

Emergency Room (ER) Section

BOX_00

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| CONTEXT HEADER DISPLAY INSTRUCTIONS: |  
| DISPLAY PERS.FULLNAME, PROV.LORPNAME, |  
| EVNT.EVNTBEGM, EVNT.EVNTBEGD, EVNT.EVNTBEGY |  
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ER01

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{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

Did (PERSON) see a medical doctor during this particular visit?

YES 1 {ER02}
NO 2 {ER02}
REF -7 {ER02}
DK -8 {ER02}

HELP AVAILABLE FOR DEFINITION OF MEDICAL DOCTOR.

ER02
=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

SHOW CARD ER-1.

Please look at this card and tell me which category **best**
describes the care (PERSON) received during the visit to
(PROVIDER) emergency room on (VISIT DATE).

| | | |
|--|----|--------|
| DIAGNOSIS OR TREATMENT | 1 | {ER03} |
| EMERGENCY (E.G., ACCIDENT OR INJURY) ... | 2 | {ER03} |
| PSYCHOTHERAPY OR MENTAL HEALTH | | |
| COUNSELING | 3 | {ER03} |
| FOLLOW-UP OR POST-OPERATIVE VISIT | 4 | {ER03} |
| IMMUNIZATIONS OR SHOTS | 5 | {ER03} |
| PREGNANCY-RELATED (INCLUDING | | |
| PRENATAL CARE AND DELIVERY) | 6 | {ER03} |
| OTHER | 91 | {ER03} |
| REF | -7 | {ER03} |
| DK | -8 | {ER03} |

[Code One]

HELP AVAILABLE FOR DEFINITIONS OF ANSWER CATEGORIES.

| IF CODED '6' (PREGNANCY-RELATED (INCLUDING |
| PRENATAL CARE AND DELIVERY)), CHECK THAT PERSON IS |
| FEMALE. IF NOT, DISPLAY THE FOLLOWING MESSAGE: |
| 'CODE UNAVAILABLE FOR MALES. VERIFY AND RE-ENTER.' |

ER03
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{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

Was this visit related to any specific health condition or
were any conditions discovered during this visit?

YES 1 {ER04}
NO 2 {ER05}
REF -7 {ER05}
DK -8 {ER05}

ER04
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{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

What conditions were discovered or led (PERSON) to make
this visit?

PROBE: Any other condition?

IF CONDITION IS ALREADY LISTED, SELECT ENTRY ON ROSTER.

- [1. Medical Condition]
- [2. Medical Condition]
- [3. Medical Condition]

| DISPLAY 'ADD CONDITION' AS AN OPTION ON THIS |
| SCREEN. |

| GO TO ER05 |

| ROSTER DETAILS: |
| Title: PERS_COND_1 |
| |
| COL #1 HEADER: MEDICAL CONDITION |
| INSTRUCTIONS: DISPLAY NAME OF MEDICAL CONDITION |
| (COND.CONDNAM) |

| ROSTER DEFINITION: |
| DISPLAY THE PERSON-MEDICAL-CONDITIONS-ROSTER FOR |
| THE SELECTION AND ADDITION OF ONE OR MANY MEDICAL |
| CONDITION(S) ASSOCIATED WITH THIS EVENT. |

| ROSTER BEHAVIOR: |

- | 1. MULTIPLE SELECT ALLOWED. SELECTION SHOULD NOT |
| IMPACT THE ROUND FLAG OF THE CONDITION. |
 - | 2. MULTIPLE ADD ALLOWED. INTERVIEWER SHOULD RECORD |
| THE CONDITION NAME. |
 - | 3. LIMITED DELETE ALLOWED. INTERVIEWER MAY DELETE |
| A CONDITION ADDED ON THIS SCREEN AS LONG AS |
| CAPI HAS NOT YET CREATED THE LINK BETWEEN THIS |
| CONDITION AND THE EVENT. IF THE INTERVIEWER |
| ATTEMPTS TO DELETE A CONDITION WHEN DELETE IS |
| NOT ALLOWED, DISPLAY THE FOLLOWING MESSAGE: |
| "DELETE ALLOWED ONLY WHEN CONDITION IS FIRST |
| ENTERED." |
 - | 4. LIMITED EDIT ALLOWED. INTERVIEWER MAY EDIT A |
| CONDITION NAME NEWLY ADDED ON THIS SCREEN AS |
| LONG AS CAPI HAS NOT YET CREATED THE LINK |
| BETWEEN THIS CONDITION AND THE EVENT. IF THE |
| INTERVIEWER ATTEMPTS TO EDIT A CONDITION WHEN |
| EDIT IS NOT ALLOWED, DISPLAY THE FOLLOWING |
| MESSAGE: "EDIT ALLOWED ONLY WHEN CONDITION IS |
| FIRST ENTERED." |
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| ROSTER FILTER: |

| DISPLAY ALL CONDITIONS ON PERSON'S ROSTER; NO |
| FILTER. |

ER05
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{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

SHOW CARD ER-2.

Looking at this card, which of these services, if any,
did (PERSON) have during this visit?

CHECK ALL THAT APPLY.

| | | |
|------------------------------|----|--------|
| LABORATORY TESTS | 1 | {ER06} |
| SONOGRAM OR ULTRASOUND | 2 | {ER06} |
| X-RAYS | 3 | {ER06} |
| MAMMOGRAM | 4 | {ER06} |
| MRI OR CATSCAN | 5 | {ER06} |
| EKG OR ECG | 6 | {ER06} |
| EEG | 7 | {ER06} |
| VACCINATION | 8 | {ER06} |
| ANESTHESIA | 9 | {ER06} |
| OTHER DIAGNOSTIC TEST | 10 | {ER06} |
| THROAT SWAB | 11 | {ER06} |
| NO SERVICES RECEIVED | 95 | {ER06} |
| REF | -7 | {ER06} |
| DK | -8 | {ER06} |

HELP AVAILABLE FOR DEFINITIONS OF ANSWER CATEGORIES.

[Code All That Apply]

| ALLOW CODE '4' (MAMMOGRAM) ONLY IF PERSON IS |
| FEMALE AND AGE IS > 17 YEARS (OR AGE CATEGORIES 4 |
| THROUGH 9) . |

| ALLOW CODE '95' (NO SERVICES RECEIVED), '-7' |
| (REFUSED), AND '-8' (DON'T KNOW) ALONE ONLY; THESE |
| RESPONSES MAY NOT BE SELECTED WITH ANY OTHER |
| RESPONSE. |

| NOTE: 'OTHER DIAGNOSTIC TESTS' AND 'NO SERVICES |
| RECEIVED' ARE NOT DISPLAYED ON SHOW CARD. |

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| HARD CHECK: |  
| EDIT: IF CODED '95' (NO SERVICES RECEIVED), |  
| NO OTHER SERVICE CATEGORIES CAN BE CODED. IF |  
| INTERVIEWER SELECTS ANOTHER CODE WITH 'NO |  
| SERVICES', DISPLAY THE FOLLOWING MESSAGE: "NO |  
| SERVICES RECEIVED CANNOT BE SELECTED WITH OTHER |  
| OPTIONS. VERIFY AND RE-ENTER." |  
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ER06
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{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

Was a surgical procedure performed on (PERSON) during this
visit?

YES 1 {ER08}
NO 2 {ER08}
REF -7 {ER08}
DK -8 {ER08}

HELP AVAILABLE FOR DEFINITION OF SURGICAL PROCEDURE.

ER07
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OMITTED.

ER08
=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

During this visit, were any medicines prescribed for (PERSON)?
Please include only prescriptions which were filled.

YES 1 {ER09}
NO 2 {BOX_03}
REF -7 {BOX_03}
DK -8 {BOX_03}

HELP AVAILABLE FOR DEFINITION OF PRESCRIBED MEDICINE.

ER09
=====

{PERSON'S FIRST MIDDLE AND LAST NAME} {NAME OF MEDICAL CARE
PROVIDER} {EVN-DT}

Please tell me the names of the prescriptions from this visit
that were filled.

PROBE: Any other prescribed medicines from this visit that were
filled?

- [1. Prescribed Medicine]
- [2. Prescribed Medicine]
- [3. Prescribed Medicine]

| DISPLAY 'ADD MEDICINE' AS AN OPTION ON THIS |
| SCREEN. |

| GO TO BOX_03 |

| ROSTER DETAILS: |
| TITLE: PERSON'S_PRESCRIBED_MEDICINES_1 |
| |
| COL # 1 HEADER: PRESCRIBED MEDICINE |
| INSTRUCTIONS: DISPLAY NAME OF PRESCRIBED MEDICINE |
| (DRUG.DRUGNAME) |

| ROSTER DEFINITION: |
| THIS ITEM DISPLAYS THE PERSON'S-PRESCRIPTION- |
| MEDICINES-ROSTER FOR SELECTION. |

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| ROSTER BEHAVIOR: |  
| 1. MULTIPLE SELECT ALLOWED. |  
| |  
| 2. MULTIPLE ADD ALLOWED. |  
| |  
| 3. LIMITED DELETE ALLOWED. INTERVIEWER MAY DELETE |  
| A MEDICINE ADDED ON THIS SCREEN AS LONG AS |  
| CAPI HAS NOT YET CREATED THE LINK BETWEEN THIS |  
| MEDICINE AND THE EVENT. |  
| |  
| 4. EDIT DISALLOWED. |  
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| ROSTER FILTER: |  
| DISPLAY ALL MEDICINES ON PERSON'S ROSTER; NO |  
| FILTER. |  
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ER10

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OMITTED.

ER11

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OMITTED.

LOOP_01

=====

OMITTED.

BOX_01

=====

OMITTED.

BOX_02

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OMITTED.

ER12

=====

OMITTED.

END_LP01

=====

OMITTED.

BOX_03
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| IF THE CHARGE/PAYMENT (CP) SECTION FOR THIS |
| EMERGENCY ROOM EVENT IS NOT COMPLETED, ASK THE |
| CHARGE/PAYMENT (CP) SECTION |

| OTHERWISE, GO TO THE EVENT DRIVER (ED) SECTION |
