

## APPENDIX IV: Assigning ED Disposition

1. This variable is very important in tracking the patient's progress through the system. At the state level, this variable is used to determine:
  - a. whether or not a patient was admitted as an inpatient
  - b. if a patient was transferred, whether the patient was transferred from the ED or after being admitted as an inpatient
  - c. whether the patient died in the ED or died after being admitted as an inpatient (miscoding may result in inaccurate inpatient mortality rates)
  - d. whether or not this record should be used in calculating length of time in the ED (direct admits are not included in these calculations)
  - e. whether or not this record should be included in the registry (if the ED disposition = DIS and there is no indication that the patient was transferred from some other facility, this record does not meet criteria for download to the state registry)
2. If the patient was discharged from the ED (ED disposition = HOME, HH, DSS, JAIL)
  - a. This record does not need to be downloaded to the state registry, UNLESS the patient came to your facility as a transfer from another facility
  - b. Admission date and time should be blank
  - c. Inpatient disposition should be NA (not applicable)
  - d. Admitting service should be NA (not applicable)
3. If the patient left the ED AMA (ED disposition = AMA)
  - a. Admission date and time should be blank
  - b. Inpatient disposition should be NA
  - c. Admitting service should be NA
4. If the patient died in the ED or was DOA (ED disposition= D, DF or DOA)
  - a. Admission date and time should be blank
  - b. Inpatient disposition should be NA (not applicable). Inpatient disposition should NOT be D (died)
  - c. Admitting service should be NA
  - d. ED disposition is D or DOA not OTHER. If the patient is sent to the morgue, this should be translated to the state code of D, not OTHER.
  - e. Outcome should be D
5. If the patient was transferred to another facility from the ED (not admitted to your facility) (ED disposition = TRANS)
  - a. Admission date and time should be blank
  - b. Inpatient disposition should be NA (not ACUTE)
  - c. Admitting service should be NA
  - d. Provide information on the facility where the patient was transferred to
6. If the patient is admitted (ED disposition = OR, ICU, DIRECT, FLOOR, OBS, ADMIT, TELE)
  - a. Provide the admission date and time
  - b. Provide the admitting service
  - c. Inpatient disposition should not be NA

7. DOA vs. death in the ED: Because of differences in how facilities assign “DOA” vs. “death in the ED”, when conducting analyses at the state level, cases will be grouped as “DOA” or “death in the ED” based on the presence or absence of vital signs on arrival to the ED.

For ED disposition, registrars can assign “DOA” vs. “death in the ED” as defined in their own facility. The critical information needed for the state registry is documentation of the presence or absence of vital signs on arrival to the ED.