


About Manufacturer and User Facility Device Experience (MAUDE)

 [fda.gov/medical-devices/mandatory-reporting-requirements-manufacturers-importers-and-device-user-facilities/about-manufacturer-and-user-facility-device-experience-maude](https://www.fda.gov/medical-devices/mandatory-reporting-requirements-manufacturers-importers-and-device-user-facilities/about-manufacturer-and-user-facility-device-experience-maude)

Manufacturer and User Facility Device Experience (MAUDE) database represents reports of adverse events involving medical devices.

The searchable database data contains the last 10 years of medical device report (MDR) data. MAUDE may not include reports made according to exemptions, variances, or alternative reporting requirements granted under 21 CFR 803.19. The downloadable data files consist of voluntary reports since June 1993, user facility reports since 1991, distributor reports since 1993, and manufacturer reports since August 1996.

The public may search the database information on medical devices which may have malfunctioned or caused a death or serious injury. MAUDE data is current through the end of the previous month. The FDA seeks to include all reports received prior to the update. However, the inclusion of some reports may be delayed by technical or clerical difficulties.

MAUDE data is not intended to be used either to evaluate rates of adverse events or to compare adverse event occurrence rates across devices. The FDA reviews all medical device reports (MDRs) received. The FDA's analysis of MDRs evaluates the totality of information provided in the initial MDR as well as any MDR supplemental reports subsequently provided. The submission of an MDR itself is not evidence that the device caused or contributed to the adverse outcome or event. For example, in certain MDRs, the text of the report may include the word "death" or a related term. However, the MDR would not, and should not, be classified as death unless the reporter believes the patient's cause of death was or may have been attributed to the device or the device was or may have been a factor in the death.

In addition, although MDRs are a valuable source of information, this passive surveillance system has limitations. The incidence, prevalence, or cause of an event cannot be determined from this reporting system alone due to under-reporting of events, inaccuracies in reports, lack of verification that the device caused the reported event, and lack of information about frequency of device use. Because of these limitations, MDRs comprise only one of the FDA's several important postmarket surveillance data sources.

Please be aware that reports regarding device trade names may have been submitted under different manufacturer names. Searches only retrieve records that contain the search term(s) provided by the requester.

The data is also available in zipped files for downloading. The data in zip files is updated on a monthly basis.

These files were then compressed ("zipped") in order to save space. For these files to be useful to you, you'll first have to download them, unzip them, and then import them into a database or word processor for your further processing.

DISCLAIMER: Section 21 CFR 803.16 states that "A report or other information submitted by a reporting entity under this part, and any release by FDA of that report or information, does not necessarily reflect a conclusion by the party submitting the report or by FDA that the report or information constitutes an admission that the device, or the reporting entity or its employees, caused or contributed to the reportable event. The reporting entity need not admit and may deny that the report or information submitted under this part constitutes an admission that the device, the party submitting the report, or employees thereof, caused or contributed to a reportable event." In addition, some firms have submitted their own additional disclaimer statements. A file of those disclaimers will be placed on the web shortly.

The releasable MAUDE data is presented in four logical records types. For this data to be meaningful, you should download all four types of files. The four record formats contain all releasable information on MEDWATCH Form 3500.

Downloading Hint: When downloading the MAUDE data files to a database such as Microsoft Access, it is recommended that you first open, then save the data file in Microsoft WORD. This will add an "end of record" marker to each MAUDE record that can be recognized by Microsoft ACCESS. For files such as the FOIDEV files, you may need to put in an extra character at the end of the first record prior to importing the file, otherwise the last column of data may be lost.

Master Event Data: A distinct master event data record will be present for each source reporting an event. In other words, if a User Facility, Distributor, Manufacturer, and voluntary submitter all report an event, there will be four event records.

Device Data: Record Type 2 contains information related to the device(s) involved in the event.

Patient Data: Record Type 3 contains information related to the patient(s) involved in the event.

Text Data: Record Type 4 contains textual information from MEDWATCH Form Sections B5, H3, and H10.

All record types are linked via the MDR REPORT KEY.

For distributor reports which have had subsequent manufacturer reports, a special data element, MANUFACTURER LINK FLAG, will be set to 'Y'. In this case, the DISTRIBUTOR information (Section F on the master event data record) will be present; otherwise, these data elements will be blank.

The following files are available: (File Sizes are approximate)

File Name	Compressed Size in Bytes	Uncompressed Size in Bytes	Total Records	
<u>mdrfoi.zip</u>	6167KB	87864KB	263604	MAUDE Base records received date for 2022
<u>mdrfoithru2021.zip</u>	460013KB	4253175KB	12830703	Master Record through 2021
<u>mdrfoiadd.zip</u>	6276KB	90017KB	269188	New MAUDE Base records for the current month.
<u>mdrfoichange.zip</u>	11457KB	137162KB	421553	MAUDE Base data updates: changes to existing Base data.
<u>patient.zip</u>	669KB	7249KB	269189	MAUDE Patient records received date for 2022
<u>patientthru2021.zip</u>	48801KB	388999KB	12807701	Patient Record through 2021
<u>patientadd.zip</u>	669KB	7249KB	269189	New MAUDE Patient records for the current month
<u>patientchange.zip</u>	1279KB	11865KB	421575	MAUDE Patient data updates: changes to existing Base data.
<u>patientproblemcode.zip</u>	102152KB	936939KB	13648426	Device Data for patientproblemcode
<u>patientproblemdata.zip</u>	11KB	25KB	998	Patient Problem Data

File Name	Compressed Size in Bytes	Uncompressed Size in Bytes	Total Records	
<u>foidevthru1997.zip</u>	6001KB	31217KB	136917	Device Data through 1997
<u>foidev1998.zip</u>	3205KB	17539KB	63440	Device Data for 1998
<u>foidev1999.zip</u>	2764KB	14798KB	52880	Device Data for 1999
<u>device2000.zip</u>	1925KB	9894KB	53114	Device Data for 2000
<u>device2001.zip</u>	2116KB	10960KB	59073	Device Data for 2001
<u>device2002.zip</u>	2312KB	12829KB	70383	Device Data for 2002
<u>device2003.zip</u>	2522KB	14089KB	77946	Device Data for 2003
<u>device2004.zip</u>	2794KB	14782KB	82885	Device Data for 2004
<u>device2005.zip</u>	3339KB	17516KB	99770	Device Data for 2005
<u>device2006.zip</u>	3954KB	21072KB	120484	Device Data for 2006
<u>device2007.zip</u>	4808KB	29940KB	172204	Device Data for 2007
<u>device2008.zip</u>	5508KB	33651KB	195471	Device Data for 2008
<u>device2009.zip</u>	6712KB	43264KB	243109	Device Data for 2009
<u>device2010.zip</u>	8705KB	55457KB	304402	Device Data for 2010
<u>device2011.zip</u>	11550KB	79923KB	446875	Device Data for 2011
<u>device2012.zip</u>	13329KB	87131KB	487726	Device Data for 2012

File Name	Compressed Size in Bytes	Uncompressed Size in Bytes	Total Records	
<u>device2013.zip</u>	17679KB	123153KB	682274	Device Data for 2013
<u>device2014.zip</u>	20264KB	157957KB	863778	Device Data for 2014
<u>device2015.zip</u>	23234KB	167425KB	862586	Device Data for 2015
<u>device2016.zip</u>	24958KB	172125KB	868366	Narrative Data fo 2016
<u>device2017.zip</u>	28501KB	192368KB	938695	Narrative Data fo 2017
<u>device2018.zip</u>	32928KB	216678KB	1050350	Narrative Data fo 2018
<u>device2019.zip</u>	39168KB	276826KB	1333422	Narrative Data fo 2019
<u>device2020.zip</u>	42816KB	323663KB	1567579	Narrative Data fo 2020
<u>device2021.zip</u>	50900KB	411741KB	2030160	Narrative Data fo 2021
<u>device.zip</u>	4337KB	49369KB	263948	Device Data received to date 1 2022
<u>deviceadd.zip</u>	4423KB	50947KB	269535	New MAUDE Device data for th current month.
<u>devicechange.zip</u>	8937KB	81730KB	422402	Device data updates: changes to existing Device data and addition Device data for existing Base records.
<u>deviceproblemcodes.zip</u>	16KB	42KB	1704	Device Problem Data
<u>foidevproblem.zip</u>	35546KB	189591KB	13578105	Device Data for foidevproblem

File Name	Compressed Size in Bytes	Uncompressed Size in Bytes	Total Records	
<u>foitextthru1995.zip</u>	3561KB	16551KB	27401	Narrative data through 1995
<u>foitext1996.zip</u>	2782KB	9318KB	32059	Narrative Data fo 1996
<u>foitext1997.zip</u>	7557KB	26382KB	91009	Narrative Data fo 1997
<u>foitext1998.zip</u>	5924KB	20773KB	68316	Narrative Data fo 1998
<u>foitext1999.zip</u>	4501KB	15788KB	51119	Narrative Data fo 1999
<u>foitext2000.zip</u>	4760KB	16491KB	52625	Narrative Data fo 2000
<u>foitext2001.zip</u>	5090KB	17763KB	57986	Narrative Data fo 2001
<u>foitext2002.zip</u>	6089KB	22304KB	64859	Narrative Data fo 2002
<u>foitext2003.zip</u>	6221KB	23332KB	66241	Narrative Data fo 2003
<u>foitext2004.zip</u>	6090KB	21742KB	56117	Narrative Data fo 2004
<u>foitext2005.zip</u>	9649KB	34692KB	95044	Narrative Data fo 2005
<u>foitext2006.zip</u>	20092KB	69183KB	177414	Narrative Data fo 2006
<u>foitext2007.zip</u>	25177KB	88484KB	232627	Narrative Data fo 2007
<u>foitext2008.zip</u>	28286KB	101218KB	264972	Narrative Data fo 2008
<u>foitext2009.zip</u>	40869KB	147687KB	388042	Narrative Data fo 2009
<u>foitext2010.zip</u>	62269KB	252984KB	635654	Narrative Data fo 2010

File Name	Compressed Size in Bytes	Uncompressed Size in Bytes	Total Records	
<u>foitext2011.zip</u>	94583KB	425073KB	1040278	Narrative Data fo 2011
<u>foitext2012.zip</u>	108957KB	475208KB	1167621	Narrative Data fo 2012
<u>foitext2013.zip</u>	139507KB	622562KB	1609332	Narrative Data fo 2013
<u>foitext2014.zip</u>	164295KB	788040KB	1948365	Narrative Data fo 2014
<u>foitext2015.zip</u>	184834KB	861735KB	2073784	Narrative Data fo 2015
<u>foitext2016.zip</u>	194760KB	924811KB	2180342	Narrative Data fo 2016
<u>foitext2017.zip</u>	215526KB	1071218KB	2363072	Narrative Data fo 2017
<u>foitext2018.zip</u>	205384KB	1043192KB	2577631	Narrative Data fo 2018
<u>foitext2019.zip</u>	199493KB	1092990KB	2834673	Narrative Data fo 2019
<u>foitext2020.zip</u>	193121KB	1134242KB	3039449	Narrative Data fo 2020
<u>foitext2021.zip</u>	211070KB	1255788KB	3625862	Narrative Data fo 2021
<u>foitext.zip</u>	18407KB	124772KB	441898	Narrative Data received to date f 2022
<u>foitextadd.zip</u>	8583KB	56463KB	200966	New MAUDE Narrative data for the current month
<u>foitextchange.zip</u>	40075KB	236199KB	689056	Narrative data updates: changes to existing narrati data and addition narrative data for existing base records.

[Accessibility]

Note: This documentation is intended to be used in conjunction with a copy of Medwatch Form 3500A and 3500.

Record/Data Characteristics:

- The data has one record per line, with the data fields in a pipe-delimited, (i.e., "|") format
- All data elements are alpha-numeric
- All text fields contain whatever data was provided/entered. If no information was provided/entered the field will be left empty. If an asterisk ("*") is present, it represents what was entered on the 3500/3500A.
- All "FLAG" data elements have the value of "Y" for Yes, "N" for No, or are blank if no data was available/entered.
- All fields identified as multiply-occurring represent data elements which may have multiple values. Each value will be present in the field, separated by a comma. The word "OTHER" may appear as one of the values if the "Other" box was checked off. If the whole field is blank, no data was reported/entered.
- Section G CONTACT address information may not necessarily be the address where the device is manufactured.

Special Note for REPORT NUMBER data element:

The REPORT NUMBER data element represents Manufacturer Report Number, Distributor Report Number, or internally-generated voluntary report number, depending on the source of the record.

This REPORT NUMBER field will be blank when:

- User Facility submitted the report
- Distributor report has not been followed by a subsequent Manufacturer report.

Special Notes for Voluntary Reports and User Facility Malfunction Reports:

The only data elements which will be present on the Master Event Record will be:

- NEW RECORD
- DEVICE EVENT KEY
- REPORT SOURCE CODE
- MDR REPORT KEY
- Section B

All other data elements will be blank.

MDRFOI file contains following 82 fields, delimited by pipe (|), one record per line:

1. MDR Report Key
2. Empty field (not used)
3. Report Number
4. Report Source Code

P = Voluntary report

U = User Facility report

D = Distributor report

M = Manufacturer report

5. Manufacturer Link Flag (internal information flag)
6. Number Devices in Event (if source code is 'P', field will be null)
7. Number Patient in Event (if source code is 'P', field will be null)
8. Date Received

SECTION-B

9. Adverse Event Flag (B1)
10. Product Problem Flag (B1)
11. Date Report (B4)
12. Date of Event (B3) -- new added, 2006
13. Single Use Flag (Reprocessor Flag) (D8) -- new added, 2006
14. Reporter Occupation Code (E3) -- new added, 2006

* INVALID DATA

000 OTHER

001 PHYSICIAN

002 NURSE

003 NON-HEALTHCARE PROFESSIONAL

0HP HEALTH PROFESSIONAL

0LP LAY USER/PATIENT

100 OTHER HEALTH CARE PROFESSIONAL

101 AUDIOLOGIST

102 DENTAL HYGIENIST

103 DIETICIAN

104 EMERGENCY MEDICAL TECHNICIAN

105 MEDICAL TECHNOLOGIST

106 NUCLEAR MEDICINE TECHNOLOGIST

107 OCCUPATIONAL THERAPIST

108 PARAMEDIC

109 PHARMACIST
110 PHLEBOTOMIST
111 PHYSICAL THERAPIST
112 PHYSICIAN ASSISTANT
113 RADIOLOGIC TECHNOLOGIST
114 RESPIRATORY THERAPIST
115 SPEECH THERAPIST
116 DENTIST
117 NURSE PRACTITIONER

300 OTHER CAREGIVERS
301 DENTAL ASSISTANT
302 HOME HEALTH AIDE
303 MEDICAL ASSISTANT
304 NURSING ASSISTANT
305 PATIENT
306 PATIENT FAMILY MEMBER OR FRIEND
307 PERSONAL CARE ASSISTANT
400 SERVICE AND TESTING PERSONNEL
401 BIOMEDICAL ENGINEER
402 HOSPITAL SERVICE TECHNICIAN
403 MEDICAL EQUIPMENT COMPANY TECHNICIAN/REPRESENTATIVE
404 PHYSICIST
405 SERVICE PERSONNEL
499 DEVICE UNATTENDED
500 RISK MANAGER
501 ADMINISTRATOR/SUPERVISOR
600 ATTORNEY
999 UNKNOWN
NA NOT APPLICABLE
NI NO INFORMATION
UNK UNKNOWN

SECTION-E (if source code is 'P', Section E to H will contain no data)

15. Health Professional (E2)
16. Initial Report to FDA (E4)

Y = Yes

N = No

U = Unknown

* = No answer provided

SECTION-F

- 17. Date Facility Aware (F6)
- 18. Report Date (F8)
- 19. Report to FDA (F11)
- 20. Date Report to FDA (F11)
- 21. Event Location (F12)
- 22. Date Report to Manufacturer (F13)

SECTION-G (only for report source 'M', others sources will be null)

- 23. Manufacturer Contact Title Name (G1)
- 24. Manufacturer Contact First Name (G1)
- 25. Manufacturer Contact Last Name (G1)
- 26. Manufacturer Contact Street 1 (G1)
- 27. Manufacturer Contact Street 2 (G1)
- 28. Manufacturer Contact City (G1)
- 29. Manufacturer Contact State Code (G1)
- 30. Manufacturer Contact Zip Code (G1)
- 31. Manufacturer Contact Zip Code Ext (G1)
- 32. Manufacturer Contact Country Code
- 33. Manufacturer Contact Postal Code
- 34. Manufacturer Contact Phone No Area Code (G1)
- 35. Manufacturer Contact Phone No Exchange (G2)
- 36. Manufacturer Contact Phone No (G2)
- 37. Manufacturer Contact Phone No Ext (G2)
- 38. Manufacturer Contact Phone No Country Code
- 39. Manufacturer Contact Phone No City Code
- 40. Manufacturer Contact Phone No Local
- 41. Manufacturer G1 Name (G1)
- 42. Manufacturer G1 Street 1 (G1)
- 43. Manufacturer G1 Street 2 (G1)
- 44. Manufacturer G1 City (G1)
- 45. Manufacturer G1 State Code (G1)
- 46. Manufacturer G1 Zip Code (G1)
- 47. Manufacturer G1 Zip Code Ext (G1)
- 48. Manufacturer G1 Country Code
- 49. Manufacturer G1 Postal Code
- 50. Date Manufacturer Received (G4)

SECTION-H

- 51. Device Date Of Manufacture (H4)
- 52. Single Use Flag (H5)
- 53. Remedial Action (H7) -- multiple source type, separate by ','

RC = Recall
RP = Repair
RL = Replace
RB = Relabeling
OT = Other
NO = Notification
IN = Inspection
PM = Patient Monitoring
MA = Modification/Adjustment
* = Invalid Data

- 54. Previous Use Code (H8)
- 55. Removal/Correction Number (H9)
- 56. Event type (H1) -- only relevant for report sourcetype 'M'

D = Death
IN = Injury
IL = Injury
IJ = Injury
M = Malfunction
O = Other
* = No answer provided

- 57. Distributor Name (F3) -- if report source code = 'M' and
- 58. Distributor Address line 1 (F3)
- 59. Distributor Address line 2 (F3)
- 60. Distributor City (F3)
- 61. Distributor State Code (F3)
- 62. Distributor Zip Code (F3)
- 63. Distributor Zip Code Ext (F3)
- 64. Report to Manufacturer (F13)
- 65. Manufacturer Name (F14)
- 66. Manufacturer Address line 1 (F14)
- 67. Manufacturer Address line 2 (F14)
- 68. Manufacturer City (F14)
- 69. Manufacturer State Code (F14)
- 70. Manufacturer Zip Code (F14)
- 71. Manufacturer Zip Code Ext (F14)

- 72. Manufacturer Country Code (F14)
- 73. Manufacturer Postal Code (F14)
- 74. Type of Report (F7) !multiple submission type, separate by ','

I = Initial submission

F = Followup

X = Extra copy received

O = Other information submitted

- 75. Source Type (G3) -- multiple source type, separate by ','

00 Other

01 Foreign

02 Study

03 Literature

04 Consumer

05 Health Professional

06 User facility

07 Company representation

08 Distributor

99 Unknown

* Invalid data

76. Date Added

77. Date Changed

78. Reporter Country Code

79. PMA PMN Number

80. Exemption Number

81. Summary Report

82. NOE Summary

DEVICE file contains following 45 fields, delimited by pipe (|), one record per line:

1. MDR Report Key

2. Device Event key

3. Implant Flag -- D6, new added; 2006

4. Date Removed Flag -- D7, new added; 2006; if flag in M or Y, print Date

U = Unknown

A = Not available

I = No information at this time

M = Month and year provided only, day defaults to 01

Y = Year provided only, day defaulted to 01, month defaulted to January

- 5. Device Sequence No -- from device report table
- 6. Date Received (from mdr_document table)

SECTION-D

- 7. Brand Name (D1)
- 8. Generic Name (D2)
- 9. Manufacturer Name (D3)
- 10. Manufacturer Address 1 (D3)
- 11. Manufacturer Address 2 (D3)
- 12. Manufacturer City (D3)
- 13. Manufacturer State Code (D3)
- 14. Manufacturer Zip Code (D3)
- 15. Manufacturer Zip Code ext (D3)
- 16. Manufacturer Country Code (D3)
- 17. Manufacturer Postal Code (D3)
- 18. Device Operator (D5)
- 19. Expiration Date of Device (D4)
- 20. Model Number (D4)
- 21. Catalog Number (D4)
- 22. Lot Number (D4)
- 23. Other ID Number (D4)
- 24. Device Availability (D10)

Y = Yes

N = No

R = Device was returned to manufacturer

* = No answer provided

- 25. Date Returned to Manufacturer (D10)
- 26. Device Report Product Code
- 27. Device Age (F9)
- 28. Device Evaluated by Manufacturer (H3)

Y = Yes

N = No

R = Device not returned to manufacturer

* = No answer provided

- 29. Combination Product Flag (G4)

Y = Yes

N = No

BASELINE SECTION (for records prior to 2009)

- 30. Baseline brand name
- 31. Baseline generic name
- 32. Baseline model no
- 33. Baseline catalog no
- 34. Baseline other id no
- 35. Baseline device family
- 36. Baseline shelf life contained in label

Y = Yes

N = No

A = Not applicable

* = No answer provided

- 37. Baseline shelf life in months
- 38. Baseline PMA flag
- 39. Baseline PMA no
- 40. Baseline 510(k) flag
- 41. Baseline 510(k) no
- 42. Baseline preamendment
- 43. Baseline transitional
- 44. Baseline 510(k exempt flag
- 45. Baseline date) first marketed
- 46. Baseline date ceased marketing

PATIENT file contains following 5 fields, delimited by pipe (|), one record per line:

- 1. MDR Report Key (from patient report table)
- 2. Patient Sequence Number (from patient report table)
- 3. Date Received (from mdr_document table)
- 4. Sequence Number||'|'|| Treatment -- multiple source type, separate by ';'
- 5. Sequence Number||'|'|| Outcome -- multiple source type, separate by ';'

L - Life Threatening

H - Hospitalization

S - Disability

C - Congenital Anomaly

R - Required Intervention

O - Other

* - Invalid Data

U - Unknown

I - No Information
A - Not Applicable
D - Death

TEXT file contains following 6 fields, delimited by pipe (|), one record per line:

1. MDR Report Key
2. MDR Text Key
3. Text Type Code (D=B5, E=H3, N=H10 from mdr_text table)
4. Patient Sequence Number (from mdr_text table)
5. Date Report (from mdr_text table)
6. Text (B5, or H3 or H10 from mdr_text table)

FOIDEVPROBLEM contains 2 fields, delimited by pipe (|), one record per line:

1. Device Problem Code
2. Problem Description

DEVICEPROBLEMCODES contains 2 fields, delimited by pipe (|), one record per line:

1. MDR Report Key
2. Device Problem Code -- (F10) new added; 2006

PATIENTPROBLEMDATA contains following 2 fields, delimited by pipe (|), one record per line:

1. Patient Problem Code
2. Problem Description

PATIENTPROBLEMCODE contains following 2 fields, delimited by pipe (|), one record per line:

1. MDR Report Key
2. Patient Problem Code

Device Operator Code Key

* INVALID DATA
0 OTHER
1 PHYSICIAN
2 NURSE
3 NON-HEALTHCARE PROFESSIONAL
oHP HEALTH PROFESSIONAL
oLP LAY USER/PATIENT
100 OTHER HEALTH CARE PROFESSIONAL
101 AUDIOLOGIST
102 DENTAL HYGIENIST

103 DIETICIAN
104 EMERGENCY MEDICAL TECHNICIAN
105 MEDICAL TECHNOLOGIST
106 NUCLEAR MEDICINE TECHNOLOGIST
107 OCCUPATIONAL THERAPIST
108 PARAMEDIC
109 PHARMACIST
110 PHLEBOTOMIST
111 PHYSICAL THERAPIST
112 PHYSICIAN ASSISTANT
113 RADIOLOGIC TECHNOLOGIST
114 RESPIRATORY THERAPIST
115 SPEECH THERAPIST
116 DENTIST
117 NURSE PRACTITIONER

300 OTHER CAREGIVERS
301 DENTAL ASSISTANT
302 HOME HEALTH AIDE
303 MEDICAL ASSISTANT
304 NURSING ASSISTANT
305 PATIENT
306 PATIENT FAMILY MEMBER OR FRIEND
307 PERSONAL CARE ASSISTANT
400 SERVICE AND TESTING PERSONNEL
401 BIOMEDICAL ENGINEER
402 HOSPITAL SERVICE TECHNICIAN
403 MEDICAL EQUIPMENT COMPANY TECHNICIAN/REPRESENTATIVE
404 PHYSICIST
405 SERVICE PERSONNEL
499 DEVICE UNATTENDED
500 RISK MANAGER
501 ADMINISTRATOR/SUPERVISOR
600 ATTORNEY
999 UNKNOWN
NA NOT APPLICABLE
NI NO INFORMATION
UNK UNKNOWN

Event Location Code Key

* INVALID DATA

000 OTHER

001 HOSPITAL

002 HOME

003 NURSING HOME

004 OUTPATIENT TREATMENT FACILITY

005 OUTPATIENT DIAGNOSTIC FACILITY

006 AMBULATORY SURGICAL FACILITY

500 HOSPITAL

501 CATHETERIZATION SUITE

502 CRITICAL CARE UNIT

503 DIALYSIS UNIT

504 EMERGENCY ROOM

505 EXAMINATION ROOM

506 LABORATORY/PATHOLOGY DEPARTMENT

507 MATERNITY WARD - NURSERY

508 OPERATING ROOM

509 OUTPATIENT CLINIC/SURGERY

510 PATIENT'S ROOM OR WARD

511 RADIOLOGY DEPARTMENT

600 AMBULATORY HEALTH CARE FACILITY

601 AMBULATORY SURGICAL CENTER

602 BLOOD BANK

603 BLOODMOBILE

604 CATHETERIZATION LAB - FREE STANDING

605 CHEMOTHERAPY CENTER

606 CLINIC - WALK IN, OTHER

607 DIALYSIS CENTER

608 DRUG CLINIC

609 IMAGING CENTER - MOBILE

610 IMAGING CENTER - STATIONARY

611 LABORATORY

612 MOBILE HEALTH UNIT

613 MRI CENTERS

614 PSYCHIATRIC CENTER - WALK IN, OTHER

615 TUBERCULOSIS CLINIC

616 URGENT CARE CENTER

617 OUTPATIENT DIAGNOSTIC FACILITY

700 LONG-TERM CARE FACILITY

701 HOSPICE
702 NURSING HOME
703 PSYCHIATRIC FACILITY
704 REHABILITATION CENTER
705 RETIREMENT HOME
810 PATIENT'S HOME
820 IN TRANSIT TO USER/MEDICAL FACILITY
830 PUBLIC VENUE
831 OUTDOORS
832 PARK
833 PLAYGROUND
834 PUBLIC BUILDING
835 SCHOOL
836 STREET
999 UNKNOWN
NA NOT APPLICABLE
NI NO INFORMATION
UNK UNKNOWN

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