#.32103) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. This field will have a NULL value if the PATIENT file (#2) record does not indicate a status.
727.809, 41 AGENT ORANGE STATUS	Indicates whether patient was exposed to Agent Orange Y = Patient was exposed to Agent Orange N = Patient not exposed to Agent Orange U = Unknown	Derived from the PATIENT file (#2); AGENT ORANGE EXPOS. INDICATED field (#.32102). The status indicator is returned by SVC^VADPT.
727.809, 42 AGENT ORANGE LOCATION	Indicates the location where the patient was exposed to Agent Orange.  Values: K = Korean DMZ V = Vietnam	Derived from the PATIENT file (#2), AGENT ORANGE EXPOSURE LOCATION field (#.3213). This is a pointer value to the POW PERIOD file (#22). The location indicator is returned by SVC^VADPT.  Or  Using the Patient Pointer (DFN), AGENT ORANGE LOCATION is derived from the AGENT ORANGE EXPOSURE LOCATION field (.3213) of the PATIENT FILE #2.
727.809, 43 PURPLE HEART INDICATOR	Indicates whether or not the patient is a Purple Heart recipient  Values: Y = Yes Purple Heart recipient N = No not Purple Heart recipient	Derived from the PATIENT file (#2) CURRENT PH INDICATOR field (#.531). The status indicator is returned by SVC^VADPT.
727.809, 44 MST STATUS	Indicates the Military Sexual Trauma (MST) status of a patient on the date of the encounter  Values: Y = Yes, screened reports MST N = Screened, does not report MST D = Screened, declines to answer.	The MST HISTORY file (#29.11) holds data regarding military sexual trauma claims and effective dates. The patients MST status is stored in the MST STATUS field (#3). A call is made to \$\$GETSTAT^DGMSTAPI(DFN,DGDATE) using the DFN in the PATIENT NO. DFN field (#4) and the date in the DAY field (#8)
727.809, 45 CNH/SH STATUS	Community Nursing Home/ State Home (CNH/SH) Indicator  Values: Y = Yes N = No	Derived from the CNH CURRENT field (#148) of the PATIENT file (#2) using the Patient DFN



Field # and Name	Description	Technical Description
727.809, 46 ENROLLMENT LOCATION	The facility that the patient chooses to designate as his preferred location for care.  Values: Station Number	Derived from the PREFERRED FACILITY field (# 27.02) of the PATIENT file (#2). The PREFERRED FACILITY field (# 27.02) is a pointer to the INSTITUTION file (#4) and is the value in the STATION NUMBER field (#99).
727.809, 47 ENROLLMENT CATEGORY	Patient's enrollment category  Values: E = Enrolled N = Not Enrolled P = In Process	Derived from the standard call DGENA4 using the INPUT patient DFN and the ENROLLMENT STATUS field (#48)
727.809, 48 ENROLLMENT STATUS	Patient's enrollment status  1 Unverified 2 Verified 3 Inactive 4 Rejected 5 Suspended 6 Deceased 7 Cancelled/Declined 8 Expired 9 Pending 10 Not Eligible 11 Rejected; Fiscal Year 12 Rejected; Mid-cycle 13 Rejected; Stop New Enrollments 14 Rejected; Initial Application by VAMC 15 Pending; No Eligibility Code in VIVA 16 Pending; Means Test Required 17 Pending; Eligibility Status is Unverified 18 Pending; Other 19 Not Eligible; Refused to pay co pay 20 Not Eligible; Ineligible Date 21 Pending; Purple Heart Unconfirmed 22 Rejected; Below Enrollment Group Threshold	Derived from the PATIENT ENROLLMENT file (#27.11), ENROLLMENT STATUS field (#.04) which is a pointer to the ENROLLMENT STATUS file (#27.15)
727.809, 49 SHAD STATUS	Indicates whether patient meets requirements for Shipboard Hazard and Defense (SHAD). Data is Y if this patient was exposed to Shipboard Hazard and Defense. N if not, or U if unknown.	This field is the Shipboard Hazard and Defense which is derived by using DBIA #4462 GETSHAD^DGUTL3(DFN).
727.809, 50 PRIMARY CARE TEAM	The IEN of the primary care team assigned to this patient in the PCMM module.	Using the DATE field (#2) from the UNIT DOSE EXTRACT DATA file (#728.904) and the patient pointer (DFN) stored in the PATIENT NO. – DFN field (#4) in the UNIT DOSE LOCAL EXTRACT file (#727.809), a call is made to the Scheduling API, OUTPTTM^SDUTL3. The API returns the team's internal entry number and name from the TEAM file (#404.51). Only the pointer (IEN) to file (#404.51) is transmitted.

Field # and Name	Description	Technical Description
727.809, 51 PRIMARY CARE PROVIDER	The primary care provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is the IEN preceded by “2”.	Using the DATE field (#2) from the UNIT DOSE EXTRACT DATA file (#728.904) and the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4) in the UNIT DOSE LOCAL EXTRACT file (#727.809), a call is made to the Scheduling API, OUTPTPR^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.809, 52 PLACEHOLDER	Currently Null	Currently Null
727.809, 53 PC PROVIDER PERSON CLASS	The VA code of the Person Class of the Primary Care Provider as of the date of this extract record (In DSS, this is called Provider Type)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	A call to \$\$GET^XUA4A72(PERS,DATE) is made using the IEN in the PROVIDER field and the date in the DAY field
727.809, 54 ASSOCIATE PC PROVIDER	The Associate Primary Care Provider assigned to this patient through the Primary Care Management Module (PCMM) application.  Value is an IEN preceded by “2”.	Using the DATE field (#2) from the UNIT DOSE EXTRACT DATA file (#728.904) and the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4) in the UNIT DOSE LOCAL EXTRACT file (#727.809), a call is made to the Scheduling API, OUTPTAP^SDUTL3. The API returns the provider's internal entry number and name from the NEW PERSON file (#200).
727.809, 55 PLACEHOLDER	Currently Null	Currently Null
727.809, 56 ASSOC. PC PROV. PERSON CLASS	VA Code of the Person Class of the patient's Associate Primary Care Provider. (In DSS, this is called Provider Type.)  Format: V999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters..	A call to \$\$GET^XUA4A72(PERS,DATE) is made using the IEN in the PROVIDER and the date in the DAY field
727.809, 57 ORDERING DATE	The date the order was first dispensed	Derived from the UNIT DOSE EXTRACT DATA file (#728.904); ORDER DATE field (#9). ORDER DATE is the START DATE/TIME field (#10) of the UNIT DOSE multiple file (#55.06) of the PHARMACY PATIENT file (#55).

Field # and Name	Description	Technical Description																
727.809, 58 ORDERING STOP CODE	Ordering Stop Code. Tracks Outpatient UDP orders. Numeric values '101' through '999'.	<p>The value is obtained by locating the CLINIC field (#136) on the Pharmacy Patient file (#55), UNIT DOSE multiple (#55.06), which points to the Hospital Location file (#44) field (#8) STOP CODE NUMBER to capture the stop code. The stop code value is placed in the ORDERING STOP CODE field.</p> <p>If the Treating Specialty field is 18 or 23 or 24 or 41 or 65 or 94 1J then fill the ORDERING STOP CODE field with the corresponding Observation Stop Code.</p> <p>Please see table below:</p> <table><tr><td>Treating Specialty</td><td>Observation Code</td></tr><tr><td>18</td><td>293</td></tr><tr><td>23</td><td>295</td></tr><tr><td>24</td><td>290</td></tr><tr><td>41</td><td>296</td></tr><tr><td>65</td><td>291</td></tr><tr><td>94</td><td>292</td></tr><tr><td>1J</td><td>297</td></tr></table>	Treating Specialty	Observation Code	18	293	23	295	24	290	41	296	65	291	94	292	1J	297
Treating Specialty	Observation Code																	
18	293																	
23	295																	
24	290																	
41	296																	
65	291																	
94	292																	
1J	297																	
727.809, 59 HEAD & NECK CANCER INDICATOR	Identifies whether patient has head and/or neck cancer Y = Yes N = No	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), a call is made to \$\$GETCUR^DGNTAPI to retrieve the HEAD/NECK CA DX field (#2.01) of the NOSE AND THROAT RADIUM HISTORY file (#28.11)																
727.809, 60 ETHNICITY	The patient's ethnicity code Multiple entries are permitted. If present, multiple values are concatenated and sent as a single value.  Values: D = Declined to Answer H = Hispanic or Latino N = Not Hispanic or Latino U = Unknown by Patient	Using the patient pointer (DFN) stored in the PATIENT NO. - DFN field (#4), ETHNICITY is derived from the PTF VALUE field (#5) of the ETHNICITY file (#10.2) pointed to by the ETHNICITY INFORMATION field (#.01) of the ETHNICITY INFORMATION subfile (#2.06) of the PATIENT file (#2).  The above will occur only if the METHOD OF COLLECTION field (#.02) of the ETHNICITY INFORMATION sub file (#2.06) is set to 1 (SELF-IDENTIFICATION), otherwise ETHNICITY will be set to Null.																
727.809, 61 RACE 1	Self-reported by patient as recorded in VistA patient file. Multiple values are possible and common. If present, multiple values are concatenated and sent in a single field. Order of reported values is not significant. See also RACE field.  Values: 3 = American Indian or Alaska Native 8 = Asian 9 = Black or African American A = Native Hawaiian or other Pacific Islander B = White C = Declined to answer D = Unknown by Patient Null	Only those RACE INFORMATION values in the RACE INFORMATION subfile (#2.03) where the METHOD OF COLLECTION field (#.02) set to 1 (SELF-IDENTIFICATION), will be included in the RACE 1 field. If any of the RACE INFORMATION values returned are "C" (DECLINED TO ANSWER) that will be the only value included in the RACE1 field.																
727.809, 62 BCMA DRUG DISPENSED	Currently Null	Currently Null																

Field # and Name	Description	Technical Description
727.809, 63 BCMA DOSE GIVEN	Currently Null	Currently Null
727.809, 64 BCMA UNIT OF ADMINISTRATION	Currently Null	Currently Null
727.809, 65 BCMA ICU FLAG	Currently Null	Currently Null
727.809, 66 ORDERING PERSON CLASS	<p>The VA code of the Person Class of the Ordering Provider as of the date of this extract record. (In DSS this is called Provider Type)</p> <p>Format: V9999999. Start with a V followed by six digits. Pad with zeros to the left of the digits if needed to get exactly seven characters.</p>	The Active Person is determined by \$\$GET^XUA4A72(PERS,DATE), where PERS is the IEN from NEW PERSON file (#200)
727.809, 67 DSS IP #	Currently Null	Currently Null
727.809, 68 ENROLLMENT PRIORITY	<p>This field contains the enrollment priority group and the enrollment priority subgroup</p> <p>ENROLLMENT PRIORITY Groups determined for a patient enrollment include:</p> <p>1 = VA-rated service connected disabilities 50% or higher, determined by VA to be unemployable due to service-connected conditions.</p> <p>2 = VA-rated service-connected disabilities 30% or 40%</p> <p>3 = Former Prisoners of War, awarded Purple Heart medal, discharged for a disability incurred or aggravated in the line of duty, VA-rated service connected disabilities of 10%-20%, awarded special eligibility classification under Title 38, U.S.C., § 1151</p> <p>4 = Receiving aid and attendance or housebound benefits from VA, been determined by VA to be catastrophically disabled</p> <p>5 = Non-service connected Veterans and non compensable service connected Veterans rated 0% disable by VA with annual income and net worth below the VA National Income Thresholds, receiving VA pension benefits, eligible for Medicaid programs</p> <p>6 = WWI Veterans, compensable 0% service-connected Veterans, exposed to Ionizing Radiation during atmospheric testing or during the occupation of Hiroshima and Nagasaki, Project 112/SHAD participants, currently enrolled Veterans and new enrollees who were discharged from active duty on or after 1/28/03 and served in a theater of combat operations after 11/11/98 (eligible for enhanced benefits for 5 years post discharge), Veterans discharged from active duty before 1/28/03 who apply for enrollment on or after 1/28/08 and served in a theater of combat operations after 1/11/98 (eligible</p>	Contains the enrollment priority group and the enrollment priority subgroup from the Patient Enrollment file (#27.11)

Field # and Name	Description	Technical Description
	<p>for enhanced benefits through 1/27/11)  7 = Veterans with income and/or net worth above the VA national income threshold and income below the VA National Geographic Income Thresholds who agree to pay copays  8 = Others</p> <p>ENROLLMENT PRIORITY Subgroup for Priority 8.  8a = Non-compensable 0% service-connected Veterans who were enrolled in VA Health Care System as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status.  8b = Noncompensable 0% service-connected Veterans who were enrolled on or after 6/15/09 whose income exceeds the current VA National Income Thresholds or VA National Geographic Income Thresholds by 10% or less.  8c = Non-service-connected Veterans enrolled as of 1/16/03 and who have remained enrolled since that date and/or placed in this Subpriority due to changed eligibility status  8d = Non-service connected Veterans enrolled on or after 6/15/09 whose income exceeds the current VA National Thresholds or VA National Geographic Income Thresholds by 10% or less.  8e = Not eligible for enrollment Noncompensable 0% service-connected Veterans applying for enrollment after 1/16/03.  8g = Not eligible for enrollment. Non-service-connected Veterans applying for enrollment after 1/16/03</p>	
727.809, 69 USER ENROLLEE	<p>Indicates whether a veteran has User Enrollee status for the current or future fiscal year.</p> <p>Values:  U = Yes  Null = No (includes past date or no date)</p> <p>SC Veterans 50% or over are not required to enroll.</p>	<p>Determined by the use of an API: I  \$\$UESTAT^EASUER(DFN) S  ECXEUESTA="U"</p>

Field # and Name	Description	Technical Description
727.809, 70 PATIENT TYPE	Refers to the various categories of patients, which may be seen at a VA facility. Every patient in the system must have a TYPE specified.  Values: AC = Active Duty AL = Allied Veteran CO = Collateral EM = Employee IN = Ineligible MI = Military Retiree NO = Non-Veteran (Other) NS = Non Service Connected Veteran SC = Service Connected Veteran TR = Tricare	Determined by the TYPE field of the PATIENT file (#2) which points to the TYPE OF PATIENT entries in file (#391)
727.809, 71 CV STATUS ELIGIBILITY	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Values:  Y = Yes, qualifies as a CV E = Eligibility Expired (bad DFN or date) Null = No, does not qualify as a CV	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The first piece 1 - qualifies as a CV 0 - does not qualify as a CV -1 - bad DFN or date
727.809, 72 CV ELIGIBILITY END DATE	Records the Combat Veteran (CV) eligibility expiration date of veteran who served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo). This is 2 years after the veteran's last service separation date.	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The 2nd piece is the Combat Vet End Date.
727.809, 73 ENCOUNTER CV	Records if a veteran served on active duty in a theatre of combat operations during a period of war after the Persian Gulf War or in combat against a hostile force during a period of hostilities after November 11, 1998 (Somalia, Yugoslavia, Iraq, Afghanistan or Kosovo) Uses the Combat Vet End Date to determine Combat Veteran Status for this encounter.  Values: Y = Yes, vet was eligible on date specified Null = No, vet was not eligible on date specified	Determined by the use of API \$\$CVEDT^DGCV (DFN. DATE) that checks the Combat Vet End Date field (#.5295) from the Patient file (#2) to determine CV Status. API returns three pieces 1^3010106^0. The third piece returns: 1 - vet was eligible on date specified (or DT) 0 - vet was not eligible on date specified (or DT).

Field # and Name	Description	Technical Description
727.809, 74 NATIONAL PATIENT RECORD FLAG	This field records that the patient's record contains 1 or more Category 1 (National) Patient Record Flags.  Y = Yes - Category 1 flag present and active  Otherwise, value is Null.	Located in the PRF National Flag file (#26.15). This file contains a list of the Category 1 (National) Patient Record Flags that can be assigned to a patient. Category 1 flags are established at a National level. It is retrieved via an API \$\$GETACT^DGPFAPI (DFN,"TARGET_ROOT".
727.809, 75 ERI	Identifies patients from impacted zip code areas designated by the Federal Emergency Management Agency (FEMA). This field is a length of two (value & blank).  Values: K = Hurricane Katrina Null	Extracted from the EMERGENCY RESPONSE INDICATOR field (#.181) located in the PATIENT file (#2)
727.809, 76 SW ASIA CONDITIONS	This field is used to indicate if this visit represents treatment of a VA patient claiming exposure to Southwest Asia conditions.  Values: Y = Yes N = No U = Unknown	This field is derived from the SOUTHWEST ASIA CONDITIONS? field (#.322013) in the PATIENT file (#2) using the patient's DFN. The status indicator is returned by SVC^VADPT. The SVC^VADPT called is made from routine PAT^ECXUTL3.
727.809, 77 OEF/OIF	Identifies combat veteran as serving in Operation Enduring Freedom (OEF), Operation Iraqi Freedom (OIF) or either OEF or OIF, but exactly which cannot be determined (Unknown OEF/OIF). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field will be concatenated into this 9-character field. Values: OEF = OEF Deployment date on or after 09/11/01 OIF = OIF Deployment date on or after 03/19/03 UNK = Unknown OEF/OIF	The value of this field is derived from the LOCATION OF SERVICE field (#.01) from SERVICE [OEF OR OIF] sub-file (#2.3215) of field (#.3215) located in the PATIENT File (#2). DSS will capture once, each location where the veteran served. In order to accommodate multiple locations, the values for this field are concatenated into this 9-character field.
727.809, 78 OEF/OIF RETURN DATE	The date the veteran left the OEF/OIF area. Otherwise, it is the end date of military pay for this OEF/OIF deployment. In cases of multiple OEF/OIF tours, this field will contain only the most recent return date. Format: YYYYMMDD	Value is derived from the OEF/OIF TO DATE field (#.03) from sub-file (#2.3215) of field (#.3215) located in the PATIENT file (#2). In cases of multiple OEF/OIF tours, this field contains only most recent return date.
727.809, 79 ASSOCIATE PC PROVIDER NPI	A standard, unique life-long identifier of the associate primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.809, 80 PRIMARY CARE PROVIDER NPI	A standard, unique life-long identifier of the primary care provider	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.809, 81 PROVIDER NPI	A standard, unique life-long identifier for individuals providing health care services	Identifier is retrieved via the supporting Kernel API: \$\$NPI^XUSNPI
727.809, 82 COUNTRY CODE	The value is the code for the country associated with the address.	The three-character alpha identifying code is copied from the CODE (#.01) field of the COUNTRY (#779.004) file.

Field # and Name	Description	Technical Description
727.809,83 PATCAT	<p>This is the Patient's category which will be used for FHCC (Federal Health Care Center) Reconciliation. DSS must capture and report DoD patients so that the FHCC reconciliation process can function as designed. "Reconciliation" is the process used within the new FHCC to determine which patients DoD pays for and which VA pays for.</p> <p>Values:  AD = Active Duty  ADD = Active Duty Dependent  FNRS = Former Non-Remarried Spouse  RET = Retiree  RETD = Retiree Dependent  RES = Reservist  REC = Recruit  TDRL = Temporary Disability  TFL = TRICARE for Life</p>	<p>If the VistA Patient Type Code (TYPE (#391) field of the Patient (#2) file) = Active Duty, Military Retiree, or TRICARE, then the value(s) in the VistA Other Eligibility multiple (PATIENT ELIGIBILITIES (#361) field of the PATIENT (#2) file), which points to locally modifiable ELIGIBILITY CODE (#8) file should be evaluated. If the value in the ELIGIBILITY CODE is equal to any entry in the set of codes in this field, the value should be placed in this field.</p> <p>FHCC hospitals have special codes that are added to the ELIGIBILITY CODE (#8) file that are used to identify the PATCAT status and may be unique to their facility.</p>