

H.I.P.E.

Hospital In-Patient Enquiry

2019

INSTRUCTION MANUAL



For use with the HIPE Portal

01.01.2019

V1.0

Healthcare Pricing Office

INSTRUCTIONS FOR THE CODER

Before you begin, make sure you have the following (which are available from the Healthcare Pricing Office):

- 8th Edition ICD-10-AM/ACHI/ACS classification:
5 Volume book set or Turbo Coder
- ICD-10-AM/ACHI/ACS training material (as issued at training courses)
- HIPE Instruction Manual
- Irish Coding Standards
- Record summary sheets (if required)

Also have for reference

- Medical Dictionary e.g. Dorland's
- M.I.M.S. - Index of Drugs

For definitions of all HIPE variables please refer to the

- HIPE Data Dictionary, at www.hpo.ie

HIPE Support

- ICD-10-AM Clinical Coding Queries:** Please submit by email with as much detail as possible to hipecoding@hpo.ie. **Remove any identifying information.**
- HIPE Data Requests & Statistics:** To access HIPE information please email: HIPEData.Requests@hpo.ie with details of your information requirements.
- Consultant Number Requests:** To request a HIPE number for a consultant please e-mail hipenumber@hpo.ie
- HIPE Software Support:** Queries relating to HIPE software can be submitted to HIPEIT@hpo.ie
- HIPE Training Requests & Queries:** Any queries relating to HIPE training can be submitted to hipetraining@hpo.ie
- HIPE Exports:** To be submitted monthly via email to export@hpo.ie
See page 22 for list of export dates in 2019
- Contact Details:** Healthcare Pricing Office
1st Floor
The Brunel Building
Heuston South Quarter
St. John's Road West
Dublin 8
D08 X01F
Website: www.hpo.ie
E-mail: info@hpo.ie
Fax No.: 01-7718414

Hospital In-Patient Enquiry (HIPE) Summary Sheet

For use with HIPE on ALL DISCHARGES FROM 01.01.2019

Patient's Hospital of Discharge <input type="text"/>		Type (priority) of Admission <input type="text"/>		FOR LOCAL COLLECTION ONLY *Name: _____ *Address: _____ _____ Affix Label		
MRN <input type="text"/>	W/List If Type=1-2 <input type="text"/>		Type of Elective Adm If Type=1-2 <input type="text"/>			Mode If Type=4,5,7 <input type="text"/>
Sex <input type="text"/>	Date of Birth <input type="text"/>					
Admission Date <input type="text"/>	Admission Source <input type="text"/>		Duration of continuous ventilatory support (hours) Cumulative <input type="text"/>			
Admission Time <input type="text"/>	Discharge Code <input type="text"/>		Number of nights in a virtual ward <input type="text"/>			
Discharge Date <input type="text"/>	Area of Residence <input type="text"/>		Admitting Ward <input type="text"/>		Day Case <input type="text"/>	
Discharge Time <input type="text"/>	*Eircode <input type="text"/>		Discharge Ward <input type="text"/>		Day Ward <input type="text"/>	
	Marital /Civil Status <input type="text"/>		Transfer from <input type="text"/>		Day Ward ID <input type="text"/>	
	Medical Card <input type="text"/>		Transfer to <input type="text"/>			
	Discharge Status <input type="text"/>		Temp Leave Days <input type="text"/>		Total Single Multiple	
	Health Insurer <input type="text"/>		Date of Transfer to rehab/PDU <input type="text"/>		Days in a Private Bed <input type="text"/>	
	Parity <input type="text"/> Still + <input type="text"/> Live		Infant Admit Weight (grams) <input type="text"/>		Days in a Semi-Private Bed <input type="text"/>	
			Days in a Critical Care Bed <input type="text"/>		Days in a Public Bed <input type="text"/>	
					Days (or part there of) in ICU <input type="text"/>	
Admitting Consultant <input type="text"/>		Intensive Care Consultant <input type="text"/>		Discharge Consultant <input type="text"/>		
Primary Consultant <input type="text"/>		Up to 10 Intensive Care consultants may be recorded		Specialty of Discharge Consultant <input type="text"/>		
					Medical Discharge Date <input type="text"/>	

PDX = The diagnosis established after study to be chiefly responsible for occasioning the patient's episode of care in hospital (ACS 0001)

ICD-10-AM Code	Hospital Acquired Dx	Consultant #	Specialty
(1) <input type="text"/> Principal Diagnosis (PDX)	<input type="text"/>	<input type="text"/>	<input type="text"/>
(2) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(3) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(4) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(5) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(6) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(7) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(8) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(9) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(10) <input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Up to 30 diagnoses codes may be entered.

For use on all discharges from 01.01.2019

Procedure/Intervention Codes	Block No.	Hospital Acquired Dx	Consultant #	Consultant Anaesthetist #	Date of Procedure
(1) <input type="text"/>	[<input type="text"/>]	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(2) <input type="text"/>	[<input type="text"/>]	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(3) <input type="text"/>	[<input type="text"/>]	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(4) <input type="text"/>	[<input type="text"/>]	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
(5) <input type="text"/>	[<input type="text"/>]	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Up to 20 procedure codes may be entered.

Case entered on HIPE: Hospital Ref No. For HPO Use:

* Patient Name, Full Address, full DOB, and Full Eircode are currently not exported to the HPO. These are collected only at hospital level.

More than one consultant can be recorded.

^ HADx flag can be assigned for PDx in **Neonates on the birth episode only**.

HIPE Instruction Manual

HIPE collects information on in-patient and day patient activity from participating hospitals. A HIPE discharge record is created when a patient is discharged from (or dies in) hospital. This record contains administrative, demographic and clinical information for a discrete episode of care. An episode of care begins at admission to hospital (or when a decision to admit has been made and the patient is in an ED virtual ward) and ends at discharge from (or death in) that hospital.

This manual provides instruction on the capture of administrative and demographic data for each HIPE discharge record. Clinical data are captured in accordance with the classification and associated standards.

All variables listed are for collection for discharges from 01.01.2019. When reviewing HIPE data for previous years, please refer to the Instruction Manual for the relevant period.

↓ **The arrow beside a field below refers to items downloaded by the PAS where available. These fields must always be verified against the information in the chart.**

All HIPE Data are subject to Audit (including chart based reviews)

- ↓
1. **Patient's Hospital of Discharge:** The code of the hospital that the patient is under the care of using the four digit Hospital Code List (see full listing on page 16-17).

↓

 2. **Chart Number:** Up to 7 characters allowed. If less than 7, place zeros before the chart number (or case reference number). Up to 2 alpha characters allowed, again place these before the chart number and in the first position(s).

↓

 3. **Date of Admission:** Enter day, month and year in appropriate boxes, inserting zeros where necessary.
e.g. 1st March 2019 =

01	03	2019
----	----	------

The date of admission is the date the patient is admitted or when a decision to admit has been made and the patient is in an ED virtual ward.

↓

 - 3a. **Time of Admission:** The time of admission in the 24 hour format for the patient will be collected for all patients discharged from hospital. The time of admission will be the time, as recorded on the PAS, the patient was admitted to a ward as either a daycase or an inpatient.

Admission codes

Type of Admission This indicates the *priority* of the admission

4. Type of Admission



1 Elective

The patient's condition permits adequate time to schedule the availability of suitable services. An elective admission may be delayed without substantial risk to the health of the individual.

2 Elective Readmission

Patient admitted electively to continue ongoing treatment or care.

4 Emergency

The patient requires immediate care and treatment as a result of a severe, life threatening or potentially disabling condition. Generally, the patient is admitted through the Emergency Department.

5 Emergency Readmission

This is an unscheduled readmission following a previous spell of treatment in the same hospital and relating to the treatment or care previously given.

6 Maternity

The patient is admitted related to their obstetrical experience. (From conception to 6 weeks post delivery).

Collection of the patient's parity is mandatory for this Admission Type – see pg. 14 for further details.

7 New born (0-27 days)

Neonate admitted to hospital for care or observation. Type of admission '7' will be used for patients up to the age of 28 days (0-27 days old) who are admitted to the hospital as an emergency or where the admission is unplanned. *Note:* Any other neonatal patients (0-27 days old) admitted routinely will be assigned the regular booked admission type.

Elective MAU /ASAU Admissions:

Elective re/admissions to registered MAUs/ASAUs are **not** reported to HIPE, this activity is to be reported as Outpatient activity.

"Type" of Elective Admission

When the admission type is either **1 - Elective** or **2 - Elective Readmission** the **Type of Elective Admission** is also required to indicate if the elective admission is from a waiting list or is a planned admission. It is coded as:

- 1 - Planned Admission
- 2 - Admission from Waiting List
- 3 - Unknown

"Type" of Waiting List category

When a user indicates that the admission type is either **1 - Elective** or **2 - Elective Readmission** a display box appears on the screen to ask if the case is funded by the National Treatment Purchase Fund (NTPF).

- 0 – Not NTPF
- 1 – Yes NTPF

Note: This field is subject to review and validation by the HSE and NTPF.

Mode of Emergency Admission

This indicates *where the patient was treated immediately prior to being admitted* into the hospital as an inpatient or when the patient was treated only in a registered Acute Medical Assessment Unit (AMAU*) or in a registered Acute Surgical Assessment Unit (ASAU§).

When the user chooses a **Type of Admission: Emergency or Newborn**, a display box presents the Mode of Emergency Admission options:

- 1 ED (Emergency Department) of the admitting hospital
- 2 AMAU **Admitted as Inpatient:** This code is assigned if the patient is admitted as an emergency to the hospital through the AMAU.
- 3 Other
- 4 Unknown
- 5 AMAU **Only :** This code is assigned if the patient is admitted as an emergency to the AMAU and is discharged from there.
- 6 Local Injury Unit: Admission directly from a HSE listed Local Injury Unit
- 7 ASAU **Admitted as Inpatient.** This code is assigned if the patient is admitted as an emergency to the hospital through the ASAU.
- 8 ASAU **Only:** This code is assigned if the patient is admitted as an emergency to the ASAU and is discharged from there

Note: AMAUs /ASAUs must be registered in order for the Healthcare Pricing Office to activate this field for collection (contact HIPEIT@HPO.ie)

*Mode of emergency admission for AMAU cases can only be **2 – AMAU Admitted as inpatient** or **5 – AMAU Only**

§Mode of emergency admission for ASAU cases can only be **7– ASAU Admitted as inpatient** or **8 – ASAU Only**

↓

5. Source of Admission - *Where* the patient was prior to admission.

- 1 Home
- 2 Transfer from nursing home/convalescent home or other long stay accommodation
- 3 Transfer of admitted or non-admitted patient from Hospital in Hospital code list or transfer from *any* Acute Hospital not specified in Hospital Code Listing (see pages 16 – 17 in this manual).

When the coder enters a transfer (3) as a source of admission the system will respond with:

- a request to identify the hospital in question. This hospital may be entered as a 4-digit code from the Hospital Code List (See pull down menu on PC or listing on page 16 of this instruction manual).
- An indicator to identify if this is the transfer of a non-admitted patient. E.g. patient transferred from an ED in another hospital.

- 4 Transfer from Non-Acute Hospital
- 5 Transfer from hospice
- 6 Transfer from psychiatric hospital/unit
- 7 New born
- 8 Temporary place of residence (e.g. hotel)
- 9 Prison
- 0 Other

↓

6. Date of Discharge

Enter the appropriate date in the appropriate boxes inserting zeros where necessary.

e.g. 10th March 2019 =

10	03	2019
----	----	------

Where a patient is discharged from the same hospital more than once in the same day, these episodes are consolidated into one discharge record for HIPE purposes.

↓

6a. Time of Discharge

The time of discharge, in the 24 hour format, for the patient will be collected for all patients, both daycases and inpatients, discharged from hospital. The time of discharge will be the time, as recorded on the PAS, that the patient was discharged.

↓

7. Discharge codes identify the discharge destination

- 00 - Self discharge
- 01 - Home
- 02 - Nursing home, convalescent home or long stay accommodation
- 03 - **Emergency** Transfer to Hospital in Hospital Code Listing or transfer to *any* Acute Hospital not specified in Hospital Code Listing (see pages 16 – 17 in this manual).
- 04 - **Non Emergency** Transfer to Hospital in Hospital Code Listing or transfer to *any* Acute Hospital not specified in Hospital Code Listing (see pages 16 – 17 in this manual).

When the coder enters a transfer (03 or 04) as a discharge code the system will respond with a request to identify the hospital in question. This hospital may be entered by a 4-digit code number from the Hospital Code List (See pull down menu on PC or listing at the end of this instruction manual).

- 05 - Transfer to psychiatric hospital/unit
- 06 - Died with post mortem
- 07 - Died no post mortem
- 08 - Emergency Transfer to Non-Acute hospital
- 09 - Non Emergency Transfer to Non-Acute hospital
- 10 - Transfer to rehabilitation facility
- 11 - Hospice
- 12 - Prison
- 13 - Absconded
- 14 - Other (e.g. Foster care)
- 15 - Temporary place of residence (e.g. hotel)

↓

8. Date of Birth

The date of birth is stored as 8 digits (dd/mm/yyyy). It is possible to key the last two digits of the year (yy) and the software will convert this to a year this century (20yy). If the date of birth is unknown the year must be estimated and entered with the day and month being keyed as 00/00 e.g. 1981 = 00/00/1981.

The full date of birth is collected only at hospital level. Full details are not currently exported to the HPO.

↓

9. Infant Admission Weight

For patients aged less than 1 year of age, admission weight is collected in grams in the following circumstances:

- Required for all neonates (0-27 days old)
- Required for infants up to 1 year of age **with** an admission weight less than 2,500 grams.

The value collected will be the weight in whole grams on admission. If the patient is admitted on the day of birth, the admission weight will be the birth weight.

10. Sex

Enter appropriate code:

- 1 - Male
2 - Female
(3 - Unknown) *Rare and Unlikely*

↓

11. Marital /Civil Status

Enter appropriate code:

- | | | |
|--------------------------------|--------------------------|-----------------------------|
| 1 – Single | 5 – Unknown | 9 – Surviving Civil Partner |
| 2 – Married | 6 – Divorced | |
| 3 – Widowed | 7 – Civil Partner | |
| 4 – Other (includes Separated) | 8 – Former Civil Partner | |

↓

12. Medical Card Indicator

This relates to the patient’s eligibility and not to the status of bed used by the patient during the stay in hospital. If the patient has full eligibility for health services and has a medical card, the coder will enter the appropriate code

0 - No 1 - Yes 2 – Unknown

↓

13. EIRCODE* (This field is not mandatory for 2019).

Eircode is a smart location postcode system for all Irish addresses. An Eircode is a 7 alphanumeric character code consisting of a “Routing key”(consisting of the first 3 characters) and a “Unique Identifier” (consisting of the remaining characters). While the complete Eircode is recorded on the HIPE Portal locally in hospitals, **only the routing key is exported to the HIPE national file** for data protection reasons. It is expected that the Eircode will be downloaded from the PAS/IPMS/HIS. The Eircode refers to the normal address of the patient. The Eircode is collected for all cases except where the patient has a non-Irish address or has no fixed abode. Eircode is collected in addition to area of residence.

Eircode	Routing Key			Unique Identifier			
	Exported			Not Exported			

Example Eircode	Routing Key			Unique Identifier			
	A	6	5	F	4	E	2
	Exported			Not Exported			

* Please see <https://www.eircode.ie/home>

Dublin HIPE Postal Districts

North Dublin – 0100 (all **odd** numbered postal codes)

South Dublin – 0200 (all **even** numbered postal codes)

For further specificity a patient's own Dublin postal codes may be incorporated into these codes, 0100 & 0200. Please see the list of examples below.

Address	Code	Address	Code	Address	Code
Arbour Hill (7)	0107	Darndale (17)	0117	Monkstown	0200
Artane (5)	0105	Dartry (6)	0206	Mt. Merrion	0200
Baily (13)	0113	Deans Grange	0200	Mulhuddart (15)	0115
Balbriggan	0100	Dollymount (3)	0103	Neilstown (22)	0222
Baldoyle (13)	0113	Dolphin's Barn (8)	0208	Newtown Park	0200
Balgriffin (17)	0117	Donaghmede (13)	0113	Oldbawn (24)	0224
Ballinteer (16)	0216	Donnybrook (4)	0204	Palmerstown (20)	0220
Ballsbridge (4)	0204	Drimnagh (12)	0212	Pembroke (4)	0204
Ballybough (3)	0103	Drumcondra (9)	0109	Phibsboro (7)	0107
Ballybrack	0200	Dubber (11)	0111	Porterstown (15)	0115
Ballyedmonduff (18)	0218	Dundrum (14)	0214	Portmarnock	0100
Ballyfermot (10)	0210	Dun Laoghaire	0217	Portobello (8)	0208
Ballygall (11)	0111	East Wall (3)	0103	Priorswood (17)	0117
Ballyogan (18)	0218	Edmonstown (16)	0216	Raheny (5)	0105
Bawnogue (22)	0222	Elm Mount (9)	0109	Ranelagh (6)	0206
Bayside (13)	0113	Fairview (3)	0103	Rathgar (6)	0206
Beaumont (9)	0109	Finglas (11)	0111	Rathmines (6)	0206
Belcamp (17)	0117	Firhouse (24)	0224	Ringsend (4)	0204
Blackrock	0200	Four Courts (7)	0107	Riverside (17)	0117
Blanchardstown (15)	0115	Foxrock (18)	0218	Rockbrook (16)	0216
Bluebell (12)	0212	Goatstown (14)	0214	Roebuck (14)	0214
Bohernabreena (24)	0224	Griffith Ave. (9)	0109	S.C.R (8)	0208
Cabinteely (18)	0218	Harmonstown (5)	0105	Sandford (6)	0206
Cabra (7)	0107	Howth (13)	0113	Sandyford (18)	0218
Cappagh (11)	0111	Inchicore (8)	0208	Sandymount (4)	0204
Carrickmines (18)	0218	Irishtown (4)	0204	Santry (9)	0109
Castleknock (15)	0115	Island Bridge (8)	0208	Shankill (18)	0218
Chapelizod (20)	0220	Jamestown (11)	0111	Skerries	0100
Churchtown (14)	0214	Jobstown (24)	0224	Stepaside (18)	0218
Clondalkin (22)	0222	Kilmacud	0200	Stillorgan	0200
Clonee (15)	0115	Kilmainham (8)	0208	Sutton (13)	0113
Clonliffe (3)	0103	Kilmashogue (16)	0216	Tallaght (24)	0224
Clonshaugh (17)	0117	Kilnamanagh (24)	0224	Terenure (6)	0206
Clonsilla (15)	0115	Kilshane (11)	0111	The Coombe (8)	0208
Clontarf (3)	0103	Kiltiernan (18)	0218	Ticknock (18)	0218
Coolock (5)	0105	Kimmage Rd. (6w)	0206	Wadelai (11)	0111
Corduff (15)	0115	Knocklyon (16)	0216	Walkinstown (12)	0212
Cornelscourt (18)	0218	Malahide	0100	Whitechurch (16)	0216
Cremore (11)	0111	Marino (3)	0103	Whitehall (16)	0216
Cruagh (16)	0216	Merchants' Qy. (8)	0208	Whitehall (9)	0109
Crumlin (12)	0212	Merrion (4)	0204	Windy Arbour (14)	0214



↓ **15. Patient status on discharge**

Refers to the public/private status of the patient and not to the type of bed occupied. Either public or private must be specified.

Enter appropriate code:

1 - Public

2 - Private

Where the patient has a discharge status of Private the **Health Insurer** of the patient will be collected where applicable. The coder will have the option to select from the following list:

Code	Description
1	Voluntary Health Insurance (VHI)
2	Laya (formerly Quinn Healthcare)
3	Irish Life Health (formerly Aviva)
5	Company Insurance plan (ESB etc.)
6	State employee insurance (Prison Officer, Garda, Army)
7	GloHealth
8	Not stated
9	Other
0	No Insurance

For private patients, the number of days in a public/private/semi-private or ITU bed in a single and multiple occupancy ward/room will also be collected. See page 10.

↓ **16. Day Case**

A day case is a patient who is admitted to hospital on an elective basis for care and/or treatment which does not require the use of a hospital bed overnight and who is discharged as scheduled. (*Source*: Department of Health and Children, September 1993).

Enter appropriate code for Day Case: **0** - No **1** – Yes

↓ **17. Day Ward Indicator**

If the patient is identified as a day case it is necessary to denote that the patient was admitted to a dedicated named day ward. The options presented will be

0 - No **1** - Yes **2** - Unknown.

Hospitals must register their dedicated day wards with the Healthcare Pricing Office prior to using this facility.

↓ **18. Day Ward Identifier**

If the answer to Day Ward Indicator is **1 – Yes**, the pre-registered Day Ward name must be entered to identify the day place where the patient was treated.

19. ITU/ICU days (where applicable)

This identifies the number of days, or part thereof, the patient spent in an intensive care environment e.g. ICU/ITU/CCU/HDU/NITU etc.

Where part of day is spent in ICU the allocation of public/private/semi- private days (see below) can be adjusted accordingly.

↓ a) Total number of days[†] in an ITU/ICU bed

Where the patient status on discharge is private the following will also be collected:

- Number of days in an ITU/ICU bed– single occupancy room/ward[#]
- Number of days in an ITU/ICU bed – multiple occupancy room/ward[#]

20. Number of days (where applicable) in a:

Private Bed

a) Total number of days[†] in a Private Bed

Where the patient status on discharge is **private** the following will **also** be collected:

- ↓
- Number of days in a Private bed – single occupancy room/ward[#]
 - Number of days in a Private bed – multiple occupancy room/ward[#]

Semi-private bed

b) Total number of days[†] in a Semi-private bed

Where the patient status on discharge is **private** the following will **also** be collected:

- Number of days in a Semi-private bed – single occupancy room/ward[#]
- Number of days in a Semi-private bed – multiple occupancy room/ward[#]

21. Number of days (where applicable) in a:

Public bed

a) Total number of days[†] in a Public bed

Where the patient status on discharge is **private** the following will **also** be collected:

- ↓
- Number of days in a Public bed – single occupancy room/ward[#]
 - Number of days in a Public bed – multiple occupancy room/ward[#]

❖ **The following guidelines apply to 19, 20 and 21 above;**

The midnight census can be used to determine the number of days spent in these environments. If the patient spends less than 1 day in these environments and is not present at the time of the midnight census, a stay of less than one day can optionally be recorded as '1' day.

† The total number of days in a private/semi-private/public bed are based on the designation of the bed and not the public/private status of the patient.

Number of days in single/multiple occupancy rooms/wards are collected where Patient status on Discharge = 2 (private) ONLY.

22. Consultant Identifiers

Each consultant has a unique number (4 digit code) assigned by the HPO which may *not* be used for any other consultant. When a consultant (including non-permanent consultants) takes up duty a written request for a new (or existing) number is sent to the HPO (please email HIPEnumber@HPO.ie). All consultant numbers are encrypted on export to the HPO.

Notes:

- **For data entry purposes, where the entire case is handled by one consultant his/her code number need only be entered opposite the principal diagnosis.**

- **If more than one consultant is involved in a case** the relevant consultant code number will be placed opposite the relevant diagnoses/procedures.
See ICS 0027 Multiple Coding.

- **Specialty of A Case: A specialty code is assigned to the case on the basis of the specialty assignment of the consultant associated with the principal diagnosis.**
The specialty assignment of the consultant is determined locally. All specialty codes are listed at the end of this instruction manual. The specialty code of the discharge consultant is also collected.

Consultant Types:

22(a) Primary Consultant

↓ The primary consultant is the consultant who has overall responsibility for the case. If there is no clear information in the chart on the identity of the primary consultant, the code for the discharge consultant will be used.

22(b) Admitting Consultant

↓ The admitting consultant is the consultant who admits the patient. If there is no clear information in the chart on the identity of the admitting consultant, the code for the primary consultant will be used.

22(c) Discharge Consultant and Specialty

↓ The discharge consultant is the consultant who discharges the patient at the end of the episode.

22(d) Specialty of Discharge Consultant

↓ The specialty of the discharge consultant.

22(e) Consultant Anaesthetists

The consultant anaesthetist should be recorded next to the procedure where a coded anaesthetic was administered as part of the procedure. The operating consultants' and consultant anaesthetists' codes will also be repeated against the anaesthetic code for the procedure.

If there is no coded anaesthetic for a procedure then there will be no code entered for the consultant anaesthetist. The existing coding standard on the administration of local anaesthetic (ACS 0031) continues to apply and, as such, neither local anaesthetics nor the consultants who administer them should be coded.

Anaesthetics administered by a non-anaesthetist will record the particular consultant's code.

22(f) Intensive Care Consultant

Consultant codes are assigned for Intensive Care Consultants/Consultant Intensivists when a patient spends any time in an intensive care environment and this is documented in the chart. Codes for up to ten Intensive Care Consultant/Consultant Intensivists can be entered on the patient's HIPE record.

23. Procedure Dates

A procedure date is collected for all coded procedures. The principal procedure is sequenced first regardless of the date performed. See ICS 002X *Date for Each Procedure Performed*.

24. Ward Identification

The ward identifier can be up to 6 characters in length.

- Admitting ward:

The ward to which the patient is formally admitted. If the admission ward is unclear the coder should determine the ward based on the midnight census.

Note: where a patient is admitted into an ED virtual ward and there is a decision to admit, the admitting ward will be the ED virtual ward. ED virtual wards must be registered with the HPO.

- Discharge ward:

The ward occupied prior to discharge.

(Source: Department of Health & Children CX06/2006)

Please note that the discharge ward cannot be a discharge lounge.

25. Temporary leave days (where applicable)

For all discharges the number of temporary leave days will be collected to “enable the collection of information on the number of days during an in-patient stay where the patient is not in the hospital and has been temporarily sent home.”
(Source: Department of Health & Children CX06/2006)

There will be a single HIPE record to include the total length of stay in days from the patient’s original admission to the eventual final discharge.

This field will **not** be collected where:

- A patient is considered to be “clinically discharged” but continues to reside in a bed for a number of days prior to being transferred to another facility.
- Where a patient is temporarily sent to another hospital for a day to undergo a particular procedure.
- Where the patient returns home during a day and returns before midnight.
- Where a patient returns home for more than three days and is readmitted after this.

26. Number of days in a Critical Care Bed (where applicable)

This field will record the number of days a patient spent in a Level 2, Level 3 or Level 3s critical care bed using the definitions used by the Critical Care Programme ¹

- The number of days is to be based on the midnight census
- Intensive care beds are considered to be non-designated and as such are neither public nor private
- This information is collected for all patients
- The ‘number of days in a critical care bed’ field is not related to the ‘number of days in a ITU bed’ field and should be collected separately. This field is to distinguish level 2, level 3 and level 3s beds from other types of ICU/ITU beds.

¹<http://www.hse.ie/eng/about/Who/clinical/natclinprog/criticalcareprogramme/modelofcare/criticalcare.pdf>

↓ **27. Parity** (see also Irish Coding Standards: HIPE Guidelines for Administrative Data; Parity)

Collection of the patient's parity is mandatory for all cases with admission type "6 *Maternity*". For this variable, two separate integer (whole) numbers are collected to record:

- The number of previous livebirths
- The number of previous stillbirths (over 500g)

For multiple births, each birth is counted. The current pregnancy is not included. Where information is available, parity may be collected for all other females regardless of admission type.

Please note the following:

- Please use '0' to record where there are no previous live births and/or stillbirths.
- If the number of previous live births or the number of previous stillbirths is not documented this will be recorded as NA (not available).

28. Hospital Reference Number for HPO Use:

A 3 digit code allocated to your hospital by the HPO for HIPE operational purposes and is automatically assigned by the data entry software. This code is for HPO operational use only. It differs from the 4-digit Hospital Code List (see page 16) which are used for transfers and to identify the hospital that the patient attends (see item 1 on page 3).

↓ **29. Medical Discharge Date/ Medically Fit for Discharge Date**

Where a clinician documents and dates that a patient is medically fit for discharge a date can be collected. Where a "medical discharge date" is not documented the field will default to the discharge date of the patient.

This date is collected since 1.1.2017.

Queries on this variable can be directed to the appropriate clinician.

↓ **30. Number of Nights in an ED virtual ward**

From 01.01.2019 HIPE will collect the number of nights a patient spends in a registered ED virtual ward. This is based on the midnight census. The field will default to blank meaning the patient did not spend anytime in an ED Virtual ward. This variable applies only to cases with an emergency admission type. This variable is collected for all patients with a virtual ward element of their episode of care.

31. Duration of Continuous Ventilatory Support (CVS) - Cumulative

For patients receiving continuous ventilatory support/mechanical ventilation HIPE will, from 01.01.2019, collect the total number of hours of CVS. Cases with a procedure code from block [569] *Ventilatory support* require the total cumulative number of hours of CVS to be collected as an administrative variable.

The maximum number of hours that can be recorded as an administrative variable for duration of CVS - cumulative is 9999.

See also Irish Coding Standards, Guidelines for administrative data, Section 1, X. DURATION OF CONTINUOUS VENTILATORY SUPPORT (CVS) - Cumulative



- **Batch Coding Facility for Radiotherapy and Dialysis Episodes**

A program is available to facilitate the collection of same day radiotherapy and dialysis episodes. Please contact the Healthcare Pricing Office for information on this software.

- **Optional Field: Date of transfer to a Pre-Discharge Unit/Rehab (where applicable)**

A date may be collected to identify when a patient was *transferred* to a Pre-Discharge Unit/Rehab within the hospital prior to being discharged as planned. Prior to collecting this additional field hospitals must register the Pre-Discharge Unit/Rehab with the Healthcare Pricing Office and contact the HIPEIT@hpo.ie to activate the optional field:

By definition this will not be the same as discharge date.

e.g. A patient is transferred to the Pre Discharge Unit/Rehab of their hospital on 16th March 2019 and is discharged home from the Pre-Discharge Unit/Rehab 3 days later on the 19th March 2019.

Date of transfer to Pre Discharge Unit/Rehab	16	03	2019
Date of Discharge from Hospital	19	03	2019

HOSPITAL CODE LIST

(For use with transfers and on download)

Dublin and Mid Leinster Region

- 0100 St. Mary's Hospital, Phoenix Park
- 0101 St. Columcille's Hospital, Loughlinstown
- 0102 Naas General Hospital
- 0106 Cherry Orchard Hospital, Ballyfermot
- 0201 Midland Regional Hospital, Portlaoise
- 0202 Midland Regional Hospital, Mullingar
- 0203 Midland Regional Hospital, Tullamore

Dublin and North East Region

- 0400 Louth County Hospital, Dundalk
- 0402 Cavan General Hospital
- 0403 Our Lady's Hospital, Navan
- 0404 Monaghan General Hospital
- 0922 Our Lady of Lourdes Hospital, Drogheda
- 0108 Connolly Hospital Blanchardstown

Western Region

- 0300 University Hospital Limerick (Dooradoyle)
- 0301 University Maternity Hospital, Limerick
- 0302 Croom Orthopaedic Hospital, Limerick
- 0304 UL Hospitals, Nenagh Hospital
- 0305 UL Hospitals, Ennis Hospital
- 0500 Letterkenny University Hospital
- 0501 Sligo University Hospital
- 0502 Our Lady's Hospital, Manorhamilton
- 0800 Galway University Hospitals

~~0801 Merlin Park University Hospital, Galway~~

[From June 2011 the use of code 0801 is invalid. All transfers to/from Galway University Hospital and the hospital previously known as Merlin Park are now identified using the code for the single entity 'Galway University Hospitals' 0800]

- 0802 Mayo University Hospital
- 0803 Roscommon County Hospital
- 0805 Ballina District Hospital
- 0919 Portiuncula Hospital, Ballinasloe

Southern Region

- 0600 University Hospital Waterford (Ardkeen)
- 0601 St. Luke's General Hospital, Kilkenny
- 0602 Kilcreene Orthopaedic Hospital
- 0605 Wexford General Hospital
- 0607 South Tipperary General Hospital, Clonmel
- 0608 Our Lady's Hospital, Cashel
- 0701 St. Mary's Orthopaedic Hospital, Gurrabraher
- 0703 Mallow General Hospital
- 0704 Bantry General Hospital
- 0705 St. Finbarr's Hospital, Cork
- 0724 Cork University Hospital (Includes Cork University Maternity Hospital)
- 0725 Erinville Hospital, Cork (Closed March 2007)
- 0726 University Hospital Kerry

Voluntary Hospitals

- ~~0901 Adelaide Hospital, Dublin~~
- ~~0903 Meath Hospital, Dublin~~
- 0904 St. James's Hospital, Dublin
- 0908 Mater Misericordiae University Hospital, Dublin
- 0910 St. Vincent's University Hospital, Elm park
- 0912 St. Michael's Hospital, Dun Laoghaire
- 0913 Mercy University Hospital, Cork.
- 0915 South Infirmary/Victoria University Hospital, Cork
- 0918 St. John's Hospital, Limerick
- 0923 Beaumont Hospital, Dublin
- 0925 Peamount Hospital, Newcastle
- 0930 Coombe Women and Infants University Hospital, Dublin
- 0931 National Maternity Hospital, Holles St, Dublin
- 0932 Rotunda Hospital, Dublin
- 0934 Waterford Maternity Hospital
- 0940 The Children's University Hospital, Temple St, Dublin
- 0941 Our Lady's Children's Hospital, Crumlin
- ~~0943 National Children's Hospital, Harcourt St~~
- ~~0945 St. Anne's Hospital, Dublin~~
- ~~0946 Hume St. Hospital, Dublin~~
- 0947 St. Luke's Hospital, Rathgar
- 0948 St Luke's Radiation Oncology Network - St James's Centre
- 0949 St Luke's Radiation Oncology Network - Beaumont Centre
- 0950 Royal Victoria Eye & Ear Hospital, Dublin
- 0954 Incorporated Orthopaedic Hospital, Clontarf
- 0955 Cappagh National Orthopaedic Hospital,
- 0956 St. Mary's Auxiliary Hospital, Baldoyle
- 0960 Nat. Rehabilitation Hospital (NRH), Dun Laoghaire
- 0978 Our Lady's Hospice, Harold's Cross, Dublin
- 1225 St. Joseph's Unit, Harold's Cross
- 1270 Tallaght University Hospital
- 1762 St. Joseph's Hospital, Raheny
- 1001 Blackrock Hospice

Other Acute Hospitals (not in Hospital Code List above)

- 9030 Acute Hospital in Northern Ireland
- 9031 Acute Hospital in England
- 9032 Acute Hospital in Scotland
- 9033 Acute Hospital in Wales
- 9040 Acute Hospital in France
- 9041 Acute Hospital in Germany
- 9050 Acute Hospital in the United States of America

- 9060 Private Hospital
- 9099 Other Acute Hospital

Department of Health

Database list of consultant specialties

- 0100** Cardiology
- 0300** Dermatology
- 0400** Endocrinology
 - 0402** Diabetes Mellitus
- 0600** Otolaryngology (ENT)
 - 0601** Paediatric ENT
- 0700** Gastro-Enterology
- 0800** Genito-Urinary medicine
- 0900** Geriatric medicine
 - 0902** Psychogeriatric medicine
- 1100** Haematology
 - 1102** Transfusion Medicine
- 1300** Neurology
 - 1302** Paediatric Neurology
- 1400** Neurosurgery
 - 1402** Paediatric Neurosurgery
- 1500** Obstetrics/Gynaecology
 - 1502** Obstetrics
 - 1503** Gynaecology
- 1600** Oncology
- 1700** Ophthalmology
 - 1702** Neuro-Ophthalmic Surgery
 - 1703** Vitro-Retinal Surgery
- 1800** Orthopaedics
 - 1802** Paediatric Orthopaedic Surgery
- 1900** Paediatrics
 - 1902** Paediatric Cardiology
 - 1903** Paediatric Oncology
 - 1904** Neonatology
 - 1905** Paediatric Endocrinology
 - 1906** Paediatric Gastro-enterology
 - 1907** Paediatric Haematology
 - 1908** Paediatric A/E (ED) Medicine
 - 1909** Paediatric Infectious Diseases
 - 1910** Paediatric Metabolic Medicine
 - 1911** Paediatric Nephrology
 - 1912** Paediatric Respiratory Medicine
 - 1913** Perinatal Paediatrics
 - 1914** Paediatric Physical Handicap
 - 1915** Paediatric Dermatology
 - 1916** Paediatrics Development

Department of Health

Database list of consultant specialties Contd.

- 2000** Plastic Surgery
 - 2003** Maxillo-Facial
- 2100** Psychiatry
 - 2102** Child/adolescent Psychiatry
 - 2103** Forensic Psychiatry
 - 2104** Substance Abuse
 - 2105** Old Age Psychiatry
 - 2106** Rehabilitation Psychiatry
- 2200** Radiology
 - 2202** Paediatric Radiology
 - 2203** Neuroradiology
- 2300** Nephrology
- 2400** Respiratory Medicine
- 2500** Rheumatology
- 2600** General Surgery
 - 2602** Gastro-Intestinal Surgery
 - 2603** Hepato-Biliary Surgery
 - 2604** Vascular Surgery
 - 2605** Breast Surgery
- 2700** Infectious Diseases
 - 2702** Tropical
- 2800** Accident & Emergency
- 3000** Rehabilitation Medicine
 - 3002** Spinal paralysis
- 5000** General Medicine
- 6000** Audiological Medicine
- 6100** Public Health Medicine
- 6200** Clinical Neurophysiology
- 6300** Clinical Pharmacology
- 6400** Clinical Physiology
- 6500** G.P. Medicine
- 6700** Clinical (Medical) Genetics
- 6800** Mental Handicap
- 6900** Nuclear Medicine

Department of Health

Database list of consultant specialties Contd.

7000	Dental Surgery
	7001 Oral Surgery
	7002 Orthodontics
7100	Occupational Medicine
7200	Paediatric Surgery
7300	Palliative Medicine
7400	Pathology
7500	Radiotherapy
7600	Cardio-Thoracic Surgery
7700	Metabolic Medicine
7800	Urology
	7802 Renal Transplantation
	7803 Paediatric Urology
7900	Clinical Immunology
8000	Anaesthetics
	8002 Intensive Care
	8003 Pain Relief
	8004 Paediatric Anaesthetics
8300	General Pathology
8400	Chemical Pathology
	8402 Paediatric Chemical Pathology
8500	Histopathology
	8502 Neuropathology
8600	Biochemistry
8700	Cytology
8800	Immunology
8900	Microbiology
	8902 Virology
9000	Other*

* Specialty code not for use in HIPE portal from 01.01.2019

Coding Schemes Used in HIPE in Ireland

- 2015 8th Edition ICD-10-AM/ACHI/ACS for both Diagnoses and Procedures
- 2009 – 2014 6th Edition ICD-10-AM/ACHI/ACS for both Diagnoses and Procedures
- 2005 – 2008 4th Edition ICD-10-AM for both Diagnoses and Procedures
- 1999 – 2004 ICD-9-CM (Oct 98 version) for both Diagnoses and Procedures
- 1995 – 1998 ICD-9-CM (Oct 94 version) for both Diagnoses and Procedures
- 1990 – 1994 ICD-9-CM (Oct 88 version) for both Diagnoses and Procedures
- 1981 – 1989 ICD-9 for Diagnoses and OPCS Procedures classification
- 1969 – 1980 ICD-8 for Diagnoses and OPCS¹ Procedures classification

¹Office of Population Censuses and Surveys (OPCS) 1975, *Classification of Surgical Operations*, Second Edition, London

Final Dates for Download and Export in 2019*

HIPE Export Month	Download All Cases	Final Receipt day	Date
End of December 2018	31/12/2018	Friday	04/01/2019
End of January 2019	31/01/2019	Tuesday	05/02/2019
End of February 2019	28/02/2019	Tuesday	05/03/2019
End of March 2019	31/03/2019	Wednesday	03/04/2019
End of April 2019	30/04/2019	Friday	03/05/2019
End of May 2019	31/05/2019	Thursday	06/06/2019
End of June 2019	30/06/2019	Wednesday	03/07/2019
End of July 2019	31/07/2019	Tuesday	06/08/2019
End of August 2019	31/08/2019	Wednesday	04/09/2019
End of September 2019	30/09/2019	Thursday	03/10/2019
End of October 2019	31/10/2019	Tuesday	05/11/2019
End of November 2019	30/11/2019	Wednesday	04/12/2019
End of December 2019	31/12/2019	Monday	06/01/2020

* Export dates are on the third working day of the next month to ensure a full download of all cases for the previous month.