<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
1	Patient ID (patient_id)	11	Use First 10 Characters only for SEER cases.
	SEER Cases (Patient ID)		
1	SEER Registry	2	02 = Connecticut 20 = Detroit 21 = Hawaii 22 = Iowa 23 = New Mexico 25 = Seattle 26 = Utah 42 = Kentucky 43 = Louisiana 44 = New Jersey 87 = Georgia 88 = California
3	Case Number	8	Encrypted SEER Case Number
11	Filler	1	Blank Space
	Non Cancer Patients – (Patient ID)		
1	HIC ID (hicbic)	11	Encrypted ID for Non Cancer Patients
12	Encrypted Assessment ID (asmt_id)	15	Unique assessment ID when combined with state id
27	Target Date (Date of Assessment) (trgt_dt)	8	MMDDYYYY
35	State Code (state_cd)	2	US Postal state abbreviations – 2 letters
37	Facility Internal ID (fac_prvdr_intrnl_id)	12	Encrypted ID for nursing home or swing bed provider
49	Item Subset Code (ISC) (mds_itm_sbst_cd)	4	Type of assessment. (Refer to Appendix table MDS_ITM_SBST_CD)
53	Submission Date (submsn_dt)	8	MMDDYYYY
61	Submission Required Code (SUB_REQ) (rqrd_submsn_cd)	1	1 = Neither federal nor state2 = State but not federal3 = Federal
62	Correction Number (crctn_num)	12	Sequential of assessment

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
74	Correction Status Code (mds_crctn_stus_cd)	1	C = Current assessment I = Inactivation requested M = Modified by subsequent submission
75	Data Submission Specification Version Code (spec_vrsn_cd)	10	Version for xml file
85	Facility Document Identifier (fac_doc_id)	20	Unique identifier of records submitted
105	Item Set Version Code (itm_set_vrsn_cd)	10	
115	Encrypted Original Assessment ID (orgnl_asmt_id)	12	Unique ID where correction number is "00"
127	Prior Assessment Staff Assessment of Resident Mood (PHQ-9) Total Severity Score Number (v0100f_prior_stf_mood_scre _num)	2	
129	Processed Timestamp (prcsd_ts)	8	MMDDYYYY
137	Resident Age (c_rsdnt_age_num)	8	System calculated
145	Resident Match Criteria ID (rsdnt_match_crtia_id)	12	
157	Software Product Name (sftwr_prod_name)	50	
207	Software Product Version (sftwr_prod_vrsn_cd)	20	
227	CBSA Urban/Rural Code (c_urbn_rrl_cd)	1	R = Rural U = Urban
228	Recalculated Z0100A (c_mdcr_hipps_txt)	7	Calculated Medicare Part A
235	Recalculated Z0100B (c_mdcr_rug_vrsn_txt)	10	Calculated Medicare Part A
245	Recalculated Z0100C (c_mdcr_stay_cd)	1	0 = Short stay logic not used 1 = Short stay logic used
246	CMI Set for Recalculated Z0100A (c_mdcr_set_cd)	3	

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
249	CMI Value for Recalculated Z0100A (c_mdcr_cmi_txt)	7	From Part A RUG
256	Recalculated Z0150A (c_mdcr_nt_hipps_txt)	7	Non-therapy Part A
263	Recalculated Z0150B (c_mdcr_nt_rug_vrsn_txt)	10	Non-therapy Part A
273	CMI Set for Recalculated Z0150A (c_mdcr_nt_set_cd)	3	Non-therapy set code
276	CMI Value for Recalculated Z0150A (c_mdcr_nt_cmi_txt)	7	Non-therapy Case Mix Index (CMI) value
283	Recalculated Z0200A (c_state_rug_grp_txt)	10	Calculated state Medicaid
293	Recalculated Z0250B (c_state_2_rug_vrsn_txt)	10	Calculated state Medicaid
303	CMI Set for Recalculated Z0250A (c_state_2_set_cd)	3	Calculated state Medicaid
306	CMI Value for Recalculated Z0250A (c_state_2_cmi_txt)	7	Calculated state Medicaid
313	Medicare RUG III Index Maximized Version (c_mdcr_rug3_idx_max_vrsn_ txt)	10	
323	Medicare RUG III Index Maximized CMI Set (c_mdcr_rug3_idx_max_cmi_ set_cd)	3	Case Mix Index (CMI) text
326	Medicare RUG III Index Maximized CMI Value (c_mdcr_rug3_idx_max_cmi_t xt)	7	Case Mix Index (CMI) set code
333	Medicare RUG III Hierarchical Version (c_mdcr_rug3_hirchcl_vrsn_t xt)	10	RUG group version code
343	Medicare RUG IV Hierarchical Group (c_mdcr_rug4_hirchcl_grp_txt)	10	RUG group code

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
353	Medicare RUG IV Hierarchical Version (c_mdcr_rug4_hirchcl_vrsn_t xt)	10	RUG group version code
363	A0100A Facility National Provider Identifier (NPI) (a0100a_npi_num)	10	The NPI assigned for the facility or provider. Encrypted Data. * Special permission required to receive unencrypted data.
373	A0100B Facility CMS Certification Number (CCN) (a0100b_cms_crtfctn_num)	12	Facility or provider's CMS certification (Medicare) number. Encrypted Data. * Special permission required to receive unencrypted data.
385	A0100C State Provider Number (a0100c_state_prvdr_num)	15	Facility or provider's state-assigned provider number. Encrypted Data. * Special permission required to receive unencrypted data.
400	A0200 Type of Provider (a0200_prvdr_type_cd)	1	1 = Nursing home (SNF/NF) 2 = Swing bed
401	A0310A Federal OBRA Reason for Assessment Code (a0310a_fed_obra_cd)	2	(Refer to appendix table MDS_FED_OBRA_CD)
403	A0310B PPS Assessment Code (a0310b_pps_cd)	2	(Refer to appendix table MDS_PPS_CD)
405	A0310C PPS Other Medicare Required Assessment (OMRA) Code (a0310c_pps_omra_cd)	1	0 = No 1 = Start of therapy assessment 2 = End of therapy assessment 3 = Both Start and End of therapy assessment
406	A0310D Swing Bed Clinical Change Code (a0310d_sb_cIncl_chg_cd)	1	0 = No 1 = Yes
407	A0310E First Assessment Since Most Recent Admission Code (a0310e_first_since_admsn_c d)	1	0 = No 1 = Yes

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
408	A0310F Entry/Discharge Code (a0310f_entry_dschrg_cd)	2	01 = Entry record 10 = Discharge assessment - return not anticipated 11 = Discharge assessment - return anticipated 12 = Death in facility record 99=Not entry/discharge record
410	A0410 Submission Required Code (a0410_rqrd_submsn_cd)	1	 1 = Neither federal nor state required submission 2 = State but not federal required submission 3 = Federal required submission
411	A1100A Resident Need Interpreter Code (a1100a_need_intrptr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to determine
412	A1100B Preferred Language (a1100b_intrptr_lang_txt)	15	
427	A1200 Marital Status Code (a1200_mrtl_stus_cd)	1	 - = Not assessed/no information 1 = Never married 2 = Married 3 = Widowed 4 = Separated 5 = Divorced
428	A1300D Lifetime Occupation(s) Text (a1300d_lftm_ocptn_txt)	23	
451	A1500 Preadmission Screening and Resident Review (PASRR) Code (a1500_pasrr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Not a Medicaid certified unit
452	A1550A MR/DD Status: Down Syndrome Code (a1550a_down_syndrm_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
453	A1550B MR/DD Status: Autism Code (a1550b_autsm_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
454	A1550C MR/DD Status: Epilepsy Code (a1550c_eplpsy_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	<u>NOTES</u>
455	A1550D MR/DD Status: Other Organic MR/DD Condition Code (a1550d_othr_orgnc_mr_dd_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
456	A1550E MR/DD Status: MR/DD With No Organic Condition Code (a1550e_othr_mr_dd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
457	A1550Z MR/DD Status: None of the Above (a1550z_no_mr_dd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
458	A1600 Entry Date (a1600_entry_dt)	8	MMDDYYYY
466	A1700 Type of Entry Code (a1700_entry_type_cd)	1	1 = Admission 2 = Re-entry
467	A1800 Entered From Code (a1800_entrd_from_txt)	2	From where the resident was admitted
469	A2000 Discharge Date (a2000_dschrg_dt)	8	MMDDYYYY
477	A2100 Discharge Status Code (a2100_dschrg_stus_cd)	2	(Refer to appendix table MDS_DSCHRG_STUS_CD)
479	A2200 Previous Assessment Reference Date For Significant Correction (a2200_prvs_asmt_rfrnc_dt)	8	MMDDYYYY
487	A2300 Assessment Reference Date (a2300_asmt_rfrnc_dt)	8	MMDDYYYY
495	A2400A Has Resident Had a Medicare Stay Code Since Most Recent Admission (a2400a_mdcr_stay_cd)	1	0 = No 1 = Yes
496	A2400B Start Date of Most Recent Medicare Stay (a2400b_mdcr_stay_strt_dt)	8	MMDDYYYY
504	A2400C End Date of Most Recent Medicare Stay (a2400c_mdcr_stay_end_dt)	8	MMDDYYYY

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	NOTES
512	B0100 Comatose Code (b0100_cmts_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
513	B0200 Hearing Code (b0200_hearg_cd)	1	 - = Not assessed/no information 0 = Adequate-no difficulty in normal activities 1 = Minimal difficulty-difficulty in some environments 2 = Moderate difficulty-speaker has to increase volume and speak distinctly 3 = High impaired-absence of useful hearing
514	B0300 Hearing Aide Code (b0300_hearg_aid_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
515	B0600 Speech Clarity Code (b0600_spch_clrty_cd)	1	 - = Not assessed/no information 0 = Clear Speech-distinct intelligible words 1 = Unclear speech-slurred or mumbled words 2 = No speech-absence of spoken word
516	B0700 Makes Self Understood Code (b0700_self_undrstod_cd)	1	 - = Not assessed/no information 0 = Understood 1 = Usually understood-difficulty with some words or finishing thoughts 2 = Sometimes understood-ability is limited to making concrete requests 3 = Rarely/never understood
517	B0800 Ability to Understand Others Code (b0800_undrst_othr_cd)	1	 - = Not assessed/no information 0 = Understands-clear comprehension 1 = Usually understands, comprehends most conversation 2 = Sometimes understands-responds adequately to simple, direct communication only 3 = Rarely/never understands
518	B1000 Vision Code (b1000_vsn_cd)	1	 - = Not assessed/no information 0 = Adequate-sees fine detail 1 = Impaired-sees large print 2 = Moderately impaired-limited vision 3 = Highly impaired-object identification in question 4 = Severely impaired-no vision or sees only light, colors or shapes

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<u>COL</u>	FIELD	<u>LENGTH</u>	<u>NOTES</u>
519	B1200 Corrective Lenses Code (b1200_crctv_lens_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
520	C0100 Brief Interview for Mental Status Be Conducted Code (c0100_cndct_mentl_stus_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
521	C0200 BIMS: Number of Words Repeated After First Attempt (c0200_word_rpet_first_atmpt _cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
522	C0300A BIMS: Temporal Orientation - Able to Report Correct Year (c0300a_rpt_crct_yr_cd)	1	 - = Not assessed/no information 0 = Missed by > 5 years or no answer 1 = Missed by 2-5 years 2 = Missed by 1 year 3 = Correct
523	C0300B BIMS: Temporal Orientation - Able to Report Correct Month (c0300b_rpt_crct_mo_cd)	1	 - = Not assessed/no information 0 = Missed by > 1 month or no answer 1 = Missed by 6 days to 1 month 2 = Accurate within 5 days
524	C0300C BIMS: Temporal Orientation - Able to Report Correct Day of Week (c0300c_rpt_crct_day_cd)	1	 - = Not assessed/no information 0 = Incorrect or no answer 1 = Correct
525	C0400A BIMS: Recall - Able to Recall Sock (c0400a_rcall_first_word_cd)	1	 - = Not assessed/no information 0 = No-could not recall 1 = Yes, after cueing ("something to wear") 2 = Yes, no cue required
526	C0400B BIMS: Recall - Able to Recall Blue (c0400b_rcall_scnd_word_cd)	1	 - = Not assessed/no information 0 = No-could not recall 1 = Yes, after cueing ("a color") 2 = Yes, no cue required
527	C0400C BIMS: Recall - Able to Recall Bed (c0400c_rcall_thrd_word_cd)	1	 - = Not assessed/no information 0 = No-could not recall 1 = Yes, after cueing ("a piece of furniture") 2 = Yes, no cue required
528	C0500 Brief Interview for Mental Status (BIMS) Score Number (c0500_bims_scre_num)	2	- = Not assessed/no information

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
530	C0600 Staff to Conduct Brief Interview for Mental Status (c0600_cndct_stf_mentl_stus _cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
531	C0700 Staff Assessment of Mental Status - Short Term Memory Code (c0700_shrt_term_memry_cd)	1	 - = Not assessed/no information 0 = Memory OK 1 = Memory problem
532	C0800 Staff Assessment of Mental Status - Long Term Memory Code (c0800_lt_memry_cd)	1	NEED CHECK - = Not assessed/no information 0 or 1 = Memory OK 1 or 2 = Memory problem
533	C0900A Staff Assessment of Mental Status - Recalls Current Season Code (c0900a_rcall_crnt_seasn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
534	C0900B Staff Assessment of Mental Status - Recalls Location of Room Code (c0900b_rcall_lctn_room_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
535	C0900C Staff Assessment of Mental Status - Recalls Staff Name Code (c0900c_rcall_stf_name_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
536	C0900D Staff Assessment of Mental Status - Recalls Nursing Home Code (c0900d_rcall_nh_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
537	C0900Z Staff Assessment of Mental Status - Recalls None of Above Code (c0900z_rcall_none_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
538	C1000 Cognitive Skills for Decision Making Code (c1000_dcsn_mkng_cd)	1	 - = Not assessed/no information 0 = Independent-decisions consistent / reasonable 1 = Modified independence-some difficulty in new situations only 2 = Moderately impaired-decisions poor; cues/supervision required

3 = Severely impaired-never / rarely made decisions

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
539	C1300A Signs and Symptoms of Delirium - Inattention (c1300a_inattntn_cd)	1	 - = Not assessed/no information 0 = Behavior not present 1 = Behavior continuosusly present 2 = Behavior present, flutuates
540	C1300B Signs and Symptoms of Delirium - Disorganized Thinking (c1300b_disorgnz_thnkg_cd)	1	 - = Not assessed/no information 0 = Behavior not present 1 = Behavior continuosusly present 2 = Behavior present, flutuates
541	C1300C Signs and Symptoms of Delirium - Altered Level of Consciousness (c1300c_altrd_conscs_cd)	1	 - = Not assessed/no information 0 = Behavior not present 1 = Behavior continuosusly present 2 = Behavior present, flutuates
542	C1300D Signs and Symptoms of Delirium - Psychomotor Retardation (c1300d_psychmtr_rtrdtn_cd)	1	 - = Not assessed/no information 0 = Behavior not present 1 = Behavior continuosusly present 2 = Behavior present, flutuates
543	C1600 Acute Onset Mental Status Change (c1600_chg_mentl_stus_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
544	D0100 Resident Mood Interview Be Conducted Code (d0100_cndct_mood_cd)	1	 - = Not assessed/no information 0 = No(resident is rarely/never understood) 1 = Yes
545	D0200A1 Resident Mood Interview - Interest Loss Code (d0200a1_intrst_loss_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
546	D0200A2 Resident Mood Interview - Interest Loss Frequency Code (d0200a2_intrst_loss_freq_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
547	D0200B1 Resident Mood Interview - Feel Down Code (d0200b1_feel_down_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
548	D0200B2 Resident Mood Interview - Feel Down Frequency Code (d0200b2_feel_down_freq_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response

<u>COL</u>	FIELD	<u>LENGTH</u>	<u>NOTES</u>
549	D0200C1 Resident Mood Interview - Trouble Sleep Code (d0200c1_trbl_sleep_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
550	D0200C2 Resident Mood Interview - Trouble Sleep Frequency Code (d0200c2_trbl_sleep_freq_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
551	D0200D1 Resident Mood Interview - Little Energy Code (d0200d1_ItI_enrgy_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
552	D0200D2 Resident Mood Interview - Little Energy Frequency Code (d0200d2_ItI_enrgy_freq_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
553	D0200E1 Resident Mood Interview - Poor Appetite Code (d0200e1_poor_aptit_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
554	D0200E2 Resident Mood Interview - Poor Appetite Frequency Code (d0200e2_poor_aptit_freq_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
555	D0200F1 Resident Mood Interview - Self Depreciation Code (d0200f1_self_dprctn_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
556	D0200F2 Resident Mood Interview - Self Depreciation Frequency Code (d0200f2_self_dprctn_freq_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)

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<u>COL</u> 557	<u>FIELD</u> D0200G1 Resident Mood Interview - Lack of Concentration Code (d0200g1_cncntrtn_cd)	<u>LENGTH</u> 1	<u>NOTES</u> - = Not assessed/no information 0 = No 1 = Yes 9 = No response
558	D0200G2 Resident Mood Interview - Lack of Concentration Frequency Code (d0200g2_cncntrtn_freq_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
559	D0200H1 Resident Mood Interview - Movement Different Code (d0200h1_mvmt_dfrnt_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
560	D0200H2 Resident Mood Interview - Movement Different Frequency Code (d0200h2_mvmt_dfrnt_freq_c d)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
561	D0200I1 Resident Mood Interview - Negative Statement Code (d0200i1_ngtv_state_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = No response
562	D0200I2 Resident Mood Interview - Negative Statement Frequency Code (d0200i2_ngtv_state_freq_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
563	D0300 Resident Mood Interview - Total Severity Mood Score Code (d0300_mood_scre_num)	2	 - = Not assessed/no information
565	D0350 Resident Mood Interview - Negative Statements Notify Staff Code (d0350_ngtv_state_ntfy_stf_c d)	1	 - = Not assessed/no information 0 = No 1 = Yes
566	D0500A1 Staff Assessment of Resident Mood - Interest Loss Code (d0500a1_stf_intrst_loss_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes

<u>COL</u>	<u>FIELD</u>

<u>LENGTH</u>

1

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- 567 D0500A2 Staff Assessment of Resident Mood - Interest Loss Frequency Code (d0500a2_stf_intrstloss_freq_ cd)
- 568 D0500B1 Staff Assessment of 1 Resident Mood - Feel Down Code (d0500b1_stf_feel_down_cd)
- 569 D0500B2 Staff Assessment of 1 Resident Mood - Feel Down Frequency Code (d0500b2_stf_feel_down_freq _cd)
- 570 D0500C1 Staff Assessment of 1 Resident Mood - Trouble Sleep Code (d0500c1 stf trbl sleep cd)
- 571 D0500C2 Staff Assessment of 1 Resident Mood - Trouble Sleep Frequency Code (d0500c2_stf_trbl_sleep_freq_ cd)
- 572 D0500D1 Staff Assessment of 1 Resident Mood - Little Energy Code (d0500d1 stf Itl enrgy cd)
- 573 D0500D2 Staff Assessment of 1 Resident Mood - Little Energy Frequency Code (d0500d2_stf_ltl_enrgy_freq_c d)
- 574 D0500E1 Staff Assessment of 1 Resident Mood - Poor Appetite Code (d0500e1_stf_poor_aptit_cd)
- 575 D0500E2 Staff Assessment of Resident Mood - Poor Appetite Frequency Code (d0500e2_stf_poor_aptit_freq _cd)

<u>NOTES</u>

- = Not assessed/no information 0 =Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day) - = Not assessed/no information 0 = No1 = Yes- = Not assessed/no information 0 =Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day) - = Not assessed/no information 0 = No1 = Yes- = Not assessed/no information 0 =Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day) - = Not assessed/no information 0 = No1 = Yes- = Not assessed/no information 0 =Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day) - = Not assessed/no information 0 = No1 = Yes- = Not assessed/no information 0 =Never or 1 day 1 = 2-6 days (several days)
 - 2 = 7-11 days (half or more of the days)
 - 3 = 12-14 days (nearly every day)

COL	FIELD	<u>LENGTH</u>	NOTES
576	D0500F1 Staff Assessment of Resident Mood - Self Depreciation Code (d0500f1_stf_self_dprctn_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
577	D0500F2 Staff Assessment of Resident Mood - Self Depreciation Frequency Code (d0500f2_stf_selfdprctn_freq_ cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
578	D0500G1 Staff Assessment of Resident Mood - Concentration Code (d0500g1_stf_cncntrtn_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
579	D0500G2 Staff Assessment of Resident Mood - Concentration Frequency Code (d0500g2_stf_cncntrtn_freq_c d)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
580	D0500H1 Staff Assessment of Resident Mood - Movement Different Code (d0500h1_stf_mvmt_dfrnt_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
581	D0500H2 Staff Assessment of Resident Mood - Movement Different Frequency Code (d0500h2_stf_mvmt_dfrnt_fre q_cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
582	D0500I1 Staff Assessment of Resident Mood - Negative Statement Code (d0500i1_stf_ngtv_state_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
583	D0500I2 Staff Assessment of Resident Mood - Negative Statement Frequency Code (d0500i2_stf_ngtv_state_freq_ cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
584	D0500J1 Staff Assessment of Resident Mood - Short Temper Code (d0500j1_stf_shrt_tmpr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
585	D0500J2 Staff Assessment of Resident Mood - Short Temper Frequency Code (d0500j2_stf_shrt_tmpr_freq_ cd)	1	 - = Not assessed/no information 0 = Never or 1 day 1 = 2-6 days (several days) 2 = 7-11 days (half or more of the days) 3 = 12-14 days (nearly every day)
586	D0600 Staff Assessment Total Severity Mood Score (d0600_stf_mood_scre_num)	2	 - = Not assessed/no information
588	D0650 Staff Assessment of Resident Mood - Negative Statement Notify Code (d0650_stf_ngtv_state_ntfy_c d)	1	 - = Not assessed/no information 0 = No 1 = Yes
589	E0100A Behavior: Hallucinations Code (e0100a_hllcntn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
590	E0100B Behavior: Delusion Code (e0100b_dIsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
591	E0100Z Behavior: No Psychosis Code (e0100z_no_psychosis_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
592	E0200A Behavior: Physical Behavioral Code (e0200a_phys_bhvrl_cd)	1	 - = Not assessed/no information 0 = Behavior not exhibited 1 = Behavior of this type occurred 1 to 3 days 2 = Behavior of this type occurred 4 to 6 days 3 = Behavior of this type occurred daily
593	E0200B Behavior: Verbal Behavioral Code (e0200b_vrbl_bhvrl_cd)	1	 - = Not assessed/no information 0 = Behavior not exhibited 1 = Behavior of this type occurred 1 to 3 days 2 = Behavior of this type occurred 4 to 6 days 3 = Behavior of this type occurred daily

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
594	E0200C Behavior: Other Behavioral Code (e0200c_othr_bhvrl_cd)	1	 - = Not assessed/no information 0 = Behavior not exhibited 1 = Behavior of this type occurred 1 to 3 days 2 = Behavior of this type occurred 4 to 6 days 3 = Behavior of this type occurred daily
595	E0300 Overall Presence of Behavioral Symptoms (e0300_bhvr_prsnt_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
596	E0500A Behavior Impact on Resident: Risk to Injure Self (e0500a_bhvr_injr_self_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
597	E0500B Behavior Impact on Resident: Interferes With Care (e0500b_bhvr_intrfr_care_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
598	E0500C Behavior Impact on Resident: Interferes With Participation (e0500c_bhvr_intrfr_prtcptn_c d)	1	 - = Not assessed/no information 0 = No 1 = Yes
599	E0600A Behavior Impact on Others: Risk to Injure Others (e0600a_bhvr_injr_othr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
600	E0600B Behavior Impact on Others: Intrude On Privacy of Others (e0600b_bhvr_intrd_prvcy_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
601	E0600C Behavior Impact on Others: Disrupt Care or Living Environment (e0600c_bhvr_dsrupt_envrmn t_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
602	E0800 Rejection of Care: Presence and Frequency (e0800_rjct_evaltn_cd)	1	 - = Not assessed/no information 0 = Behavior not exhibited 1 = Behavior of this type occurred 1 to 3 days 2 = Behavior of this type occurred 4 to 6 days 3 = Behavior of this type occurred daily

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<u>COL</u> 603	FIELD E0900 Wandering: Presence and Frequency (e0900_wndr_cd)	<u>LENGTH</u> 1	NOTES - = Not assessed/no information 0 = Behavior not exhibited 1 = Behavior of this type occurred 1 to 3 days 2 = Behavior of this type occurred 4 to 6 days 3 = Behavior of this type occurred daily
604	E1000A Wander Risk Impact (e1000a_wndr_risk_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
605	E1000B Wandering Intrudes on Privacy of Others (e1000b_wndr_intrd_prvcy_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
606	E1100 Change in Behavior or Other Symptoms (e1100_bhvr_chg_prior_cd)	1	 - = Not assessed/no information 0 = Same 1 = Improved 2 = Worse 3 = N/A because not prior MDS assessment
607	F0300 Should Daily and Activity Preference Interview Be Conducted (f0300_cndct_actvty_cd)	1	 - = Not assessed/no information 0 = No (resident is rarely/never understood and family / significant other not available) 1 = Yes
608	F0400A Interview for Daily Preferences: Chooses Clothes Code (f0400a_dress_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
609	F0400B Interview for Daily Preferences: Care Personal Items Code (f0400b_care_prsnl_itm_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
610	F0400C Interview for Daily Preferences: Bathing Option Code (f0400c_bathg_optn_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
611	F0400D Interview for Daily Preferences: Snack Between Meals Code (f0400d_snack_btwn_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
612	F0400E Interview for Daily Preferences: Choose Bed Time Code (f0400e_bed_time_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
613	F0400F Interview for Daily Preferences: Family Involvement Code (f0400f_fmly_invImt_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
614	F0400G Interview for Daily Preferences: Private Phone Time Code (f0400g_prvt_phne_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
615	F0400H Interview for Daily Preferences: Lock Item Code (f0400h_lock_itm_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice

9 = No response or non-responsive

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
616	F0500A Interview for Activity Preferences: Reading Materials Available Code (f0500a_readg_avlbl_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
617	F0500B Interview for Activity Preferences: Music Code (f0500b_music_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
618	F0500C Interview for Activity Preferences: Animal Presence Code (f0500c_anml_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
619	F0500D Interview for Activity Preferences: News Code (f0500d_news_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
620	F0500E Interview for Activity Preferences: Group Activity Code (f0500e_grp_actvty_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
621	F0500F Interview for Activity Preferences: Favorite Activity Code (f0500f_fvrt_actvty_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
622	F0500G Interview for Activity Preferences: Time Outdoors Code (f0500g_frsh_air_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
623	F0500H Interview for Activity Preferences: Religion Code (f0500h_rlgn_cd)	1	 - = Not assessed/no information 1 = Very important 2 = Somewhat important 3 = Not very important 4 = Not important at all 5 = Important, but can't do or no choice 9 = No response or non-responsive
624	F0600 Daily and Activity Preferences Primary Respondent Code (f0600_rspndt_actvty_cd)	1	 - = Not assessed/no information 1 = Resident 2 = Family or significant other 9 = Interview could not be completed by resident or family/significant other
625	F0700 Conduct Staff Assessment of Daily and Activity Preferences Code (f0700_stf_cndct_actvty_cd)	1	 - = Not assessed/no information 0 = No (because Interview for Daily Activity Preferences (F0400 and F0500) was completed by resident or family/significant other) 1 = Yes (because 3 or more items in Interview for Daily Activity Preferences (F0400 and F0500) were not completed by resident or family/significant other
626	F0800A Staff Assessment: Chooses Clothes Code (f0800a_stf_dress_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
627	F0800B Staff Assessment: Care Personal Item Code (f0800b_stf_care_prsnl_itm_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
628	F0800C Staff Assessment: Tub Bath Code (f0800c_stf_tub_bath_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
629	F0800D Staff Assessment: Shower Code (f0800d_stf_shwr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
630	F0800E Staff Assessment: Bed Bath Code (f0800e_stf_bed_bath_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
631	F0800F Staff Assessment: Sponge Bath Code (f0800f_stf_spng_bath_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
632	F0800G Staff Assessment: Snacks Between Code (f0800g_stf_snack_btwn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
633	F0800H Staff Assessment: Bed Time Code (f0800h_stf_bed_time_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
634	F0800I Staff Assessment: Family Involvement Code (f0800i_stf_fmly_invlvmt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
635	F0800J Staff Assessment: Private Phone Code (f0800j_stf_prvt_phne_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
636	F0800K Staff Assessment: Lock Item Code (f0800k_stf_lock_itm_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
637	F0800L Staff Assessment: Reading Materials Available Code (f0800I_stf_readg_avlbl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
638	F0800M Staff Assessment: Music Code (f0800m_stf_music_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
639	F0800N Staff Assessment: Animal Presence Code (f0800n_stf_anml_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
640	F0800O Staff Assessment: News Code (f0800o_stf_news_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
641	F0800P Staff Assessment: Group Activity Code (f0800p_stf_grp_actvty_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
642	F0800Q Staff Assessment: Favorite Activity Code (f0800q_stf_fvrt_actvty_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
643	F0800R Staff Assessment: Time Away Nursing Home Code (f0800r_stf_time_away_nh_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
644	F0800S Staff Assessment: Time Outdoors Code (f0800s_stf_frsh_air_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
645	F0800T Staff Assessment: Participating in Religious Activities Code (f0800t_stf_rlgn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
646	F0800Z Staff Assessment: None of Above Activity Code (f0800z_stf_no_actvty_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
647	G0100F2 ADL Assistance: Locomotion Off Support Provided Code (g0110f2_locomtn_off_sprt_c d)	1	(Refer to appendix table MDS_ SPRT_CD)
648	G0110A1 ADL Assistance: Bed Mobility Self Performance Code (g0110a1_bed_mblty_self_cd)	1	(Refer to appendix table MDS_ SELF_CD)
649	G0110A2 ADL Assistance: Bed Mobility Support Provided Code (g0110a2_bed_mblty_sprt_cd)	1	(Refer to appendix table MDS_ SPRT_CD)
650	G0110B1 ADL Assistance: Transfer Self Performance Code (g0110b1_trnsfr_self_cd)	1	(Refer to appendix table MDS_ SELF_CD)
651	G0110B2 ADL Assistance: Transfer Self Support Provided Code (g0110b2_trnsfr_sprt_cd)	1	(Refer to appendix table MDS_ SPRT_CD)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
652	G0110C1 ADL Assistance: Walk In Room Self Performance Code	1	(Refer to appendix table MDS_SELF_CD)
	(g0110c1_wlk_room_self_cd)		
653	G0110C2 ADL Assistance: Walk In Room Support Provided Code	1	(Refer to appendix table MDS_ SPRT_CD)
	(g0110c2_wlk_room_sprt_cd)		
654	G0110D1 ADL Assistance: Walk In Corridor Self Performance Code (g0110d1_wlk_crdr_self_cd)	1	(Refer to appendix table MDS_SELF_CD)
655	G0110D2 ADL Assistance: Walk In Corridor Self Support Provided Code (g0110d2_wlk_crdr_sprt_cd)	1	(Refer to appendix table MDS_SPRT_CD)
656	G0110E1 ADL Assistance: Locomotion On Self Performance Code (g0110e1_locomtn_on_self_c d)	1	(Refer to appendix table MDS_SELF_CD)
657	G0110E2 ADL Assistance: Locomotion On Support Provided Code (g0110e2_locomtn_on_sprt_c d)	1	(Refer to appendix table MDS_ SPRT_CD)
658	G0110F1 ADL Assistance: Locomotion Off Self Performance Code (g0110f1_locomtn_off_self_cd)	1	(Refer to appendix table MDS_ SELF_CD)
659	G0110G1 ADL Assistance: Dress Self Performance Code (g0110g1_dress_self_cd)	1	(Refer to appendix table MDSSELF_CD)
660	G0110G2 ADL Assistance: Dress Support Provided Code (g0110g2_dress_sprt_cd)	1	(Refer to appendix table MDS_SPRT_CD)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
661	G0110H1 ADL Assistance: Eating Self Performance Code (g0110h1_eatg_self_cd)	1	(Refer to appendix table MDSSELF_CD)
662	G0110H2 ADL Assistance: Eating Support Provided Code (g0110h2_eatg_sprt_cd)	1	(Refer to appendix table MDS_ SPRT_CD)
663	G0110I1 ADL Assistance: Toileting Self Performance Code (g0110i1_toiltg_self_cd)	1	(Refer to appendix table MDSSELF_CD)
664	G0110I2 ADL Assistance: Toileting Support Provided Code (g0110i2_toiltg_sprt_cd)	1	(Refer to appendix table MDS_ SPRT_CD)
665	G0110J1 ADL Assistance: Personal Hygiene Self Performance Code (g0110j1_prsnl_hygne_self_c d)	1	(Refer to appendix table MDSSELF_CD)
666	G0110J2 ADL Assistance: Personal Hygiene Support Provided Code (g0110j2_prsnl_hygne_sprt_c d)	1	(Refer to appendix table MDS_ SPRT_CD)
667	G0120A ADL Assistance: Bathing Self Performance Code (g0120a_bathg_self_cd)	1	(Refer to appendix table MDSSELF_CD)
668	G0120B ADL Assistance: Bathing Support Provided Code (g0120b_bathg_sprt_cd)	1	(Refer to appendix table MDS_ SPRT_CD)
669	G0300A Balance During Seated to Standing Position Code (g0300a_bal_seat_stndg_cd)	1	 - = Not assessed/no information 0 = Steady at all times 1 = Not steady, but able to stabilize without human assistance 2 = Not steady, only able to stabilize with human assistance 8 = Activity did not occur

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
670	G0300B Balance During Walking Code (g0300b_bal_wlkg_cd)	1	 - = Not assessed/no information 0 = Steady at all times 1 = Not steady, but able to stabilize without human assistance 2 = Not steady, only able to stabilize with human assistance 8 = Activity did not occur
671	G0300C Balance When Turning Around Code (g0300c_bal_trng_arnd_cd)	1	 - = Not assessed/no information 0 = Steady at all times 1 = Not steady, but able to stabilize without human assistance 2 = Not steady, only able to stabilize with human assistance 8 = Activity did not occur
672	G0300D Balance Moving On and Off Toilet Code (g0300d_bal_toilt_cd)	1	 - = Not assessed/no information 0 = Steady at all times 1 = Not steady, but able to stabilize without human assistance 2 = Not steady, only able to stabilize with human assistance 8 = Activity did not occur
673	G0300E Balance With Surface to Surface Transfer Code (g0300e_bal_srfc_trnsfr_cd)	1	 - = Not assessed/no information 0 = Steady at all times 1 = Not steady, but able to stabilize without human assistance 2 = Not steady, only able to stabilize with human assistance 8 = Activity did not occur
674	G0400A Functional Limitation in ROM: Upper Extremity Motion Code (g0400a_upr_xtrmty_mtn_cd)	1	 - = Not assessed/no information 0 = No impairment 1 = Impairment on one side 2 = Impairment on both sides
675	G0400B Functional Limitation in ROM: Lower Extremity Motion Code (g0400b_lwr_xtrmty_mtn_cd)	1	 - = Not assessed/no information 0 = No impairment 1 = Impairment on one side 2 = Impairment on both sides
676	G0600A Mobility Devices: Cane Code (g0600a_cane_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
677	G0600B Mobility Devices: Walker Code (g0600b_wlkr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
678	G0600C Mobility Devices: Wheelchair Code (g0600c_whlchr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
679	G0600D Mobility Devices: Limb Prosthesis Code (g0600d_limb_prsthtc_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
680	G0600Z Mobility Devices: None of Above Code (g0600z_no_mblty_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
681	G0900A Functional Rehabilitation Potential: Resident Increased Independence Code (g0900a_incrs_indpndnc_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to Determine
682	G0900B Functional Rehabilitation Potential: Staff Increased Independence Code (g0900b_stf_incrs_indpndnc_ cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
683	H0100A Bladder and Bowel Appliances: Indwelling Catheter Code (h0100a_indwlg_cthtr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
684	H0100B Bladder and Bowel Appliances: External Catheter Code (h0100b_extrnl_cthtr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
685	H0100C Bladder and Bowel Appliances: Ostomy Code (h0100c_ostmy_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
686	H0100D Bladder and Bowel Appliances: Intermittent Catheter Code (h0100d_intrmtnt_cthtr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	NOTES
687	H0100Z Bladder and Bowel Appliances: No Urinary Appliance Code (h0100z_no_urnry_apInc_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
688	H0200A Urinary Toileting Program: Trial Toileting Program Code (h0200a_tril_toiltg_pgm_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
689	H0200B Urinary Toileting Program: Response To Toileting Program Code (h0200b_rspns_toiltg_pgm_c d)	1	-=Not assessed/no information 0=No improvement 1=Decreased wetness 2=Completely dry (continent) 9=Unable to determine or trial in progress
690	H0200C Urinary Toileting Program: Current Toileting Program Code (h0200c_crnt_toiltg_pgm_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
691	H0300 Urinary Continence Code (h0300_urnry_cntnc_cd)	1	(Refer to appendix table MDS_CNTNC_CD)
692	H0400 Bowel Continence Code (h0400_bwl_cntnc_cd)	1	(Refer to appendix table MDS_CNTNC_CD)
693	H0500 Bowel Toileting Program Code (h0500_bwl_toiltg_pgm_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
694	H0600 Constipation Code (h0600_constptn_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
695	I0100 Active Diagnoses: Cancer Code (i0100_cncr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
696	I0200 Active Diagnoses: Anemia Code (i0200_anemia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
697	I0300 Active Diagnoses: Dysrhythmia Code (i0300_dysrhythmia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
698	I0400 Active Diagnoses: Coronary Artery Disease (CAD) Code (i0400_cad_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
699	I0500 Active Diagnoses: Deep Vein Thrombosis (DVT) Code (i0500_dvt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
700	I0600 Active Diagnoses: Heart Failure (CHF) Code (i0600_hrt_failr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
701	I0700 Active Diagnoses: Hypertension Code (i0700_hyprtnsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
702	I0800 Active Diagnoses: Hypotension Code (i0800_hypotnsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
703	I0900 Active Diagnoses: Peripheral Vascular Disease (PVD) Code (i0900_pvd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
704	I1100 Active Diagnoses: Cirrhosis Code (i1100_crrhs_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
705	I1200 Active Diagnoses: Gastroesophageal Reflux Disease (GERD) Code (i1200_gerd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
706	I1300 Active Diagnoses: Ulcerative Colitis Code (i1300_ulcrtv_clts_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
707	I1400 Active Diagnoses: Benign Prostatic Hyperplasia (BPH) Code (i1400_bph_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
708	I1500 Active Diagnoses: End Stage Renal Disease (ESRD) Code (i1500_esrd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
709	I1550 Active Diagnoses: Neurogenic Bladder Code (i1550_nrgnc_bladr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	NOTES
710	I1650 Active Diagnoses: Obstructive Uropathy Code (i1650_obstrct_urpthy_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
711	I1700 Active Diagnoses: Multi- drug Resistant Drug Organism (MDRO) Code (i1700_mdro_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
712	I2000 Active Diagnoses: Pneumonia Code (i2000_pneumo_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
713	I2100 Active Diagnoses: Septicemia Code (i2100_sptcmia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
714	I2200 Active Diagnoses: Tuberculosis Code (i2200_tb_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
715	I2300 Active Diagnoses: Urinary Tract Infection (UTI) Code (i2300_uti_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
716	I2400 Active Diagnoses: Viral Hepatitis Code (i2400_vrl_hpt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
717	I2500 Wound Infection Code (i2500_wnd_infctn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
718	I2900 Active Diagnoses: Diabetes Mellitus (DM) Code (i2900_dm_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
719	I3100 Active Diagnoses: Hyponatremia Code (i3100_hyponatremia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
720	I3200 Active Diagnoses: Hyperkalemia Code (i3200_hyperkalemia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
721	I3300 Active Diagnoses: Hyperlipidemia Code (i3300_hyperlipidmia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
722	I3400 Active Diagnoses: Thyroid Code (i3400_thyrd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
723	I3700 Active Diagnoses: Arthritis Code (i3700_arthts_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
724	I3800 Active Diagnoses: Osteoporosis Code (i3800_ostprs_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
725	I3900 Active Diagnoses: Hip Fracture Code (i3900_hip_frctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
726	I4000 Active Diagnoses: Other Fracture Code (i4000_othr_frctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
727	I4200 Active Diagnoses: Alzheimers Disease Code (i4200_alzhmr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
728	I4300 Active Diagnoses: Aphasia Code (i4300_aphasia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
729	I4400 Active Diagnoses: Cerebral Palsy Code (i4400_crbrl_plsy_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
730	I4500 Active Diagnoses: Stroke (CVA or TIA or Stroke) Code (i4500_strk_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
731	I4800 Active Diagnoses: Dementia Code (i4800_dmnt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
732	I4900 Active Diagnoses: Hemiplegia Code (i4900_hemiplg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
733	I5000 Active Diagnoses: Paraplegia Code (i5000_parapIg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
734	l5100 Active Diagnoses: Quadriplegia Code (i5100_quadplg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
735	I5200 Active Diagnoses: Multiple Sclerosis Code (i5200_ms_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
736	I5250 Active Diagnoses: Huntingtons Code (i5250_hntgtn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
737	I5300 Active Diagnoses: Parkinsons Code (i5300_prknsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
738	I5350 Tourettes Code (i5350_tourt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
739	I5400 Active Diagnoses: Seizure Code (i5400_szre_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
740	I5500 Active Diagnoses: Traumatic Brain Injury (TBI) Code (i5500_brn_injury_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
741	I5600 Active Diagnoses: Malnutrition Code (i5600_malntrtn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
742	I5700 Active Diagnoses: Anxiety Disorder Code (i5700_anxty_dsordr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
743	I5800 Active Diagnoses: Depression Code (i5800_dprsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
744	I5900 Active Diagnoses: Manic Depression Code (i5900_mnc_dprsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
745	I5950 Active Diagnoses: Psychotic Code (i5950_psychtc_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
746	l6000 Active Diagnoses: Schizophrenia Code (i6000_schzoprnia_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
747	I6100 Active Diagnoses: Post- traumatic Stress Disorder (PTSD) Code (i6100_ptsd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
748	I6200 Active Diagnoses: Asthma COPD Chronic Lung Disease Code (i6200_asthma_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
749	I6300 Active Diagnoses: Respiratory Failure Code (i6300_rsprtry_failr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
750	I6500 Active Diagnoses: Cataracts Glaucoma or Macular Degeneration Code (i6500_ctrct_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
751	I7900 Active Diagnoses: No Active Disease Code (i7900_no_actv_dease_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
752	I8000A Additional Active Diagnoses: ICD 1 Code (i8000a_icd_1_cd)	8	ICD-9 Coding
760	I8000A Additional Active Diagnoses: ICD 2 Code (i8000b_icd_2_cd)	8	ICD-9 Coding
768	I8000A Additional Active Diagnoses: ICD 3 Code (i8000c_icd_3_cd)	8	ICD-9 Coding
776	I8000A Additional Active Diagnoses: ICD 4 Code (i8000d_icd_4_cd)	8	ICD-9 Coding
784	I8000A Additional Active Diagnoses: ICD 5 Code (i8000e_icd_5_cd)	8	ICD-9 Coding
792	I8000A Additional Active Diagnoses: ICD 6 Code (i8000f_icd_6_cd)	8	ICD-9 Coding
800	I8000A Additional Active Diagnoses: ICD 7 Code (i8000g_icd_7_cd)	8	ICD-9 Coding
808	I8000A Additional Active Diagnoses: ICD 8 Code (i8000h_icd_8_cd)	8	ICD-9 Coding

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
816	I8000A Additional Active Diagnoses: ICD 9 Code (i8000i_icd_9_cd)	8	ICD-9 Coding
824	I8000A Additional Active Diagnoses: ICD 10 Code (i8000j_icd_10_cd)	8	ICD-9 Coding
832	J0100A Pain management: Scheduled Pain Medication Code (j0100a_schld_pain_mdctn_c d)	1	 - = Not assessed/no information 0 = No 1 = Yes
833	J0100B Pain management: PRN Pain Medication Code (j0100b_prn_pain_mdctn_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
834	J0100C Pain management: Other Pain Intervention Code (j0100c_othr_pain_intrvtn_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
835	J0200 Should Pain Assessment be Conducted Code (j0200_cndct_pain_asmt_cd)	1	 - = Not assessed/no information 0 = No (resident is rarely/never understood) 1 = Yes
836	J0300 Pain Assessment Interview: Pain Presence Code (j0300_pain_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to Determine
837	J0400 Pain Assessment Interview: Pain Frequency Code (j0400_pain_freq_cd)	1	 - = Not assessed/no information 1 = Almost constantly 2 = Frequently 3 = Occasionally 4 = Rarely 9 = Unable to answer
838	J0500A Pain Assessment Interview: Pain Effect Sleep Code (j0500a_pain_efct_sleep_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to Determine
839	J0500B Pain Assessment Interview: Pain Effect Activity Code (j0500b_pain_efct_actvty_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to Determine

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	NOTES
840	J0600A Pain Intensity Numeric Rating Scale Number (j0600a_pain_intnsty_num)	2	 - = Not assessed/no information
842	J0600B Pain Intensity Verbal Descriptor Scale Number (j0600b_vrbl_dscrptr_scale_n um)	1	1-4, 9
843	J0700 Staff Conduct Pain Assessment Code (j0700_stf_cndct_pain_asmt_ cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
844	J0800A Staff Assessment for Pain: Nonverbal Sound Code (j0800a_nvrbl_snd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
845	J0800B Staff Assessment for Pain: Vocal Complaint Code (j0800b_vcl_cmpInt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
846	J0800C Staff Assessment for Pain: Facial Expression Code (j0800c_face_exprsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
847	J0800D Staff Assessment for Pain: Protective Movement Code (j0800d_prtctv_mvmt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
848	J0800Z Staff Assessment for Pain: None of Above Signs of Pain Code (j0800z_no_sgn_pain_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
849	J0850 Staff Frequency of Indicator of Pain or Possible Pain Frequency Code (j0850_stf_pain_freq_cd)	1	 - = Not assessed/no information 1 = Indicators of pain or possible pain observed 1 to 2 days 2 = Indicators of pain or possible pain observed 3 to 4 days 3 = Indicators of possible pain observed daily
850	J1100A Shortness of Breath With Exertion Code (j1100a_sob_exrtn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	NOTES
851	J1100B Shortness of Breath When Sitting Code (j1100b_sob_sitg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
852	J1100C Shortness of Breath When Lying Flat Code (j1100c_sob_lyg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
853	J1100Z None of Above Shortness of Breath Code (j1100z_no_sob_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
854	J1300 Tobacco Use Code (j1300_tobco_cd)	1	 - = Not assessed/no information 0, 1
855	J1400 Life Prognosis Less Than Six Months Code (j1400_life_prgns_cd)	1	- = Not assessed/no information0, 1
856	J1550A Problem Conditions: Fever Code (j1550a_fvr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
857	J1550B Problem Conditions: Vomiting Code (j1550b_vmtg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
858	J1550C Problem Conditions: Dehydration Code (j1550c_dhydrt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
859	J1550D Problem Conditions: Internal Bleeding Code (j1550d_intrnl_bledg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
860	J1550Z Problem Conditions: None of Above Code (j1550z_no_prblm_cond_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
861	J1700A Fall History on Admission: Fall 30 Day Code (j1700a_fall_30_day_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to Determine
862	J1700B Fall History on Admission: Fall 31-180 Day Code (j1700b_fall_31_180_day_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes 9 = Unable to Determine

COL FIELD

<u>LENGTH</u>

1

1

2

- 863 J1700C Fall History on Admission: Fall Six Month Code (j1700c_frctr_six_mo_cd)
- 864 J1800 Falls Since Admission or 1 Prior Assessment Code (j1800_fall_last_asmt_cd)
- 865 J1900A Number of Falls Since 1 Admission or Prior Assessment With No Injury Code (j1900a_fall_no_injury_cd)
- 866 J1900B Number of Falls Since 1 Admission or Prior Assessment With Injury Except Major Cod (j1900b_fall_injury_cd)
- 867 J1900C Number of Falls Since 1 Admission or Prior Assessment With Major Injury Code (j1900c_fall_maj_injury_cd)
- 868 K0100A Swallowing Disorder: 1
 Loss Mouth Eating Code
 (k0100a_loss_mouth_eatg_cd
)
- 869 K0100B Swallowing Disorder: 1 Hold Food Mouth Code (k0100b_hld_food_mouth_cd)
- 870 K0100C Swallowing Disorder: Choke Drinking Meal Code (k0100c_chok_drng_meal_cd)
- 871 K0100D Swallowing Disorder: 1 Complaint Swallowing Code (k0100d_cmpInt_swlwg_cd)
- 872 K0100Z Swallowing Disorder: 1 None of Above Code (k0100z_no_swlwg_cd)
- 873 K0200A Height Number (k0200a_hgt_num)

<u>NOTES</u>

- = Not assessed/no information
- 0 = No
- 1 = Yes
- 9 = Unable to Determine
- = Not assessed/no information
- 0 = No
- 1 = Yes
- 9 = Unable to Determine
- = Not assessed/no information
- 0 = None
- 1 = One
- 2 = Two or more
- = Not assessed/no information
- 0 = None
- 1 = One
- 2 = Two or more
- = Not assessed/no information
- 0 = None
- 1 = One
- 2 = Two or more
- = Not assessed/no information
- 0 = Not checked (No)
- 1 = Checked (Yes)
- = Not assessed/no information
 0 = Not checked (No)
- 0 = NOL CHECKED(INO)
- 1 = Checked (Yes)
- = Not assessed/no information
- 0 = Not checked (No)
- 1 = Checked (Yes)
- = Not assessed/no information
- 0 = Not checked (No)
- 1 = Checked (Yes)
- = Not assessed/no information
- 0 = Not checked (No)
- 1 = Checked (Yes)
- = Not assessed/no information

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
875	K0200B Weight Number (k0200b_wt_num)	3	 - = Not assessed/no information
878	K0300 Weight Loss Code (k0300_wt_loss_cd)	1	 - = Not assessed/no information 0 = No or unknown 1 = Yes, on physician-prescribed weight-loss regimen 2 = Yes, not on physician-prescribed weight-loss regimen
879	K0500A Nutritional Approaches: Parenteral/IV Feeding Code (k0500a_pen_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
880	K0500B Nutritional Approaches: Feeding Tube Code (k0500b_feedg_tube_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
881	K0500C Nutritional Approaches: Mechanically Altered Diet Code (k0500c_altr_food_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
882	K0500D Nutritional Approaches: Therapeutic Diet Code (k0500d_thrptc_diet_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
883	K0500Z Nutritional Approaches: None of Above Code (k0500z_no_feedg_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
884	K0700A Percent Caloric Intake Through Parenteral/Tube Feeding Code (k0700a_cal_pen_cd)	1	 - = Not assessed/no information 1 = 25% or less 2 = 26-50% 3 = 51% or more
885	K0700B Average Fluid Intake by IV Or Tube Feeding Code (k0700b_iv_tube_daily_cd)	1	 - = Not assessed/no information 1 = 500 cc/day or less 2 = 501 cc/day or more
886	L0200A Dental Status: Broken Denture Code (l0200a_brkn_dntr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
887	L0200B Dental Status: No Teeth Code (I0200b_no_teeth_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
888	L0200C Dental Status: Abnormal Mouth Tissue Code (I0200c_abnrml_mouth_tisue_ cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
889	L0200D Dental Status: Cavity Code (l0200d_cvty_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
890	L0200E Dental Status: Inflamed Gum Code (I0200e_inflmd_gum_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
891	L0200F Dental Status: Mouth or Facial Pain Code (I0200f_mouth_pain_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
892	L0200G Dental Status: Unable to Examine Code (l0200g_dntl_unk_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
893	L0200Z Dental Status: None of Above Code (l0200z_no_dntl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
894	M0100A Determination of Pressure Ulcer Risk: Ulcer Visible Code (m0100a_risk_vsbl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
895	M0100B Determination of Pressure Ulcer Risk: Formal Assessment/Instrument Code (m0100b_risk_frml_asmt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
896	M0100C Determination of Pressure Ulcer Risk: Clinical Assessment Code (m0100c_risk_clncl_jdgmnt_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
897	M0100Z Determination of Pressure Ulcer Risk: None of Above (m0100z_no_risk_dtmntn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
898	M0150 Pressure Ulcer Risk Code (m0150_prsr_ulcr_risk_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
899	M0210 One or More Stage 1 or Higher Unhealed Pressure Ulcer Code (m0210_stg_1_hghr_ulcr_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
900	M0300A Stage 1 Pressure Ulcer Number (m0300a_stg_1_ulcr_num)	1	 - = Not assessed/no information 0-9
901	M0300B1 Stage 2 Pressure Ulcer Number (m0300b1_stg_2_ulcr_num)	1	 - = Not assessed/no information 0-9
902	M0300B2 Stage 2 Pressure Ulcer Present on Admission Number (m0300b2_stg_2_ulcr_admsn _num)	1	 - = Not assessed/no information 0-9
903	M0300B3 Date of Oldest Stage 2 Pressure Ulcer (m0300b3_stg_2_ulcr_old_dt)	8	MMDDYYYY
911	M0300C1 Stage 3 Pressure Ulcer Number (m0300c1_stg_3_ulcr_num)	1	- = Not assessed/no information0-9
912	M0300C2 Stage 3 Pressure Ulcer Present on Admission Number (m0300c2_stg_3_ulcr_admsn _num)	1	 - = Not assessed/no information 0-9
913	M0300D1 Stage 4 Pressure Ulcer Number (m0300d1_stg_4_ulcr_num)	1	 - = Not assessed/no information 0-9
914	M0300D2 Stage 4 Pressure Ulcer Present on Admission Number (m0300d2_stg_4_ulcr_admsn _num)	1	 - = Not assessed/no information 0-9
915	M0300E1 Unstageable Pressure Ulcer Due To Dressing Number (m0300e1_unstgbl_ulcr_drsn g_num)	1	- = Not assessed/no information 0-9

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
916	M0300E2 Unstageable Pressure Ulcer Due To Dressing on Admission Number (m0300e2_u_ulcr_drsng_adm sn_num)	1	- = Not assessed/no information 0-9
917	M0300F1 Unstageable Pressure Ulcer With Slough or Eschar Number (m0300f1_unstgbl_ulcr_esc_n um)	1	- = Not assessed/no information 0-9
918	M0300F2 Unstageable Pressure Ulcer With Slough or Eschar on Admission Number (m0300f2_u_ulcr_esc_admsn _num)	1	- = Not assessed/no information 0-9
919	M0300G1 Unstageable Pressure Ulcer With Deep Tissue Injury Number (m0300g1_unstgbl_ulcr_deep _num)	1	- = Not assessed/no information 0-9
920	M0300G2 Unstageable Pressure Ulcer With Deep Tissue Injury on Admission Number (m0300g2_u_ulcr_deep_adms n_num)	1	- = Not assessed/no information 0-9
921	M0610A Unhealed Stage 3-4 Pressure Ulcer Length Number (m0610a_stg_3_4_ulcr_Ingth_ num)	4	 – Not assessed/no information
925	M0610B Unhealed Stage 3-4 Pressure Ulcer Width Number (m0610b_stg_3_4_ulcr_wdth_ num)	4	 – Not assessed/no information
929	M0610C Unhealed Stage 3-4 Pressure Ulcer Depth Number (m0610c_stg_3_4_ulcr_dpth_ num)	4	 - = Not assessed/no information
933	M0700 Most Severe Pressure Ulcer Tissue Type Code (m0700_ulcr_tisue_type_cd)	1	(Refer to appendix table MDS_ULCR_TISUE_TYPE_CD)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
934	M0800A Worsening Stage 2 Pressure Ulcer Since Prior Assessment Number (m0800a_wrsng_stg_2_ulcr_n um)	1	 - = Not assessed/no information 0-9
935	M0800B Worsening Stage 3 Pressure Ulcer Since Prior Assessment Number (m0800b_wrsng_stg_3_ulcr_n um)	1	 - = Not assessed/no information 0-7
936	M0800C Worsening Stage 4 Pressure Ulcer Since Prior Assessment Number (m0800c_wrsng_stg_4_ulcr_n um)	1	- = Not assessed/no information 0-5, 9
937	M0900A Healed Pressure Ulcer Present on Prior Assessment Code (m0900a_prsr_ulcr_prior_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
938	M0900B Healed Stage 2 Pressure Ulcer Number (m0900b_heald_stg_2_ulcr_n um)	1	 - = Not assessed/no information 0-9
939	M0900C Healed Stage 3 Pressure Ulcer Number (m0900c_heald_stg_3_ulcr_n um)	1	- = Not assessed/no information 0-6, 8
940	M0900D Healed Stage 4 Pressure Ulcer Number (m0900d_heald_stg_4_ulcr_n um)	1	 - = Not assessed/no information 0-9
941	M1030 Venous and Arterial Ulcer Number (m1030_artrl_ulcr_num)	1	 - = Not assessed/no information 0-9
942	M1040A Other Foot Skin Problems: Foot Infection Code (m1040a_ft_infctn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
943	M1040B Other Foot Skin Problems: Diabetic Foot Ulcer Code (m1040b_dbtc_ft_ulcr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
944	M1040C Other Foot Skin Problems: Other Open Lesion on Foot Code (m1040c_othr_lsn_ft_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
945	M1040D Other Skin Problems: Open Lesions Other Than Ulcers Rashes Cuts Code (m1040d_open_lsn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
946	M1040E Other Skin Problems: Surgical Wound(s) Code (m1040e_srgcl_wnd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
947	M1040F Other Skin Problems: Burn(s) Code (m1040f_brn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
948	M1040Z Other Skin Problems: None of Above Code (m1040z_no_othr_skin_prblm _cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
949	M1200A Skin and Ulcer Treatments: Pressure Reducing Device in Chair Code (m1200a_prsr_rdc_chr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
950	M1200B Skin and Ulcer Treatments: Pressure Reducing Device in Bed Code (m1200b_prsr_rdc_bed_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
951	M1200C Skin and Ulcer Treatments: Turning/Repositioning Program Code (m1200c_trng_pgm_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
952	M1200D Skin and Ulcer Treatments: Nutrition/Hydration Code (m1200d_hydrtn_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
953	M1200E Skin and Ulcer Treatments: Ulcer Care Code (m1200e_ulcr_care_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
954	M1200F Skin and Ulcer Treatments: Surgical Wound Care Code (m1200f_srgcl_wnd_care_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
955	M1200G Skin and Ulcer Treatments: Application Nonsurgical Dressing Code (m1200g_aplctn_drsng_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
956	M1200H Skin and Ulcer Treatments: Application Ointments/Medications Code (m1200h_aplctn_ontmnt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
957	M1200I Skin and Ulcer Treatments: Application Dressings to Foot Code (m1200i_aplctn_drsng_foot_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
958	M1200Z Skin and Ulcer Treatments: None of Above Code (m1200z_no_skin_trmnt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
959	N0300 Number of Days Injections of Any Type (n0300_injct_mdctn_day_num)	1	 - = Not assessed/no information 0-7
960	N0350A Number of Days Insulin Injections (n0350a_insIn_injct_day_num)	1	 - = Not assessed/no information 0-7
961	N0350B Number of Days Insulin Orders Changed (n0350b_insIn_ordr_day_num)	1	 - = Not assessed/no information 0-7
962	N0400A Medications Received: Antipsychotic Code (n0400a_antipsychtc_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
963	N0400B Medications Received: Antianxiety Code (n0400b_antinxty_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
964	N0400C Medications Received: Antidepressant Code (n0400c_antidprsnt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
965	N0400D Medications Received: Hypnotic Code (n0400d_hpntc_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
966	N0400E Medications Received: Anticoagulant Code (n0400e_anticoagInt_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
967	N0400F Medications Received: Antibiotic Code (n0400f_antbtc_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
968	N0400G Medications Received: Diuretic Code (n0400g_drtc_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
969	N0400Z Medications Received: None of Above (n0400z_no_mdctn_rcvd_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
970	O0100A1 Special Treatments/Programs: Chemotherapy Pre-admit Code (o0100a1_chmthrpy_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
971	O0100A2 Special Treatments/Programs: Chemotherapy Post-admit Code (o0100a2_chmthrpy_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
972	O0100B1 Special Treatments/Programs: Radiation Pre-admit Code (o0100b1_rdtn_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
973	O0100B2 Special Treatments/Programs: Radiation Post-admit Code (o0100b2_rdtn_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
974	O0100C1 Special Treatments/Programs: Oxygen Pre-admit Code (o0100c1_oxgn_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
975	O0100C2 Special Treatments/Programs: Oxygen Post-admit Code (o0100c2_oxgn_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
976	O0100D1 Special Treatments/Programs: Suctioning Pre-admit Code (o0100d1_sctng_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
977	O0100D2 Special Treatments/Programs: Suctioning Post-admit Code (o0100d2_sctng_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
978	O0100E1 Special Treatments/Programs: Tracheostomy Pre-admit Code (o0100e1_trchostmy_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
979	O0100E2 Special Treatments/Programs: Tracheostomy Post-admit Code (o0100e2_trchostmy_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
980	O0100F1 Special Treatments/Programs: Ventilator Pre-admit Code (o0100f1_vntltr_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
981	O0100F2 Special Treatments/Programs: Ventilator Post-admit Code (o0100f2_vntltr_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
982	O0100G1 Special Treatments/Programs: Continuous Positive Airway Pressure Pre-admit Code (o0100g1_cpap_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
983	O0100G2 Special Treatments/Programs: Continuous Positive Airway Pressure Post-admit Code (o0100g2_cpap_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
984	O0100H1 Special Treatments/Programs: Intravenous Medication Pre- admit Code (o0100h1_iv_mdctn_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
985	O0100H2 Special Treatments/Programs: Intravenous Medication Post- admit Code (o0100h2_iv_mdctn_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
986	O0100I1 Special Treatments/Programs: Transfusion Pre-admit Code (o0100i1_trnsfsn_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
987	O0100I2 Special Treatments/Programs: Transfusion Post-admit Code (o0100i2_trnsfsn_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
988	O0100J1 Special Treatments/Programs: Dialysis Pre-admit Code (o0100j1_dlys_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
989	O0100J2 Special Treatments/Programs: Dialysis Post-admit Code (o0100j2_dlys_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
990	O0100K1 Special Treatments/Programs: Hospice Pre-admit Code (o0100k1_hospc_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
991	O0100K2 Special Treatments/Programs: Hospice Post-admit Code (o0100k2_hospc_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
992	O0100L2 Special Treatments/Programs: Respite Post-admit Code (o0100l2_resp_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
993	O0100M1 Special Treatments/Programs: Isolation Pre-admit Code (o0100m1_isItn_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	NOTES
994	O0100M2 Special Treatments/Programs: Isolation Post-admit Code (o0100m2_isltn_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
995	O0100Z1 Special Treatments/Programs: None of Above Pre-admit Treatment Prior Code (o0100z1_no_trtmt_prior_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
996	O0100Z2 Special Treatments/Programs: None of Above Treatment Post-admit Code (o0100z2_no_trtmt_post_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
997	O0250A Influenza Received Code (o0250a_inflnz_rcvd_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
998	O0250B Influenza Received Date (o0250b_inflnz_rcvd_dt)	8	MMDDYYYY
1006	O0250C Reason Influenza Not Received Code (o0250c_rsn_inflnz_not_rcv_c d)	1	 - = Not assessed/no information 1 = Resident not in facility during this year's flu season 2 = Received outside of this facility 3 = Not eligible - medical contraindication 4 = Offered and declined 5 = Not offered 6 = Inability to obtain vaccine due to declared shortage 9 = None of the above
1007	O0300A Pneumococcal Vaccination Code (o0300a_ppv_cd)	1	 - = Not assessed/no information 0 = No 1 = Yes
1008	O0300B Reason Pneumococcal Vaccination Not Received Code (o0300b_rsn_ppv_not_rcvd_c d)	1	 - = Not assessed/no information 1 = Not eligible - medical contraindication 2 = Offered and declined 3 = Not offered
1009	O0400A1 Speech Therapy/Audiology Individual Minutes Number (o0400a1_spch_thrpy_ind_mi n_num)	4	 - = Not assessed/no information

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
1013	O0400A2 Speech Therapy/Audiology Concurrent Minutes Number (o0400a2_spch_thrpy_cnc_mi n_num)	4	 - = Not assessed/no information
1017	O0400A3 Speech Therapy/Audiology Group Minutes Number (o0400a3_spch_thrpy_grp_mi n_num)	4	 - = Not assessed/no information
1021	O0400A4 Number of Days Speech Therapy/Audiology Administered (o0400a4_spch_thrpy_day_nu m)	1	 - = Not assessed/no information 0-7
1022	O0400A5 Speech Therapy/Audiology Start Date (o0400a5_spch_thrpy_strt_dt)	8	MMDDYYYY
1030	O0400A6 Speech Therapy/Audiology End Date (o0400a6_spch_thrpy_end_dt)	8	MMDDYYYY
1038	O0400B1 Occupational Therapy Individual Minutes Number (o0400b1_ot_indvdl_min_num)	4	 - = Not assessed/no information
1042	O0400B2 Occupational Therapy Concurrent Minutes Number (o0400b2_ot_cncrnt_min_num)	4	 - = Not assessed/no information
1046	O0400B3 Occupational Therapy Group Minutes Number (o0400b3_ot_grp_min_num)	4	 - = Not assessed/no information
1050	O0400B4 Number of Days Occupational Therapy Administered (o0400b4_ot_day_num)	1	- = Not assessed/no information0-7
1051	O0400B5 Occupational Therapy Start Date (o0400b5_ot_strt_dt)	8	MMDDYYYY
1059	O0400B6 Occupational Therapy End Date (o0400b6_ot_end_dt)	8	MMDDYYYY

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
1067	O0400C1 Physical Therapy Individual Minutes Number (o0400c1_pt_indvdl_min_num)	4	 - = Not assessed/no information
1071	O0400C2 Physical Therapy Concurrent Minutes Number (o0400c2_pt_cncrnt_min_num)	4	- = Not assessed/no information
1075	O0400C3 Physical Therapy Group Minutes Number (o0400c3_pt_grp_min_num)	4	- = Not assessed/no information
1079	O0400C4 Number of Days Physical Therapy Administered (o0400c4_pt_day_num)	1	- = Not assessed/no information0-7
1080	O0400C5 Physical Therapy Start Date (o0400c5_pt_strt_dt)	8	MMDDYYYY
1088	O0400C6 Physical Therapy End Date (o0400c6_pt_end_dt)	8	MMDDYYYY
1096	O0400D1 Respiratory Therapy Minutes Number (o0400d1_rt_min_num)	4	- = Not assessed/no information
1100	O0400D2 Number of Days Respiratory Therapy Administered (o0400d2_rt_day_num)	1	- = Not assessed/no information0-7
1101	O0400E1 Psychological Therapy Minutes Number (o0400e1_psych_thrpy_min_n um)	4	- = Not assessed/no information
1105	O0400E2 Number of Days Psychological Therapy Administered (o0400e2_psych_thrpy_day_n um)	1	- = Not assessed/no information0-7
1106	O0400F1 Recreational Therapy Minutes Number (o0400f1_rcrtnl_thrpy_min_nu m)	4	- = Not assessed/no information
1110	O0400F2 Number of Days Recreational Therapy Administered (o0400f2_rcrtnl_thrpy_day_nu m)	1	- = Not assessed/no information0-7

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
1111	O0450A Has Therapy Resumed Code (o0450a_rsmptn_thrpy_cd)	1	- = Not assessed/no information0-7
1112	O0450B Date Therapy Resumed (o0450b_rsmptn_thrpy_dt)	8	MMDDYYYY
1120	O0500A Restorative Nursing: Passive Range of Motion Number (o0500a_psv_rom_num)	1	- = Not assessed/no information0-7
1121	O0500B Restorative Nursing: Active Range of Motion Number (o0500b_actv_rom_num)	1	- = Not assessed/no information0-7
1122	O0500C Restorative Nursing: Splint/Brace Assistance Number (o0500c_brc_astnc_num)	1	- = Not assessed/no information0-7
1123	O0500D Restorative Nursing: Bed Mobility Training Number (o0500d_bed_mblty_trng_nu m)	1	 - = Not assessed/no information 0-7
1124	O0500E Restorative Nursing: Transfer Training Number (o0500e_trnsfr_trng_num)	1	- = Not assessed/no information0-7
1125	O0500F Restorative Nursing: Walking Training Number (o0500f_wlkg_trng_num)	1	- = Not assessed/no information0-7
1126	O0500G Restorative Nursing: Dressing/Grooming Training Number (o0500g_drsg_trng_num)	1	 - = Not assessed/no information 0-7
1127	O0500H Restorative Nursing: Eating/Swallowing Training Number (o0500h_eatg_trng_num)	1	- = Not assessed/no information0-7
1128	O0500I Restorative Nursing: Amputation/Prosthesis Care Training Number (o0500i_amputtn_trng_num)	1	- = Not assessed/no information0-7
1129	O0500J Restorative Nursing: Communication Training Number (o0500j_commun_trng_num)	1	- = Not assessed/no information0-7

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
1130	O0600 Physician Examination Day Number (o0600_physn_exmn_num)	2	 - = Not assessed/no information
1132	O0700 Physician Order Day Number (o0700_physn_ordr_num)	2	 - = Not assessed/no information
1134	P0100A Physical Restraints in Bed: Bed Rail Code (p0100a_bed_rail_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1135	P0100B Physical Restraints in Bed: Trunk Restraint Bed Code (p0100b_trnk_rstrnt_bed_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1136	P0100C Physical Restraints in Bed: Limb Restraint Bed Code (p0100c_Imb_rstrnt_bed_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1137	P0100D Physical Restraints in Bed: Other Restraint Bed Code (p0100d_othr_rstrnt_bed_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1138	P0100E Physical Restraints in Chair: Trunk Restraint Chair Code (p0100e_trnk_rstrnt_chr_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1139	P0100F Physical Restraints in Chair: Limb Restraint Chair Code (p0100f_Imb_rstrnt_chr_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1140	P0100G Physical Restraints in Chair: Chair Prevent Rise Code (p0100g_chr_prvnt_rise_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily
1141	P0100H Physical Restraints in Chair: Other Restraint Chair Code (p0100h_othr_rstrnt_chr_cd)	1	 - = Not assessed/no information 0 = Not used 1 = Used less than daily 2 = Used Daily

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
1142	V0100A Prior Assessment Federal OBRA Reason for Assessment Code (v0100a_prior_fed_obra_cd)	2	01 = Admission assessment (required by day 14) 02 = Quarterly review assessment 03 = Annual assessment 04 = Significant change in status assessment 05 = Significant correction to prior full assessment 06 = Significant correction to prior quarterly assessment 99 = Not OBRA required assessment/ tracking
1144	V0100B Prior Assessment PPS Reason for Assessment Code (v0100b_prior_pps_cd)	2	 1 = 5-day scheduled assessment 2 = 14-day scheduled assessment 3 = 30-day scheduled assessment 4 = 60-day scheduled assessment 5 = 90-day scheduled assessment 6 = Readmission/return assessment PPS Unscheduled Assessments for a Medicare Part A Stay 7 = Unscheduled assessment used for PPS (OMRA, significant change, or significant correction assessment) 9 = Not PPS assessment
1146	V0100C Prior Assessment Reference Date (v0100c_prior_asmt_rfrnc_dt)	8	MMDDYYYY
1154	V0100D Prior Assessment Brief Interview for Mental Status (BIMS) Summary Score Number (v0100d_prior_bims_scre_nu m)	2	 - = Not assessed/no information
1156	V0100E Prior Assessment Resident Mood Interview (PHQ- 9) Total Severity Score Number (v0100e_prior_mood_scre_nu m)	2	 - = Not assessed/no information
1158	V0200A01A Delirium Care Area Trigger Code (v0200a01a_dlrm_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1159	V0200A01B Delirium Addressed in Care Plan Code (v0200a01b_dlrm_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
1160	V0200A02A Dementia Care Area Trigger Code (v0200a02a_dmnt_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1161	V0200A02B Dementia Addressed in Care Plan Code (v0200a02b_dmnt_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1162	V0200A03A Visual Function Care Area Trigger Code (v0200a03a_visl_func_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1163	V0200A03B Visual Function Addressed in Care Plan Code (v0200a03b_visl_func_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1164	V0200A04A Communication Care Area Trigger Code (v0200a04a_commun_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1165	V0200A04B Communication Addressed in Care Plan Code (v0200a04b_commun_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1166	V0200A05A ADL Care Area Trigger Code (v0200a05a_adl_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1167	V0200A05B ADL Addressed in Care Plan Code (v0200a05b_adl_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1168	V0200A06A Urinary Care Area Trigger Code (v0200a06a_urnry_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1169	V0200A06B Urinary Addressed in Care Plan Code (v0200a06b_urnry_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1170	V0200A07A Psychosocial Care Area Trigger Code (v0200a07a_psychsoc_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1171	V0200A07B Psychosocial Addressed in Care Plan Code (v0200a07b_psychsoc_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1172	ν V0200A08A Mood Care Area Trigger Code (v0200a08a_mood_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	FIELD	<u>LENGTH</u>	NOTES
1173	V0200A08B Mood Addressed in Care Plan Code (v0200a08b_mood_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1174	V0200A09A Behavioral Care Area Trigger Code (v0200a09a_bhvrl_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1175	V0200A09B Behavioral Addressed in Care Plan Code (v0200a09b_bhvrl_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1176	V0200A10A Activity Care Area Trigger Code (v0200a10a_actvty_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1177	V0200A10B Activity Addressed in Care Plan Code (v0200a10b_actvty_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1178	V0200A11A Fall Care Area Trigger Code (v0200a11a_fall_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1179	V0200A11B Fall Addressed in Care Plan Code (v0200a11b_fall_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1180	V0200A12A Nutritional Care Area Trigger Code (v0200a12a_ntrnt_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1181	V0200A12B Nutritional Addressed in Care Plan Code (v0200a12b_ntrnt_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1182	V0200A13A Feeding Tube Care Area Trigger Code (v0200a13a_feedg_tube_ctr_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1183	V0200A13B Feeding Tube Addressed in Care Plan Code (v0200a13b_feedg_tube_cpl_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1184	V0200A14A Dehydration Care Area Trigger Code (v0200a14a_dhydrtn_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1185	V0200A14B Dehydration Addressed in Care Plan Code (v0200a14b_dhydrtn_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
1186	V0200A15A Dental Care Area Trigger Code (v0200a15a_dntl_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1187	V0200A15B Dental Addressed in Care Plan Code (v0200a15b_dntl_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1188	V0200A16A Pressure Ulcer Care Area Trigger Code (v0200a16a_prsr_ulcr_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1189	V0200A16B Pressure Ulcer Addressed in Care Plan Code (v0200a16b_prsr_ulcr_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1190	V0200A17A Psychotropic Drug Care Area Trigger Code (v0200a17a_psych_drug_ctr_ cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1191	cd) V0200A17B Psychotropic Drug Addressed in Care Plan Code (v0200a17b_psych_drug_cpl_ cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1192	V0200A18A Restraint Care Area Trigger Code (v0200a18a_rstrnt_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1193	V0200A18B Restraint Addressed in Care Plan Code (v0200a18b_rstrnt_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1194	V0200A19A Pain Care Area Trigger Code (v0200a19a_pain_ctr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1195	V0200A19B Pain Addressed in Care Plan Code (v0200a19b_pain_cpl_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1196	V0200A20A Return to Community Care Area Trigger Code (v0200a20a_rtn_cmnty_ctr_cd	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1197) V0200A20B Return to Community Addressed in Care Plan Code (v0200a20b_rtn_cmnty_cpl_c d)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
1198	V0200B2 Care Area Assessment Completion Date (v0200b2_cat_dt)	8	MMDDYYYY
1206	V0200C2 Care Plan Completion Date (v0200c2_care_pln_dt)	8	MMDDYYYY
1214	X0100 Type of Record Code (x0100_trans_type_cd)	1	1 = Add new record2 = Modify existing record3 = Inactivate existing record
1215	X0150 Correction Provider Type Code (x0150_crctn_prvdr_type_cd)	1	1 = Nursing home (SNF/NF) 2 = Swing bed
1216	X0600A Correction Federal OBRA Reason for Assessment Code (x0600a_crctn_fed_obra_cd)	2	 01 = Admission assessment (required by day 14) 02 = Quarterly review assessment 03 = Annual assessment 04 = Significant change in status assessment 05 = Significant correction to prior comprehensive assessment 06 = Significant correction to prior quarterly assessment 99 = Not OBRA required assessment/tracking
1218	X0600B Correction PPS Reason for Assessment Code (x0600b_crctn_pps_cd)	2	01 = 5-day scheduled assessment 02 = 14-day scheduled assessment 03 = 30-day scheduled assessment 04 = 60-day scheduled assessment 05 = 90-day scheduled assessment 06 = Readmission/return assessment 07 = Unscheduled assessment used for PPS (OMRA, significant or clinical change, or significant correction assessment) 99 = Not a PPS assessment
1220	X0600C PPS Other Medicare Required Assessment (OMRA) Code (x0600c_crctn_pps_omra_cd)	1	0 = No 1 = Start of therapy assessment 2 = End of therapy assessment 3 = Both Start and End of therapy assessment

<u>COL</u>	<u>FIELD</u>	<u>LENGTH</u>	<u>NOTES</u>
1222	X0600F Correction Entry/Discharge Code (x0600f_crctn_entry_dschrg_c d)	2	 01 = Entry record 10 = Discharge assessment - return not anticipated 11 = Discharge assessment - return anticipated 12 = Death in facility record 99 = Not entry/discharge record
1224	X0700A Correction Assessment Reference Date (x0700a_crctn_asmt_rfrnc_dt)	8	MMDDYYYY
1232	X0700B Correction Discharge Date (x0700b_crctn_dschrg_dt)	8	MMDDYYYY
1240	X0700C Correction Entry Date (x0700c_crctn_entry_dt)	8	MMDDYYYY
1248	X0800 Correction Number (x0800_crctn_num)	2	
1250	X0900A Reason for Modification: Transcription Error Code (x0900a_mdfctn_trnscrpt_err_ cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1251	X0900B Reason for Modification: Data Entry Error Code (x0900b_mdfctn_entry_err_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1252	X0900C Reason for Modification: Software Product Error Code (x0900c_mdfctn_sftwr_err_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1253	X0900Z Reason for Modification: Other Error Requiring Modification Code (x0900z_mdfctn_othr_cd)	1	 - = Not assessed/no information 0 = Not checked (No) 1 = Checked (Yes)
1256	X1100E Attestation Date (x1100e_atstn_dt)	8	MMDDYYYY
1264	Z0100A Medicare Part A HIPPS Code Text (z0100a_mdcr_hipps_txt)	7	

<u>COL</u>	FIELD	<u>LENGTH</u>	<u>NOTES</u>
1271	Z0100B Medicare Part A RUG Version Text	10	
4004	(z0100b_mdcr_rug_vrsn_txt)	4	
1281	Z0100C Medicare Part A Short Stay Assessment Code (z0100c_mdcr_shrt_stay_cd)	1	0 = No 1 = Yes
1282	Z0150A Medicare Part A Non- therapy HIPPS Code Text (z0150a_mdcr_nthrpy_hipps_t xt)	7	
1289	Z0150B Medicare Non-therapy Part A RUG Version Text (z0150b_mdcr_nthrpy_rugvrs n_txt)	10	
1299	Z0200A State Medicaid RUG Case Mix Group Text (z0200a_state_rug_grp_txt)	10	
1309	Z0200B State Medicaid RUG Version Text (z0200b_state_rug_vrsn_txt)	10	
1319	Z0250A Alternate State Medicaid RUG Case Mix Group Text	10	
4000	(z0250a_state_2_rug_grp_txt)	4.0	
1329	Z0250B Alternate State Medicaid RUG Version Text (z0250b_state_2_rug_vrsn_txt)	10	
1339	Z0500B Date RN Assessment Coordinator Signed Assessment as Complete (z0500b_rn_sgn_cmplt_dt)	8	MMDDYYYY
1347	Filler	1	