THE MODEL SPINAL CORD INJURY SYSTEMS’

DATA COLLECTION SYLLABUS

FOR THE

NATIONAL SPINAL CORD INJURY DATABASE

2000-2005 PROJECT PERIOD

This is a publication of the National Spinal Cord Injury Statistical Center, Birmingham, Alabama, which is funded under cooperative agreement number H133A011201 from the National Institute on Disability and Rehabilitation Research, Office of Special Education and Rehabilitative Services, U.S. Department of Education, Washington, DC. The opinions contained in this publication are those of the grantee and do not necessarily reflect those of the U.S. Department of Education.
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INTRODUCTION

A major priority of the National Spinal Cord Injury Statistical Center (NSCISC) is continual refinement and improvement of the National SCI Database. Recommendations for revisions are made not only by the NSCISC staff but also by the national data collectors, project directors and members of the Database Committee (established by the Project Directors in 1989).

Database History

The National Spinal Cord Injury Database began in Phoenix Arizona in 1975. Data were collected retrospectively back to 1973 and prospectively since 1975. With some exceptions, data have been collected on all persons receiving initial inpatient rehabilitation at a Model Spinal Cord Injury System within one year of spinal cord injury. Only patients who were injured in and usually resided in the geographic catchment area of the Model System and whose injuries occurred due to trauma have been allowed in the database. The database is not population based since patients who are not treated at Model SCI Systems are not included. It has been estimated that between 10 and 15% of all new spinal cord injuries each year are included in the database. Two sets of data have been collected. Form I includes demographic data and information on acute care and rehabilitation experiences and treatment outcomes and is collected once on all persons. From 1986 to September 2000, Form I was collected on persons admitted to a Model System within 60 days of injury. The Registry database was created for patients admitted between post-injury day 61 and 365. The Registry database included only very limited demographic data and no patient follow-up data. Beginning October 2000 the Form I data submission criteria reverted back to the pre-1986 rule (i.e., Form I data are collected on all patients admitted to a system within one year of injury). Since 1995, the Form I for persons admitted to the Model System within 24 hours of injury is more detailed than the Form I for remaining patients.

Other changes to the Form I eligibility criteria were made in 2000: (1) subjects must receive treatment/care in all components of the system was changed to persons must receive acute care and/or rehab in the System; (2) the stipulation that, prior to system admission, subjects cannot have been discharged from a hospital for a period longer than that normally accepted as therapeutic leave of absence was deleted; (3) subjects shall usually reside in and must have been injured in the System's catchment area was changed to persons must reside in the catchment area and may be injured outside the catchment area. During their December 2004 meeting the Directors changed persons must receive acute care and/or rehab in the System to must receive acute inpatient rehab in the System (unless they expire, recover or have minimal deficit during System acute care); may receive System inpatient subacute rehab. Also, these pre-2000 rules were restored: (A) Must be discharged from the SCI care system as (1) normal neurologically or minimal deficit, (2) expired, or (3) having completed inpatient rehabilitation. (B) The patient is not eligible for Form I if he leaves against medical advice or transfers out of System prior to completion of the initial inpatient rehabilitation process. And (C) If there will be no follow-up (for reasons other than their becoming normal neuro, minimal neuro or deceased) then, the patient should be entered into the Registry (not Form I). The remaining Form I eligibility criteria have not changed since the start of the database: (1) persons must have neurologic deficit at the time of admission; (2) a signed informed consent is required; and (3) subjects must be discharged as recovered (or with minimal deficit); expired or having completed rehab.

Form II includes data collected annually to reflect both occurrences during the year and current status at the time of the annual evaluation. Beginning in 1996 a sampling process was implemented to reduce workload at systems with large patient populations since grant-funding levels were equalized across all systems beginning in 1995. Through September 2000, Form II was collected in post-injury years 1, 2, 5, 10 and every 5 years thereafter except for a sample of 125 patients from each Model System who continued to have a reduced set of Form II data.
collected every year. To further reduce the workload during the 2000-2005 project period, Form II data collection was no longer required at year 2 and the sample of 125 patients per Model System on whom data are collected each follow-up year was terminated.

Changes in the exact variables included in both Form I and Form II have occurred every two or three years as variables with poor reliability or diminished utility are deleted and new items of importance and interest are added. A detailed description of the history of the database can be found in the November 1999 issue of the Archives of Physical Medicine and Rehabilitation (pages 1365-1371) and lists of all changes have been published in the NSCISC statistical reports.

At the beginning of each new five-year funding period, the NSCISC removes variables deleted during the previous project period from the data collection forms and syllabus. All current variables are consecutively numbered and every attempt is made to group related variables. A complete list of Form I and Form II variables (with their "1995-2000" and "2000-2005" project period variable numbers) may be found beginning on page 26.

Whenever changes occur in the National Spinal Cord Injury Database records currently in the database are all converted to the new format. All previous versions of the National Spinal Cord Injury Database are stored at the NSCISC.

**PURPOSE OF THE NATIONAL SCI DATABASE**

Within the scope of the Model SCI System program, the purpose of the National SCI Database is as follows:

1. To study the longitudinal course of traumatic spinal cord injury and factors that affect that course.
2. To identify and evaluate trends over time in etiology, demographic, and injury severity characteristics of persons who incur a spinal cord injury.
3. To identify and evaluate trends over time in health services delivery and treatment outcomes for persons with spinal cord injury.
4. To establish expected rehabilitation treatment outcomes for persons with spinal cord injury.
5. To facilitate other research such as the identification of potential persons for enrollment in appropriate spinal cord injury clinical trials and research projects or as a springboard to population-based studies.

The National SCI Database is not intended to study the effectiveness of Model System care compared to other systems of health care delivery. It is also not by itself intended to gather and maintain population-based data on spinal cord injuries.

**SUMMARY OF CHANGES FOR THE 2000-2005 PROJECT PERIOD**

At the December, 1999 Project Directors’ meeting, a decision was made to appoint an ad-hoc committee to develop recommendations for the revision of the national database that would be implemented at the beginning of the new grant cycle in October, 2000. The ad-hoc committee consisted of 5 Model System researchers and they began the database review process by soliciting suggestions from Archives special issue paper authors and the standing committees of the Project Directors. Representatives from NIDRR, CDC, PVA and NHTSA joined the ad-hoc committee in its deliberations. That committee presented its plan for approval to the Project Directors at their June 2000 meeting and the following changes were approved:
• The eligibility criteria for Form I would be expanded in such a way that most current registry patients and even some patients who may not be eligible currently for the registry would be eligible for Form I and subsequent follow-up on Form II. Since this would greatly increase the workload at some Model Systems, sampling may be implemented at those model systems depending on NIDRR funding decisions. A Registry data file will be used for cases excluded from Form I. As in the past, only traumatic SCI cases would be allowed into the database, and only from Model System patients. The database would remain without a population basis.

• A reduced version of the Form III data collection protocol previously field-tested at 5 model systems has been incorporated into Form I. This requires the reporting of all dates of admission and discharge from each inpatient and organized formal outpatient rehab phase of treatment wherever it occurred (within or outside the system) until ultimate completion of rehabilitation or the first anniversary of injury. For those phases that took place within the model system, additional information on billed charges and units of service provided are to be reported.

• To reduce workload, the sample of 125 patients on whom data are collected each follow-up year has been terminated.

• To reduce workload, Form II data collection is no longer required at year 2. Form II data collection will occur only at years 1, 5, 10, and every 5 years thereafter.

• A few variables that are particularly useful for linking data to other databases or comparing Model System data with other data were added:
  o ICD 10 codes requested by CDC
  o Zip code of residence requested by CDC
  o Work-relatedness of injury requested by NHTSA
  o Veteran status and use of VA health care services requested by PVA

• Each rehospitalization will be documented separately to include length of stay and cause (selected from a simple prespecified list).

• To reduce workload, the following variables were deleted:
  o marital status at discharge
  o Form I and Form II sensory and motor left and right ZPP; all neurologic data after year 1
  o all remaining associated injuries
  o use of mechanical ventilation during system was replaced by mechanical ventilation at rehab admission (use at discharge was retained)
  o dates of all secondary medical complications and surgical procedures
  o Form I secondary medical complications of autonomic dysreflexia, cardiopulmonary arrest, kidney stones, renal function, and gastrointestinal hemorrhage
  o Form II secondary medical complications of autonomic dysreflexia, renal function, and long bone fractures
  o Form II surgical procedures of syrinx surgery, surgical ablation or pump placement for pain or spasticity, and electrical stimulators
  o interview quality indicators of who provided the answers and the interviewer’s assessment of accuracy

• The psychosocial interview portion of Form II data collection would include the following changes that would on balance result in a very slight increase in workload based on total number of items:
  o Deletion of the SF-12 except for item 1 (overall health) and item 8 (pain)
- Use of the CHART Short Form (19 items, 6 dimensions and the total) rather than the full CHART
- Addition of the CHIEF Short Form on access to the environment (12 items, 5 subscales and the total)
- Addition of the Brief Patient Health Questionnaire for Depression (10 items plus the major depression syndrome item and the severity of depression score)
- Addition of 1 drug use item, the CAGE (4 items and the total score) and four other single alcohol items
- Addition of the severity of pain variable

- Addition of the identity of patients has been approved for inclusion in a separate data file at the NSCISC. Procedures to maintain confidentiality will be developed and IRB approval will need to be obtained for this to occur. Separate permission may need to be obtained from each patient to allow this information to be exported from the local System databases to the NSCISC.

At their December 2004 meeting, the Project Directors voted to

- revert back to some of the pre-2000 Eligibility Criteria and
- data collection for outpatient treatment phases and hours of treatment for all treatment phases were discontinued.
The NSCISC’s Personal Computer Data Management Software

The NSCISC’s Personal Computer Data Management Software was first released in December 1990. This PC software changed the data submission process (from hard-copy forms sent by systems to the NSCISC for data entry) to data entry at the system level with an Export function that prepares computerized data for submission to the NSCISC. At first all data files were shipped to the NSCISC on floppy disks. Now systems have the options of uploading the export file to the NSCISC’s server via the Internet [using the File Transfer Protocol (FTP) software], attaching the file to an Email message, or shipping the file on a CD.

The software is a self-contained system that provides all functions the systems need to enter their data locally and export it to the NSCISC. These functions include the ability to enter new records; edit, delete or copy current records; view individual records as well as a list of records available for a particular patient. The Export function selects (for shipment to the NSCISC) all the system’s Personal Data, Registry, Form I and Form II records. This function also queries the System’s Personal Data records and copies only those personal data items (i.e., name, social security number, etc.) that the patient has agreed may be sent to the NSCISC. All other data in the Personal Data file are replaced by “X’s”. This export file is then encrypted.

Additional software functions include

- Dataset building functions that allow systems to build custom datasets (using either their local data and/or the national database). In addition to using the data from each record type (i.e., Personal Data, Registry, Form I or Form II), the user may select from combinations of Form I and Form II or Form I and Registry records. Several dataset conditions are available (such as using only the records for the day-1 admissions; excluding the records of the deceased patients; selecting only records entered after a certain date, etc.)

- The Form IIs Due function produces a list of patients for whom follow-up forms are due within a user-defined range of dates. The user may restrict the list to only “lost” patients, Form IIs that have not yet been entered and/or Form IIs due for the required data submission years. A list of all patients coded “lost” on their last Form II is also available through this function. This function may be used to generate a list of Form IIs due in the future and, this list may be used to help schedule patients for interviews and/or clinic visits.

- The List Patients function selects patients based on user-defined criteria. Data from all variables selected by the user are included on this list. This function may be used, for example, to obtain a list of database patients who may meet the criteria for another study.

- The Patient Notes function allows the user to enter any other information not collected in the database. Systems also have the ability to change the Password into the software as often as needed. Multiple users of the software are each assigned unique User IDs and passwords.

- The software Users’ Manual is designed and written for basic users.

Software features to improve the quality of data include checking for valid codes as the data are entered; the computation of the number of days between dates as well as totals for other variables (such as the Total FIM score) and the computation of the Motor Level.
Other software features to improve efficiency include: (1) the ability to advance through a list of records searching for patients by patient number, alternate ID or name; (2) no need to enter leading zeros; (3) skipping variables that are required only of day-1 admissions when working in a record for a non-day-1 admission; (4) a GoTo key to advance to a particular variable during data entry. Tool Tips displaying the valid codes or referring the user to the syllabus page that contains this information are available for every variable. The Exam Dates function produces a table with the acceptable range of dates for obtaining the interview data, the annual exam data and the data to be collected during the annual year for each year of follow-up. This is a time-saving feature since there are different range of dates for each of these types of data.

For the 2000-2005 project period the software was rewritten from the Clipper programming language to Visual Basic language. The software is now totally Windows compatible providing point-and-click capabilities for the user. The format of the data files also changed (from Dbase to ACCESS format). ACCESS format allows systems to more easily utilize copies of the national database.

The Quality Control (QC) Program

The NSCISC’s PC software includes a stand-alone Quality Control program that performs more than 500 checks on the database. Each variable is checked for "legal codes" during the data entry process and cross-variable and cross-record checking are performed using the QC software. See Appendix E of this syllabus for complete documentation of all the checks in this software.

Changes in Funded Systems for the 2000-2005 Project Period

- NIDRR has funded 16 systems for the 2000-2005 project period. One previously funded system (Miami, Florida) has returned and one new system (Pittsburgh, Pennsylvania) has been added. Funding was not continued for the systems in Chicago, Cleveland, Detroit and Milwaukee.
### THE NATIONAL SPINAL CORD INJURY STATISTICAL CENTER

( NSCISC )

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### UAB SPINAL CORD INJURY CARE SYSTEM

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## Model Spinal Cord Injury Systems

### 2000-2005 Project Period

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**MODEL SPINAL CORD INJURY SYSTEMS**  
2000-2005 Project Period

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<th>PROJECT DIRECTOR</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Georgia Regional SCI System</strong></td>
<td>Pat Duncan</td>
</tr>
<tr>
<td>David F. Apple, Jr., M.D.</td>
<td>Shepherd Center</td>
</tr>
<tr>
<td>Shepherd Center</td>
<td>2020 Peachtree Road, NW</td>
</tr>
<tr>
<td>2020 Peachtree Road, NW</td>
<td>Atlanta, GA 30309</td>
</tr>
<tr>
<td>(404) 350-7353 (V); 355-1826 (F)</td>
<td>(404) 350-7591 (V); 355-1826 (F)</td>
</tr>
<tr>
<td><a href="mailto:david_apple@shepherd.org">david_apple@shepherd.org</a></td>
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</tr>
<tr>
<td><strong>New England Regional SCI Center</strong></td>
<td>Bethlyn Houlihan</td>
</tr>
<tr>
<td>Steve Williams, M.D.</td>
<td>374 Congress St., Suite 502</td>
</tr>
<tr>
<td>Preston F511</td>
<td>Boston MA 02118</td>
</tr>
<tr>
<td>732 Harrison Ave</td>
<td>(617) 426-4447, Ext. 20 (V); 426-4547 (F)</td>
</tr>
<tr>
<td>Boston, MA 02118-2393</td>
<td><a href="mailto:bvergo@bu.edu">bvergo@bu.edu</a></td>
</tr>
<tr>
<td>(617) 638-7911 (V); 638-7313 (F)</td>
<td><a href="mailto:steve.williams@bmc.org">steve.williams@bmc.org</a></td>
</tr>
<tr>
<td><strong>University of Michigan Model SCI System</strong></td>
<td>Jane Walters</td>
</tr>
<tr>
<td>Denise Tate, Ph.D.</td>
<td>300 North Ingalls, NI2A09</td>
</tr>
<tr>
<td>University of Michigan</td>
<td>Ann Arbor, MI 48109-0491</td>
</tr>
<tr>
<td>300 N. Ingallls Building</td>
<td>(734) 763-0971 (V); 936-5492 (F)</td>
</tr>
<tr>
<td>Room NI2A09</td>
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</tr>
<tr>
<td>Ann Arbor, MI 48109-0491</td>
<td>(734) 763-0971 (V); 936-5492 (F)</td>
</tr>
<tr>
<td>(734) 763-0971 (V); 936-5492 (F)</td>
<td><a href="mailto:dgtate@umich.edu">dgtate@umich.edu</a></td>
</tr>
<tr>
<td><strong>Missouri Model Spinal Cord Injury System</strong></td>
<td>Lisa Williams</td>
</tr>
<tr>
<td>Laura Schopp, Ph.D.</td>
<td>Dept. of Health Psychology</td>
</tr>
<tr>
<td>Dept. of Health Psychology</td>
<td>One Hospital Drive, DC046.46</td>
</tr>
<tr>
<td>One Hospital Drive, DC046.46</td>
<td>Columbia, MO 65212</td>
</tr>
<tr>
<td>Columbia, MO 65212</td>
<td>(573) 884-8094 (V); 884-2902 (F)</td>
</tr>
<tr>
<td>(573) 882-8847 (V); 884-4540 (F)</td>
<td><a href="mailto:Williamslm@health.missouri.edu">Williamslm@health.missouri.edu</a></td>
</tr>
<tr>
<td><a href="mailto:schooppl@health.missouri.edu">schooppl@health.missouri.edu</a></td>
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<td>(573) 882-8847 (V); 884-4540 (F)</td>
<td><a href="mailto:schooppl@health.missouri.edu">schooppl@health.missouri.edu</a></td>
</tr>
</tbody>
</table>
# Model Spinal Cord Injury Systems

## 2000-2005 Project Period

<table>
<thead>
<tr>
<th>PROJECT DIRECTOR</th>
<th>PRIMARY DATA COLLECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Northern New Jersey SCI System</strong></td>
<td></td>
</tr>
<tr>
<td>Steven Kirshblum, M.D.</td>
<td>Kate Francis</td>
</tr>
<tr>
<td>1199 Pleasant Valley Way</td>
<td>1199 Pleasant Valley Way</td>
</tr>
<tr>
<td>West Orange, NJ 07052</td>
<td>West Orange, NJ 07052</td>
</tr>
<tr>
<td>(973) 731-3600 x2258 (V); 243-6861 (F)</td>
<td>(973) 324-3538 (V); 243-6869 (F)</td>
</tr>
<tr>
<td><a href="mailto:skirshblum@kessler-rehab.com">skirshblum@kessler-rehab.com</a></td>
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</tr>
<tr>
<td><strong>Mount Sinai SCI Model System</strong></td>
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<tr>
<td>Kristjan T. Ragnarsson, M.D.</td>
<td>Vishali Saldi</td>
</tr>
<tr>
<td>Mount Sinai School of Medicine</td>
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<tr>
<td>1425 Madison Ave., Room 4-25</td>
<td>1425 Madison Ave.</td>
</tr>
<tr>
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<td>Box 1240</td>
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<td>(212) 659-9340 (V); 348-5901 (F)</td>
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<td></td>
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</tr>
<tr>
<td><strong>Regional SCI System of Delaware Valley</strong></td>
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<td>Susan Sammartino</td>
</tr>
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<td>Thomas Jefferson University Hospital</td>
<td>Thomas Jefferson University Hospital</td>
</tr>
<tr>
<td>132 South 10th Street, 375 Main Bldg.</td>
<td>132 South 10th Street, 375 Main Bldg.</td>
</tr>
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<td>Philadelphia, PA 19107</td>
<td>Philadelphia, PA 19107</td>
</tr>
<tr>
<td>(215) 955-5580 (V); 955-5152 (F)</td>
<td>(215) 955-6579 (V); 955-5152 (F)</td>
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</tr>
<tr>
<td><strong>University of Pittsburgh Model System on SCI (UPMC-SCI)</strong></td>
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<tr>
<td>Michael Boninger, M.D.</td>
<td>Karen Greenwald</td>
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<tr>
<td>University of Pittsburgh</td>
<td>Dept. of Physical Medicine and Rehab</td>
</tr>
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<td>2310 Jane Street</td>
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<td>Pittsburgh, PA 15213</td>
<td>Suite 1200, Room 1207</td>
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<td>(412) 648-6954 (V); 692-4410 (F)</td>
<td>Pittsburgh, PA 15203</td>
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<tr>
<td><a href="mailto:mboning@pitt.edu">mboning@pitt.edu</a></td>
<td>(412) 586-6941 (V); 381-3956 (F)</td>
</tr>
<tr>
<td></td>
<td>greekk@msx upmc.edu</td>
</tr>
</tbody>
</table>
# MODEL SPINAL CORD INJURY SYSTEMS

## 2000-2005 Project Period

<table>
<thead>
<tr>
<th>PROJECT DIRECTOR</th>
<th>PRIMARY DATA COLLECTOR</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TEXAS REGIONAL SCI SYSTEM</strong></td>
<td></td>
</tr>
<tr>
<td>William H. Donovan, M.D.</td>
<td>Michelle Feltz</td>
</tr>
<tr>
<td>The Institute for Rehabilitation &amp; Research</td>
<td>TIRR</td>
</tr>
<tr>
<td>1333 Moursund Street</td>
<td>1333 Moursund Street, A-214</td>
</tr>
<tr>
<td>Houston, TX 77030</td>
<td>Houston, TX 77030</td>
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<tr>
<td>(713) 797-5991/5916 (V); 797-5904 (F)</td>
<td>(713) 797-5981 (V); 799-5069 (F)</td>
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<td><strong>Virginia Commonwealth Regional Spinal Cord Injury System</strong></td>
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<td>William McKinley, M.D.</td>
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<td>Medical College of Virginia</td>
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<td>Box 980677</td>
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<td>(804) 828-3705 (V); 828-2378 (F)</td>
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<tr>
<td><strong>Northwest Regional SCI System</strong></td>
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<tr>
<td>Charles Bombardier, Ph.D</td>
<td>Debra Glazer</td>
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<td>University of Washington</td>
<td>Department of Rehabilitation Medicine</td>
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<tr>
<td>Harborview Medical Center</td>
<td>Box 356490</td>
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<tr>
<td>Box 359740</td>
<td>1959 N.E. Pacific Street</td>
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<tr>
<td>Seattle, Washington 98195-6490</td>
<td>Seattle, WA 98195-6490</td>
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<tr>
<td>(206) 731-3665 (V); 685-3244 (F)</td>
<td>(206) 685-3880 (V); 685-3244 (F)</td>
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<tr>
<td><a href="mailto:chb@u.washington.edu">chb@u.washington.edu</a></td>
<td><a href="mailto:dglaze@u.washington.edu">dglaze@u.washington.edu</a></td>
</tr>
</tbody>
</table>

## NATIONAL INSTITUTE ON DISABILITY AND REHABILITATION RESEARCH

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THE DATA COLLECTION SYLLABUS

Optimum accuracy and data comparability in the National SCI Database can be achieved only if all data are collected prospectively according to the specifications in this data collection syllabus. This document contains extensive information on the National SCI Database including reporting procedures and guidelines, eligibility criteria, definitions of data collection periods, complete descriptions of all variables, record formats for analysts, samples of data collection forms and other data-submission forms and a listing of all quality control checks performed on the database. This syllabus also contains other useful information such as the names and addresses of the Project Directors and Primary Data Collectors for all the currently participating Model SCI Care Systems and the same information for the National Spinal Cord Injury Statistical Center (NSCISC) staff members.

There is a syllabus page for each variable in the National SCI Database. For the most part, if a variable is in more than 1 dataset (i.e., Personal Data, Registry, Form I and Form II) only 1 syllabus page is provided. Use the List of Variables beginning on page 26 to locate the syllabus page for each variable. The list is in numerical order by the current variable number. This list also contains the "old variable number" (i.e., that variable's number in the 1995-2000 version of the database).

Whenever applicable each syllabus page contains the following sections:

<table>
<thead>
<tr>
<th>Variable Number</th>
<th>The number assigned to that variable in the database.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Variable Name</td>
<td>The name assigned to that variable in the database.</td>
</tr>
<tr>
<td>Description</td>
<td>Descriptive information on that variable including the data collection time(s)</td>
</tr>
<tr>
<td>Character</td>
<td>The number of characters for each coding position in the variable</td>
</tr>
<tr>
<td>Codes</td>
<td>A list of all valid codes for that variable</td>
</tr>
<tr>
<td>As much as possible, the following &quot;Universal codes&quot; have been assigned:</td>
<td></td>
</tr>
<tr>
<td>0 or all 0's = &quot;No&quot;</td>
<td></td>
</tr>
<tr>
<td>8 or all 8's = &quot;Not Applicable&quot; &quot;Not Tested&quot; or &quot;Yes, Number (or Grade) Unknown&quot;</td>
<td></td>
</tr>
<tr>
<td>9 or all 9's = &quot;Unknown&quot;</td>
<td></td>
</tr>
<tr>
<td>Comments</td>
<td>Other information regarding the variable</td>
</tr>
<tr>
<td>Source</td>
<td>Sources of information pertaining to a variable.</td>
</tr>
<tr>
<td>QC</td>
<td>Comments on the quality control checks performed on that variable</td>
</tr>
<tr>
<td>Software</td>
<td>Instructions/clarification regarding how the software processes the variable.</td>
</tr>
<tr>
<td>Revisions</td>
<td>Dates and historical information on changes in the variable</td>
</tr>
<tr>
<td>Conversion</td>
<td>Information on how data in the variable were converted whenever there were coding and/or reporting criteria revisions.</td>
</tr>
<tr>
<td>Example(s)</td>
<td>Hypothetical situations and the appropriate code(s)</td>
</tr>
</tbody>
</table>
The NATIONAL SPINAL CORD INJURY DATABASE

THE DATA COLLECTION MECHANISM

In order to obtain accurate and complete data, a system must establish an effective data collection mechanism. The personnel required and the mechanism for retrieving data will depend, of course, on the system's resources.

Minimally, a system must have a Project Director and a Primary Data Collector. Together they should assess what data are routinely being collected and documented at their system and develop a mechanism to collect and document the data for all other required variables.

The Project Director assigns data collection activities to staff members and must be familiar with the data collection syllabus and study objectives.

This person provides support for the Primary Data Collector and is a source of information regarding syllabus questions.

The Primary Data Collector - assumes the responsibility of compiling all data required in the data collection syllabus. Most often this person needs the cooperation of several other staff members in order to obtain all required data. For example, the Social Services department might be responsible for variables such as Level of Education, Marital Status, etc. The primary data collector may also wish to attend rounds as another means of gathering data.

Often the Primary Data Collector must furnish "in-house" data collection forms on which all variables to be collected by a particular department are listed. Such a form provides a checklist of all required data items. Staff members completing "in-house" forms must also have copies of the syllabus pages for all variables they document.

The Primary Data Collector may also have the responsibility of scheduling patients for follow-up visits since this person may use the database software to generate lists of patients who will be due for follow-up in the future. If this person schedules patient visits, he/she will know when to distribute the "in-house" forms to collect follow-up data.

This person is designated to receive all NSCISC mail outs to data collectors.

A Liaison Nurse is helpful for obtaining acute care data.

Since data for the majority of the follow-up variables may be obtained by phone, an Interviewer may also be needed. An interviewer who speaks languages other than English is also very useful for systems that have high percentages of non-English speaking patients.

A Data Entry Clerk may be needed if the Primary Data Collector does not have sufficient time to collect and enter data. Often this clerical level person may do other tasks such as record filing, contacting patients to schedule visits, confirming appointments, etc.

An Analyst may be needed if a system wishes to utilize statistical software (such as SAS, SPSS, BMDP) to analyze its data and/or the national database. Although the NSCISC’s PC software provides the capabilities for simple data analyses (frequencies and percentages) other analyses require the use of specific statistical analyses software.
REPORTING PROCEDURES AND GUIDELINES

Variables in the National Spinal Cord Injury Database are divided into 4 data files:

1) **Personal Data** - for all patients.
2) **Registry** – limited data for patients who are not eligible for Form I.
3) **Form I** – for all patients who are eligible. Additional data are collected for patients who enter the system within 24 hours.
4) **Form II** – for all Form I patients. Data collection is done in follow-up years 1, 5, 10, 15, 20, 25 and 30. Additional data are collected in year 1.

**PERSONAL DATA**

Personal Data information may be collected on all patients. Some Personal Data items may be exported to the NSCISC (with the patient’s consent) and other Personal Data items reside only in the System’s data files and are never exported to the NSCISC. The data collection form for the Personal Data file contains only those variables that are available for export to the NSCISC for inclusion in the National Database. Personal Data items (to be exported) are numbered 100 through 105 plus the EXStat variable. Personal Data are exported based on the selections made during data entry. (see page 295 for details). See page 28 for a complete listing of the Personal Data variables. This list also contains the corresponding syllabus page number where you will find complete details on each variable.

**REGISTRY**

Registry data are selected Form I variables for patients who are not eligible for Form I data collection. Registry variables are numbered 100, 101, 106, 107, 109A, 110, 111, 112, 113, 114, 116, 131D, 132D, 136D, 138D and 145. A list of all Registry variables may be found on page 29. This list also contains the corresponding syllabus page number where you will find complete details on each variable.

**FORM I**

Form I variables provide extensive data on the patient’s status at the time of SCI and document events occurring during the initial hospitalization period and death data. Beginning in November 1995 Form I consists of Core and Extended variables. Core items are collected on all patients who meet the Form I eligibility criteria. The Extended data are additional variables that are collected only on those who enter the system within 24 hours of injury. Form I variables are numbered 100 to 165. A list of all Form I variables begins on page 30. This list also contains the corresponding syllabus page number where you will find complete details on each variable.

**FORM II**

Form II – follow-up data – are required on all patients who are eligible for follow-up in year 1 and in every 5th post-injury year (i.e., years 1, 5, 10, 15, 20, 25 and 30). For patients who are still in the initial hospitalization/rehabilitation process on their first anniversary of injury, a year 02 replaces the year 01 Form II. Form IIs are allowed to be submitted for other (non-required) years. See page 199 for rules on patients who recover. Additional variables are collected on all patients on the Year 1 (or year 2) Form II. Form II variables are numbered 100, 101, and 200 through 267. Form II, Year 1 (or year 2) variables are numbered 240 through 243. Form II data submission is required of all patients who have a Form I [except for patients who die during the initial System hospitalization period or who recover (or have minimal deficit) by the end of the initial rehabilitation period]. A complete list of all Form II variables begins on page 40. This list also contains the corresponding syllabus page number where you will find complete details on each variable.

Any patient having Form II data must have a Form I record also.
DATA MANAGEMENT VARIABLES

Data management variables (QC Status, Batch Number, Indate and Update) are included in all datasets. The Sample variable is present only in the Form I data file. Data management variables are generated by the NSCISC’s software and cannot be modified by the user. Additional data management variables (Patient Status, Twos and Last) are present in the Personal Data file – only in the local data file at each System.

DEFINITIONS FOR DATA COLLECTION PERIODS

REGISTRY AND FORM I –

All Registry and Form I data collection periods occur during the “Initial System Hospitalization Period” (i.e., from the time of spinal cord injury until definitive discharge from the System). The initial System hospitalization period is an individually planned program of acute medical/surgical and/or rehabilitation services following spinal cord injury.

First System Admission (System Admit) - The first admission to the System. This may be an admission to the System’s acute medical/surgical, subacute medical/surgical, acute rehab or subacute rehab unit.

During Acute Medical/Surgical Care –

Inpatient hospitalization, in the System, following spinal cord injury until the beginning of the initial rehabilitation program (or the patient’s death, whichever comes earlier) that takes place for medical or surgical care or the treatment of a secondary medical complication. Acute Medical/Surgical Care includes all medical surgical care provided in the intensive care unit (ICU), non-ICU beds, SCI specialty unit beds and subacute medical care units.

During Inpatient Rehabilitation - the period of time between admission to and discharge from the System’s inpatient (acute and/or subacute) rehab unit. Rehabilitation includes some combination of physical therapy, occupational therapy, speech therapy, recreational therapy, patient and family education, and rehabilitation psychology, medicine and nursing care.

Initial Rehab - The initial individually planned program of rehabilitation services following spinal cord injury.

Admission Date to Inpatient Rehabilitation (Admit to System Inpatient Rehab, at Inpatient Rehab Admit) - For all systems, the beginning of the inpatient rehabilitation phase is marked by admission to the System’s inpatient rehabilitation hospital; transfer to the System’s inpatient acute or subacute rehabilitation unit; or commencement of the inpatient rehabilitation program in a System’s multipurpose unit.

Inpatient Rehab Discharge – discharge from the System’s inpatient (acute or subacute) rehab unit.

Discharge – discharge from initial System hospitalization to a definitive living situation.

For those patients requiring both acute and inpatient rehabilitation care, discharge from the inpatient rehabilitation unit is the discharge.

Discharge from the acute care unit is acceptable for those patients who complete inpatient rehabilitation in the acute care unit; achieve complete recovery or minimal deficit status prior to rehab admission; or, who expire during acute care.
During System – The period of time between the initial admission to and discharge from the System for the initial individually planned program of acute medical/surgical and/or rehabilitation services following spinal cord injury.

Outpatient Rehabilitation – Data collection for this period of time was discontinued for all patients admitted to the System as of January 1, 2005.

Form II

Post-injury (anniversary) year - the first post-injury year begins the day after the discharge from the initial hospitalization period and ends the day before the first anniversary of injury. Submission of a year 01 Form II is required. When a patient is still in the initial acute/rehab process past his first anniversary, a year 01 Form II is not submitted but a year 02 Form II is required.

Subsequent post-injury years begin the day of the anniversary date and end the day before the next anniversary date and, the date of injury is always used to calculate post-injury (anniversary) years. See the example for “Exam and Interview dates” (page 17).

Window variables – For the year 01 (or the “substituted” year 02) Form II, data may be collected from 182 days before the anniversary date to 182 days after the anniversary date. For all subsequent follow-up years, data may be collected from 182 days prior to the anniversary to 365 days after the anniversary date. “Window” variables are V211 to V213, 223 to 239 and 244 to 267. Window variables are marked with an ! on the Form II data collection form. See the example for “Exam and Interview dates” (page 17).

The NSCISC’s software contains functions to calculate (1) the correct post-injury year for an exam (or interview) date; (2) the range of dates for an anniversary year; and (3) the range of dates for the “window” variables. See the Software Users’ Manual for complete instructions.

During the annual examination - during the patient's annual physical examination. These are variables V211 to V213 and V244 to V249. Annual exam data may be collected from 182 days before the anniversary date. However, unlike the interview variables, the cut-off for obtaining annual exam data is always up to 182 days after the anniversary date. See the example for “Exam and Interview dates” (page 17).
**During the anniversary year being reported** - occurring between the beginning and the end of a particular anniversary (post-injury) year. These are variables 214 to 222D and 250A to 267. See the example for “Exam and Interview dates” (page 17).

**On the anniversary of injury** - the patient's status as it was on the anniversary date for the post-injury year being reported. These are variables 203 to 208. See the example for “Exam and Interview dates” (page 17).

Since the Last Form II Record – change in status between the current Form II and the last Form II with known data in the variable being documented. When coding the year 1 Form II, document the change in status between the year 1 Form II and the Form I. These are variables 209 and 210.

**Rehospitalization** - Inpatient hospitalizations for acute medical or surgical care that occur after the initial rehabilitation program is completed.

**OTHER DATA COLLECTION INFORMATION:**

**Rules for rounding fractions of an hour:**
- For any fraction of the first hour
  - round up to 1 hour.
- After the first hour:
  - if the time is less than ½ hour, round down
  - if the time is ½ hour or more, round up.

**Examples:**
- Total Time
  - 10 minutes = 1 hour
  - 20 minutes (1/3 hour) = 1 hour
  - 30 minutes (1/2 hour) = 1 hour
  - 1 1/3 hours = 1 hour
  - 1 1/2 hours = 2 hours
  - 3 hours, 45 minutes = 4 hours
  - 4 hours, 15 minutes = 4 hours
ELIGIBILITY CRITERIA

The following criteria affect those patients who are admitted into the Model System on or after 1 January 2005.

1. All persons must receive System inpatient acute rehabilitation. Persons who expire or achieve complete recovery or minimal deficit status at the time of discharge from System inpatient acute care are also eligible.

   Those who complete an organized rehab program prior to System admission are totally excluded from this database.

2. All persons must be treated at a Model System within 1 year of injury.

3. All persons must have a clinically discernible degree of neurologic (spinal cord) impairment following a traumatic event. Persons with spinal cord dysfunction not resulting from a traumatic event are specifically excluded from enrollment in the database.

   Persons with minimal neurologic impairment on admission into the system who complete inpatient rehab in the system's acute (or subacute) medical/surgical care unit may continue to be included in the database if they are hospitalized in the system more than 1 week. In such cases, their data will be analyzed as a separate category.

4. All persons must not have been previously treated at a Model System post-injury. This criterion is to ensure that no patient is enrolled into the database by more than one Model System.

5. A. A signed Informed Consent and HIPAA Authorization (may be the same or different documents depending on IRB requirements) must be obtained from all persons before enrollment in the database. See page 19A for more details.

   B. If a person dies during the initial acute System stay, a signed Informed Consent is not required (if the System’s IRB exempts data obtained purely from chart reviews). Only Registry data may be submitted on persons with no signed Informed Consent (provided the person also meets eligibility criteria 1, 2, 3 and 4). HIPAA Authorization is not required for research on deceased persons.

6. All persons must reside in the geographic catchment area of the Model System at the time of the injury. Subjects may be injured outside the catchment area.

7. Must be a citizen of the United States.

   The reason for this limitation is a practical one. If a patient will return to their country of citizenship after injury, then follow-up will not be practical. However, if the patient is expected to remain in the catchment area, and the patient meets all other eligibility criteria, they may be included in the Form I database.

8. All persons must be discharged from the System as (1) normal neurologically or minimal deficit (2) expired or (3) having completed inpatient rehabilitation.

A Form I patient must meet all eligibility criteria. A registry patient must meet (at least) eligibility criteria 1, 2, 3 and 4. A person who does not meet eligibility criteria 1, 2, 3 and 4 is not eligible for the National SCI Database at all.

The NSCISC PC software includes an ELIGIBILITY function that determines if a patient is eligible for inclusion in the National SCI Database and, if so, whether the patient's data should be entered as a Registry or Form I record. Complete instructions for this function may be found in the NSCISC's PC Data Management Software Users' Manual.
## Changes in Eligibility Criteria

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Shall have incurred trauma to the spinal cord within <strong>60 days</strong> of admission to the system.</td>
<td>Must be admitted to a system within <strong>365 days of injury</strong></td>
</tr>
<tr>
<td><strong>Shall usually</strong> reside in the catchment area</td>
<td><strong>Must</strong> reside in the catchment area</td>
</tr>
<tr>
<td><strong>Must</strong> have been injured in the system's catchment area</td>
<td><strong>May be</strong> injured outside the catchment area.</td>
</tr>
<tr>
<td>Will receive treatment and care in all components of the system</td>
<td>Must receive acute inpatient rehab in the system (unless the patient expires, recovers or has minimal deficit during System acute medical care). May also receive system inpatient subacute rehab (effective for patients admitted to the system as of January 1, 2005)</td>
</tr>
<tr>
<td>Must be discharged from the SCI care system as (1) normal neurologically or minimal deficit, (2) expired, or (3) having completed inpatient rehabilitation.</td>
<td>Effective for patients admitted to the system as of January 1, 2005. Patients who do not meet this criterion are eligible for the Registry provided they meet Criteria 1, 2, 3 and 4.</td>
</tr>
<tr>
<td>...leave against medical advice or transfer out of System prior to completion of the initial inpatient rehabilitation process = not eligible for Form I</td>
<td>Effective for patients admitted to the system as of January 1, 2005. These patients are eligible for the Registry if they meet Criteria 1, 2, 3 and 4.</td>
</tr>
<tr>
<td>No follow-up (for reasons other than their becoming normal neuro, minimal neuro or deceased) = Registry patient</td>
<td>Effective for patients admitted to the system as of January 1, 2005.</td>
</tr>
<tr>
<td>A signed Informed Consent is not required for Registry patients.</td>
<td>Same (provided the System’s IRB allows use of data that’s available in the medical records without a signed informed consent).</td>
</tr>
<tr>
<td>Signed Informed Consent is required for export of Personal Data to the NSCISC.</td>
<td>Signed HIPAA Authorization is required for all Form I and Registry patients enrolled on or after April 14, 2003 except those patients who die prior to discharge.</td>
</tr>
<tr>
<td>Patients who complete an organized rehabilitation program prior to system admission are totally excluded from the database</td>
<td>Same</td>
</tr>
<tr>
<td>Patients whose follow-up data are obtained exclusively by mail and/or phone interview are eligible for Form I.</td>
<td>Same</td>
</tr>
<tr>
<td>...included in the database if they are hospitalized in the System more than 1 week.</td>
<td>There is no minimal stay in the System to qualify for inclusion in the database (Registry or Form I) except for those who are admitted with minimal deficit. These patients must be hospitalized in the system for more than 1 week.</td>
</tr>
</tbody>
</table>

### Consent Forms

Each patient whose information will be included in the Form I and Form II data files must sign a Consent Form. Often a family member must give this consent. A member of the Social Services staff or the Liaison Nurse could be used to obtain this document. Separate permission may be needed to permit the System to export Personal Data (i.e., Patient Name, Social Security Number, Date of Birth and Zip Codes for Residences) from the System database to the NSCISC. A person may decline to participate in the Personal Data submission but may agree to participate in Form I/Form II data collection. See additional information on page 19A.

### Reporting on a Patient Who Dies

The Date of Death, Cause of Death and Autopsy variables are present on Form I (variables 145, 146 and 147). The NSCISC’s PC software inserts default codes for "Alive" in these variables whenever a new Form I is created. If the patient dies during follow-up, these Form I variables (variables 145, 146 and 147) must be updated with the appropriate information; however (as of November 1995) a Form II is NOT REQUIRED to be submitted for the post-injury year in which the patient died.
NSCISC POLICY ON INFORMED CONSENT

Informed consent should be obtained on all new patients enrolled in the NSCISC Form I database using a consent form that includes the request for personal identifiers and the certificate of confidentiality language as approved by both the local model system IRB and NIH. A copy of the consent form in current use should be on file at NIH.

Informed consent should also be obtained on all previously enrolled patients (Form II) who have not been consented using a consent form that includes the request for personal identifiers and the certificate of confidentiality language as approved by both the local model system IRB and NIH. Verbal consent over the telephone may be used with permission of the local model system IRB. Consent can be obtained at the time of the next scheduled data collection interview or earlier if a convenient opportunity presents itself.

Once informed consent has been obtained using a consent form that includes the request for personal identifiers and the certificate of confidentiality language as approved by both the local model system IRB and NIH, subsequent reconsent at the next annual evaluation is not required by the NSCISC but may be required by the local model system IRB.

An attempt should be made to obtain informed consent for new patients enrolled in the NSCISC Registry database using a consent form that includes the request for personal identifiers and the certificate of confidentiality language as approved by both the local model system IRB and NIH. Although the NSCISC does not require informed consent from patients enrolled in the registry, the local model system IRB may make this requirement or may require that an informed consent waiver be obtained from the IRB.

Model systems are required to adhere to local IRB informed consent requirements whenever they are more stringent than the requirements of the NSCISC.

Personal identifiers cannot be sent to the NSCISC database without the patient’s signed informed consent granting permission to do so.

NSCISC POLICY ON HIPAA AUTHORIZATION

A signed HIPAA authorization is required by the NSCISC for all new patients enrolled in the NSCISC Registry or Form I database after April 14, 2003. The form of the HIPAA authorization will be dictated by the local model system IRB and may either be a separate document or may be included in the informed consent document.

Each model system is required to check with its local IRB concerning the necessity of acquiring HIPAA authorization to continue to collect data (Form II) on previously enrolled patients who have never given HIPAA authorization. The NSCISC has been advised by the UAB IRB that a signed HIPAA authorization is also required to continue collecting new data on these patients, but is not required to use or disclose data from previously enrolled patients for whom no further data are collected. Once previously obtained, new HIPAA authorization is only required when data collection will continue past the expiration date of the current HIPAA authorization.

If the local model system IRB either decides that HIPAA authorization is not required from patients enrolled in the database prior to April 14, 2003 in order to continue collecting follow-up data or grants a waiver of HIPAA authorization for patients enrolled before April 14, 2003, then the model system should follow its local IRB guidance on this issue.
THE DATA ENTRY PROCESS

The PROCESS function in the Main Menu of the NSCISC PC software allows the user to input records into any of the databases. Data may be entered into the System’s computer separately (as each form is completed) or after several forms are ready. Detailed instructions for data entry may be found in the software’s Users’ Manual. A Session Log is created each time a user enters the software and this session log may be used to check that all data forms have actually been entered. No blanks are allowed in any variable in the database - unless a variable has multiple coding positions (such as variable 143B – Spinal Decompression). For such variables, once a "non-yes code" (e.g., no, not applicable or unknown) is entered, the user must leave the remaining coding positions blank. In fact, the software will not allow the user to enter any data in the remaining positions - it will automatically advance the user to the next variable.

QUALITY CONTROL (QC)

The NSCISC’s PC software includes stand-alone Quality Control software that performs more than 500 checks on the database. Each variable is checked for "legal codes" during the data entry process and cross-variable and cross-record checking are performed using the QC software. See Appendix E of this syllabus for complete documentation of all the checks in this software. See the Users’ Manual for instructions on running QC.

PERSONAL DATA

The System ID and Patient Number are the only patient identifiers in the Registry, Form I and Form II national database files. The “system version” of the NSCISC’s PC software allows systems to add Patient Name, Address, Telephone Number, an Alternate ID (such as the Medical Records number), Social Security Number, Date of Birth and Zip Codes for Residences.

With proper IRB approval and consent from each patient, some of these personal data items (i.e., Patient Name, Social Security Number, Date of Birth and Zip Codes) will be exported to the NSCISC. These data will be stored in the Personal Data file at the NSCISC and access is restricted only to the Director of NSCISC and the NSCISC’s Manager of Computer Services.

The Personal Data will be used by the Director of NSCISC to link data from the National SCI Database with data from other sources and to avoid duplicate entry into the National SCI Database. The information is also used to help systems identify study patients after there has been a gap in funding. None of the Personal Data will be released to anyone and none of the Personal Data will be used in any other study. Only the System ID and Patient Number will be retained as links to other data files.

THE DATA SUBMISSION PROCESS

NEW RECORDS

Records submitted to the NSCISC are counted as either New Entries or Updates. A new entry record is a computerized record entered on a patient for the first time. A new entry may be a Personal Data, Form I or Registry record. A new Form II entry creates a computerized record for a particular anniversary year. Each Form II being entered for the first time is considered a new entry. For example, if forms are completed for anniversary years 1 and 5 for a particular patient these will be considered two new entry Form II's. The Indate variable is the date on which each record is newly created. This is a computer-generated data management variable that cannot be modified by the user.
UPDATE RECORDS

An update is submitted to modify an existing Personal Data, Registry, Form I or Form II record. For Form II, each year updated is counted separately. For example, if Variable 208 is corrected on annuals 1 and 5, these forms will be counted as two Form II updates.

Updates are usually completed to: (1) revise variables previously coded as unknown; (2) correct discrepancies identified by the system coordinator or by the NSCISC’s quality control checking programs; or (3) complete a variable left blank on the original, new entry form.

NOTE: data collectors are encouraged to update records whenever new data are obtained.

WHEN TO SUBMIT A NEW FORM I

A new Form I (to enter a new patient into the database) should be submitted to the NSCISC as soon as 80% or more of the Form I information is available. A Form I update can be done at a later time to provide information that may be obtained on a delayed basis (e.g., hospitalization charges).

SUBMISSION OF DATA TO THE NSCISC

The EXPORT function in the Main Menu of the NSCISC's Data Management Software copies all Personal Data, Registry, Form I and Form II records for shipment to the NSCISC. Complete instructions for this function may be found in the NSCISC's PC Data Management Software Users' Manual.

There are 2 data submission deadlines each calendar year (for the Semi-annual and Annual statistical reports). All systems are notified of these deadlines. The Annual Report is distributed prior to the summer Directors meeting and the Semi-annual report is distributed prior to the winter Directors meeting.

Session Logs are generated by the software and list all forms entered or updated during a software session. This list should be used by the data entry person to assure that all forms have actually been entered. See details in the Users' Manual.

FORM IIIS DUE LIST

The Form IIIs Due list contains required Form II’s that are due for submission between the dates specified by the user. If the range of dates is in the future, the list may be used to help schedule patients for their annual examinations (or interviews). Instructions for the Form IIIs Due function begin on page 69 of the Software Users’ Manual.

The Form IIIs Due list (based on the conditions selected by the user) may contain (1) only those Form IIIs that are due and have not yet been entered; (2) Form IIIs due for patients whose last Form II was coded “lost”; (3) Form IIIs due for all years; and (4) address information. Form II data are required of patients who are discharged from the initial hospitalization alive and not discharged with "normal" or "minimal deficit" neurologic status.

A patient remains eligible for continued follow-up until he/she (1) dies or (2) recovers from the injury (i.e., normal neuro or minimal deficit). Form II data submission in post-injury years 1 (or 2), 5, 10, 15, 20, 25 and 30 is required of all Form I patients. When a patient is transferred to another System, the original System continues to be responsible for follow-up data submission. If a Form II is submitted declaring the patient "lost to system" (i.e., V201 = code 5), the patient still remains eligible for future follow-up but future Form IIIs should not be submitted unless the
patient’s Category of Follow-up Care changes from “lost” (i.e., consecutive “lost” Form IIs should not be submitted).

If more than one Form II for a particular patient is due, each record is included on the list. This listing includes patient numbers (V101); the Patient Name (if that information has been entered in the patient’s Personal Data record); the year for the Form II that is due (V200); a “Y” in the Form II Entered column if the Form II has been entered into the database; the QC status for that entered record; the Anniversary Date (i.e., the date the Form II was due for submission); the earliest and latest dates the Annual Exam data may be obtained; the earliest and latest dates the interview data may be obtained; the Overdue Marker; the last Form II entered for that patient; and, the category of follow-up care (V201) on the that last Form II.

The Overdue Marker indicates the number of days between the anniversary date and the report date: no mark = less than 365 days; * = 365 to 729 days (1-2 years); ** = more than 729 days (more than 2 years). Since systems are allowed up to 1 year after the anniversary date to obtain interview data (for year 01 it’s only 6 months), priority should first be given to those forms marked by ** and next to those marked *.

For each Form II on the list that is more than 1 year past the window of time to collect data, a new Form II (coding the patient "lost" in the Category of Care variable) should IMMEDIATELY be submitted. If this is not done, the form will be counted as “missing” in the Tracking Report that is distributed with the NSCISC’s Semi-annual and Annual statistical reports. This analysis is a System performance indicator. If data are obtained at a later date, this Form II record can always be updated.

Systems should generate a Form IIs due list at least twice a year (using the Semi-annual and Annual Statistical Report submission deadline dates as the cut-off dates for the lists). These lists may be generated as often as needed (because, forms will drop off the list as new Form IIs are entered).

For those systems that have a Form II data collector (in addition to a Primary data collector), it should be the Primary data collector's responsibility to generate the Form IIs Due list. The Primary data collector is the person responsible for doing whatever it takes to get the Form IIs submitted on time and, the other Form II data collector should organize data collection efforts based on the Form IIs Due list. Both data collectors should work together to avoid having a Form II more than 1 year overdue.

**RECORD DUMPS**

A record dump is a computer printout of a Personal Data, Registry, Form I or Form II record, as it exists in the computer files. Dumps are generated using the FILE/Dumps function in the PC software. Record dumps are formatted to fit on a standard 8 1/2" X 11" sheet of paper, in landscape orientation.

It is extremely important to "dump" a record before it is deleted - in the event it must be re-entered. If a record has been in existence through several database conversions the user cannot simply re-enter the record using the original data collection form since chances are, the data collection form is an out-dated version.

Instructions for the Record Dump function begin on page 15 of the Software Users’ Manual.
GUIDELINES FOR CODING PRIMARY CAUSE OF DEATH

A. In general, death certificates will have a line that documents the immediate cause of death followed by two or three lines under the heading "due to or as a consequence of." There will also be a line to document "other significant conditions."

As a general rule, the primary cause of death will be the cause entered alone on the lowest line of the "due to or as a consequence of" sequence unless it is unlikely that this condition gave rise to all the other conditions listed above it. An "Other significant condition" would be coded as a secondary cause of death unless it can be specifically linked to the causes listed above it, in which case it might be included in a combined primary cause of death. Any mention of spinal cord injury, paraplegia, etc. (including late effects of SCI) should be ignored. If no other information is available (no autopsy report, no death certificate, no summary information from a rehospitalization, etc.) code the cause of death unknown.

For example, consider the following cases:

1. Immediate cause: Cardiac arrest 427.50
   Due to or as a consequence of:
   Unless additional information can be acquired, **select cardiac arrest (427.50)** because, unfortunately, it is the only option available.

2. Immediate cause: Cardiorespiratory arrest 427.50
   Due to or as a consequence of: Pneumonia 486.00
   **Select pneumonia (486.00)** since it led to the cardiorespiratory arrest.

3. Immediate cause: Cardiorespiratory arrest 427.50
   Due to or as a consequence of: Septicemia 038.90
   Due to or as a consequence of: Pneumonia 486.00
   **Select pneumonia (486.00)** because it led to the other conditions. List septicemia as a secondary cause.

4. Immediate cause: Cardiac arrest 427.50
   Due to or as a consequence of: Arteriosclerosis 440.90
   Due to or as a consequence of: Brown-Sequard syndrome 344.80
   **Select arteriosclerosis (440.90)** and ignore the reference to SCI.

5. Immediate cause: Cardiorespiratory arrest 427.50
   Due to or as a consequence of: Septicemia 038.90
   Due to or as a consequence of: Renal failure 586.00
   **Select septicemia (038.90)** because renal failure (which would ordinarily have been chosen) cannot cause septicemia. List renal failure as a secondary cause.

6. Immediate cause: Arteriosclerosis 440.90
   Due to or as a consequence of: Pneumonia 486.00
   **Select arteriosclerosis (440.90)** because pneumonia (which would ordinarily have been chosen) cannot cause arteriosclerosis. List pneumonia as a secondary cause.
7. Immediate cause: Cardiac arrest 427.50
Due to or as a consequence of: Hemorrhage 459.00
Due to or as a consequence of: Other significant conditions: Peptic ulcer 533.40

Unless there is specific evidence indicating the hemorrhage was not associated with the peptic ulcer, select peptic ulcer with hemorrhage (533.40) because hemorrhage (which would ordinarily have been chosen) can be linked with peptic ulcer to identify a more specific condition. The important question is whether this death is better classified as resulting from a disease of the digestive system or a disease of veins and lymphatics. Certainly, the former seems more appropriate given the available information.

8. Immediate cause: Pernicious anemia 281.00
Due to or as a consequence of: Cerebral hemorrhage 431.00
Due to or as a consequence of: Arteriosclerosis 440.90

Select pernicious anemia (281.00). Although arteriosclerosis can cause a cerebral hemorrhage, it cannot cause pernicious anemia. Cerebral hemorrhage also cannot cause pernicious anemia. Therefore, with no apparent causal sequence leading directly to the immediate cause of death, the immediate cause is selected as the primary cause of death. The others should be listed as secondary causes.

B. In general, ill-defined conditions should not be selected as the primary cause of death unless no alternative exists.

For example:
1. Immediate cause: Myocardial infarction 410.90
Due to or as a consequence of: Tachycardia 785.00

Select myocardial infarction (410.90) because tachycardia (which would ordinarily have been chosen) is considered a "symptom or ill-defined condition." Tachycardia can be listed as a secondary cause of death.

C. In general, trivial conditions should be ignored. If death is the result of an adverse reaction to treatment for a trivial condition (such as renal failure resulting from taking aspirin for recurrent migraines), then code the adverse reaction as the primary cause of death. If the trivial condition is not reported as the cause of a more serious complication and a more serious unrelated condition is reported, then code the more serious condition as the primary cause of death.

For example:
1. Immediate cause: Congenital anomaly of eye 743.90
Due to or as a consequence of: Congenital heart disease 746.90

Select congenital heart disease (746.90) even though it cannot cause a congenital anomaly of the eye because the latter is considered a trivial condition unlikely by itself to cause death.

D. When the normal selection process results in choosing a condition which is described only in general terms and a related cause is also reported which provides more precise information about the system or nature of the chosen condition, reselect the more informative cause as the primary cause of death.
For example:

1. Immediate cause: Cerebral thrombosis 434.00
   Due to or as a consequence of: Cerebrovascular accident 436.00
   Due to or as a consequence of: 
   **Select cerebral thrombosis (434.00)** because it is more informative and precise than cerebrovascular accident (which would ordinarily have been chosen). Cerebrovascular accident can be listed as a secondary cause.

2. Immediate cause: Pyelonephritis 590.80
   Due to or as a consequence of: Kidney stone 592.00
   Due to or as a consequence of: Renal disease 593.90
   **Select kidney stone (592.00).** Both kidney stone and pyelonephritis are more specific than renal disease, but kidney stone would have been selected if renal disease had not been listed on the certificate. Therefore, it is preferred over pyelonephritis, which can be listed as a secondary cause of death along with renal disease.

E. It is important to consider the interval between onset and death for each condition specified on the death certificate. Acute conditions that occurred a protracted time prior to death probably will not be the primary cause of death.

For example:

   Immediate cause: Congestive heart failure (3 months) 428.00
   Due to or as a consequence of: Pneumonia (1 year) 486.00
   Due to or as a consequence of: 
   **Select congestive heart failure (428.00)** because the episode of pneumonia occurred a long time before the patient died as well as long before the symptomatic heart disease began.

F. The use of E codes is very important because it is the only way to distinguish accidents, suicides and homicides from each other as well as from natural causes of death. However, E codes should only be used to reflect injuries that occur after the original SCI producing event. Therefore, with rare exceptions, E codes should not be used for a patient who dies during the initial hospitalization period.

   If an E code is appropriate, it will always be the primary cause of death.

   The distinction between accident, suicide and homicide can be found in a separate box on the death certificate below the list of causes.

G. When the death certificate does not provide adequate information (for example when the only cause of death listed is "paraplegia"), other sources of information (such as a discharge summary if the patient was hospitalized at the time of death, or an autopsy report if one is available) should be acquired whenever possible. As a last resort, if an appropriate cause of death cannot be determined, the cause of death can be coded as unknown.

H. Obviously, there will be many instances in which the selection of primary cause of death will be a close judgment call. Unfortunately, the only way to avoid this is to make the guidelines even more burdensome than contained herein. Moreover, it is important to leave enough flexibility in the decision making process to allow the most appropriate cause to be selected in unusual circumstances and in cases where the death certificate makes no sense (a frequent occurrence).

   **Questions regarding the appropriate primary cause of death should be resolved by the Project Director or other system physicians.**
POLICY FOR OBTAINING A COPY OF THE NATIONAL SPINAL CORD INJURY DATABASE
(for anyone affiliated with a currently funded Model Spinal Cord Injury Care System)

As in the past, any currently participating system may purchase a copy of the entire National SCI Database. For the Personal Data, only the data management fields (e.g., QC Status, etc.) are included in the data file (since these fields are essential if the requestor will be using the Dataset Building function in the NSCISC’s software to create datasets). This copy of the entire National SCI Database is available:

(1) on CD; or

(2) may be downloaded from the NSCISC’s server using the File Transfer Protocol.

There is a $100.00 fee for method 1 and no charge for method 2. The file is available in Access format.

The current version of the Model Systems' Data Collection Syllabus (in MS Word and Acrobat format) is provided with the data files to assure the correct version of the syllabus is used with that copy of the national database.

◊ Access or statistical software (such as SPSS or SAS) is needed to analyze this database.

◊ Anyone affiliated with a currently funded Model Spinal Cord Injury Care System may purchase a copy of the entire National SCI Database (with the limited Personal Data fields). Requests must be submitted to the NSCISC in writing, and signed by the Model System’s Project Director or Co-director. Systems are requested to inform the NSCISC of their research topic and share the results of database analyses with the Model Systems’ group.

◊ During their July 1996 meeting the Project Directors approved a policy that prohibits analyses that compare any or all systems (other than one’s own system data against the aggregate). Also, any results that compare a system against the aggregate for marketing purposes are prohibited.

Beginning on April 14, 2003, the requestor must sign a confidentiality agreement with the NSCISC prior to receiving the data as required under HIPAA guidelines for the release of limited data sets for research purposes.

Although the NSCISC staff will provide some assistance with analyses, the system must also have the services of a statistician or data analyst to utilize the database.

Call Bette Go for more information on formats and/or methods of transmission.

NOTE: this policy is subject to change.
POLICY FOR OBTAINING RAW DATA FROM THE NATIONAL SPINAL CORD INJURY DATABASE
(for anyone not affiliated with a currently funded Model Spinal Cord Injury Care System)

All requests for access to the National SCI Database must be forwarded to the National Spinal Cord Injury Statistical Center (NSCISC).

1. Requests should reflect:
   a. Purpose
   b. Commercial use and relationship if any
   c. Confidentiality precautions
   d. Responsible party
   e. Data required
2. Requestor must purchase a copy of the data collection syllabus (containing descriptions of all variables).
3. Personal data (name and SSN) will not be released.
4. Only data up to 5 years prior to the request date will be available.
5. Requestor should provide 20 copies of the proposal, to be forwarded by the NSCISC, to the Project Directors and, to the Project Officer from the funding agency (NIDRR).
6. Scientific proposals must include IRB clearance.
7. Graduate students must have their proposal approved by either their department Chair or the Chair of their dissertation or thesis committee.
8. The requestor must return a signed agreement to the NSCISC (limiting the requestor to the terms of the original proposal) and to comply with HIPAA guidelines for the release of limited data sets.
9. A copy of the requestor’s manuscript must be sent to the NSCISC for review prior to submission for possible publication and, a copy of any actual publication must be sent to the NSCISC.
10. All publications must acknowledge the NSCISC, Model Systems and NIDRR and include the disclaimer that the opinions expressed are those of the authors and not necessarily those of the NSCIC, Model Systems or NIDRR.
11. Ballots will be conducted by letter/FAX or held until the next biannual meeting of the Project Directors. An affirmative vote is required from each Project Director for release of his/her System’s data.
12. The Model Systems may at their discretion appoint a mentor to advise the research team as needed.
13. The NSCISC’s fee for this service is contingent on the complexity of the request. An estimate will be provided, upon request, based on the provision of all details from the requestor.

NOTE: this policy is subject to change.
Each model system will maintain its own NSCISC data set using software provided by the NSCISC. The raw data files will be in Microsoft Access format and will be protected by a password assigned by the NSCISC. To maintain data safety, integrity and security, any attempt to circumvent password protection to enter the Access data tables that contain the raw data is strictly forbidden.

All data will be encrypted prior to submission to the NSCISC using software provided by the NSCISC.

The NSCISC will provide a copy of any model system’s data set to be used for analytic or other data management purposes on request. Each model system will also have the capacity to build data sets in a variety of formats using software provided by the NSCISC so that there will never be a legitimate need to enter the raw data in the Access tables.

The NSCISC will periodically check the database and immediately and without exception notify its NIDRR Project Officer of any apparent violations of this policy that may come to its attention so that appropriate action can be taken. Any additional NSCISC work made necessary by such violations will be billed to the model system at a fee to be determined by the NSCISC.
<table>
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<tr>
<th>Variable Count</th>
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<th>Variable Name</th>
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* The data in these variables reside only in each System’s data file – these data are never exported to the NSCISC. All other Personal Data are exported to the NSCISC only with the patient’s consent.

** Data Management variables that are generated by the software.

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<td>BPHQ-10. If you had any of the problems in questions BPHQ1 through BPHQ9, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?</td>
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<td>During the past year, have you used illegal drugs or prescribed medications for non-medical purposes? (1)</td>
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<td>Do you drink any alcoholic beverages, such as beer, wine, wine coolers or liquor?</td>
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<td>During the past month, how many days per week did you drink any alcoholic beverages, such as beer, wine, wine coolers or liquor, on the average?</td>
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<td>On the days you drank, about how many drinks did you drink, on the average? A drink is 1 can or bottle of beer, 1 glass of wine, 1 can or bottle of wine cooler, 1 cocktail, or 1 shot of liquor.</td>
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<td>Considering all types of alcoholic beverages, how many times during the past month did you have five (5) or more drinks on an occasion?</td>
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<td>259E</td>
<td>Number of Additional Wheelchairs or Scooters: Scooters</td>
<td>2</td>
<td>Text</td>
<td>311</td>
</tr>
<tr>
<td>242. New</td>
<td>260</td>
<td>Use a Computer?</td>
<td>1</td>
<td>Text</td>
<td>312</td>
</tr>
<tr>
<td>243. New</td>
<td>261_1</td>
<td>Type of Computer Access Device(s) (1)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>244. New</td>
<td>261_2</td>
<td>Type of Computer Access Device(s) (2)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>245. New</td>
<td>261_3</td>
<td>Type of Computer Access Device(s) (3)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>246. New</td>
<td>261_4</td>
<td>Type of Computer Access Device(s) (4)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>247. New</td>
<td>261_5</td>
<td>Type of Computer Access Device(s) (5)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>248. New</td>
<td>261_6</td>
<td>Type of Computer Access Device(s) (6)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>249. New</td>
<td>261_7</td>
<td>Type of Computer Access Device(s) (7)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>250. New</td>
<td>261_8</td>
<td>Type of Computer Access Device(s) (8)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>251. New</td>
<td>261_9</td>
<td>Type of Computer Access Device(s) (9)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>252. New</td>
<td>261_10</td>
<td>Type of Computer Access Device(s) (10)</td>
<td>2</td>
<td>Text</td>
<td>313</td>
</tr>
<tr>
<td>253. New</td>
<td>262</td>
<td>Internet or Email Usage</td>
<td>1</td>
<td>Text</td>
<td>314</td>
</tr>
<tr>
<td>254. New</td>
<td>263_1</td>
<td>Location of Internet /Email Use (1)</td>
<td>1</td>
<td>Text</td>
<td>315</td>
</tr>
<tr>
<td>255. New</td>
<td>263_2</td>
<td>Location of Internet /Email Use (2)</td>
<td>1</td>
<td>Text</td>
<td>315</td>
</tr>
<tr>
<td>256. New</td>
<td>263_3</td>
<td>Location of Internet /Email Use (3)</td>
<td>1</td>
<td>Text</td>
<td>315</td>
</tr>
<tr>
<td>257. New</td>
<td>264A</td>
<td>Internet Categories: Employment/vocation information</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>258. New</td>
<td>264B</td>
<td>Internet Categories: Disability/health information</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>259. New</td>
<td>264C</td>
<td>Internet Categories: Email</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>260. New</td>
<td>264D</td>
<td>Internet Categories: Chat rooms</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>261. New</td>
<td>264E</td>
<td>Internet Categories: Games</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>262. New</td>
<td>264F</td>
<td>Internet Categories: Shopping</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>263. New</td>
<td>264G</td>
<td>Internet Categories: Other</td>
<td>1</td>
<td>Text</td>
<td>316</td>
</tr>
<tr>
<td>264. New</td>
<td>265</td>
<td>Modified Vehicle?</td>
<td>1</td>
<td>Text</td>
<td>318</td>
</tr>
<tr>
<td>265. New</td>
<td>266</td>
<td>Driving a Modified Vehicle?</td>
<td>1</td>
<td>Text</td>
<td>319</td>
</tr>
<tr>
<td>266. New</td>
<td>267</td>
<td>Cell Phone?</td>
<td>1</td>
<td>Text</td>
<td>320</td>
</tr>
</tbody>
</table>

Summary – Form II File

| Total Number of Variables | 266 |

NSCISC: 04/2004

45A
VARIABLE NAME: Reporting Model SCI System Identification Code (System ID)

DESCRIPTION: An alphabetic code is assigned to each reporting system by the National Spinal Cord Injury Statistical Center (NSCISC).

The Reporting Model System Identification Code and the Patient Number (Variables 100 and 101) are the only patient identification variables submitted to the NSCISC and stored in the Registry, Form I and Form II data files.

CHARACTERS: 2

CODES: Assigned individually to each reporting system by the NSCISC.

<table>
<thead>
<tr>
<th>Code</th>
<th>City/Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>Atlanta</td>
</tr>
<tr>
<td>AA</td>
<td>Ann Arbor</td>
</tr>
<tr>
<td>B</td>
<td>Birmingham</td>
</tr>
<tr>
<td>BN</td>
<td>Boston</td>
</tr>
<tr>
<td>C</td>
<td>Chicago</td>
</tr>
<tr>
<td>CM</td>
<td>Columbia, Missouri</td>
</tr>
<tr>
<td>CO</td>
<td>Cleveland, Ohio</td>
</tr>
<tr>
<td>D</td>
<td>Denver (Englewood, CO)</td>
</tr>
<tr>
<td>DM</td>
<td>Detroit</td>
</tr>
<tr>
<td>H</td>
<td>Houston</td>
</tr>
<tr>
<td>MI</td>
<td>Miami</td>
</tr>
<tr>
<td>MS</td>
<td>Mt. Sinai, New York</td>
</tr>
<tr>
<td>MW</td>
<td>Wisconsin</td>
</tr>
<tr>
<td>NJ</td>
<td>New Jersey</td>
</tr>
<tr>
<td>NO</td>
<td>New Orleans</td>
</tr>
<tr>
<td>NY</td>
<td>New York (NYU)</td>
</tr>
<tr>
<td>P</td>
<td>Phoenix</td>
</tr>
<tr>
<td>PA</td>
<td>Philadelphia</td>
</tr>
<tr>
<td>PI</td>
<td>Pittsburgh</td>
</tr>
<tr>
<td>RO</td>
<td>Rochester</td>
</tr>
<tr>
<td>RV</td>
<td>Richmond, Virginia</td>
</tr>
<tr>
<td>S</td>
<td>Seattle</td>
</tr>
<tr>
<td>SJ</td>
<td>San Jose</td>
</tr>
<tr>
<td>V</td>
<td>Fishersville, Virginia</td>
</tr>
</tbody>
</table>

COMMENTS: Use only uppercase letters. For systems with a one-character code, use the first box only (leave the second box blank).

A data form/record must have a Patient Number and Reporting System Identification Code before it will be processed by the National Spinal Cord Injury Statistical Center.
PERSONAL DATA, REGISTRY, FORM I and FORM II

VARIABLE NAME: Patient Number

DESCRIPTION: The Patient Number is assigned to each patient at the discretion of the reporting System. No designated numbers are assigned by the NSCISC. Each Patient Number may contain a maximum of 6 characters.

The Reporting System Identification Code and the Patient Number (Variables 100 and 101) are the only patient identification variables submitted to the NSCISC and stored in the main Registry, Form I and Form II data files.

CHARACTERS: 6

CODES: To be assigned by the individual reporting system.

COMMENTS: A data form/record must have a Patient Number and Reporting System Identification Code before it will be processed by the National Spinal Cord Injury Statistical Center.
VARIABLE AlternateID

PERSONAL DATA

VARIABLE NAME: Alternate ID

DESCRIPTION: The Alternate ID is an optional variable that may be used by Systems to computerize another patient identifier (such as a medical record number).

Although this variable is not included on the Personal Data data collection form (and the data will never be exported to the NSCISC) this information is being provided for the benefit of those who will be analyzing their local database. This is information that resides only locally, on the System’s computer.

CHARACTERS: 12

CODES: To be assigned by the individual reporting System.
PERSONAL DATA

VARIABLE NAME: Patient Name

DESCRIPTION: This variable documents the patient’s first name, middle initial and last name.

CHARACTERS: 36 characters (12 for first name, 1 for middle initial, 23 for last name)

CODES: Any letter of the alphabet
Blanks are allowed.

COMMENTS: The Name, Social Security Number, Date of Birth and Zip Codes are stored in the Personal Data file and available (with the patient’s permission) for export to the NSCISC. The Name, SS# and Date of Birth are used only by the Director of NSCISC to link data from the National SCI Database with data from other sources and to avoid duplicate entry into the National SCI Database. The information is also used to help systems identify study patients after there has been a gap in funding.

REVISIONS: October 2000: this variable was added to the database.
Systems are encouraged to add this information to the records of patients who are currently in the database. A separate consent must be obtained from the patient before this information is exported to the NSCISC.

SOFTWARE: Enter the name then check the Name box to select this item for export. See the Users’ Manual for details.

Name ✔ SSN Birth Date Zip Codes
PERSONAL DATA

VARIABLE NAME: Social Security Number

DESCRIPTION: This variable documents the patient’s Social Security Number.

CHARACTERS: 9

CODES:

- Any valid Social Security number

- Blanks are allowed

COMMENTS: The Name, Social Security Number, Date of Birth and Zip Codes are stored in the Personal Data file and available (with the patient’s permission) for export to the NSCISC. The Name, SS# and Date of Birth are used only by the Director of NSCISC to link data from the National SCI Database with data from other sources and to avoid duplicate entry into the National SCI Database. The information is also used to help systems identify study patients after there has been a gap in funding.

SOFTWARE: Enter the Social Security Number then check the SSN box to select this item for export. See the Users’ Manual for details.

| Name | SSN | ✓ | Birth Date | Zip Codes |

REVISIONS: October 2000: this variable was added to the database.

Systems are encouraged to add this information to the records of patients who are currently in the database. A separate consent must be obtained from the patient before this information is exported to the NSCISC.
PERSONAL DATA

VARIABLE NAME: Date of Birth

DESCRIPTION: This variable documents the patient’s date of birth.

CHARACTERS: 8

FORMAT: mmddyyyy

CODES:

Any valid date

99 Unknown day of the month or unknown month of the year

9999 Unknown year

Blanks are allowed

COMMENTS: Record the month, day and year of birth.

The Name, Social Security Number, Date of Birth and Zip Codes are stored in the Personal Data file and available (with the patient’s permission) for export to the NSCISC. The Name, SS# and Date of Birth are used only by the Director of NSCISC to link data from the National SCI Database with data from other sources and to avoid duplicate entry into the National SCI Database. The information is also used to help systems identify study patients after there has been a gap in funding.

This variable cannot be stored in date format since non-valid parts of the date are allowed.

SOFTWARE: Enter the Date of Birth then check the Birth Date box to select this item for export. See the Users’ Manual for details.

<table>
<thead>
<tr>
<th>Name</th>
<th>SSN</th>
<th>Birth Date</th>
<th>Zip Codes</th>
</tr>
</thead>
</table>

REVISIONS: October 2000: this variable was added to the database.

Systems are encouraged to add this information to the records of patients who are currently in the database. A separate consent must be obtained from the patient before this information is exported to the NSCISC.

EXAMPLE 1: The patient was born in 1998. The month and day are unknown.

V014. Date of Birth ................................................. 9 9/ 9 9/ 1 9 9 8

EXAMPLE 2: The patient was born in May 1999. The day of the month is unknown.

V014. Date of Birth ................................................. 0 5/ 9 9/ 1 9 9 9

QC: Age at Injury (V111) = number of years between Date of injury and Date of Birth.
PERSONAL DATA

VARIABLE NAME: Current Address

DESCRIPTION: The Current Address1 and Address2 are optional variables that may be used by Systems to computerize the patient’s current address.

Although this variable is not included on the Personal Data data collection form (and the data will never be exported to the NSCISC) this information is being provided for the benefit of those who will be analyzing their local database. This is information that resides only locally, on the System’s computer.

CHARACTERS: 30 for each entry, 2 entries

CODES: Any valid address

Blanks are allowed
PERSONAL DATA

VARIABLE NAME: Current City of Residence

DESCRIPTION: The Current City of Residence is an optional variable that may be used by Systems to computerize the patient’s current city of residence.

Although this variable is not included on the Personal Data data collection form (and the data will never be exported to the NSCISC) this information is being provided for the benefit of those who will be analyzing their local database. This is information that resides only locally, on the System’s computer.

CHARACTERS: 20

CODES:

Any valid city

Blanks are allowed
VARIABLE NAME: Current State of Residence

DESCRIPTION: The Current State of Residence is an optional variable that may be used by Systems to computerize the patient’s current state of residence.

Although this variable is not included on the Personal Data data collection form (and the data will never be exported to the NSCISC) this information is being provided for the benefit of those who will be analyzing their local database. This is information that resides only locally, on the System’s computer.

CHARACTERS: 2

CODES:
- Any valid state abbreviation
- Blanks are allowed
PERSONAL DATA

VARIABLE NAME: Current Zip Code and Extended Zip Code

DESCRIPTION: The Current Zip Code is an optional variable that may be used by Systems to computerize the zip code for the patient’s current residence.

Although this variable is not included on the Personal Data data collection form (and the data will never be exported to the NSCISC) this information is being provided for the benefit of those who will be analyzing their local database. This is information that resides only locally, on the System’s computer.

CHARACTERS: 5 for the zip code, 4 for the extended zip code.

CODES: Any valid zip code

COMMENTS: Variable 105 (page 57) documents the zip codes for the patient’s place of residence at the time of injury and on the anniversary of injury in follow-up years 1, 5, 10, 15, 20, 25 and 30. The data in V105 may be exported to the NSCISC (with the patient’s consent).

Extended zip codes may be found using the following website:

www.usps.com
VARIABLE Phone

PERSONAL DATA

VARIABLE NAME: Current Telephone Number

DESCRIPTION: The Telephone Number is an optional variable that may be used by Systems to computerize the patient’s current area code and telephone number.

Although this variable is not included on the Personal Data data collection form (and the data will never be exported to the NSCISC) this information is being provided for the benefit of those who will be analyzing their local database. This is information that resides only locally, on the System’s computer.

CHARACTERS: 10

CODES: Any valid telephone number
Blanks are allowed
PERSONAL DATA

VARIABLE NAME: Zip Code for Place of Residence

DESCRIPTION: This variable documents the zip codes for the patient’s place of residence at the time of injury and on the anniversary of injury at follow-up years 1, 5, 10, 15, 20, 25 and 30.

CHARACTERS: 5 for each entry

CODES: Any valid zip code

9999 Unknown

Blanks are allowed

COMMENTS: The Zip Code will be used only by the Director of NSCISC to track changes in residence and link data to other databases.

REVISIONS: October 2000: this variable was added to the database.

Systems are encouraged to add this information to the records of patients who are currently in the database. A separate consent must be obtained from the patient before this information is exported to the NSCISC.

SOFTWARE: Enter data in the Zip Code variables then check the Zip Codes box to select these items for export. See the Users’ Manual for details. Note: checking the Zip Codes box means all data in V105I through V105_30 (and V105EI through V105E_30) will be exported to the NSCISC.

<table>
<thead>
<tr>
<th>Name</th>
<th>SSN</th>
<th>Birth Date</th>
<th>Zip Codes</th>
<th>✓</th>
</tr>
</thead>
</table>
PERSONAL DATA

VARIABLE NAME: Extended Zip Code for Place of Residence

DESCRIPTION: This variable documents the extended zip codes for the patient’s place of residence at the time of injury and on the anniversary of injury at follow-up years 1, 5, 10, 15, 20, 25 and 30.

CHARACTERS: 4 for each entry

CODES: Any valid extended zip code

9999 Unknown

Blanks are allowed

COMMENTS: The Zip Code will be used only by the Director of NSCISC to track changes in residence and link data to other databases.

REVISIONS: October 2000: this variable was added to the database.

Systems are encouraged to add this information to the records of patients who are currently in the database. A separate consent must be obtained from the patient before this information is exported to the NSCISC.

SOFTWARE: See page 57.

EXAMPLE 1: The patient’s zip code (for residence at injury) is 35124 and the extended zip code is unknown.

105I. Zip Code for Residence at Injury............. 3 5 1 2 4 / 9 9 9 9

EXAMPLE 2: The patient has refused to have his personal information included in the database.

105I. Zip Code for Residence at Injury............. _ _ _ _ / _ _ _ _
VARIABLE PatientStatus

PERSONAL DATA

VARIABLE NAME: Current Follow-up Status

DESCRIPTION: This variable indicates the reason future follow-up records will not be required for a patient. If this field is empty, future Form IIs are required (unless there is only a Registry record). This information is provided primarily for the user as a quick method to determine a patient’s follow-up data submission status.

This variable is generated by the NSCISC’s software and users are not allowed to modify this data. This variable is needed by the software for data management/data reporting purposes and the data will never be exported to the NSCISC.

This is information that resides only locally, on the System’s computer.

CHARACTERS: 13

CODES:

- **Deceased**  V145 = a valid date
- **Lost**  V201 on the last Form II = “5”
- **Normal**  V131D = “7”
- **Minimal**  V131D = “3” or “6”
- **Norm-Min**  V201 on the last Form II = “8” or, if no Form IIs, V131D = “8”
- **Personal Data**  only Personal Data have been entered (more than just the patient number)
- **Blank**  future follow-up is required (unless there is only a Registry record)
VARIABLE Registry

PERSONAL DATA

VARIABLE NAME: Registry
DESCRIPTION: This variable indicates if a Registry record exists for the patient.

This variable is generated by the NSCISC’s software and users are not allowed to modify this data. This variable is needed by the software for data management/data reporting purposes and the data will never be exported to the NSCISC.

This is information that resides only locally, on the System’s computer.

CHARACTERS: 1
CODES:
0  No Registry record
1  Registry record is present

VARIABLE Form I

PERSONAL DATA

VARIABLE NAME: Form I
DESCRIPTION: This variable indicates if a Form I record exists for the patient.

This variable is generated by the NSCISC’s software and users are not allowed to modify this data. This variable is needed by the software for data management/data reporting purposes and the data will never be exported to the NSCISC.

This is information that resides only locally, on the System’s computer.

CHARACTERS: 1
CODES:
0  No Form I record
1  Form I record is present
VARIABLE Form II

PERSONAL DATA

VARIABLE NAME: Total Number of Form II

DESCRIPTION: This variable tallies the number of Form II records available for a patient. This variable is generated by the NSCISC’s software and users are not allowed to modify this data. This variable is needed by the software for data management/data reporting purposes and the data will never be exported to the NSCISC.

This is information that resides only locally, on the System’s computer.

CHARACTERS: 2

CODES:

0 No Form II records
0 to 30 Valid range

VARIABLE Last Form II

PERSONAL DATA

VARIABLE NAME: Anniversary Year for the Last Form II

DESCRIPTION: This is V200 (Post-injury Year) for the last Form II that has been entered for the patient. This variable is generated by the NSCISC’s software and users are not allowed to modify this data. This variable is needed by the software for data management/data reporting purposes and the data will never be exported to the NSCISC.

This is information that resides only locally, on the System’s computer.

CHARACTERS: 2

CODES:

0 No Form II records
0 to 30 Valid range
VARIABLE Notes

PERSONAL DATA

VARIABLE NAME: Patient Notes

DESCRIPTION: This is an optional variable that allows systems to computerize any additional patient data that is not included in the national database file (e.g. test results that may be needed for an in-house study but are not included in the national database; notes on a patient’s preference for appointment time, etc.).

The data in this variable will never be exported to the NSCISC. It is information that resides only locally, on the System’s computer.

CHARACTERS: unlimited
VARIABLES Contact1Name, Contact2Name, Contact3Name

PERSONAL DATA

VARIABLE NAME: Complete Name for Contact 1, Contact 2 and Contact 3
DESCRIPTION: This variable documents the complete name for 3 persons who may know the whereabouts of the patient.
CHARACTERS: 128 characters for each entry, 3 entries
CODES: Any character
Blanks are allowed.
COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.

This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.
REVISIONS: March 2005: these variables were added to the (local) database.
Systems are encouraged to add this information to the records of patients who are currently in the database.
VARIABLES Contact1Address1, Contact2Address1, Contact3Address1, Contact1Address2, Contact2Address2, Contact3Address2

PERSONAL DATA

VARIABLE NAME: Address Lines 1 and 2 for Contact 1, Contact 2 and Contact 3
DESCRIPTION: Current addresses for 3 persons who may know the whereabouts of the patient.
CHARACTERS: 128 for each entry, 6 entries
CODES: Any character
Blanks are allowed
COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.
This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.
REVISIONS: March 2005: these variables were added to the (local) database.
Systems are encouraged to add this information to the records of patients who are currently in the database.
VARIABLES Contact1City, Contact2City, Contact3City

PERSONAL DATA

VARIABLE NAME: City of Residence for Contact 1, Contact 2 and Contact 3

DESCRIPTION: The Current City of Residence for 3 persons who may know the whereabouts of the patient.

CHARACTERS: 50 for each entry, 3 entries

CODES: Any character

Blanks are allowed

COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.

This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.

REVISIONS: March 2005: these variables were added to the (local) database.

Systems are encouraged to add this information to the records of patients who are currently in the database.
VARIABLES Contact1State, Contact2State, Contact3State

PERSONAL DATA

VARIABLE NAME: State of Residence for Contact 1, Contact 2, and Contact 3

DESCRIPTION: The Current State of Residence for 3 persons who may know the whereabouts of the patient.

CHARACTERS: 2 for each entry, 3 entries

CODES: Any valid state abbreviation

Blanks are allowed

COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.

This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.

REVISIONS: March 2005: these variables were added to the (local) database. Systems are encouraged to add this information to the records of patients who are currently in the database.
PERSONAL DATA

VARIABLE NAME: Zip Code for Contact 1, Contact 2 and Contact 3
DESCRIPTION: The Current Zip Code of Residence for 3 persons who may know the whereabouts of the patient.
CHARACTERS: 5 for each entry, 3 entries
CODES: Any valid zip code
Blanks are allowed
COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.
This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.
REVISIONS: March 2005: these variables were added to the (local) database.
Systems are encouraged to add this information to the records of patients who are currently in the database.

VARIABLES Contact1ZipE, Contact2ZipE, Contact3ZipE

PERSONAL DATA

VARIABLE NAME: Extended Zip Code for Contact 1, Contact 2 and Contact 3
DESCRIPTION: This variable documents the extended zip codes for 3 persons who may know the whereabouts of the patient.
CHARACTERS: 4 for each entry, 3 entries
CODES: Any valid extended zip code
Blanks are allowed
VARIABLES Contact1Phone, Contact2Phone, Contact3Phone

PERSONAL DATA

VARIABLE NAME: Telephone Number for Contact 1, Contact 2 and Contact 3
DESCRIPTION: The Current Telephone Number for 3 persons who may know the whereabouts of the patient.
CHARACTERS: 25 for each entry, 3 entries
CODES: Any valid telephone number
Blanks are allowed
COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.
This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.
REVISIONS: March 2005: these variables were added to the (local) database. Systems are encouraged to add this information to the records of patients who are currently in the database.

VARIABLES Contact1LastUpdated, Contact2LastUpdated, Contact3LastUpdated

PERSONAL DATA

VARIABLE NAME: Last Date Information Entered for Contact 1, Contact 2 and Contact 3
DESCRIPTION: The date on which information was last entered for each contact person.
CHARACTERS: 10 for each entry, 3 entries
CODES: Any valid date
Blanks are allowed
COMMENTS: These variables are not included on the Personal Data data collection form (and the data will never be exported to the NSCISC). This information resides only locally, on the System’s computer.
This information should be obtained at the time the patient agrees to participate in this study and it should be updated as needed.
REVISIONS: March 2005: these variables were added to the (local) database. Systems are encouraged to add this information to the records of patients who are currently in the database.
VARIABLE NAME: Date of Injury

DESCRIPTION: This variable specifies the date the spinal cord injury occurred.

CHARACTERS: 8

FORMAT: mmddyyyy

CODES: Any valid date

COMMENTS: Record the month, day and year of injury.

Unknowns or partial dates are not allowed in this variable.

EXAMPLE: The patient was injured on December 11, 1974.

V106. Date of Injury......................................................... 12/11/1974
VARIABLE 107

REGISTRY and FORM I

VARIABLE NAME: Date of First System Admission

DESCRIPTION: This variable identifies the date of initial admission to the System.

CHARACTERS: 8

FORMAT: mmddyyyy

CODES:
- Any valid date
- 88888888 Not applicable, was never a System inpatient
  NOT a valid code in Form Is with Indates after 03/31/2005

COMMENTS: Record the month, day and year. Unknowns are not allowed in this variable.

This date may be the admission to the System’s acute medical, subacute medical, acute rehab or subacute rehab unit. However, to qualify for this database, the patient must receive System acute inpatient rehab [unless the patient expires or achieves full recovery or minimal deficit status while in the System’s acute (or subacute) medical care unit].

If the patient was admitted directly to the System’s inpatient rehab unit, use the same date in this variable as the date used in variable 108 (Date of First System Inpatient Rehab Admission).

This variable cannot be stored in date format since a non-valid date (code 88888888) was allowed in records with Indates up to March 31, 2005.

ELIGIBILITY: All patients must receive System inpatient acute rehab unless they expire or achieve complete recovery or minimal deficit status during system acute care.

REVISIONS: January 2005: All patients must be admitted to System acute rehab (unless they expire or achieve complete recovery or minimal deficit status during system acute care). Code 88888888 is not valid in Registry or Form I records with Indates after March 31, 2005.
## VARIABLE 107

### REGISTRY and FORM I

**VARIABLE NAME:** Date of First System Admission

**QC:** If this variable is coded 88888888 then, use the following codes for the listed items:

<table>
<thead>
<tr>
<th>Variable #</th>
<th>Variable Name</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>V109A</td>
<td>Number of Days from Injury to the First System Admissions</td>
<td></td>
</tr>
<tr>
<td>V109R</td>
<td>Number of Days from Injury to the System Inpatient Acute Rehab Admission</td>
<td>888</td>
</tr>
<tr>
<td>134AL, 134AR</td>
<td>Sensory Level, Acute</td>
<td>blank</td>
</tr>
<tr>
<td>134RL, 134RR</td>
<td>Sensory Level, Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>135AL, 135AR</td>
<td>Motor Level, Acute</td>
<td>blank</td>
</tr>
<tr>
<td>135RL, 135RR</td>
<td>Motor Level, Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>136AL, 136AR</td>
<td>Level of Function, Acute</td>
<td>blank</td>
</tr>
<tr>
<td>136RL, 136RR</td>
<td>Level of Function, Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>V133AT, V133RT</td>
<td>ASIA Motor Index Score, Total, Acute &amp; Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>140A, 140R</td>
<td>Number of Ulcers, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>133AR, 133AL</td>
<td>ASIA Motor Score, Sub-total, Acute</td>
<td></td>
</tr>
<tr>
<td>133RR, 133RL</td>
<td>ASIA Motor Score, Sub-total, Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>142AB, 142RB</td>
<td>Episodes of Pneumonia, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AG, 143RG</td>
<td>Number OR Visits for Spine Surgeries, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>144AT, 144RT</td>
<td>FIM Total, Acute &amp; Rehab</td>
<td>99</td>
</tr>
<tr>
<td>108</td>
<td>Date of Admit to System Inpatient Rehab Unit</td>
<td></td>
</tr>
<tr>
<td>110</td>
<td>Date of Discharge</td>
<td>88878888</td>
</tr>
<tr>
<td>130A, 130R</td>
<td>Date of the Neuro Exam</td>
<td></td>
</tr>
<tr>
<td>132A, 132R</td>
<td>ASIA Impairment Scale, Acute &amp; Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>131A, 131R</td>
<td>Category of Neuro Impairment, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>133RA - 133RJ</td>
<td>ASIA Motor Index Score, C5-S1, Left and Right</td>
<td></td>
</tr>
<tr>
<td>133RA - 133RJ</td>
<td>ASIA Motor Index Score, C5-S1, Right and Left</td>
<td></td>
</tr>
<tr>
<td>138R</td>
<td>Mechanical Ventilation, Rehab Admit</td>
<td></td>
</tr>
<tr>
<td>139A_1-139A_27</td>
<td>Location and Grade of Pressure Ulcers, Acute</td>
<td></td>
</tr>
<tr>
<td>139R_1-139R_27</td>
<td>Location and Grade of Pressure Ulcers, Rehab</td>
<td></td>
</tr>
<tr>
<td>141</td>
<td>Grade of Worst Pressure Ulcer, Rehab Admit</td>
<td></td>
</tr>
<tr>
<td>142AA, 142RA</td>
<td>Post-op Wound Infection, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>142AC, 142RC</td>
<td>Pulmonary Embolism, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>142AD, 142RD</td>
<td>Thrombophlebitis, DVT, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AA, 143RA</td>
<td>Laminectomy, Acute &amp; Rehab</td>
<td>blank</td>
</tr>
<tr>
<td>143AB_1, 143RB_1</td>
<td>Spinal Decompression, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AC_1, 143RC_1</td>
<td>Spinal Fusion, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AD_1, 143RD_1</td>
<td>Internal Fixation of the Spine, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AE_1, 143RE_1</td>
<td>Surgical Repair Failed Spinal Fusion, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AF_1, 143RF_1</td>
<td>Surg. Rpr, Corr, Rem. Int. Fix. Device, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AH, 143RH</td>
<td>Laparotomy, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AI, 143RI</td>
<td>Traction, Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>143AJ, 143RJ</td>
<td>Halo Vest or Halo Brace or Other Orthosis</td>
<td></td>
</tr>
<tr>
<td>143AK, 143RK</td>
<td>Closure of Decubitus Ulcer(s), Acute &amp; Rehab</td>
<td></td>
</tr>
<tr>
<td>144AA - 144RM</td>
<td>FIM items at Rehab Admit &amp; Rehab Discharge</td>
<td>9</td>
</tr>
<tr>
<td>V163A</td>
<td>Number of Days Hospitalized in Acute</td>
<td></td>
</tr>
<tr>
<td>V163R</td>
<td>Number of Days Hospitalized in Inpt. Rehab Unit</td>
<td>8888</td>
</tr>
</tbody>
</table>

**EXAMPLES:** See page 71.
FORM I

VARIABLE NAME: Date of First System Inpatient Rehab Admission

DESCRIPTION: This variable identifies the date of the first admission to the System’s inpatient (acute or subacute) rehab unit.

CHARACTERS: 8

FORMAT: mmddyyyy

CODES:

- 88888888 Not applicable, not admitted to System inpatient rehab unit

  **NOT a valid code in Form Is with Indates after 03/31/2005 unless the patient expired or achieved complete recovery or minimal deficit status during System acute care**

- Any valid date

COMMENTS: Record the month, day and year. Unknowns are not allowed in this variable.

For patients who are admitted to the System’s acute (or subacute) rehab unit then transferred back to the System’s acute (or subacute) medical/surgical unit followed by return to the System’s acute (or subacute) rehab unit:

- V108 (Date of First System Inpatient Rehab Admission) = the first rehab admission date

- all variables to be collected “during rehab” document all that happened from the Date of First System Inpatient Rehab Admission to the Date of Discharge (V110) - even if the event occurred when the patient was back in the acute medical/surgical unit.

  ➢ For the Treatment Phase variables (V148-V155) – record each acute and each rehab admission as separate phases.

  See example 3 on page 72.

This variable cannot be stored in date format since a non-valid date (code 88888888) is allowed.

ELIGIBILITY: All patients must receive System inpatient acute rehab unless they expire or achieve complete recovery or minimal deficit status during system acute care.

REVISIONS: January 2005: Code 88888888 is not valid in records with Indates after March 31, 2005 unless the patient expired or achieved complete recovery or minimal deficit status during System acute care.
FORM I

VARIABLE NAME: Date of First System Inpatient Rehab Admission

QC: If Indate1 > 03/31/2005 and <V110> not equal <V145> and <V131D> not equal 3, 6 or 7 THEN V108 must not = 88888888.

If the patient is not admitted to inpatient rehab then, Days from Injury to Rehab Admission, Neuro Exam, Mechanical Ventilation, Pressure Ulcers, Complications, Operative Procedures, FIM, and Length of Stay in Rehab must all be coded “Not Applicable, no inpatient rehab admission” AND there must not be any “Inpatient Rehab” treatment phases that occurred in the System.

If this variable is coded 88888888 then, use the following codes for the listed items:

<table>
<thead>
<tr>
<th>Variable #</th>
<th>Variable Name (During Rehab or at Rehab Admit)</th>
<th>Codes Day-1</th>
<th>Others</th>
</tr>
</thead>
<tbody>
<tr>
<td>V109R</td>
<td>Number of Days from Injury to the First System Inpatient Acute Rehab Admission</td>
<td>888</td>
<td>888</td>
</tr>
<tr>
<td>134RL, 134RR</td>
<td>Sensory Level</td>
<td>X99</td>
<td>blank</td>
</tr>
<tr>
<td>135RL, 135RR</td>
<td>Motor Level</td>
<td>X99</td>
<td>blank</td>
</tr>
<tr>
<td>136RL, 136RR</td>
<td>Level of Function, Left and Right</td>
<td>U</td>
<td>blank</td>
</tr>
<tr>
<td>132R</td>
<td>ASIA Impairment Scale</td>
<td>U</td>
<td>blank</td>
</tr>
<tr>
<td>133RT</td>
<td>ASIA Motor Index Score, Total</td>
<td>999</td>
<td>blank</td>
</tr>
<tr>
<td>144AT, 144RT</td>
<td>FIM Totals</td>
<td>99</td>
<td>99</td>
</tr>
<tr>
<td>133RR, 133RL</td>
<td>ASIA Motor Index Score, Sub-totals</td>
<td>99</td>
<td>blank</td>
</tr>
<tr>
<td>140R</td>
<td>Number of Ulcers, Rehab</td>
<td>99</td>
<td>blank</td>
</tr>
<tr>
<td>142RB</td>
<td>Episodes of Pneumonia, Rehab</td>
<td>99</td>
<td>blank</td>
</tr>
<tr>
<td>130R</td>
<td>Date of the Neuro Exam</td>
<td>88888888</td>
<td>blank</td>
</tr>
<tr>
<td>138R</td>
<td>Mechanical Ventilation</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>144AA - 144RM</td>
<td>FIM items</td>
<td>9</td>
<td>9</td>
</tr>
<tr>
<td>131R</td>
<td>Category of Neuro Impairment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>133RA - 133RJ</td>
<td>ASIA Motor Index Score, C5-S1, Left and Right</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>139R_1-139R_27</td>
<td>Location and Grade of Pressure Ulcers</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>141</td>
<td>Grade of Worst Pressure Ulcer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>142RA</td>
<td>Post-op Wound Infection</td>
<td></td>
<td></td>
</tr>
<tr>
<td>142RC</td>
<td>Pulmonary Embolism</td>
<td></td>
<td></td>
</tr>
<tr>
<td>142RD</td>
<td>Thrombophlebitis, Deep Vein Thrombosis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RA</td>
<td>Laminectomy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RB_1</td>
<td>Spinal Decompression</td>
<td>9</td>
<td>blank</td>
</tr>
<tr>
<td>143RC_1</td>
<td>Spinal Fusion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RD_1</td>
<td>Internal Fixation of the Spine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RE_1</td>
<td>Surgical Repair of Failed Spinal Fusion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RF_1</td>
<td>Surg. Repair, Correction, or Rem. of Int. Fix. Device</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RG</td>
<td>Number of OR Visits for Spine Surgeries</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RH</td>
<td>Laparotomy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RI</td>
<td>Traction</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RJ</td>
<td>Halo Vest or Halo Brace or Other Orthosis for the Neck</td>
<td></td>
<td></td>
</tr>
<tr>
<td>143RK</td>
<td>Closure of Decubitus Ulcer(s)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>163R</td>
<td>Number of Days Hospitalized in Inpt. Rehab Unit</td>
<td>8888</td>
<td>8888</td>
</tr>
</tbody>
</table>

AND no V148 can be coded “3” (with V149 = “1”) or no V148 can be coded “5” (with V149= "1").

EXAMPLES: See examples beginning on page 71.
VARIABLE 109A

REGISTRY and FORM I

VARIABLE NAME: Number of Days from Injury to First System Admission

DESCRIPTION: This variable documents the number of days from the date of injury (V106) to the Date of the First System Admission (V107).

This variable can be computer-generated by the NSCISC's software.

CHARACTERS: 3

CODES: 1-366 Valid range

888 Not applicable, was not a System inpatient

NOT a valid code in Form Is with Indates after 03/31/2005

COMMENTS: All patients admitted to the System less than 24 hours of injury should be recorded as 1 day.

The code "0" is not acceptable. Code "1" should be interpreted to mean the patient was admitted to the reporting System during the first day following injury.

REVISIONS: October 2000: added to the Registry database.

SOFTWARE: During the PROCESS function, the computer calculates variable 109A using the dates in variables 106 and 107.

QC: See page 65.
VARIABLE 109R

FORM I

VARIABLE NAME: Number of Days from Injury to the First System Inpatient Acute (or Subacute) Rehab Admission

DESCRIPTION: This variable documents the number of days from the date of injury (V106) to the first admission to the System's inpatient acute rehabilitation (V108) unit.

This variable can be computer-generated by the NSCISC's software.

CHARACTERS: 3

CODES: 1-366 Valid range

888 Not applicable, not admitted to System inpatient rehab

NOT a valid code in Form Is with Indates after 03/31/2005 unless the patient expired, achieved complete recovery or minimal deficit status during System acute care

SOFTWARE: During the PROCESS function, the computer calculates variable 109R using the dates in variables 106 and 108.

QC: See page 67.
REGISTRY and FORM I

VARIABLE NAME: Date of Discharge
DESCRIPTION: This variable identifies the date of discharge from the System. This is the date of completion of the System inpatient rehab process (or the date of death for patients who die during the initial hospitalization period).

This date may be
 ✓ discharge from the system’s acute (or subacute) medical/surgical unit (only if the patient expires or achieves full recovery or minimal deficit status during acute care)

or
 ✓ discharge from the inpatient acute (or subacute) rehab unit at the completion of the System inpatient rehab process.

CHARACTERS: 8
FORMAT: mmddyyyy
CODES: Any valid date

88888888 Not applicable, was never a System inpatient
NOT a valid code in Form Is with Indates after 03/31/2005

COMMENTS: Record the month, day and year. Unknowns are not allowed in this variable.

If the patient expires during a System inpatient treatment phase, this date is the same as the Date of Death (variable 145).

This variable cannot be stored in date format since a non-valid date (code 88888888) was allowed in records with Indates up to March 31, 2005.
VARIABLE 110
(Page 2 of 3)

REGISTRY and FORM I

VARIABLE NAME: Date of Discharge

EXAMPLE 1: The patient was admitted to a non-System acute unit on October 10, 2000 and discharged on October 15, 2000. He was admitted to the System’s acute rehab unit on October 17, 2000 and discharged on November 20, 2000.

| 107. Date of Initial System Admission | 10/17/2000 |
| 108. Date of Initial System Inpatient Rehab Admission | 10/17/2000 |
| 110. Date of Discharge | 11/20/2000 |

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>148. Treatment Phase</td>
</tr>
<tr>
<td>149. System or Non-system</td>
</tr>
<tr>
<td>150. Date of Admission</td>
</tr>
<tr>
<td>151 Date of Discharge</td>
</tr>
<tr>
<td>152 Number of Short-term Discharge Days</td>
</tr>
</tbody>
</table>

EXAMPLE 2: The patient was admitted to a System acute unit on October 10, 2000. On October 15th he was discharged home with a halo with plans for him to return to the system to begin rehab. On October 25, 2000 he began inpatient acute rehab at the system from which he was discharged to a non-System inpatient subacute rehab unit on November 10, 2000.

On November 28, 2000 he was discharged from that unit and readmitted to the System inpatient acute rehab unit. He was discharged home on December 15, 2000.

| 107. Date of First System Admission | 10/10/2000 |
| 108. Date of First System Inpatient Rehab Admission | 10/25/2000 |
| 110. Date of Discharge | 11/10/2000 |

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
</tr>
<tr>
<td>148. Treatment Phase</td>
</tr>
<tr>
<td>149. System or Non-system</td>
</tr>
<tr>
<td>150. Date of Admission</td>
</tr>
<tr>
<td>151 Date of Discharge</td>
</tr>
<tr>
<td>152 Number of Short-term Discharge Days</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Date of Discharge

EXAMPLE 3: The patient was admitted to the System acute unit on October 15, 2000 and he was transferred to the System’s acute rehab unit October 25, 2000. Less than a week later (on October 30, 2000) he returned to the System’s acute unit for treatment. He returned to the System’s acute rehab unit on November 5, 2000, completed rehab and was discharged home on November 20, 2000.

<table>
<thead>
<tr>
<th>VARIABLE</th>
<th>VALUE</th>
</tr>
</thead>
<tbody>
<tr>
<td>107. Date of Initial System Admission</td>
<td>10/15/2000</td>
</tr>
<tr>
<td>108. Date of Initial System Inpatient Rehab Admission</td>
<td>10/25/2000</td>
</tr>
<tr>
<td>110. Date of Discharge</td>
<td>11/20/2000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treatment Phase</td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>System or Non-system</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Age at Injury

DESCRIPTION: This variable specifies the age of the patient (in years) on the date the spinal cord injury occurred.

CHARACTERS: 3

CODES:

000  Newborn or less than 1 year of age

000-120  Valid range

999  Unknown
VARIABLE NAME: Sex

DESCRIPTION: This variable specifies the sex of the patient.

CHARACTERS: 1

CODES:

1 Male
2 Female
9 Unknown
VARIABLE 113

REGISTRY and FORM I

VARIABLE NAME: Racial or Ethnic Group

DESCRIPTION: This variable specifies the patient's racial or ethnic group. There is no attempt to identify all mixed races.

CHARACTERS: 1

CODES:
1  Caucasian
2  African American
3  Native American, Eskimo, or Aleut
4  Asian or Pacific Islander
5  Other, unclassified
9  Unknown

COMMENTS: The following Bureau of the Census guidelines will be used:

In the event of a mixed white and other race, the other race is used. In the event of mixed races other than white, the race of the father is used.

Asian/Pacific Islander includes Chinese, Filipino, Polynesian, Japanese, Thai, Asian, Indian, Oriental, Korean, Vietnamese, Hawaiian, Samoan and Guamanian.

If the racial group of the patient does not fit into any of the above classifications, document it as "Other, unclassified".

CONVERSIONS: When the Hispanic origin variable was added in November 1995 the records in the database at that time that were coded “4 - Spanish origin” in this variable were changed to code “9 Unknown”. The code “1, Yes Hispanic origin” was then inserted in these records in the Hispanic origin variable.
VARIABLE NAME: Hispanic Origin

DESCRIPTION: This variable specifies if the patient is of Hispanic origin.

CHARACTERS: 1

CODES:
0 Not of Hispanic origin
1 Hispanic origin (includes Mexican, Cuban, Puerto Rican and other Latin American and Spanish)
9 Unknown

COMMENTS: Persons of Hispanic origin may be of any race. In 1991, 91.3% of all persons of Hispanic origin in the United States were Caucasian, 5.4% were African American, 1.2% were American Indian and 2.1% were Asian/Pacific Islander.

REVISIONS: November 1995: This variable was added to the database using the Bureau of Census Guidelines.
FORM I

VARIABLE NAME: Is English the patient's primary language?

DESCRIPTION: This variable documents whether or not the patient’s primary language is English.

CHARACTERS: 1

CODES:

0 Patient does not speak English
1 Patient’s primary language is English
2 Primary language is not English but, patient speaks and understands sufficient English for the interview
9 Unknown

COMMENTS: This variable documents the patient’s use of the English language.

REVISIONS: February 1996: variable added to Form II.
October 2000: variable moved from Form II to Form I.
VARIABLE NAME: Traumatic Etiology

DESCRIPTION: This variable identifies the etiology of the trauma.

Traumatic spinal cord injury is impairment of the spinal cord or cauda equina function resulting from the application of an external force of any magnitude. The Model System's National Spinal Cord Injury Database collects data on traumatic cases only.

CHARACTERS: 2

CODES: VEHICULAR

01 Auto accident: includes jeep, truck, dune buggy, and bus
02 Motorcycle accident: 2-wheeled, motorized vehicles including mopeds and motorized dirt bikes
04 Boat
05 Fixed-wing aircraft
06 Rotating wing aircraft
07 Snowmobile
08 Bicycle (includes tricycles and unicycles)
09 All-terrain vehicle (ATV) and all-terrain cycle (ATC) - include both 3-wheeled and 4-wheeled vehicles
03 Other vehicular, unclassified: includes tractor, bulldozer, go-cart, steamroller, train, road grader, forklift.

If two vehicles are involved, the etiology should be coded according to the vehicle on which the patient was riding.

VIOLENCE

10 Gunshot wound
11 All other penetrating wounds: Includes stabbing, impalement.
12 Person-to-person contact: includes being hit with a blunt object, falls as a result of being pushed (as an act of violence)
15 Explosion: includes that caused by bomb, grenade, dynamite, and gasoline

Note: distinctions in falls (for codes 12 and 30) were made beginning in March 1996.
VARIABLE NAME: Traumatic Etiology

<table>
<thead>
<tr>
<th>CODES</th>
<th>SPORTS/RECREATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>20</td>
<td>Diving</td>
</tr>
<tr>
<td>21</td>
<td>Football</td>
</tr>
<tr>
<td>22</td>
<td>Trampoline</td>
</tr>
<tr>
<td>23</td>
<td>Snow skiing</td>
</tr>
<tr>
<td>24</td>
<td>Water skiing</td>
</tr>
<tr>
<td>26</td>
<td>Wrestling</td>
</tr>
<tr>
<td>27</td>
<td>Baseball/softball</td>
</tr>
<tr>
<td>28</td>
<td>Basketball/volleyball</td>
</tr>
<tr>
<td>29</td>
<td>Surfing: includes body surfing</td>
</tr>
<tr>
<td>70</td>
<td>Horseback riding</td>
</tr>
<tr>
<td>71</td>
<td>Gymnastics: includes all gymnastic activities other than trampoline, break-dancing</td>
</tr>
<tr>
<td>72</td>
<td>Rodeo: includes bronco/bull riding</td>
</tr>
<tr>
<td>73</td>
<td>Track and field: includes pole vault, high jump, etc.</td>
</tr>
<tr>
<td>74</td>
<td>Field sports: includes field hockey, lacrosse, soccer, and rugby</td>
</tr>
<tr>
<td>75</td>
<td>Hang gliding</td>
</tr>
<tr>
<td>76</td>
<td>Air sports: includes parachuting, para-sailing</td>
</tr>
<tr>
<td>77</td>
<td>Winter sports: includes sled, snow tube, toboggan, ice hockey, snow boarding</td>
</tr>
<tr>
<td>78</td>
<td>Skateboard</td>
</tr>
<tr>
<td>25</td>
<td>Other sport, unclassified: includes auto racing, glider kite, slide, swimming, bungee jumping, scuba diving, roller blading, jet-skiing, cheerleading, etc.</td>
</tr>
</tbody>
</table>

FALLS/FLYING OBJECTS

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>30</td>
<td>Fall: includes jumping and being pushed accidentally (not as an act of violence)</td>
</tr>
<tr>
<td>31</td>
<td>Hit by falling/flying object: includes ditch cave in, avalanche, rockslide.</td>
</tr>
</tbody>
</table>

PEDESTRIAN

<table>
<thead>
<tr>
<th>CODES</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>40</td>
<td>Pedestrian (includes falling/jumping into the path of a vehicle)</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Traumatic Etiology

CODES: MEDICAL/SURGICAL COMPLICATION

50 Medical/surgical complication: Impairment of spinal cord function resulting from adverse effects of medical, surgical or diagnostic procedures and treatment for non-spinal cord conditions.

Examples are: spinal cord contusion during surgery, spinal cord arterial occlusion during angiography, overexposure to radiation, spinal cord hemorrhage resulting from over anticoagulation, hypoxia of the spinal cord from cardiac arrest during surgery, and hypoxia of the spinal cord from other medical complications such as pulmonary embolus, rupture of aortic aneurysm, hypovolemic shock, etc.

There are pathological medical conditions of the vertebral spinal column such as rheumatoid spondylitis, ankylosing spondylosis, severe osteoarthritis, spinal tumors, disc problems, Paget's disease, osteoporosis, etc., which predispose an individual to traumatic spinal cord injury. In some instances the trauma may be only slight or minimal. In such cases the etiology coded would be governed by the nature of the trauma, i.e., fall, auto accident.

Do not include paralysis due to: a progressive disease with no traumatic event, herniated disc or transverse myelitis.

OTHER

60 Other unclassified: includes lightning, kicked by an animal, machinery accidents (excluding falls or hit by falling/flying objects).

UNKNOWN

99 Unknown

COMMENTS: If the patient's traumatic etiology does not fit into any of the above classifications, document it as "03" (Other vehicular, unclassified); "25" (Other sport, unclassified); or, "60" (Other, unclassified).

When there are questions of eligibility, it is the responsibility of the system's Project Director to make the decision (considering the criteria specified above and reviewing the patient's records).
VARIABLES 117C and 117L

FORM I

CHARACTERS: 5 for each entry (2 entries)
REVISIONS: January 2005: These fields are unused.
VARIABLE 118_1

VARIABLE NAME: External Cause of Injury
DESCRIPTION: This variable provides information on the classification of environmental events and circumstances as the cause of injury and other adverse effects.
CHARACTERS: 6
CODES: 

V00-X58 Accidents
Transport Accidents
V00-V09 Pedestrian injured in transport accident
V10-V19 Pedal cyclist injured in transport accident
V20-V29 Motorcycle rider injured in transport accident
V30-V39 Occupant of three-wheeled motor vehicle injured in transport accident
V40-V49 Car occupant injured in transport accident
V50-V59 Occupant of pick-up truck or van injured in transport accident
V60-V69 Occupant of heavy transport vehicle injured in transport accident
V70-V79 Bus occupant injured in transport accident
V80-V89 Other land transport accidents
V90-V94 Water transport accidents
V95-V97 Air and space transport accidents
V98-V99 Other and unspecified transport accidents

Other external causes of accidental injury
W00-W19 Falls
W20-W49 Exposure to inanimate mechanical forces
W50-W64 Exposure to animate mechanical forces
W65-W74 Accidental drowning and submersion
W85-W99 Exposure to electric current, radiation and extreme ambient air temperature and pressure
X00-X09 Exposure to smoke, fire, and flames
X10-X19 Contact with heat and hot substances
X30-X39 Exposure to forces of nature
X52-X58 Accidental exposure to other specified factors
X71-X83 Intentional self-harm
X92-Y08 Assault
Y21-Y33 Event of undetermined intent
Y35-Y38 Legal intervention, operations of war, military operations, and terrorism
Y62-Y69 Misadventures to patients during surgical and medical care
Y70-Y82 Medical devices associated with adverse incidents in diagnostic and therapeutic use
Y83-Y84 Surgical and other medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

999.999 Unknown
COMMENTS: See Appendix C (beginning on page C10) for the complete listing of codes.
This variable should be coded as specific as possible. If you only have limited information as to how the person was injured, the software will accept partial codes. At minimum, the first 3 spaces should be completed.
The software will accept the following coding variations:

\[
\begin{align*}
V00. & \_ \_ \\
V00.0 & \_ \\
V00.00 & \\
V00.000 \\
\end{align*}
\]


REVISIONS: This variable was activated in April 2005. Data collection began in August 2005.

EXAMPLE 1:

An individual is hit by a car while running an errand on skateboard.
\[
\begin{align*}
V116 &= '40, Pedestrian' \\
V118_1 &= 'V03.12, Pedestrian on skateboard injured in collision with car, pick-up truck, or van in traffic accident'
\end{align*}
\]

When coding V118_1 please adhere to the broad topic:
In this case, V116 should be coded as “40, pedestrian” unless it is indicated that the individual was participating in skateboarding as a sport.

EXAMPLE 2:

An individual is skateboarding in a skate park, and collides with a wall or other stationary object.
\[
\begin{align*}
V116 &= '78, Skateboard' \\
V118_1 &= 'V00.132, Skateboarder colliding with stationary object'
\end{align*}
\]

*Remember when coding V118_1, be as specific as possible.
VARIABLE NAME: SCI Nature of Injury

DESCRIPTION: This variable documents the type and level of spinal cord injury at the time of discharge.

CHARACTERS: 6

CODES:

<table>
<thead>
<tr>
<th></th>
<th>C1</th>
<th>C2</th>
<th>C3</th>
<th>C4</th>
<th>C5</th>
<th>C6</th>
<th>C7</th>
<th>C8</th>
<th>Cervical Level Unspec.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>S14.____</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<td>102</td>
<td>103</td>
<td>104</td>
<td>105</td>
<td>106</td>
<td>107</td>
<td>108</td>
<td>109</td>
</tr>
<tr>
<td>Complete</td>
<td>111</td>
<td>112</td>
<td>113</td>
<td>114</td>
<td>115</td>
<td>116</td>
<td>117</td>
<td>118</td>
<td>119</td>
</tr>
<tr>
<td>Central Cord</td>
<td>121</td>
<td>122</td>
<td>123</td>
<td>124</td>
<td>125</td>
<td>126</td>
<td>127</td>
<td>128</td>
<td>129</td>
</tr>
<tr>
<td>Anterior Cord</td>
<td>131</td>
<td>132</td>
<td>133</td>
<td>134</td>
<td>135</td>
<td>136</td>
<td>137</td>
<td>138</td>
<td>139</td>
</tr>
<tr>
<td>Brown-Sequard</td>
<td>141</td>
<td>142</td>
<td>143</td>
<td>144</td>
<td>145</td>
<td>146</td>
<td>147</td>
<td>148</td>
<td>149</td>
</tr>
<tr>
<td>Other Incomplete Lesion</td>
<td>151</td>
<td>152</td>
<td>153</td>
<td>154</td>
<td>155</td>
<td>156</td>
<td>157</td>
<td>158</td>
<td>159</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>T1</th>
<th>T2-T6</th>
<th>T7-T10</th>
<th>T11-T12</th>
<th>Thoracic Level Unspec.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>S24.____</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unspecified</td>
<td>101</td>
<td>102</td>
<td>103</td>
<td>104</td>
<td>109</td>
</tr>
<tr>
<td>Complete</td>
<td>111</td>
<td>112</td>
<td>113</td>
<td>114</td>
<td>119</td>
</tr>
<tr>
<td>Anterior Cord</td>
<td>131</td>
<td>132</td>
<td>133</td>
<td>134</td>
<td>139</td>
</tr>
<tr>
<td>Brown-Sequard</td>
<td>141</td>
<td>142</td>
<td>143</td>
<td>144</td>
<td>149</td>
</tr>
<tr>
<td>Other Incomplete Lesion</td>
<td>151</td>
<td>152</td>
<td>153</td>
<td>154</td>
<td>159</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>L1</th>
<th>L2</th>
<th>L3</th>
<th>L4</th>
<th>L5</th>
<th>Lumbar Level Unspec.</th>
<th>Sacral</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>S34.____</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unspecified</td>
<td>101</td>
<td>102</td>
<td>103</td>
<td>104</td>
<td>105</td>
<td>109</td>
<td>139</td>
</tr>
<tr>
<td>Complete</td>
<td>111</td>
<td>112</td>
<td>113</td>
<td>114</td>
<td>115</td>
<td>119</td>
<td>131</td>
</tr>
<tr>
<td>Incomplete</td>
<td>121</td>
<td>122</td>
<td>123</td>
<td>124</td>
<td>125</td>
<td>129</td>
<td>132</td>
</tr>
</tbody>
</table>

**S34.000**    | Injury of the Cauda Equina

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>888.888*</td>
<td>Not Applicable, Patient discharged Normal</td>
</tr>
<tr>
<td>999.999*</td>
<td>Unknown</td>
</tr>
</tbody>
</table>

*The only time a completely numeric code is acceptable for V118_2 is when using codes 888.888 ‘Not Applicable’ or 999.999 ‘Unknown’; all other codes must follow the S_ _ _ _ _ _ format.
COMMENTS: This variable is a combination of information from the Category of Neurologic Impairment (V131D), ASIA Impairment Scale (V132D), and Level of Preserved of Neurologic Impairment (V136D) variables. When the right and left sides of V136D differ, always use the information from the higher side. (i.e. if V136DL = C07 and V136DR = C06, you should choose C06 for V118_2).

QC: See information below.

<table>
<thead>
<tr>
<th>If V131D AND</th>
<th>V132D</th>
<th>AND</th>
<th>V136DR AND/OR V136DL</th>
<th>THEN</th>
<th>V118_2 must =</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 or 3</td>
<td>B</td>
<td></td>
<td>T01 to T12</td>
<td></td>
<td>S24.131 to S24.154</td>
</tr>
<tr>
<td>1 or 3</td>
<td>B</td>
<td></td>
<td>T99</td>
<td></td>
<td>S24.139, S24.149, or S24.159</td>
</tr>
<tr>
<td>1 or 3</td>
<td>B</td>
<td></td>
<td>L01 to L05</td>
<td></td>
<td>S34.121 to S34.125</td>
</tr>
<tr>
<td>1 or 3</td>
<td>B</td>
<td></td>
<td>L99</td>
<td></td>
<td>S34.129</td>
</tr>
<tr>
<td>1 or 3</td>
<td>B</td>
<td></td>
<td>S01 to S05</td>
<td></td>
<td>S34.132</td>
</tr>
<tr>
<td>1 or 3</td>
<td>B</td>
<td></td>
<td>S99</td>
<td></td>
<td>S34.132</td>
</tr>
<tr>
<td>2</td>
<td>A</td>
<td></td>
<td>T01 to T12</td>
<td></td>
<td>S24.111 to S24.114</td>
</tr>
<tr>
<td>2</td>
<td>A</td>
<td></td>
<td>T99</td>
<td></td>
<td>S24.119</td>
</tr>
<tr>
<td>2</td>
<td>A</td>
<td></td>
<td>L01 to L05</td>
<td></td>
<td>S34.111 to S34.115</td>
</tr>
<tr>
<td>2</td>
<td>A</td>
<td></td>
<td>L99</td>
<td></td>
<td>S34.119</td>
</tr>
<tr>
<td>2</td>
<td>A</td>
<td></td>
<td>S01 to S05</td>
<td></td>
<td>S34.131</td>
</tr>
<tr>
<td>2</td>
<td>A</td>
<td></td>
<td>S99</td>
<td></td>
<td>S34.131</td>
</tr>
<tr>
<td>4 or 6</td>
<td>B</td>
<td></td>
<td>C01 to C08</td>
<td></td>
<td>S14.121 to S14.158</td>
</tr>
<tr>
<td>4 or 6</td>
<td>B</td>
<td></td>
<td>C99</td>
<td></td>
<td>S14.129, S14.139, S14.149, or S14.159</td>
</tr>
<tr>
<td>5</td>
<td>A</td>
<td></td>
<td>C01 to C08</td>
<td></td>
<td>S14.111 to S14.118</td>
</tr>
<tr>
<td>5</td>
<td>A</td>
<td></td>
<td>C99</td>
<td></td>
<td>S14.119</td>
</tr>
<tr>
<td>9</td>
<td>U</td>
<td></td>
<td>C99</td>
<td></td>
<td>S14.109</td>
</tr>
<tr>
<td>9</td>
<td>U</td>
<td></td>
<td>T99</td>
<td></td>
<td>S24.109</td>
</tr>
<tr>
<td>9</td>
<td>U</td>
<td></td>
<td>L99</td>
<td></td>
<td>S34.109</td>
</tr>
<tr>
<td>9</td>
<td>U</td>
<td></td>
<td>S99</td>
<td></td>
<td>S34.139</td>
</tr>
</tbody>
</table>

NOTE: If the medical records do not state the type of injury (Central Cord, Anterior Cord, etc) code this variable according to the level of injury, unspecified.

REVISIONS: This variable was activated in April 2005. Data collection began in August 2005.

EXAMPLES: See QC information.
VARIABLE NAME: Work Relatedness

DESCRIPTION: This variable specifies whether the spinal cord injury occurred in the course of employment.

CHARACTERS: 1

CODES:
0   No
1   Yes
9   Unknown

COMMENTS: If the Sponsor is Worker's Compensation, assume the injury was work-related.

If medical records or other injury reports contain additional information pertaining to work-relatedness, the “Operational Guidelines for Determination of Injury at Work” developed jointly by the Association for Vital Records and Health Statistics and CDC, should be used to code this variable. The guidelines may be found on the next page.

If Worker's Compensation is not listed as a hospital payment source and if no other information regarding work-relatedness is available, use the unknown code (code 9).

REVISIONS: October 2000: This variable was added to the database.
FORM I

VARIABLE NAME: WORK RELATEDNESS

Operational Guidelines for Determination of Injury at Work

Consider possibility of work injury regardless of whether injury occurred in the course of work in "usual" or other occupation and/or industry. If the patient’s "usual" occupation is housewife, student, or retired consider possible injury during other employment. If occupation is transportation-related, suspect injury at work and evaluate per criteria.

Consider available information with regard to location and activity at time of injury. If location is farm, suspect work-related and evaluate per criteria.

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Injury at Work</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>On Employer Premises</strong></td>
<td>Yes</td>
</tr>
<tr>
<td>• Engaged in work activity, apprentice, vocational training</td>
<td>✓</td>
</tr>
<tr>
<td>• On break; in hallways, rest room, cafeteria, storage area</td>
<td>✓</td>
</tr>
<tr>
<td>• In employer parking lots while working, arriving, or leaving</td>
<td>✓</td>
</tr>
<tr>
<td>• Engaged in recreational activities on employer controlled facilities (games, etc.) for personal enjoyment</td>
<td>✓</td>
</tr>
<tr>
<td>• As a visitor for non-work purposes, not on official business</td>
<td>✓</td>
</tr>
<tr>
<td><strong>Off Employer Premises</strong></td>
<td>Yes</td>
</tr>
<tr>
<td>• Working for pay or compensation, including at home</td>
<td>✓</td>
</tr>
<tr>
<td>• Working as a volunteer EMS, firefighter, or law enforcement officer</td>
<td>✓</td>
</tr>
<tr>
<td>• Working in family business, including family farm. Activity should be clearly related to a profit-oriented business.</td>
<td>✓</td>
</tr>
<tr>
<td>• Traveling on business, including to and from customer/business contacts</td>
<td>✓</td>
</tr>
<tr>
<td>• Engaged in work activity where vehicle is considered the work environment (e.g., taxi driver, truck driver, etc.)</td>
<td>✓</td>
</tr>
<tr>
<td>• Homemaker working at homemaking activities</td>
<td>✓</td>
</tr>
<tr>
<td>• Working for self-non profit, i.e., mowing lawn, repairing own roof, hobby, or recreation activities</td>
<td>✓</td>
</tr>
<tr>
<td>• Student engaged in school activities</td>
<td>✓</td>
</tr>
<tr>
<td>• Operating vehicle (personal or commercial) for non-work purposes</td>
<td>✓</td>
</tr>
<tr>
<td>• Commuting to or from work site</td>
<td>✓</td>
</tr>
</tbody>
</table>

SOURCE: These guidelines were developed jointly by: The Association for Vital Records and Health Statistics (AVRHS) and the Centers for Disease Control (CDC).

EXAMPLE: The person was injured in a motor vehicle crash while working.

V119. Work Relatedness ....................................................................................1
VARIABLES 120I, 120D and 203
(Page 1 of 2)

FORM I and FORM II

VARIABLE NAME: Place of Residence
DESCRIPTION: This variable specifies where the patient is actually residing
1) **at the time of injury** (V120I)
2) **at discharge from the System** (V120D) and,
3) **on the anniversary date being reported** (V203).

This place may not necessarily coincide with the patient's legal residence.

CHARACTERS: 2 for each entry

CODES:
- **01** Private Residence: includes house, apartment, hogan, mobile home, foster home, condominium, boat, individual residence in a retirement village
- **02** Hospital: includes mental hospital, hospital in a retirement village
- **03** Nursing Home: includes medi-center, skilled nursing facilities, institutions licensed as hospitals but providing essentially long-term, custodial, chronic disease care, assisted living unit in a retirement village, etc.
- **04** Group Living Situation: includes transitional living facility, dormitory (school, church, college), military barracks, boarding school, boarding home, bunkhouse, boys’ ranch, fraternity/sorority house, labor camp, commune, shelter, convent, monastery, or other religious order residence, etc.
- **05** Correctional Institution: includes prison, penitentiary, jail, correctional center, etc.
- **06** Hotel/motel: includes YWCA, YMCA, guest ranch, inn
- **07** Deceased *(valid in V120D only)*
- **08** Other, unclassified
- **09** Homeless: cave, car, tent, etc.
- **99** Unknown

**Blank** *(on Form II - only if V201 = “5”)*
FORM I and FORM II

VARIABLE NAME: Place of Residence

COMMENTS: If the patient's place of residence does not fit into any of the above classifications, document it as "Other, unclassified". "Hospital" should not be used in the case of a patient who is temporarily rehospitalized on his anniversary.

Variable 120D documents place of residence at discharge from initial hospitalization.

If, at the time of discharge from the System, the patient is transferred and admitted to a hospital for custodial care only, use code "3" (Nursing home). Do NOT use Nursing Home if the stay is temporary.

REVISIONS:
November 1995: Residence at time of injury and code 09 for homeless were added. Cave, car and tent were moved from code 01 to code 09.

October 2000: convent, monastery, or other religious order residence were added to code “4”. Collection at discharge was changed to at discharge or end of last System or non-System outpatient treatment phase.

January 2005: Collection at discharge or end of last System or non-System outpatient treatment phase was changed back to at discharge.

CONVERSIONS: In January 1985: the category deceased (old code "7") on Form II was deleted. Form II records using old code "7" now contain code "99".
### FORM I and FORM II

**VARIABLE NAME:** Marital Status  
**DESCRIPTION:** This variable specifies the patient's marital status

1) **at the time of the spinal cord injury** (V121) and  
2) **on the anniversary date being reported** (V204).

**CHARACTERS:** 1 for each entry

**CODES:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Single: a person who has never married</td>
</tr>
<tr>
<td>2</td>
<td>Married: a person who is legally married</td>
</tr>
<tr>
<td>3</td>
<td>Divorced: a person who is legally divorced</td>
</tr>
<tr>
<td>4</td>
<td>Separated: includes both legal separations and living apart from a married partner</td>
</tr>
<tr>
<td>5</td>
<td>Widowed</td>
</tr>
<tr>
<td>6</td>
<td>Other, unclassified</td>
</tr>
<tr>
<td>9</td>
<td>Unknown</td>
</tr>
<tr>
<td></td>
<td><strong>Blank</strong> (on Form II - only if V201 = “5”)</td>
</tr>
</tbody>
</table>

**COMMENTS:** Common-law marriages should be ignored. Code the marital status as if the common-law marriage did not exist. Disregard “living with” situations.  
If the patient's marital status does not fit into any of the above classifications, document it as "Other, unclassified".

**QC:** When a patient = “1” (single, never married) on a Form II, V121 (Marital Status at Injury) and all previous V204's should be coded "1" (single, never married).

**REVISIONS:** October 2000: Marital Status at Discharge was deleted.

**EXAMPLE:** The patient is being interviewed for his year 01 anniversary. He was married at the time of injury but is now separated.

121. Marital Status at Injury...............................................................2  
204. Marital Status on Year 01 Anniversary......................................4  
209. Change in Marital Status since last Form II (or since Form I for anniversary year 01).................................................................0  

There was no legal change in marital status since the patient was only separated (not legally divorced)
VARIABLE NAME: Highest Formal Educational Level Completed  
DESCRIPTION: This variable specifies the highest formal educational level completed  
1) at the time of injury (V122) and  
2) on the anniversary date being reported (V205).  
This is level completed and does not include partial completion.  
This variable does not include trade or technical schools.  
CHARACTERS: 1 for each entry  
CODES:  
1 8th grade or less (includes pre-school)  
2 9th through 11th grade  
3 High School Diploma or G.E.D.  
4 Associate Degree (A.A. - Junior College Degree)  
5 Bachelors Degree  
6 Masters Degree  
7 Doctorate: includes Ph.D., M.D., law degrees, etc.  
8 Other, unclassified: includes 3-year nursing degree, special education  
9 Unknown  
Blank (on Form II - only if V201 = “5”)  
COMMENTS: If a person has 2 or more degrees, report the highest degree achieved.  
If the patient's educational level completed does not fit into any of the above classifications, document it as "Other, unclassified."  
EXAMPLE 1: At the time of injury, the patient had a Bachelor of Science degree and was working on a masters in public health.  
V122. Level of Education............................................................. 5  
EXAMPLE 2: On her 5th anniversary of injury, the patient had an associate degree and a Bachelor’s degree.  
V205. Level of Education............................................................. 5
VARIABLES 123 and 206

FORM I and FORM II

VARIABLE NAME: Primary Occupational, Educational or Training Status

DESCRIPTION: This variable specifies the primary occupational, educational or training status of the patient

1) at the time of injury (V123) and,
2) on the anniversary date being reported (V206).

Since these sub-categories are not mutually exclusive, the primary occupational, educational or training status should be selected on the basis of the injured person's opinion as to what was primary.

CHARACTERS: 1 for each entry

CODES:

1 Working - competitive labor market: includes military (gainfully and legally employed)
2 Homemaker
3 On-the-job training
4 Sheltered workshop
5 Retired
6 Student (includes pre-school)
7 Unemployed
8 Other, unclassified: includes volunteer, disability or medical leave
9 Unknown

Blank (on Form II - only if V201 = “5”)

COMMENTS: If the patient's primary occupational, educational, or training status does not fit into any of the above classifications, document it as "Other, unclassified".

QC: If V123 = “1” (working) then, V124 must not = “88” (not applicable, not working).

EXAMPLE 1: At the time of injury, the patient was a college student who worked 30 hours a week as a waitress. The patient considered herself a “student”.
V123. Primary Occupational, Ed or Training Status.................... 6
V124. Job Census Code.................................................... 88

EXAMPLE 2: At the time of injury, the patient was a college student who worked 30 hours a week as a stock clerk. The patient considered himself as “working”.
V123. Primary Occupational, Ed or Training Status.................... 1
V124. Job Census Code.................................................... 05
VARIABLE NAME: Job Census Code

DESCRIPTION: This variable specifies the major census occupational category for the patient’s occupation:

1) at the time of injury (V124) and
2) on the anniversary date being reported (V207).

CHARACTERS: 2 for each entry

CODES:

01 Executive, administrative, and managerial
02 Professional specialty
03 Technicians and related support
04 Sales
05 Administrative support including clerical
06 Private household
07 Protective service
08 Service, except protective and household
09 Farming, forestry, and fishing
10 Precision production, craft, and repair
11 Machine operators, assemblers, and inspectors
12 Transportation and material moving
13 Handlers, equipment cleaners, helpers, and laborers
14 Military occupations
88 Not applicable, not working
99 Unknown
Blank (on Form II - only if V201 = “5”)

COMMENTS: Refer to Appendix C of this syllabus for a listing of the specific occupational classifications included under each major occupational category listed above. If the patient is working (even if “working” is not the primary occupation coded in V123), code the job in this variable.


REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

EXAMPLE: See page 89.
VARIABLE 125

FORM I

VARIABLE NAME: Are You a Veteran of the U.S. Military Forces?

DESCRIPTION: This variable documents whether or not the patient is a veteran of the United States military forces (i.e., Air Force, Army, Coast Guard, Marine Corp and Navy).

CHARACTERS: 1

CODES:

0  No
1  Yes, service-connected for traumatic spinal cord injury
2  Yes, service-connected for a condition other than spinal cord injury
3  Yes, non-service connected veteran
4  Yes, service connection unknown
9  Unknown

COMMENTS: A “service-connected” veteran is one receiving financial compensation for the “loss of, or loss of use of” an anatomical, sensory or mental condition incurred or resulting from their military service. A “non-service connected” veteran is one not receiving compensation, but may be receiving health care benefits (typically due to low income). These terms are similar to a “workman’s compensation” system.

A reservist who never served on active duty (“serving” means more than just training time) is NOT considered a veteran.

A reservist who is (1) "called up" to active duty or is (2) engaged in active duty military training and is hurt or injured during that period is considered a veteran.

An active duty military personnel who concludes his or her career with time in the reserves is considered a veteran.

If the patient is a veteran, document services received in variables 126 and 210.

QC: If this variable = “0“ then, V126_1 and all V210_1’s must = “8“ and vice versa.

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

EXAMPLES: See page 93.
VARIABLES 126 and 210
(Page 1 of 2)

FORM I and FORM II

VARIABLE NAME: Veterans’ Administration Healthcare System Services Used
DESCRIPTION: This variable documents the healthcare system services received if the patient is a veteran of the U.S. military forces. Document services received:
1) **during System** (V126_1 to V126_5)
   and
2) **since the last Form II** (V210_1 to V210_5).

See page 95 for the definition of **during System**.

On Form II, this variable documents VA services received since the last Form II with known VA services data. When coding the year 01 Form II, this variable documents the VA services received since the spinal cord injury.

CHARACTERS: 1 for each entry (up to 5 entries for V126 and V210)
CODES:

- 0 **None** (Valid in coding position #1 only)
- 1 **Pharmacy**
- 2 **Prosthetics, orthotics, wheelchairs**
- 3 **SCI center** *(VA hospital with an SCI center)*
- 4 **Non-SCI center** *(VA hospital without an SCI center)*
- 5 **SCI outpatient clinic**
- 8 **Not applicable (not a veteran)** (Valid in coding position #1 only)
- 9 **Unknown** (Valid in coding position #1 only)
  - **Blank** (on Form II - only if V201 = “$”)

COMMENTS: Document up to 5 different services used during the data collection period being reported. Codes 0, 8 and 9 are allowed only in coding position #1. When one of these codes is entered in coding position #1, no codes are allowed in coding positions 2 to 5. For services such as psychiatric counseling, code the facility in which the services were received (i.e., SCI center, non-SCI center and/or SCI outpatient clinic).

When asking the patient this question, the interviewer will need to cue the patient concerning the appropriate time period. For example, if data are being collected for year 10 and the patient has Form IIs for years 5 and 1 but VA Services was unknown in year 5, the interviewer should ask for the services received since year 1. See example # 3 on page 93.
VARIABLE NAME: Veterans’ Administration Healthcare System Services Used

QC: See page 91.

SOFTWARE: When code 0, 8 or 9 is entered, the software advances the user to the next variable.

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

EXAMPLE 1: The patient is not a veteran.

125. Are You A Veteran Of The U.S. Military Forces? ........................................................... 0
126. VA Healthcare System Services Used ................................................................. 8

EXAMPLE 2: The patient was injured while serving in the Air Force and was treated at the VA’s SCI center and, he received psychiatric counseling in the SCI outpatient clinic. He also received medications from the VA pharmacy.

125. Are You A Veteran Of The U.S. Military Forces? ........................................................... 1
126. VA Healthcare System Services Used ................................................................. 3

EXAMPLE 3: The patient was treated in the VA SCI center during his first year post-injury. This is his 10th anniversary of injury and he was coded “lost” on his Form II for year 5. Since his 7th post-injury year he has been receiving medications from the VA pharmacy, and during his 10th year he was treated at the VA’s outpatient SCI clinic.

<table>
<thead>
<tr>
<th>Year</th>
<th>210. VA Healthcare System Services Used ..........................................................</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year 1</td>
<td>2</td>
</tr>
<tr>
<td>Year 5</td>
<td>1</td>
</tr>
<tr>
<td>Year 10</td>
<td>1</td>
</tr>
</tbody>
</table>
**VARIABLES 127 and 214**

**FORM I and FORM II**

**VARIABLE NAME:** Sponsors of SCI Care and Services

**DESCRIPTION:** This variable documents sponsors who have contributed towards the payment of

1) **expenses during System** (V127_1 through V127_5) and
2) **on-going care for the spinal cord injured patient during the anniversary year being reported** (V214_1 through V214_5).

This care includes hospitalization, outpatient medical and rehabilitation services, vocational rehabilitation, education, training, equipment, medications and supplies, attendant care and custodial care. It does not include income maintenance. Record all sponsors who have contributed to the above. For variable 214, document all sponsors available for ongoing care.

**In position 1 code the Primary Sponsor (i.e., the sponsor contributing the largest proportion of support).**

**CHARACTERS:** 2 for each entry (up to 5 entries for V127 and V214)

**CODES:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Sponsor Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td>Private Insurance</td>
</tr>
<tr>
<td>02</td>
<td>Department of Vocational Rehab (DVR)</td>
</tr>
<tr>
<td>03</td>
<td>Medicaid [including Medicaid administered by another sponsor (e.g. an HMO); see page 95]</td>
</tr>
<tr>
<td>04</td>
<td>Worker's Compensation</td>
</tr>
<tr>
<td>05</td>
<td>Medicare [including Medicare administered by another sponsor (e.g. an HMO); see page 95]</td>
</tr>
<tr>
<td>06</td>
<td>County medical</td>
</tr>
<tr>
<td>07</td>
<td>Self-pay - personal funds</td>
</tr>
<tr>
<td>08</td>
<td>Veterans Administration</td>
</tr>
<tr>
<td>09</td>
<td>Public Health Service (e.g., Bureau of Indian Affairs)</td>
</tr>
<tr>
<td>10</td>
<td>Crippled Children's Service</td>
</tr>
<tr>
<td>11</td>
<td>No Pay (indigent, no resources)</td>
</tr>
<tr>
<td>12</td>
<td>Other insurance, unclassified: includes Champus/Tricare</td>
</tr>
<tr>
<td>13</td>
<td>Other private funds (e.g., hometown fund raisers)</td>
</tr>
<tr>
<td>14</td>
<td>Prepaid health plans: includes HMOs, PPOs, Kaiser Foundation, etc.</td>
</tr>
<tr>
<td>15</td>
<td>Other, unclassified (e.g., SCI system patient care funds, Homebound, victim's assistance funds, etc.)</td>
</tr>
<tr>
<td>99</td>
<td>Unknown</td>
</tr>
<tr>
<td></td>
<td>Blank (on Form II - only if V201 = “5”)</td>
</tr>
</tbody>
</table>

*valid in Primary Sponsor position only and, no other codes are allowed
FORM I and FORM II

VARIABLE NAME: Sponsors of SCI Care and Services

COMMENTS: During System is the time between the first System admission and discharge from the last System inpatient treatment phase. Do not include sources of support received prior to initial admission to the System. If the sponsor is any other than those listed on the previous page, document it as "Other, unclassified."

Self-pay (code 07) should be used only if there are no other sponsors. This code should be used for those who have no coverage but are expected to pay the bill because they have personal resources. When this is the case, put code 07 in coding position #1 and, leave all other coding positions blank.

No Pay (code 11) should be used only if there are no sponsors and the patient did not pay for anything. Code 11 must be in coding position #1 and, all other coding positions must be blank.

When Medicaid or Medicare is administered through another sponsor (e.g., an HMO) use the Medicaid or Medicare code (03 or 05, respectively). Code the sponsor that administers the Medicaid or Medicare only if that sponsor also contributed towards the payment of expenses.

When Blue Cross is administered by an HMO, use Private Insurance (code 01). For the Type of Reimbursement (V128/V215):

> if the provider is part of the HMO, then code 6 (capitated) would typically apply

> if the provider is not part of the HMO, then it will probably be code 2 (approved fee for service) or code 4 (limited per diem) depending on the terms of the contract between the HMO and the patient with a larger than usual deductible/copayment that the patient may be responsible for paying.

QC: If the Sponsor variable = “11”, then Type of Reimbursement must = “0” and Medical Case Manager must = “8”.

If the Sponsor variable = “07”, then Type of Reimbursement must = “1” and Medical Case Manager must = “8”.

REVISIONS: Beginning in 1987 coding position #1 was designated for the Primary Sponsor. For most records in existence at that time, all codes were moved down one position and the unknown code (“99”) was inserted in coding position #1. At that time, there were no records containing codes for 5 sponsors.
VARIABLE NAME: Type of Reimbursement

DESCRIPTION: This variable documents the type of reimbursement plan of every sponsor providing coverage during System (V128_1 to V128_5)

Code all reimbursement plans for all sponsors documented in variable 127.

CHARACTERS: 1 for each entry (up to 5 entries)

CODES:

0  Indigent - no payment is anticipated.

1  Charges - Includes self-pay and other situations when all charges are reimbursable.

2  Approved Fee for Service - Reimbursement is based on usual and customary charges in the community for services rendered (e.g. Blue Cross/Blue Shield).

3  Unlimited Per Diem - Reimbursement is based on a fixed amount per day hospitalized for the entire length of hospitalization.

4  Limited Per Diem - Reimbursement is based on a fixed amount per day hospitalized and is limited to a certain number of days. Medicare is in this category.

5  Negotiated Fee Schedule - Each service has a fixed negotiated fee that the provider knows in advance and that may vary from one provider to another.

6  Capitated Reimbursement - A lump sum fixed amount is paid to the provider each month or year for each member covered by the plan regardless of whether any services are provided to that member. The provider is obligated to provide all necessary care to each member of the plan (includes HMOs and PPOs).

7  Other

9  Unknown

COMMENTS: Code all reimbursement mechanisms that apply for each sponsor.

This information is available through the hospital admissions/billing office, the responsible third party, the social worker, case managers, face sheet and sometimes in the physician’s notes (i.e., contact info between the physician and the case manager). Medicare is code 4 (limited per diem); Medicaid rules vary by state.

See page 95 for the definition of during System.

REVISIONS: November 1995: variable was added to the database.
February 1996: coding scheme was expanded.
July 2001: the Form II variable (V215) was deleted.

QC: See page 95.
VARIABLE NAME: Medical Case Manager

DESCRIPTION: This variable documents whether the patient's primary financial sponsor of care has assigned a medical case manager to handle the patient's case:

1) during System (V129) and
2) during the anniversary year being reported (V216)

CHARACTERS: 1 for each entry

CODES:

0 No medical case manager affiliated with the primary sponsor of care

1 Yes, a medical case manager has been assigned by the primary sponsor of care

8 Not applicable - there is no financial sponsor of care, the patient is either self-pay or indigent

9 Unknown

Blank (on Form II - only if V201 = “5”)

COMMENTS: This variable refers only to the primary sponsor of care identified in the Sponsors of Care variable.

This information is available from the hospital's billing office.

This is not the hospital’s case manager.

See page 95 for the definition of during System.

REVISIONS: November 1995: this variable was added to the database.

QC: See page 95.
VARIABLES 130A, 130R and 130D

FORM I

VARIABLE NAME: Dates of the Neurologic Examinations

DESCRIPTION: These variables document the dates on which the neurologic examinations were performed:

1) initial system examination (for day-1 admissions only) (V130A)
2) admission to System inpatient rehab (for day-1 admissions only) (V130R) and
3) at discharge (for all patients) (V130D).

Although the initial system exam should be performed within 72 hours of system admission, data for exams performed later than that are included in the database.

The neurologic exam consists of the items documented in variables 131 through 136 and must be performed by a physician or a designated person who has been trained using the guidelines in the latest version of the International Standards for Neurological Classification of Spinal Cord Injury, published by the American Spinal Injury Association (ASIA).

CHARACTERS: 8 for each entry

FORMAT: mmddyyyy

CODES: Any valid date

88888888 Not Done (V130A, V130R, V130D)

OR

* Not applicable, not admitted to inpatient rehab (V130R)

99999999 Unknown

Blank For non day-1 admissions (in V130A and V130R only)

* For Form Is newly entered (i.e., with Indates) after 03/31/2005 the Not applicable, not admitted to inpatient rehab code is allowed only for patients who expire or achieve complete recovery or minimal deficit status during System acute care.
VARIABLE NAME: Dates of the Neurologic Examinations

COMMENTS: Record the month, day and year. Partial unknown dates (i.e., unknown in the month, day or year) are not allowed in this variable. Use the unknown code (“99999999”) when it is not known if there was a neurologic exam. When parts of the exam are done on different dates, the date of the exam should be the day on which most parts of the exam were done.

*When the patient is not fully testable:* When a key sensory point or key muscle is not testable for any reason, the examiner should record the neurologic exam as “not done”. In such cases, sensory and motor scores for the affected side of the body, as well as total sensory and motor scores, cannot be generated with respect to the injury at that point in treatment. Further, when associated injuries (e.g., traumatic brain injury, brachial plexus injury, limb fracture, etc.,) interfere with the completion of the neurological examination, the neurological level should still be determined as accurately as possible. However, obtaining the sensory/motor scores and impairment grades should be deferred to later examinations.

This variable cannot be stored in date format since non-valid dates (codes “88888888” and “99999999”) are allowed.

REVISIONS: November 1995: dates at system admission and discharge were added to the database and data was required of patients who are admitted to the system on or after December 1, 1995.

October 2000: date at rehab admission was added. Neuro exam items at rehab admission (except ASIA Motor Index Score) were also added. Data are required for patients admitted to the System after 10/31/2000.

January 2005: Code 88888888 may be used if the Neuro Exam was *Not Done*. It may also be used for *Not applicable, not admitted to inpatient rehab* only for patients who expire, or achieve complete recovery or minimal deficit status during System acute care.

QC: If variable 130A= “88888888”, variables 131A through 136A should = *Unknown*. If variable 130R = ‘88888888”, variables 131R through 136R should = *Unknown*. If variable 130D = “88888888”, variables 131D through 136D should = *Unknown*. 
VARIABLE NAME: Category of Neurologic Impairment

DESCRIPTION: This variable documents the degree of neurologic damage present:

1) at initial system examination (for day-1 admissions only) (V131A)
2) at admission to inpatient rehab (for day-1 admissions only) (V131R)
3) at discharge (for all patients) (V131D) and
4) on the date of the year 01 (or year 02, see page 16) examination (V244).

The neurologic exam must be performed by a physician or a designated person who has been trained using the guidelines in the latest version of the International Standards for Neurological Classification of Spinal Cord Injury, published by the American Spinal Injury Association (ASIA).

CHARACTERS: 1 for each entry

CODES:

1 Paraplegia, incomplete
2 Paraplegia, complete
3 Paraplegia, minimal deficit (see page 101)
4 Tetraplegia, incomplete
5 Tetraplegia, complete
6 Tetraplegia, minimal deficit (see page 101)
7 Normal neurologic (see page 101)
8 Normal neurologic, minimal neurologic deficit (code "5" prior to 10/15/87) This is a CONVERSION CODE ONLY. Data collectors may NOT use this code. This information is provided for data analyses purposes only.
9 Unknown (V131A, V131R, V131D, V224);
   Not admitted to System inpatient rehab (V131R) See note on page 98 for Form Is entered after 03/31/2005.
Blank (on Form I - for non day-1 admissions in V131A and V131R only)
Blank (on Form II - only if V201 = “5”)

COMMENTS: Paraplegia is impairment or loss of motor and/or sensory function in the thoracic, lumbar or sacral (but not cervical) segments of the spinal cord secondary to damage of neural elements within the spinal canal. With paraplegia, arm functioning is spared, but, depending on the level of injury, the trunk, legs and pelvic organs may be involved. The term is used in referring to cauda equina and conus medullaris injuries, but not to lumbosacral plexus lesions or injury to peripheral nerves outside the neural canal.

Tetraplegia (preferred to quadriplegia) is impairment or loss of motor and/or sensory function in the cervical segments of the spinal cord due to damage of neural elements within the spinal canal. Tetraplegia results in impairment of function in the arms as well as in the trunk, legs and pelvic organs. It does not include brachial plexus lesions or injury to peripheral nerves outside the neural canal.

Complete injury means an absence of sensory and motor function in the lowest sacral segment.
Incomplete injury means partial preservation of sensory and/or motor function is found below the neurological level and includes the lowest sacral segment. Sacral sensation includes sensation at the anal mucocutaneous junction as well as deep anal sensation. The test of motor function is the presence of voluntary contraction of the external anal sphincter upon digital examination.

Minimal deficit refers to abnormal reflexes, to transitional neurologic symptoms, or neurologic damage so minimal the patient has no significant or incapacitating loss of function. Reflexes may still be abnormal. If the patient is coded minimal deficit on Form I, no Form IIs are required. Once a patient is coded minimal deficit on a Form II, no subsequent Form IIs are required.

Normal neurologic status refers to those patients who have no demonstrable muscular weakness or impaired sensation. This subcategory must be included in the database to document those patients who achieve recovery from initial injury. If the patient is coded normal on Form I, no Form IIs are required. Once a patient is coded normal on a Form II, no subsequent Form IIs are required.

Monoplegia should be coded "1" (Paraplegia, incomplete).
Triplegia should be coded "4" (Tetraplegia, incomplete).
The sacral area must be checked for this variable.


REVISIONS: January, 1998: Data on Form II are now required only in annual years 1 and 2.
October 2000: Data on Form II are now required only in annual year 1 and, data collection at rehab admission was added. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If this variable = “1” (Paraplegia, incomplete), "2" (Paraplegia, complete), or "3" (Paraplegia, minimal deficit), then the Level of Preserved Neuro Function variable should ="T" (Thoracic), "L" (Lumbar), "S" (Sacral) or "X99" (Unknown).
If this variable = "4" (Tetraplegia, incomplete), "5" (Tetraplegia, complete), or "6" (Tetraplegia, minimal deficit), then the Level of Preserved Neuro Function variable should ="C" (Cervical) or "X99" (Unknown).

Patients with minimal deficit status must be coded:
Neuro Impairment = "3" or "6",
Level Left and/or Level Right = any code other than "X00" and,
ASIA Impairment Scale = "3" or "D".

Patients with normal neurologic status must be coded:
Neuro Impairment = "7" and,
ASIA Impairment Scale = "4" or "E" and,
all muscles in the ASIA Motor Index Score = "5" and,
all ASIA Motor Index Score Subtotals = "50" and,
ASIA Motor Index Score Total = "100".
VARIABLES 132A, 132R, 132D and 245

REGISTRY, FORM I and FORM II

VARIABLE NAME: ASIA Impairment Scale (modified from Frankel)

DESCRIPTION: This variable attempts to quantitate the degree of impairment

1) at initial system examination (for day-1 admissions only) (V132A)

2) at admission to inpatient rehab (for day-1 admissions only) (V132R)

3) at discharge (for all patients) (V132D) and

4) on the date of the year 01 (or year 02, see page 16) examination (V245).

CHARACTERS: 1 for each entry

CODES:

A Complete Injury.
No sensory or motor function is preserved in the sacral segments S4-S5.

B Incomplete.
Sensory but not motor function is preserved below the neurological level and includes the sacral segments S4-S5.

C Incomplete.
Motor function is preserved below the neurological level, and more than half of the key muscles below the neurological level have a muscle grade less than 3 (grades 0-2).

D Incomplete.
Motor function is preserved below the neurological level, and at least half of key muscles below the neurological level have a muscle grade greater than or equal to 3.

E Normal.
Sensory and motor function are normal. (see page 101)

U Unknown (V132A, V132R, V132D, V245); OR
Not admitted to System inpatient rehab (V132R) See note on page 98 for Form Is entered after 03/31/2005.

Blank (on Form I - for non day-1 admissions in V132A and V132R only)

Blank (on Form II - only if V201 = “5”)

NOTE: For an individual to receive a grade of C or D, he/she must be incomplete, that is, have sensory or motor function in the sacral segments S4-S5. In addition, the individual must have either (1) voluntary anal sphincter contraction or (2) sparing of motor function more than three levels below the motor level. This is new text added to the 2000 edition of the International Standards booklet

SOURCE:
REGISTRY, FORM I and FORM II

COMMENTS: See page 99 for guidelines to administering the neurological exam when the patient is not fully testable.

REVISIONS: August 1993: The Frankel Grading system was changed to the ASIA Impairment Scale.

January, 1998: Data on Form II are required only at annual years 1 and 2.

October 2000: Data on Form II are required only at annual year 1 and data collection at rehab admission was added. This variable (at Discharge) was added to the Registry database. Code “U” was inserted in this variable in the Registry records that existed when this variable was added. Form I and Registry data are required for patients admitted to the System after 10/31/2000.

CONVERSIONS: August 1993: All records in which the Frankel Grading system was used have numeric codes in this variable. Records in which the ASIA Impairment Scale was used contain alphabetic codes.

The following Frankel Grade codes are provided for analysis purposes only. The numeric Frankel Grade codes are not allowed in records entered into the database after August 1993

Frankel Grade codes:

1 Incomplete - Preserved Sensation Only (Frankel Grade B): Preservation of any demonstrable, reproducible sensation, excluding phantom sensations. Voluntary motor functions are absent.

2 Incomplete - Preserved Motor - Non-functional (Frankel Grade C): Preservation of voluntary motor function that is minimal and performs no useful purpose. Minimal is defined as preserved voluntary motor ability below the level of injury where the majority of the key muscles tests less than a grade of 3.

3 Incomplete, Preserved Motor - Functional (Frankel Grade D): Preservation of voluntary motor function which is useful functionally. This is defined as preserved voluntary motor ability below the level of injury, where the majority of the key muscles tests at least a grade of 3.

4 Complete Recovery (Frankel Grade E): Complete return of all motor and sensory function, but there may still be abnormal reflexes.

5 Complete (Frankel Grade A): All motor and sensory function is absent below the Zone of Partial Preservation.

9 Unknown

QC: See page 101 for coding instructions for patients with normal neurologic or minimal deficit status.
FORM I and FORM II

VARIABLE NAME: ASIA Motor Index Score

DESCRIPTION: This variable documents (1) the individual scores for each key muscle, (2) the subtotal scores for the left and right sides and (3) the total ASIA Motor Index Scores:

1) at initial system examination (for day-1 admissions only) (V133AAL through V133AJL, V133AAR through V133AJR, V133AL, V133AT);

2) within 1 week of the beginning of the inpatient rehabilitation phase (for day-1 admissions only) (V133RAL through V133RJL, V133RAR through V133RR, V133RL, V133RT);

3) at discharge (for all patients) (V133DAL through V133DJL, V133DAR through V133DJR, V133DR, V133DL, V133DT); and

4) on the date of the year 01 (or year 02, see page 16) examination (V246AL through V246JL, V246AR through V246JR, V246R, V246L, V246T).

This motor index score provides a numerical scoring system to document changes in motor function.

CHARACTERS: 1 for each key muscle, Left and Right
2 for each Subtotal, Left and Right
3 for each Total

CODES:

Each Key Muscle
0-5 Valid range (see notes on page 105 for grade 5*)
8 Not applicable, unable to test; infants
9 Unknown, Not Done (V133AAL-V133AJL, V133AAR-V133AJR; V133RAL-V133RJL, V133RAR-V133RJR; V133DAL-V133DJL, V133DAR-V133DJR, V133DR, V133DL, V133DT; V246AL-V246JL, V246AR-V246JR, V246R, V246L, V246T).
Blank (on Form I - only if V201 = “5”)
Blank (on Form II - only if V201 = “5”)

Right and Left Subtotals
00 – 50 Valid range
88 Not applicable, unable to test; infants
99 Unknown, Not Done (V133AR, V133AL, V133RR, V133RL, V133DR, V133DL, V246R, V246L; V133RR, V133RL; V133RT, V133DT, V246T; V133RT) *
Blank (on Form I - only if V201 = “5”)
Blank (on Form II - only if V201 = “5”)

Total 000 – 100 Valid range
888 Not applicable, unable to test; infants
999 Unknown, Not Done (V133AT, V133RT, V133DT, V246T; V133RT) *
Blank (on Form I - only if V201 = “5”)
Blank (on Form II - only if V201 = “5”)

* See note on page 98 regarding “no System rehab admission” for Form I is entered after 03/31/2005.

SOFTWARE: The software includes a function key to calculate the Subtotals and totals in this variable. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
FORM I and FORM II

VARIABLE NAME: ASIA Motor Index Score

REVISED: October 1986: Acute, Discharge and Form II Sub-Totals and Totals were added to the database.
August 1993: The individual muscle scores were added to Acute, Discharge & Form II; all items were added for the inpatient rehabilitation phase.
January 1998: data on Form II required only in annual years 1 and 2.
October 2000: data on Form II required only on the date of the year 1 examination.

COMMENTS: The strength of each key muscle is graded according to the following ASIA scale from the International Standards for Neurological Classification of Spinal Cord Injury, Revised 2002, pages 13-15.

- 0: total paralysis
- 1: palpable or visible contraction
- 2: active movement, full Range of Motion (ROM) with gravity eliminated
- 3: active movement, full ROM against gravity
- 4: active movement, full ROM against moderate resistance
- 5: (normal) active movement, full ROM against full resistance
- 5*: (normal) active movement, full ROM against sufficient resistance to be considered normal if identified inhibiting factors were not present
- NT: not testable

Minus grades are to be coded as the next lower grade. For example, a grade of 3- should be coded 2; 2- should be coded 1, and, 1- should be coded 0. Plus grades should be ignored. For example, a grade of 3+ should be coded 3, 2+ should be coded 2, etc.

A normal exam is a score of 5 for each key muscle, Subtotals on the left and right of 50, and, a total score of 100.

Key Muscles for Motor Level Classification - The required portion of the motor examination is completed through the testing of the following key muscles (bilaterally):

- C5: Elbow flexors (biceps, brachialis)
- C6: Wrist extensors (extensor carpi radialis longus and brevis)
- C7: Elbow extensors (triceps)
- C8: Finger flexors - (flexor digitorum profundus) to the middle finger
- T1: Small finger abductors (abductor digiti minimi)
- L2: Hip flexors (iliopsoas)
- L3: Knee extensors (quadriceps)
- L4: Ankle dorsiflexors (tibialis anterior)
- L5: Long toe extensors (extensor hallucis longus)
- S1: Ankle plantarflexors (gastrocnemius, soleus)

Each key muscle should be examined in a rostral-caudal sequence.

In addition to bilateral testing of these muscles, the external anal sphincter should be tested on the basis of contractions around the examiner’s finger and graded as being present or absent. If there is voluntary contraction of the anal sphincter then the patient is motor incomplete.

To be documented by the attending physician or the physician's designee. All the key muscles identified for the ASIA Motor Index Score must be tested to provide a valid left, right and total score.

FORM I and FORM II

VARIABLE NAME: ASIA Motor Index Score

COMMENTS: See page 99 for guidelines to administering the neurological exam when the patient is not fully testable. When the patient is an infant, the ASIA Motor Index score should be coded Unable to Test (888).

QC: See page 101 for coding instructions for patients with normal neurologic or minimal deficit status. See page 99 for coding instructions when the Neuro Exam is not done or when there is no admission to System inpatient rehab.

EXAMPLE 1: Each muscle score is known; and the Subtotal on the left side is 45, on the right side the Subtotal is 37, and the total score is 82.

Each muscle has a score from "0" to "5", and

<table>
<thead>
<tr>
<th></th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-total</td>
<td>45</td>
<td>37</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>82</td>
</tr>
</tbody>
</table>

EXAMPLE 2: The left side cannot be tested completely because the patient's hand is in a cast. All muscles on the right side were tested and the total score for the right side is 32.

Each muscle on the left side (that was not tested) is coded “8”; tested muscles on the left and each muscle on the right have a score from “0” to ”5”; and,

<table>
<thead>
<tr>
<th></th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-total</td>
<td>88</td>
<td>32</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>888</td>
</tr>
</tbody>
</table>

EXAMPLE 3: Only the total score (082) is known. All muscles are coded 9, and

<table>
<thead>
<tr>
<th></th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-total</td>
<td>99</td>
<td>99</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>82</td>
</tr>
</tbody>
</table>

EXAMPLE 4: The Left Subtotal is unknown (because 2 muscles are coded “9”) and, the right side was not testable (all muscles on the right are coded “8”).

<table>
<thead>
<tr>
<th></th>
<th>Left</th>
<th>Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub-total</td>
<td>99</td>
<td>88</td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>888</td>
</tr>
</tbody>
</table>
VARIABLES 134A, 134R, 134D and 247

FORM I and FORM II

VARIABLE NAME: Sensory Level

DESCRIPTION: The sensory level (which may differ by side of body) is the most caudal segment of the spinal cord with normal sensory function for pinprick and light touch on both sides of the body. Right and left levels are documented

1) at initial system examination (for day-1 admissions only) (V134AR, V134AL)

2) at admission to inpatient rehab (for day-1 admissions only) (V134RR, V134RL)

3) at discharge (for all patients) (V134DR, V134DL) and

4) on the date of the year 01 (or year 02, see page 16) examination (V247R, V247L).

CHARACTERS: 3 for each entry

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>C</td>
<td>Cervical (C1 - C8)</td>
<td></td>
</tr>
<tr>
<td>T</td>
<td>Thoracic (Dorsal, T1 - T12)</td>
<td></td>
</tr>
<tr>
<td>L</td>
<td>Lumbar (L1 - L5)</td>
<td></td>
</tr>
<tr>
<td>S</td>
<td>Sacral (S1 - S5)</td>
<td></td>
</tr>
<tr>
<td>X00</td>
<td>Normal neurologic</td>
<td>(see page 101)</td>
</tr>
<tr>
<td>Blank</td>
<td>(on Form I - for non day-1 admissions in V134A and V134R only)</td>
<td></td>
</tr>
<tr>
<td>Blank</td>
<td>(on Form II - only if V201 = “5”)</td>
<td></td>
</tr>
</tbody>
</table>

COMMENTS: If only the alphabetic part of the level is known, it is permissible to use code C, L, T, or S followed by numeric code "99". Use code X99 if the level is completely unknown, the exam was not done, there was no System admission or there was no admission to System inpatient rehab.

SOURCE: Refer to The International Standards for Neurological Classification of Spinal Cord Injury, Revised 2002, (pages 6 to 15) for complete information on the sensory examination and a listing of all key points. In addition to bilateral testing of the key points, the external anal sphincter should be graded as being present or absent. Any sensation felt in the anal area during this part of the exam signifies that the patient is sensory incomplete.

REVISIONS: Data in these variables are required of patients who are admitted to the system on or after August 15, 1993.

January 1998: Data on Form II are required only in annual years 1 and 2.

October 2000: data on Form II required only on the date of the year 1 examination and, data collection at rehab admission was added. Form I data are required for patients admitted to the System after 10/31/2000.

QC: See pages 99 and 101.
VARIABLES 135A, 135R, 135D and 248

FORM I and FORM II

VARIABLE NAME: Motor Level

DESCRIPTION: The motor level (the lowest normal motor segment - which may differ by side of body) is defined by the lowest key muscle that has a grade of at least 3, provided the key muscles represented by segments above that level are judged to be normal (5). Right and left levels are documented

1) at initial system examination (for day-1 admissions only) (V135AR, V135AL)
2) at admission to inpatient rehab (for day-1 admissions only) (V135RR, V135RL)
3) at discharge (for all patients) (V135DR, V135DL) and
4) on the date of the year 01 (or year 02, see page 16) examination (V248R, V248L).

The software can calculate this variable. Data collectors are encouraged to use this software function to calculate this variable. See page 109.

CHARACTERS: 3 for each entry

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>T</td>
<td>Thoracic (Dorsal, T1 - T12)</td>
<td></td>
</tr>
<tr>
<td>L</td>
<td>Lumbar (L1 - L5)</td>
<td></td>
</tr>
<tr>
<td>S</td>
<td>Sacral (S1 - S5)</td>
<td></td>
</tr>
<tr>
<td>X00</td>
<td>Normal (see page 101)</td>
<td></td>
</tr>
<tr>
<td>X99</td>
<td>Unknown, Not Done</td>
<td>V135RR and V135RL</td>
</tr>
</tbody>
</table>

Blank (on Form I - for non day-1 admissions in (V135A and V135R only)
Blank (on Form II - only if V201 = “5”)

COMMENTS: The examiner's judgment is relied upon to determine whether a muscle that tests as less than normal (5) may in fact be fully innervated. This may occur when full effort from the patient is inhibited by factors such as pain, positioning and hypertonicity or when weakness is judged to be due to disuse. If any of these or other factors impeded standardized muscle testing, the muscle should be graded as not testable. However, if these factors do not prevent the patient from performing a forceful contraction and the examiner’s best judgment is that the muscle would test normally (5) were it not for these factors, it may be graded as 5. For those myotomes that are not clinically testable by a manual muscle exam (i.e., C1 to C4, T2 to L1 and S2 to S5), the motor level is presumed to be the same as the sensory level.
FORM I and FORM II

VARIABLE NAME: Motor Level

COMMENTS: If only the alphabetic part of the level is known, it is permissible to use code C, L, T, or S followed by numeric code "99". Use code X99 if the level is completely unknown, the exam was not done or there was no admission to System inpatient rehab.

SOURCE: See pages 6 to 18 of the International Standards for Neurological Classification of Spinal Cord Injury, Revised 2002 for complete information on the motor examination and a listing of all key muscles.

SOFTWARE: The software uses the data entered in the Sensory Level and ASIA Motor Index Score to determine this variable. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.

Caution: If the software’s Motor Level differs from the Physician’s determination, always confer with the physician to verify the correct level since there are several circumstances that cannot be “programmed” into this software function. The user is allowed to overwrite the level that is calculated by the software.

REVISIONS: Data in these variables are required of patients who are admitted to the system on or after August 15, 1993.

January 1998: Data on Form II are now required only in annual years 1 and 2. “Normal” was changed from 4 or 5 to 5 only.

October 2000: data on Form II required only on the date of the year 1 examination and, data collection at rehab admission was added. Form I data are required for patients admitted to the System after 10/31/2000.

QC: See page 101 for coding instructions for patients with "normal neurologic" or “minimal deficit” status.

See page 99 for coding instructions when the Neuro Exam is not done or when there is no admission to System inpatient rehab.
VARIABLES 136A, 136R, 136D and 249

REGISTRY, FORM I and FORM II

VARIABLE NAME: Level of Preserved Neurologic Function
DESCRIPTION: The neurological level of preservation (injury) is the most caudal segment of the spinal cord with normal sensory and motor function on both sides of the body. Right and left levels are documented.
1) at initial system examination (for day-1 admissions only) (V136AR, V136AL)
2) at admission to inpatient rehab (for day-1 admissions only) (V136RR, V136RL)
3) at discharge (for all patients) (V136DR, V136DL) and
4) on the date of the year 01 (or year 02, see page 16) examination (V249R, V249L).

CHARACTERS: 3 for each entry

CODES:
C Cervical (C1 - C8)
T Thoracic (Dorsal, T1 - T12)
L Lumbar (L1 - L5)
S Sacral (S1 - S5)
X00 Normal neurologic (see page 101)

Blank (on Form I - for non day-1 admissions in V136A and V136R only)
Blank (on Form II - only if V201 = “5”)

COMMENTS: If only the alphabetic part of the level is known, it is permissible to use code C, L, T, or S followed by numeric code "99". Use code X99 if the level is completely unknown, the exam was not done or there was no admission to System inpatient rehab.

ELIGIBILITY: If this variable = “X00" (Normal), bilaterally, at system admission, the patient is ineligible for the National SCI Database.


REVISIONS: January 1998: Data on Form II are required only at annual years 1 and 2. October 2000: data on Form II required only on the date of the year 1 examination and, data collection at rehab admission was added. Form I data are required for patients admitted to the System after 10/31/2000.

QC: If this variable = “C", then variable Neurologic Impairment must be coded "4", "5", "6" or "9".
If this variable = “T", "L", or "S", then Neurologic Impairment must be coded "1", "2", "3" or "9".
The level in this variable must be equal to the motor level and/or the sensory level AND neither the motor level nor the sensory level can be higher than the level in this variable.
See pages 99 and 101.
VARIABLES 137 and 208
(Page 1 of 3)

FORM I and FORM II

VARIABLE NAME: Method of Bladder Management

DESCRIPTION: This variable defines the primary method of bladder management being used

1) **at discharge (for all patients)** (V137) and

2) **on the anniversary date being reported** (V208).

CHARACTERS: 1 for each entry

CODES:

00 **None**: The patient has a neurogenic bladder but does not follow any established program of bladder management. This includes diapers, pampers, etc.

01 **Indwelling urethral catheter**: Bladder is emptied by any type of catheter which is maintained through the urethra.

02 **Indwelling catheter after augmentation or continent diversion**: Bladder is emptied by any type of catheter which is maintained through the stoma.

**Catheter Free With External Collector**

The patient voids satisfactorily using any method of reflex stimulation or any form of extrinsic pressure. However, an external collector is utilized to control incontinence.

03 **Catheter free with external collector, no sphincterotomy**

04 **Catheter free with external collector and sphincterotomy**

05 **Catheter free with external collector, sphincterotomy unknown**

06 **Catheter free without external collector**: The patient voids satisfactorily using any method of reflex stimulation or any form of extrinsic pressure. An external collector is not required in that the patient has developed adequate continence.
VARIABLE NAME: Method of Bladder Management

CODES:

**Intermittent Catheterization Program (ICP):**

The patient empties the bladder by frequent insertion of a urethral catheter in an on-going program of chronic management. Intermittent catheterizations using this technique are done several times a day. This category does not pertain to infrequent periodic catheterizations for the purpose of checking urinary residual.

- **07 ICP only**
- **08 ICP with external collector**
- **09 ICP after augmentation or continent diversion**
- **10 ICP - external collector, augmentation or continent diversion unknown**
- **11 Conduit:** The bladder is drained by any of the surgical techniques using various portions of the intestinal tract that are not categorized as bladder augmentation.
- **12 Suprapubic Cystostomy:** The bladder is drained by any of the surgical techniques using a catheter through a suprapubic orifice.
- **13 Normal Micturition** (old code 4): The patient voids satisfactorily without using reflex stimulation or extrinsic bladder pressure voiding techniques. The bladder, however, may or may not have completely normal function.
- **14 Other:** All other bladder drainage techniques such as ureterocutaneostomy (pyelostomy), electro-stimulation, electro-magnetic ball valve, detrusor stimulation, sacral implants, conus implants, vesicostomy, ureteral catheterization, etc.
- **99 Unknown**

**Blank** *(on Form II - only if V201 = “5”)*
FORM I and FORM II

VARIABLE NAME: Method of Bladder Management

COMMENTS: No attempt should be made to document all the various types of bladder management that may have been used during the anniversary year being reported. Only the management used on the anniversary should be reported.

REVISIONS: In November 1995: New categories (codes 2, 3, 4, 7, 8 and 9) were added.; and, Bladder Management at System Admission was changed to Bladder Management at Admission to Inpatient Rehab.

January 1998 - Bladder Management at Admission to Inpatient Rehab was deleted.

CONVERSIONS: November 1995: For records in existence at this time -

Old admission data were moved into the new rehab variable if the patient’s initial system admission was directly to the system’s rehab unit.

Old discharge data were moved into the new discharge variable.

Additionally, the following code conversions were made if old data were moved into the new variables:

<table>
<thead>
<tr>
<th>Old Code</th>
<th>Current Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>01</td>
</tr>
<tr>
<td>2</td>
<td>05</td>
</tr>
<tr>
<td>3</td>
<td>06</td>
</tr>
<tr>
<td>4</td>
<td>13</td>
</tr>
<tr>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td>11</td>
</tr>
<tr>
<td>7</td>
<td>12</td>
</tr>
<tr>
<td>8</td>
<td>14</td>
</tr>
<tr>
<td>9</td>
<td>99</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Utilization of Mechanical Ventilation

DESCRIPTION: This variable documents any use of any type of mechanical ventilation used to sustain respiration

1) at admission to System inpatient rehab (V138R)
2) at discharge (V138D) and
3) at the anniversary of injury, year 1 only* (V242).

* If a year 02 Form II is substituted for the year 01 Form II (because the patient was still in the initial acute/rehab process past his first anniversary), this variable documents use of mechanical ventilation after injury to the end of the last treatment phase documented on Form I.

CHARACTERS: 1 for each entry

CODES:

0 No
1 Yes, limited, short-term use for pulmonary complications
2 Yes, ventilator-dependent or ventilator use requiring a weaning process
3 Yes, phrenic nerve stimulator
4 Yes, used mechanical ventilation, length of time and type unknown
   This is a CONVERSION CODE ONLY (code "1" prior to 10/86). Data collectors may NOT use this code. This information is provided for data analyses purposes only.
9 Unknown (V138R, V138D, V242);
Blank (on Form II - only if V201 = “5”)

COMMENTS: Limited, short-term use (code 1) is defined as respiratory support used as part of the medical treatment for other pulmonary complications.

Do NOT include emergency mouth-to-mouth or machine resuscitation; routine administration of oxygen; emergency "bagging"; periodic IPPB administration; or operative/post-operative ventilatory support used for less than 7 days. Do use code 1 for post-op support lasting more than 7 days.

Use code 2 for those who need partial or total respiratory support on a daily basis and (1) require a weaning process or (2) are vent-dependent. Do not use code 2 for vent support used for less than 7 days.

When the patient dies during the initial system admission period (i.e., the Date of Discharge = Date of Death) – vent use should reflect what’s being used at the time of death (even if the patient was never admitted to rehab). “At Discharge” can be at discharge from the Acute Care unit if there was no rehab admit.

REVISIONS: October 2000: data collection during System was deleted; data collection at System inpatient acute rehab admission was added (data are required for patients admitted to the System after 10/31/2000). Form II data collection required only for annual year 1. Data at discharge added to the Registry.

QC: See page 67.
VARIABLES 139A and 139R

FORM I

VARIABLE NAME: Locations and Grades of Pressure Ulcer(s)
DESCRIPTION: This variable documents pressure ulcers by grade and location.

1) **during acute (or subacute) medical/surgical care (for day-1 admissions only)** - V139A_1 through V139A_27

2) **during inpatient acute (or subacute) rehab for day-1 admissions only** - V139R_1 through V139R_27.

CHARACTERS: 1 for each entry

CODES:

0 **None** and redness that does **not** blanch to the touch

1 **Grade 1**: Limited to the superficial epidermal and dermal layers. Include redness that does not blanch to the touch and redness that requires intervention.

2 **Grade 2**: Involving the epidermal and dermal layers and extending into the adipose tissue.

3 **Grade 3**: Extending through superficial structures and adipose tissue down to and including muscle.

4 **Grade 4**: Destruction of all soft tissue structures and communication with bone or joint structures.

8 Pressure ulcer present - **grade unknown**

9 **Unknown** (V139A, V139R); **no System rehab admission** (V139R). See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

**Blank** *(For non day-1 admissions only)*

FORM I

VARIABLE NAME: Locations and Grades of Pressure Ulcer(s)

COMMENTS:
- Occiput: includes back of head
- Scapula: includes shoulder
- Ribs: includes chest, thorax
- Sacral: includes sacroiliac, coccygeal, tail bone
- Ischium: includes gluteal, intergluteal, buttocks areas
- Trochanter: includes hip
- Knee: includes pre-tibial, tibial and fibular condyles, shin and popliteal areas
- Heel: includes calcaneus
- Foot: includes any part of the foot other than heel
VARIABLE NAME: Locations and Grades of Pressure Ulcer(s)

COMMENTS: Place the grade of the pressure ulcer in the appropriate location box on the form. Place a code in all location boxes.

The purpose of this variable is primary prevention and quality assurance. Therefore, each ulcer should be documented once, at onset, and the worst grade should be recorded. The following reporting guidelines are to be used on all patients who are admitted to the system on or after December 1, 1995:

> Any ulcer developed "During Acute" that worsens or recurs (i.e., heals and subsequently breaks down again in the same location) "During Rehab" should NOT be documented again "During Rehab". Record the worst grade of that ulcer in "During Acute".

If there is an ulcer at the time of first System admission, do not count this ulcer unless it worsens during System. When there are multiple ulcers in the same location, document the grade of the worst ulcer.

If a pressure ulcer does not fit into any of the classifications listed on the following page, document it as "Location unclassified". If the patient has more than one "unclassified" ulcer on the same side, code only the most severe ulcer.

When a patient is not admitted to the System’s acute (or subacute) medical unit (and the patient is a day-1 admit), code V139A_1 through V139A_27 all 9’s.

When a patient is not admitted to the System’s inpatient acute inpatient (or subacute) inpatient rehab unit (and the patient is a day-1 admit), code V139R_1 through V139R_27 all 9’s.
FORM 1

VARIABLE NAME: Locations and Grades of Pressure Ulcer(s)

REVISIONS:

Form I:

November 1995: the reporting of Form I Pressure Ulcers that worsened during the next data collection period was revised. Such ulcers were not counted again if they worsened during the next data collection period. Also, Pressure Ulcers Developing During System (old variable 133D) was separated into Ulcers Developed During Acute Care (or Present at Rehab Admit) and Ulcers Developing During Rehab. The revised reporting guidelines have been used on all patients admitted to the system on or after December 1, 1995.

October 2000: data collection at the time of admission to inpatient rehab was deleted; data collection during rehab changed from all patients to day-1 admissions only.

Form II:

1986: this variable was changed from Locations and Grades of Pressure Ulcers During the Follow-up Year to Locations and Grades of Pressure Ulcers Present at the Time of the Annual Exam.

January 1998: Locations and Grades of Pressure Ulcer(s) Present at the Time of the Annual Examination was deleted. It was replaced by the new variable, Grade of Worst Pressure Ulcer Present at the Time of the Annual Examination.

CONVERSIONS: November 1995 - For records in existence at this time, all data were retained from old variables #133 (Locations and Grades of Pressure Sores) and 138G (Number of Pressure Sores). During data entry the user is not allowed to modify these fields - in these "old records". In order to change these fields the user must delete the entire record and enter a new Form I, using the current reporting guidelines. These “old records” have Indates prior to 19960201.

QC: If variable 139A = all “0”s, then variable 140A must = “00”. If variable 139A = all “9”s, then variable 140A must = “99”.

If variable 139R = all “0”s, then variable 140AR must = “00”. If variable 139R = all “9”s, then variable 140R must = “99”.

See pages 65 and 67.
**FORM 1**

**VARIABLE NAME:** Locations and Grades of Pressure Ulcer

**EXAMPLE:** The patient was admitted to the system on the day of injury. At the time he entered the system's inpatient rehab unit he had a grade 2 ulcer on the left elbow and a grade 1 ulcer on the right knee. The ulcer on the left elbow worsened to a grade 3 during inpatient rehab and the ulcer on the right knee resolved during inpatient rehab. He did not develop any new ulcers during inpatient rehab.

<table>
<thead>
<tr>
<th>Location</th>
<th>During Acute</th>
<th>During Inpatient Rehab</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>L  C   R</td>
<td>L      C   R</td>
</tr>
<tr>
<td>Occiput</td>
<td>0 0 0</td>
<td>0</td>
</tr>
<tr>
<td>Scapula</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Elbow</td>
<td>3 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Ribs</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Spinous process</td>
<td>0 0 0</td>
<td>0</td>
</tr>
<tr>
<td>Iliac crest</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Sacral</td>
<td>0 0 0</td>
<td>0</td>
</tr>
<tr>
<td>Ischium</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Trochanteric</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Genital</td>
<td>0 0 0</td>
<td>0</td>
</tr>
<tr>
<td>Knee</td>
<td>0 1 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Malleolar</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Heel</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Foot</td>
<td>0 0 0</td>
<td>0 0</td>
</tr>
<tr>
<td>Location unclass</td>
<td>0 0 0</td>
<td>0 0 0</td>
</tr>
</tbody>
</table>
FORM I and FORM II

VARIABLE NAME: Number of Pressure Ulcers

DESCRIPTION: This variable documents the number of pressure ulcers

1) during acute (or subacute) medical/surgical (for day-1 admissions only) - V140A
2) during acute (or subacute) inpatient rehab (for day-1 admissions only) - V140R
3) present upon visual inspection on the date of the annual examination (V213)

CHARACTERS: 2 for each entry

CODES:
00 No ulcers
00-86 Valid range
87 87 or more ulcers
88 Yes ulcers present, number unknown
99 Unknown (V140A, V140R, V213);
no System rehab admission (V140R) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.
Blank (on Form I - for non day-1 admissions only)
Blank (on Form II - only if V201 = “5”)

COMMENTS: At the time of first System admission: If there is an ulcer, do not count this ulcer unless it worsens during System.

After system admission: Each ulcer is to be counted only once (at onset). Therefore, an ulcer that developed "During Acute Care” is counted “during Acute”. If that same ulcer worsens or recurs (i.e., heals and subsequently breaks down again in the same location) "During Rehab" do NOT count that ulcer again "During Rehab". Record the worst grade of that ulcer in "During Acute".

When there are multiple ulcers in the same location count all ulcers at the same location.

During the annual exam (V212): document the grade of the worst pressure ulcer present at the time of the annual exam.

✓ If the patient was never scheduled for an Annual Exam but came into the clinic due to pressure ulcer(s): code the Annual Exam as being done and document the grade of the worst ulcer.

✓ If the patient had an Annual Exam (with no ulcers) then came back for a visit (due to ulcers), code the Annual Exam as being done and sore(s) = None (since they were not present at the time of the Annual Exam).

QC: See pages 65, 67 and 118.

REVISIONS: October 2000: data collection at the time of admission to inpatient rehab was deleted; data collection during rehab changed from all patients to day-1 admissions only.
FORM 1

VARIABLE NAME: Grade of the Worst Pressure Ulcer at Admission to System Inpatient Rehab

DESCRIPTION: This variable documents the grade of the worst sore present at the time of first admission to the System’s inpatient rehab unit.

CHARACTERS: 1

CODES:

0 No pressure ulcers present at the time of rehab admission
1 Grade 1
2 Grade 2
3 Grade 3
4 Grade 4
8 Pressure ulcer present, grade unknown*
9 Unknown or no System rehab admission See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

* When there are multiple ulcers AND at least 1 ulcer is “8” (grade unknown):

  if one of the ulcers is a grade “4”, code this variable “4”
  otherwise, code this variable “8”.

COMMENTS: Document the worst ulcer present on the date specified in Variable 108 (Date of First System Inpatient Rehab Admission).

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

QC: See page 67.
FORM I and FORM II

VARIABLE NAME: Medical Complications
DESCRIPTION: This variable documents a select group of medical complications (identified and/or treated) during System Acute (or Subacute) Medical/Surgical care; during System Inpatient Acute (or Subacute) Rehab; and, during Follow-up.

FORM I (V142):
For the day-1 admissions only
document these complications with onset occurring during System acute (and subacute) medical/surgical care and with onset occurring during System acute (and subacute) inpatient rehab.

During System Acute Medical/Surgical Care is the interval between admission to and discharge from the System's acute medical/surgical care unit. This period includes time in the System’s subacute medical/surgical care unit.

During Rehabilitation is the period of time between the admission to and discharge from the System's inpatient acute rehabilitation unit. This period includes time in the System’s inpatient subacute rehab unit and any transfers back to the acute (or subacute) medical unit after admission to rehab.

- If a complication developed during acute care AND was still present at rehab admission: .........................code Yes During Acute
- If a complication developed during acute care AND resolved prior to rehab admission and did NOT develop again during rehab: .................................................................code Yes During Acute AND .................................................................code No During Rehab
- If a complication developed during acute care AND resolved prior to rehab admission AND developed again during rehab: .................................................................code Yes During Acute AND .................................................................code Yes During Rehab
- If a complication developed during rehab only .................................................................code No During Acute AND .................................................................code Yes During Rehab
- If a complication developed during rehab only and the patient was transferred from rehab back to the acute unit for treatment .................................................................code No During Acute AND .................................................................code Yes During Rehab

FORM II (V221):
For those items to be documented "during the anniversary year being reported":
- use the "Yes" code if the complication occurred or diagnosis was made anytime between the beginning and the end of the anniversary year for which the Form II is being completed.

If a particular complication occurred during one anniversary year and was still present during subsequent anniversary year(s), use the "Yes" code for each year in which the complication existed. For the year 1 Form II, the interval is after discharge to the first anniversary.

COMMENTS: For those complications requiring documentation of the number of episodes, count each episode only once.
FORM I and FORM II

VARIABLE NAME: Medical Complications - During System Acute (or Subacute) Medical/Surgical Care; During System Inpatient Acute (or Subacute) Rehab; and, During Follow-up

The following is a list of all items to be reported:

<table>
<thead>
<tr>
<th>Form I</th>
<th>Form II</th>
<th>Variable Name</th>
<th>Syllabus Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>142A</td>
<td>243</td>
<td>Post-operative Wound Infection at the Site of the Spinal Surgery</td>
<td>124</td>
</tr>
<tr>
<td>142B</td>
<td></td>
<td>Number of Episodes of Pneumonia</td>
<td>125</td>
</tr>
<tr>
<td>142C</td>
<td>221A</td>
<td>Pulmonary Embolism</td>
<td>126</td>
</tr>
<tr>
<td>142D</td>
<td>221B</td>
<td>Thrombophlebitis, Deep Vein Thrombosis</td>
<td>127</td>
</tr>
<tr>
<td>221C</td>
<td></td>
<td>Pneumonia</td>
<td>129</td>
</tr>
<tr>
<td>221D</td>
<td></td>
<td>Presence of Calculus in the Kidney and/or Ureter</td>
<td>130</td>
</tr>
</tbody>
</table>

- If the patient IS NOT a day-1 admission to the System: leave all the Form I complication variables (V142A to V142D) blank.
- If the patient IS a day-1 admission to the System but is not admitted to the System’s Acute (or Subacute) Medical/Surgical unit: code all the Form I (“during acute”) complication variables unknown.
- If the patient IS a day-1 admission to the System but is not admitted to the System’s Acute (or Subacute) Inpatient Rehab unit: code all the Form I (“during rehab”) complication variables unknown.
- Number of Episodes of Pneumonia are collected on Form I only. The Form II Pneumonia variable does not count number of episodes.
- Presence of Calculus in the Kidney and/or Ureter is collected on Form II only.
- On Form II, Post-operative Wound Infection at the Site of the Spinal Surgery is collected only during annual year 1 (or 2).
- If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.

QC: If the patient is not admitted to the System’s acute unit - see page 65. If the patient is not admitted to the System’s inpatient acute rehab unit - see page 67.
VARIABLE NAME: Post-operative Wound Infection at the Site of the Spinal Surgery

DESCRIPTION: Infection at the site of spinal surgery (excluding donor site). Document the infection as occurring in the time period in which the surgery was performed. For variable 243, document infections occurring at the site of spinal surgery that was performed post-discharge to the first anniversary of injury.

Document infections developing at sites of spinal surgery:

1) **performed during acute medical/surgical care (for day-1 admissions only)** - V142AA; and

2) **performed during inpatient rehab (for day-1 admissions only)** - V142RA

3) **performed post-discharge to the first (or second*) anniversary of injury** (V243).

* If a year 02 Form II is substituted for the year 01 Form II (because the patient was still in the initial hospitalization process past his first anniversary), this variable documents post-op wound infection occurring post-discharge to the end of the last treatment phase documented on Form I.

CHARACTERS: 1 for each entry

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>8</td>
<td>Not applicable (no spinal surgery)</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, (V142AA, V142RA, V243); no System rehab admission (V142RA) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.</td>
</tr>
</tbody>
</table>

Blank (on Form I - for non day-1 admissions only)
Blank (on Form II - only if V201 = “5”)

COMMENTS: If an infection develops During Rehab at an Acute surgery site record the infection as occurring “During Acute”.

During follow-up, this variable is collected only on the year 01 Form II.

REVISIONS: January, 1998: Form II data were required only in annual years 1 and 2.
October 2000: Form II data are required only in annual year 1.
October 2000: Data collection during rehab changed from all patients to only day-1 admissions.

QC: See pages 65 and 67.

EXAMPLE: The patient had spinal surgery while in the System’s acute unit. He developed post-op wound infection at that surgery site while he was in the System’s rehab unit.

<table>
<thead>
<tr>
<th>Variable</th>
<th>During Acute</th>
<th>During Rehab</th>
</tr>
</thead>
<tbody>
<tr>
<td>142A</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

142A. Post-operative Wound Infection at the Site of the Spinal Surgery................. 1 0
FORM I

VARIABLE NAME: Number of Episodes of Pneumonia

DESCRIPTION: Pneumonia is a state of lung tissue inflammation of infectious etiology with radiographic demonstration of parenchymal disease.

Document pneumonia:

1) with onset during acute (or subacute) medical/surgical care (for day-1 admissions only) - V142AB;

2) with onset during inpatient (or subacute) rehab (for day-1 admissions only) - V142RB.

CHARACTERS: 2 for each entry

CODES:

00 None
00-87 Valid range
88 Yes, number unknown
99 Unknown (V142AB, V142RB);

no System rehab admission (V142RB) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (on Form I - for non day-1 admissions only)
Blank (on Form II - only if V201 = “5”)

QC: See pages 65 and 67.

REVISIONS: November 1995: Separate atelectasis and pneumonia variables were combined.

January 1998: Number of Episodes is no longer documented on Form II. Variable 221 was revised and may be found on page 103.

October 2000: Data collection during rehab changed from all patients to only day-1 admissions. Changed from episodes of Atelectasis and/or Pneumonia to Episodes of Pneumonia.
VARIABLE NAME: Pulmonary Embolism (PE)

DESCRIPTION: Condition resulting when a pulmonary artery becomes acutely obstructed by a clot formed upstream from the pulmonary arterial vascular tree. Document clinical impression or confirmed clinical diagnoses of pulmonary embolism followed by definitive anticoagulation therapy:

1) with onset during acute (or subacute) medical/surgical care (for day-1 admissions only) - V142AC;

2) with onset during inpatient (or subacute) rehab (for day-1 admissions only) -V142RC; and

3) present during the anniversary year being reported - V221A.

CHARACTERS: 1 for each entry

CODES:

0 No pulmonary embolism
1 Yes, confirmed by ventilation-perfusion lung scan
2 Yes, confirmed by pulmonary angiogram or helical CT scan
3 Yes, confirmed by ventilation-perfusion lung scan and pulmonary angiogram or helical CT scan
4 Yes, confirmed by other than the above techniques
5 Yes, but not confirmed by any specific diagnostic technique or procedure
6 Yes, confirmed by an unknown diagnostic technique or procedure
9 Unknown (V142AC, V142RC, V221A);

no System rehab admission (V142RC) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (on Form I - for non day-1 admissions only)
Blank (on Form II - only if V201 = “5”)

QC: See pages 65 and 67.

REVISIONS: November 1995: Code "6" was added to this variable.
January 1998: Data required only in annual years 1 and 2 on Form II.
October 2000: Data collection during rehab changed from all patients to only day-1 admissions. Form II data collection changed from years 1 and 2 only to year 1 and every 5th anniversary.
VARIABLE NAME: Thrombophlebitis, Deep Vein Thrombosis

DESCRIPTION: Deep-vein thrombosis (DVT) of the lower extremity is an occlusion of the venous system of the lower extremity. Positive DVT with definitive therapy instituted.

Document DVT:
1) with onset during acute (or subacute) medical/surgical care (for day-1 admissions only) - V142AD;
2) with onset during inpatient (or subacute) rehab (for day-1 admissions only) - V142RD; and
3) present during the anniversary year being reported - V221B.

CHARACTERS: 1 for each entry

CODES:
0 No thrombophlebitis, DVT
1 Filter placed in inferior vena cava
2 DVT therapy instituted without confirmation of actual DVT by test result
3 DVT confirmed by test other than those listed here
4 DVT confirmed by impedance plethysmography (IPG)
5 DVT confirmed by I-125 labeled fibrinogen uptake (I-125)
6 DVT confirmed by duplex/doppler, ultrasound
7 DVT confirmed by venography
9 Unknown (V142AD, V142RD, V221B); 
no System rehab admission (V142RD) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.
Blank (on Form I - for non day-1 admissions only)
Blank (on Form II - only if V201 = “5”)

COMMENTS: Code the highest number that applies. The intent is to document DVT occurrence, not prophylaxis (except for the filter placement). If anticoagulant therapy is instituted after a DVT is suspected but no confirmation is obtained, then code 2. For prophylaxis only, code 0.

QC: See pages 65 and 67.

EXAMPLE: DVT therapy was instituted (without test results) on the 7th day the patient was in the System’s acute care unit. On day 10 in the acute care unit DVT was confirmed by venography. DVT was confirmed by ultrasound at follow-up years 1 and 5.

<table>
<thead>
<tr>
<th>VARIABLE</th>
<th>During Acute</th>
<th>During Rehab</th>
</tr>
</thead>
<tbody>
<tr>
<td>142D. Thrombophlebitis, Deep Vein Thrombosis</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Year 01</td>
<td>Year 05</td>
<td></td>
</tr>
<tr>
<td>221B. DVT during follow-up</td>
<td>6</td>
<td>6</td>
</tr>
</tbody>
</table>
FORM I and FORM II

VARIABLE NAME: Thrombophlebitis, Deep Vein Thrombosis

REVISIONS:

August 1993: Code 7 (Filter placed in inferior vena cava) was added.

January 1998: Data required only in annual years 1 and 2 on Form II.

October 2000: Data collection during rehab changed from all patients to only day-1 admissions. Form II data collection changed from years 1 and 2 only to year 1 and every 5th anniversary. The coding positions were reduced from 5 to 1 on Form I and Form II.

June 2001: codes were changed since Filter was moved to the lowest position in the coding hierarchy. The following chart lists the old (March 2001) and current (June 2001) codes.

<table>
<thead>
<tr>
<th>Codes</th>
<th>March 2001</th>
<th>Current</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>0</td>
<td>No thrombophlebitis, DVT</td>
</tr>
<tr>
<td>7</td>
<td>1</td>
<td>Filter placed in inferior vena cava</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>DVT therapy instituted without confirmation of actual DVT by test result</td>
</tr>
<tr>
<td>2</td>
<td>3</td>
<td>DVT confirmed by test other than those listed here</td>
</tr>
<tr>
<td>3</td>
<td>4</td>
<td>DVT confirmed by impedance plethysmography (IPG)</td>
</tr>
<tr>
<td>4</td>
<td>5</td>
<td>DVT confirmed by I-125 labeled fibrinogen uptake (I-125)</td>
</tr>
<tr>
<td>5</td>
<td>6</td>
<td>DVT confirmed by duplex/doppler, ultrasound</td>
</tr>
<tr>
<td>6</td>
<td>7</td>
<td>DVT confirmed by venography</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Pneumonia

DESCRIPTION: Pneumonia is a state of lung tissue inflammation of infectious etiology with radiographic demonstration of parenchymal disease. Copies of the x-rays results are not required.

Document pneumonia:

occurring during the anniversary year being reported.

CHARACTERS: 1

CODES:

0 No
1 Yes
9 Unknown

Blank (on Form II - only if V201 = “5”)

REVISIONS: November 1995: Separate atelectasis and pneumonia variables were combined.

January 1998: Number of episodes no longer counted in this Form II variable.

October 2000: Changed from Atelectasis and/or Pneumonia to Pneumonia only.

CONVERSION: The following conversion was made to records in existence at the time this variable was revised in January 1998:

<table>
<thead>
<tr>
<th>Old Code</th>
<th>Current Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>0</td>
</tr>
<tr>
<td>01-88</td>
<td>1</td>
</tr>
<tr>
<td>99</td>
<td>9</td>
</tr>
</tbody>
</table>
FORM II

VARIABLE NAME: Presence of Calculus in the Kidney and/or Ureter

DESCRIPTION: Abnormal concretion in the kidney and/or ureter.

Document calculus:

present during the anniversary year being reported.

CHARACTERS: 1

CODES:

0 No calculus
1 Yes, right kidney or ureter
2 Yes, left kidney or ureter
3 Yes, bilateral
4 Yes, unspecified location in the kidney or ureter
9 Unknown

Blank (on Form II - only if V201 = “5”)

COMMENTS: If a stone of unknown origin is passed spontaneously before x-ray evidence of its location is obtained, code this variable "9" (Unknown). Code the calculus even if it was removed during the anniversary year being reported.

REVISIONS: 1993: Separate Calculus of the Kidney and Calculus of the Ureter variables were combined into this single variable.

October 2000: this variable was deleted on Form I.
FORM I and FORM II

VARIABLE NAME: Operative Procedures

DESCRIPTION: This variable documents a select group of operative procedures performed During System and During Follow-up.

FORM I (V143):

For the day-1 admissions only
document these procedures performed during System acute medical/surgical care and performed during System acute inpatient rehab.

During System Acute Medical Care is the interval between admission to and discharge from the System's acute medical care unit. This period includes time in the System’s subacute medical care unit.

During Rehabilitation is the period of time between the admission to and discharge from the System's inpatient acute rehabilitation unit. This period includes time in the System’s inpatient subacute rehab unit and any transfers back to the acute (or subacute) medical unit after admission to rehab. After the patient is admitted to rehab, all operative procedures are recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

However, in the Treatment Phase variables (V148 to V155), return to the acute (or subacute) medical/surgical unit (after admission to rehab) is reported as a separate treatment phase. Then, subsequent return to the rehab unit (following surgery in acute) is another separate treatment phase.

FORM II (V222):

Use the "Yes" code if the operative procedure was performed anytime between the beginning and the end of the anniversary year for which the Form II is being completed.

If the operative procedure was performed during one anniversary year and repeated during a subsequent anniversary year, use the "Yes" code for each year in which the procedure was performed.

If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.
VARIABLE NAME: Operative Procedures

The following is a list of all procedures to be reported:

<table>
<thead>
<tr>
<th>Form I</th>
<th>Form II</th>
<th>Variable Name</th>
<th>Syllabus Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>143A</td>
<td></td>
<td>Laminectomy</td>
<td>133</td>
</tr>
<tr>
<td>143B</td>
<td></td>
<td>Spinal Decompression</td>
<td>134</td>
</tr>
<tr>
<td>143C</td>
<td></td>
<td>Spinal Fusion</td>
<td>135</td>
</tr>
<tr>
<td>143D</td>
<td></td>
<td>Internal Fixation of the Spine</td>
<td>136</td>
</tr>
<tr>
<td>143E</td>
<td></td>
<td>Surgical Repair of Failed Spinal Fusion</td>
<td>137</td>
</tr>
<tr>
<td>143F</td>
<td></td>
<td>Surgical Repair, Correction, or Removal of Internal Fixation Device</td>
<td>138</td>
</tr>
<tr>
<td>143G</td>
<td></td>
<td>Number of Operating Room Visits for Spinal Surgeries</td>
<td>139</td>
</tr>
<tr>
<td>143H</td>
<td></td>
<td>Laparotomy</td>
<td>140</td>
</tr>
<tr>
<td>143I</td>
<td></td>
<td>Traction</td>
<td>141</td>
</tr>
<tr>
<td>143J</td>
<td></td>
<td>Halo Vest, Halo Brace or Other Orthosis for the Neck</td>
<td>142</td>
</tr>
<tr>
<td>143K</td>
<td>222A</td>
<td>Closure of Decubitus Ulcer(s)</td>
<td>143</td>
</tr>
<tr>
<td></td>
<td>222B</td>
<td>Calculus Removal</td>
<td>144</td>
</tr>
<tr>
<td></td>
<td>222C</td>
<td>Bladder Neck Resection</td>
<td>145</td>
</tr>
<tr>
<td></td>
<td>222D</td>
<td>External Sphincterotomy or Other Sphincter Opening Procedures</td>
<td>146</td>
</tr>
</tbody>
</table>

If the patient IS NOT a day-1 admission to the System:
leave all the Form I operative procedure variables (V143A to V143K) blank.

If the patient IS a day-1 admission to the System but is not admitted to the System’s Acute (or Subacute) Medical/Surgical unit:
code all the Form I (“during acute”) operative procedure variables unknown.

If the patient IS a day-1 admission to the System but is not admitted to the System’s Acute (or Subacute) Inpatient Rehab unit:
code all the Form I (“during rehab”) operative procedure variables unknown. See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

QC: If the patient is not admitted to the System’s acute unit, use the “Unknown” code in all Operative Procedures “During Acute”.
If the patient is not admitted to the System’s inpatient acute rehab unit, use the “Unknown” code in all Operative Procedures “During Inpatient Rehab”.

NSCISC: 03/2005
VARIABLE NAME: Laminectomy Performed During System

DESCRIPTION: Removal of normal intact lamina or foreign body at the site of spinal cord damage. Excision of the posterior arch of the vertebra.

Document laminectomy performed

1) **during acute (or subacute) medical/surgical care (for day-1 admissions only)** – V143AA and

2) **during inpatient acute (or subacute) rehab (for day-1 admissions only)** – V143RA

CHARACTERS: 1 for each entry

CODES:

- 0 No
- 1 Yes
- 9 Unknown (V143AA, V143RA);

**no System rehab admission (V143RA)** See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

**Blank (on Form I - for non day-1 admissions only)**

COMMENTS: Removal of any bone or disk fragment from the spinal canal should be coded in spinal decompression.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

REVISIONS: November 1995: Dates were added to this variable.

October 2000: Dates were removed from this variable.
VARIABLE NAME: Spinal Decompression Performed During System

DESCRIPTION: The removal of bone or disk fragments or foreign bodies (such as bullet fragments) from the spinal canal. Includes discectomy.

It is possible for a patient with posterior bone or disk fragments in the canal to have a laminectomy and a posterior spinal decompression.

Document spinal decompressions performed

1) **during acute (or subacute) medical/surgical care** (for day-1 admissions only) – V143AB and

2) **during inpatient acute (or subacute) rehab** (for day-1 admissions only) – V143RB

CHARACTERS: 1 for each entry (up to 3 entries for V143AB and V143RB)

CODES:

- **0** No decompression surgery *(Valid in coding position #1 only)*
- **1** Yes, anterior approach
- **2** Yes, posterior approach
- **3** Yes, both approaches, simultaneously
- **4** Yes, posterolateral
- **5** Yes decompression, approach unknown
- **9** Unknown *(V143AB, V143RB)*;

**Blank** *(for non day-1 admissions only)*

See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

COMMENTS: Document up to 3 procedures performed during acute and up to 3 procedures performed during rehab. When this procedure is performed more than once using the same approach, code each procedure separately only if they occur during separate OR visits.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

REVISIONS:

- November 1995: Dates were added to this variable.
- October 2000: Dates were removed from this variable.

SOFTWARE: Codes 0 and 9 are allowed only in coding position #1. When one of these codes is entered in coding position #1 the software advances the user to the next variable.
FORM I

VARIABLE NAME:  Spinal Fusion Performed During System

DESCRIPTION:  The addition of a bone graft to the vertebrae for the purpose of achieving intervertebral fusion or stability.

Document spinal fusions performed

1)  during acute (or subacute) medical/surgical care (for day-1 admissions only) – V143AC

2)  during inpatient acute (or subacute) rehab (for day-1 admissions only) – V143RC

CHARACTERS:  1 for each entry (up to 3 entries for V143AC and V143RC)

CODES: 

0  No spinal fusion (Valid in coding position #1 only)
1  Yes, anterior approach
2  Yes, posterior approach
3  Yes, both approaches, simultaneously
4  Yes, posterolateral
5  Yes spinal fusion, approach unknown
9  Unknown (V143AC, V143RC);

no System rehab admission (V143RC) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (for non day-1 admissions only)

COMMENT: Document up to 3 procedures performed during acute and up to 3 procedures performed during rehab. When this procedure is performed more than once USING THE SAME APPROACH, code each procedure separately only if they occur during separate OR visits.

Document only post-SCI fusions.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

If the patient did not have spinal fusion during acute, code variable 143AC “0” and code variable 143AE “8”.

REVISIONS: November 1995: Dates and code “4” for posterolateral were added to this variable.

October 2000: Dates were removed from this variable.

SOFTWARE: Codes 0 and 9 are allowed only in coding position #1. When one of these codes is entered in coding position #1 the software advances the user to the next variable.
VARIABLE NAME: Internal Fixation of the Spine Performed During System

DESCRIPTION: The fixation may be attached to the spine by one or more methods (rods, plates, wires, etc.) - individually or in combination - to provide internal surgical stabilization of the vertebral column.

Document internal fixations performed

1) **during acute (or subacute) medical/surgical care (for day-1 admissions only)** – V143AD and

2) **during inpatient acute (or subacute) rehab (for day-1 admissions only)** – V143RD

CHARACTERS: 1 for each entry (up to 3 entries for V143AD and V143RD)

CODES:

- **0** No internal fixation *(Valid in coding position #1 only)*
- **1** Yes, anterior approach
- **2** Yes, posterior approach
- **3** Yes, both approaches, simultaneously
- **4** Yes, posterolateral
- **5** Yes internal fixation, approach unknown
- **9** Unknown *(V143AD, V143RD); no System rehab admission (V143RD)*

**Blank** *(for non day-1 admissions only)*

COMMENTS: Document up to 3 procedures performed during acute and up to 3 procedures performed during rehab. When this procedure is performed **more than once USING THE SAME APPROACH**, code each procedure separately only if they occur during **separate** OR visits.

Document only post-SCI fixations.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

If variable 143AD_1 = “0” then, variable 143AF_1 must = “8”.

REVISIONS: November 1995: Dates and the code “4” for posterolateral were added; reduced from 5 to 3 coding positions.

October 2000: Dates were removed from this variable.

SOFTWARE: Codes 0 and 9 are allowed only in coding position #1. When one of these codes is entered in coding position #1 the software advances the user to the next variable.
FORM I

VARIABLE NAME: Surgical Repair of Failed Spinal Fusion Performed During System

DESCRIPTION: Surgical repair of displaced graft, malalignment or pseudoarthrosis resulting from spinal fusion performed during the initial hospitalization period.

Document repairs performed

1) **during acute** (or subacute) medical/surgical care *(for day-1 admissions only)* - V143AE_1 through V143AE_3;

2) **during inpatient acute** (or subacute) rehab *(for day-1 admissions only)* - V143RE_1 through V143RE_3.

CHARACTERS: 1 for each entry (up to 3 entries for V143AE and V143RE)

CODES:

0  **Surgical repair of spinal fusion not necessary** *(Valid in coding position #1 only)*

1  Yes, anterior repair of failed posterior spinal fusion

2  Yes, anterior repair of failed anterior spinal fusion

3  Yes, posterior repair of failed anterior spinal fusion

4  Yes, posterior repair of failed posterior spinal fusion

5  Yes, surgical repair - unknown approach and/or unknown failed fusion site

8  **Not applicable, no fusion** *(Valid in coding position #1 only)*

9  Unknown *(V143AE, V143RE)*;

**Blank** *(for non day-1 admissions only)*

**no System rehab admission** *(V143RE)* See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

COMMENTS: Document only repairs of post-SCI fusions. Document up to 3 procedures performed during acute and up to 3 procedures performed during rehab.

When this procedure is performed **more than once USING THE SAME APPROACH**, code each procedure separately only if they occur during separate OR visits.

If the patient did not have any spinal fusion During System, use code “8” in both V143AE and V143RE.

If repair of failed spinal fusion was not necessary, use code "0" (Surgical repair of spinal fusion not necessary).

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

If variable 143AC_1 = “0” then, variable 143AE_1 must = “8”.

SOFTWARE: Codes 0, 8 and 9 are allowed only in coding position #1. When one of these codes is entered in coding position #1 the software advances the user to the next variable.
VARIABLE NAME: Surgical Repair, Correction, or Removal of Internal Fixation Device During System

DESCRIPTION: Any surgical procedure to repair, correct or remove an internal fixation device (of the spine).

Document repairs performed

1) **during acute (or subacute) medical/surgical care (for day-1 admissions only)** - V143AF_1 through V143AF_3;

2) **during inpatient acute (or subacute) rehab** (for day-1 admissions only) - V143RF_1 through V143RF_3.

CHARACTERS: 1 for each entry (up to 3 entries for V143AF and V143RF)

CODES:

0  No repair, correction, nor removal of internal fixation device *(Valid in coding position #1 only)*

1  Repair for hardware breakage or dislodgement from bone

2  Removal for any reason

8  Not applicable, no internal fixation *(Valid in coding position #1 only)*

9  Unknown; *(V143AF, V143RF)*

Blank *(for non day-1 admissions only)*

**no System rehab admission** *(V143RF)* See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

COMMENTS: Document only post-SCI fixations. Document up to 3 procedures performed during acute and up to 3 procedures performed during rehab.

If the patient did not have an internal fixation device During System, use code “8” in both V143AF and V143RF.

If surgical repair, correction, or removal of an internal fixation device was not necessary, use code "0" (No repair, correction nor removal of internal fixation device).

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

If variable 143AD_1 = “0” then, variable 143AF_1 must = “8”.

SOFTWARE: Codes 0, 8 and 9 are allowed only in coding position #1. When one of these codes is entered in coding position #1 the software advances the user to the next variable.
VARIABLE NAME: Number of Operating Room Visits for Spinal Surgeries Performed During System

DESCRIPTION: Document the total number of OR visits for surgery performed on the vertebral column or its contents:

1) during acute (or subacute) medical/surgical care (for day-1 admissions only) - V143AG;

2) during inpatient acute (or subacute) rehab (for day-1 admissions only) - V143RG.

CHARACTERS: 2 for each entry

CODES:

00 No spinal surgery procedures
00-87 Valid range
88 Spinal surgery performed but number of OR visits unknown
99 Unknown (V143AG, V143RG);

no System rehab admission (V143RG) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (for non day-1 admissions only)

COMMENTS: Document the total number of times the patient was "on the table" for spinal surgery.

Include all procedures documented in variables 143A (Laminectomy), 143B Spinal Decompression, 143C (Spinal Fusion), 143D (Internal Fixation), 143E (Surgical Repair of Failed Spinal Fusion), 143F (Surgical Repair, Correction, or Removal of Internal Fixation Device).

Also include OR visits for other spinal surgeries performed during acute care or during inpatient rehab but not documented in this database (i.e., not collected in variables 143A through 143K).

Do not include skeletal traction, halo vest or halo brace.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

If this variable = “00” (none) then, V143A, V143B, V143C and V143D, must = "0" and V143E and V143F must = “8”.
VARIABLE NAME: Laparotomy Performed During System

DESCRIPTION: Laparotomy for closure/excision.

Document laparotomy performed

1) during acute (or subacute) medical/surgical care (for day-1 admissions only) - V143AH;

2) during inpatient acute (or subacute) rehab (for day-1 admissions only) - V143RH.

CHARACTERS: 1 for each entry

CODES:

0  No

1  Yes

9  Unknown (V143AH, V143RH);

no System rehab admission (V143RH) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (for non day-1 admissions only)

COMMENTS: Do NOT include laparoscopy.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

REVISIONS: In November 1995 the three “Yes” codes in old Laparotomy variable were collapsed to one “Yes” code in this variable and coding positions were decreased from 3 to 1.

CONVERSION: November 1995 - for records in existence at that time:

If old During System variable was coded “1”, 2 or “3”, code “1” was placed in this variable.

If old During System variable was coded “0” (or “9”), these codes were moved into this variable.
FORM I

VARIABLE NAME: Traction Performed During System

DESCRIPTION: Longitudinal skull traction via percutaneous cranial pins.

Document traction performed:

1) during acute (or subacute) medical/surgical care (for day-1 admissions only) - V143AI;

2) during inpatient acute (or subacute) rehab (for day-1 admissions only) - V143RI.

CHARACTERS: 1 for each entry

CODES:

0  No

1  Yes

9  Unknown (V143AI, V143RI);

no System rehab admission (V143RI) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (for non day-1 admissions only)

COMMENTS: Includes various types of tongs and halo without the vest.

All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.
FORM 1

VARIABLE NAME: Halo Vest, Halo Brace or Other Orthosis for the Neck Performed During System

DESCRIPTION: Spinal column stabilization using a halo or other orthosis (i.e., Philadelphia or similar hard collar) for the neck.

Document halo vest, halo brace or other orthosis for the neck applied:

1) during acute (or subacute) medical/surgical care (for day-1 admissions only) - V143AJ;

2) during inpatient acute (or subacute) rehab (for day-1 admissions only) - V143RJ.

CHARACTERS: 1 for each entry

CODES:

<table>
<thead>
<tr>
<th>Character</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>9</td>
<td>Unknown (V143AJ, V143RJ);</td>
</tr>
</tbody>
</table>

no System rehab admission (V143RJ) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (for non day-1 admissions only)

COMMENTS: All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

“Other orthosis” refers to other hard braces intended for spinal column stabilization only (e.g., Minerva, Philadelphia, etc.) Soft collars are excluded from this variable.

QC: See pages 65 and 67.
FORM I and FORM II

VARIABLE NAME: Closure of Decubitus Ulcer(s)

DESCRIPTION: Document pedicle or flap graft surgery performed:

Form I (V143K):

1) during acute (or subacute) medical/surgical care (for day-1 admissions only) - V143AK and

2) during inpatient acute (or subacute) rehab (for day-1 admissions only) - V143RK;

Form I (V222A):

during the anniversary year being reported (V222A).

CHARACTERS: 1 for each entry

CODES:

0 No closure but, patient did have ulcer(s)

1 Yes

8 Not applicable, no decubitus ulcers in the period being reported

9 Unknown (V143AK, V143RK, V222A);

no System rehab admission (V143RK) See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005.

Blank (on Form I - for non day-1 admissions only)

Blank (on Form II - only if V201 = “5”)

COMMENTS: All operative procedures performed after the patient is admitted to System rehab must be recorded as having been performed “during rehab” (even if the patient returns to the acute medical/surgical unit for the surgery).

QC: See pages 65 and 67.

If variable 140A = “00” (No ulcers) then, V143AK must = ”8”.

If variable 140R = “00” (No ulcers) then, V143RK must = “8”.

If V107 = “88888888” - see page 65.

If V108 = “88888888” - see page 67.

REVISIONS: October 2000: code “8” was changed from “not applicable, not admitted to rehab” to “not applicable, no decubitus ulcers”. “Not admitted to inpatient rehab” was assigned to code “9“.

This variable is now collected only on day-1 admits. In the old variable (V144K), the data collection period was “during acute and rehab” for the day-1 admits and, “during rehab only” for non day-1 admits.
FORM II

VARIABLE NAME: Calculus Removal

DESCRIPTION: Removal of abnormal concretion from the kidney, ureter, or bladder.

Document calculus removals performed: 

during the anniversary year being reported.

CHARACTERS: 1

CODES:

<table>
<thead>
<tr>
<th>Code in old variable</th>
<th>Code in current variable</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No calculus</td>
</tr>
<tr>
<td>1</td>
<td>Yes calculus, removed</td>
</tr>
<tr>
<td>2</td>
<td>Yes calculus, passed spontaneously</td>
</tr>
<tr>
<td>8</td>
<td>Yes calculus, calculus not removed</td>
</tr>
<tr>
<td>9</td>
<td>Unknown</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

REVISIONS: January 1998: The Form I variable (V143L) was deleted and, the Form II variable (current #V222B) no longer documented methods and locations of calculus removal.

CONVERSION: January 1998: the following conversions were made:
FORM II

VARIABLE NAME: Bladder Neck Resection

DESCRIPTION: Resection of the neck of the bladder during the anniversary year being reported.

CHARACTERS: 1

CODES:

0   No
1   Yes
9   Unknown

Blank  (only if V201 = “5”)

COMMENTS: Includes TUR.
VARIABLE 222D

FORM II

VARIABLE NAME: External Sphincterotomy or Other Sphincter Opening Procedures

DESCRIPTION: Incision of the external sphincter or the use of stents or other devices to increase the opening of the external sphincter during the anniversary year being reported.

CHARACTERS: 1

CODES:

0  No
1  Yes
9  Unknown

Blank  (only if V201 = “5”)

REVISIONS: August 1993: This variable was expanded from external sphincterotomy only.

October 2000: Name changed from Sphincter Dilatation and Sphincter Opening Procedures to External Sphincterotomy or Other Sphincter Opening Procedures.
VARIABLES 144A, 144D, and 227
(Page 1 of 4)

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Items A through M and T

DESCRIPTION: This variable assesses severity of disability through measurement of the most common and useful functional assessment items. Only the thirteen motor assessment items (A through M) and the Motor Subtotal Score (S) are documented.

Data are collected

1) **at the beginning of the first inpatient acute rehab phase** (V144AA through V144AM, V144AT);
2) **prior to discharge** from the **last inpatient acute rehab phase** in the System (V144DA through V144DM, V144DT);
3) **on the anniversary date being reported** (V227A through V227M, V227T).

CHARACTERS: 1 for each FIM item (V144AA through V144AM, V144DA through V144DM, V227A through V227M)
2 for each Total Motor Score (V144AT, V144DT, V227T)

CODES: 9 Unknown -

no observer was available to rate the subject's performance; or
the observer's rating is not available; or
the assessments were not performed within 72 hours of admission to inpatient rehab or within one week of inpatient rehab discharge; or
the subject is under the age of 6; or

the subject was not admitted to System inpatient acute rehab See note on page 98 regarding “no System rehab admission” for Form Is entered after 03/31/2005; or

evaluation/interview not done (for the Form II FIM only); or
subject does not perform the activity and a helper does not perform the activity for the subject - for FIM items G & H (at admission) and items A to J, L and M (at discharge and on Form II).

INDEPENDENT (NO HELPER): Another person is not required for the activity.

7 Complete Independence – The subject safely performs all the tasks described as making up the activity within a reasonable amount of time, and does so without modification, assistive devices, or aids.

6 Modified Independence - One or more of the following may be true: the activity requires an assistive device, the activity takes more than reasonable time, or the activity involves safety (risk) considerations.
VARIABLE NAME: Functional Independence Measure (FIM) - Items A through M and T

CODES:

**DEPENDENT (REQUIRES HELPER):** Subject requires another person for either supervision or physical assistance in order for the activity, or it is not performed.

**MODIFIED DEPENDENCE** - The subject expends half (50%) or more of the effort.

The levels of assistance required are defined below:

**5 Supervision or Setup** – The subject requires no more help than standby, cueing or coaxing, without physical contact; alternately, the helper sets up needed items or applies orthoses or assistive/adaptive devices.

**4 Minimal Contact Assistance** – The subject requires no more help than touching, and expends 75% or more of the effort.

**3 Moderate Assistance** – The subject requires more help than touching, or expends between 50 and 75% of the effort.

**COMPLETE DEPENDENCE** - The subject expends less than half (less than 50%) of the effort. Maximal or total assistance is required. The levels of assistance required are defined below:

**2 Maximal Assistance** – The subject expends between 25 and 49% of the effort.

**1 Total Assistance** – The subject expends less than 25% of the effort or subject cannot be rated due to physical or cognitive limitations and a helper performs the activity for the patient.

**0 Activity Does Not Occur** – Use code 0 for Self Care, Transfers and Locomotion items during the admission assessment only and, in Transfers (Tub and Shower) at admission and discharge. The subject does not perform the activity, and a helper does not perform the activity for the subject.

**NOTE:** Do not use this code:

- if the subject performs the activity without a clinician’s observation. In such cases, consult other clinicians, the subject’s medical record, the subject, and the subject’s family members.

- if the clinician does not observe the subject performing the activity. In such cases, consult other clinicians, the subject’s medical record, the subject, and the subject’s family members to obtain information about the subject’s functional status. If no information is available, use code 9.

**Blank** *(on Form II - only if V201 = “5”)*
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Items A through M and T

COMMENTS: For all systems, the beginning of the inpatient rehabilitation phase is marked by the first admission to the System’s inpatient acute rehabilitation hospital, transfer to the System’s inpatient rehabilitation unit, or commencement of the inpatient rehabilitation program in a multipurpose unit in the System. This is the date coded in Variable 108 (Date of first System Inpatient Rehab Admission). Admission assessments should occur within 72 hours of this date.

The discharge assessment should occur as close as possible to discharge from the last System inpatient rehab phase. For subjects who are discharged from the System’s inpatient rehab unit, this is the date coded in Variable 110. Discharge assessments should preferably occur within three days of this date. If the assessments are not performed within one week of discharge, the FIM scores should not be reported (i.e., the "unknown" codes should be used).

Note: for subjects with multiple System inpatient rehab phases, the admit and discharge FIMs will be from different inpatient rehab phases.

If the clinician does not observe the subject performing the activity, consult other clinicians, the subject’s medical record, the subject, and the subject’s family members to obtain information about the subject’s functional status. Self-report is not acceptable when the patient fills out an interview form (either in the clinic or one sent in the mail). The admission assessments for bladder and bowel accidents include the 4 days prior to the rehab admission, as well as the first 3 days in the rehab unit.

Record the number which best describes the respondent’s level of function for each FIM item on the coding form. If the subject does not perform an activity during the observation period due to physical or cognitive limitations (e.g., a cast or IV line) and, a helper performs the activity for the subject, use code "1". If the subject does not perform an activity during the observation period and, a helper does not perform the activity for the subject, use code “0” (when allowed) or, use code “9” (when “0” is not allowed).

In the event FIM items are rated higher during therapy than when the subject is observed on the nursing floor or in his/her room, record the lower score. The usual reason for this is the subject has not mastered the function or is too tired or not motivated enough to transfer the behavior out of the therapy setting. The lower score is recorded because it is what the subject actually does. There may be a need to resolve the question of what is "usual" by discussion between the therapist and nurse.

Use the Uniform Data System's (UDS) training materials to train the persons who document this information. Training manuals are available (for a fee) from the UDS for non-UDS subscribers. Also, use the UDS FIM Decision Tree (see Appendix A of this syllabus) to assist with Form II assessments conducted by telephone where the clinician was not able to directly observe the respondent’s behavior.

If the subject is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.
VARIABLES 144A, 144D, and 227
(Page 4 of 4)

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Items A through M and T
SOURCE: Uniform Data System for Medical Rehabilitation.
QC: See pages 65 and 67.
REVISIONS: Form I FIM data are to be collected on all subjects admitted to the rehab unit after 9/30/88 (i.e., V108 greater than 09/30/1988).
November 1995: The FIM on Form II was added to the database. Data for all FIM items, in all the Extended data years (i.e., years 1, 2, 5, 10, 15, 20, 25) were expected in Form IIs with Indates between 02/01/1996 and 01/31/98.
January 1998: The FIM required only in annual years 1 and 2 and, all Communication and Social Cognition items (items N, NM, O, OM, P, Q and R) were deleted.
July 1998: The FIM (motor items and total motor score only) required in all the Extended data years (i.e., years 1, 2, 5, 10, 15, 20, 25). Between January and July 1998 the FIM was not required after year 2. Therefore, many Form IIs entered during that time have unknown codes in the FIM.
October 2000: FIM on Form II no longer required in annual year 2.
January 2002: UDS changes on Form I were implemented for those patients who were discharged on or after January 1, 2002 and, on Form II for the interviews performed on or after March 1, 2002.

The following is a list of all items included in this variable:

**SELF CARE**
A. Eating
B. Grooming
C. Bathing
D. Dressing - Upper body
E. Dressing - Lower body
F. Toileting

**SPHINCTER CONTROL**
G. Bladder Management
H. Bowel Management

**MOBILITY (TRANSFER)**
I. Bed, Chair, Wheelchair
J. Toilet
K. Tub, Shower

**LOCOMOTION**
L. Walking or Wheelchair
LM. Mode of Locomotion
M. Stairs

**TOTAL**
T. Total Motor Score
VARIABLE NAME: Functional Independence Measure (FIM) - Self Care: Eating

DESCRIPTION: Includes the ability to use suitable utensils to bring food to the mouth, as well as the ability to chew and swallow the food once the meal is presented in the customary manner on a table or tray. The subject performs this activity safely.

CHARACTERS: 1 for each entry

CODES:
9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject eats from a dish while managing a variety of food consistencies, and drinks from a cup or glass with the meal presented in the customary manner on a table or tray. The subject opens containers, butters bread, cuts meat, pours liquids and uses a spoon or fork to bring food to the mouth, where it is chewed and swallowed. The subject performs this activity safely.

6 Modified independence – Performance of the activity involves safety considerations, or the subject requires an adaptive or assistive device such as a long straw, spork or rocking knife; requires more than a reasonable amount of time to eat; or requires modified food consistency or blended food. If the subject relies on other means of alimentation, such as parenteral or gastrostomy feedings, then (s)he self-administers the feedings.

HELPER

5 Supervision or setup – The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (application of orthoses or assistive/adaptive devices), or another person is required to open containers, butter bread, cut meat, or pour liquids.

4 Minimal contact assistance – The subject performs 75% or more of eating tasks.

3 Moderate assistance – The subject performs 50% to 74% of eating tasks.

2 Maximal assistance – The subject performs 25% to 49% of eating tasks.

1 Total assistance – The subject performs less than 25% of eating tasks, or the subject relies on parenteral or gastrostomy feedings (either wholly or partially) and does not administer self-administer the feedings; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur – Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not eat and does not receive any parenteral/enteral nutrition and a helper does not perform the activity for the subject. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

NSCISC: 01/2002
VARIABLE NAME: Functional Independence Measure (FIM) - Self Care: Grooming

DESCRIPTION: Includes oral care, hair grooming (combing or brushing hair), washing the hands*, washing the face*, and either shaving the face or applying makeup. If the subject neither shaves nor applies make-up, Grooming includes only the first four tasks. The subject performs this activity safely.

CHARACTERS: 1 for each entry

CODES:
9 Unknown (see page 147 for details)

NO HELPER
7 Complete independence – The subject cleans teeth or dentures, combs or brushes hair, washes the hands*, washes the face, and either shaves the face or applies make-up, including all preparations. The subject performs this activity safely.

6 Modified independence - The subject requires specialized equipment (including prosthesis or orthosis) to perform grooming activities, or takes more than a reasonable amount of time, or there are safety considerations.

HELPER
5 Supervision or setup - The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (application of orthoses or adapted/assistive devices, setting out grooming equipment, and initial preparation such as applying toothpaste to toothbrush and opening make-up containers).

4 Minimal contact assistance – The subject performs 75% or more of grooming tasks.

3 Moderate assistance - The subject performs 50% to 74% of grooming tasks.

2 Maximal assistance - The subject performs 25% to 49% of grooming tasks.

1 Total assistance - The subject performs less than 25% of grooming tasks or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur – Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not perform any grooming activities (oral care, hair grooming, washing the hands, washing the face, and either shaving the face or applying make-up) and is not groomed by a helper. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

COMMENT: Assess only the activities listed in the definition. Grooming does not include flossing teeth, shampooing the hair, applying deodorant, or shaving legs. If the subject is bald or chooses not to shave or apply make-up, do not access those activities.

* including rinsing and drying.
VARIABLE NAME: Functional Independence Measure (FIM) - Self Care: Bathing

DESCRIPTION: Includes washing, rinsing and drying the body from the neck down (excluding the neck and back) in either a tub or shower or sponge/bed bath. The patient performs the activity safely.

CHARACTERS: 1 for each entry

CODES:

9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject safely bathes (washes, rinses and dries) the body.

6 Modified independence – The subject requires specialized equipment (including prosthesis or orthosis) to bathe, or takes more than a reasonable amount of time, or there are safety considerations.

HELPER

5 Supervision or setup – The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (application of assistive/adaptive devices, setting out bathing equipment, and initial preparation such as preparing the water or washing materials).

4 Minimal contact assistance - The subject performs 75% or more of bathing tasks.

3 Moderate assistance - The subject performs 50% to 74% of bathing tasks.

2 Maximal assistance - The subject performs 25% to 49% of bathing tasks.

1 Total assistance - The subject performs less than 25% of bathing tasks or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not bathe self and is not bathed by a helper. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

COMMENTS: There are ten body parts included in this activity, each accounting for 10% of the total: chest, left arm, right arm, abdomen, perineal area, buttocks, left upper leg, right upper leg, left lower leg (including foot) and right lower leg (including foot).
VARIABLES 144AD, 144DD and 227D

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Self Care: Dressing, Upper Body

DESCRIPTION: Includes dressing and undressing above the waist, as well as applying and removing prosthesis or orthosis when applicable. The subject performs this activity safely.

CHARACTERS: 1 for each entry

CODES: 9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence - The subject dresses and undresses self. This includes obtaining clothes from their customary places (such as drawers and closets) and may include managing a bra, pullover garment, front-opening garment, zippers, buttons, or snaps, as well as the application and removal of a prosthesis or orthosis (which is not used as an assistive device for upper body dressing) when applicable. The subject performs this activity safely.

6 Modified independence - The subject requires special adaptive closure such as Velcro® Fastener, or an assistive device (including a prosthesis or orthosis) to dress, or takes more than a reasonable amount of time.

HELPER

5 Supervision or setup - The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (application of an upper body or limb orthosis/prosthesis, application of an assistive/adaptive device, or setting out clothes or dressing equipment).

4 Minimal contact assistance - The subject performs 75% or more of dressing tasks.

3 Moderate assistance - The subject performs 50% to 74% of dressing tasks.

2 Maximal assistance - The subject performs 25% to 49% of dressing tasks.

1 Total assistance - The subject performs less than 25% of dressing tasks or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not dress in clothing that is appropriate to wear in public and is not dressed by a helper. The subject who wears only a hospital gown should be coded “0 – Activity does not occur”. Putting on and taking off scrubs may be appropriate for purposes of assessment. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

COMMENT: When assessing dressing and undressing, the subject must use clothing that is appropriate to wear in public. If the subject wears only hospital gowns or nightgowns/pajamas, score as level 0 at admit (9 at discharge and on Form II).
VARIABLE NAME: Functional Independence Measure (FIM) - Self Care: Dressing, Lower Body

DESCRIPTION: Includes dressing and undressing from the waist down, as well as applying and removing a prosthesis or orthosis when applicable. The subject performs this activity safely.

CHARACTERS: 1 for each entry

CODES:

9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject dresses and undresses safely. This includes obtaining clothes from their customary places (such as drawers and closets), and may also include managing underpants, slacks, skirt, belt, stockings, shoes, zippers, buttons, and snaps as well as the application and removal of a prosthesis or orthosis (which is not used as an assistive device for lower body dressing) when applicable.

6 Modified independence - The subject requires special adaptive closure such as Velcro® Fastener, or an assistive device (including a prosthesis or orthosis) to dress, or takes more than a reasonable amount of time.

HELPER

5 Supervision or setup - The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (application of an lower body or limb orthosis/prosthesis, application of an assistive/adaptive device or setting out clothes or dressing equipment).

4 Minimal contact assistance - The subject performs 75% or more of dressing tasks.

3 Moderate assistance - The subject performs 50% to 74% of dressing tasks.

2 Maximal assistance - The subject performs 25% to 49% of dressing tasks.

1 Total assistance - The subject performs less than 25% of dressing tasks or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not dress in clothing that is appropriate to wear in public and is not dressed by a helper. The subject who wears only a hospital gown and/or underpants and/or footwear should be coded “0 – Activity does not occur”. Putting on and taking off scrubs may be appropriate for purposes of assessment. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

COMMENT: When assessing dressing and undressing, the subject must use clothing that is appropriate to wear in public. If the subject wears only hospital gowns or nightgowns/pajamas, score as level 0 at admit (9 at discharge and on Form II).
VARIABLES 144AF, 144DF and 227F

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Self Care: Toileting

DESCRIPTION: Includes maintaining perineal hygiene and adjusting clothing before and after toilet, bedpan, or urinal. The subject performs this activity safely.

CHARACTERS: 1 for each entry

CODES:

9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject safely cleanses self after voiding and bowel movements and safely adjusts clothing before and after using toilet or bedpan.

6 Modified independence - The subject requires specialized equipment (including prosthesis or orthosis) during toileting, or takes more than a reasonable amount of time, or there are safety considerations.

HELPER

5 Supervision or setup - The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (application of adaptive devices or opening packages).

4 Minimal contact assistance - The subject performs 75% or more of toileting tasks.

3 Moderate assistance - The subject performs 50% to 74% of toileting tasks.

2 Maximal assistance - The subject performs 25% to 49% of toileting tasks.

1 Total assistance - The subject performs less than 25% of toileting tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not perform any of the toileting tasks (perineal cleansing, clothing adjustment before and after toilet use, etc.), and a helper does not perform any of these activities for the subject. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Sphincter Control: Bladder Management

DESCRIPTION: Bladder Management consists of two function modifiers (Level of Assistance and Frequency of Accidents). After these two function modifiers are scored, the lower (more dependent) score is recorded in FIM item G.

FUNCTION MODIFIER #1: Bladder Management - Level of Assistance

DESCRIPTION: This is the first function modifier used to determine Sphincter Control: Bladder Management. It includes the safe use of equipment or agents for bladder management.

CODES:

9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject controls bladder completely and intentionally without equipment or devices, and is never incontinent (no accidents).

6 Modified independence - The subject requires a urinal, bedpan, catheter, absorbent pad, diaper, urinary collecting device, or urinary diversion or uses medication for control. If catheter is used, the subject cleans, sterilizes, and sets up the equipment for irrigation without assistance. If the subject uses a device, (s)he assembles and applies an external catheter with drainage bags or an ileal appliance without assistance of another person; the subject also empties, puts on, removes, and cleans leg bag or empties and cleans ileal appliance bag. The subject has no accidents.

HELPER

5 Supervision or setup - The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (placing or emptying) of equipment to maintain a satisfactory voiding pattern or an external device.

4 Minimal contact assistance - The subject requires minimal contact assistance to maintain an external device, and performs 75% or more of bladder management tasks.

3 Moderate assistance - The subject requires moderate assistance to maintain an external device, and performs 50% to 74% of bladder management tasks.

2 Maximal assistance - The subject performs 25% to 49% of bladder management tasks.

1 Total assistance - The subject performs less than 25% of bladder management tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

Blank (on Form II - only if V201 = “5”)
FORM I and FORM II
VARIABLE NAME: Functional Independence Measure (FIM) - Sphincter Control: Bladder Management

FUNCTION MODIFIER #1: Bladder Management - Level of Assistance
COMMENTS: The functional goal of bladder management is to open the urinary sphincter only when needed and to keep it closed the rest of the time. This may require devices, medications (agents), or assistance in some subjects. This item deals with the level of assistance required to complete bladder management tasks. If the subject does not void (e.g., subject has renal failure and is on hemodialysis), then code level 7 – Complete Independence.
A separate function modifier, Bladder Management – Frequency of Accidents, deals with the success of the bladder management program. This modifier is scored separately. After these two function modifiers are scored, the lower (more dependent) score is reported in FIM item G.

FUNCTION MODIFIER #2: Bladder Management - Frequency of Accidents
DESCRIPTION: This is the second function modifier used to determine Sphincter Control: Bladder Management. It includes complete intentional control of urinary bladder and, if necessary, use of equipment or agents for bladder control. Bladder accidents refer to the act of wetting linen or clothing with urine, and includes bedpan and urinal spills. The admission assessment for bladder accidents includes the 4 days prior to the rehab admission as well as the first 3 days in the rehab facility.

CODES:
9 Unknown (see page 147 for details)

NO HELPER
7 No accidents – The subject controls bladder completely and intentionally, and does not have any accidents.
6 No accidents; uses device such as a catheter - The subject requires a urinal, bedpan, catheter, absorbent pad, diaper, urinary collecting device, or urinary diversion or uses medication for control. The subject cleans and maintains equipment without assistance of another person. The subject has no accidents.

HELPER
5 One (1) bladder accident, including bedpan and urinal spills, in the past 7 days.
4 Two (2) bladder accidents, including bedpan and urinal spills, in the past 7 days.
3 Three (3) bladder accidents, including bedpan and urinal spills, in the past 7 days.
2 Four (4) bladder accidents, including bedpan and urinal spills, in the past 7 days.
1 Five (5) bladder accidents, including bedpan and urinal spills, in the past 7 days.
Blank (on Form II - only if V201 = “5”)
VARIABLES 144AG, 144DG and 227G

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Sphincter Control: Bladder Management

COMMENTS: The functional goal of bladder management is to open the urinary sphincter only when needed and to keep it closed the rest of the time. This item deals with the frequency of accidents required to complete bladder management tasks. If the subject does not void (e.g., subject has renal failure and is on hemodialysis), then code level 7 – Complete Independence.

A separate function modifier, Bladder Management – Level of Assistance, deals with the level of assistance to complete the bladder management tasks. This modifier is scored separately. After these two function modifiers are scored, the lower (more dependent) score is reported in FIM item G.
VARIABLES 144AH, 144DH and 227H
(Page 1 of 3)

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Sphincter Control: Bowel Management

DESCRIPTION: Bowel Management consists of two function modifiers (Level of Assistance and Frequency of Accidents). After these two function modifiers are scored, the lower (more dependent) score is recorded in this FIM item.

FUNCTION MODIFIER #1: Bowel Management - Level of Assistance

DESCRIPTION: This is the first function modifier used to determine Sphincter Control: Bowel Management. It includes the use of equipment or agents for bowel management. The admission assessment for bowel accidents includes the 4 days prior to the rehab admission, as well as the first 3 days in the rehab facility.

CODES:

9 Unknown (see page 147 for details)

NO HELPER
7 Complete independence – The subject controls bowels completely and intentionally without equipment or devices, and does not have any bowel accidents.
6 Modified independence - The subject requires a bedpan, digital stimulation or stool softeners, suppositories, laxatives (other than natural laxatives like prunes), or enemas on a regular basis; alternately, the patient uses other medications for control. If the subject has a colostomy, (s)he maintains it. The subject has no accidents.

HELPER
5 Supervision or setup - The subject requires supervision (e.g., standing by, cueing or coaxing) or setup of equipment necessary for the subject to maintain either a satisfactory excretory pattern or an ostomy device.
4 Minimal contact assistance - The subject requires minimal contact assistance to maintain a satisfactory excretory pattern by using suppositories, enemas, or an external device. The subject performs 75% or more of bowel management tasks.
3 Moderate assistance - The subject requires moderate assistance to maintain a satisfactory excretory pattern by using suppositories, enemas, or an external device. The subject performs 50% to 74% of bowel management tasks.
2 Maximal assistance - The subject performs 25% to 49% of bowel management tasks.
1 Total assistance - The subject performs less than 25% of bowel management tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.
Blank (on Form II - only if V201 = “5”)
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Sphincter Control: Bowel Management

FUNCTION MODIFIER #1: Bowel Management - Level of Assistance

COMMENTS: The functional goal of bowel management is to open the anal sphincter only when needed and to keep it closed the rest of the time. This may require devices, medications (agents), or assistance in some subjects. This item deals with the level of assistance required to complete bowel management tasks.

A separate function modifier, Bowel Management – Frequency of Accidents, deals with the success of the bowel management program. This modifier is scored separately. After these two function modifiers are scored, the lower (more dependent) score is reported in FIM item H.

FUNCTION MODIFIER #2: Bowel Management - Frequency of Accidents

DESCRIPTION: This is the second function modifier used to determine Sphincter Control: Bowel Management. It includes complete intentional control of bowel movements and (if necessary) use of equipment/agents for bowel control. Bowel accidents refer to the act of soiling linen or clothing with stool, and includes bedpan spills.

CODES:

- **9 Unknown** (see page 147 for details)
- **NO HELPER**
  - **7 No accidents** – The subject controls bowel completely and intentionally without equipment or devices, and is never incontinent (no accidents).
  - **6 No accidents; uses device such as ostomy** - The subject requires a bedpan, digital stimulation or stool softeners, suppositories, laxatives (other than natural laxatives like prunes), or enemas on a regular basis; alternately, the patient uses other medications for control. The subject has no accidents.
- **HELPER**
  - **5 One (1) accident** in the past 7 days.
  - **4 Two (2) accidents** in the past 7 days.
  - **3 Three (3) accidents** in the past 7 days.
  - **2 Four (4) accidents** in the past 7 days.
  - **1 Five (5) accidents** in the past 7 days.
  - **Blank** (on Form II - only if V201 = “5”)

Blank (on Form II - only if V201 = “5”)
VARIABLE NAME: Functional Independence Measure (FIM) - Sphincter Control: Bowel Management

FUNCTION MODIFIER #2: Bowel Management - Frequency of Accidents

COMMENTS: The functional goal of bowel management is to open the anal sphincter only when needed and to keep it closed the rest of the time. This item deals with the frequency of accidents required to complete bowel management tasks.

A separate function modifier, Bowel Management – Level of Assistance, deals with the level of assistance to complete the bowel management tasks. This modifier is scored separately. After these two function modifiers are scored, the lower (more dependent) score is reported in FIM item H.
VARIABLES 144AI, 144DI and 227I

FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Mobility (Transfers): Bed, Chair, Wheelchair

DESCRIPTION: Includes all aspects of transferring to and from bed, chair and wheelchair or coming to a standing position if walking is the typical mode of locomotion. The subject performs this activity safely.

CHARACTERS: 1 for each entry

CODES:

9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence -

If walking: The subject safely approaches, sits down on a regular chair, and gets up to a standing position from a regular chair. The subject also safely transfers from bed to chair.

If in a wheelchair: The subject approaches a bed or chair, locks brakes, lifts foot rests, removes arm rest if necessary, and performs either a standing pivot or sliding transfer (without a board) and returns. The subject performs this activity safely.

6 Modified independence – The subject requires adaptive or assistive device such as a sliding board, a lift, grab bars, or a special seat/chair/brace/crutches; or the activity takes more than a reasonable amount of time; or there are safety considerations. In this case, a prosthesis or orthosis is considered an assistive device if used for the transfer.

HELPER

5 Supervision or setup - Requires supervision (e.g., standing by, cueing or coaxing) or setup (positioning sliding board, moving foot rests, etc.).

4 Minimal contact assistance - The subject requires no more than touching and performs 75% or more of transferring tasks.

3 Moderate assistance - The subject requires more help than touching or performs 50% to 74% of transferring tasks.

2 Maximal assistance - The subject performs 25% to 49% of transferring tasks.

1 Total assistance - The subject performs less than 25% of transferring tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II) . The subject does not transfer to or from the bed or a chair, and is not transferred to or from the bed or chair by a helper or lifting device. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

COMMENTS: When assessing bed to chair transfer, the subject begins and ends in the supine position.
VARIABLE NAME: Functional Independence Measure (FIM) - Mobility (Transfer): Toilet
DESCRIPTION: Includes getting on and off a toilet.
CHARACTERS: 1 for each entry
CODES:
   9 Unknown (see page 147 for details)

NO HELPER
   7 Complete independence -
      If walking: The subject approaches, sits down on a standard toilet and gets up from a standard toilet. The subject performs this activity safely.
      
      If in a wheelchair: The subject approaches toilet, locks brakes, lifts foot rests, removes arm rests if necessary and does either a standing pivot or sliding transfer (without a board) and returns. The subject performs this activity safely.

   6 Modified independence - The subject requires an adaptive or assistive device such as a sliding board, a lift, grab bars, or special seat; or takes more than a reasonable amount of time to complete the activity; or there are safety considerations. In this case, a prosthesis or orthosis is considered an assistive device if used for the transfer.

HELPER
   5 Supervision or setup – The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (positioning sliding board, moving foot rests, etc.).

   4 Minimal contact assistance - The subject requires no more than touching and performs 75% or more of transferring tasks.

   3 Moderate assistance - The subject requires more help than touching or performs 50% to 74% of transferring tasks.

   2 Maximal assistance - The subject performs 25% to 49% of transferring tasks.

   1 Total assistance - The subject performs less than 25% of transferring tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

   0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not transfer on or off the toilet/commode, and is not transferred on or off the toilet/commode by a helper or lifting device. For example, the subject uses only a bedpan and/or urinal. Use of this code should be rare.

   Blank (on Form II - only if V201 = “5”)
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Mobility (Transfer): Tub, Shower

DESCRIPTION: Mobility (Transfer): Tub, Shower consists of two function modifiers (Transfers: Tub and Transfers: Shower). After these two function modifiers are scored, the lower (more dependent) score is recorded in this FIM item.

FUNCTION MODIFIER #1: Transfers: Tub

DESCRIPTION: Includes getting into and out of a tub. The subject performs this activity safely. This is the first of two function modifiers.

CODES:
9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence -
   If walking: The subject approaches a tub, and gets into and out of it. The subject performs this activity safely.
   If in a wheelchair: The subject approaches a tub, locks brakes, lifts foot rests, removes arm rests if necessary, and does either a standing pivot or sliding transfer (without a board) and returns. The subject performs this activity safely.

6 Modified independence – The subject requires an adaptive or assistive device (including prosthesis or orthosis) such as a sliding board, a lift, grab bars, or special seat; takes more than a reasonable amount of time to complete the activity or there are safety considerations.

HELPER

5 Supervision or setup – The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (positioning sliding board, moving foot rests, etc.).

4 Minimal contact assistance - The subject performs 75% or more of transferring tasks.

3 Moderate assistance - The subject requires no more than touching and performs 50% to 74% of transferring tasks.

2 Maximal assistance - The subject requires more help than touching or performs 25% to 49% of transferring tasks.

1 Total assistance - The subject performs less than 25% of transferring tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.

0 Activity does not occur - The subject does not transfer into and out of a tub and is not transferred by a helper. Use of this code should be rare. Code 0 may be used on admission, discharge and on Form II.

Blank (on Form II - only if V201 = “5”)
VARIABLE NAME: Functional Independence Measure (FIM) - Mobility (Transfer): Tub, Shower

FUNCTION MODIFIER #1: Transfers: Tub
COMMENT: There is a separate function modifier that addresses transfers into a shower stall. Score the function modifiers separately. If the patient uses only one mode, record this score in FIM item K. If the patient transfers into the tub and shower, record the lower score.

FUNCTION MODIFIER #2: Transfers: Shower
DESCRIPTION: Includes getting into and out of a shower. The subject performs this activity safely. This is the second of two function modifiers.

CODES:
9 Unknown (see page 147 for details)

NO HELPER
7 Complete independence -
   If walking: The subject approaches a shower stall, and gets into and out of it. The subject performs this activity safely.
   If in a wheelchair: The subject approaches a shower stall, locks brakes, lifts foot rests, removes arm rests if necessary, and does either a standing pivot or sliding transfer (without a board) and returns. The subject performs this activity safely.

6 Modified independence – The subject requires an adaptive or assistive device (including prosthesis or orthosis) such as a sliding board, a lift, grab bars, or special seat; takes more than a reasonable amount of time to complete the activity or there are safety considerations.

HELPER
5 Supervision or setup – The subject requires supervision (e.g., standing by, cueing or coaxing) or setup (positioning sliding board, moving foot rests, etc.).
4 Minimal contact assistance - The subject performs 75% or more of transferring tasks.
3 Moderate assistance - The subject requires no more than touching and performs 50% to 74% of transferring tasks.
2 Maximal assistance - The subject requires more help than touching or performs 25% to 49% of transferring tasks.
1 Total assistance - The subject performs less than 25% of transferring tasks; or the subject cannot perform the task due to physical or cognitive limitations and a helper performs the activity for the subject.
0 Activity does not occur - The subject does not transfer into and out of a shower and is not transferred by a helper. Use of this code should be rare. Code 0 may be used on admission, discharge and on Form II.
Blank (on Form II - only if V201 = “5”)
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Mobility (Transfer): Tub, Shower

FUNCTION

MODIFIER #2: Transfers: Shower

COMMENT: There is a separate function modifier that addresses transfers into a tub. Score the function modifiers separately. If the patient uses only one mode, record this score in FIM item K. If the patient transfers into the tub and shower, record the lower score.
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Locomotion: Walking or Wheelchair

DESCRIPTION: Locomotion: Walking or Wheelchair consists of two function modifiers (Locomotion: Walk and Locomotion: Wheelchair). The score that matches the type of locomotion is recorded in this FIM item. If both modes are performed equally, and the scores for each mode are not equal, the lower (more dependent) score is recorded in this FIM item. If the subject changes the mode of locomotion between admission and discharge (usually from wheelchair to walking), record the admission mode and scores based on the more frequent mode of locomotion at discharge.

FUNCTION MODIFIER #1: Locomotion: Walk

DESCRIPTION: Includes walking on a level surface once in a standing position. The subject performs this activity safely. This is the first of two locomotion function modifiers.

CODES:

9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject walks a minimum of 150 feet (50 meters) without assistive devices. The subject performs this activity safely.

6 Modified independence - The subject walks a minimum of 150 feet (50 meters) but uses a brace (orthosis) or prosthesis on leg, special adaptive shoes, cane, crutches, or walkerette; or takes more than a reasonable amount of time to complete the activity; or there are safety considerations.

5 Exception (household locomotion) - The subject walks only short distances (a minimum of 50 feet or 17 meters) independently with or without a device. The activity takes more than a reasonable amount of time, or there are safety considerations.

HELPER

5 Supervision – The subject requires standby supervision, cueing or coaxing to go a minimum of 150 feet (50 meters).

4 Minimal contact assistance - The subject performs 75% or more of walking effort to go a minimum of 150 feet (50 meters).

3 Moderate assistance - The subject performs 50% to 74% of walking effort to go a minimum of 150 feet (50 meters).

2 Maximal assistance - The subject performs 25% to 49% of walking effort to go a minimum of 50 feet (17 meters) and requires assistance of one person only.

1 Total assistance - The subject performs less than 25% of effort, or requires the assistance of two people, or walks less than 50 feet (17 meters).

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not walk. For example, use 0 if the subject uses only a wheelchair for locomotion or the subject is on bed rest.

Blank (on Form II - only if V201 = “5”)
VARIABLE NAME: Functional Independence Measure (FIM) - Locomotion: Walking or Wheelchair

FUNCTION MODIFIER #1: Locomotion: Walk
COMMENTS: If the patient requires an assistive device for locomotion (prosthesis, walker, cane, AFO, adaptive shoe, etc.), then the Locomotion: Walk score can never be higher than level 6.

There are two locomotion function modifiers. Score both function modifiers on admission and discharge. FIM item Mode of Locomotion (Walk or Wheelchair) must be the same on admission and discharge. Indicate the most frequent mode of locomotion (Walk or Wheelchair) in FIM item LM. If both are used about equally, code “Both”.

FUNCTION MODIFIER #2: Locomotion: Wheelchair
DESCRIPTION: Includes using a wheelchair on a level surface once in a seated position. The subject performs this activity safely. This is the second of two locomotion function modifiers. If the subject changes the mode of locomotion between admission and discharge (usually from wheelchair to walking), record the admission mode and scores based on the more frequent mode of locomotion at discharge.

CODES:

9 Unknown (see page 147 for details)
7 NO HELPER
6 Modified independence - The subject operates a manual or motorized wheelchair independently for a minimum of walks a minimum of 150 feet (50 meters); turns around; maneuvers the chair to a table, bed, toilet; negotiates at least a 3 percent grade; and maneuvers on rugs and over door sills.
5 Exception (household locomotion) - The subject operates a manual or motorized wheelchair independently only short distances (a minimum of 50 feet of 17 meters).

HELPER
5 Supervision – The subject requires standby supervision, cueing or coaxing to go a minimum of 150 feet (50 meters) in a wheelchair.
4 Minimal contact assistance - The subject performs 75% or more of locomotion effort to go a minimum of 150 feet (50 meters).
3 Moderate assistance - The subject performs 50% to 74% of locomotion effort to go a minimum of 150 feet (50 meters).
2 Maximal assistance - The subject performs 25% to 49% of locomotion effort to go a minimum of 50 feet (17 meters) and requires the assistance of one person only.
1 Total assistance - The subject performs less than 25% of effort, or requires assistance of two people, or wheels less than 50 feet (17 meters).
0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not use a wheelchair, and is not pushed in a wheelchair by a helper.
Blank (on Form II - only if V201 = “5”)
FORM I and FORM II

VARIABLE NAME: Functional Independence Measure (FIM) - Locomotion: Walking or Wheelchair

FUNCTION MODIFIER #2: Locomotion: Wheelchair

COMMENTS: There are two locomotion function modifiers. Score both function modifiers on admission and discharge. FIM item Mode of Locomotion (Walk or Wheelchair) must be the same on admission and discharge. Indicate the most frequent mode of locomotion (Walk or Wheelchair) in FIM item LM. If both are used about equally, code “Both”.
VARIABLE NAME: Functional Independence Measure (FIM) - Locomotion: Mode (Walking and/or Wheelchair)

DESCRIPTION: This variable documents the more frequent mode of locomotion (for the level recorded in FIM item L). If the subject changes the mode of locomotion between admission and discharge (usually from wheelchair to walking), record the admission mode and scores based on the more frequent mode of locomotion at discharge.

CHARACTERS: 1 for each entry

CODES:
- 0 Walking
- 1 Wheelchair
- 2 Both walking and wheelchair (use only if both are used about equally often)
- 9 Unknown

Blank (on Form II - only if V201 = “5”)

COMMENTS: FIM item Mode of Locomotion (Walk or Wheelchair) must be the same on admission and discharge. Indicate the most frequent mode of locomotion (Walk or Wheelchair). If both are used about equally, code “Both”.

QC:
- If variable 144L (Locomotion: Walking and Wheelchair) = “9” (Unknown), this variable must = “9” (Unknown).
- If variable 227L (Locomotion: Walking and Wheelchair) = “9” (Unknown), this variable must = “9” (Unknown).
VARIABLE NAME: Functional Independence Measure (FIM) - Locomotion: Stairs

DESCRIPTION: Includes going up and down 12 to 14 stairs (one flight) indoors in a safe manner.

CHARACTERS: 1 for each entry

CODES: 9 Unknown (see page 147 for details)

NO HELPER

7 Complete independence – The subject safely goes up and down at least one flight of stairs without depending on any type of handrail or support.

6 Modified independence - The subject goes up and down at least one flight of stairs but requires a side support, handrail, cane, or portable supports; or the activity takes more than a reasonable amount of time; or there are safety considerations.

5 Exception (household ambulation) – The subject goes up and down 4 to 6 stairs independently, with or without a device. The activity takes more than a reasonable amount of time, or there are safety considerations.

HELPER

5 Supervision - The subject requires supervision (e.g., standing by, cueing or coaxing) to go up and down one flight of stairs.

4 Minimal contact assistance - The subject performs 75% or more of effort to go up and down one flight of stairs.

3 Moderate assistance - The subject performs 50% to 74% of the effort to go up and down one flight of stairs.

2 Maximal assistance - The subject performs 25% to 49% of the effort to go up and down 4 to 6 stairs, and requires the assistance of one person only.

1 Total assistance - The subject performs less than 25% of the effort; or requires the assistance of two people; or goes up and down fewer than 4 stairs; or the subject cannot perform the task due to physical or cognitive limitations and a helper carries the subject up or down stairs.

0 Activity does not occur - Enter code 0 only for the admission assessment (use code 9 at discharge and on Form II). The subject does not go up or down stairs, and a helper does not carry the subject up or down stairs. Use of this code should be rare.

Blank (on Form II - only if V201 = “5”)

NSCISC: 01/2002 167
VARIABLE NAME: Functional Independence Measure (FIM) – Total Motor Score

DESCRIPTION: This variable documents the total of the levels in FIM items A through M. This variable can be calculated by the NSCISC’s software.

CHARACTERS: 2 for each entry

CODES:

13 - 91    99    Unknown
Blank (on Form II - only if V201 = “5”)

COMMENTS: Each of the 13 motor items comprising the FIM has a maximum level score of 7. At Admission, all FIM items except Bladder Control and Bowel Control have a minimum level score of 0. At discharge, only Transfers: Tub, Shower has a minimum level score of 0. All other items have a minimum score of 1.

The highest total score is 91 and the lowest total score is 13.

Code "99" must be used when 1 or more items are coded "9" (Unknown).

Do not include in this total the code in the Mode of Locomotion (LM).

SOFTWARE: The software includes a function key to calculate this variable. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button. For calculation purposes only, zeros are converted to 1.

QC: If the score in any item of the FIM (i.e., A through M) = “9” (Unknown), this variable (T) must = “99” (Unknown).

If the subject’s current age is less than 006, then all FIM items must = “9” and the Total FIM score must = “99”.

Also, see page 67.
VARIABLE NAME: Date of Death

DESCRIPTION: This variable specifies the patient's date of death.

CHARACTERS: 8

CODES:
- Any valid date
- 88888888  Not applicable, patient alive
- 99999999  Unknown

FORMAT: mmddyyyy

COMMENTS: Record the month, day and year. If the month or day is unknown, it should be coded "99"; if the year is unknown it should be coded "9999". An estimated year of death is allowed (and preferred). Avoid using code “99999999” unless there is absolutely no information.

This variable is to be used to document the date of death for any patient who dies either during initial hospitalization or during the follow-up period.

This variable cannot be stored in date format since non-valid dates and non-valid parts of a date are allowed.

See Appendix D for tips on tracking patients (from internet sources, etc.).

SOFTWARE: When the software creates a new Form I record, the default code for “alive” (88888888) is inserted in this variable. Update this variable if the patient dies during follow-up.

From the Process/Data Entry screen of the software, there is a short-cut key that brings up the Form I Death Information items. To Use: place the cursor on the patient’s line and click on the Death Info box. The software will now bring up the Date of Death, Cause of Death and Autopsy fields from Form I. Enter your data, save the changes, and the data will be stored in the Form I record.

QC: If the patient dies during a System inpatient treatment phase, this date is the same as the Date of Discharge (variable 110).
VARIABLE NAME: Cause(s) of Death

DESCRIPTION: This variable documents cause(s) of death by diagnosis. Write out the diagnoses in the spaces provided and code each diagnosis according to a five-digit code required by The International Classification of Diseases, (ICD-9-CM).

CHARACTERS: 7 for the primary cause (V146_1)
6 for each of the 4 secondary causes (V146_2 through V146_5)

CODES: Any valid ICD9 code

- 888.88 Not applicable, patient alive (in coding position #1 only)
- 000.00 Unknown (in coding position #1 only)
- Blank (in coding positions #2 through #5 only)

COMMENTS: The primary cause of death should be coded in the first position (1) with other pathologic conditions contributing to the patient's demise listed as secondary diagnoses (positions 2 through 5).

The primary cause of death should reflect autopsy findings (if available). The use of E codes to document external causes of death (e.g., suicide, automobile accidents) is permitted in this variable only as a Primary Cause. However, see additional information in the syllabus section titled "Guidelines for Coding Primary Cause of Death" (starting on page 23).

This variable is to be used to document the Cause(s) of Death for any patient who dies either during initial hospitalization or during the follow-up period.

A code in coding position #1 is mandatory.

Codes 0000.00 and 8888.88 are allowed only in coding position #1. When one of these codes is entered in coding position #1, no codes are allowed in coding positions 2 to 5. The decimal point is stored in this variable.

REVISIONS: October 1990: converted from ICDA8 codes to ICD9CM codes.

SOFTWARE: When the software creates a new Form I record, the default code for "alive" (8888.88) is inserted in this variable. Update this variable if the patient dies during follow-up.

When code 0000.00 (or code 8888.88) is entered, the software advances the user to the next variable.

EXAMPLE: 146. Cause(s) of Death...................._038.901. Sepsis

Primary Cause

486.002. Pneumonia

3.

4.

5.
FORM I

VARIABLE NAME: Autopsy

DESCRIPTION: This variable documents whether the patient's reported primary cause of death was confirmed by autopsy findings.

CHARACTERS: 1

CODES:

0 Autopsy not performed
1 Autopsy results confirm primary cause of death
2 Autopsy performed, results unknown
8 Not applicable, patient alive
9 Unknown if an autopsy was performed

SOFTWARE: When the software creates a new Form I the default code for “alive” (8) is inserted in this variable. Update this variable if the patient dies during follow-up.

REVISIONS: October 1986: this variable was added to the database.
The Treatment Phase variables document (track) all phases of treatment the patient receives (for SCI) from the time of injury to the End of the Last Inpatient Treatment Phase. These include treatments received in the Model System (System) and outside the Model System (non-System). A phase is a component of the services trajectory from injury to discharge back to the community with rehabilitation completed. Each phase is distinguished by the nature of the activities that the patient undergoes/undertakes, and/or the identity of the entity that provides the services. A new phase starts whenever the nature of the activities changes (from those described in one code of V148 to those described by another code), and/or when the entity responsible for delivering those services changes.

Five types of phases of treatment are reported:

1) Acute Medical/Surgical Hospitalization
2) Nursing Home
3) Inpatient Acute Rehabilitation
4) Inpatient Subacute Medical/Surgical Care
5) Inpatient Subacute Rehabilitation

Once a patient is receiving outpatient rehab, all med-surg (sub)acute and inpatient Rehab hospitalizations are considered Rehospitalizations (not additional Treatment Phases). Such rehospitalizations should be documented in the Rehospitalization variables (V217, V218 and V219).

All rehospitalizations (med-surg or rehab) while a patient is in a Nursing Home treatment phase are considered Treatment Phases (not rehospitalizations) since the Nursing Home Treatment Phase is a temporary interlude between other treatment phases in the sequence from injury through death/completion of rehabilitation.

Record each treatment phase separately, in sequence by date of admission (or start date).

Document all the following items for each phase:

<table>
<thead>
<tr>
<th>Variable #</th>
<th>Variable Name</th>
<th>Syllabus Page #</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>Treatment Phase Type for SCI</td>
<td>173</td>
</tr>
<tr>
<td>149</td>
<td>System or Non-system</td>
<td>178</td>
</tr>
<tr>
<td>150</td>
<td>Date of Admission (or Start of Phase)</td>
<td>179</td>
</tr>
<tr>
<td>151</td>
<td>Date of Discharge (or End of Phase)</td>
<td>180</td>
</tr>
<tr>
<td>152</td>
<td>Number of Short-term Discharge Days</td>
<td>181</td>
</tr>
<tr>
<td>153</td>
<td>Number of Days in Treatment Phase (computer-generated)</td>
<td>183</td>
</tr>
<tr>
<td>154</td>
<td>Charges (System only)</td>
<td>184</td>
</tr>
<tr>
<td>155</td>
<td>Charges Reliability Code (System only)</td>
<td>185</td>
</tr>
</tbody>
</table>

➢ If there is a delay in obtaining some information (e.g., hospitalization charges), submit the Form I when 80% or more of the information is available and code the missing items “unknown”. Then, update the Form I when the missing data are available.

➢ Data in Variables 154 and 155 are required only for System phases. If V149 = “0”, leave variables V154 and V155 blank.
VARIABLES 148_1 to 148_12

FORM I

VARIABLE NAME: Treatment Phase Type for SCI

DESCRIPTION: This variable documents 5 treatment phase types (for SCI) occurring from the time of injury through the completion of initial inpatient System rehab:

- Acute Medical/Surgical Hospitalization
- Nursing Home
- Inpatient Acute Rehab
- Inpatient Subacute Medical/Surgical Care
- Inpatient Subacute Rehab

CHARACTERS: 1 for each entry, up to 12 entries

CODES:

1 Acute Medical/Surgical Hospitalization – The first inpatient hospitalization following spinal cord injury and any subsequent inpatient hospitalization that takes place for continuing medical or surgical care, or the treatment of a secondary medical complication, until the end of the rehabilitation program or the patient’s death, whichever comes earlier. The facility should be licensed as a hospital where an inpatient bed is assigned to the patient. This includes intensive care unit (ICU) and non-ICU beds and SCI specialty unit beds.

Once a patient is receiving outpatient rehab, all med-surg (sub)acute and inpatient Rehab hospitalizations are considered Rehospitalizations (not additional Treatment Phases). Such rehospitalizations should be documented in the Rehospitalization variables (V217, V218, and V219).

2 Nursing Home – A facility licensed as a nursing home where a patient bed is assigned to the patient, and no rehabilitation services are provided (or rehabilitation is a very minor part of ongoing care). A nursing home unit, separately licensed as a nursing home, may be physically part of a hospital, with permanent or swing beds. Skilled Nursing Facilities (SNF) are also included in this category. Nursing home stays are considered as a treatment phase only if the patient is there on a temporary basis between other treatment phases in the sequence from injury through death/completion of rehabilitation. If the patient is discharged from inpatient rehabilitation (or some other inpatient stay) to a nursing home on a temporary basis, (e.g. awaiting completion of modifications to make the home accessible, or to receive nursing care for some medical problem that cannot be treated at home) then, this nursing home stay is to be reported as a phase.

If rehabilitation is finished and the nursing home is the permanent residence, then code the Nursing Home days in variable 220 (not as a treatment phase) and code “nursing home” (code 03) for Place of Residence (V120D).

3 Inpatient Acute Rehabilitation – A facility licensed as a hospital (either a rehabilitation unit within a hospital or a free-standing rehabilitation hospital) where an inpatient bed is assigned to the patient. The primary purpose of the hospitalization is for rehabilitation, including some combination of physical therapy, occupational therapy, speech therapy, recreational therapy, patient and family education, and rehabilitation psychology, medicine and nursing care. The goal of inpatient acute rehabilitation is to provide 3 or more hours of occupational and/or physical therapy per day, plus other therapies as indicated (Medicare 3-hour rule).
FORM I

VARIABLE NAME: Treatment Phase Type

4 **Inpatient Subacute Medical/Surgical Care** – A licensed facility where an inpatient bed that is specifically designated as a subacute bed is assigned to the patient. A Subacute medical/surgical care unit may be part of a hospital or of a nursing home; the designation of the unit as subacute is crucial. Limited or no rehabilitation services are provided. Typically, these are patients who have continuing medical problems and are not yet ready for a full rehabilitation program, or have completed their rehabilitation and are awaiting resolution of continuing medical problems before discharge to a more permanent location.

5 **Inpatient Subacute Rehabilitation** - A licensed facility (typically part of a hospital or nursing home) where an inpatient bed that is specifically designated as a subacute rehab bed is assigned to the patient. However, unlike Inpatient Subacute Medical/Surgical Care (code 4), the goal is to provide rehabilitation services of at least 1 hour per day of either physical or occupational therapy plus other therapies as indicated and tolerated.

6 **Day Hospital Rehabilitation Services** *This is NOT a valid code in Form Is with Indates after 03/31/2005*

7 **Outpatient Rehabilitation** *This is NOT a valid code in Form Is with Indates after 03/31/2005*

8 **Home Rehabilitation** *This is NOT a valid code in Form Is with Indates after 03/31/2005*

9 **Unknown** - *This is a CONVERSION CODE ONLY for non day-1 patients only (phases 1 and 2 only). Data collectors may not use this code.*

Blank *in coding positions # 2 through #12 only*

See the **Summary Information on the Treatment Phases** table (page 175) for a comparison of the treatment phase types.
## Form 1

**VARIABLE NAME:** Treatment Phase Type for SCI

### Summary Information on the Treatment Phases

<table>
<thead>
<tr>
<th>Treatment Phase</th>
<th>Description of Treatment Facility</th>
<th>Treatment Time Period, Minimal Amount of Services</th>
</tr>
</thead>
</table>
| Acute Medical/Surgical Code 1 | - A licensed hospital where an inpatient bed is assigned to the patient.  
- Includes intensive care unit (ICU) and non-ICU beds and SCI specialty unit beds.  
- For continuing medical or surgical care, or the treatment of a secondary medical complication until the end of the rehabilitation program or the patient’s death, whichever comes earlier. | - The initial inpatient hospitalization following injury  
- Any subsequent inpatient hospitalization from injury through death/completion of rehabilitation that does NOT occur during a Day Hospital, Outpatient Rehab or Home Rehab phase |
| Nursing Home Code 2 | - A facility licensed as a nursing home where a patient bed is assigned to the patient.  
- A nursing home unit, separately licensed as a nursing home.  
- May be physically part of a hospital, with permanent or swing beds.  
- Skilled Nursing Facilities (SNF) are also included in this category. | - A temporary stay between other treatment phases in the sequence from injury through death/completion of rehabilitation  
- A short-term stay awaiting return to the permanent residence  
- No rehabilitation services are provided or rehabilitation is a very minor part of ongoing care |
| Inpatient Acute Rehabilitation Code 3 | - A facility licensed as a hospital where an inpatient bed is assigned to the patient.  
- Either a rehabilitation unit within a hospital or a free-standing rehabilitation hospital. | - A combination of rehab services  
- 3 or more hours of therapy per day planned |
| Inpatient Subacute Medical/Surgical Care Code 4 | - A licensed facility where an inpatient bed that is specifically designated as a subacute bed is assigned to the patient.  
- Typically located in a hospital or nursing home. | - Limited or no rehabilitation services  
- For patients who have continuing medical problems and are not yet ready for a full rehabilitation program or  
- For patients who are awaiting resolution of medical problems before discharge to (sub)acute rehab or to a permanent residence location. |
| Inpatient Subacute Rehabilitation Code 5 | - A licensed facility where an inpatient bed that is specifically designated as a subacute bed is assigned to the patient.  
- Typically located in a hospital or nursing home. | - Physical or occupational therapy plus other therapies as indicated or tolerated  
- At least 1 hour per day planned |
VARIABLES 148_1 to 148_12

FORM I
VARIABLE NAME: Treatment Phase Type for SCI

COMMENTS: Code each phase in sequence, by date. Code up to 12 treatment phases. At least 1 treatment phase must be coded; coding positions #2 through #12 may be blank.

Dates cannot overlap. A patient can be in only 1 treatment phase at a time (i.e., a patient cannot be in an acute medical/surgical bed and in a rehab bed on the same day but, the discharge date of one can be the admit date for the next).

See page 211 for instructions on coding rehospitalizations that occur after discharge from an inpatient facility and before the completion of initial rehab.

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

January 2005: data are no longer collected on any outpatient treatment phases. Therefore, codes 5, 6 and 7 are not valid in V148 for any Form Is with Indate1 after 03/31/2005.

EXAMPLE 1: John was injured on May 12, 2000. The EMS took him from the site of the injury to the Model System hospital emergency department. After a number of hours, he was admitted to the SCI unit, where he stayed until May 31. That day he was transferred to the System's acute rehabilitation unit, where he spent a month. He was discharged home on July 1 with a planned readmission for more inpatient rehabilitation later. On August 20th he was admitted for more inpatient rehab and, on August 30th he was discharged home. The attending physician and the team members decided at this time that his treatment had been successful and all goals accomplished.

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>1</th>
<th>2</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>149</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>150</td>
<td>5/12/2000</td>
<td>05/31/2000</td>
</tr>
<tr>
<td>151</td>
<td>5/31/2000</td>
<td>08/30/2000</td>
</tr>
<tr>
<td>152</td>
<td>000</td>
<td>050</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Treatment Phase Type for SCI

EXAMPLE 2: Mary was injured on November 12, 2000 and she was immediately brought to the emergency department of a large tertiary care facility, not part of the Model System. She was admitted to the surgical ICU on November 13. At the insistence of her insurance carrier, she was moved to the model system SCI ICU on November 15. She was transferred to a non-ICU surgical bed on December 12 and was ready for rehabilitation on January 4, 2001. Her physician had wanted to admit her to the SCI unit of the System's rehabilitation facility, but the carrier intervened, sending her instead to a small, newly opened freestanding rehabilitation hospital. She was discharged home on March 12, 2001.

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>Treatment Phase</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>149</td>
<td>System or Non-system</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>150</td>
<td>Date of Admission (or Start of Phase)</td>
<td>11/12/2000</td>
<td>11/15/2000</td>
</tr>
<tr>
<td>151</td>
<td>Date of Discharge (or End of Phase)</td>
<td>11/15/2000</td>
<td>01/04/2001</td>
</tr>
</tbody>
</table>

EXAMPLE 3: Andrew was injured on April 17, 2000, admitted to a community hospital, and transferred to the Model System’s acute medical facility on the 21st. His medical program was completed on the 29th, but because of a halo brace, he could not start rehabilitation services. He was admitted to a nursing home bed in a nursing home affiliated with the System, and from there to the acute rehabilitation program on May 27. He was discharged home on June 17, 2000.

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>Treatment Phase</td>
<td>1</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>149</td>
<td>System or Non-system</td>
<td>0</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>150</td>
<td>Date of Admission (or Start of Phase)</td>
<td>04/17/2000</td>
<td>04/21/2000</td>
<td>04/29/2000</td>
</tr>
<tr>
<td>151</td>
<td>Date of Discharge (or End of Phase)</td>
<td>04/21/2000</td>
<td>04/29/2000</td>
<td>05/27/2000</td>
</tr>
</tbody>
</table>

EXAMPLE 4: Carol was injured on February 12, 2000 and admitted to the System’s spinal injury intensive care unit. She was transferred to a non-ICU bed on February 18, and to the rehabilitation unit on March 13. However, on March 17 she developed high fever and was transferred back to a medical unit, until March 22. Her doctors decided that she would do better in a subacute rehabilitation program, and she was admitted to a subacute unit in a nursing home affiliated with the System. In this rehabilitation unit, her course was smooth, and she was discharged home on April 23.

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>Treatment Phase</td>
<td>1</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>149</td>
<td>System or Non-system</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

NOTE: all complications and operative procedures performed after rehab admission (i.e., after March 13th) are to be recorded as having occurred “during rehab” (including the complication for which she was sent back to the acute medical unit on March 17th).
FORM I

VARIABLE NAME: Treatment Phase Type for SCI

COMMENTS: For a complete overview of phases, the *entire* sequence of inpatient services and entities providing them, from injury to a *permanent* residence in the community, needs to be investigated and reported. A permanent residence is generally a private residence, but it may be a nursing home or a long-term hospital, if that is where the patient is discharged to as the permanent residence. If the patient is discharged to a nursing home on a *temporary* basis, e.g. to await making the own home accessible, then the nursing home stay is to be reported as the (last) phase of the sequence.

If a patient dies before the completion of inpatient rehabilitation the discharge date of the last phase reported should be the same as the day of death.

The first phase generally will be an acute med surg admission (code 1). It cannot be a rehab admission (code 3 or 5), and code 2 or 4 are also very unlikely if not impossible. If the first phase is before the patient receives model system services, it is to be reported. The admit date of the first phase will generally be the same as the date of injury, in some circumstances the next day.

Note: in multihospital systems, there probably is only one legal entity, but each hospital is *licensed* separately. The separate licensing should be considered as creating two phases if the patient moves between hospitals within a system. If a hospital has two buildings, but they are licensed together as one hospital, a change of the patient’s bed from one building to another is not the start of a new phase – as long as the nature of the services does not change such that a different V148 code is needed.

Both the type of services and who provides them are to be considered in deciding whether a phase is to be reported. Examples of special situations:

- Within XYZ general hospital, the patient moves from acute med surg (code 1) to inpatient acute rehab (code 3) = two phases
- Within XYZ general hospital, patient moves from acute med surg unit A (code 1) to acute med surg unit B (code 1) = one phase (starting with admission to A, and ending with discharge from B)
- Patient moves from acute med surg unit in XYZ general hospital (code 1) to acute med surg unit in DFG hospital (code 1) = two phases (two hospitals are involved).
- Patient is admitted to the SCI unit of hospital ABC, and first receives acute care (code 1) and then rehab care (code 3) = 2 phases. The decision by the physician/project director as to what is the last acute day, and what is the first day of rehabilitation determines the admission and discharge dates of the phases.
FORM I

VARIABLE NAME: System or Non-system

DESCRIPTION: This variable documents if the treatment phase occurred in a Model System facility or in a non Model System facility.

CHARACTERS: 1 for each entry; up to 12 entries

CODES:

0 Non-system
1 System

Blank (in coding positions # 2 through #12 only if corresponding V148 = blank)

COMMENTS: Provide this information for each treatment phase documented in variable 148. Unknowns are not allowed in this variable.

“Model System” refers to the fact that the Project Director and other Model System senior staff have some degree of control over the nature, quality, and quantity of services offered; and, that services, admission, and discharge are coordinated with other Model System components. The organization that is the Model System grant recipient does not need to own the hospital, nursing home, outpatient rehab facility in which services are offered.

When a person continues the initial rehab process at another currently funded Model System the treatment phase at the subsequent system is considered “in System”. The system that first treated the patient is responsible for submitting the Form I and all Form IIs for that patient.

QC: If V149 = “0” then, leave variables 154 and 155 blank.

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

EXAMPLES: See pages 176 to 177A.
**FORM 1**

**VARIABLE NAME:** Date of Admission to the Treatment Phase

**DESCRIPTION:** This variable identifies the date of admission to the treatment phase being documented. Treatment phases may occur in or out of the System.

Document each admission date to Acute Medical/Surgical Hospitalization, Nursing Home, Inpatient Acute Rehab and Inpatient Subacute Medical/Surgical Care, Inpatient Subacute Rehab.

**CODES:**

Any valid date

Blank (in coding positions #2 through #12 only if corresponding V148 = blank)

99 Unknown month or day

9999 Unknown year

99999999 Entire date unknown

**COMMENTS:** Provide this information for each treatment phase documented in variable 148. The end of a phase is when all services end (even though they may have dropped below the minimum level specified in the phase criteria at an earlier date). See pages 176 to 177A for more information.

Record the month, day and year. Unknowns are allowed in this variable only for non-system treatment phases.

This variable cannot be stored in date format since non-valid dates and non-valid parts of a date are allowed.

**REVISIONS:** October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

**EXAMPLES:** See pages 177A to 177E.
VARIABLE NAME: Date of Discharge from the Treatment Phase

DESCRIPTION: This variable identifies the date of discharge from the treatment phase being documented. Treatment phases may occur in or out of the System.

Document each discharge date from Acute Medical/Surgical Hospitalization, Nursing Home, Inpatient Acute Rehab, Inpatient Subacute Medical/Surgical Care and Inpatient Subacute Rehab.

Code up to 12 treatment phases.

CHARACTERS: 8 for each entry, up to 12 entries

FORMAT: mmddyyyy

CODES: Any valid date

99     Unknown month or day
9999   Unknown year
99999999    Entire date unknown

Unknowns are allowed only for non-System phases.

Blank    (in coding positions # 2 through #12 only if corresponding V148 = blank)

COMMENTS: Provide this information for each treatment phase documented in variable 148. The end of a phase is when all services end (even though they may have dropped below the minimum level specified in the phase criteria at an earlier date). See pages 176 to 177A for more information.

Record the month, day and year. Unknowns are allowed in this variable only for non-system treatment phases.

This variable cannot be stored in date format since non-valid dates and non-valid parts of a date are allowed.

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

EXAMPLES: See pages 176 to 177A.
VARIABLE NAME: Number of Short-term Discharge Days during the Treatment Phases

DESCRIPTION: This variable documents the actual number of days spent out of the hospital or nursing home (system or non-system) on short-term discharge(s) during an inpatient type treatment phase. **These are days for which hospitalization charges are not incurred.**

Short-term discharges are, for example, for the purpose of home adjustment or interruptions in the inpatient rehabilitation process due to the stabilization process (for body jackets, halos, etc.). There is intent to return for additional inpatient services and, the patient spends the time in a private residence. If, during this period of time, the patient is in a nursing home, subacute medical/surgical unit, etc. report this as a separate phase (since charges are incurred). Short-term discharge days always occur DURING a phase – never between phases.

Document short-term discharges occurring during Acute Medical/Surgical Hospitalization, during Nursing Home admissions, during Inpatient Acute Rehab, during Inpatient Subacute Medical/Surgical Care and during Inpatient Subacute Rehab. These days are not included in the lengths of stay for any of these phases.

Code this item for each treatment phase (codes “1”, “2”, “3”, “4” or “5”) that is recorded in variable 148.
VARIABLES 152_1 to 152_12

(PAGE 2 OF 2)

FORM I

VARIABLE NAME: Number of Short-term Discharge Days
CHARACTERS: 3 for each entry, up to 12 entries
CODES:

000 None
000 - 887 Valid range

888 Yes short-term discharge days, number unknown

Note: the use of code 888 to indicate Not applicable, outpatient treatment phase was valid in Form Is with Indates up to 03/31/2005 when the corresponding V148 = 6, 7 or 8.

Blank (in coding positions # 2 through #12 only if corresponding V148 = blank)

999 Unknown if there were any short-term discharge days

Code 999 is allowed

- for all non-system admissions, in all inpatient phase types (Acute Medical/Surgical Hospitalization, Nursing Home, Inpatient Acute Rehab, Inpatient Subacute Medical/Surgical Care and Inpatient Subacute Rehab);

- for system admissions: only for Nursing Home admissions, Inpatient Subacute Medical/Surgical Care admissions and Inpatient Subacute Rehab admissions in records with in-dates prior to 11/1/2000;

- for system admissions, in the Acute Medical/Surgical Hospitalization and Inpatient Acute Rehab phases, as a conversion code only in records with in-dates prior to 2/1/1996.

COMMENTS: This variable cannot be computed by the NSCISC’s software.

REVISIONS: In November 1995 the old Number of Short-term Discharge Days variable (pre Nov. 1995 variable #125) was separated into 2 variables: Number of Short-term Discharge Days During Acute Care (pre Oct. 2000 variable 106A) and During Inpatient Rehab (pre Oct. 2000 variable 106B).

October 2000: Number of Short-term Discharge Days during Nursing Home admissions, Inpatient Subacute Medical Care and Inpatient Subacute Rehab were added to the database. Data are required for patients admitted to the System after 10/31/2000.

January 2004: Code 888 may be used if there were short-term discharge days but the number of days is not known (for phase type codes 1 through 5).

EXAMPLES: See page 186.
VARIABLE NAME: Number of Days in Treatment Phase

DESCRIPTION: This is the number of days between admission to and discharge from Acute Medical/Surgical Hospitalization, Nursing Home, Inpatient Acute Rehab and Inpatient Subacute Medical/Surgical Care, Inpatient Subacute Rehab (minus the short-term discharge days).

These days do not include short-term discharge days.

Code this item for each treatment phase documented in variable 148. This variable can be calculated by the NSCISC's software.

CHARACTERS: 4 for each entry, up to 12 entries

CODES:

1 to 9998 Valid range
Blank (in coding positions #2 through #12 only if corresponding V148 = blank)
9999 Unknown

Code 9999 is allowed

- for all non-system inpatient treatment phase types;
- for system admissions only for Nursing Home admissions, Inpatient Subacute Medical/Surgical Care admissions and Inpatient Subacute Rehab admissions in records with in-dates prior to 11/1/2000;
- for system admissions, in the Acute Medical/Surgical Hospitalization and Inpatient Acute Rehab phases, as a conversion code only in records with in-dates prior to 2/1/1996.

REVISIONS: November 1995: the old Number of Days Hospitalized in System variable (pre-11/95 variable #127) was separated into 2 variables: Number of Days Hospitalized in Acute Care (pre-Oct. 2000 variable V109A) and in Inpatient Rehab (pre-Oct. 2000 variable V109B).

October 2000: Number of Days in Day Hospital, Outpatient Rehab and Home Rehab were added to the database.

SOFTWARE: During the PROCESS function, the computer calculates variable 153 using the dates in variable 150 and variable 151 minus the number of days in variable 152. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button. If V152 = 999 then, this variable = 9999.

EXAMPLES: See page 186.
VARIABLE NAME: Charges

DESCRIPTION: This variable documents the charges incurred during each System inpatient treatment phase. Leave this variable blank for all non-System inpatient treatment phases. Document the charges for each treatment phase coded in variable 148 and received at a System facility during each phase of Acute Medical/Surgical Hospitalization, Nursing Home, Inpatient Acute Rehab, Inpatient Subacute Medical/Surgical Care, Inpatient Subacute Rehab. Charges include room and board, X-ray, laboratory, pharmacy, inpatient rehabilitation medicine (occupational therapy, physical therapy, respiratory therapy, neurological program), central supply, intensive care unit, operating room, recovery room, anesthesia, nuclear medicine and all other costs associated with the treatment phase. Physician fees may or may not be included (as coded in V155).

CHARACTERS: 7 for each entry, up to 12 entries

CODES:

- **0000000** Conversion code only (data collectors are not allowed to use this code)
- **0 to 9999998** Valid range
- **9999999** Unknown (and, use code 9 in V155)
- **Blank** (for all non-system treatment phases, in all coding positions)
- **Blank** (in coding positions # 2 through #12 for system and non-system phases if corresponding V148 = blank)

COMMENTS: This variable is collected only for system inpatient treatments. If the treatment phase occurs at a non-system facility leave this variable blank. Document the charge to the nearest dollar but do not round up. In the corresponding variable 155, document the data reliability (actual or estimated) and whether or not these charges include physicians’ fees. Use code 9999999 for the indigent patient. Some Systems have access only to the Total Charges and will not able to divide charges into the individual treatment phases. In this case,

- Code this Charges variable (V154) “9999999” and code V155 (Reliability code) “9”.
- Then, enter the Total in the Total Charges variable (V164) and the applicable Reliability Code for Total Charges in variable 165.
- When you do this, do NOT use the software’s calculation function to calculate variable 164. If you do use the software function, the results in V164 will be “9999999”.

QC: See page 178.

REVISIONS: 2001: The code for Unknown was changed from “0000000” to “9999999”. The remaining zeros are in records of patients for whom acute and rehab lengths of stay could not be differentiated. In these cases, all charges were attributed to the rehab length of stay.

EXAMPLES: See page 186.
FORM 1

VARIABLE NAME: Reliability Codes for Charges

DESCRIPTION: This variable documents (1) the reliability of the charges coded in variable 154 and (2) whether or not these charges include physicians' fees.

Document the reliability of charges for each phase coded in variable 148 that was received at a System facility. Leave this variable blank for all non-System treatment phases.

CHARACTERS: 1 for each entry, up to 12 entries

CODES:

Actual charges

1 Includes physicians' fees
2 Does not include physicians' fees
5 Inclusion of physicians’ fees unknown

Estimated charges

3 Includes physicians' fees
4 Does not include physicians' fees
6 Inclusion of physicians’ fees unknown

9 Unknown (V154 must = “9999999” and vice versa)

Blank (for all non-system treatment phases, in all coding positions)

Blank (in coding positions # 2 through #12 for system and non-system phases if corresponding V148 = blank)

COMMENTS: This variable is collected only for system treatments. If the treatment phase occurs at a non-system facility leave this variable blank.

A reliability code of “9” is not allowed with a known dollar amount in the corresponding V154.

QC: See page 178.

REVISIONS: November 1995: The change in the reporting policy to allow charges that include physicians' fees was implemented in 1995. This change was made to accommodate those systems for whom itemized charges were not available and, therefore, it was impossible to exclude the physicians' fees. Codes “5” or “6” were used to convert existing data.

October 2000: Codes “5” and “6” are allowed in any record.
VARIABLE NAME: Reliability Codes for Charges

EXAMPLE: The patient was first admitted to a non-System acute unit during October 2000 (the exact day of the month is not known). He was discharged from this unit on October 15, 2000. Number of short-term discharge days is unknown.

The same patient was admitted to a Model System acute unit on October 15, 2000 and discharged on October 20, 2000. The charges for this phase were $16,800. Physician fees were included in some, but not all charges.

On October 20, 2000 the patient was admitted to the system’s inpatient acute rehab unit and discharged from there on November 12, 2000. The actual charge (with no physicians’ fees) for this phase was $29,808. There were no short-term discharge days in phases 2 and 3.

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>1</th>
<th>2</th>
<th>3</th>
</tr>
</thead>
<tbody>
<tr>
<td>148</td>
<td>Treatment Phase Type for SCI</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>149</td>
<td>System or Non-system</td>
<td>0</td>
<td>1</td>
</tr>
<tr>
<td>151</td>
<td>Date of Discharge (or End of Phase)</td>
<td>10/15/2000</td>
<td>10/20/2000</td>
</tr>
<tr>
<td>152</td>
<td>Number of Short-term Discharge Days</td>
<td>9999</td>
<td>000</td>
</tr>
<tr>
<td>153</td>
<td>Number of Days in Treatment Phase</td>
<td>9999</td>
<td>0005</td>
</tr>
<tr>
<td>154</td>
<td>Charges</td>
<td>16800</td>
<td>29808</td>
</tr>
<tr>
<td>155</td>
<td>Charges Reliability Code</td>
<td>5</td>
<td>2</td>
</tr>
</tbody>
</table>
FORM I

VARIABLE NAME: Hours of Physical Therapy

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
VARIABLES 157_1 to 157_12

FORM I

VARIABLE NAME: Hours of Occupational Therapy
REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
FORM I

VARIABLE NAME: Hours of Recreational Therapy

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
FORM 1

VARIABLE NAME: Hours of Vocational Rehab

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
VARIABLES 160_1 to 160_12

FORM I

VARIABLE NAME: Hours of Psychological Counseling

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
VARIABLES 161_1 to 161_12

FORM I

VARIABLE NAME: Hours of Social Worker Services

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
FORM I

VARIABLE NAME: Hours of Other Therapy

REVISIONS: October 2000: this variable was added to the database. Data are required for patients admitted to the System after 10/31/2000.

December 2004: variable was deleted.
VARIABLE NAME: Hours of Other Therapy

December 2004: variable was deleted.
VARIABLES 163A and 163R

FORM I

VARIABLE NAME: Total Number of Days Hospitalized in the System's Acute (and Subacute) Medical/Surgical Care Unit and Total Days Hospitalized in the System's Inpatient Acute (and Subacute) Rehabilitation Unit

DESCRIPTION: These variables document:

1) total length of stay in the System's acute (and subacute) medical/surgical care unit (Variable 163A) and

2) total length of stay in the System's inpatient acute (and subacute) rehab unit to discharge from the last inpatient rehab phase (Variable 163R).

These variables can be calculated by the NSCISC's software.

CHARACTERS: 4 for each entry, 2 entries

CODES: 1-8888 Valid range

8888 Not applicable not admitted to the System's Acute (or Subacute) Medical/Surgical Care Unit (V163A)

8888 Not applicable, not admitted to System inpatient rehab unit (V163R)

9999 Unknown (not allowed in records with in-dates after 2/1/1996)

NOT a valid code in Form Is with Indates after 03/31/2005 unless the patient expired, achieved complete recovery or minimal deficit status during System acute care

COMMENTS: If the patient was never admitted to the System inpatient rehab unit, code variable 163R “8888”.

Persons with minimal neurologic impairment on admission into the system who complete inpatient rehab in the system's acute care unit may continue to be included in the database if they are hospitalized in the system more than 1 week.

Data in these variables are required of patients who are admitted to the system on or after December 1, 1995.

REVISIONS: November 1995: the old Number of Days Hospitalized in System variable (old variable #127) was separated into 2 variables: Number of Days Hospitalized in Acute Care (V109A) and Inpatient Rehab (V109R).

The unknown code (“9999“) is not allowed in records with indates after 2/1/1996.

SOFTWARE: During the PROCESS function, the software calculates V163A by summing the values in variables 153_1 through V153_12 IF V148=1 (or 4) and V149=1. The software calculates V163R by summing the values in variables 153_1 through V153_12 IF V148=3 (or 5) and V149=1. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.

QC: See pages 65 and 67 and, IF <Indate1> > 03/31/2005 and [(<V110> <> <V145>) and (V131D not equal 3 or 6 or 7)] THEN V163R cannot = 8888.
VARIABLE 164

FORM I

VARIABLE NAME: Total System Hospitalization Charges

DESCRIPTION: This variable documents the total charges incurred during the initial System inpatient hospitalization period. This variable is the sum of the amounts in 154_1 through V154_12, for system hospitalizations, for the acute (and sub-acute) medical and inpatient acute (and sub-acute) rehab treatment phases only, for day-1 admissions only.

Charges include room and board, X-ray, laboratory, pharmacy, inpatient rehabilitation medicine (occupational therapy, physical therapy, respiratory therapy, neurological program), central supply, intensive care unit, operating room, recovery room, anesthesia, nuclear medicine and all other costs associated with the treatment phase. Physician fees may or may not be included.

CHARACTERS: 7

CODES: 1 to 9999998 Valid range

8888888 Not applicable [System treatment phase(s) were all out-patient only; (code V165 “8”)]

NOT a valid code in Form Is with Indates after 03/31/2005

9999999 Unknown (code V165 “9”)

Blank For non-day-1 admissions

COMMENTS: This variable is the sum of the amounts in 154_1 through V154_12, for System acute medical and System inpatient acute rehab treatment phases (i.e., V148 = “1”, “3”, “4” or “5” AND V149 = “1”), for day-1 admissions only. The charges for treatment phases in the Nursing Home are not included in this variable.

SOFTWARE: The software calculates this variable by adding the amounts in V154_1 through V154_12 IF the corresponding V149=1 AND the corresponding V148=1, 3, 4 or 5 and V109A = 001. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
VARIABLE NAME: Reliability Codes for Total System Hospitalization Charges
DESCRIPTION: This variable documents (1) the reliability of the Total Charges coded in variable 164 and (2) whether or not these charges include physicians’ fees (for day-1 admissions only).

CHARACTERS: 1
CODES:

Actual charges

1 Includes physicians' fees
2 Does not include physicians' fees
5 Inclusion of physicians’ fees unknown

Estimated charges

3 Includes physicians' fees
4 Does not include physicians' fees
6 Inclusion of physicians’ fees unknown

8 Not applicable [System treatment phase(s) were all out-patient only; (code V164 “8888888”)]
   NOT a valid code in Form Is with Indates after 03/31/2005

9 Unknown (V164 must = “9999999”)
Blank For non-day-1 admissions

COMMENTS: This variable is to document only system acute (and sub-acute) medial and System inpatient acute (and sub-acute) rehab treatment phases, for day-1 admissions only. See page 196 for more information. A reliability code of “9” is not allowed with a known dollar amount in V164.

SOFTWARE: The software calculates this variable by using the codes in V155_1 through V155_12 IF the corresponding V149=1 AND the corresponding V148=1, 3, 4 or 5. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.

The formula is:
If any V155 = 9 then V165 = 9.
Else: if any V155 = 6, then V165 = 6.
Else: If any V155 = 4, then V165 = 4.
Else: If any V155 = 3, then V165 = 3.
Else: If any V155 = 5, then V165 = 5.
Else: If any V155 = 2, then V165 = 2.
Else: If any V155 = 1, then V165 = 1.
Else: If any V155 = blank, then V165 = blank.

REVISIONS: November 1995: The change in the reporting policy to allow charges that include physicians' fees was implemented in 1995. This change was made to accommodate those systems for whom itemized charges were not available and, therefore, it was impossible to exclude the physicians' fees. Codes “5” or “6” were used to convert existing data.
October 2000: Codes “5” and “6” are allowed in any record.
VARIABLE NAME: Post-injury/Anniversary Year

DESCRIPTION: This variable documents the post-injury year being reported. When Form IIs are required, they should be submitted as soon as possible following the annual anniversary date of the patient's injury. Form II data submission is required of all patients in post-injury years 1, 5, 10, 15, 20, 25 and 30. Data submission in other years is permitted, but not required.

CHARACTERS: 2

COMMENTS: Do not submit any Form IIs until after the patient has been discharged from the initial hospitalization period. If a patient is still in the initial hospitalization period on his first anniversary, do not submit a Year 1 Form II. Document all the events occurring through discharge from the initial hospitalization on Form I.

The first Form II will document only the events occurring in the interval between discharge from the last System inpatient phase and the first anniversary date of the patient's spinal cord injury. This is often an incomplete year; however, subsequent Form IIs will contain data for complete follow-up years. See page 16 for information on patients who are still in the initial hospitalization period past their first anniversary.

EXAMPLE 1: The patient was injured on 06/18/77 and discharged on 09/02/77.

Data Collection Form        Time Period Covered
FORM I:                06/18/77 through 09/02/77
FORM II, Year 1:         09/03/77 through 06/17/78
Year 2:                  06/18/78 through 06/17/79 (not a required form)
Year 5:                  06/18/81 through 06/17/82

EXAMPLE 2: The patient was injured on 06/18/77, still hospitalized on his first anniversary, and discharged on 07/18/78.

Data Collection Form        Time Period Covered
FORM I:                06/18/77 through 07/18/78
FORM II, Year 1:         NO FORM II
Year 2:                  07/19/78 through 06/17/79 (not a required form)
Year 5:                  06/18/81 through 06/17/82
VARIABLE NAME: Category of Follow-up Care Provided by the Model SCI System

DESCRIPTION: This variable describes the type of medical care being provided to the patient by the System on the anniversary date being reported.

CHARACTERS: 1

CODES:

1 Primary or Major Consulting Care: Patient does not have an identified health care provider (physician/institution) outside the System and receives all medical care through the System OR the patient has an identified health care provider (physician/institution) outside the System but receives some SCI related medical care that may include annual evaluations through the System. All variables on Form II must be completed when this code is used.

4 Data Collection Only: Follow-up data collection requires telephone/correspondence contact. No scheduled patient contact for medical care during the follow-up year (the patient is still in the original System or, the patient’s primary or major consulting care has been transferred to another federally-designated System). After transfer, the System that originally submitted the Form I remains responsible for obtaining and submitting follow-up data.

All interview variables on Form II must be completed and the annual exam variables (V211-V213) and neurological exam variables (V244-V249) must be coded “Unknown, not done” when this code is used. (see QC pg 200)

5 Lost to System: Patient's whereabouts are unknown; or patient refuses; or patient is not allowed to participate in data collection; or a third party refuses access to the patient (e.g. prison authorities); or patient does not return the interview form; or the patient refuses to sign the current consent form. The System is unable to obtain data for the entire follow-up year.

When this code is used, it is necessary to complete only variables 201 and 202. Provide the “Reason for Lost” in V202. Variables 203 through 249 should be blank.

Once a patient has been reported "lost to system" in a follow-up year, consecutive “lost” Form IIs should not be submitted. The patient still remains eligible for future follow-up but future Form IIs should not be submitted unless the patient’s Category of Follow-up Care changes from “lost”.

8 Not Applicable: During the follow-up year being reported, the patient's neurologic status was "normal" or "minimal deficit". No further data collection will be required. This category supersedes category of care codes 1, 4 and 6. All variables on Form II must be completed when this code is used.

When a patient’s neurologic status changes to normal or minimal deficit, a Form II for the year in which the change occurred should be submitted (even if the year is not a required data submission year). This ensures that the recovery will be reported in the proper year and that future follow-up will not be required after that year.

9 Unknown
FORM II

VARIABLE NAME: Category of Follow-up Care Provided by the Model SCI System

REVISIONS: January 1998: V203A (Reason for Lost) was added.

October 2000: For “Transferred” patients, continued follow-up data are required from the System that submitted the Form I.

June 2001: Code “6” (Transferred) was deleted. Transferred patients were moved to code “4” (Data Collection Only).

CONVERSIONS: January 1985: The "Deceased" category (old code 7) was deleted. Records using old code "7" were changed to code "9".

November 1995: codes 1 and 2 were combined into 1 category and the restriction of only 3 consecutive years of Data Collection Only was removed.

June 2001: records with code 6 were changed to code 4.

COMMENTS: If, after 3 months following a patient's anniversary date, there is absolutely no hope of obtaining data on a patient, a Form II should be submitted declaring the patient lost to system. An update can always be submitted if information becomes available in the future.

If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.

For telephone interview: if your IRB allows, you may get a verbal consent (with a witness?). If both the patient and the witness agree, you may proceed with the interview. If a patient transfers to another currently-funded Model System and the IRBs from both systems agree to a telephone waiver, this allows both systems to share data on the transferred patient.

QC: See page 101 for coding instructions for patients with minimal deficit or normal neurologic status.

If Variable 201 = “4” (Data collection only) then:

variables 211 through 213 and variables 244 through 249 must be coded Unknown, not done.

If Variable 201 = “5” (Lost) then:

variable 202 cannot be coded “8” (Not applicable, not lost) and all variables from V203 through V249 must = blank.
**VARIABLE 202**

**VARIABLE NAME:** Reason for Lost

**DESCRIPTION:** This variable documents the reason the patient is currently coded “lost” in the Category of Care variable (V201).

**CHARACTERS:** 1

**CODES:**

1 Patient refused/withdrew consent

2 Patient incarcerated and not available

3 Unable to contact after all attempts recommended by the Tracking Committee* have failed or patient agreed to complete the interview form but did not return the form

4 Other

8 Not applicable, patient not coded “5” in V201 (use this code if V201 = “1”, “4”, “8” or “9”)

9 Unknown - This is a CONVERSION CODE ONLY. Data collectors may NOT use this code. This information is provided for data analyses purposes only.

**COMMENTS:**

*These are the Follow-up Tracking Committee’s conditions for which you may use code 3:

A) There should be more than one attempt to schedule a patient for follow-up evaluations in the clinic.

B) After obtaining the most current, valid, phone number, there should be at least six attempts to contact a person. These attempts should be made at different times during the day, evening and weekends.

C) If unable to contact by telephone, a survey requesting the data should be mailed to the patient’s home.

Once you have made all these attempts to find a patient, you do not need to repeat the process for the next required data submission year.

If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.

See Appendix D for follow-up tips.

**REVISIONS:** January 1998: This variable was added and the information will be used by the Follow-up Tracking Committee to delete some “lost” patients from their tracking reports. Data are required in records newly entered into the database after 2/1/98 and optional in “lost” records present in the database prior to 2/1/98. However, it is in the system’s best interests to complete this variable for all patients who are currently coded lost. It is STRONGLY suggested that all systems provide data in this variable for patients whose last Form II = lost.

**CONVERSION:** January 1998: for all Form IIs in the database at this time and coded lost in V201, code “9” (unknown) was inserted in this variable.

**QC:** If this variable = “8” (not applicable) then:

V201 must NOT be coded “5”.

NSCISC: 01/2004

201
FORM II

VARIABLE NAME: Change in Marital Status

DESCRIPTION: This variable documents change in marital status between the current Form II and the last Form II with known marital status data. When coding the year 1 Form II, this variable documents the change in marital status between injury and the year 1 anniversary.

CHARACTERS: 1

CODES:

0  No change
1  Divorce
2  Marriage
3  Widowed
4  Divorce + marriage (in either order)
5  Widowed + marriage (in either order)
6  Divorce, marriage + widowed (in any order: DMW, MDW, WMD)
7  Other
9  Unknown

Blank  (only if V201 = “5”)

COMMENTS: When asking the patient this question, the interviewer will need to cue the patient concerning the appropriate time period. For example, if data are being collected for year 10 and the patient has Form IIs for years 5 and 1 but marital status was unknown in year 5, the interviewer should ask for the changes that occurred since year 1. Ignore separations whether temporary or permanent.

EXAMPLE 1: At the time of injury, the patient was single. The patient married shortly after being discharged and was still married at the time of his first anniversary of injury.

<table>
<thead>
<tr>
<th>Form I</th>
<th>Form II, year 01</th>
</tr>
</thead>
<tbody>
<tr>
<td>V121 Marital Status</td>
<td>V204 Marital Status</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

EXAMPLE 2: The patient is being interviewed for his year 01 anniversary. He was married at the time of injury but is now separated.

<table>
<thead>
<tr>
<th>Form I</th>
<th>Form II, year 01</th>
</tr>
</thead>
<tbody>
<tr>
<td>V121 Marital Status</td>
<td>V204 Marital Status</td>
</tr>
<tr>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

There was no legal change in marital status since the patient was only separated (not legally divorced).
VARIABLE NAME: Change in Marital Status

EXAMPLE 2: At the time of injury, the patient was married to his first wife. The patient was “lost” during year 01. During year 03 the patient divorced and in year 04, he married his second wife. At his 5th anniversary, the patient was still married to his second wife.

<table>
<thead>
<tr>
<th>Form I</th>
<th>Form II, year 01</th>
<th>Form II, year 05</th>
</tr>
</thead>
<tbody>
<tr>
<td>V121</td>
<td>V204</td>
<td>V209</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Marital Status</td>
<td>Change in Marital Status</td>
</tr>
<tr>
<td>2</td>
<td>blank</td>
<td>2</td>
</tr>
</tbody>
</table>

EXAMPLE 3: The patient was single at the time of her first anniversary and her marital status on her year 05 Form II was unknown.

These are the pre-interview codes in the patient’s Form II records:

<table>
<thead>
<tr>
<th>Year 01</th>
<th>Year 05</th>
</tr>
</thead>
<tbody>
<tr>
<td>V204</td>
<td>V204</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Marital Status</td>
</tr>
<tr>
<td>1</td>
<td>9</td>
</tr>
</tbody>
</table>

Her status on the 10th anniversary was married. Since marital status on her 5th anniversary was unknown, the interviewer asked her for all changes in marital status since her first anniversary. She said that she married 2 years after her injury and her first husband died in her 6th anniversary year. She remarried 7 years after her injury.

These are the post-interview codes (if the data collector does not update the year 05 Form II):

<table>
<thead>
<tr>
<th>Year 01</th>
<th>Year 05</th>
<th>Year 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>V204</td>
<td>V204</td>
<td>V209</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Marital Status</td>
<td>Change in Marital Status</td>
</tr>
<tr>
<td>1</td>
<td>9</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td>2</td>
<td>5</td>
</tr>
</tbody>
</table>

However, if the data collector chooses to update the year 05 data, these are the post-interview codes:

<table>
<thead>
<tr>
<th>Year 01</th>
<th>Year 05</th>
<th>Year 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>V204</td>
<td>V204</td>
<td>V209</td>
</tr>
<tr>
<td>Marital Status</td>
<td>Marital Status</td>
<td>Change in Marital Status</td>
</tr>
<tr>
<td>1</td>
<td>2</td>
<td>2</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>

NOTE: data collectors are encouraged to update records whenever new data are available.
VARIABLE NAME: Date of the Annual Examination

DESCRIPTION: This variable specifies the date on which the annual physical examination (i.e., history and physical by a physician) was performed.

CHARACTERS: 8

CODES: Any valid date

- 88888888 Not applicable, no annual examination
- 99999999 Unknown
- Blank (only if V201 = “5”)

FORMAT: mmddyyyy

COMMENTS: Code the month, day and year of the examination. Partial unknown dates (i.e., unknown in the month, day or year) are not allowed in this variable. Use the Unknown code (99999999) if it is not known whether or not the patient had an annual exam.

When data for an annual examination are collected during a system rehospitalization, the date of the exam should be the day on which data for most of the variables are available. When there are multiple exams during a year, use the date on which data for most of the variables are available or, if the data are equally available, use the exam that was done closest to the anniversary date. For the first (or second see page 16 for details) anniversary, it is extremely important to obtain data as close as possible to the anniversary date.

This variable cannot be stored in date format since non-valid date codes (88888888 and 99999999) are allowed.

The following variables are all to be collected on the date coded in this variable:

<table>
<thead>
<tr>
<th>Variable Number</th>
<th>Variable Name</th>
<th>Syllabus Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>212</td>
<td>Grade of Worst Pressure Ulcer</td>
<td>207</td>
</tr>
<tr>
<td>213</td>
<td>Number of Pressure Ulcers</td>
<td>120</td>
</tr>
<tr>
<td>244*</td>
<td>Neurologic Impairment</td>
<td>100</td>
</tr>
<tr>
<td>245*</td>
<td>ASIA Impairment Scale</td>
<td>102</td>
</tr>
<tr>
<td>246*</td>
<td>ASIA Motor Index Score</td>
<td>104</td>
</tr>
<tr>
<td>247*</td>
<td>Sensory Level</td>
<td>107</td>
</tr>
<tr>
<td>248*</td>
<td>Motor Level</td>
<td>108</td>
</tr>
<tr>
<td>249*</td>
<td>Level of Preserved Neurologic Function</td>
<td>110</td>
</tr>
</tbody>
</table>

* Required for the year 1 physical exam and optional in subsequent years
FORM II

VARIABLE NAME: Date of the Annual Examination

COMMENTS: The annual examination for any anniversary year may be performed 6 months (182 days) prior to and up to 6 months (182 days) after the anniversary date. For the first anniversary, it is extremely important to obtain data as close as possible to the anniversary date.

Example: if the patient was injured on 05/19/1973 and his discharge was on 10/22/1973, the windows of time (for the required data submission years) are listed under the “during the annual exam” columns.

* The start of the first anniversary year begins the day after discharge; subsequent anniversary years begin on the anniversary of the date of injury.

QC: See page 200 for information on patients whose Category of Follow-up Care is "Data Collection Only".

SOFTWARE: The software includes functions to (1) calculate the correct anniversary year for an annual exam date and (2) provide the acceptable range of dates for the annual exam if the anniversary year is known. To Use: move the cursor to the patient’s line in the PROCESS/Data Entry screen and click on the “Exam Date” button.
FORM II

VARIABLE NAME:  Date of the Annual Examination

REVISIONS:  
October 1986:  The Date of the Annual Exam was added. Locations and Grades of Pressure Ulcers and Number of Pressure Ulcers were changed from those occurring during the anniversary year to those present at the time of the annual examination. The ASIA Motor Index Score was added to this exam.

November 1995: The remaining neurologic exam variables (Neuro Impairment, Levels, ZPP and ASIA Impairment Scale) were added to the annual exam.

Data for these 1995 items are expected in Form IIs with Dates of Annual Examination on or after January 1, 1996 (i.e., V213 equal to or greater than 01/01/1996).

January 1998:  Pressure Ulcers Present at the Time of the Annual Exam was changed to Worst Pressure Ulcer Present at the Time of the Annual Exam and the neurologic exam variables (Neuro Impairment, Levels, ZPPs, ASIA Impairment Scale and ASIA Motor Index Score) are required only in annual years 1 and 2.

October 2000: Motor ZPP and Sensory ZPP items were deleted. The Neuro exam items are collected in year 01 only. Other Annual Exam items are collected in year 1 and every 5th anniversary.

CONVERSION:  Data from the old neurologic variables (i.e., old variable numbers 211, 212, 212A, 212B, 212C, 212D and 213) and the old Mechanical Ventilation variable (V219) were retained. The Date of the Annual Exam can be used to distinguish these records from those in which these data are acquired during the Annual Exam (i.e., if the Annual Exam is on or after 1/1/96, these data were obtained on that date).
**FORM II**

**VARIABLE NAME:** Grade of the Worst Pressure Ulcer Present at the Time of the Annual Exam

**DESCRIPTION:** This variable documents the grade of the worst sore present, upon visual examination, during the annual physical examination.

**CHARACTERS:** 1

**CODES:**

0  No pressure ulcers present at the time of the annual exam
1  Grade 1
2  Grade 2
3  Grade 3
4  Grade 4
8  Pressure ulcer present, grade unknown*
9  Unknown, exam not done

Blank  *(only if V201 = “5”)*

* When there are multiple ulcers AND at least one ulcer is “8” (grade unknown):
  - if one of the ulcers is a grade “4”, code this variable “4”
  - otherwise, code this variable “8”.

**COMMENTS:** Document the worst ulcer present on the date specified in Variable 211 (Date of Annual Examination).

**REVISIONS:**

October 1986: the Form II Pressure Ulcer variable was changed (from ulcers developing during the entire follow-up year) to documenting only those ulcers present upon visual inspection at the time of the annual examination.

January 1998: This variable was changed from Location(s) and Grade(s) of Pressure Ulcer(s) Present at the Time of the Annual Exam to Grade of the Worst Pressure Ulcer Present at the Time of the Annual Exam.

**CONVERSION:**

January 1998: the following conversions were made:

If code “4” is found anywhere from old V218_1 through V218_27 then,
  current Grade of Worst Sore variable = “4”.

If no code “4” and no code “9” found anywhere from old V218_1 through V218_27 then,
  current Grade of Worst Sore variable = highest grade (“0”, “1”, “2”, “3” or “8”) found in old V218_1 through V218_27.

If at least one code “9” and a sore present (code “1”, “2”, “3” or “8”) in another location in old V218_1 through V218_27 then,
  current Grade of Worst Sore variable = “8”.

Otherwise current Grade of Worst Sore variable = “9”.

**QC:**

If variable 212 is coded “0“, then variable 213 must be coded "00".
If variable 212 is coded “9“, then variable 213 must be coded "99".
FORM II

VARIABLE NAME: Rehospitalizations – Number of Days Rehospitalized and Primary Reason for Rehospitalization

DESCRIPTION: This variable documents

1) the number of days rehospitalized for each rehospitalization (V217D_1 through V217D_8) and

2) the primary reason for each rehospitalization (V217R_1 through V217R_8)

during the anniversary year being reported.

Document all rehospitalizations in all hospitals (i.e., system and non-system) during the anniversary year being reported.

For the year 01 Form II only:

- the year 01 Form II documents only rehospitalizations occurring in the interval between the discharge from the last System inpatient treatment phase to the first anniversary date of the patient's injury.

All Form IIs after year 01 document rehospitalizations occurring during the entire follow-up year being reported.

Do not include the initial System hospitalization or hospitalizations preceding the initial admission into the System.

Do not record any custodial admissions as rehospitalizations in this variable. These days should be reported as days in a nursing home in variable 220.

If more than 7 rehospitalizations occur, then add the days for all rehospitalizations over #7 and report those days in V217D_8 and report the primary reason for the longest of the rehospitalizations over #7 in V217R_8.
**VARIABLE NAME:** Rehospitalizations – Number of Days Rehospitalized and Primary Reason for Rehospitalization

**CHARACTERS:**
- 3 for each Number of Days (up to 8 entries, V217D_1 through V217D_8)
- 2 for each Reason (up to 8 entries, V217R_1 through V217R_8)

**CODES:**

### Number of Days (V217D):
- **000** None *(Valid only in coding position #1 only)*
- **1-887** Valid range
- **888** Yes, number of days unknown
- **999** Unknown *(Valid in coding position #1 only)*
- **Blank** *(only if V201 = “5”)*

### Primary Reason for Rehospitalization (V217R)

<table>
<thead>
<tr>
<th>ICD9 Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-139</td>
<td>Infectious and parasitic diseases, including AIDS</td>
</tr>
<tr>
<td>140-239</td>
<td>Cancer</td>
</tr>
<tr>
<td>240-279</td>
<td>Endocrine, nutritional and metabolic diseases and immunity disorders</td>
</tr>
<tr>
<td>280-289</td>
<td>Diseases of blood and blood-forming organs</td>
</tr>
<tr>
<td>290-319</td>
<td>Mental disorders, including alcohol and drug-related problems</td>
</tr>
<tr>
<td>320-389</td>
<td>Disease of nervous system and sense organs</td>
</tr>
<tr>
<td>390-459</td>
<td>Diseases of the circulatory system, including heart disease, hypertension, pulmonary embolus, cerebrovascular disease, and diseases of arteries and veins</td>
</tr>
<tr>
<td>460-519</td>
<td>Diseases of respiratory system</td>
</tr>
<tr>
<td>520-579</td>
<td>Disease of digestive system, including oral cavity, salivary glands, esophagus, stomach, duodenum, appendicitis, abdominal hernia, noninfectious enteritis and colitis, other disease of the intestine, peritoneum, liver and gall bladder</td>
</tr>
<tr>
<td>580-629</td>
<td>Diseases of genitourinary system, including renal, urethral, ureteral, and bladder stones and conditions, urinary tract infections, diseases of the prostate, orchitis/epididymitis, disorders of genital organs, disorders of the breast and female pelvic organs</td>
</tr>
<tr>
<td>630-676</td>
<td>Uncomplicated childbirth or complications of pregnancy, childbirth and the puerperium</td>
</tr>
<tr>
<td>680-709</td>
<td>Diseases of skin and subcutaneous tissue, including pressure sores</td>
</tr>
<tr>
<td>710-739</td>
<td>Diseases of musculoskeletal system and connective tissue, including arthopathies, arthritis, ankylosing spondylitis, intervertebral disc disorders, rheumatism, osteopathies and acquired musculoskeletal deformities</td>
</tr>
<tr>
<td>740-759</td>
<td>Congenital anomalies</td>
</tr>
<tr>
<td>780-799</td>
<td>Symptoms and ill-defined conditions, includes cases for which no specific diagnosis can be made; transient symptoms of undetermined nature or symptoms that point with equal suspicion to two or more disease or body systems without final determination being made.</td>
</tr>
<tr>
<td>800-999</td>
<td>Injuries and poisoning, regardless of intention (can be accidental or attempted suicide or homicide), including complications of surgical and medical care and any external cause such as temperature, drowning, radiation, toxic products or environment, fire or trauma</td>
</tr>
<tr>
<td></td>
<td>Other unclassified (e.g. baclofen pump)</td>
</tr>
<tr>
<td></td>
<td>Inpatient rehab services only</td>
</tr>
<tr>
<td></td>
<td>Not applicable, no rehospitalizations <em>(Valid only in coding position #1)</em></td>
</tr>
<tr>
<td></td>
<td>Unknown</td>
</tr>
<tr>
<td></td>
<td>Blank <em>(only if V201 = “5”)</em></td>
</tr>
</tbody>
</table>
FORM II

VARIABLE NAME: Rehospitalizations – Number of Days Rehospitalized and Primary Reason for Rehospitalization

COMMENTS: It is mandatory to enter a code in coding position #1. When code 000 (for days) and code 88 (for reason) are entered in coding position #1, no codes are allowed in coding positions #2 through #8.

The interviewer must ask the patient for this information. If the patient has been rehospitalized, it is recommended that hospital records be obtained to verify the number of days rehospitalized, the dates of admission and discharge, and the reasons for rehospitalization.

If, during a follow-up year, the patient remains rehospitalized past his anniversary date:

> For those variables to be documented "at the time of the annual physical examination", code the information obtained on the date of the annual physical examination.
> Those variables to be documented "on the anniversary date being reported" should reflect the patient's status as it was on the anniversary date.

However,

> All variables documenting events occurring "during the anniversary year being reported" should include all events up until the completion of the rehospitalization. Variable 219 may be greater than 365 days.

If there are multiple reasons for a hospitalization, code the first reason for the admission.

SOFTWARE: When code 000 is entered in V217D and code 88 is entered in V217R, the software advances the user to variable 220.

REVISIONS: October 2000: these variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

EXAMPLE 1: The subject was not hospitalized at all during the follow-up year being reported.

217. Rehospitalizations #1 #2 #3 #4 #5 #6 #7 8+
D. Number of Days ......................000 |
R. Reason ..................................88 |
218. Number of Rehospitalization(s) ...............................................................0
219. Number of Days Rehospitalized...............................................................000

EXAMPLE 2: The subject was hospitalized 3 times during the follow-up year being reported. The first hospitalization was for drug abuse problems and lasted 30 days. The second hospitalization was for 5 days due to hypertension and the third hospitalization was for 3 days for renal stones.

217. Rehospitalizations #1 #2 #3 #4 #5 #6 #7 8+
D. Number of Days ......................030 005 003 |
R. Reason ..................................05 07 10 |
218. Number of Rehospitalization(s) ...............................................................3
219. Number of Days Rehospitalized...............................................................038
FORM II

VARIABLE NAME: Number of Rehospitalizations

DESCRIPTION: This variable documents the number of planned and unplanned, system and non-system hospital admissions occurring during the anniversary year being reported.

For the year 01 Form II only:

- the year 01 Form II documents only rehospitalizations occurring in the interval between the discharge from the last System inpatient treatment phase to the first anniversary date of the patient's injury.

All subsequent Form IIs document rehospitalizations occurring during the year being reported.

Do not include the initial System hospitalization or hospitalizations preceding the initial admission into the System.

Do not record any custodial admissions as rehospitalizations in this variable. These days should be reported as days in a nursing home in variable 220.

This variable can be calculated by the NSCISC’s software.

CHARACTERS: 1

CODES:

- 0 None
- 1 One
- 2 Two
- 3 Three
- 4 Four
- 5 Five
- 6 Six
- 7 More than six
- 8 Rehospitalized, number unknown
- 9 Unknown

Blank (only if V201 = “5”)
VARIABLE 218

(Page 2 of 2)

FORM II

VARIABLE NAME: Number of Rehospitalizations

COMMENTS: If, during a follow-up year, the patient remains rehospitalized past his anniversary date:

> For those variables to be documented "at the time of the annual physical examination", code the information obtained on the date of the annual physical examination.

> Those variables to be documented "on the anniversary date being reported" should reflect the patient's status as it was on the anniversary date.

However,

> All variables documenting events occurring "during the anniversary year being reported" should include all events up until the completion of the rehospitalization. Variable 219 may be greater than 365 days.

SOFTWARE: The software calculates this variable by adding the number of positions coded in V217. If more than 6 positions are coded in V217, then V219 = "7". To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
FORM II

VARIABLE NAME: Number of Days Rehospitalized During Reporting Period
DESCRIPTION: This variable records the total days rehospitalized (planned and unplanned days) in all hospitals (i.e., system and non-system) during the anniversary year being reported.

For the year 01 Form II only:

- the year 01 Form II documents only rehospitalizations occurring in the interval between the discharge from the last System inpatient treatment phase to the first anniversary date of the patient's injury.

All subsequent Form IIs document rehospitalizations occurring during the year being reported. This variable can be calculated by the NSCISC’s software.

CHARACTERS: 3

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000</td>
<td>None</td>
</tr>
<tr>
<td>000 - 887</td>
<td>Valid range</td>
</tr>
<tr>
<td>888</td>
<td>Yes, number of days unknown</td>
</tr>
<tr>
<td>999</td>
<td>Unknown</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

COMMENTS: If, during a follow-up year, the patient remains rehospitalized past his anniversary date:

- For those variables to be documented "at the time of the annual physical examination", code the information obtained on the date of the annual physical examination.
- Those variables to be documented "on the anniversary date being reported” should reflect the patient's status as it was on the anniversary date.

However,

- All variables documenting events occurring "during the anniversary year being reported" should include all events up until the completion of the rehospitalization. Variable 219 may be greater than 365 days.

SOFTWARE: The software calculates this variable by adding the values in V217D_1 through V217D_8. To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button. Note: in order to retain the data converted from the old Rehospitalization Days variable, this function is disabled for Form IIs with an Indate prior to 10/01/2001.
VARIABLE NAME: Number of Days in Nursing Home

DESCRIPTION: This variable records the number of days the patient has spent in a nursing home during the anniversary year being reported.

The term "nursing home" applies to all other custodial medical facilities such as extended care facilities, long-term care facilities, etc.

The Form II for the first post-injury year will document only the total days in nursing home(s) after discharge from the last System inpatient treatment phase to the first anniversary date of the patient's injury. All subsequent annual reports will document the total days in nursing home(s) during the annual year being reported.

CHARACTERS: 3

CODES:

000 - 366 Valid range
888 Yes, number of days unknown
999 Unknown

Blank (only if V201 = “5”)

COMMENTS: The maximum number of days for this variable is 366. Report all temporary and permanent nursing home admissions. However, on the year 01 Form II, report only those nursing home admissions occurring after discharge from the initial hospitalization period.

QC: V220 in year 01 must be less than 366.
VARIABLE 223

VARIABLE NAME: Date of the Interview

DESCRIPTION: This variable records the date on which all or most of the interview items were obtained. Interviews may be conducted in person, by mail or by phone. Data for all variables (except variables 211 to 213 and variables 244 to 249) may be collected by interview.

CHARACTERS: 8

CODES:

- **Any valid date**
- **88888888** Interview not done
- **99999999** Unknown - This is a **CONVERSION CODE ONLY**. Data collectors may **NOT** use this code. This information is provided for data analyses purposes only.

**Blank** (only if V201 = “5”)

COMMENTS: Unknowns are not allowed in this variable (except as a conversion code). Data in this variable are required in records entered into the database after October 31, 2000.

If the interview is done by telephone, this is the date of the phone call. If the interview was done by mail, this is the date the subject completed the interview form. If the interviewer knows the respondent’s responses are not reliable, code the interview “not done” and code all the interview items unknown. It is better to encourage an unknown response rather than an inaccurate response.

This variable cannot be stored in date format since non-valid date codes (88888888 and 99999999) are allowed. Data for **“Window variables”** may be collected from up to 182 days before the anniversary date to 365 days after the anniversary date. The window of time for the year 01 (or year 02) Form II is limited to 182 days after the anniversary. “Window” variables are V211 to V213, 223 to 239 and 244 to 249. Window variables are marked with an ! on the Form II data collection form.

For the first (or second see details on page 16) anniversary, it is extremely important to obtain data as close as possible to the anniversary date.

If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.

REVISIONS: October 2000: this variable was added. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 223 = “88888888”, then variable 224 must = “8” and variables 225 to 239 must all = Unknown.

SOFTWARE: The NSCISC’s software contains functions to calculate (1) the correct post-injury year for an exam (or interview) date; (2) the range of dates for an anniversary year; and (3) the range of dates for the “window” variables. See the Software Users’ Manual for complete instructions.

EXAMPLE: See the table on page 205. The range of dates for the interview are in the “during the interview” column.
VARIABLE NAME: How was the interview conducted?

DESCRIPTION: This variable documents if the interview was conducted in person, by phone and/or by mail.

Data for all variables (except variables 211 to 213 and variables 244 to 249) may be collected by interview.

CHARACTERS: 1

CODES:

1 Interview in person
2 Interview by phone
3 Self-administered (by mail or in the clinic)
4 Combination of in person, by phone and/or by mail
8 Not applicable, no interview
8 Not applicable, respondent’s current age is less than 18
9 Unknown

Blank (only if V201 = “5”)

COMMENTS: The Psycho/Social committee has established a list of priorities for each interview. All systems should structure the Psycho/Social variables in their interviews in this order:

<table>
<thead>
<tr>
<th>Interview Items</th>
<th>Variable Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diener</td>
<td>228</td>
</tr>
<tr>
<td>Pain</td>
<td>238, 239</td>
</tr>
<tr>
<td>Self-report Health</td>
<td>225, 226</td>
</tr>
<tr>
<td>CHIEF</td>
<td>230</td>
</tr>
<tr>
<td>BHQ</td>
<td>231</td>
</tr>
<tr>
<td>CHART</td>
<td>229</td>
</tr>
<tr>
<td>Assistive Technology</td>
<td>250A to 267</td>
</tr>
<tr>
<td>Drug/Alcohol/CAGE</td>
<td>232 to 237</td>
</tr>
<tr>
<td>FIM</td>
<td>227</td>
</tr>
</tbody>
</table>

An Interview Form (in English and Spanish) containing all the interview items begins on page 16 of Appendix B.

QC: See page 215.

REVISIONS: February 1996: this variable was added to the database.
VARIABLE NAME: Self-perceived Health Status

DESCRIPTION: The following question is asked: *In General, Would You Say That Your Health Is Excellent, Very Good, Good, Fair or Poor?*

This item is question 1 from the Short Form Health Survey (SF-36).

CHARACTERS: 1

CODES:

1  Excellent  
2  Very good  
3  Good  
4  Fair  
5  Poor  
6  Don’t know  
7  Refuses  
9  Unknown, interview not done, or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

SOURCE: SF-36 Physical and Mental Health Summary Scales. John E. Ware, Jr. Ph.D., Mark Kosinski, M.A., Susan D. Keller, Ph.D. The Health Institute, New England Medical Center, Boston, Massachusetts.

QC: See page 215.

REVISIONS: November 1995: this variable was added to the database.

May 1997: the minimum age rule added.

October 2000: code “8” (Not applicable, respondent’s current age is less than 18) was deleted. Coding rule changed to: code “9” should be used for respondents whose current age is less than 18.
FORM II

VARIABLE NAME: Compared to 1 year ago, how would you rate your health in general now?

DESCRIPTION: This item is question 2 from the Short Form Health Survey (SF-36).

When doing the year 01 interview, ask Compared to the time of discharge, how would you rate your health in general now?

CHARACTERS: 1

CODES:

1   Much better now than one year ago
2   Somewhat better now than one year ago
3   About the same as one year ago
4   Somewhat worse now than one year ago
5   Much worse now than one year ago
6   Don’t know
7   Refuses

9   Unknown, interview not done, or respondent’s current age is less than 18

Blank   (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

SOURCE: SF-36 Physical and Mental Health Summary Scales. John E. Ware, Jr. Ph.D., Mark Kosinski, M.A., Susan D. Keller, Ph.D. The Health Institute, New England Medical Center, Boston, Massachusetts.

QC: See page 215.

REVISIONS: May 1998: this variable was added to the database.

October 2000: code “8” (Not applicable, respondent’s current age is less than 18) was deleted. Coding rule changed to: code “9” should be used for respondents whose current age is less than 18.
FORM II

VARIABLE NAME: Satisfaction With Life Scale
DESCRIPTION: This variable measures the concept of life satisfaction based on the patient's responses to these five statements.

1. In most ways my life is close to my ideal. (V228_1)
2. The conditions of my life are excellent. (V228_2)
3. I am satisfied with my life. (V228_3)
4. So far I have gotten the important things I want in life. (V228_4)
5. If I could live my life over, I would change almost nothing. (V228_5)

Responses to each of the five statements and the total score (V228T) are recorded in this variable.

CHARACTERS: 1 for each statement, 5 statements (V228_1 to V228_5)
2 for the total (V228T)

CODES:  

**Statements (V228_1 to V228_5)**

1 Strongly disagree  
2 Disagree  
3 Slightly disagree  
4 Neither agree nor disagree  
5 Slightly agree  
6 Agree  
7 Strongly agree  
9 Unknown, interview not done, or respondent's current age is less than 18  

**Blank**  
(only if V201 = “5”)  

**Total (V228)**

05-35 Valid range  
99 Unknown, interview not done, or respondent's current age is less than 18  

**Blank**  
(only if V201 = “5”)
FORM II

VARIABLE NAME: Satisfaction With Life Scale

COMMENTS: Instructions for administering the scale are:

Ask the patient if he agrees or disagrees with each of the five statements. Use the 1-7 scale to indicate his agreement with each item. Instruct the patient to be open and honest with his responses.

Ask all questions; record each response and the total score. If the patient does not respond to a question, code that question “9” and code the total score "99".

Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

Use the unknown code if the patient’s current age is less than 18.


REVISIONS: November 1995: Total Score was added to the database.

February 1996: individual statements were added to the database.

September 1996: the minimum age rule was added.

QC: See page 215.
VARIABLES 229_1 to 229_25, 229T

FORM II

VARIABLE NAME: The Craig Handicap Assessment and Reporting Technique, Short Form (CHART-SF)

DESCRIPTION: The Craig Handicap Assessment and Reporting Technique (CHART) is a widely used questionnaire useful in measuring societal participation for persons with disabilities. The goal of CHART-SF (Short Form) was to develop a shorter questionnaire that would reproduce all the CHART subscales with at least 90% accuracy. CHART-SF includes 17 items from the original 37 question CHART, and the addition of three summary variables in the Social Integration sub-scale.

In addition to the 20 individual items, the CHART-SF includes 6 dimensions of handicap: 1) physical independence, 2) cognitive independence, 3) mobility, 4) occupation, 5) social integration, and 6) economic self-sufficiency. A Total CHART score is also documented.

The NSCISC’s software calculates the dimension totals and the total score.

COMMENTS: This is a “Window variable” (see rules on page 215).

The 2-page CHART interview sheet (see Appendix A) may be used.

Use the unknown code in all CHART items if the respondent’s current age is less than 18 or if the interview was not done.

If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.


SOFTWARE: The NSCISC’s software calculates the 6 dimension totals (variables 229_20 to 229_25 as well as the Total CHART Score (V229T). To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.

REVISIONS: November 1995: this variable was added to the database.

September 1996: rule for the minimum age was added.

October 2000: changed to the Short Form and the Cognitive Independence items were added.

QC: See page 215.
VARIABLE NAME: The CHART: Physical Independence - Number of Hours of Assistance Per Day

DESCRIPTION: The following question is asked:

*How many hours in a typical 24-hour day do you have someone with you to provide assistance for personal care activities such as eating, bathing, dressing, toileting and mobility?*

Document:

A. Number of hours of paid assistance and
B. Number of hours of unpaid assistance (family, others)

CHARACTERS: 2 for each entry

CODES:

- 00 No assistance
- 00 to 24 Valid range
- 99 Unknown, interview not done, or respondent's current age is less than 18
- Blank *(only if V201 = “5”)*

COMMENTS: If a person has a disability that would typically result in a high level of dependency, and indicates no attendant care is used, probe this a bit further. The respondent may not understand that assistance with dressing grooming, bowel and bladder care, etc. is to be considered attendant care.

If an individual has various hours of assistance on different days of the week ask the respondent to estimate the total number of hours of assistance per week, then divide that number by 7 to come up with a daily estimate.

See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
FORM II

VARIABLE NAME: The CHART: Cognitive Independence –

DESCRIPTION: The following question is asked:

How much time is someone with you in your home to assist you with activities that require remembering, decision making, or judgment?

CHARACTERS: 1

CODES:

1  Someone else is always with me to observe or supervise
2  Someone else is always around, but they only check on me now and then
3  Sometimes I am left alone for an hour or two
4  Sometimes I am left alone for most of the day
5  I have been left alone all day and all night, but someone checks in on me
6  I am left alone without anyone checking on me
9  Unknown, interview not done, or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: If the person is independent, and doesn't need supervision or assistance to any degree, use code 6.

QC: See page 215.

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.
FORM II

VARIABLE NAME: The CHART: Cognitive Independence –

DESCRIPTION: The following question is asked:

How much of the time is someone with you to help you with remembering, decision making, or judgment when you go away from your home?

CHARACTERS: 1

CODES:

1 I am restricted from leaving, even with someone else

2 Someone is always with me to help with remembering, decision making or judgment when I go anywhere.

3 I go to places on my own as long as they are familiar

4 I do not need help going anywhere

9 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: If the person is independent, and doesn't need supervision or assistance to any degree, use code 4.

QC: See page 215.

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.
FORM II

VARIABLE NAME: The CHART: Mobility - Number of Hours Out of Bed Per Day, Are You Up and About Regularly?

DESCRIPTION: The following question is asked:

   On a typical day, how many hours are you out of bed?

CHARACTERS: 2

CODES:

0 to 24  Valid range

99  Unknown, interview not done, or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
VARIABLE NAME: The CHART: Mobility - Are You Up and About Regularly?

DESCRIPTION: The following question is asked:

In a typical week, how many days do you get out of your house and go somewhere?

CHARACTERS: 1

CODES:

0 to 7 Valid range

9 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: The responses to this question may vary according to season, weather, etc. For example, many people are out daily in the summer, but only one or two days a week in the winter. Ask the respondent to use his/her judgment, based on the climate in which he/she lives, to estimate the average number of days out per week throughout the year.

Being out of the house and going somewhere means that the person leaves his/her own "property". Being out in the garden or yard does not qualify as "going somewhere".

See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
VARIABLE NAME: The CHART: Mobility - Are You Up and About Regularly?

DESCRIPTION: The following question is asked:

In the last year, how many nights have you spent away from your home (excluding hospitalizations)?

CHARACTERS: 1

CODES:

0  None
1  1-2 nights
3  3-4 nights
5  5 or more nights
9  Unknown, interview not done, or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Any night spent away from a person's usual sleeping environment is considered a night away from home. Visiting family or friends and spending the night at someone else's house, therefore, is a night away from home.

For the year 1 interview, ask “Since discharge, how many nights have you spent away from your home (excluding hospitalizations)?”

QC: See page 215.
FORM II

VARIABLE NAME: The CHART: Occupation - How Do You Spend Your Time?

DESCRIPTION: The following question is asked:

How many hours per week do you spend working in a job for which you get paid?

CHARACTERS: 2

CODES:

00 to 98  Valid range

99  Unknown, interview not done, or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Respondents must be working in jobs for which they are paid in order to get points for this question. If a person is working but not getting paid, consider this voluntary activity and do not include in this variable.

See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
VARIABLE NAME: The CHART: Occupation - How Do You Spend Your Time?

DESCRIPTION: The following question is asked:

How many hours per week do you spend in school working toward a degree or in an accredited technical training program? (including hours in class and studying)

CHARACTERS: 2

CODES:

00 to 98 Valid range

99 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

QC: See page 215.
VARIABLE NAME: The CHART: Occupation - How Do You Spend Your Time?

DESCRIPTION: The following question is asked:

How many hours per week do you spend in active homemaking including parenting, housekeeping, and food preparation?

CHARACTERS: 2

CODES:

00 to 98 Valid range

99 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS:

Active homemaking, parenting, housekeeping, etc. is exactly what it means. Being at home with the children at night with everyone asleep is not considered "active" parenting. Helping children with homework, playing with them or supervising their play, however, are considered “active” parenting.

In addition "active" can imply supervising housework and food preparation. If someone is developing the household menus, arranging for housework to be done, or overseeing other individuals performing those activities, there is active involvement; therefore, count the time spent in these planning/supervising activities. However, don't credit someone with doing (for example) eight hours of yard work, if his/her only "active" involvement was arranging and instructing the work needing to be done. This "active" role might, in fact, take an hour, so credit for 1 hour is appropriate.

For variables 229_9 through 229_11, do not duplicate responses in categories. For example, if someone "plays" with the children and considers it sports or exercise, as well as active parenting, that individual can only receive credit in one category. In another example, a person who gardens as a hobby may describe spending 20 hours a week in home maintenance, then states that gardening is a hobby. When in doubt, allow the respondent to choose the category which best describes an activity.

COMMENTS: See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
VARIABLE NAME: The CHART: Occupation - How Do You Spend Your Time?

DESCRIPTION: The following question is asked:

*How many hours per week do you spend in home maintenance activities such as gardening, house repairs or home improvement?*

CHARACTERS: 2

CODES:

- **00 to 98** Valid range
- **99** Unknown, interview not done, or respondent’s current age is less than 18
- **Blank** *(only if V201 = “5”)*

COMMENTS: Hours spent in active home maintenance may vary with season and with weather. Use same logic employed in variable 229_5 in estimating hours.

COMMENTS: See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
VARIABLE NAME: The CHART: Occupation - How Do You Spend Your Time?

DESCRIPTION: The following question is asked:

*How many hours per week do you spend in recreational activities such as sports, exercise, playing cards, or going to movies?*

Please do not include time spent watching TV or listening to the radio.

CHARACTERS: 2

CODES:

- **00 to 98** Valid range
- **99** Unknown, interview not done, or respondent’s current age is less than 18
- **Blank** (only if V201 = “5”)

COMMENTS: See page 17 for the rules for rounding fractions of an hour.

QC: See page 215.
FORM II

VARIABLE NAME: The CHART: Social Integration – With Whom Do You Spend Your Time?

DESCRIPTION: The following question is asked:

How many people do you live with?

CHARACTERS: 2

CODES:

00 None, lives alone

00 to 87 Valid range

99 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: "Live with" applies to the sharing of "private spaces" (e.g., a bedroom, kitchen, etc.).

If the subject lives in a group home (e.g., nursing home, dormitory, etc.), ask: "How many roommates do you share your room with?"

QC: If variable 229_12 = “00” (lives alone) then, 229_13 should = “8” (lives alone) and variable 229_14 should = “88” (lives alone).

See page 215.
VARIABLE NAME: The CHART: Social Integration – With Whom Do You Spend Your Time?

DESCRIPTION: The following question is asked:

Of the people you live with, is one of them your spouse or significant other/partner?

CHARACTERS: 1

CODES:

0 No (does not live with significant other/partner or unrelated roommate or attendant)

1 Lives with a spouse or significant other/partner

2 Lives with unrelated roommate and/or attendant

8 Not applicable, lives alone (Use this code if V229_12 = “00“)

9 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5“)

QC: If variable 229_12 = “00” (lives alone) then, 229_13 should = “8” (lives alone) and variable 229_14 should = “88” (lives alone).

See page 215.
VARIABLE NAME: The CHART: Social Integration – With Whom Do You Spend Your Time?

DESCRIPTION: The following question is asked:

*Of the people you live with how many (others) are relatives?*

CHARACTERS: 2

CODES:

00 None are relatives

00 to 87 Valid range

88 Not applicable, lives alone

99 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: "Live with" applies to the sharing of "private spaces" (e.g., a bedroom, kitchen, etc.). Do not include the person counted in variable 229_13.

In-laws and parents of a significant other are considered relatives (especially if the respondent considers them as such)

QC: If variable 229_12 = “00” (lives alone) then, 229_13 should = “8” (lives alone) and variable 229_14 should = “88” (lives alone).

See page 215.
VARIABLE NAME: The CHART: Social Integration – With Whom Do You Spend Your Time?

DESCRIPTION: The following question is asked:

    How many business or organizational associates do you visit, phone, or write to at least once a month?

CHARACTERS: 2

CODES:

00 None

01 to 09 One to nine

10 Ten or more

99 Unknown, interview not done, or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: In Variables 238_15 through 238_17, remember to count the number of people contacted, not the actual number of times a person is contacted. For example, someone may talk with a particular business associate on a daily basis -- that is considered one contact, not five (typical working day of the week).

Emailing counts as “writing”.

Don't worry about getting exact counts of business associates if a person indicates "lots" or "dozens" of people are contacted.

Again, be careful that you don't double count people in different categories.

QC: See page 215.
FORM II

VARIABLE NAME: The CHART: Social Integration – With Whom Do You Spend Your Time?

DESCRIPTION: The following question is asked:

   How many friends (non-relatives contacted outside business or organizational settings) do you visit, phone, or write to at least once a month?

CHARACTERS: 1

CODES:  
0   None
0 to 5  Valid range
5   Five or more
9   Unknown, interview not done, or respondent’s current age is less than 18

Blank   (only if V201 = “5”)

COMMENTS: See page 236 for additional instructions.

Emailing counts as “writing”.

QC: See page 215.
VARIABLE NAME: The CHART: Social Integration – With Whom Do You Spend Your Time?

DESCRIPTION: The following question is asked:

*With how many strangers have you initiated a conversation in the last month (for example to ask information or place an order)?*

CHARACTERS: 1

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None</td>
</tr>
<tr>
<td>1</td>
<td>1-2</td>
</tr>
<tr>
<td>3</td>
<td>3-5</td>
</tr>
<tr>
<td>6</td>
<td>6 or more</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done, or respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

Blank  *(only if V201 = “5”)*

COMMENTS: See page 236 for additional instructions.

Emailing counts as “initiating a conversation”.

QC: See page 215.
VARIABLE NAME: The CHART: Economic Self-sufficiency – Combined Annual Family Income

DESCRIPTION: The following question is asked:

*Approximately what was the combined annual income, in the last year, of all family members in your household?*

Consider all sources including wages and earnings, disability benefits, pensions and retirement income, income from court settlements, investments and trust funds, child support and alimony, contributions from relatives, and any other sources (that are available to the subject).

CHARACTERS: 1

CODES:

1  Less than $10,000
2  $10,000 to $14,999
3  $15,000 to $19,999
4  $20,000 to $24,999
5  $25,000 to $34,999
6  $35,000 to $49,999
7  $50,000 to $74,999
8  $75,000 or more
9  Unknown, interview not done or respondent’s current age is less than 18

Blank  (only if V201 = “5“)

COMMENTS: Some people may indicate there is no household income from any source. Probe this, because there must be money from somewhere, whether it is from a charitable source, government funds, other family support or something else.

The intent of this variable is to determine the amount of the respondent’s financial resources compared to the national poverty level.

QC: See page 215.
FORM II

VARIABLE NAME: The CHART: Economic Self-sufficiency – Unreimbursed Medical Care Expenses

DESCRIPTION: The following question is asked:

*Approximately how much did you pay last year for medical care expenses?*

Consider any amounts paid by yourself or the family members in your household and **not reimbursed** by insurance or benefits.

CHARACTERS: 1

CODES:

1 Less than $1,000
2 $1,000 to $2,499
3 $2,500 to $4,999
4 $5,000 to $9,999
5 $10,000 or more

| 9 Unknown, interview not done or respondent’s current age is less than 18 |

Blank **(only if V201 = “5”)**

COMMENTS: Items include (but are not limited to) medical insurance premiums, co-payments, supplies, etc. Provide a reasonable estimate of unreimbursed medical care expenses.

QC: See page 215.
VARIABLE 229_20

FORM II

VARIABLE NAME: The CHART: Physical Independence Total

DESCRIPTION: This variable is computed using the data in variables 229_1A and 229_1B. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES:  
000 to 100 Valid range  
999 Unknown, interview not done or respondent’s current age is less than 18  
Blank (only if V201 = “5”)

COMMENTS: A score of 100 indicates no handicap in an individual's ability to sustain a customarily effective independent existence. The need for regular or periodic assistance for activities, which used to be performed independently, is indicative of some degree of handicap.

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_20 and click on the Calculate button.

The formula used is:

\[ V229\_20 = 100 - 4 \times (V229\_1A + V229\_1B) \]

If \(4 \times (V229\_1A + V229\_1B)\) greater than 100, then \(V229\_20 = 0\)

If \(V229\_1A = 99\) or \(V229\_1B = 99\), then \(V229\_20 = 999\)

If \(V229\_1A = \) blank or \(V229\_1B = \) blank, then \(V229\_20 = \) blank.

QC: See page 215.
VARIABLE 229_21

FORM II

VARIABLE NAME: The CHART: Cognitive Independence Total

DESCRIPTION: This variable is computed using the data in variables 229_2 and 229_3. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES: 
000 to 100 Valid range
999 Unknown, interview not done or respondent’s current age is less than 18
Blank (only if V201 = “5”)

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_21 and click on the Calculate button.

The formula is:
V229_21 = 11*( V229_2 – 1) + 15*( V229_3 –1)
If [11*(V229_2 – 1) + 15*( V229_3 –1)] greater than 100, then V229_21 = 100
If V229_2 = 9 or V229_3 = 9, then V229_21 = 999
If V229_2 = blank or V229_3 = blank, then V229_21 = blank

QC: See page 215.
VARIABLE 229_22

FORM II

VARIABLE NAME: The CHART: Mobility Total

DESCRIPTION: This variable is computed using the data in variables 229_4, 229_5 and 229_6. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES:

000 to 100  Valid range

999  Unknown, interview not done or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: A score of 100 indicates no handicap in an individual's ability to move about effectively in his/her surroundings.

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_22 and click on the Calculate button.

The formula is:

If  V229_6 = 0, then V229_22 = 3*( V229_4) + 7*( V229_5)

If  V229_6 = 1, then V229_22 = 10 + 3*( V229_4) + 7*( V229_5)

If  V229_6 = 3, then V229_22 = 15 + 3*( V229_4) + 7*( V229_5)

If  V229_6 = 5, then V229_22 = 20 + 3*( V229_4) + 7*( V229_5)

If V229_22 greater than 100, then V229_22 = 100

If  V229_4 = 99 or  V229_5 = 9 or  V229_6 = 9, then

V229_22 = 999

If  V229_4 = blank or  V229_5 = blank or  V229_6 = blank then,

V229_22 = blank

QC: See page 215
VARIABLE 229_23

FORM II

VARIABLE NAME: The CHART: Occupation Total

DESCRIPTION: This variable is computed using the data in variables 229_7 through 229_11. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES:

<table>
<thead>
<tr>
<th>Characters</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>000 to 100</td>
<td>Valid range</td>
</tr>
<tr>
<td>999</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

COMMENTS: A score of 100 indicates no handicap in an individual's ability to occupy time in the manner customary to that person's sex, age and culture.

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_23 and click on the Calculate button.

The formula is:

\[
V229_23 = 2.5 \times (V229_7 + V229_8 + V229_9 + V229_10) + 1.25 \times (V229_11) \\
\text{If}[2.5 \times (V229_7 + V229_8 + V229_9 + V229_10) + 1.25 \times (V229_11)] > 100, \text{ then } V229_23 = 100 \\
\text{If } V229_7 = 99 \text{ or } V229_8 = 99 \text{ or } V229_9 = 99 \text{ or } V229_10 = 99, \text{ then } V229_23 = 999 \\
\text{If } V229_7 = \text{blank} \text{ or } V229_8 = \text{blank} \text{ or } V229_9 = \text{blank} \text{ or } V229_10 = \text{blank} \text{ or } V229_11 = \text{blank}, \text{ then } V229_23 = \text{blank} \\
\]

QC: See page 215.
VARIABLE 229_24

VARIABLE NAME: The CHART: Social Integration Total

DESCRIPTION: This variable is computed using the data in variables 229_13 through 229_17. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES:
- **000 to 100** Valid range
- **999** Unknown, interview not done or respondent’s current age is less than 18
- **Blank** (only if V201 = “5”)

COMMENTS: A score of 100 indicates no handicap in an individual's ability to participate in and maintain customary social relationships.

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_24 and click on the Calculate button.

The formula is:

\[
V229\_24 = A + B + C + D + E
\]

where

- **A** = 0
  - Else: If V229_13 = 1, then A = 38
  - Else: If V229_13 = 2, then A = 25
- **B** = 6*(V229_14)
  - Else: If V229_14 = 88, then B = 0
- **C** = 0
  - Else: If V229_17 = 1, then C = 15
  - Else: If V229_17 = 3, then C = 23
  - Else: If V229_17 = 6, then C = 30
- **D** = 2.5*(V229_15)
  - Else: If 2.5*(V229_15) greater than 25, then D = 25
- **E** = 13*(V229_16)
  - Else: If 13*(V229_16) greater than 65, then E = 65
  - Else: If A + B + C + D + E greater than 100, then V229_24 = 100
  - Else: If V229_13 = 9 or V229_14 = 99 or V229_15 = 99 or V229_16 = 9 or V229_17 = 999
  - Else: If V229_13 = blank or V229_14 = blank or V229_15 = blank or V229_16 = blank or V229_17 = blank then, V229_24 = blank.

QC: See page 215.
FORM II

VARIABLE NAME: The CHART: Economic Self-sufficiency Total

DESCRIPTION: This variable is computed using the data in variables 229_18 and 229_19. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES:
- **000 to 100** Valid range
- **999** Unknown, interview not done or respondent's current age is less than 18
- **Blank** (only if V201 = “5”)

COMMENTS: A score of 100 indicates no handicap in an individual's ability to sustain customary socio-economic activity and independence.

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_25 and click on the Calculate button. Data entry is disabled on all CHART items in records with in-dates prior to 1993.

The formula is:

\[ V_{229\_25} = 50*\left(\frac{A-B}{C}\right), \]

where

- **A** = 5000
  - Else: If V229_18 = 2, then A = 12500
  - Else: If V229_18 = 3, then A = 17500
  - Else: If V229_18 = 4, then A = 22500
  - Else: If V229_18 = 5, then A = 30000
  - Else: If V229_18 = 6, then A = 42500
  - Else: If V229_18 = 7, then A = 62500
  - Else: If V229_18 = 8, then A = 80000
- **B** = 500
  - Else: If V229_19 = 2, then B = 1750
  - Else: If V229_19 = 3, then B = 3750
  - Else: If V229_19 = 4, then B = 7500
  - Else: If V229_19 = 5, then B = 15000
- **C** = appropriate value from the following table:

| Indate (year only) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 0                  | 7143 | 7363 | 7547 | 7763 | 7995 | 8178 | 8310 | 8500 | 8787 | 9044 | 9182 | 9573 | 9827 | 10160 |
| 1                  | 9137 | 9414 | 9661 | 9933 |10233 |10468 |10636 |10869 |11234 |11559 |11752 |12231 |12649 |13078 |
| 2                  |11186 |11522 |11821 |12158 |12516 |12803 |13001 |13290 |13737 |14129 |14351 |14776 |15277 |
| 3                  |14335 |14763 |15141 |15569 |16036 |16404 |16655 |17028 |17601 |18104 |18390 |18979 |19484 |20144 |
| 4                  |16952 |17449 |17900 |18408 |18952 |19387 |19682 |20115 |20804 |21411 |21743 |22887 |23497 |24293 |
| 5                  |19137 |19718 |20235 |20804 |21389 |21880 |22227 |22719 |23491 |24197 |24578 |26324 |27025 |27941 |
| 6                  |21594 |22383 |22923 |23552 |24268 |24825 |25188 |25815 |26783 |27514 |27952 |30289 |31096 |32150 |
| 7                  |24053 |24838 |25427 |26237 |27091 |27713 |28023 |28788 |29941 |30546 |31111 |33876 |34778 |3957 |
| 8                  |28745 |29529 |30300 |31280 |31971 |32705 |33073 |34075 |35574 |36058 |36860 |40751 |41836 |43254 |

Else: If V229_12 greater than 8 and V229_12 less than 99, then use row 8 from the above table.

Else: If (A-B)/C greater than 2, then V229_25 = 100

Else: If (A-B)/C less than 0, then V229_25 = 0

Else: If V229_18 = 9 or V229_19 = 9 or V229_12 = 99, Then V229_25 = 999

Else: If V229_18 = blank or V229_19 = blank or V229_12 = blank, then V229_25 = blank.

Note: V229_25 and V229T are calculated using the Federal Poverty Level data which is not released until February or March of the current year. When the current year’s statistics are released, the Data Center will release a database updater that will insert the correct statistics into the CHART table and recalculate the values for all patients entered in the current year who have data in variables V229_25 and V229T.

QC: See page 215.
VARIABLE NAME: The CHART: Total Score

DESCRIPTION: This variable is computed using the data in variables 229_20 through 229_25. The NSCISC’s software computes this variable.

CHARACTERS: 3

CODES:  
- **000 to 600** Valid range
- **999** Unknown, interview not done or respondent’s current age is less than 18
- **Blank** (only if V201 = “5”)

COMMENTS: A score of 600 indicates no handicap.

SOFTWARE: The software calculates this variable. To calculate: place the cursor on variable 229_T and click on the Calculate button.

The following formula is used:

\[ V229T = V229_20 + V229_21 + V229_22 + V229_23 + V229_24 + V229_25 \]

Else: If \([V229_20 + V229_21 + V229_22 + V229_23 + V229_24 + V229_25]\) greater than 600, then \(V229T = 999\)

Else: If \(V229_20 = \text{blank}\) or \(V229_21 = \text{blank}\) or \(V229_22 = \text{blank}\) or \(V229_23 = \text{blank}\) or \(V229_24 = \text{blank}\) or \(V229_25 = \text{blank}\), then \(V229T = \text{blank}\).

**Note:** V229_25 and V229T are calculated using the Federal Poverty Level data which is not released until February or March of the current year. When the current year’s statistics are released, the Data Center will release a database updater that will insert the correct statistics into the CHART table and recalculate the values for all patients entered in the current year who have data in variables V229_25 and V229T.

QC: See page 215.

QC: See page 215.
VARIABLE NAME: The Craig Hospital Inventory of Environmental Factors – Short Form

DESCRIPTION: The Craig Hospital Inventory of Environmental Factors (CHIEF) is designed to assess the frequency and magnitude of perceived physical, attitudinal, and policy barriers that keep people with disabilities from doing what they want or need to do. It is designed to be a short inventory of environmental barriers that can be utilized in large-scale surveys and surveillance systems, and be valid for both individuals with and without disabilities.

The NSCISC’s software calculates the subscales and the total score.

COMMENTS: The CHIEF has demonstrated that compared with non-disabled people, people with disabilities encounter more frequent and more problematic environmental barriers. Moreover, the CHIEF has demonstrated that the impact of barriers are associated with the type and severity of the disability.

The focus of CHIEF is the quantification of barriers experienced in broad categories of environmental items. Respondents rate the frequency with which they encounter barriers (daily, weekly, monthly, less than monthly, or never) on 12 items of the CHIEF Short Form reflecting elements of the physical, attitudinal, and policy environments. When respondents indicate that they encounter environmental barriers at any frequency other than never, a follow-up question is asked about whether they consider the barrier to be a big or a little problem. Scoring of each CHIEF item is the product of the frequency score (from never=0 to daily=4) and the magnitude of impact score (little problem=1 and big problem=2) to produce an item score that ranges from 0-8.

The CHIEF items are “Window variables” (see rules on page 215). Obtain the data as close as possible to the anniversary date. When asking the questions during the year 1 interview, ask Since discharge....” (rather than “during the past 12 months...”). The 2-page CHIEF interview sheet (see Appendix A) may be used.

Use the unknown code in all CHIEF items if the respondent’s current age is less than 18. If the patient is coded “lost” (V201 = “5”) then, leave all variables after V202 blank.

Note to interviewers: once it has been determined that the respondent is not working and not in school, do not ask CHIEF questions 7 and 9.


SOFTWARE: The NSCISC’s software calculates the 5 subscales (variables 230_13 to 230_17) as well as the Total CHIEF Score (V230T). To use: place the cursor on the variable to be calculated (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: See page 215.
VARIABLES 230_1, 230_1A

FORM II

VARIABLE NAME: The CHIEF: Question 1

DESCRIPTION: The following question is asked:

*In the past 12 months, how often has the availability of transportation been a problem for you? (V230_1)*

Followed by this question:

*When this problem occurs has it been a big problem or a little problem? (V230_1A)*

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_1)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Magnitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>Less than monthly</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Monthly</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Weekly</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent's current age is less than 18</td>
<td>9</td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

Magnitude (V230_1A)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Magntitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No problem</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>Little problem</td>
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<tr>
<td>2</td>
<td>Big problem</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent's current age is less than 18</td>
<td>9</td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often has the availability of transportation been a problem for you?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

QC: If variable 230_1 is coded 0 then, variable 230_1A must be coded 0.
See page 215.
VARIABLES 230_2, 230_2A

FORM II

VARIABLE NAME: The CHIEF: Question 2.

DESCRIPTION: The following question is asked:

In the past 12 months, how often has the natural environment –
temperature, terrain, climate - made it difficult to do what you want
or need to do? (V230_2)

Followed by this question:

When this problem occurs has it been a big problem or a little
problem? (V230_2A)

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_2)

0 Never (code Magnitude 0)
1 Less than monthly
2 Monthly
3 Weekly
4 Daily
9 Unknown, interview not done or respondent's current age is
less than 18 (code magnitude 9)
Blank (only if V201 = “5”)

Magnitude (V230_2A)

0 No problem (code Frequency 0)
1 Little problem
2 Big problem
9 Unknown, interview not done or respondent's current age is
less than 18
Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often has
the natural environment- temperature, terrain, climate - made it difficult
do what you want or need to do?”

REVISIONS: October 2000: variables were added to the database. Data are required for
new Form IIs entered on or after 03/01/2001.

QC: If variable 230_2 is coded 0 then, variable 230_2A must be coded 0.
See page 215.
VARIABLE NAME: The CHIEF: Question 3.

DESCRIPTION: The following question is asked:

*In the past 12 months, how often have other aspects of your surroundings – lighting, noise, crowds, etc – made it difficult to do what you want or need to do? (V230_3)*

Followed by this question:

*When this problem occurs has it been a big problem or a little problem? (V230_3A)*

CHARACTERS: 1 for each entry, 2 entries

CODES:

**Frequency (V230_3)**

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<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never (code Magnitude 0)</td>
</tr>
<tr>
<td>1</td>
<td>Less than monthly</td>
</tr>
<tr>
<td>2</td>
<td>Monthly</td>
</tr>
<tr>
<td>3</td>
<td>Weekly</td>
</tr>
<tr>
<td>4</td>
<td>Daily</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18 (code magnitude 9)</td>
</tr>
</tbody>
</table>

**Blank** (only if V201 = “5”)

**Magnitude (V230_3A)**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No problem (code Frequency 0)</td>
</tr>
<tr>
<td>1</td>
<td>Little problem</td>
</tr>
<tr>
<td>2</td>
<td>Big problem</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

**Blank** (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often have other aspects of your surroundings – lighting, noise, crowds, etc – made it difficult to do what you want or need to do?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_3 is coded 0 then, variable 230_3A must be coded 0. See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 4

DESCRIPTION: The following question is asked:

In the past 12 months, how often has the information you wanted or needed not been available in a format you can use or understand? (V230_4)

Followed by this question:

When this problem occurs has it been a big problem or a little problem? (V230_4A)

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_4)

0 Never (code Magnitude 0)
1 Less than monthly
2 Monthly
3 Weekly
4 Daily
9 Unknown, interview not done or respondent's current age is less than 18 (code Magnitude 9)
Blank (only if V201 = “5”)

Magnitude (V230_4A)

0 No problem (code Frequency 0)
1 Little problem
2 Big problem
9 Unknown, interview not done or respondent's current age is less than 18
Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often has the information you wanted or needed not been available in a format you can use or understand?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_4 is coded 0 then, variable 230_4A must be coded 0. See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 5

DESCRIPTION: The following question is asked:

In the past 12 months, how often has the availability of health care services and medical care been a problem for you? (V230_5)

Followed by this question:

When this problem occurs has it been a big problem or a little problem? (V230_5A)

CHARACTERS: 1 for each entry, 2 entries

CODES:

Frequency (V230_5)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never (code Magnitude 0)</td>
</tr>
<tr>
<td>1</td>
<td>Less than monthly</td>
</tr>
<tr>
<td>2</td>
<td>Monthly</td>
</tr>
<tr>
<td>3</td>
<td>Weekly</td>
</tr>
<tr>
<td>4</td>
<td>Daily</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18 (code Magnitude 9)</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

Magnitude (V230_5A)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No problem (code Frequency 0)</td>
</tr>
<tr>
<td>1</td>
<td>Little problem</td>
</tr>
<tr>
<td>2</td>
<td>Big problem</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

COMMENTS: If health care/medical care services are not needed, code Frequency “0” and code Magnitude “0”.

This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often has the availability of health care services and medical care been a problem for you?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

QC: If variable 230_5 is coded 0 then, variable 230_5A must be coded 0.

See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 6

DESCRIPTION: The following question is asked:

*In the past 12 months, how often did you need someone else’s help in your home and could not get it easily? (V230_6)*

Followed by this question:

*When this problem occurs has it been a big problem or a little problem? (V230_6A)*

CHARACTERS: 1 for each entry, 2 entries

CODES:

**Frequency (V230_6)**

- 0 Never *(code Magnitude 0)*
- 1 Less than monthly
- 2 Monthly
- 3 Weekly
- 4 Daily
- 9 Unknown, interview not done or respondent’s current age is less than 18 *(code Magnitude 9)*

**Blank** *(only if V201 = “5”)*

**Magnitude (V230_6A)**

- 0 No problem *(code Frequency 0)*
- 1 Little problem
- 2 Big problem
- 9 Unknown, interview not done or respondent’s current age is less than 18

**Blank** *(only if V201 = “5”)*

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, often did you need someone else’s help in your home and could not get it easily?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_6 is coded 0 then, variable 230_6A must be coded 0.

See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 7
DESCRIPTION: The following question is asked:

In the past 12 months, how often did you need someone else’s help at school or work and could not get it easily? (V230_7)

Followed by this question:

When this problem occurs has it been a big problem or a little problem? (V230_7A)

CHARACTERS: 1 for each entry, 2 entries
CODES: Frequency (V230_7)

0 Never (code Magnitude 0)
1 Less than monthly
2 Monthly
3 Weekly
4 Daily
8 Not applicable, person not working and not in school (code Magnitude 8)
9 Unknown, interview not done or respondent’s current age is less than 18 (code Magnitude 9)
Blank (only if V201 = “5”)

Magnitude (V230_7A)

0 No problem (code Frequency 0)
1 Little problem
2 Big problem
8 Not applicable, person not working and not in school (code Frequency 8)
9 Unknown, interview not done or respondent’s current age is less than 18
Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often did you need someone else’s help at school or work and could not get it easily?”

Note to interviewers: once it has been determined that the respondent is not working and not in school, do not ask CHIEF questions 7 and 9.

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_7 is coded 0 then, variable 230_7A must be coded 0.
If variable 230_7 is coded 8 then, variable 230_7A must be coded 8.
See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 8

DESCRIPTION: The following question is asked:

*In the past 12 months, how often have other people’s attitudes toward you been a problem at home?* (V230_8)

Followed by this question:

*When this problem occurs has it been a big problem or a little problem?* (V230_8A)

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_8)

- 0 Never (code Magnitude 0)
- 1 Less than monthly
- 2 Monthly
- 3 Weekly
- 4 Daily
- 9 Unknown, interview not done or respondent’s current age is less than 18 (code Magnitude 9)

Blank (only if V201 = “5”)

Magnitude (V230_8A)

- 0 No problem (code Frequency 0)
- 1 Little problem
- 2 Big problem
- 9 Unknown, interview not done or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often have other people’s attitudes toward you been a problem at home?”

If the person lives alone, this question must still be asked and coded accordingly. If the person lives alone and other people’s attitudes toward him have not been a problem in his home, code this variable 0.

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_8 is coded 0 then, variable 230_8A must be coded 0. See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 9

DESCRIPTION: The following question is asked:

*In the past 12 months, how often have other people’s attitudes toward you been a problem at school or work? (V230_9)*

Followed by this question:

*When this problem occurs has it been a big problem or a little problem? (V230_9A)*

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_9)

<table>
<thead>
<tr>
<th></th>
<th>Description</th>
</tr>
</thead>
<tbody>
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<td>0</td>
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<tr>
<td>1</td>
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<td>Monthly</td>
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<tr>
<td>3</td>
<td>Weekly</td>
</tr>
<tr>
<td>4</td>
<td>Daily</td>
</tr>
<tr>
<td>8</td>
<td>Not applicable, person not working or not in school</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

Magnitude (V230_9A)

<table>
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<th>Description</th>
</tr>
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<td>No problem (code Frequency 0)</td>
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<tr>
<td>1</td>
<td>Little problem</td>
</tr>
<tr>
<td>2</td>
<td>Big problem</td>
</tr>
<tr>
<td>8</td>
<td>Not applicable, person not working or not in school</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often have other people’s attitudes toward you been a problem at school or work?”

Note to interviewers: once it has been determined that the respondent is not working and not in school, do not ask CHIEF questions 7 and 9.

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_9 is coded 0 then, variable 230_9A must be coded 0.
If variable 230_9 is coded 8 then, variable 230_9A must be coded 8.
See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 10

DESCRIPTION: The following question is asked:

In the past 12 months, how often did you experience prejudice or discrimination? (V230_10)

Followed by this question:

When this problem occurs has it been a big problem or a little problem? (V230_10A)

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_10)

0 Never (code Magnitude 0)
1 Less than monthly
2 Monthly
3 Weekly
4 Daily
9 Unknown, interview not done or respondent’s current age is less than 18 (code Magnitude 9)
Blank (only if V201 = “5”)

Magnitude (V230_10A)

0 No problem (code Frequency 0)
1 Little problem
2 Big problem
9 Unknown, interview not done or respondent’s current age is less than 18
Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often did you experience prejudice or discrimination?” This variable does include racial prejudice.

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_10 is coded 0 then, variable 230_10A must be coded 0.
See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 11

DESCRIPTION: The following question is asked:

In the past 12 months, how often did the policies and rules of businesses and organizations make problems for you? (V230_11)

Followed by this question:

When this problem occurs has it been a big problem or a little problem? (V230_11A)

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_11)

  0 Never (code Magnitude 0)
  1 Less than monthly
  2 Monthly
  3 Weekly
  4 Daily
  9 Unknown, interview not done or respondent’s current age is less than 18 (code Magnitude 9)

Blank (only if V201 = “5”)

Magnitude (V230_11A)

  0 No problem (code Frequency 0)
  1 Little problem
  2 Big problem
  9 Unknown, interview not done or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often did the policies and rules of businesses and organizations make problems for you?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

QC: If variable 230_11 is coded 0 then, variable 230_11A must be coded 0.

See page 215.
FORM II

VARIABLE NAME: The CHIEF: Question 12

DESCRIPTION: The following question is asked:

In the past 12 months, how often did government programs and policies make it difficult to do what you want or need to do? (V230_12)

Followed by this question:

When this problem occurs has it been a big problem or a little problem? (V230_12A)

CHARACTERS: 1 for each entry, 2 entries

CODES: Frequency (V230_12)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>Magnitude</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Never (code Magnitude 0)</td>
<td>0</td>
</tr>
<tr>
<td>1</td>
<td>Less than monthly</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Monthly</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Weekly</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Daily</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18 (code magnitude 9)</td>
<td></td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

Magnitude (V230_12A)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>None (code Frequency 0)</td>
</tr>
<tr>
<td>1</td>
<td>Little problem</td>
</tr>
<tr>
<td>2</td>
<td>Big problem</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

For the year 1 (or year 2) interview, ask “Since discharge, how often did government programs and policies make it difficult to do what you want or need to do?”

REVISIONS: October 2000: variables were added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 230_12 is coded 0 then, variable 230_12A must be coded 0.
See page 215.
VARIABLE 230_13

FORM II

VARIABLE NAME: The CHIEF: Policies Subscale

DESCRIPTION: This variable is the mean of the product scores for variables 230_11 and 230_12. This variable is calculated by the NSCISC’s software.

The product score = item frequency x item magnitude.

CHARACTERS: 4

CODES:

0.00 to 8.00 Valid range

9.99 Unknown, interview not done or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

March 2001: Unknown code changed from 9.00 to 9.99 and characters changed from 3 to 4 (to store the decimal point).

QC: If variable 230_11 = “9” or variable 230_12 = “9” then, this variable should = “9.99”.

See page 215.

SOFTWARE: The software includes a function to calculate this variable. To use: place the cursor on V230_13 (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
VARIABLE NAME: The Chief: Physical/Structural Subscale

DESCRIPTION: This variable is the mean of the product scores for variables 230_2 and 230_3. This variable is calculated by the NSCISC’s software.

The product score = item frequency x item magnitude.

CHARACTERS: 4

CODES:

- **0.00 to 8.00** Valid range
- **9.99** Unknown, interview not done or respondent’s current age is less than 18
- **Blank** (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

March 2001: Unknown code changed from 9.00 to 9.99 and characters changed from 3 to 4 (to store the decimal point).

QC: If variable 230_2 = “9” or variable 230_3 = “9” then, this variable should = “9.99”.

See page 215.

SOFTWARE: The software includes a function to calculate this variable. To use: place the cursor on V230_14 (in the data entry box), the software will then ask *Calculate this variable?* Place the cursor on *Yes* and *click once* with the left mouse button.
FORM II

VARIABLE NAME: The CHIEF: Work/School Subscale.

DESCRIPTION: This variable is the mean of the product scores for variables 230_7 and 230_9. This variable is calculated by the NSCISC’s software.

The product score = item frequency x item magnitude.

CHARACTERS: 4

CODES:

0.00 to 8.00  Valid range

8.88  Not applicable, person not working or not in school

9.99  Unknown, interview not done or respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

March 2001: Unknown code changed from 9.00 to 9.99 and characters changed from 3 to 4 (to store the decimal point).

QC: If variable 230_7 = “9” or variable 230_9 = “9” then, this variable should = “9.99”.

If variable 230_7 = “8” or variable 230_9 = “8” then, this variable should = “8.88”.

See page 215.

SOFTWARE: The software includes a function to calculate this variable. To use: place the cursor on V230_13 (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
VARIABLE 230_16

FORM II

VARIABLE NAME: The CHIEF: Attitudes/Support Subscale.

DESCRIPTION: This variable is the mean of the product scores for variables 230_8 and 230_10. This variable is calculated by the NSCISC’s software.

The product score = item frequency x item magnitude.

CHARACTERS: 4

CODES:

<table>
<thead>
<tr>
<th>0.00 to 8.00</th>
<th>Valid range</th>
</tr>
</thead>
<tbody>
<tr>
<td>9.99</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

Blank  (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

March 2001: Unknown code changed from 9.00 to 9.99 and characters changed from 3 to 4 (to store the decimal point).

QC: If variable 230_8 = “9” or variable 230_10 = “9” then, this variable should = “9.99”.

See page 215.

SOFTWARE: The software includes a function to calculate this variable. To use: place the cursor on V230_16 (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
VARIABLE 230_17

FORM II

VARIABLE NAME: The CHIEF: Services/Assistance Subscale.

DESCRIPTION: This variable is the mean of the product scores for variables 230_1, 230_4, 230_5 and 230_6. This variable is calculated by the NSCISC’s software.

The product score = item frequency x item magnitude.

CHARACTERS: 4

CODES: 0.00 to 8.00 Valid range

9.99 Unknown, interview not done or respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

March 2001: Unknown code changed from 9.00 to 9.99 and characters changed from 3 to 4 (to store the decimal point).

QC: If variable 230_1 = “9” or variable 230_4 = “9” or variable 230_5 = “9” or variable 230_6 = “9” then, this variable should = “9.99”.

See page 215.

SOFTWARE: The software includes a function to calculate this variable. To use: place the cursor on V230_17 (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
VARIABLE 230T

FORM II

VARIABLE NAME: The CHIEF: Total

DESCRIPTION: This variable is the mean of the product scores for all variables 230_1 through 230_12. This variable is calculated by the NSCISC’s software.

The product scores for 230_7 and 230_9 are excluded from the CHIEF Total if V230_7, V230_7A, V230_9 and V230_9A are coded “8”.

The product scores for all CHIEF items are excluded from the CHIEF Total if 1 or more items are coded “9”.

CHARACTERS: 4

CODES: 

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.00 to 8.00</td>
<td>Valid range</td>
</tr>
<tr>
<td>9.99</td>
<td>Unknown, interview not done or respondent’s current age is less than 18</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

March 2001: Unknown code changed from 9.00 to 9.99 and characters changed from 3 to 4 (to store the decimal point).

QC: If the Frequency of any variable from 230_1 through 230_12 is coded “9”, then this variable = “9.99”.

See page 215.

SOFTWARE: The software includes a function to calculate this variable. To use: place the cursor on V230T (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
VARIABLE NAME: The Patient Health Questionnaire (Brief Version): Question 1

DESCRIPTION: The following question is asked:

*Over the last 2 weeks, how often have you been bothered by little interest or pleasure in doing things?*

CHARACTERS: 1

CODES:

0 Not at all
1 Several days
2 More than half the days
3 Nearly every day
9 Unknown, interview not done, respondent’s current age is less than 18

Blank *(only if V201 = “5”)*

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

SOURCE: Developed by Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroenke and colleagues, with an educational grant from Pfizer Inc.

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version) : Question 2

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by feeling down, depressed, or hopeless?

CHARACTERS: 1

CODES:

0  Not at all
1  Several days
2  More than half the days
3  Nearly every day
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
VARIABLE NAME: The Patient Health Questionnaire (Brief Version): Question 3

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by trouble falling or staying asleep, or sleeping too much?

CHARACTERS: 1

CODES:

0  Not at all

1  Several days

2  More than half the days

3  Nearly every day

9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version) : Question 4

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by feeling tired or having little energy?

CHARACTERS: 1

CODES:

0  Not at all
1  Several days
2  More than half the days
3  Nearly every day
9  Unknown, interview not done, respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version) : Question 5

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by poor appetite or overeating?

CHARACTERS: 1

CODES:

0  Not at all
1  Several days
2  More than half the days
3  Nearly every day
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version) : Question 6

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by feeling bad about yourself – or that you are a failure or have let yourself or your family down?

CHARACTERS: 1

CODES:

0 Not at all
1 Several days
2 More than half the days
3 Nearly every day
9 Unknown, interview not done, respondent’s current age is less than 18
Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version): Question 7

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by trouble concentrating on things, such as reading the newspaper or watching television?

CHARACTERS: 1

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all</td>
</tr>
<tr>
<td>1</td>
<td>Several days</td>
</tr>
<tr>
<td>2</td>
<td>More than half the days</td>
</tr>
<tr>
<td>3</td>
<td>Nearly every day</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done, respondent’s current age is less than 18</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version) : Question 8

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by moving or speaking so slowly that other people could have noticed?

Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual?

CHARACTERS: 1

CODES:

0  Not at all
1  Several days
2  More than half the days
3  Nearly every day
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
FORM II

VARIABLE NAME: The Patient Health Questionnaire (Brief Version) : Question 9

DESCRIPTION: The following question is asked:

Over the last 2 weeks, how often have you been bothered by thoughts that you would be better off dead or of hurting yourself in some way?

CHARACTERS: 1

CODES:

0 Not at all
1 Several days
2 More than half the days
3 Nearly every day
9 Unknown, interview not done, respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

Each system should develop their own response procedures if the participant responds “yes” to this question. Copies of the protocols used at the Denver and Seattle systems are available from the NSCISC.

One system’s consent form already has some wording that states confidentiality is not absolute.

The attorney at another system advised them that they do not have a duty to report since there is not a "patient-doctor" relationship inherent in the data collection process. He advised that it would be sufficient to provide appropriate referral information if the patient requests it.

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
VARIABLE NAME: The Patient Health Questionnaire (Brief Version): Question 10

DESCRIPTION: The following question is asked:

*If you had any of the problems I asked about in questions 1 through 9, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?*

CHARACTERS: 1

CODES:

0  Not difficult at all
1  Somewhat difficult
2  Very difficult
3  Extremely difficult
8  Not applicable, did not have any of the problems in questions 1 through 9
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  *(only if V201 = “5”)*

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variables 231_1 through 231_9 are coded “0” then, this variable must be coded “8”.

If the patient’s current age is less than 18 then, this variable must be coded “9”.

See page 215.
VARIABLE 231M

FORM II

VARIABLE NAME: Major Depressive Syndrome

DESCRIPTION: This variable is calculated using the responses in variables 231_1 through 231_9.

This variable is generated by the NSCISC’s software.

CHARACTERS: 1

CODES:

0  No depressive syndrome
1  Major depressive syndrome
2  Other depressive syndrome
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

If this variable = “1” or “2”, notify the clinical staff at your Model System.

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If variable 231_10 = “8”, then V231_1 through V231_9 must = “0” and V231M must = “0”.

See page 215.

SOFTWARE: The software includes a function key to calculate this variable. These are the specifications for the calculation:

V231M = 0.
If (V231_1 = 2 or 3 OR V231_2 = 2 or 3) AND
5 or more of V231_1 through V231_9 = 2 or 3 (count V231_9 if coded 1, 2, or 3)
then, V231M = 1.
If (V231_1 = 2 or 3 OR V231_2 = 2 or 3) AND
2, 3 or 4 of V231_1 through V231_9 = 2 or 3 (count V231_9 if coded 1, 2, or 3)
then, V231M = 2.

Else: if (V231_1 = 9 or V231_2 = 9 or V231_3 = 9 or V231_4 = 9 or V231_5 = 9 or V231_6 = 9
or V231_7 = 9 or V231_8 = 9 or V231_9 = 9) AND
[(V231_1 = 2 or 3 OR V231_2 = 2 or 3) AND 5 or more of V231_1 through V231_9
= 2 or 3 (count V231_9 if coded 1, 2, or 3) = NOT TRUE]
then, V231M = 9.

Once the minimal score for major depression is attained then, unknown codes in some elements don’t matter.

Else: if (V231_1 = blank or V231_2 = blank or V231_3 = blank or V231_4 = blank or V231_5
= blank or V231_6 = blank or V231_7 = blank or V231_8 = blank or V231_9 = blank) AND
[(V231_1 = 2 or 3 OR V231_2 = 2 or 3) AND 5 or more of V231_1 through V231_9
= 2 or 3 (count V231_9 if coded 1, 2, or 3) = NOT TRUE]
then, V231M = blank.

The logic is that, once the minimal score for major depression is attained then, blanks in some elements don’t matter.
VARIABLE 231S

FORM II

VARIABLE NAME: Severity of Depression

DESCRIPTION: This variable is the sum of the responses in variables 231_1 through 231_9.

This variable can be generated by the NSCISC’s software.

CHARACTERS: 2

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00-27</td>
<td>Valid range</td>
</tr>
<tr>
<td>99</td>
<td>Unknown, interview not done, respondent’s current age is less than 18</td>
</tr>
<tr>
<td>Blank</td>
<td>(only if V201 = “5”)</td>
</tr>
</tbody>
</table>

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: The checks utilize the formula below and the info on page 215.

SOFTWARE: The software includes a function key to calculate this variable. To use: place the cursor on V231S (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.

Formula used:

If <V231_1> = blank or <V231_2> = blank or <V231_3> = blank or <V231_4> = blank or <V231_5> = blank or <V231_6> = blank or <V231_7> = blank or <V231_8> = blank or <V231_9> = blank then, <V231M> = blank.

If <V231_1> = 9 or <V231_2> = 9 or <V231_3> = 9 or <V231_4> = 9 or <V231_5> = 9 or <V231_6> = 9 or <V231_7> = 9 or <V231_8> = 9 or <V231_9> = 9 then, <V231M> = 99.

Else <V231M> = sum <V231_1> + <V231_2> + <V231_3> + <V231_4> + <V231_5> + <V231_6> + <V231_7> + <V231_8> + <V231_9>.
VARIABLE 232

FORM II

VARIABLE NAME: Drug Use
DESCRIPTION: The following question is asked:

During the past year, have you used illegal drugs or prescribed medications for nonmedical reasons?

CHARACTERS: 1 for each entry (up to 6 entries)
CODES:
0 No (Valid in coding position #1 only)
1 Cocaine (powder, crack, free base and coca paste)
2 Pot/marijuana (hashish)
3 Hallucinogens [LSD, acid, white lightening, peyote, mescaline, psilocybin (mushrooms), PCP (angel dust, phencyclidine), Ecstasy (MDMA)]
4 Heroin/opiates (including abused analgesic prescribed drugs such as morphine, codeine, dilaudid, MSContin, demerol, darvon, talwin, methadone, etc.)
5 Speed/stimulants (methamphetamine, speed, crank, ice)
6 Medications prescribed for you
7 Medications prescribed for someone else
8 Undisclosed type or type unknown
9 Unknown, interview not done, respondent’s current age is less than 18
(Valid in coding position #1 only)
Blank (only if V201 = “5”)

COMMENTS: “Non-medical reasons” mean using medications on your own without your own prescription from a doctor, or using drugs in greater amounts or more often than prescribed, or using drugs to get high. We are interested in purposeful misuse of drugs (prescription or otherwise). For that reason, accidental overdoses of prescribed medications would be coded “no”.

Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215). For the year 01 Form II ask “Since discharge to your first anniversary, have you used illegal drugs or prescribed medications for nonmedical reasons?” If a year 02 Form II is substituted for the year 01 Form II ask “Since discharge to your second anniversary, have you used illegal drugs or prescribed medications for nonmedical reasons?”

REVISIONS: October 2000: this variable was added to the database. Multiple coding positions were added in January 2001 and the list of drugs was added in March 2001. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If the patient’s current age is less than 18 then, this variable must be coded “9”.

EXAMPLE 1: The patient has a prescription for Viagra which he uses as prescribed. He sometimes takes his wife’s prescribed sleeping pills.

232. Drug Use ............................................ 7 1 2 3 4 5 6

EXAMPLE 2: The patient has prescribed marijuana, which he uses as directed.

232. Drug Use ............................................ 0 1 2 3 4 5 6

EXAMPLE 3: The patient has prescribed marijuana, which he does not use as directed.

232. Drug Use ............................................ 6 1 2 3 4 5 6
FORM II

VARIABLE NAME: Alcohol Use

DESCRIPTION: The following question is asked:

_Do you drink any alcoholic beverages (such as beer, wine, wine coolers or liquor)?_

CHARACTERS: 1

CODES:

0  No, never ever drank alcohol
1  Yes, currently drinks or did drink in the past
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If V233 = “0” then,

V234, V237_1, V237_2, V237_3, V237_4 and V237T must = “8” and V235 and V236 must = “88”.

If the patient’s current age is less than 18 then,

V234, V237_1, V237_2, V237_3, V237_4 and V237T must = “9” and V235 and V236 must = “99”.

See page 215.
VARIABLE 234

FORM II

VARIABLE NAME: Alcohol Use: Number of Days Per Week

DESCRIPTION: The following question is asked:

During the past month, how many days per week did you drink any alcoholic beverages such as beer, wine, wine coolers or liquor, on the average?

CHARACTERS: 1

CODES:

0 None

1 to 7 Valid range

8 Drinks alcohol but number of days unknown

8 Not applicable, never drank alcohol (use this code if V233 = 0)

9 Unknown, interview not done, respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

QC: See pages 215 and 280.
FORM II

VARIABLE NAME: Alcohol Use: Number of Drinks

DESCRIPTION: The following question is asked:

On the days you drank (during the past month), about how many drinks did you drink, on the average?

CHARACTERS: 2

CODES:

00 None

00 to 87 Valid range

88 Drinks alcohol but number of drinks unknown

88 Not applicable, never drank alcohol (use this code if V233 = 0)

99 Unknown, interview not done, respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: See pages 215 and 280.
FORM II

VARIABLE NAME: Alcohol Use: Frequency During the Past Month

DESCRIPTION: The following question is asked:

Considering all types of alcoholic beverages, how many times during the past month did you have five (5) or more drinks on an occasion?

CHARACTERS: 2

CODES:

00 None

00 to 31 Valid range

88 Drinks alcohol but frequency unknown

88 Not applicable, never drank alcohol (use this code if V233 = 0)

99 Unknown, interview not done, respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIIs entered on or after 03/01/2001.

QC: See pages 215 and 280.
FORM II

VARIABLE NAME: The CAGE – Question 1

DESCRIPTION: The following question is asked:

*During the past year: have you ever felt you should cut down on your drinking?*

CHARACTERS: 1

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>8</td>
<td>Not applicable, never ever drank alcohol (use this code if V233 = 0)</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done, respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

Blank (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

February 2002: The “during the past year” time period was implemented in interviews done after February 2002. Prior to that, participants were asked “did you ever…”.

QC: See pages 215 and 280.
FORM II

VARIABLE NAME: The CAGE – Question 2

DESCRIPTION: The following question is asked:

*During the past year: have people annoyed you by criticizing your drinking?*

CHARACTERS: 1

CODES:

0   No

1   Yes

8   Not applicable, never ever drank alcohol *(use this code if V233 = 0)*

9   Unknown, interview not done, respondent’s current age is less than 18

Blank *(only if V201 = “5”)*

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

February 2002: The “during the past year” time period was implemented in interviews done after February 2002. Prior to that, participants were asked “did you ever…”

QC: See pages 215 and 280.
VARIABLE 237_3

FORM II

VARIABLE NAME: The CAGE – Question 3
DESCRIPTION: The following question is asked:

*During the past year: have you ever felt bad or guilty about your drinking?*

CHARACTERS: 1
CODES:
0 No
1 Yes
8 Not applicable, never ever drank alcohol (use this code if $V233 = 0$)
9 Unknown, interview not done, respondent’s current age is less than 18
Blank (only if $V201 = “5”$)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

February 2002: The “during the past year” time period was implemented in interviews done after February 2002. Prior to that, participants were asked “did you ever…”.

QC: See pages 215 and 280.
FORM II

VARIABLE NAME: The CAGE – Question 4

DESCRIPTION: The following question is asked:

*During the past year: have you ever had a drink first thing in the morning to steady your nerves or get rid of a hangover (eye-opener)?*

CHARACTERS: 1

CODES:

0  No
1  Yes
8  Not applicable, never ever drank alcohol (use this code if V233 = 0)
9  Unknown, interview not done, respondent’s current age is less than 18

Blank  (only if V201 = “5”)

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

February 2002: The “during the past year” time period was implemented in interviews done after February 2002. Prior to that, participants were asked “did you ever…”.

QC: See pages 215 and 280.
VARIABLE 237T

FORM II

VARIABLE NAME: The CAGE – Total Score

DESCRIPTION: This variable is the total score for the 4 CAGE items in variables 237_1, 237_2, 237_3 and 237_4. This variable can be generated by the NSCISC’s software.

CHARACTERS: 1

CODES:

0 to 4 Valid range

8 Not applicable, never ever drank alcohol (use this code if V233 = 0)

9 Unknown, interview not done, respondent’s current age is less than 18

Blank (only if V201 = “5”)

COMMENTS: This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

February 2002: The “during the past year” time period was implemented in interviews done after February 2002. Prior to that, participants were asked “did you ever…?”.

QC: See pages 215 and 280.

SOFTWARE: The software includes a function key to calculate this variable. To use: place the cursor on V237T (in the data entry box), the software will then ask Calculate this variable? Place the cursor on Yes and click once with the left mouse button.
FORM II

VARIABLE NAME: Pain: Severity of Pain

DESCRIPTION: The following question is asked:

*Using a 0-10 scale with 10 being pain so severe you could not stand it and, 0 being no pain, what has been the usual level of pain over the past 4 weeks?*

CHARACTERS: 2

CODES:

- **00** No pain *(code variable 239 “8”)*
- **00 to 10** Valid range
- **99** Unknown, interview not done, respondent’s current age is less than 18
- **Blank** *(only if V201 = “5”)*

COMMENTS: If there is more than one pain site, code the worst site.

Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

REVISIONS: October 2000: this variable was added to the database. Data are required for new Form IIs entered on or after 03/01/2001.

QC: If V238 = “00” then, V239 must = “8” and vice versa. This check applies only to records entered into the database after December 2000.

See page 215.
FORM II

VARIABLE NAME: Pain: Interfering With Work

DESCRIPTION: The following question is asked:

_During the past 4 weeks, how much did pain interfere with your normal work including both work outside the home and housework?_

CHARACTERS: 1

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>Not at all</td>
</tr>
<tr>
<td>1</td>
<td>A little bit</td>
</tr>
<tr>
<td>2</td>
<td>Moderately</td>
</tr>
<tr>
<td>3</td>
<td>Quite a bit</td>
</tr>
<tr>
<td>4</td>
<td>Extremely</td>
</tr>
<tr>
<td>6</td>
<td>Don’t know</td>
</tr>
<tr>
<td>7</td>
<td>Refuses</td>
</tr>
<tr>
<td>8</td>
<td>Not applicable, no pain during the past 4 weeks</td>
</tr>
<tr>
<td></td>
<td>(use this code if variable 238 = “00”)</td>
</tr>
<tr>
<td>9</td>
<td>Unknown, interview not done, respondent’s current age is less than 18</td>
</tr>
</tbody>
</table>

COMMENTS: Only responses from the patient are acceptable. This is a “Window variable” (see rules on page 215).

If the patient does not do (house)work, ask _During the past 4 weeks, how much did pain interfere with your usual activities?_ Let the patient determine what “usual activities” are.

SOURCE: SF-12 How to Score the SF-12 Physical and Mental Health Summary Scales. John E. Ware, Jr. Ph.D., Mark Kosinski, M.A., Susan D. Keller, Ph.D. The Health Institute, England Medical Center, Boston, Massachusetts.

REVISIONS: May 1998: this variable was added to the database.

QC: If variable 238 = “00” then, variable 239 must = “8” and vice versa. This check applies only to records entered into the database after December 2000.

See page 215.
FORM II

VARIABLE NAME: Outpatient Rehabilitation - Physical and/or Occupational Therapy from Injury to the First Anniversary of Injury

DESCRIPTION: This variable documents:
- if outpatient physical and/or occupational therapy was prescribed by a Model System physician anytime after the initial SCI to the first anniversary of injury (V240A);
- number of hours of outpatient physical and/or occupational therapy completed anytime after the initial SCI to the first anniversary of injury (V240B); and
- the location of outpatient physical and/or occupational therapy received anytime after the initial SCI to the first anniversary of injury (V240C).

If a year 02 Form II is substituted for the year 01 Form II (because the patient was still in initial hospitalization past his first anniversary), this variable documents outpatient rehab prescribed after the initial SCI to the end of the last treatment phase documented on Form I.

CHARACTERS: 1 for each entry, 3 entries

CODES: Outpatient PT and/or OT Prescribed by a Physician (V240A):
- 0 No
- 1 Yes
- 9 Unknown
  Blank (only if V201 = “5”)

Outpatient Hours Completed (V240B):
- 0 None
- 1 1 to 5 hours
- 2 6 to 20 hours
- 3 21 to 40 hours
- 4 41 to 60 hours
- 5 61 to 80 hours
- 6 81 to 100 hours
- 7 more than 100 hours
- 8 Therapy received, number of hours unknown
- 9 Unknown
  Blank (only if V201 = “5”)

Location (V240C):
- 1 System
- 2 Non-system
- 3 Both
- 8 Not applicable, no outpatient OT or PT (V240B=0)
- 9 Unknown
  Blank (only if V201 = “5”)

VARIABLES 240A, 240B and 240C (Page 1 of 2)
VARIABLE NAME: Outpatient Rehabilitation - Physical and/or Occupational Therapy from Injury to the First Anniversary of Injury

COMMENTS: Report all OT and PT outpatient treatments received from the time of injury to the first anniversary of injury:

- including outpatient OT and PT treatments that were not prescribed by the Model System physician
- including outpatient OT and PT whether it is provided by the System or by another provider.
- DO NOT include therapy received in the home unless the therapist actually makes home visits.
- DO include therapy received at “day hospitals” (i.e., facilities at which the patient receives therapy but does not spend the night).

If there is a subsequent SCI prior to the first (or second) anniversary of the initial SCI, do not count the outpatient rehab received for that subsequent injury in this variable. Document the subsequent injury in Number of Days Rehospitalized and Reason for Rehospitalization (variables 218 and 219).

See page 17 for the rules for rounding fractions of an hour.

Self-report is acceptable for this variable. However, to assure reliable data collection, it is suggested that the patient be contacted and data obtained several times during this period (e.g., every 2 months).

REVISIONS: These variables were added to the database in November 1995 and modified in February 1996.

October 2000: these variables were moved to Form II and data collection was changed from “from discharge to first anniversary” to “from injury to first anniversary”.

QC: If component B (Hours Completed) = “0” (None) then component C (Location) must = “8” (Not Applicable) and vice versa.

EXAMPLE 1: Outpatient physical therapy was prescribed, however, the patient did not complete any hours of post-discharge rehab.

240. Injury to the First Anniversary - Physical and/or Occupational Therapy:
   A. Prescribed ...... 1  B. Hours Completed ...... 0  C. Location ...... 8

EXAMPLE 2: Twenty hours of outpatient occupational therapy were prescribed and received at a non-system rehab center.

240. Injury to the First Anniversary - Physical and/or Occupational Therapy:
   A. Prescribed ...... 1  B. Hours Completed ...... 2  C. Location ...... 2

EXAMPLE 3: Out-patient occupational or physical therapy were not prescribed at the time of discharge from inpatient rehab or through the end of the first year following injury. However, the patient received 10 hours of outpatient occupational therapy at a non-system rehab center.

240. Injury to the First Anniversary - Physical and/or Occupational Therapy:
   A. Prescribed ...... 0  B. Hours Completed ...... 2  C. Location ...... 2
FORM II

VARIABLE NAME: Outpatient Rehabilitation - Psychological or Vocational Counseling from Injury to the First Anniversary of Injury

DESCRIPTION: This variable documents:

- if post-discharge outpatient psychological or vocational counseling was prescribed by a physician anytime after the initial SCI to the first anniversary of injury (V241A);
- number of hours of outpatient psychological or vocational counseling completed anytime after the initial SCI to the first anniversary of injury (V241B); and
- the location of post-discharge outpatient psychological or vocational counseling received anytime after the initial SCI to the first anniversary of injury (V241C).

If a year 02 Form II is substituted for the year 01 Form II (because the patient was still in initial hospitalization past his first anniversary), this variable documents outpatient rehab prescribed after the initial SCI to the end of the last treatment phase documented on Form I.

CHARACTERS: 1 for each entry, 3 entries

CODES: Outpatient Counseling Prescribed by a Physician (V241A):

| 0 | No |
| 1 | Yes |
| 9 | Unknown |

Blank (only if V201 = “5”)

Outpatient Hours Completed (V241B):

| 0 | None |
| 1 | 1 to 5 hours |
| 2 | 6 to 20 hours |
| 3 | 21 to 40 hours |
| 4 | 41 to 60 hours |
| 5 | 61 to 80 hours |
| 6 | 81 to 100 hours |
| 7 | more than 100 hours |
| 8 | Counseling received, number of hours unknown |
| 9 | Unknown |

Blank (only if V201 = “5”)

Location (V241C):

| 1 | System |
| 2 | Non-system |
| 3 | Both |
| 8 | Not applicable, no outpatient counseling (V241B=0) |
| 9 | Unknown |

Blank (only if V201 = “5”)

NSCISC: 03/2005 293
VARIABLE NAME: Outpatient Rehabilitation - Psychological or Vocational Counseling from Injury to the First Anniversary of Injury

COMMENTS: Report all outpatient psychological and vocational counseling received from the time of injury to the first anniversary of injury:

- Including outpatient psychological and vocational that was not prescribed by the Model System physician
- Including outpatient psychological and vocational counseling whether it is provided by the System or by another provider.
- Do not include outpatient counseling received in the home unless the counselor actually makes home visits.

If there is a subsequent SCI prior to the first (or second) anniversary of the initial SCI, do not count the outpatient rehab received for that subsequent injury in this variable. Document the subsequent injury in Number of Days Rehospitalized and Reason for Rehospitalization (variables 218 and 219).

See page 17 for the rules for rounding fractions of an hour.

Self-report is acceptable for this variable. However, to assure reliable data collection, it is suggested that the patient be contacted and data obtained several times during this period (e.g., every 2 months).

Referrals by VRS (Vocational Rehab Service) are included in this variable. Includes only professional counseling (not support groups).

REVISIONS: November 1995: these variables were added to the database and modified in February 1996.

October 2000: these variables were moved to Form II and data collection was changed from “from discharge to first anniversary” to “from injury to first anniversary”.

QC: If component B (Hours Completed) = “0” (None) then component C (Location) must = “8” (Not Applicable) and vice versa.

EXAMPLE 1: Outpatient psychological counseling was prescribed, however, the patient did not complete any hours of post-discharge counseling.

241. Injury to the First Anniversary – Psychological and/or Vocational Counseling:
   A. Prescribed ...... 1   B. Hours Completed ...... 0   C. Location ....... 8

EXAMPLE 2: Twenty hours of outpatient vocational counseling was prescribed and received at a non-system rehab center.

241. Injury to the First Anniversary – Psychological and/or Vocational Counseling:
   A. Prescribed ...... 1   B. Hours Completed ...... 2   C. Location ....... 2

EXAMPLE 3: Outpatient psychological or vocational counseling were not prescribed at the time of discharge through the end of the first year after injury. However, the patient received 10 hours of outpatient vocational counseling at a non-system rehab center.

241. Injury to the First Anniversary – Psychological and/or Vocational Counseling:
   A. Prescribed ...... 0   B. Hours Completed ...... 2   C. Location ....... 2
VARIABLE ExStat

PERSONAL DATA

VARIABLE NAME: Export Status

DESCRIPTION: This is a computer-generated variable used by the EXPORT function of the software to determine if the Patient Name, Social Security Number, Date of Birth and/or the Zip Codes are to be exported to the NSCISC. The software generates the ExStat code based on the user’s selection of the Personal Data items.

CHARACTERS: 4

CODES:
0000 None of the items may be exported to the NSCISC
1111 All of the items are to be Exported to the NSCISC
All other combinations of 1’s and 0’s as generated by the software

COMMENTS: It is advisable that Systems obtain separate permission to allow the Personal Data to be shipped to the NSCISC. Only the Patient Name (V102), Social Security Number (V103), Date of Birth (V104) and Zip Codes for Places of Residence during Follow-up (V105_1, V105_5, V105_10, V105_15, V105_20, V105_25 and V105_30) are available for shipment to the NSCISC.

REVISIONS: October 2000: this variable was added the database.
February 2003: this variable is computer-generated based on the user’s selections.

SOFTWARE: Check the appropriate boxes to select the items the patient has agreed to have exported to the NSCISC. See the Users’ Manual for details.

EXAMPLE: The patient has agreed to export his name and zip codes. The data entry person has checked the appropriate boxes and the software generates code 1001 in the ExStat variable. Note: the user sees only the checked boxes (not the “1001” code).

| Name  | ✓  | SSN | Birth Date | Zip Codes  | ✓ |

CONVERSION: February 2003: If the old ExStat variable was coded 0 then, the new variables (Name, SSN, Birth Date and Zip Codes) are not checked (on the data entry screen) and, the ExStat variable is coded 0000 in the database.

If the old ExStat variable was coded 1 then, the new variables (Name, SSN, Birth Date and Zip Codes) are checked (on the data entry screen) and the ExStat variable is coded 1111 in the database.
**VARIABLE Sample**

**FORM I**

**VARIABLE NAME:** Sample

**DESCRIPTION:** This variable indicates whether or not yearly follow-up data were required (as determined by a sampling process). The NSCISC's sampling process was in effect from November 1995 through September 2000 and was instituted to reduce the burden of data submission for those systems with large patient populations. The sampling system required “Core” (i.e., limited) follow-up data on the Sample patients.

Although the 1995-2000 sampling scheme is no longer used, this variable has been retained in the database to identify the patients for whom complete follow-up was (or was not) required.

**CHARACTERS:** 1

**CODES:**

0  Non-sample patient
1  Sample patient - group 1
2  Sample patient - group 2
3  Sample patient - group 3
4  Sample patient - group 4

**COMMENTS:** The sampling method did not affect clinical follow-up efforts. All patients were still encouraged to return to the system for medical evaluation as often as needed.

Code “0” will be inserted (by the software) in all Form Is entered after the sampling method was discontinued. Users are not allowed to modify this variable because it is a data management variable.
VARIABLE QCStat

PERSONAL DATA, REGISTRY, FORM I and FORM II

VARIABLE NAME: Quality Control (QC) Status

DESCRIPTION: This is a computer-generated variable used by the EXPORT function of the software to determine which records have passed quality control and may be shipped to the NSCISC.

CHARACTERS: 1

CODES:

1  Not passed QC
2  Passed QC
3  Shipped to NSCISC

COMMENTS: This is a data management variable that is generated by the NSCISC’s software. Users are not allowed to modify this variable.
VARIABLE Batch

PERSONAL DATA, REGISTRY, FORM I and FORM II

VARIABLE NAME: Batch Number

DESCRIPTION: This is a computer-generated data management variable (see Software paragraph below) that uniquely labels a group of records processed during a period of time.

This number is displayed during the data entry process and should be copied on the data collection forms entered in that batch. The NSCISC refers to this number when it sends the system a verification of data received and merged into the national database.

This variable could also be useful as a computerized means by which a system may identify forms completed and/or entered by different persons.

CHARACTERS: 10 (2 for the System ID, 8 for the date)

COMMENTS: The Batch Number consists of:

> the system's alphabetic identification code (the same as that used in variable 100)

> the year, month and day a batch was started.

A date stamper may be used to place this portion of the Batch Number on the data collection forms.

This is a data management variable that is generated by the NSCISC’s software. Users are not allowed to modify this variable.

SOFTWARE: During the LOAD process (the installation of the software onto a system's computer) the user will be asked to enter a batch number. The program will place this batch number on every record newly entered or updated from that point until the user EXPORTS this batch of data to the NSCISC.

After a system's first batch has been exported, the software will assign batch numbers (based on the date the current batch was exported.)

EXAMPLE: The system's ID is "B " and the date assigned to the batch is June 30, 1990.

The batch number is: B _ 1 9 9 0 0 6 3 0
PERSONAL DATA, REGISTRY, FORM I and FORM II

VARIABLE NAME: Record Indate

DESCRIPTION: This is the date on which a particular record is first entered into the computer. It is a data management variable that is computer-generated.

Once entered, this date never changes.

CHARACTERS: 8

SOFTWARE: After a record is SAVED during the data-entry process, the computer inserts the present date in this variable.

COMMENTS: Several records in the national database have indates equal to 19861001. These records were in the database prior to the revision of the definitions for the Associated Injuries, Medical Complications and Operative Procedures. It is a common practice to exclude these records whenever any analyses are performed on these variables.

Records with Indates after 02/01/1996 used the November 1995 version of the data collection syllabus.

Records with Indates after 03/01/2001 used the 2000-2005 version of the data collection syllabus.

This is a data management variable that is generated by the NSCISC’s software. Users are not allowed to modify this variable.
PERSONAL DATA, REGISTRY, FORM I and FORM II

VARIABLE NAME: Record Update

DESCRIPTION: This is the last date on which an existing record was modified. This date changes each time a record is modified and saved.

CHARACTERS: 8

FORMAT: mmddyyyy

COMMENTS: This is a data management variable that is generated by the NSCISC’s software. Users are not allowed to modify this variable.

SOFTWARE: After a record is SAVED during the data-entry process, the computer inserts the present date in this variable (even if changes have not been made to the record.)

Select "Exit without saving data" if you do not want the Update date to change.
VARIABLE NAME: Ambulation

DESCRIPTION: This variable asks the participant these 3 questions regarding ambulation:

A) Are you able to walk (with or without mobility aid) for 150 feet in your home?

B) Are you able to walk (with or without mobility aid) for one street block outside?

C) Are you able to walk (with or without mobility aid) up one flight of steps?

CHARACTERS: 1 for each entry (V250A, V250B, V250C)

CODES: 0 No

1 Yes

9 Unknown or interview not done

QC: If V250A, V250B and V250C = 0 then, V251_1 must = 8 and V251_2 through V251_5 = blank.

If V250A, V250B and V250C = 9 then, V251 must = 9 and V251_2 through V251_5 = blank.

SOFTWARE: When code 0 is entered in V250A, V250B and V250C, the software inserts code 8 in V251_1 and advances the user to V252. When code 9 is entered in V250A, V250B and V250C, the software inserts code 9 in V251_1 and advances the user to V252.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE NAME: Mobility Aid(s)
DESCRIPTION: This variable documents the type of mobility aid the participant uses. The following question is asked:

_Tell me which of the following mobility aids you currently use most often._

CHARACTERS: 1 for each entry, up to 5 entries (V251_1 to V251_5)
CODES:
0 None
1 Straight cane
2 Quad cane
3 Walker
4 Crutches
5 Ankle-Foot-Orthotic (AFO, short leg brace)
6 Knee-Ankle-Foot-Orthotic (KAFO, long leg brace)
7 Other
8 Not applicable participant is not ambulatory (V250A, V250B and V250C=0)
9 Unknown or interview not done

COMMENTS: Go through the entire list all mobility aids during the interview. Code up to 5 that apply.
QC: See page 301.
If V251_1 = 0, 8 or 9, V251_2 through V251_5 must = blank.
SOFTWARE: See page 301.
If V251_1 = 0 the software advances to V252.
If V251_1 = 9 the software advances to V252.
REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE 252

FORM II

VARIABLE NAME: Wheelchair or Scooter Use

DESCRIPTION: This variable documents whether or not the participant is a wheelchair or scooter user on a regular basis. The following question is asked:

Do you use a wheelchair or scooter over 40 hours per week?

CHARACTERS: 1

CODES

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Yes</td>
</tr>
<tr>
<td>9</td>
<td>Unknown or interview not done</td>
</tr>
</tbody>
</table>

COMMENTS: If the participant uses a wheelchair or scooter LESS than 40 hours per week, code this variable 0 (No).

QC:

IF V252 = 0 THEN
V253 = 8 and V254A = 88 and V254B = 88 and V255 = 88 and
V256_1 = 8 and blank in V256_2 through V256_6 and
V257 = 88 and V258_1 = 8 and V258_2 to V258_4 = blank and
V259A = 88 and V259B = 88 and V259C = 88 and V259D = 88 and
V259E = 88.

IF V252 = 9 THEN
V253 = 9 and V254A = 99 and V254B = 99 and V255 = 99 and
V256_1 = 9 and blank in V256_2 through V256_6 and
V257 = 99 and V258_1 = 9 and V258_2 to V258_4 = blank and
V259A = 99 and V259B = 99 and V259C = 99 and V259D = 99 and
V259E = 99.

SOFTWARE: When code 0 is entered in V252 the software inserts 8s in V253 through V259E and the user is advanced to V260.

When code 9 is entered in V252 the software inserts 9s in V253 through V259E and the user is advanced to V260.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE 253

FORM II

VARIABLE NAME: Type of Wheelchair or Scooter Used Most Often
DESCRIPTION: This variable documents the type of wheelchair or scooter documented in variable 252. The following question is asked:

What type of wheelchair (or scooter) do you use most often?

CHARACTERS: 1
CODES
1 Manual Wheelchair - Propelled by the individual without assistance from motors. Includes lever drive or one arm drive chairs.
2 Power Wheelchair - Generally controlled by a joystick and the force needed to go forward comes entirely from battery power.
3 Power Assist Wheelchair - Receives some force from the user and some force from the motor. In general these wheelchairs appear like a manual wheelchair; however, they have motors that respond to a push on the pushrim and provide extra force to the push.
4 Scooter
7 Other (e.g., a golf cart)
8 Not applicable (V252 = 0)
9 Unknown or interview not done

COMMENTS: If more than one type is used, code the one used most often. A list of all wheelchair and scooter models may be found starting on page 305.

QC: See page 303.

If V253 = 1 then, V254B must = 100 to 155, 777 or 999.
If V253 = 2 then, V254B must = 200 to 292, 777 or 999.
If V253 = 3 then, V254B must = 400, 401, 777 or 999.
If V253 = 4 then, V254B must = 500 to 517, 777 or 999

SOFTWARE: See page 303.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE NAME: Manufacturer and Model for Wheelchair or Scooter Used Most Often

DESCRIPTION: These variables document the manufacturer and model of the wheelchair (or scooter) that is coded in variables 252 through 258. The following question is asked:

Who is the manufacturer and what is the model of the wheelchair (or scooter) you use most often?

CHARACTERS: 2 characters for manufacturer (V254A); 3 characters for model (V254B)

CODES:

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invacare</td>
<td>01</td>
</tr>
<tr>
<td></td>
<td>02</td>
</tr>
<tr>
<td>Sunrise</td>
<td>03</td>
</tr>
<tr>
<td>Permobil/Colours</td>
<td>04</td>
</tr>
<tr>
<td>Everest &amp; Jennings</td>
<td>05</td>
</tr>
</tbody>
</table>

FORM II

VARIABLES 254A, 254B

(Page 1 of 5)
<table>
<thead>
<tr>
<th><strong>FORM II</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>VARIABLE NAME:</strong> Manufacturer and Model for Wheelchair or Scooter Used Most Often</td>
</tr>
</tbody>
</table>

### CODES:

#### MANUAL CHAIRS

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>V254A</th>
<th>V254B</th>
<th>Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tisport</td>
<td>06</td>
<td>149</td>
<td>TiLite EVO</td>
</tr>
<tr>
<td></td>
<td></td>
<td>150</td>
<td>TiLite TC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>151</td>
<td>TiLite TR C</td>
</tr>
<tr>
<td></td>
<td></td>
<td>152</td>
<td>TiLite TT</td>
</tr>
<tr>
<td></td>
<td></td>
<td>153</td>
<td>TiLite X</td>
</tr>
<tr>
<td></td>
<td></td>
<td>154</td>
<td>TiLite XC</td>
</tr>
<tr>
<td></td>
<td></td>
<td>155</td>
<td>TiLite X SX</td>
</tr>
</tbody>
</table>

#### POWER CHAIRS

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>V254A</th>
<th>V254B</th>
<th>Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invacare</td>
<td>01</td>
<td>200</td>
<td>3G Storm Series Ranger X</td>
</tr>
<tr>
<td></td>
<td></td>
<td>201</td>
<td>3G Storm Series Torque SP</td>
</tr>
<tr>
<td></td>
<td></td>
<td>202</td>
<td>Action Arrow</td>
</tr>
<tr>
<td></td>
<td></td>
<td>203</td>
<td>Pronto M50 With Surestep</td>
</tr>
<tr>
<td></td>
<td></td>
<td>204</td>
<td>Pronto M51 With Surestep</td>
</tr>
<tr>
<td></td>
<td></td>
<td>205</td>
<td>Pronto M71 With Surestep</td>
</tr>
<tr>
<td></td>
<td></td>
<td>206</td>
<td>Pronto M91 With Surestep</td>
</tr>
<tr>
<td></td>
<td></td>
<td>207</td>
<td>Ranger (II or X or Storm)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>208</td>
<td>Ranger II Fwd 250 Series</td>
</tr>
<tr>
<td></td>
<td></td>
<td>209</td>
<td>Ranger II MWD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>210</td>
<td>Ranger II MWD 250 Series</td>
</tr>
<tr>
<td></td>
<td></td>
<td>211</td>
<td>Ranger II RWD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>212</td>
<td>Ranger II RWD 250 Series</td>
</tr>
<tr>
<td></td>
<td></td>
<td>213</td>
<td>Storm Arrow</td>
</tr>
<tr>
<td></td>
<td></td>
<td>214</td>
<td>Storm Series 3G Arrow W/True Track</td>
</tr>
<tr>
<td></td>
<td></td>
<td>215</td>
<td>Storm Series Arrow FWD</td>
</tr>
<tr>
<td></td>
<td></td>
<td>216</td>
<td>Storm Series TDX3</td>
</tr>
<tr>
<td></td>
<td></td>
<td>217</td>
<td>Storm Series TDX4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>218</td>
<td>Storm Series TDX5</td>
</tr>
<tr>
<td></td>
<td></td>
<td>219</td>
<td>Xierra GT</td>
</tr>
<tr>
<td>Sunrise</td>
<td>02</td>
<td>220</td>
<td>Guardian Aspire F10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>221</td>
<td>Guardian Aspire F11</td>
</tr>
<tr>
<td></td>
<td></td>
<td>222</td>
<td>Guardian Aspire M10</td>
</tr>
<tr>
<td></td>
<td></td>
<td>223</td>
<td>Guardian Aspire M11</td>
</tr>
<tr>
<td></td>
<td></td>
<td>224</td>
<td>P (190 or 200)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>225</td>
<td>P (300 or 320)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>226</td>
<td>Quickie Freestyle F11</td>
</tr>
<tr>
<td></td>
<td></td>
<td>227</td>
<td>Quickie Freestyle M11</td>
</tr>
<tr>
<td></td>
<td></td>
<td>228</td>
<td>Quickie G-424</td>
</tr>
<tr>
<td></td>
<td></td>
<td>229</td>
<td>Quickie P200</td>
</tr>
<tr>
<td></td>
<td></td>
<td>230</td>
<td>Quickie P210 Power</td>
</tr>
<tr>
<td></td>
<td></td>
<td>231</td>
<td>Quickie P220 Power</td>
</tr>
<tr>
<td></td>
<td></td>
<td>232</td>
<td>Quickie P-222SE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>233</td>
<td>Quickie S-646</td>
</tr>
<tr>
<td></td>
<td></td>
<td>234</td>
<td>Quickie S-646SE</td>
</tr>
<tr>
<td></td>
<td></td>
<td>235</td>
<td>Quickie V-100</td>
</tr>
<tr>
<td></td>
<td></td>
<td>236</td>
<td>Quickie V-121</td>
</tr>
<tr>
<td></td>
<td></td>
<td>237</td>
<td>Quickie V-521</td>
</tr>
<tr>
<td></td>
<td></td>
<td>238</td>
<td>Quickie Z-500</td>
</tr>
</tbody>
</table>
FORM II

VARIABLE NAME: Manufacturer and Model for Wheelchair or Scooter Used Most Often

CODES:

<table>
<thead>
<tr>
<th>POWER CHAIRS</th>
<th>Manufacturer .......... V254A</th>
<th>V254B .... Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>(continued)</td>
<td>Pride Health Care .......... 03</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Jazzy PHC (1 or 5)</td>
<td>239</td>
</tr>
<tr>
<td></td>
<td>Jazzy PHC-10</td>
<td>240</td>
</tr>
<tr>
<td></td>
<td>Jazzy 11 (00-70)</td>
<td>241</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1100 (Discontinued)</td>
<td>242</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1101</td>
<td>243</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1103</td>
<td>244</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1103 Ultra</td>
<td>245</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1104 (Discontinued)</td>
<td>246</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1105 (Discontinued)</td>
<td>247</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1113</td>
<td>248</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1113 ATS</td>
<td>249</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1115 (Discontinued)</td>
<td>250</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1120 (Discontinued)</td>
<td>251</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1120V (Discontinued)</td>
<td>252</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1121</td>
<td>253</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1122</td>
<td>254</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1133</td>
<td>255</td>
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<td></td>
<td>Jazzy 1143</td>
<td>256</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1170 XL</td>
<td>257</td>
</tr>
<tr>
<td></td>
<td>Jazzy 14 (00-70)</td>
<td>258</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1400</td>
<td>259</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1420</td>
<td>260</td>
</tr>
<tr>
<td></td>
<td>Jazzy 1470</td>
<td>261</td>
</tr>
<tr>
<td></td>
<td>Jet 1</td>
<td>262</td>
</tr>
<tr>
<td></td>
<td>Jet 1-HD</td>
<td>263</td>
</tr>
<tr>
<td></td>
<td>Jet 2</td>
<td>264</td>
</tr>
<tr>
<td></td>
<td>Jet 3 Ultra</td>
<td>265</td>
</tr>
<tr>
<td></td>
<td>Jet 7</td>
<td>266</td>
</tr>
<tr>
<td></td>
<td>Jet 10</td>
<td>267</td>
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<td></td>
<td>Jet 12</td>
<td>268</td>
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<td>LX 10</td>
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<td>270</td>
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<td></td>
<td>LX 12</td>
<td>271</td>
</tr>
<tr>
<td></td>
<td>Quantum 1650</td>
<td>272</td>
</tr>
<tr>
<td></td>
<td>Quantum Blast 650</td>
<td>273</td>
</tr>
<tr>
<td></td>
<td>Quantum Blast 850</td>
<td>274</td>
</tr>
<tr>
<td></td>
<td>Quantum Blast HD</td>
<td>275</td>
</tr>
<tr>
<td></td>
<td>Quantum Blast X-TREME</td>
<td>276</td>
</tr>
<tr>
<td></td>
<td>Vibe</td>
<td>277</td>
</tr>
<tr>
<td></td>
<td>Wrangler 4 Wheel PMV</td>
<td>278</td>
</tr>
<tr>
<td>Permobil/ ................... 04</td>
<td>Chairman Basic</td>
<td>279</td>
</tr>
<tr>
<td>Colours</td>
<td>Chairman 2K Corpus</td>
<td>280</td>
</tr>
<tr>
<td></td>
<td>Chairman 2K Lowrider</td>
<td>281</td>
</tr>
<tr>
<td></td>
<td>Chairman 2K MPSB</td>
<td>282</td>
</tr>
<tr>
<td></td>
<td>Chairman 2K Standar</td>
<td>283</td>
</tr>
<tr>
<td></td>
<td>Chairman Corpus</td>
<td>284</td>
</tr>
<tr>
<td></td>
<td>Chairman Entra Corpus</td>
<td>285</td>
</tr>
<tr>
<td></td>
<td>Chairman HD3</td>
<td>286</td>
</tr>
<tr>
<td></td>
<td>Chairman J</td>
<td>287</td>
</tr>
<tr>
<td></td>
<td>Chairman Stander</td>
<td>288</td>
</tr>
<tr>
<td></td>
<td>Chairman Trax Corpus</td>
<td>289</td>
</tr>
<tr>
<td></td>
<td>Chairman Trax TS</td>
<td>290</td>
</tr>
<tr>
<td></td>
<td>Entra MPSB</td>
<td>291</td>
</tr>
<tr>
<td>Everest &amp; Jennings .......... 05</td>
<td>Lancer</td>
<td>292</td>
</tr>
</tbody>
</table>
### FORM II

**VARIABLE NAME:** Manufacturer and Model for Wheelchair or Scooter Used Most Often

**CODES:**

<table>
<thead>
<tr>
<th>POWER ASSIST</th>
<th>Manufacturer .......... V254A</th>
<th>V254B.... Model</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHAIRS</td>
<td>Frank Mobility...............07</td>
<td>400 ...... E.Motion</td>
</tr>
<tr>
<td></td>
<td></td>
<td>401 ...... The Duet</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SOOTERS</th>
<th>Manufacturer .......... V254A</th>
<th>V254B.... Model</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Invacare ......................01</td>
<td>500 ...... Buzz Highly Maneuverable Vehicle (HMV)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>501 ...... Lnyx</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other Codes</th>
<th>Manufacturer .......... V254A</th>
<th>V254B.... Model</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Other, not listed above.... 77</td>
<td>777 ...... Other, not listed above</td>
</tr>
<tr>
<td></td>
<td>Not applicable (V252=0) 88</td>
<td>888 ...... Not applicable (V252=0)</td>
</tr>
<tr>
<td></td>
<td>Unknown .......................99</td>
<td>999 ...... Unknown</td>
</tr>
</tbody>
</table>
FORM II

VARIABLE NAME: Manufacturer and Model for Wheelchair or Scooter Used Most Often

COMMENTS: See page 304.

QC: See page 303.

- If V254B = 100 to 155 then, V253 must = 1.
- If V254B = 200 to 292 then, V253 = 2.
- If V254B = 400 or 401 then, V253 = 3.
- If V254B = 500 to 517 then, V253 = 4.

SOFTWARE: See page 303.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.

- July 2004: the list of Manufacturers and Models was expanded; the Models field (V254B) was changed from 2 to 3 characters.

EXAMPLE 1: The participant has a Pride Jet 1 wheelchair.

| 254.Wheelchair (or Scooter) Used Most Often ...... 0 3 Manufacturer (V254A) 2 6 2 Model (V254B) |

EXAMPLE 2: The participant has a new wheelchair manufactured by Everest & Jennings. The model number for this chair is not on the list.

| 254.Wheelchair (or Scooter) Used Most Often ...... 7 7 Manufacturer (V254A) 7 7 7 Model (V254B) |

EXAMPLE 3: The participant has a wheelchair manufactured by Sunrise. The model number is not known.

| 254.Wheelchair (or Scooter) Used Most Often ...... 0 2 Manufacturer (V254A) 9 9 9 Model (V254B) |

EXAMPLE 4: The participant has a scooter. The manufacturer and model are not on the list.

| 254.Wheelchair (or Scooter) Used Most Often ...... 7 7 Manufacturer (V254A) 7 7 7 Model (V254B) |
FORM II

VARIABLE NAME: Primary Funding Source for Wheelchair or Scooter Used Most Often

DESCRIPTION: This variable documents the primary funding source that paid for the wheelchair (or scooter) documented in variables 252 through 258. The following question is asked:

*What funding source paid the most for the wheelchair (or scooter) you use most often?*

CHARACTERS: 2

CODES:

01 Private Insurance
02 Department of Vocational Rehab (DVR)
03 Medicaid [including Medicaid administered by another sponsor (e.g. an HMO); see page 95]
04 Worker's Compensation
05 Medicare [including Medicare administered by another sponsor (e.g. an HMO); see page 95]
06 County medical
07 Self-pay
08 Veterans Administration
09 Public Health Service (e.g., Bureau of Indian Affairs)
10 Crippled Children's Service
11 No Pay (indigent, no resources)
12 Other insurance, unclassified: includes Champus
13 Other private funds (e.g., hometown fund raisers)
14 Prepaid health plans: includes HMOs, PPOs, Kaiser Foundation, etc.
15 Other, unclassified (e.g., SCI system patient care funds, Homebound, victim's assistance funds, etc.)
88 Not applicable (V252= 0)
99 Unknown or interview not done

COMMENTS: If the participant indicates that the chair he/she uses most often is on loan or donated, code this variable ‘15’ (Other, unclassified) if you do not know from whom the chair is on loan/donated. However if the chair is on loan/donated from a known source, use code ‘13’ (Other private funds).

QC: See page 303.

SOFTWARE: See page 303.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
FORM II

VARIABLE NAME: Features on the Wheelchair or Scooter Used Most Often

DESCRIPTION: This variable documents the features of the wheelchair (or scooter) documented in variables 252 through 258. The following question is asked:

Does the wheelchair (or scooter) you use most often have any of the following features?

CHARACTERS: 1 for each entry, up to 6 entries (V256_1 to V256_6)

CODES:
0 None of the listed features
1 Tilt-in-space
2 Recline
3 Standing
4 Seat elevation
5 Leg elevation
8 Not applicable (V252= 0)
9 Unknown or interview not done

COMMENTS: Go through the entire list all features during the interview. Code all features that apply. If the participant is unsure and the interview is being conducted over the phone, ask the participant if he/she is able to push buttons that make the seatback recline, the seat elevate, the seat and back both tilt at the same time, or the legs elevate.

QC: See page 303.

SOFTWARE: See page 303.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
FORM II

VARIABLE NAME: Number of Repairs of the Wheelchair or Scooter Used Most Often

DESCRIPTION: This variable documents the number of times the wheelchair (or scooter) documented in variables 252 through 258 was repaired during the past 6 months. The following question is asked:

   How many times in the past 6 months has the wheelchair (or scooter) you use most been repaired?

CHARACTERS: 2

CODES:

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>No repairs done</td>
</tr>
<tr>
<td>01 to 86</td>
<td>1 to 86 times</td>
</tr>
<tr>
<td>87</td>
<td>Repairs done, number unknown</td>
</tr>
<tr>
<td>88</td>
<td>Not applicable (V252 = 0)</td>
</tr>
<tr>
<td>99</td>
<td>Unknown or interview not done</td>
</tr>
</tbody>
</table>

COMMENTS: If repairs were needed but none were done, use code 00.

QC:

See pages 303 and 312.

If V257 = 00 then, V258_1 must <> 0.

If V257 = 99 then, V258_1 must = 9.

SOFTWARE:

See page 303.

When code 99 is entered in V257 the software inserts 9 in V258_1 and the user is advanced to V259A.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE 258

FORM II

VARIABLE NAME: Consequences of Breakdown of the Wheelchair or Scooter Used Most Often

DESCRIPTION: This variable documents the consequences of the breakdown(s) of the wheelchair (or scooter) documented in variables 252 through 257. The following is asked:

*From the following list, select all that apply regarding breakdown (in the past 6 months) of the wheelchair (or scooter) you use most often.*

CHARACTERS: 1 for each entry, up to 4 entries (V258_1 through V258_4)

CODES:

0 Repairs were done but none of the listed consequences occurred
1 I have been stranded (either at home or away from home) because of a wheelchair (or scooter) breakdown
2 I have been injured because of a wheelchair (or scooter) breakdown
3 I have missed work or school because of a wheelchair (or scooter) breakdown
4 I have missed medical appointments because of a wheelchair (or scooter) breakdown
8 Not applicable (V252 = 0 wheelchair/scooter not used more than 40 hours/week) or (V257 = 00 no repairs were done)
9 Unknown or interview not done

COMMENTS: “Stranded” means left with no means of mobility. The interviewer should ask about all 4 consequences during the interview.

QC:

If V258 = 0, 1, 2, 3 or 4 then, V257 must not = 88 or 99.

If V258_1 = 8 then, V252 must = 0 or V257 must = 00.

SOFTWARE:

See pages 303 and 311.

If V258_1 = 0 or 9, the user is advanced to V259A.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
FORM II

VARIABLE NAME: Additional Wheelchairs or Scooters

DESCRIPTION: This variable documents the number of additional wheelchair(s) or scooter(s) the participant currently uses. The following question is asked:

*How many manual, power, power assisted or other wheelchairs (or scooters) do you use [(in addition to the wheelchair (scooter) you use most often)]?*

CHARACTERS: 2 for each variable

V259A (manual); V259B (power); V259C (power assisted); V259D (other wheelchair); V259E (scooter)

CODES:  

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>00</td>
<td>None</td>
</tr>
<tr>
<td>01 to 87</td>
<td>01 to 87</td>
</tr>
<tr>
<td>88</td>
<td>Not applicable (V252 = 0)</td>
</tr>
<tr>
<td>99</td>
<td>Unknown or interview not done</td>
</tr>
</tbody>
</table>

COMMENTS: For each category (Manual, V259A; Power, V259B; Power assisted, V259C; Other V259D; and Scooter V259E), list the number of working devices the participant uses. This number should **not** include the primary wheelchair coded in variables 252 to 258.

If the participant has only one wheelchair (or only one scooter): V259A, V259B, V259C and V259D must all be coded 00.

If V252 is coded 0: V259A, V259B, V259C and V259D must all be coded 88.

If V252 is coded 9: V259A, V259B, V259C and V259D must all be coded 99.

Wheelchairs that are not manual, power or power assisted should be counted in “other wheelchair” category.

QC: See page 303.

If V252 = 0 then, V259A, V259B, V259C and V259D must all = 88.

If V252 = 9 then, V259A, V259B, V259C and V259D must all = 99.

SOFTWARE: See page 303.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.

EXAMPLE: In addition to his primary wheelchair, the participant uses 1 manual and 1 power assisted chair. The participant does not use a scooter.

259. Number of Additional Wheelchairs or Scooters:

<table>
<thead>
<tr>
<th>Category</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manual</td>
<td>0 1</td>
</tr>
<tr>
<td>Power</td>
<td>0 0</td>
</tr>
<tr>
<td>Power Assisted</td>
<td>0 1</td>
</tr>
<tr>
<td>Other Wheelchair</td>
<td>0 0</td>
</tr>
<tr>
<td>Scooter</td>
<td>0 0</td>
</tr>
</tbody>
</table>
VARIABLE NAME: Computer Use

DESCRIPTION: This variable documents whether or not the participant uses a computer (including laptops). The following question is asked:

_Do you use a computer?_

CHARACTERS: 1

CODES:
0  No
1  Yes I use a computer at home only
2  Yes I use a computer outside the home only
3  Yes I use a computer at home and outside the home
9  Unknown or interview not done

QC: If V260 = 0 then

   V261_1 = 88 and V261_2 through V261_10 = blank and
   V262 = 8 and
   V263_1 = 8 and V263_2 and V263_3 = blank and

If V260 = 9 then

   V261_1 = 99 and V261_2 through V261_10 = blank and
   V262 = 9 and
   V263_1 = 9 and V263_2 and V263_3 = blank and

SOFTWARE: When code 0 is entered in V260 the software inserts 8s in V261 through V264G and the user is advanced to V265.

When code 9 is entered in V260 the software inserts 9s in V261 through V264G and the user is advanced to V265.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
FORM II

VARIABLE NAME: Type of Computer Access Device(s)

DESCRIPTION: This variable documents the type of computer access device(s) available to the participant. The following question is asked:

Which of the following types of computer device(s) do you have that help you use a computer?

CHARACTERS: 2 for each entry, up to 10 entries (V261_1 through V261_10)

CODES:

00 No computer access devices
01 Voice activation (hardware and software) for commands
02 Voice recognition (hardware and software) for typing
03 Mouth stick
04 Head pointer
05 Foot pedals
06 Eye control
07 Typing brace/splint on hand
08 Modified or on-screen keyboard
09 Modified mouse
10 Other special software not included in codes 01 and 02 (e.g., screen readers)
11 Other
88 Not applicable, does not own (or use) a computer
99 Unknown or interview not done

COMMENTS: Go through the entire list all computer access devices during the interview. Code all that apply.

QC: See page 314.

SOFTWARE: See page 314.

If V261_1 = 00 or 99, the software advances to V262.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE NAME: Internet or Email Usage

DESCRIPTION: This variable documents how often the participant uses the Internet or EMail. The following question is asked:

*How often do you access the Internet or Email?*

CHARACTERS: 1

CODES:

0  Owns (or uses) a computer but never uses the Internet and never uses EMail

1  Daily (5 to 7 days every week of the month)

2  Weekly (less than 5 days per week and more than 3 days per month)

3  Monthly (3 days or less per month)

8  Not applicable, does not own (or use) a computer

9  Unknown or interview not done

QC: See page 314.

If V262 = 0 then, V263_1 must = 8 and V263_2 and V263_3 must = blank and V264A must = 8 and V264B must = 8 and V264C must = 8 and V264D must = 8 and V264E must = 8 and V264F must = 8 and V264G must = 8.

If V262 = 9 then, V263_1 must = 9 and V263_2 and V263_3 must = blank and V264A must = 9 and V264B must = 9 and V264C must = 9 and V264D must = 9 and V264E must = 9 and V264F must = 9 and V264G must = 9.

SOFTWARE: See page 314.

When code 0 is entered in V262 the software inserts 8 in V263_1 and 8s in V264A through V264G and the user is advanced to V265.

When code 9 is entered in V262 the software inserts 9 in V263_1 and 8s in V264A through V264G and the user is advanced to V265.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE 263

FORM II

VARIABLE NAME: Location for Internet or Email Use

DESCRIPTION: This variable documents up to 3 locations where the participant uses the Internet or EMail. The following question is asked:

*Where do you use the Internet or EMail?*

CHARACTERS: 1 for each entry, up to 3 entries (V263_1, V263_2, V263_3)

CODES:

1 Home
2 Work/school
3 Other Locations [e.g., library, café, wireless location (mobile location)]
8 Not applicable, does not own (or use) a computer OR uses a computer but never uses the Internet AND never uses EMail
9 Unknown or interview not done

COMMENTS: Code all the locations used.

QC: See page 314.

If V263_1 = 8 or 9, V263_2 and V263_3 must = blank.

SOFTWARE: See pages 314 and 316.

If V263_1 = 8 or 9, the software advances to V264A.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
FORM II

VARIABLE NAME: Internet Categories

DESCRIPTION: This variable documents the frequency of Internet usage for specified Internet activities. The following question is asked:

*How frequently you use each of the following categories on the Internet: Employment/vocation information, Disability/ Health information, EMail, Chat rooms, Games (on the Internet), Shopping, Other.*

CHARACTERS: 1 for each variable:
- Employment/vocation information (V264A)
- Disability/ Health information (V264B)
- EMail (V264C)
- Chat rooms (V264D)
- Games (V264E)
- Shopping (V264F)
- Other (V264G)

CODES:
- 0 Never use this category
- 1 Sometimes
- 2 Frequently
- 8 Not applicable, does not own (or use) a computer OR uses a computer but never uses the Internet AND never uses EMail
- 9 Unknown or interview not done

COMMENTS: Ask the participant about all the categories during the interview.

QC: See page 314.

SOFTWARE: See pages 314 and 316.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
VARIABLE NAME: Internet Categories

EXAMPLE #1: The participant sends and receives EMails daily. Occasionally, he uses the Internet to play games and search for information on health issues. He sometimes shops on eBay. Once he uploaded his digital camera pictures up to the Sam’s Club photo web site. He never uses chat rooms.

264A. Employment/vocation information .................................................. 1
264B. Disability/health information ............................................................ 1
264C. EMail ............................................................................................ 2
264D. Chat rooms .................................................................................. 0
264E. Games ........................................................................................... 1
264F. Shopping ....................................................................................... 1
264G. Other ............................................................................................. 1

EXAMPLE #2: The participant uses a computer but never uses the Internet or EMail.

264A. Employment/vocation information .................................................. 8
264B. Disability/health information ............................................................ 8
264C. EMail ............................................................................................ 8
264D. Chat rooms .................................................................................. 8
264E. Games ........................................................................................... 8
264F. Shopping ....................................................................................... 8
264G. Other ............................................................................................. 8

EXAMPLE #3: The participant does not use or own a computer.

264A. Employment/vocation information .................................................. 8
264B. Disability/health information ............................................................ 8
264C. EMail ............................................................................................ 8
264D. Chat rooms .................................................................................. 8
264E. Games ........................................................................................... 8
264F. Shopping ....................................................................................... 8
264G. Other ............................................................................................. 8

EXAMPLE #4: The participant uses EMail regularly but never uses the Internet. He sometimes plays games that are on his computer.

264A. Employment/vocation information .................................................. 0
264B. Disability/health information ............................................................ 0
264C. EMail ............................................................................................ 2
264D. Chat rooms .................................................................................. 0
264E. Games ........................................................................................... 0
264F. Shopping ....................................................................................... 0
264G. Other ............................................................................................. 0
FORM II

VARIABLE NAME: Modified Vehicle

DESCRIPTION: This variable documents the type of modified vehicle the participant or his/her family owns. The following question is asked:

What type of modified vehicle does you or your family own?

CHARACTERS: 1

CODES:
0  Do not own a modified vehicle
1  Car (includes SUVs)
2  Van
3  Other (e.g. truck)
4  Combination (car and van; van and other; car and other)
9  Unknown or interview not done

COMMENTS: “Family” refers to those who do or do not live with the participant.

Any type of lifts on the mode of transportation will qualify as a modified vehicle

QC: If V265 = 0 then, V266 must = 8.
If V265 = 9 then, V266 must = 9.

SOFTWARE: When code 0 is entered in V265 the software inserts 8 in V266 and advances to V267.
When code 9 is entered in V265 the software inserts 9 in V266 and advances to V267.

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
March 2005: code 4 was added.
**VARIABLE 266**

**FORM II**

**VARIABLE NAME:** Driving the Modified Vehicle

**DESCRIPTION:** This variable documents whether or not the participant drives the modified vehicle documented in variable 265. The following question is asked:

*Do you drive the modified vehicle?*

<table>
<thead>
<tr>
<th>CHARACTERS</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>No</td>
</tr>
<tr>
<td>1</td>
<td>Yes, I drive it from my wheelchair</td>
</tr>
<tr>
<td>2</td>
<td>Yes, I do not drive it from a wheelchair</td>
</tr>
<tr>
<td>8</td>
<td>Not applicable, does not own a modified vehicle</td>
</tr>
<tr>
<td>9</td>
<td>Unknown or interview not done</td>
</tr>
</tbody>
</table>

**QC:** See page 320.

**SOFTWARE:** See page 320.

**REVISIONS:** This variable was added in April 2004. Data are required in all interviews done after April 2004.
FORM II

VARIABLE NAME: Other Technology: Cell Phone

DESCRIPTION: This variable documents whether or not the participant owns a cell phone. The following question is asked:

Do you own a cell phone?

CHARACTERS: 1

CODES: 0 No
        1 Yes
        9 Unknown or interview not done

REVISIONS: This variable was added in April 2004. Data are required in all interviews done after April 2004.
THE NATIONAL SPINAL CORD INJURY DATABASE
PERSONAL DATA

To be submitted on all patients - Registry and Form I patients

100. System ID .................. __ __
101. Patient Number ................______ _____
102. Patient Name

<table>
<thead>
<tr>
<th>First</th>
<th>Initial</th>
<th>Last</th>
</tr>
</thead>
</table>

103. Social Security Number ........................................... __ __ __-__ __-__ __ __ __
104. Date of Birth ........................................................... __ __/__ __/__ __ __ __

105. Zip Code for Residence at Injury........................................... __ __ __ __ __/___ __ __

105_1. Zip Code for Residence at Year 01 Anniversary .... ___ ______/_______
105_5. Zip Code for Residence at Year 05 Anniversary .... ___ ______/_______
105_10. Zip Code for Residence at Year 10 Anniversary .... ___ ______/_______
105_15. Zip Code for Residence at Year 15 Anniversary .... ___ ______/_______
105_20. Zip Code for Residence at Year 20 Anniversary .... ___ ______/_______
105_25. Zip Code for Residence at Year 25 Anniversary .... ___ ______/_______
105_30. Zip Code for Residence at Year 30 Anniversary .... ___ ______/_______

Export Variables:
Check the boxes for those Personal Data items you have the patient’s permission to export to the NSCISC:

- Name □
- SSN □
- Birth Date □
- Zip Codes □

Note: this includes all V105 items

A separate consent must be obtained to submit the data on this form to the NSCISC.

NOTE: The Personal Data data entry screen also contains additional fields for entering Patient Notes, Address, Phone Number, Alternate ID and Contact Information.
Those items are not included on this form since they will not be exported to the NSCISC.
100. System ID ............................................
101. Patient Number ..............................................

106. Date of Injury ................................................................. __ __/ __/ __ __ __

107. Date of First System Admission .................................................................

109A. Number of Days from Injury to First System Admission..............................

110. Date of Discharge .................................................................................... __ __/ __/ __ __ __

111. Age At Injury .............................................................................................. __ __ __

112. Sex ............................................................................................................. __

113. Racial or Ethnic Group ..............................................................................

114. Hispanic Origin ...........................................................................................

116. Traumatic Etiology .....................................................................................

131D. Category of Neurologic Impairment at Discharge ......................................

132D. ASIA Impairment at Discharge ................................................................

136D. Level Preserved Neurologic Function at Discharge ..................................

138D. Utilization of Mechanical Ventilation at Discharge .................................

145. Date of Death .............................................................................................. __ __/ __/ __ __ __

---

*Submit only Personal and Registry data for the Registry patients.*

---
100. System ID.............. ___  

106. Date of Injury ................................................................. __  /  __  /  ___  /  ___  (mm/dd/yyyy)  

107. Date of First System Admission .................................................. __  /  __  /  ___  /  ___  (mm/dd/yyyy)  

108. Date of First System Inpatient Rehab Admission ...................... __  /  __  /  ___  /  ___  (mm/dd/yyyy)  

109. Number of Days from Injury to  
  A. First System Admission .......................................................... ___  computer-generated  
  B. First System Inpatient Rehab Admission .................................... ___  computer-generated  

110. Date of Discharge ........................................................................ __  /  __  /  ___  /  ___  (mm/dd/yyyy)  

111. Age At Injury................................................................................ __  ___  

112. Sex ................................................................................................. ___  

113. Racial or Ethnic Group................................................................. ___  

114. Hispanic Origin .............................................................................. ___  

115. Is English The Patient's Primary Language? .................................. ___  

116. Traumatic Etiology........................................................................... ___  

118. 1. External Cause of Injury............................................................... ___  ___  ___  ___  ___  ___  

118. 2. SCI Nature of Injury................................................................. ___  ___  ___  ___  ___  ___  

119. Work Relatedness............................................................................ ___  

120. Place of Residence............................................................................ ___  ___  ___  ___  ___  ___  ___  ___  ___  ___  ___  ___  ___  ___  (Injury)  (Discharge)  

121. Marital Status at Injury.................................................................... ___  

122. Level of Education............................................................................ ___  

123. Primary Occupational, Educational or Training Status ................... ___  

124. Job Census Code.............................................................................. ___  

125. Are You A Veteran Of The U.S. Military Forces? ......................... ___  

126. VA Healthcare System Services Used During System.................... 1  2  3  4  5  

127. Sponsors of SCI Care and Services ................................................ 1  2  3  4  5  

128. Type of Reimbursement ................................................................... 1  2  3  4  5  

129. Medical Case Manager................................................................. ___  

---

NATIONAL SPINAL CORD INJURY DATABASE
FORM I

Unless indicated, data are to be collected on all patients

NATIONAL SPINAL CORD INJURY STATISTICAL CENTER, BIRMINGHAM, AL

NSCISC: 03/2005

Form I, Page 1 of 7
THE NATIONAL SPINAL CORD INJURY DATABASE
FORM I

Unless indicated, data are to be collected on all patients

<table>
<thead>
<tr>
<th>NEUROLOGIC EXAM</th>
<th>Initial System Exam (day 1 only)</th>
<th>Admit to System Inpatient Rehab (day 1 only)</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>130. Date Neurologic Exam..................</td>
<td>/ / / yyyy</td>
<td>/ / / yyyy</td>
<td>/ / / yyyy</td>
</tr>
<tr>
<td>133. ASIA Motor Index Score Left Right</td>
<td>Elbow flexors (biceps, brachialis) C5</td>
<td>Wrist extensors (extensor carpi radialis longus &amp; brevis) C6</td>
<td>Elbow extensors (triceps) C7</td>
</tr>
<tr>
<td>134. Sensory Level........................</td>
<td>L R</td>
<td>L R</td>
<td>L R</td>
</tr>
<tr>
<td>135. Motor Level*..........................</td>
<td>L R</td>
<td>L R</td>
<td>L R</td>
</tr>
<tr>
<td>136. Level Preserved Neurologic Function</td>
<td>L R</td>
<td>L R</td>
<td>L R</td>
</tr>
</tbody>
</table>

Admit to System Inpatient Rehab

137. Method of Bladder Management.................................
138. Utilization of Mechanical Ventilation...........................

*Computer-generated
100. System ID ............... __ __
101. Patient Number ....... __ __ __ __ __ __

139. Locations and Grades of Pressure Ulcers

<table>
<thead>
<tr>
<th>Location</th>
<th>Acute Medical Care</th>
<th>Inpatient Rehab</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Left</td>
<td>Center</td>
</tr>
<tr>
<td>Occiput</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scapula</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Elbow</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ribs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spinous Process</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Iliac Crest</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sacral</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ischium</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trochanteric</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Genital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Knee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Malleolar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heel</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Foot</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unclassified</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

140. Number of Pressure Ulcers (day 1’s only) .......................................................... __ __ __ __ __ __

141. Grade of Worst Pressure Ulcer Present at Rehab Admit (day 1’s only) ..................... __ __ __ __ __ __

COMPLICATIONS (day 1’s only)

<table>
<thead>
<tr>
<th>Complication</th>
<th>Acute Medical Care</th>
<th>Inpatient Rehab</th>
</tr>
</thead>
<tbody>
<tr>
<td>142A. Post-operative Wound Infection at the Site of the Spinal Surgery</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>142B. Number of Episodes of Pneumonia</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>142C. Pulmonary Embolism</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>142D. Thrombophlebitis, Deep Vein Thrombosis</td>
<td>____________________</td>
<td>________________</td>
</tr>
</tbody>
</table>

Operative Procedures (day 1’s only)

<table>
<thead>
<tr>
<th>Procedure</th>
<th>Acute Medical Care</th>
<th>Inpatient Rehab</th>
</tr>
</thead>
<tbody>
<tr>
<td>143A. Laminectomy</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143B. Spinal Decompression</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143C. Spinal Fusion</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143D. Internal Fixation of the Spine</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143E. Surgical Repair of Failed Spinal Fusion</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143F. Surgical Repair, Correction, or Removal of Internal Fixation Device</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143G. Number of Operating Room Visits for Spine Surgeries</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143H. Laparotomy</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143L. Traction</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143J. Halo Vest, Halo Brace or Other Orthosis for the Neck</td>
<td>____________________</td>
<td>________________</td>
</tr>
<tr>
<td>143K. Closure of Decubitus Ulcer(s)</td>
<td>____________________</td>
<td>________________</td>
</tr>
</tbody>
</table>
THE NATIONAL SPINAL CORD INJURY DATABASE
FORM I

Unless indicated, data are to be collected on all patients

100. System ID................ __ __
101. Patient Number.......__ __ __ __ __ __

144. FIM

<table>
<thead>
<tr>
<th>Self Care</th>
<th>Admit</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Eating</td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Grooming</td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Bathing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Dressing, Upper Body</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E. Dressing, Lower Body</td>
<td></td>
<td></td>
</tr>
<tr>
<td>F. Toileting</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sphincter Control</td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Bladder Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>H. Bowel Management</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mobility Transfer</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I. Bed, Chair, Wheelchair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>J. Toilet</td>
<td></td>
<td></td>
</tr>
<tr>
<td>K. Tub, Shower</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Locomotion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>L. Walk or Wheelchair</td>
<td></td>
<td></td>
</tr>
<tr>
<td>L.M. Mode of Locomotion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>M. Stairs</td>
<td></td>
<td></td>
</tr>
<tr>
<td>T. Total Motor Score</td>
<td></td>
<td>* computer-generated *</td>
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145. Date of Death ................ __ __/__ __/__ __ __ __ (mm/dd/yyyy)

146. Cause(s) of Death............. __ __ __ __ __ __ __ __ __ __ 1. ___________________________________________________________________________

Primary Cause

   __ __ __ __ __ __ __ __ __ __ 2. ___________________________________________________________________________

   __ __ __ __ __ __ __ __ __ __ 3. ___________________________________________________________________________

   __ __ __ __ __ __ __ __ __ __ 4. ___________________________________________________________________________

   __ __ __ __ __ __ __ __ __ __ 5. ___________________________________________________________________________

147. Autopsy......................... __ __

If the patient is alive at discharge code all these variables “alive”.
Update these variables if the patient dies during follow-up.
THE NATIONAL SPINAL CORD INJURY DATABASE

FORM I

Unless indicated, data are to be collected on all patients

100. System ID................ __ __ 101. Patient Number...... __ __ __ __ __ __

TREATMENT PHASES

Document the following treatment phases occurring from the time of injury to discharge from the System:

1) Acute Medical/Surgical Hospitalization 4) Inpatient Subacute Med/Surgical Care
2) Nursing Home 5) Inpatient Subacute Rehab
3) Inpatient Acute Rehab

Document each of these treatment phases separately, in sequence by date. At least 1 treatment phase must be documented.

➢ If there is a delay in obtaining some information (e.g., hospitalization charges), submit this form when 80% or more of the information is available and code the missing items "unknown". Then, update the record when the missing data are available.

<table>
<thead>
<tr>
<th>Treatment Phase #</th>
<th>Treatment Phase Type for SCI</th>
<th>System or Non-system</th>
<th>Date of Admission</th>
<th>Date of Discharge</th>
<th>Number of Short-term Discharge Days</th>
<th>Number of Days in Treatment Phase</th>
<th>Charges</th>
<th>Charges Reliability Code</th>
<th>Hours of Physical Therapy</th>
<th>Hours of Occupational Therapy</th>
<th>Hours of Recreational Therapy</th>
<th>Hours of Vocational Rehab</th>
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♦ If V149 = “0”, leave variables 154 and 155 blank.
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* If V149 = “0”, leave variables 154 and 155 blank.
The National Spinal Cord Injury Database

Form I

Unless indicated, data are to be collected on all patients

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♦ If V149 = “0”, leave variables 154 and 155 blank.

| 163. Number of Days Hospitalized in the System’s |
| A. Acute Care Unit | ___ | ___ | ___ | (computer-generated) |
| R. Inpatient Rehab Unit | ___ | ___ | ___ | (computer-generated) |

| 164. Total System Hospitalization Charges (day-1s only) | ___ | ___ | ___ | ___ | (computer-generated) |
| 165. Total System Hospitalization Charges - Reliability Code (day-1s only) | ___ | ___ | ___ | (computer-generated) |
THE NATIONAL SPINAL CORD INJURY DATABASE

FORM II

Unless indicated, data are to be collected in post-injury years 1, 5, 10, 15, 20, 25, 30

100. System ID........... __ __ 101. Patient Number...... __ __ __ __ __ __ 200. Post-injury Year ....... __ __

201. Category of Follow-up Care ................................................................................. __
202. Reason for Lost..................................................................................................... __

STATUS ON THE ANNIVERSARY OF INJURY

203. Place of Residence................................................................................................ __ __
204. Marital Status........................................................................................................ __
205. Level of Education............................................................................................... __
206. Primary Occupational, Educational or Training Status ........................................__
207. Job Census Code................................................................................................... __ __
208. Method of Bladder Management .......................................................................... __ __

STATUS SINCE THE LAST FORM II (If this is the year 01 Form II, this is “Status since Form I”)

209. Change in Marital Status Since Last Form II....................................................... __
210. What VA healthcare system services have you used since the last Form II? ......__| __| __| __| __| 1 2 3 4 5

STATUS DURING THE ANNUAL EXAM

◊ 211. Date of the Annual Exam ................................................................................... __ __/__ __/__ __ __ __ (mm/dd/yyyy)
◊ 212. Grade of Worst Pressure Ulcer Present at the Annual Exam............................ __
◊ 213. Number of Pressure Ulcers Present at Annual Exam ............................................. __ __

Note: The Neurologic Exam items on page 15 are required only during the year 01 (or year 02) annual exam.

STATUS DURING THE ANNIVERSARY YEAR

214. Sponsors of SCI Care and Services ...... __| __| __| __| __| __| __| __| __| __| __| 1 2 3 4 5
215. Type of Reimbursement (deleted 7/2001)
216. Medical Case Manager ......................... ___
217. Rehospitalizations #1 #2 #3 #4 #5 #6 #7 8+ D. Number of Days......................... __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ __ ___
100. System ID........... __ __ 101. Patient Number...... __ __ __ __ __ __ 200. Post-injury Year .......__ __

COMPLICATIONS DURING THE ANNIVERSARY YEAR

221A. Pulmonary Embolism............................................................... __
221B. Thrombophlebitis, Deep Vein Thrombosis........................................ __
221C. Pneumonia................................................................................. __
221D. Presence of Calculus in the Kidney and/or Ureter............................ __

OPERATIVE PROCEDURES DURING THE ANNIVERSARY YEAR

222A. Closure of Decubitus Ulcer(s)....................................................... __
222B. Calculus Removal.......................................................................... __
222C. Bladder Neck Resection................................................................. __
222D. External Sphincterotomy or Other Sphincter Opening Procedures .......... __

INTERVIEW ITEMS Note: All Form II variables may be collected during the interview except those that are designated to be collected “During the Annual Exam”.

223. Date of the Interview ................................................................. __ / __ / __ __ __ __ (mm/dd/yyyy)
! 224. How was the interview conducted? .................................................... __
!+* 225. Self-perceived Health Status ......................................................... __
!+* 226. Compared to 1 year ago, how would you rate your health in general now? __
! 227. FIM Self Care
A. Eating............................................................................................ __
B. Grooming....................................................................................... __
C. Bathing............................................................................................ __
D. Dressing, Upper Body................................................................. __
E. Dressing, Lower Body................................................................. __
F. Toileting......................................................................................... __
Sphincter Control
G. Bladder Management................................................................. __
H. Bowel Management...................................................................... __
Mobility Transfer
I. Bed, Chair, Wheelchair................................................................. __
J. Toilet.............................................................................................. __
K. Tub, Shower................................................................................ __
Locomotion
L. Walk or Wheelchair...................................................................... __
LM. Mode of Locomotion................................................................. __
M. Stairs ............................................................................................ __
T. Total Motor Score.......................................................................... __ (computer-generated)

!+* 228_1. Satisfaction With Life Scale Question 1................................................. __
!+* 228_2. Satisfaction With Life Scale Question 2................................................. __
!+* 228_3. Satisfaction With Life Scale Question 3................................................. __
!+* 228_4. Satisfaction With Life Scale Question 4................................................. __
!+* 228_5. Satisfaction With Life Scale Question 5................................................. __
!+* 228T. Satisfaction With Life Scale Total Score............................................... __ (computer-generated)
## Craig Handicap Assessment and Reporting Technique (CHART) - Short Form

### Form II

<table>
<thead>
<tr>
<th>229_1A</th>
<th>The CHART - Number of Hours of Paid Assistance/Day</th>
</tr>
</thead>
<tbody>
<tr>
<td>229_1B</td>
<td>The CHART - Number of Hours of Unpaid Assistance/Day</td>
</tr>
<tr>
<td>229_2</td>
<td>The CHART - How much time is someone with you to assist you in your home</td>
</tr>
<tr>
<td>229_3</td>
<td>The CHART - How much time is someone with you to assist you away from your home</td>
</tr>
<tr>
<td>229_4</td>
<td>The CHART - Number of Days Out of the House/Week</td>
</tr>
<tr>
<td>229_5</td>
<td>The CHART - Number of Nights Away from Home In the Past Year</td>
</tr>
<tr>
<td>229_6</td>
<td>The CHART - Number of Hours/Week at Paid Job</td>
</tr>
<tr>
<td>229_7</td>
<td>The CHART - Number of Hours/Week at School/Study</td>
</tr>
<tr>
<td>229_8</td>
<td>The CHART - Number of Hours/Week at Homemaking</td>
</tr>
<tr>
<td>229_9</td>
<td>The CHART - Number of Hours/Week at Home Maintenance</td>
</tr>
<tr>
<td>229_10</td>
<td>The CHART - Number of Hours/Week at Recreation</td>
</tr>
<tr>
<td>229_11</td>
<td>The CHART – How many people do you live with?</td>
</tr>
<tr>
<td>229_12</td>
<td>The CHART – Is one of them your spouse or significant other?</td>
</tr>
<tr>
<td>229_13</td>
<td>The CHART – Of the people you live with how many are relatives?</td>
</tr>
<tr>
<td>229_14</td>
<td>The CHART - Number of Business/Organizational Contacts/Month</td>
</tr>
<tr>
<td>229_15</td>
<td>The CHART - Number of Contacts/Month With Friends</td>
</tr>
<tr>
<td>229_16</td>
<td>The CHART - How Many Strangers Have You Initiated a Conversation With/Month?</td>
</tr>
<tr>
<td>229_17</td>
<td>The CHART - Combined Annual Family Income</td>
</tr>
<tr>
<td>229_18</td>
<td>The CHART – Unreimbursed Medical Care Expenses</td>
</tr>
<tr>
<td>229_19</td>
<td>The CHART - Physical Independence Total (computer-generated)</td>
</tr>
<tr>
<td>229_20</td>
<td>The CHART - Cognitive Independence Total (computer-generated)</td>
</tr>
<tr>
<td>229_21</td>
<td>The CHART - Mobility Total (computer-generated)</td>
</tr>
<tr>
<td>229_22</td>
<td>The CHART - Occupation Total (computer-generated)</td>
</tr>
<tr>
<td>229_23</td>
<td>The CHART - Social Integration (computer-generated)</td>
</tr>
<tr>
<td>229_24</td>
<td>The CHART - Economic Self-sufficiency (computer-generated)</td>
</tr>
<tr>
<td>229T</td>
<td>Total CHART Score (computer-generated)</td>
</tr>
</tbody>
</table>

◊ Window variable (Annual Exam and Neuro Exam): may be collected 6 months prior to through 6 months after the anniversary date

† Window variable (Interview Data): may be collected 6 months prior to through 1 year after the anniversary date (year 01 up to 6 months after the anniversary)

Collect this on patients whose age at the time of the interview is 18 or older.

* Only responses from the patient are acceptable.
CHIEF-SF: Craig Hospital Inventory of Environmental Factors

!+* 230_1. Problems with availability of transportation .................................................................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_2. Problems with the natural environment make it difficult to do what you want or need to do? ....
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_3. Difficulties with other aspects of your surroundings make it difficult for you
to do what you want or need to do? ........................................................................................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_4. Information you wanted or needed not been available in a format you can use or understand? ___
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_5. Availability of health care services and medical care been a problem for you? .....................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_6. Need someone else’s help in your home and could not get it easily? ...............................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_7. Need someone else’s help at school or work and could not get it easily? .............................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_8. Other people’s attitudes toward you been a problem at home? ...........................................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_9. Other people’s attitudes toward you been a problem at school or work? .............................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_10. Experience prejudice or discrimination? ............................................................................__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_12. Government programs and policies make it difficult to do what you want or need to do? ....__
   A. When this problem occurs, has it been a big problem or little problem? ........................__

!+* 230_13. Policies Subscale (computer-generated) ................................................................................__

!+* 230_14. Physical/Structural Subscale (computer-generated) ............................................................__

!+* 230_15. Work/School Subscale (computer-generated) ......................................................................__

!+* 230_16. Attitudes/Support Subscale (computer-generated) ...............................................................__

!+* 230_17. Services/Assistance Subscale (computer-generated) ..............................................................__

!+* 230T. CHIEF-SF Total (computer-generated) ................................................................................____
THE NATIONAL SPINAL CORD INJURY DATABASE
FORM II

Unless indicated, data are to be collected in post-injury years 1, 5, 10, 15, 20, 25, 30

100. System ID........... __ __ 101. Patient Number...... __ __ __ __ __ __ 200. Post-injury Year ........ __ __

Patient Health Questionnaire (Brief Version)

!+* 231.1. Bothered by little interest or pleasure in doing things? .....................................................................

!+* 231.2. Bothered by feeling down, depressed, or hopeless? .................................................................

!+* 231.3. Bothered by trouble falling or staying asleep, or sleeping too much? ........................................

!+* 231.4. Bothered by feeling tired or having little energy? ..............................................................................

!+* 231.5. Bothered by poor appetite or overeating? .............................................................................................

!+* 231.6. Bothered by feeling bad about yourself – or that you are a failure or have let yourself or your family down? ..........

!+* 231.7. Bothered by trouble concentrating on things, such as reading the newspaper or watching television? ..........

!+* 231.8. Bothered by moving or speaking so slowly that other people could have noticed?

Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual? .............

!+* 231.9. Bothered by thoughts that you would be better off dead or of hurting yourself in some way? ....................

!+* 231.10. If you had any of the problems in questions 1 through 9, how difficult have these problems made it

for you to do your work, take care of things at home, or get along with other people? ..............................................

!+* 231M. Major Depressive Syndrome (computer-generated)..............................................................................

!+* 231S. Severity of Depression Score (computer-generated). ..................................................................................

!+* 232. Drug Use ............................................................................ __|__|__|__|__|__|

!+* 233. Alcohol Use........................................................................ __

!+* 234. Alcohol Use: Number of Days Per Week.........................

!+* 235. Alcohol Use: Number of Drinks................................. __

!+* 236. Alcohol Use: Frequency During the Past Month..............

!+* 237.1. CAGE Question 1............................................................... __

!+* 237.2. CAGE Question 2............................................................... __

!+* 237.3. CAGE Question 3............................................................... __

!+* 237.4. CAGE Question 4............................................................... __

!+* 237T. CAGE Total Score (computer-generated).............................

!+* 238. Pain: Severity of Pain ......................................................... __

!+* 239. Pain: Interfering with work....................................................

◊ Window variable (Annual Exam and Neuro Exam): may be collected 6 months prior to through 6 months after the anniversary date

! Window variable (Interview Data): may be collected 6 months prior to through 1 year after the anniversary date (year 01 up to 6 months after the anniversary)

+ Collect this on patients whose age at the time of the interview is 18 or older.

* Only responses from the patient are acceptable.

NATIONAL SPINAL CORD INJURY STATISTICAL CENTER, BIRMINGHAM, AL

04/2005 Form II, Page 5 of 7

B14
100. System ID........... __ __ 101. Patient Number...... __ __ __ __ __ __ 200. Post-injury Year ......... __ __

ALL THE VARIABLES ON THIS PAGE ARE TO BE COLLECTED ONLY AT YEAR 01 (OR YEAR 02*)

240. From Injury to the First* Anniversary – Outpatient Physical and/or Occupational Therapy:
A. Prescribed.............. __
B. Hours Completed... __
C. Location................. __

241. From Injury to the First* Anniversary – Outpatient Psychological and/or Vocational Counseling:
A. Prescribed.............. __
B. Hours Completed... __
C. Location................. __

242. Utilization of Mechanical Ventilation at the First Anniversary ..............................................__

243. Post-operative Wound Infection at the Site of the Spinal Surgery Post-discharge to First Anniversary........__

* see syllabus pages 114, 124 and 291 to 294 for details when year 02 is substituted for year 01.

NEUROLOGIC EXAM [Data are required for year 01 (or year 02*); data for subsequent years are optional]

◊ 244. Category of Neurologic Impairment.................................__
◊ 245. ASIA Impairment Scale .......................................................
◊ 246. ASIA Motor Index Score                                  Left Right

<table>
<thead>
<tr>
<th>Muscle Group</th>
<th>Level Left</th>
<th>Level Right</th>
</tr>
</thead>
<tbody>
<tr>
<td>Elbow flexors (biceps, brachialis)</td>
<td>C5..........</td>
<td>__</td>
</tr>
<tr>
<td>Wrist extensors (extensor carpi radialis longus&amp;brevis)</td>
<td>C6..........</td>
<td>__</td>
</tr>
<tr>
<td>Elbow extensors (triceps)</td>
<td>C7..........</td>
<td>__</td>
</tr>
<tr>
<td>Finger flexors to the middle finger</td>
<td>C8..........</td>
<td>__</td>
</tr>
<tr>
<td>Small finger abductors(abductor digiti minimi)</td>
<td>T1..........</td>
<td>__</td>
</tr>
<tr>
<td>Hip flexors(iliopsoas)</td>
<td>L2..........</td>
<td>__</td>
</tr>
<tr>
<td>Knee extensors(quadriceps)</td>
<td>L3..........</td>
<td>__</td>
</tr>
<tr>
<td>Ankle dorsiflexors (tibialis anterior)</td>
<td>L4..........</td>
<td>__</td>
</tr>
<tr>
<td>Long toe extensors(extensor hallucis longus)</td>
<td>L5..........</td>
<td>__</td>
</tr>
<tr>
<td>Ankle plantarflexors(gastrocnemius, soleus)</td>
<td>S1..........</td>
<td>__</td>
</tr>
</tbody>
</table>

Subtotal ...... __ __ __ (computer-generated)
Total........... __ __ __ (computer-generated)

◊ 247. Sensory Level................................. __ __ __ __ __ __
◊ 248. Motor Level................................. __ __ __ __ __ __ (computer-generated)
◊ 249. Level Preserved Neurologic Function............. __ __ __ __ __ __

◊ Window variable (Annual Exam and Neuro Exam): may be collected 6 months prior to through 6 months after the anniversary date
!* Window variable (Interview Data): may be collected 6 months prior to through 1 year after the anniversary date (year 01 up to 6 months after the anniversary)
+ Collect this on patients whose age at the time of the interview is 18 or older.
* Only responses from the patient are acceptable.
100. System ID...........  __ __  101. Patient Number...... __ __ __ __ __ __  200. Post-injury Year ________ __

ASSISTIVE TECHNOLOGY

| 250A. Walk for 150 feet in your home? __ | 250B. Walk for one street block outside? __ |
| 250C. Walk up one flight of steps? __ |
| 251. Mobility Aid(s) __________________________  1 2 3 4 5 |
| 252. Wheelchair or Scooter Use__________________ |
| 253. Type of Wheelchair (or Scooter) Used Most Often |
| 254. Wheelchair (or Scooter) Used Most Often ______  Manufacturer (V254A) __  Model (V254B) |
| 255. Primary Funding Source for Wheelchair (or Scooter) Used Most Often__ __ |
| 256. Features on Wheelchair (or Scooter) Used Most Often _______ 1 2 3 4 5 6 |
| 257. Number of Repairs on Wheelchair (or Scooter) Used Most Often _______ |
| 258. Consequences of Breakdown of Wheelchair (or Scooter) Used Most Often__ __ |
| 259. Number of Additional Wheelchairs or Scooters: |
| A. Manual__________________________________________ __ |
| B. Power__________________________________________ __ |
| C. Power Assisted____________________________________ __ |
| D. Other__________________________________________ __ |
| E. Scooters__________________________________________ __ |
| 260. Use a Computer?______________________________ |
| 261. Type of Computer Access Device(s).................. 1 2 3 4 5 6 7 8 9 10 |
| 262. Internet or Email Usage_______________________ |
| 263. Location of Internet/Email Use__________ 1 2 3 |
| 264. Internet Categories: |
| A. Employment/vocation information ________________ __ |
| B. Disability/health information ________________________ __ |
| C. E-mail__________________________________________ __ |
| D. Chat rooms__________________________________________ __ |
| E. Games__________________________________________ __ |
| F. Shopping__________________________________________ __ |
| G. Other__________________________________________ __ |
| 265. Modified Vehicle?______________________________ |
| 266. Driving a Modified Vehicle?____________________ |
| 267. Cell Phone?___________________________________ |

◊ Window variable (Annual Exam and Neuro Exam): may be collected 6 months prior to through 6 months after the anniversary date
◊ Window variable (Interview Data): may be collected 6 months prior to through 1 year after the anniversary date (year 01 up to 6 months after the anniversary)
+ Collect this on patients whose age at the time of the interview is 18 or older.
* Only responses from the patient are acceptable.
WE NEED YOUR HELP—We have been unable to reach you by phone, and as a participant in the National Spinal Cord Injury study, it is time to update your study information. Please answer the following questions and return the questionnaire, the signed consent form and the signed HIPAA form in the large envelope provided in your packet. If you have questions, or would prefer to complete the study by phone, please call __________________________________________________. If leaving a message, please state your name and phone number clearly, and we will return your call as soon as possible. All study information is confidential; your identity will not be revealed without your permission. Thanks for your participation in the study.

Please keep the following dates in mind while answering the entire questionnaire; the questions, unless otherwise stated, are all based on what occurred during the following time period:

From: ___ __ / ___ / ___ ___ ___ ___ ___ ___ ___ ___ ___ 

Until ___ __ / ___ / ___ ___ ___ ___ ___ ___ ___ ___ ___ 

203. In what type of dwelling do you live? (Circle one)

Private Home/Apt.  Hospital  Nursing Home  Hotel/Motel  Group Living Situation

204. What is your marital status? (Circle one)

Single, never married  Married  Separated  Divorced  Widowed  Other

205. What is the highest grade you completed in school? ______________________

206. Please circle your primary occupation: (Circle one)

Working (gainfully and legally employed)  Homemaking  On-the-job-training

Sheltered Workshop  Retired  Student  Unemployed

Other (includes volunteer, disability, or leave)

207. If you are working at all, what type of work do you do (what is your job title or responsibility)?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
Form II Interview – Years 1, 5, 10, 15, 20, 25 and 30
Developed by the Rocky Mountain Regional SCI System

208. What is your method of bladder drainage? *(check the primary method)*

____ No established program *(includes diapers, pampers, etc.)*
____ Indwelling Urethral Catheter
____ Indwelling Catheter after Augmentation or Continent Diversion
____ Catheter Free **with** External Collector, No Sphincterotomy
____ Catheter Free **with** External Collector and Sphincterotomy
____ Catheter Free **with** External Collector, Sphincterotomy unknown
____ Catheter Free **without** External Collector *(includes stimulation/pressure)*
____ Intermittent Catheterization Only
____ Intermittent Catheterization with External Collector
____ Intermittent Catheterization after Augmentation or Continent Diversion
____ Intermittent Catheterization, External Collector, Augmentation, or Continent Diversion unknown
____ Conduit
____ Suprapubic Cystostomy
____ Normal Bladder Activity *(voiding without stimulation/pressure)*
____ Other, please specify __________________________________________
____ Unknown

209. In ___________, our records showed your marital status as: __________________________. Since that time has your marital status changed? *(check one):*

____ No Change
____ Divorce
____ Marriage
____ Widowed
____ Divorce + Marriage (in either order)
____ Widowed + Marriage (in either order)
____ Divorce, Marriage + Widowed (in any order: DMW, MDW, WMD)
____ Other, please specify __________________________________________
____ Unknown

210. Are you a Veteran of the U.S. Military Services?
____ No (go to #214)  __ Yes If yes, **since you were injured**, have you utilized any of the following VA Healthcare System Services? *(check all that apply)*

____ None
____ Pharmacy
____ Prosthetics/Orthotics *(includes wheelchair and equipment)*
____ SCI Center *(VA Hospital with a spinal center)*
____ Non-Spinal Cord Injury Center *(VA Hospital without a spinal center)*
____ Spinal Cord Injury Outpatient Clinic
____ Not applicable, not a veteran
____ Unknown
214. Please place a #1 next to the sponsor (*insurance*) contributing the largest proportion of support for your medical expenses during the time period specified on page 1. Place a #2 next to your secondary sponsor, #3 next to a third sponsor, etc.

- [ ] Private Insurance
- [ ] Department of Vocational Rehabilitation (DVR)
- [ ] Medicaid or [ ] Medicaid HMO/PPO
- [ ] Worker’s Compensation
- [ ] Medicare or [ ] Medicare HMO/PPO
- [ ] County Medical
- [ ] Self-Pay/Personal Funds
- [ ] Veterans Administration (VA)
- [ ] Public Health Service (Bureau of Indian Affairs)
- [ ] Crippled Children’s Service
- [ ] No Pay (indigent, no sponsors)
- [ ] Other Insurance, unclassified: (includes Champus)
- [ ] Other Private Funds- (hometown fundraisers)
- [ ] Prepaid Health Plans (includes HMO’s, PPO’s, Kaiser, etc.)
- [ ] Other, unclassified (patient care funds, Homebound, victim’s assistance, etc.)
- [ ] Unknown

216. Has your primary financial sponsor (*insurance*) assigned a **medical case manager** to handle your case? *(check one)*

- [ ] No
- [ ] Yes
- [ ] Not applicable
- [ ] Unknown
217. **Rehospitalizations** - In the time period specified on page 1, have you been hospitalized on an overnight basis?
   - No (go to #220)
   - Yes
     
     If yes, how many times were you hospitalized in that time period? ___________

     Please complete the following information for each admission in the spaces provided below. Record any additional hospitalizations on the back of this page.

<table>
<thead>
<tr>
<th>#1 Hospitalization</th>
<th>#2 Hospitalization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Name</td>
<td>Hospital Name</td>
</tr>
<tr>
<td>City &amp; State</td>
<td>City &amp; State</td>
</tr>
<tr>
<td>Adm/Dis Dates</td>
<td>Adm/Dis Dates</td>
</tr>
<tr>
<td>Adm Reason</td>
<td>Adm Reason</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#3 Hospitalization</th>
<th>#4 Hospitalization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Name</td>
<td>Hospital Name</td>
</tr>
<tr>
<td>City &amp; State</td>
<td>City &amp; State</td>
</tr>
<tr>
<td>Adm/Dis Dates</td>
<td>Adm/Dis Dates</td>
</tr>
<tr>
<td>Adm Reason</td>
<td>Adm Reason</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>#5 Hospitalization</th>
<th>#6 Hospitalization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Name</td>
<td>Hospital Name</td>
</tr>
<tr>
<td>City &amp; State</td>
<td>City &amp; State</td>
</tr>
<tr>
<td>Adm/Dis Dates</td>
<td>Adm/Dis Dates</td>
</tr>
<tr>
<td>Adm Reason</td>
<td>Adm Reason</td>
</tr>
</tbody>
</table>

220. In the time period specified on page 1 have you spent any days in a *nursing home, extended care facility, or long-term care facility?*
   - No
   - Yes

   If yes, complete the following:
   
   Name of Facility_______________________________________________________
   
   City & State___________________________________________________________
   
   Adm/Dis Dates________________________________________________________

During the time period specified on page 1, have you experienced any of the following:

221A. **Pulmonary Embolism (blood clot)**
   - No
   - Yes

   If yes, how was the embolism diagnosed *(what type of x-ray or test)*

221B. **Thrombophlebitis, Deep Vein Thrombosis (blood clot-leg only)**
   - No
   - Yes

   If yes, how was the thrombosis diagnosed *(what type of x-ray or test)*

   Have you had surgery to place a clot filter in the heart?
   - No
   - Yes

221C. **Pneumonia**
   - No
   - Yes
**FORM II INTERVIEW – YEARS 1, 5, 10, 15, 20, 25 AND 30**
Developed by the Rocky Mountain Regional SCI System

221D. Presence of Calculus *(stones seen on X-ray)* in the Kidney and/or Ureter *(check all that apply)*

____ No Calculus
____ Left Kidney and/or Ureter
____ Yes, Calculus, Location Unknown
____ Yes, Both Kidneys and/or Ureters
____ Yes, Calculus, Location Unknown
____ Unknown

**221A-D: Date and Where x-ray or test was done:** ________________________________

**During the same time period, did you have any of the following surgeries?**

222A. Closure of a Decubitus Ulcer (pressure sore) *(check one)*

____ No
____ Yes
____ I do/did have an ulcer, but no closure was/or has been performed

222B. Calculus (stone) Removal *(check one)*

____ No
____ Yes
__(If Yes, check all that apply)__

____ Removed surgically
____ Passed spontaneously
____ I do/did have kidney/ureter calculi but no surgery performed

222C. Bladder Neck Resection or Transurethral Resection of Prostate (TUR) *(check one)*

____ No
____ Yes
____ Unknown

222D. External Sphincterotomy or Other Sphincter Opening Procedures *(check one)*

____ No
____ Yes
____ Unknown

**222A/D: If Yes: Date and Where surgery was done:** ________________________________

223. **Today’s Date:** ___ ___/___ ___/___ ___ ___ ___

228. **Using the following scale, please respond to the next 5 questions.**

1=Strongly Disagree
2=Disagree
3=Slightly Disagree
4=Neither Agree nor Disagree
5=Slightly Agree
6=Agree
7=Strongly Agree
9=Unknown

228_1. In most ways my life is close to my ideal._______
228_2. The conditions of my life are excellent._______
228_3. I am satisfied with my life._______
228_4. So far I have gotten the important things I want in life._______
228_5. If I could live my life over, I would change almost nothing._______
238. Using a 0-10 scale with 10 being pain so severe you could not stand it and, 0 being no pain, what has been your usual level of pain over the past 4 weeks?
   If you have more than one pain site, score the site of worst pain—(Circle one):
   No Pain—0  1  2  3  4  5  6  7  8  9  10—Severe Pain

239. During the past 4 weeks how much did pain interfere with your normal work including both work outside the home and housework/and or usual activities? (check one)
   _____ Not at all
   _____ A little bit
   _____ Moderately
   _____ Quite a bit
   _____ Extremely
   _____ I don’t know
   _____ I would rather not answer
   _____ Not Applicable—I have not experienced pain in the past 4 weeks
   _____ Unknown

225. In general, would you say that your health is: (Circle one)
   Excellent  Very Good  Good  Fair  Poor  I Don’t Know  I Don’t Want to Answer

226. Compared to your date of discharge from ______________, on __ __ / __ __ / __ __ __ __ how would you rate your health in general now? (check one)
   _____ Much better now than one year ago
   _____ Somewhat better now than one year ago
   _____ About the same as one year ago
   _____ Somewhat worse now than one year ago
   _____ Much worse now than one year ago
   _____ I don’t know
   _____ I would rather not answer the question
   _____ Unknown
Please use the following scales to score all of the two-part questions in #230_1 through #230_12.

<table>
<thead>
<tr>
<th>How Often Does Problem Occur?</th>
<th>How big is the problem?</th>
</tr>
</thead>
<tbody>
<tr>
<td>0=Never</td>
<td>0=No Problem</td>
</tr>
<tr>
<td>1=Less than Monthly</td>
<td>1=Little Problem</td>
</tr>
<tr>
<td>2=Monthly</td>
<td>2=Big Problem</td>
</tr>
<tr>
<td>3=Weekly</td>
<td>8=Not Applicable, I Live Alone</td>
</tr>
<tr>
<td>4=Daily</td>
<td>9=Unknown</td>
</tr>
<tr>
<td>8=Not Applicable, I Live Alone</td>
<td>9=Unknown</td>
</tr>
</tbody>
</table>

You were discharged from ____________________________ on: __/__/__ __ __ __

230_1. Since discharge, how often has the availability of transportation been a problem for you? ______
When this problem occurs, has it been a big or little problem? ______

230_2. Since discharge, how often has the natural environment /temperature, terrain or climate-made it
difficult to do what you want or need to do? ______
When this problem occurs, has it been a big or little problem? ______

230_3. Since discharge, how often have other aspects of your surroundings, lighting, noise, crowds, etc.—made
it difficult to do what you want or need to do? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_4. Since discharge, how often has the information you wanted or needed not been available in a format
you can use or understand? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_5. Since discharge, how often has the availability of health care services and medical care been a problem
for you? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_6. Since discharge, how often did you need someone else’s help in your home and could not get it easily?______
When this problem occurs, has it been a big problem or a little problem? ______

230_7. Since discharge, how often did you need someone else’s help at school or work and could not get it
easily? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_8. Since discharge, how often have other people’s attitudes toward you been a problem at home? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_9. Since discharge, how often have other people’s attitudes toward you been a problem at school or work?______
When this problem occurs, has it been a big problem or a little problem? ______

230_10. Since discharge, how often did you experience prejudice or discrimination? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_11. Since discharge, how often did the policies and rules of businesses and organizations make problems
for you? ______
When this problem occurs, has it been a big problem or a little problem? ______

230_12. Since discharge, how often did government programs and policies make it difficult to do what you
want or need to do? ______
When this problem occurs, has it been a big problem or a little problem? ______
Please use the following scale to rate the next nine questions (#231_1 through #231_9).

0=Not at All
1=Several Days
2=More than Half the Days
3=Nearly Every Day
9=Unknown

231_1. Over the last two weeks, how often have you been bothered by little interest or pleasure in doing things? _______

231_2. Over the last two weeks, how often have you been bothered by feeling down, depressed, or hopeless? _______

231_3. Over the last two weeks, how often have you been bothered by trouble falling or staying asleep, or sleeping too much? _______

231_4. Over the last two weeks, how often have you been bothered by feeling tired or having little energy? _______

231_5. Over the last two weeks, how often have you been bothered by poor appetite or overeating? _______

231_6. Over the last two weeks, how often have you been bothered by feeling bad about yourself – or that you are a failure or have let yourself or your family down? _______

231_7. Over the last two weeks, how often have you been bothered by trouble concentrating on things, such as reading the newspaper or watching TV? _______

231_8. Over the last two weeks, how often have you been bothered by moving or speaking so slowly, or the opposite, being so fidgety or restless and moving around a lot more than usual, that other people could have noticed? _______

231_9. Over the last two weeks, how often have you been bothered by thoughts that you would be better off dead or of hurting yourself in some way? _______

231_10. If you had any of the problems asked about in questions #231_1 through #231_9, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people? (check one)

Not difficult at all
Somewhat Difficult
Very Difficult
Extremely Difficult
Not Applicable (I did not have any of the problems in questions #231_1 through #231_9)
Unknown
229_1A&B. How many hours in a **typical 24-hour day** do you have someone with you to provide physical assistance for personal care activities such as eating, bathing, dressing, toileting, and mobility?

_____ I have no paid/unpaid assistance

I receive _____ hours of **paid assistance** (enter # of hours)

I receive _____ hours of **unpaid assistance** (family, others; enter # of hours)

229_2. How much time is someone with you **in your home** to assist you with activities that require remembering, decision making, or judgement? (check one)

_____ Someone else is always with me to observe or supervise

_____ Someone else is always around, but they only check on me now and then

_____ Sometimes I am left alone for an hour or two

_____ Sometimes I am left alone for most of the day

_____ I have been left alone all day and all night, but someone checks in on me

_____ I am left alone without anyone checking on me

_____ Unknown

229_3. How much of the time is someone with you **when you go away from your home?** (check one)

_____ I am restricted from leaving, even with someone else

_____ Someone is always with me to help with remembering, decision making, or judgement when I go anywhere

_____ I go to places on my own as long as they are familiar

_____ I do not need help going anywhere

_____ Unknown

229_4. On a **typical day**, how many hours are you out of bed? Enter # of hours ___ ___

229_5. In a **typical week** how many days do you get out of your house and go somewhere? Enter # of days ___ ___

229_6. Since discharge from ______________, how many nights have you spent away from your home (excluding hospitalizations)? (check one)

_____ none _____ 1-2 nights _____ 3-4 nights _____ 5 or more nights

229_7. How many **hours per week** do you spend working in a job for which you get paid? Enter # of hours per week ___ ___

229_8. How many **hours per week** do you spend in school working toward a degree or in an accredited technical training program? (Including hours in class and studying) Enter # of hours per week ___ ___

229_9. How many **hours per week** do you spend in active homemaking including parenting, housekeeping, and food preparation? Enter # of hours per week ___ ___

229_10. How many **hours per week** do you spend in home maintenance activities such as gardening, house repair, or home improvement? Enter # of hours per week ___ ___

229_11. How many **hours per week** do you spend in recreational activities such as sports, exercise, playing cards, or going to movies? Enter # of hours per week ___ ___

229_12. How many people do you live with? (enter # of people) ___ ___
FORM II INTERVIEW –YEARS 1, 5, 10, 15, 20, 25 AND 30
Developed by the Rocky Mountain Regional SCI System

229_13. Of the people that you live with, is one of them your spouse, significant other(SO), or partner? (check one)
_____ No, I do not live with a spouse, SO/partner, unrelated roommate, or attendant
_____ Yes, I live with a spouse or SO/partner
_____ I live with an unrelated roommate and/or attendant
_____ Not applicable, I live alone
_____ Unknown

229_14. Of the people you live with (not including a spouse), how many (others) are relatives?
_____ None are relatives
_____ # of people you live with who are relatives
_____ Not applicable, I live alone
_____ Unknown

229_15. How many business or organizational associates do you visit, phone, write, or e-mail at least once a month?
_____ None
_____ Enter # of people
_____ Unknown

229_16. How many friends (non-relatives contacted outside business or organizational settings) do you visit, phone, write or e-mail at least once a month?
_____ None
_____ Enter # of friends
_____ Unknown

229_17. With how many strangers have you initiated a conversation in the last month (for example: to ask information or place an order)?
_____ None
_____ Enter # of strangers
_____ Unknown

229_18. Approximately what was the combined annual income, in the last year, of all family members in your household? (check one)
_____ Less than $10,000 Consider all sources including wages and
_____ $10,000 to $14,999 earnings, disability benefits, pensions and
_____ $15,000 to $19,999 retirement income, from court settlements,
_____ $20,000 to $24,999 investments and trust funds, child support
_____ $25,000 to $34,999 and alimony, contributions from relatives,
_____ $35,000 to $49,999 and any other sources. Your response should
_____ $50,000 to $74,999 include incomes of the entire family unit
_____ $75,000 or more that lives together.
_____ Unknown

229_19. Approximately how much did you pay last year for medical expenses? Consider any amounts paid by yourself or the family members in your household and not reimbursed by insurance or other benefits. (check one)
_____ Less than $1,000
_____ $1,000 to $2,499
_____ $2,500 to $4,999
_____ $5,000 to $9,999
_____ $10,000 or more
_____ Unknown
250. Are you able to walk (with or without mobility aid)
   A. for 150 feet in your home? ........____ No     ____Yes
   B. one street block outside? ............__ No     __Yes
   C. up one flight of steps? ..............__ No     __Yes

If A, B AND C are No, go to #252

251. What mobility aid(s) do you use most often? (check all that apply)
   ___None   ___Straight cane   ___Quad cane   ___Walker   ___Crutches   ___Ankle-Foot-Orthotic
   ___Knee-Ankle-Foot-Orthotic   ___Other, specify __________________________

252. Do you use a wheelchair or scooter over 40 hours per week?
   __ No (If No, go to #260)     __Yes

253. What type of wheelchair or scooter do you use most often? (check one)
   ___Manual W/C   ___Power W/C   ___Power assist W/C   ___Scooter
   ___Other (e.g., golf cart), specify ________________________________

254A. Who is the manufacturer of the wheelchair (or scooter) you use most often? (check one)
   ___ Invacare   ___ Sunrise   ___ Pride Health Care
   ___ Permobil/Colours   ___ Everest & Jennings   ___ Tisport
   ___ Frank Mobility   ___ Other (specify) ________________________________

   B. What is the model of the wheelchair (or scooter) you use most often? __________________________
255. What funding source paid the most for the wheelchair you use most often? (check one)

- Private Insurance
- Department of Vocational Rehabilitation (DVR)
- Medicaid or Medicaid HMO/PPO
- Worker’s Compensation
- Medicare or Medicare HMO/PPO
- County Medical
- Self-Pay/Personal Funds
- Veterans Administration (VA)
- Public Health Service (Bureau of Indian Affairs)
- Crippled Children’s Service
- No Pay (indigent, no sponsors)
- Other Insurance, unclassified: (includes Champus)
- Other Private Funds- (hometown fundraisers)
- Prepaid Health Plans (includes HMO’s, PPO’s, Kaiser, etc.)
- Other, unclassified (patient care funds, Homebound, victim’s assistance, etc.)
- Unknown

256. Does the wheelchair (or scooter) you use most often have any of the following features? (check all that apply)

- None of the listed features (go to #257)
- Tilt-in-space
- Recline
- Standing
- Seat elevation
- Leg elevation
- Other, specify ________________________________

257. How many times in the past 6 months has the wheelchair (or scooter) you use most been repaired?

- Number of times repaired (If zero, go to #259)
- Repairs were done, but the number of repairs is unknown

258. From the following list, check all that apply regarding breakdown (in the past 6 months) of the wheelchair (or scooter) you use most often. (check all that apply)

- Repairs were done but none of the listed consequences occurred
- I have been stranded (either at home or away from home) because of a wheelchair (or scooter) breakdown
- I have been injured because of a wheelchair (or scooter) breakdown
- I have missed work or school because of a wheelchair (or scooter) breakdown
- I have missed medical appointments because of a wheelchair (or scooter) breakdown

259. In addition to the wheelchair (or scooter) you use most often:

- how many manual chairs do you use? .....................
- how many power chairs do you use? .....................
- how many power-assisted chairs do you use? ...........
- how many other chairs do you use? .....................
- how many other scooters do you use? ....................
260. Do you use a computer? *(check one)*
___ No (go to #265)
___ Yes I use a computer at home only ___ Yes I use a computer outside the home only
___ Yes I use a computer at home and outside the home

261. Which of the following types of computer device(s) do you have that help you use a computer? *(check all that apply)*
___ None ___ Voice activation (hardware and software) for commands
___ Voice recognition (hardware and software) for typing
___ Mouth stick ___ Head pointer ___ Foot pedals ___ Eye control
___ Typing brace/splint on hand ___ Modified or on-screen keyboard
___ Modified mouse
___ Other special software (e.g., screen readers), specify _____________
___ Other, specify _______________

262. How often do you access the Internet or EMail? *(check one)*
___ Never use the Internet and never use EMail (go to #265)
___ Daily (5 to 7 days every week of the month)
___ Weekly (less than 5 days per week and more than 3 days per month)
___ Monthly (3 days or less per month)

263. Where do you use the Internet or EMail? *(check all that apply)*
___ Home ___ Work/school
___ Other Locations [e.g., library, café, wireless location (mobile location)], specify __________________________

264. How frequently you use each of the following categories on the Internet: *(check one for each category)*
A. Employment/vocation information ...... _Never_ ___ Sometimes ___ Frequently
B. Disability/health information .......... _Never_ ___ Sometimes ___ Frequently
C. E-mail......................................... _Never_ ___ Sometimes ___ Frequently
D. Chat rooms.................................... _Never_ ___ Sometimes ___ Frequently
E. Games ....................................... _Never_ ___ Sometimes ___ Frequently
F. Shopping ..................................... _Never_ ___ Sometimes ___ Frequently
G. Other ......................................... _Never_ ___ Sometimes ___ Frequently

265. What type of modified vehicle do you or your family own? *(check all that apply)*
___ Does not own a modified vehicle (go to #267)
___ Car ___ Van ___ Other, specify __________________________

266. Do you drive the modified vehicle? *(check one)*
___ No ___ Yes, I drive it from my wheelchair ___ Yes, I do not drive it from a wheelchair

267. Do you own a cell phone?...... ___ No ___ Yes
232. Since discharge from initial rehabilitation, have you used illegal drugs or prescribed medications for non-medical reasons?

_____ Yes (go to #232A)  ____ No (go to #233).

“Non-medical reasons” mean using medications on your own without your own prescription from a doctor, or using drugs in greater amounts or more often than prescribed, or using drugs to get high. We are interested in purposeful misuse of drugs (prescription or otherwise).

232A. If yes, please check each drug type used for “non-medical reasons”. (check all that apply)

___ Crack/cocaine
___ Pot/marijuana
___ LSD/hallucinogens
___ Heroin/opiates
___ Speed/stimulants
___ Medications prescribed for you
___ Medications prescribed for someone else
___ Yes, but type of drug unknown/or I am unwilling to disclose type of drug
___ Unknown

Use of Alcohol

233. Do you currently drink, or have you ever drunk ANY alcoholic beverages (such as beer, wine, wine coolers or liquor)?

___ No, I have NEVER drunk ANY alcohol (go to #227)
___ Yes, I currently drink, or I have drunk in the past

237. Have you drunk any alcohol during the past year? If NO, go to #234. If YES, answer the following questions:

During the past year

237_1. …have you ever felt you should cut down on your drinking?...........___No ___Yes

237_2. …have people ever annoyed you by criticizing your drinking? ....___No ___Yes

237_3. …have you ever felt bad or guilty about your drinking? .................___No ___Yes

237_4. …have you ever had a drink first thing in the morning to steady your nerves or to get rid of a hangover (eye-opener)? ...___No ___Yes

234. During the past month, how many days per week did you drink any alcoholic beverages (such as beer, wine, wine coolers, or liquor), on the average?

None (If None, go to #227)

___ On the average I drank (enter # of days per week from 1 to 7)

___ I drink alcohol, but the number of days drinking is unknown

235. During the past month, on the days you drank, about how many drinks did you drink on the average?

___ On the average I drank (enter # of drinks per day from 1 to 87)

___ I drink alcohol some days, but the number of drinks is unknown

236. Considering all types of alcoholic beverages, how many times during the past month did you have five (5) or more drinks on an occasion?

___ I drank more than 5 drinks on (enter # of occasions from 1 to31)

___ I drink alcohol, but the number of occasions of five or more drinks is unknown
227. Functional Independence Measure (FIM)

Exclude the FIM if the person is completing this interview him/herself (by mail or in person).

Please rate yourself on each of the following activities of daily living, using the following scale for each item:

<table>
<thead>
<tr>
<th>Rating</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>7</td>
<td>Complete independence-using no special equipment</td>
</tr>
<tr>
<td>6</td>
<td>Modified independence-use of any special equipment</td>
</tr>
<tr>
<td>5</td>
<td>Supervision or set-up by another person</td>
</tr>
<tr>
<td>4</td>
<td>Minimal contact assistance-you perform 75% or more or the task</td>
</tr>
<tr>
<td>3</td>
<td>Moderate assistance-you perform 50% to 74% of the task</td>
</tr>
<tr>
<td>2</td>
<td>Maximal assistance-you perform 25% to 49% of the task</td>
</tr>
<tr>
<td>1</td>
<td>Total assistance-you perform less than 25% of the task</td>
</tr>
</tbody>
</table>

---

Eating

Grooming

Bathing

Dressing - Upper Body

Dressing - Lower Body

Toileting (personal hygiene, clothing adjustment before and after task)

Bladder Management # of bladder accidents the past 7 days_______

Bowel Management # of bowel accidents the past 7 days_______

Transfer, Bed, Chair, or Wheelchair

Transfer, Toilet

Transfer, Tub or Shower

Locomotion-Walk/Wheelchair: (check one)

150 feet or more  50 -149 feet  less than 50 feet  does not occur

Mode of Locomotion (check primary mode)  Walk  Wheelchair

Stairs: How much help do you need to safely go up and down 12 to 14 stairs indoors or outdoors? (check one)

None

I need a cane, crutch, handrail, or some other devices

I need someone to keep an eye on me

I need someone to physically help me a little

I need someone to physically help me a lot

Even with someone helping me a lot, I can’t go more than 6 stairs

I can’t do stairs at all; I need to be carried up and down
Since your injury to your first anniversary of injury (from ___________ to ____________):

<table>
<thead>
<tr>
<th>Was physical or occupational therapy prescribed by a physician?</th>
<th>Was psychological or vocational counseling prescribed by a physician?</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____No</td>
<td>_____No</td>
</tr>
<tr>
<td>_____Yes</td>
<td>_____Yes</td>
</tr>
<tr>
<td>_____Unknown</td>
<td>_____Unknown</td>
</tr>
</tbody>
</table>

Since your injury to your first anniversary of injury (from ___________ to ____________):

<table>
<thead>
<tr>
<th>How many hours of physical or occupational therapy have you had? (check one)</th>
<th>How many hours of psychological or vocational counseling have you had? (check one)</th>
</tr>
</thead>
<tbody>
<tr>
<td>_____None</td>
<td>_____None</td>
</tr>
<tr>
<td>_____1 to 5 hours</td>
<td>_____1 to 5 hours</td>
</tr>
<tr>
<td>_____6 to 20 hours</td>
<td>_____6 to 20 hours</td>
</tr>
<tr>
<td>_____21 to 40 hours</td>
<td>_____21 to 40 hours</td>
</tr>
<tr>
<td>_____41 to 60 hours</td>
<td>_____41 to 60 hours</td>
</tr>
<tr>
<td>_____61 to 80 hours</td>
<td>_____61 to 80 hours</td>
</tr>
<tr>
<td>_____81 to 100 hours</td>
<td>_____81 to 100 hours</td>
</tr>
<tr>
<td>_____more than 100 hours</td>
<td>_____more than 100 hours</td>
</tr>
<tr>
<td>_____Therapy, but # of hours unknown</td>
<td>_____Counseling, but # of hours unknown</td>
</tr>
<tr>
<td>_____Unknown</td>
<td>_____Unknown</td>
</tr>
</tbody>
</table>

Where did the Therapy take place? (check all that apply)

- _______ ________________ (Model System)
- _____Any other hospital or facility
- _____Not Applicable-no therapy

Where did the Counseling take place? (check all that apply)

- _______ ________________ (Model System)
- _____Any other hospital or facility
- _____Not Applicable-no counseling

242. From __________ until __________ did you use any mechanical ventilation? (check one)

- _____ No
- _____ Yes, I used limited, short-term ventilation for pulmonary complications from __________ until __________.
- _____ Yes, I am ventilator-dependent or I was weaned from a ventilator during that time
- _____ Yes, I utilize a phrenic nerve stimulator
- _____ Yes, I used mechanical ventilation, but don’t know the length of time or the type of ventilation utilized
- _____ Unknown

243. If you had spinal cord surgery after your injury, did the surgical site become infected after your discharge from ____________ (check one)

- _____ No
- _____ Yes
- _____ Not Applicable (no spinal cord surgery)
- _____ Unknown
If you are currently experiencing any difficulties or problems, have questions, or would like to offer any suggestions in regard to your spinal cord injury, please jot it down below or on the back of this page. We’ll make every effort to get an answer for you.

__________________________________________________________

__________________________________________________________

__________________________________________________________

Please give us your current address and phone number below so we can keep your records updated. In addition, please give us the name and phone number of someone in your life, (family or friend) who will always know your whereabouts, and who would be willing to help us contact you.

| Your Address: ________________________________________________
| Your Phone Number: ___________________________________________
| Family/Friend Name: ___________________________________________
| Address: _____________________________________________________
| Phone Number: _______________________________________________

We are also enclosing a form to help you make us aware of any changes in your address or phone number. Should a change occur, simply complete the form and mail it to us in the small postage paid envelope in your packet, or call us at _____________ and leave a message.

You have completed your first year contact for the study. Thanks for your time and effort, and thanks again for your participation in the study.
Nombre:_______________________________ Fecha:_________________________________

NECESITAMOS SU AYUDA – No hemos podido comunicarnos con usted por teléfono, y como participante en el Estudio Nacional Sobre Lesiones de la Espina Dorsal, es hora de actualizar su información referente al estudio. Por favor responda a las siguientes preguntas y devuelva el cuestionario y el formulario de autorización firmado en el sobre grande que se incluye en su paquete. Si tiene preguntas, o si prefiere completar el estudio por teléfono, por favor llame al __________________________________________________________________________. Si deja un mensaje, por favor diga su nombre y número de teléfono claramente, y le llamaremos tan pronto como sea posible. Toda la información relacionada con el estudio es confidencial, su identidad no se revelará sin su permiso. Gracias por su participación en el estudio.

Por favor tenga en mente las siguientes fechas al responder al cuestionario completo; las preguntas, a menos que se indique lo contrario, se basan en lo que ocurrió en el siguiente período:
Desde:_____________________________ Hasta:_____________________________________

203. ¿En qué tipo de vivienda reside? Casa/apartamento particular, hospital, casa de convalecientes, hotel/motel, vivienda en grupo, etc. ______________________________

204. ¿Cuál es su estado civil? - (por favor marque con un círculo)
Soltero, nunca se ha casado       Casado       Separado      Divorciado       Viudo      Otro

205. ¿Cuál fue el grado más alto que terminó en la escuela? ______________________________

206. Por favor marque con un círculo su ocupación principal:
Trabaja (en un empleo remunerado y legal)       Atiende su casa       Adiestrándose en el trabajo
Taller de trabajo protegido       Jubilado       Estudiante       Desempleado
Otra (incluyendo trabajo voluntario, incapacidad, o ausencia)

207. Si está trabajando, ¿qué clase de trabajo hace? (¿cuál es su título o responsabilidad?)
____________________________________________________________________________________
____________________________________________________________________________________
________________________________________________
208. ¿Qué método usa para vaciar la vejiga? **Por favor marque el método primario.**

___ No tiene un programa establecido *(esto incluye pañales, pampers, etc.)*
___ Catéter uretral implantado
___ Catéter implantado luego de aumento o derivación urinaria continente
___ Sin catéter con colector externo, sin esfinterotomía
___ Sin catéter con colector externo y esfinterotomía
___ Sin catéter con colector externo, esfinterotomía se desconoce
___ Sin catéter sin colector externo (incluye estimulación/presión)
___ Cateterización intermitente solamente
___ Cateterización intermitente con colector externo
___ Cateterización intermitente después de aumento o derivación urinaria continente
___ Cateterización intermitente, colector externo, aumento, o derivación urinaria continente se desconocen
___ Conducto intestinal
___ Cistostomía suprapúbica
___ Actividad normal de la vejiga (orinar sin estimulación/presión)
___ Otro, favor de especificar ______________________________
___ Se desconoce

209. En __________, nuestros archivos indican que su estado civil era: ______________________.

Desde entonces, ¿ha cambiado su estado civil?

*(por favor indique ningún cambio/o cambios a continuación):*

___ Ningún cambio
___ Divorcio
___ Matrimonio
___ Viudez
___ Divorcio + Matrimonio *(en cualquier orden)*
___ Viudez + Matrimonio *(en cualquier orden)*
___ Divorcio, Matrimonio + Viudez *(en cualquier orden: DMV, MDV, VMD)*
___ Otro, favor de especificar ______________________________
___ Se desconoce

210. ¿Es usted veterano de las Fuerzas Armadas de los Estados Unidos?  
No___ (continúe con la #214)  Yes____

Si respondió que sí, **desde que se lesionó,** ¿ha utilizado alguno de los siguientes servicios del Sistema de Salud de la Administración de Veteranos *(VA Healthcare System)*? *(marque todos los que se apliquen).*

___ Ninguno
___ Farmacia
___ Aparatos prostéticos/ortóticos *(incluyendo silla de ruedas y equipo)*
___ Centro con Servicios para Lesiones de la Espina Dorsal *[SCI Center]* *(Hospital del VA con un centro para lesiones de la espina dorsal)*
___ Centro sin Servicios para Lesiones de la Espina Dorsal *(Hospital del VA sin un centro para lesiones de la espina dorsal)*
___ Clínica para Pacientes Externos con Lesiones de la Espina Dorsal
___ No se aplica, no es veterano
___ Se desconoce
214. Por favor coloque un #1 junto al patrocinador (seguro) que contribuye la mayor proporción de apoyo económico para sus gastos médicos durante el período de tiempo especificado en la página 1. Coloque un #2 junto a su patrocinador secundario, un #3 junto al tercer patrocinador, etc.

- Seguro particular
- Departamento de Rehabilitación Vocacional (DVR, por sus siglas en inglés)
- Medicaid  o  Medicaid HMO/PPO
- Compensación de Trabajadores
- Medicare  o  Medicare HMO/PPO
- Medical a través del Condado
- Pago de su bolsillo/Fondos personales
- Administración de Veteranos (VA)
- Servicio de Salud Pública (Bureau of Indian Affairs o Departamento de Asuntos Indios)
- Servicio para Niños Lisiados
- No paga (indigente, no tiene patrocinadores)
- Otro seguro, no clasificado (incluye a Champus)
- Otros fondos privados - (eventos para recaudar fondos)
- Planes de Salud Prepagados (incluye HMO’s, PPO’s, Kaiser, etc.)
- Otro, no clasificado (fondos para la atención del paciente, Homebound, programa de asistencia a víctimas, etc.)
- Se desconoce

216. ¿Ha designado su patrocinador económico principal (seguro) un administrador de caso médico para que maneje su caso?

- No  
- Sí  
- No es aplicable  
- Se desconoce

217. Rhospitalizaciones – En el período de tiempo especificado en la página 1, ¿ha sido usted ingresado en el hospital por más de un día?

- No (continúe con la #220)  
- Sí

Si respondió que sí, ¿cuántas veces fue hospitalizado en ese período de tiempo?________

Por favor suministre la siguiente información para cada hospitalización en los espacios más abajo. Anote los datos para otras hospitalizaciones adicionales al dorso de esta hoja.

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<th>Hospitalización #1</th>
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<td>Razón Ingreso</td>
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220. En el período de tiempo especificado en la página 1, ¿ha pasado algunos días en una casa de convalecencia, establecimiento para atención médica prolongada, o establecimiento de atención médica a largo plazo?  
No____  Sí____
Sí respondió que sí, suministre lo siguiente:
Nombre del establecimiento: ________________________________________________________
Ciudad y Estado: ________________________________________________________________
Fechas de ingreso/alta: ____________________________________________________________________

El período de tiempo especificado en la página 1, ¿ha tenido alguna de las siguientes condiciones?:

221A. Embolismo pulmonar (coágulo de sangre)____________________________________
¿Cómo se le diagnosticó el embolismo? (qué tipo de radiografía o examen)_____________

221B. Tromboflebitis, trombosis en vena profunda (coágulo de sangre en la pierna solamente )  
No____  Sí____
¿Cómo se le diagnosticó la trombosis? (qué tipo de radiografía o examen)_____________
¿Le han hecho una operación para colocarle un filtro para coágulos de sangre en el corazón?  No____  Sí____

221C. Neumonía  No____  Sí____

221D. Presencia de cálculos (piedras que se ven en radiografías) en el riñón o el uréter o ambos (marque)  
Ningún cálculo __________________________________ Riñón y/o uréter derecho

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<th>No____</th>
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<tr>
<td>Riñón y/o uréter izquierdo</td>
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<tr>
<td>Sí, cálculo(s), se desconoce el lugar</td>
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<tr>
<td>Se desconoce________</td>
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221A-D: Fecha y lugar donde se hizo la radiografía o examen:________________________

Durante el mismo período de tiempo, se le hizo alguna de las siguientes operaciones?

222A. Cierre de una úlcera por decúbito (escara o llaga de presión)  
No____  Sí____
Sí tengo/tuve una úlcera, pero no se hizo ningún procedimiento para cerrarla______

222B. Extirpación de cálculos (piedras)  No____  Sí____
(marque): Extirpado quirúrgicamente ______  Lo pasó espontáneamente _______
Sí tengo/tuve cálculos en el riñón/uréter, pero no se hizo ninguna operación _______

222C. Resección del cuello de la vejiga o resección transuretral de la próstata (TUR)  
(marque):  No____  Sí____
Se desconoce________

222D. Esfinterotomía externa u otros procedimientos para abrir un esfínter  
(marque):  No____  Sí____
Se desconoce________

222A/D: Fecha y lugar donde se hizo la operación:__________________________

223. Fecha de hoy: ____________________________________________
FORM II INTERVIEW – YEARS 1, 5, 10, 15, 20, 25 AND 30
Developed by the Rocky Mountain Regional SCI System and
Translated into Spanish by the Regional SCI Care System of Southern California

228. Usando la siguiente escala, por favor responda a las cinco preguntas que siguen.
1=Estoy muy en desacuerdo
2=Estoy en desacuerdo
3=Estoy algo en desacuerdo
4=No estoy ni de acuerdo ni en desacuerdo
5=Estoy algo de acuerdo
6=Estoy de acuerdo
7=Estoy muy de acuerdo
9=Se desconoce

228_1. En la mayoría de las cosas, mi vida es casi lo que considero ideal._______
228_2. Las condiciones de mi vida son excelentes._______
228_3. Estoy satisfecho con mi vida._______
228_4. Hasta ahora he logrado las cosas importantes que quiero en la vida._______
228_5. So pudiera vivir mi vida de nuevo, no cambiaría casi nada._______

238. Usando una escala de 0-10, en la que el 10 significa un dolor tan grande que no puede soportarlo, y el 0 significa no tener dolor alguno, ¿cuál ha sido su nivel acostumbrado de dolor durante las últimas 4 semanas?
Si tiene más de un lugar donde siente dolor, evalúe el lugar donde el dolor es peor --(marque uno con un círculo):

Ningún Dolor ---0 1 2 3 4 5 6 7 8 9 10--- Dolor Muy Fuerte

239. Durante las últimas 4 semanas, ¿cuánto ha interferido el dolor con su trabajo normal, incluyendo tanto el trabajo fuera de la casa y los quehaceres de la casa y/o las actividades que acostumbra? (marque uno)

Nada en lo absoluto
Un poco
Regular
Mucho
Extremadamente
No sé
Prefiero no responder
No se aplica – no he tenido dolor durante las últimas 4 semanas
Se desconoce

225. En general, ¿cómo diría usted que es su salud?: (marque una respuesta con un círculo)

Excelente  Muy buena  Buena  Regular  Mala  No sé  No deseo contestar
226. En comparación con la fecha en que se le dio de alta de ____________, (______________) ¿cómo describiría su salud en general en este momento?

(marque una respuesta)
_____ Mucho mejor ahora que hace un año
_____ Algo mejor ahora que hace un año
_____ Aproximadamente igual ahora que hace un año
_____ Algo peor ahora que hace un año
_____ Mucho peor ahora que hace un año
_____ No sé
_____ Prefiero no responder a esta pregunta
_____ Se desconoce

230. Por favor use las siguientes escalas para evaluar todas las preguntas de dos partes bajo el #230.

¿Con qué frecuencia ocurre el problema? ¿Qué tan grande es el problema?

0=Nunca 0=No es problema
1=Menos de una vez al mes 1=Problema pequeño
2=Todos los meses 2=Problema grande
3=Todas las semanas 8=No se aplica, vivo solo
4=Todos los días 9=Se desconoce
8=No se aplica, vivo solo
9=Se desconoce

A usted se le dio de alta de ________________ con fecha: ______

230_1. Desde que se le dio de alta, ¿con qué frecuencia el acceso al transporte ha sido un problema para usted? ______

Cuando ocurre este problema, ¿ha sido un problema grande o pequeño? ______

230_2. Desde que se le dio de alta, ¿con qué frecuencia el entorno natural – la temperatura, el terreno o el clima – le ha causado dificultad para hacer lo que quería o necesitaba hacer? ______

Cuando ocurre este problema, ¿ha sido un problema grande o pequeño? ______

230_3. Desde que se le dio de alta, ¿con qué frecuencia otros aspectos de lo que lo rodea, la iluminación, el ruido, las multitudes, etc. – le han causado dificultad para hacer lo que quería o necesitaba hacer?_____

Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?_____

230_4. Desde que se le dio de alta, ¿con qué frecuencia la información que usted quería o necesitaba no ha estado disponible en un formato que usted pudiera usar o entender?_____

Cuando ocurre este problema ¿ha sido un problema grande o pequeño?_____

230_5. Desde que se le dio de alta, ¿con qué frecuencia la disponibilidad de servicios de salud y atención médica ha constituido un problema para usted? ______

Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?_____

NSCISC: 08/2004 B39
230_6. Desde que se le dio de alta, ¿con qué frecuencia ha necesitado la ayuda de alguien en su casa y no ha podido obtenerla fácilmente? ______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______

230_7. Desde que se le dio de alta, ¿con qué frecuencia ha necesitado la ayuda de alguien en la escuela o en el trabajo y no ha podido obtenerla fácilmente? ______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______

230_8. Desde que se le dio de alta, ¿con qué frecuencia las actitudes de otras personas hacia usted han constituido un problema en casa? ______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______

230_9. Desde que se le dio de alta, ¿con qué frecuencia las actitudes de otras personas hacia usted han constituido un problema en la escuela o en el trabajo? ______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______

230_10. Desde que se le dio de alta, ¿con qué frecuencia ha experimentado prejuicios o discriminación contra usted? ______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______

230_11. Desde que se le dio de alta, ¿con qué frecuencia las políticas y los reglamentos de establecimientos comerciales y organizaciones le han causado problemas a usted?_______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______

230_12. Desde que se le dio de alta, ¿con qué frecuencia los programas y las políticas del gobierno le han causado dificultad para hacer lo que usted quería o necesitaba hacer?_______
Cuando ocurre este problema, ¿ha sido un problema grande o pequeño?______
231. Por favor use la siguiente escala para responder a las próximas nueve preguntas.
0=Nada en absoluto
1=Varios días
2=Más de la mitad de los días
3=Casi todos los días
9=Se desconoce

231_1. Durante las últimas dos semanas, ¿con qué frecuencia ha notado que tiene poco interés o que le da poco placer hacer las cosas?_______

231_2. Durante las últimas dos semanas, ¿con qué frecuencia se ha sentido triste, deprimido, o sin esperanzas?_______

231_3. Durante las últimas dos semanas, ¿con qué frecuencia ha tenido dificultades para dormirse o permanecer dormido, o ha dormido demasiado? ______

231_4. Durante las últimas dos semanas, ¿con qué frecuencia se ha sentido cansado o con pocas energías?_______

231_5. Durante las últimas dos semanas, ¿con qué frecuencia ha notado que tiene poco apetito, o que come en exceso?_______

231_6. Durante las últimas dos semanas, ¿con qué frecuencia se ha sentido mal respecto a sí mismo – o que usted es un fracaso, o que se ha defraudado a sí mismo o ha defraudado a su familia? ______

231_7. Durante las últimas dos semanas, ¿con qué frecuencia ha tenido dificultad para concentrarse en cosas como leer el periódico o mirar la televisión? ______

231_8. Durante las últimas dos semanas, ¿con qué frecuencia ha notado que se movía o hablaba tan despacio, o lo opuesto, que estaba tan inquieto o agitado y moviéndose mucho más que de costumbre, que otras personas podrían haberlo notado? ______

231_9. Durante las últimas dos semanas, ¿con qué frecuencia ha tenido pensamientos de que mejor estaría muerto, o ideas de lastimarse a sí mismo de alguna manera? ______

231_10. Si ha tenido algunos de los problemas mencionados en las preguntas #231_1 – #231_9, ¿qué tan difícil se le ha hecho realizar su trabajo, atender las cosas en su casa, o relacionarse con otras personas? (marque uno)
_____ Nada difícil
_____ Algo difícil
_____ Muy difícil
_____ Extremadamente difícil
_____ No se aplica – no he tenido ninguno de los problemas mencionados en las preguntas 1 – 9
_____ Se desconoce
229_1A&B  ¿Cuántas horas en un día típico de 24 horas tiene usted alguien que le dé asistencia física con las actividades de atención personal, tales como comer, bañarse, vestirse, arreglarse, y la movilidad?
   _____ No tengo ninguna ayuda, ni remunerada ni no remunerada
   Recibo ______ horas de ayuda remunerada (indique el número de horas)
   Recibo ______ horas de ayuda no remunerada (familiares, otros – indique el número de horas)

229_2. ¿Cuánto tiempo está alguien con usted en su casa para ayudarle con actividades en las que hay que recordar cosas, tomar decisiones, o usar buen criterio? (marque una)
   _____ Alguien siempre está conmigo para observar o supervisar
   _____ Alguien siempre está cerca, pero solamente me viene a ver de vez en cuando
   _____ A veces me quedo solo por una o dos horas
   _____ A veces me quedo solo la mayor parte del día
   _____ Me he quedado solo todo el día y toda la noche, pero alguien me viene a ver de vez en cuando
   _____ Me quedo solo sin que nadie me venga a ver
   _____ Se desconoce

229_3. ¿Cuánto tiempo está alguien con usted para ayudarle con actividades que requieren recordar cosas, tomar decisiones, o tener buen criterio cuando usted sale fuera de su casa? (marque una)
   _____ Estoy limitado y no puedo salir, aún con otra persona
   _____ Siempre hay alguien conmigo para ayudarme a recordar cosas, tomar decisiones, o usar buen criterio cuando voy a cualquier parte
   _____ Puedo ir a lugares cuando los conozco bien
   _____ Puedo ir a cualquier parte sin ayuda
   _____ Se desconoce

229_4. Durante un día típico, ¿cuántas horas pasa usted levantado? # de horas _______

229_5. Durante una semana típica, ¿cuántos días sale de su casa y va a alguna parte?
   # de días _______

229_6. Desde que fue dado de alta, ¿cuántas noches ha pasado fuera de su casa (sin contar las hospitalizaciones)?
   _____ ninguna _____ 1-2 noches _____ 3-4 noches _____ 5 noches o más ______

229_7. ¿Cuántas horas por semana pasa usted trabajando en un empleo por el cual le pagan?
   # de horas por semana _______

229_8. ¿Cuántas horas por semana pasa usted en la escuela estudiando para obtener un título, o en un programa acreditado de capacitación técnica? (incluyendo horas de clases y estudiando)
   # de horas por semana _______

229_9. ¿Cuántas horas por semana pasa usted en las tareas del hogar, incluyendo atender a sus hijos, hacer los quehaceres de la casa, y la preparación de alimentos?
   # de horas _______

229_10. ¿Cuántas horas por semana pasa usted en actividades de mantenimiento de la casa, tales como jardinería, reparaciones, o hacerle mejoras a la casa?
    # de horas _______
229_11. ¿Cuántas horas por semana pasa usted en actividades recreativas, tales como participando en deportes, haciendo ejercicios, jugando a las cartas, o yendo al cine? 
# de horas por semana _______

229_12. ¿Con cuántas personas vive? # de personas _______

229_13. De las personas con quienes vive, ¿es una de ellas su esposo(a) o pareja?
_____ No, no vivo con un cónyuge, pareja, compañero(a) de vivienda o ayudante que no tiene parentesco conmigo
_____ Sí, vivo con mi esposo(a) o pareja
_____ Vivo con un compañero(a) de vivienda y/o ayudante que no tiene parentesco conmigo
_____ No se aplica, vivo solo
_____ Se desconoce

229_14. De las personas con quienes vive (sin contar a su esposo(a), cuántos (otros) son familiares suyos?
_____ Ninguno es familiar mío
# de personas que viven con usted y que son familiares suyos _______
_____ No se aplica, vivo solo
_____ Se desconoce

229_15. ¿A cuántos asociados de negocios o colegas de alguna organización visita, llama por teléfono, les escribe o se comunica por correo electrónico al menos una vez al mes?
_____ Ninguno anote el # de personas _________ _____Se desconoce

229_16. ¿A cuántos amigos (personas no de la familia con quienes tiene contacto fuera de entornos de negocios u organizaciones) visita, llama por teléfono, les escribe o se comunica por correo electrónico al menos una vez al mes?
_____ Ninguno anote el # de amigos _________ _____Se desconoce

229_17. ¿Con cuántos extraños ha iniciado usted una conversación en el último mes (por ejemplo, para pedir información o para ordenar algo)?
_____ Ninguno anote el # de extraños _________ _____Se desconoce

229_18. Aproximadamente ¿de cuánto fueron los ingresos combinados anuales, en el último año, de todos los miembros de la familia que residen en su casa?
_____ Less than $10,000
_____ $10,000 a $14,999
_____ $15,000 a $19,999
_____ $20,000 a $24,999
_____ $25,000 a $34,999
_____ $35,000 a $49,999
_____ $50,000 a $74,999
_____ $75,000 o más
_____ Se desconoce

Considere todas las fuentes de ingresos, incluyendo sueldos y salarios, prestaciones por incapacidad, pensiones e ingresos por jubilación, pagos por orden judicial, inversiones y fondos de fideicomiso, pagos de manutención de hijos y pensión alimenticia, contribuciones de familiares, y cualquier otra fuente. Su respuesta debe incluir los ingresos de la unidad familiar completa que vive bajo el mismo techo.
229_19. Aproximadamente, ¿cuánto pagó el año pasado en gastos médicos? 
Considere cualquier cantidad que haya pagado usted o los familiares que viven en su casa y que no 
haya sido reembolsada por el seguro u otras prestaciones.

____ Menos de $1,000
____ $1,000 a $2,499
____ $2,500 a $4,999
____ $5,000 a $9,999
____ $10,000 o más
____ Se desconoce

250. ¿Puede usted caminar (con o sin un dispositivo para facilitar la movilidad) una distancia de
A. 150 pies en su hogar? ............... ___ No ___ Sí
B. una cuadra fuera de la casa? ...... ___ No ___ Sí
C. subir un tramo de escaleras? ..... ___ No ___ Sí
Si la respuesta a las partes A, B y C es que “No”, continúe con la pregunta #252

251. ¿Qué dispositivo(s) para facilitar la movilidad usa con más frecuencia? (marque todos los que se apliquen)

____ Ninguno ___ Bastón recto ___ Bastón de cuatro apoyos (quad cane) ___ Andador ___ Muletas ___ Soporte ortotópico para tobillo-pie
____ Soporte ortotópico para rodilla-tobillo-pie ___ Otro, especifique __________________________

252. ¿Usa una silla de ruedas o “escúter” (en inglés, scooter) por más de 40 horas por semana?
___ No (Si respondió que “No”, continúe con la pregunta #260) ___ Sí

253. ¿Qué tipo de silla de ruedas o “escúter” usa con más frecuencia? (marque uno)

___ Silla de ruedas manual ___ Silla de ruedas motorizada ___ Silla de ruedas manual con asistencia de propulsión ___ Escúter
___ Otro (por ejemplo, carrito de golf), especifique __________________________

254A. ¿Quién es el fabricante de la silla de ruedas (o “escúter”) que usa con más frecuencia? (marque uno)

___ Invacare ___ Sunrise ___ Pride Health Care
___ Permobil/Colours ___ Everest & Jennings ___ Tisport
___ Frank Mobility ___ Otro (especifique) __________________________

B. ¿Cuál es el modelo de silla de ruedas (o “escúter”) que usa con más frecuencia?
__________________________
255. ¿Qué fuente de fondos pagó la mayor cantidad por la silla de ruedas que usa con más frecuencia? (marque una)

- ___ Seguro privado
- ___ Departamento de Rehabilitación Vocacional (en inglés, DVR)
- ___ Medicaid o ___ Medicaid HMO/PPO
- ___ Compensación del Trabajador
- ___ Medicare o ___ Medicare HMO/PPO
- ___ MediCal del condado
- ___ Pagó de su bolsillo/Fondos personales
- ___ Administración de Veteranos (VA)
- ___ Servicio Público de Salud (Oficina de Asuntos Indígenas)
- ___ Servicio para Niños Lisiados
- ___ No paga (indigente, sin patrocinadores)
- ___ Otro seguro, no clasificado: (incluye Champus)
- ___ Otros fondos privados (eventos de recaudación de fondos)
- ___ Planes pre-pagados de atención para la salud (incluye HMO’s, PPO’s, Kaiser, etc.)
- ___ Otros, no clasificados (fondos para la atención de pacientes, ayuda a víctimas, etc.)
- ___ Se desconoce

256. ¿La silla de ruedas (o “escúter”) que usa con más frecuencia tiene algunas de las siguientes características? (marque todas las que se apliquen)

- ___ Ninguna de las características mencionadas abajo (continúe con la pregunta #257)
- ___ Asiento inclinable para el alivio de la presión
- ___ Reclinable
- ___ Mecanismo de asistencia para pararse
- ___ Elevación del asiento
- ___ Elevación de las piernas

- ___ Otra, especifique______________________________________________________________

257. ¿Cuántas veces en los últimos 6 meses se le han hecho reparaciones a la silla de ruedas (o “escúter”) que usa con más frecuencia?

- ___ Número de veces que se ha reparado (Si respondió “cero”, continúe con la pregunta #259)
- ___ Se hicieron reparaciones, pero el número de reparaciones se desconoce

258. En la siguiente lista, marque todos los artículos que se apliquen en cuanto a averías (en los últimos 6 meses) de la silla de ruedas (o “escúter”) que usa con más frecuencia. (marque todos los que se apliquen)

- ___ Se hicieron reparaciones, pero no ocurrió ninguna de las consecuencias mencionadas
- ___ Me he quedado varado (ya sea en casa o fuera de casa) por una avería de la silla de ruedas (o “escúter”)
- ___ Me he lastimado por una avería de la silla de ruedas (o “escúter”)
- ___ He faltado al trabajo o a la escuela por una avería de la silla de ruedas (o “escúter”)
- ___ He faltado a citas médicas por una avería de la silla de ruedas (o “escúter”)
259. Además de la silla de ruedas (o “escúter”) que usa con más frecuencia:
   ¿cuántas sillas de ruedas manuales usa? ................................................... __ __
   ¿cuántas sillas de ruedas motorizadas usa? ........................................ __ __
   ¿cuántas sillas de ruedas manuales con asistencia de propulsión usa? .... __ __
   ¿cuántas otras sillas usa? ........................................................................ __ __
   ¿cuántas otras “escúters” usa? .............................................................. __ __

260. ¿Usa computadora? (marque una)
   ___ No (continúe con la pregunta #265)
   ___ Sí, uso computadora solamente en casa   ___ Sí, uso computadora solamente fuera de la casa
   ___ Sí, uso computadora en casa y fuera de la casa

261. ¿Cuáles de los siguientes tipos de dispositivo(s) tiene usted para ayudarle a usar una computadora? (marque todos los que se apliquen)
   ___ Ninguno             ___ Activación por medio de la voz (hardware y software) para darle órdenes
   ___ Reconocimiento de la voz (hardware y software) para escribir a máquina
   ___ Boquigrafo       ___ Apuntador para la cabeza       ___ Pedales para los pies
   ___ Control manipulado con los ojos
   ___ Soporte/tablilla en la mano para escribir a máquina ___ Teclado modificado o en pantalla
   ___ Ratón (“mouse”) modificado
   ___ Otro tipo de software especial (por ejemplo, lectores de pantalla), especifique ____________
   ___ Otros, especifique __________________

262. ¿Con qué frecuencia entra al Internet o al correo electrónico (e-mail) (marque uno)
   ___ Nunca usa el Internet y nunca usa el correo electrónico (e-mail) (continúe con la pregunta #265)
   ___ Diariamente (5 a 7 días cada semana del mes)
   ___ Semanalmente (menos de 5 días a la semana y más de 3 días al mes)
   ___ Mensualmente (3 días al mes o menos)

263. ¿Dónde usa el Internet o el correo electrónico (e-mail)? (marque todos los que se apliquen)
   ___ En casa       ___ En el trabajo/la escuela
   ___ Otros sitios [por ejemplo, la biblioteca, un café, un sitio inalámbrico (sitio móvil)]
      Especifique ____________________________

NSCISC: 08/2004
264. ¿Con qué frecuencia usa cada una de las siguientes categorías en el Internet?: (marque una opción para cada categoría)

A. Información vocacional/sobre empleos ___ Nunca ___ A veces ___ Frecuentemente
B. Información sobre discapacidad/salud.. ___ Nunca ___ A veces ___ Frecuentemente
C. Correo electrónico (e-mail).................. ___ Nunca ___ A veces ___ Frecuentemente
D. Salas de charla (“chat rooms”).............. ___ Nunca ___ A veces ___ Frecuentemente
E. Juegos.................................................... ___ Nunca ___ A veces ___ Frecuentemente
F. Compras ................................................ ___ Nunca ___ A veces ___ Frecuentemente
G. Otros...................................................... ___ Nunca ___ A veces ___ Frecuentemente

265. ¿Qué tipo de vehículo modificado tiene usted o su familia? (marque todos los que se apliquen)

___ No tengo un vehículo modificado (continúe con la pregunta #267)

___ Auto ___ Van ___ Otro, especifique _________________________

266. ¿Maneja usted el vehículo modificado? (marque uno)

___ No ___ Sí, lo manejo en mi silla de ruedas ___ Sí, pero no lo manejo en una silla de ruedas

267. ¿Tiene teléfono celular?........... ___ No ___ Sí

232. Desde que se le dio de alta de la rehabilitación inicial, ¿ha usado drogas ilegales o medicinas por receta por razones no médicas?

Sí _____ (vaya a la pregunta #232A)  NO _____ (vaya a la pregunta #233).

“Razones no médicas” significa usar medicinas por su cuenta, sin tener su propia receta de un doctor, o usar medicinas en cantidades mayores, o más frecuentemente que lo recetado, o usar medicinas para “alocarse” o drogarse. Estamos interesados en el consumo abusivo intencional de las drogas (por receta o de cualquier otro tipo).

232A. Si respondió que sí, por favor marque cada tipo de droga que ha usado por “razones no médicas”.

___ Crack/cocaína
___ Mota/marijuana
___ LSD/psicodélicos
___ Heroína/opiatos
___ Anfetaminas/estimulantes
___ Medicinas que se le han recetado a usted
___ Medicinas que se le han recetado a otra persona
___ Sí, pero desconozco el tipo de droga / o no deseo revelar el tipo de droga
___ Se desconoce
Consumo de Alcohol

233. ¿Actualmente bebe, o alguna vez ha bebido CUALQUIER tipo de bebida alcohólica (como cerveza, vino, refresco a base de vino o "wine cooler" o licor fuerte)?
   _____ No, NUNCA he bebido NADA de alcohol (Vaya a la pregunta #227)
   _____ Sí, actualmente bebo, o he bebido en el pasado

237. ¿Ha bebido alguna cantidad de alcohol durante el último año? Si respondió que NO, vaya a la pregunta #234. Si respondió que SÍ, conteste las siguientes preguntas:
   0=No
   1=Sí
   8=No se aplica, nunca he bebido alcohol
   9=Se desconoce

237_1. Durante el último año: ¿Alguna vez ha pensado que debería beber menos? _______

237_2. Durante el último año: ¿Otras personas lo han criticado por beber? _______

237_3. Durante el último año: ¿Alguna vez se ha sentido mal o culpable por beber? _______

237_4. Durante el último año: ¿Alguna vez se ha tomado un trago al levantarse en la mañana para calmarse los nervios o para quitarse la cruda? _______

234. Durante el último mes, ¿cuántos días por semana bebió alguna bebida alcohólica (como cerveza, vino, "wine coolers," o bebidas alcohólicas fuertes), como promedio? (marque uno)
   _____ Ninguno
   Como promedio, bebí (anote el # de días)_______ día/días por semana (1-7)
   _____ Bebo alcohol, pero no sé el número de días en que bebí
   _____ No se aplica, nunca he bebido alcohol
   _____ Se desconoce

235. Durante el último mes, en los días que bebió, ¿aproximadamente cuántos tragos se tomó, como promedio? (marque uno)
   _____ Ninguno
   Como promedio me tomé (anote el # de tragos)_______ trago/tragos por día (1-87)
   _____ Bebo alcohol algunos días, pero no sé el número de tragos
   _____ No se aplica, nunca he bebido alcohol
   _____ Se desconoce

236. Considerando todos los tipos de bebidas alcohólicas, ¿cuántas veces durante el último mes se tomó cinco (5) o más tragos en una misma ocasión? (marque uno)
   _____ Ninguna
   Me tomé más de 5 tragos en (anote el #)_______ ocasiones. (1-31)
   _____ Bebo alcohol, pero no sé el número de ocasiones en que me tomé cinco o más tragos
   _____ No se aplica, nunca he bebido alcohol
   _____ Se desconoce
227. Evaluación De Independencia Funcional

Por favor evalúese a sí mismo en cuanto a las siguientes actividades de la vida diaria, usando la siguiente escala para cada selección:

7 Independencia total - sin usar ningún equipo especial
6 Independencia modificada – uso de cualquier equipo especial
5 Supervisión o preparación realizada por otra persona
4 Mínimo de asistencia de contacto – usted realiza el 75% o más de la tarea
3 Asistencia moderada – usted realiza entre el 50% y el 74% de la tarea
2 Máximo de asistencia – usted realiza del 25% al 49% de la tarea.
1 Asistencia total – usted realiza menos del 25% de la tarea

Comer _____
Arreglarse _____
Bañarse _____
Vestirse – parte superior del cuerpo _____
Vestirse – parte inferior del cuerpo _____
Arreglo personal (higiene personal, ajuste de las ropas antes y después de la tarea) _____
Control de la vejiga _____  # de accidentes de la vejiga en los últimos 7 días _____
Control de la evacuación intestinal __  # de accidentes intestinales en los últimos 7 días __
Traslado, cama, asiento, o silla de ruedas _____
Traslado, excusado _____
Traslado, tina o regadera _____
Locomoción-caminando/silla de ruedas: (marque uno)
150 pies o más ____  50-149 pies ____  menos de 50 pies ____  no ocurre
Método de locomoción (marque el método primario)  Caminar ____  Silla de ruedas ____
Escaleras: (a) ¿Cuánta ayuda necesita para subir y bajar de 12 a 14 escalones dentro o fuera de la casa o edificio?
____ Ninguna
____ Necesito un bastón, muleta, pasamanos, u otros aparatos
____ Necesito que alguien me cuide
____ Necesito que alguien me ayude un poco físicamente
____ Necesito que alguien me ayude mucho físicamente
____ Aún con alguien que me ayude mucho, no puedo andar más de 6 escalones
____ No puedo subir o bajar escaleras; necesito que me suban y me bajen
¿Cuántas horas de terapia o asesoramiento ha recibido desde __________ hasta __________?

<table>
<thead>
<tr>
<th>TERAPIA</th>
<th>ASESORAMIENTO</th>
</tr>
</thead>
<tbody>
<tr>
<td>Terapia Física u Ocupacional</td>
<td>Asesoramiento Psicológico o Vocacional</td>
</tr>
</tbody>
</table>

La Terapia Física u Ocupacional, o el Asesoramiento Psicológico o Vocacional, ¿fue ordenado(a) por un médico, desde que se le dio de alta de ____________?

<table>
<thead>
<tr>
<th>Terapia ordenada por un médico</th>
<th>Asesoramiento ordenado por un médico</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Sí</td>
<td>Sí</td>
</tr>
<tr>
<td>Se desconoce</td>
<td>Se desconoce</td>
</tr>
</tbody>
</table>

¿Cuántas horas de Terapia Física/Terapia Ocupacional y/o Asesoramiento Psicológico/Vocacional ha recibido usted desde que le dieron de alta de ____________?

<table>
<thead>
<tr>
<th># de horas de terapia</th>
<th># de horas de asesoramiento</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ninguna</td>
<td>Ninguna</td>
</tr>
<tr>
<td>1 a 5 horas</td>
<td>1 a 5 horas</td>
</tr>
<tr>
<td>6 a 20 horas</td>
<td>6 a 20 horas</td>
</tr>
<tr>
<td>21 a 40 horas</td>
<td>21 a 40 horas</td>
</tr>
<tr>
<td>41 a 60 horas</td>
<td>41 a 60 horas</td>
</tr>
<tr>
<td>61 a 80 horas</td>
<td>61 a 80 horas</td>
</tr>
<tr>
<td>81 a 100 horas</td>
<td>81 a 100 horas</td>
</tr>
<tr>
<td>Más de 100 horas</td>
<td>Más de 100 horas</td>
</tr>
<tr>
<td>Terapia, # de horas se desconoce</td>
<td>Asesoramiento, # de horas se desconoce</td>
</tr>
<tr>
<td>Se desconoce</td>
<td>Se desconoce</td>
</tr>
</tbody>
</table>

¿Dónde tuvo lugar la terapia? (marque todos los que se apliquen)

<table>
<thead>
<tr>
<th>(Sistema Modelo)</th>
<th>(Sistema Modelo)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cualquier otro hospital o establecimiento</td>
<td>Cualquier otro hospital o establecimiento</td>
</tr>
<tr>
<td>No se aplica – no hubo terapia</td>
<td>No se aplica – no hubo asesoramiento</td>
</tr>
</tbody>
</table>
242. Desde ______ hasta ________ ¿usó usted alguna ventilación mecánica? *(marque una)*
   ____ No
   ____ Sí, usé ventilación limitada, a corto plazo, debido a complicaciones pulmonares desde __________
   ____ hasta____________.
   ____ Sí, dependo de un ventilador, o se me quitó gradualmente el ventilador durante ese tiempo
   ____ Sí, uso un estimulador del nervio frénico
   ____ Sí, usé ventilación mecánica, pero no sé por cuánto tiempo ni el tipo de ventilación que utilicé
   ____ Se desconoce

243. Si tuvo una operación de la espina dorsal después de su lesión, ¿se infectó el sitio de la operación
después que se le dio de alta de ______________? *(marque una)*
   ____ No
   ____ Sí
   ____ No se aplica *(no hubo operación de la espina dorsal)*
   ____ Se desconoce
Si actualmente está teniendo cualquier clase de dificultades o problemas, si tiene preguntas, o si quisiera hacer alguna sugerencia con respecto a su lesión de la espina dorsal, por favor anótelo más abajo o en la parte de atrás de esta hoja. Haremos todo lo posible por darle una respuesta.

Por favor dénmos su dirección y número de teléfono actuales para tener sus datos al día en Craig. Además, por favor dénmos el nombre y número de teléfono de alguien (familiar o amigo) que siempre sepa dónde encontrarlo, y que esté dispuesto a ayudarnos a ponernos en contacto con usted.

Dirección: __________________________________________________________

Número de teléfono: _________________________________________________

Nombre de familiar/amigo: __________________________________________

Dirección: _________________________________________________________

Número de teléfono: _________________________________________________

También incluimos un formulario para que nos notifique de cualquier cambio de dirección o teléfono. Si ocurre algún cambio, llene el formulario y envíenoslo en el sobre franqueado pequeño que se incluye en su paquete, o llámenos al teléfono _____________ y deje un mensaje.

Ha completado su contacto del primer año del estudio. Gracias por su tiempo y esfuerzo, y nuevamente le agradecemos su participación en el estudio.
**APPENDIX C**

**1990 OCCUPATIONAL CLASSIFICATION SYSTEM (FOR VARIABLES 124 AND 207)**

Numbers in parentheses following the occupation categories are the 1980 standard occupational classification code equivalents. The abbreviation “pt” means “part” & “n.e.c.” means “not elsewhere classified.”

<table>
<thead>
<tr>
<th>01 EXECUTIVE, ADMINISTRATIVE, &amp; MANAGERIAL OCCUPATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>003 Legislators (111)</td>
</tr>
<tr>
<td>004 Chief executives &amp; general administrators, public administration (112)</td>
</tr>
<tr>
<td>005 Administrators &amp; officials, public administration (1132-1139)</td>
</tr>
<tr>
<td>006 Administrators, protective services (1131)</td>
</tr>
<tr>
<td>007 Financial managers (122)</td>
</tr>
<tr>
<td>008 Personnel &amp; labor relations managers (123)</td>
</tr>
<tr>
<td>009 Purchasing managers (124)</td>
</tr>
<tr>
<td>013 Managers, marketing, advertising, &amp; public relations (125)</td>
</tr>
<tr>
<td>014 Administrators, education &amp; related fields (128)</td>
</tr>
<tr>
<td>015 Managers, medicine &amp; health (131)</td>
</tr>
<tr>
<td>016 Postmasters &amp; mail superintendents (1344)</td>
</tr>
<tr>
<td>017 Managers, food serving &amp; lodging establishments (1351)</td>
</tr>
<tr>
<td>018 Managers, properties &amp; real estate (1353)</td>
</tr>
<tr>
<td>019 Funeral directors (pt 1359)</td>
</tr>
<tr>
<td>021 Managers, service organizations, n.e.c. (127, 1352, 1354, Pt 1359)</td>
</tr>
<tr>
<td>022 Managers &amp; administrators, n.e.c, (121, 126, 132-1343, 136-139)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Management Related Occupations</th>
</tr>
</thead>
<tbody>
<tr>
<td>023 Accountants &amp; auditors (1412)</td>
</tr>
<tr>
<td>024 Underwriters (1414)</td>
</tr>
<tr>
<td>025 Other financial officers (1415, 1419)</td>
</tr>
<tr>
<td>026 Management analysts (142)</td>
</tr>
<tr>
<td>027 Personnel, training, &amp; labor relations specialists (143)</td>
</tr>
<tr>
<td>028 Purchasing agents &amp; buyers, farm products (1443)</td>
</tr>
<tr>
<td>029 Buyers, wholesale &amp; retail trade except farm products (1442)</td>
</tr>
<tr>
<td>033 Purchasing agents &amp; buyers, n.e.c. (1449)</td>
</tr>
<tr>
<td>034 Business &amp; promotion agents (145)</td>
</tr>
<tr>
<td>035 Construction inspectors (1472)</td>
</tr>
<tr>
<td>036 Inspectors &amp; compliance officers, except construction (1473)</td>
</tr>
<tr>
<td>037 Management related occupations, n.e.c. (149)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>02 PROFESSIONAL SPECIALTY OCCUPATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engineers, Architects, &amp; Surveyors</td>
</tr>
<tr>
<td>043 Architects (161)</td>
</tr>
<tr>
<td>Engineers</td>
</tr>
<tr>
<td>044 Aerospace (1622)</td>
</tr>
<tr>
<td>045 Metallurgical &amp; materials (1623)</td>
</tr>
<tr>
<td>046 Mining (1624)</td>
</tr>
<tr>
<td>047 Petroleum (1625)</td>
</tr>
<tr>
<td>048 Chemical (1626)</td>
</tr>
<tr>
<td>049 Nuclear (1627)</td>
</tr>
<tr>
<td>053 Civil (1628)</td>
</tr>
<tr>
<td>054 Agricultural (1632)</td>
</tr>
<tr>
<td>055 Electrical &amp; electronic (1633, 1636)</td>
</tr>
<tr>
<td>056 Industrial (1634)</td>
</tr>
<tr>
<td>057 Mechanical (1635)</td>
</tr>
<tr>
<td>058 Marine &amp; naval architects (1637)</td>
</tr>
<tr>
<td>059 Engineers, n.e.c. (1639)</td>
</tr>
<tr>
<td>063 Surveyors &amp; mapping scientists (164)</td>
</tr>
<tr>
<td>Mathematical &amp; Computer Scientists</td>
</tr>
<tr>
<td>064 Computer systems analysts &amp; scientists (171)</td>
</tr>
<tr>
<td>065 Operations &amp; systems researchers &amp; analysts (172)</td>
</tr>
<tr>
<td>066 Actuaries (1732)</td>
</tr>
<tr>
<td>067 Statisticians (1733)</td>
</tr>
<tr>
<td>068 Mathematical scientists, n.e.c. (1739)</td>
</tr>
<tr>
<td>Natural Scientists</td>
</tr>
<tr>
<td>069 Physicists &amp; astronomers (1842, 1843)</td>
</tr>
<tr>
<td>073 Chemists, except biochemists (1845)</td>
</tr>
<tr>
<td>074 Atmospheric &amp; space scientists (1846)</td>
</tr>
<tr>
<td>075 Geologists &amp; geodesists (1847)</td>
</tr>
<tr>
<td>076 Physical scientists, n.e.c. (1849)</td>
</tr>
<tr>
<td>077 Agricultural &amp; food scientists (1853)</td>
</tr>
<tr>
<td>078 Biological &amp; life scientists (1854)</td>
</tr>
<tr>
<td>079 Forestry &amp; conservation scientists (1852)</td>
</tr>
<tr>
<td>083 Medical scientists (1855)</td>
</tr>
<tr>
<td>Health Diagnosing Occupations</td>
</tr>
<tr>
<td>084 Physicians (261)</td>
</tr>
<tr>
<td>085 Dentists (262)</td>
</tr>
<tr>
<td>086 Veterinarians (27)</td>
</tr>
<tr>
<td>087 Optometrists (281)</td>
</tr>
<tr>
<td>088 Podiatrists (283)</td>
</tr>
<tr>
<td>089 Health diagnosing practitioners, n.e.c. (289)</td>
</tr>
<tr>
<td>Health Assessment &amp; Treating Occupations</td>
</tr>
<tr>
<td>095 Registered nurses (29)</td>
</tr>
<tr>
<td>096 Pharmacists (301)</td>
</tr>
<tr>
<td>097 Dietitians (302)</td>
</tr>
<tr>
<td>Therapists</td>
</tr>
<tr>
<td>098 Respiratory therapists (3031)</td>
</tr>
<tr>
<td>099 Occupational therapists (3032)</td>
</tr>
<tr>
<td>103 Physical therapists (3033)</td>
</tr>
<tr>
<td>104 Speech therapists (3034)</td>
</tr>
<tr>
<td>105 Therapists, n.e.c. (3039)</td>
</tr>
<tr>
<td>106 Physicians’ assistants (304)</td>
</tr>
</tbody>
</table>
### Appendix C

#### 1990 Occupational Classification System (for Variables 124 and 207)

#### Teachers, Postsecondary

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>113</td>
<td>Earth, environmental, &amp; marine science teachers (2212)</td>
</tr>
<tr>
<td>114</td>
<td>Biological science teachers (2213)</td>
</tr>
<tr>
<td>115</td>
<td>Chemistry teachers (2214)</td>
</tr>
<tr>
<td>116</td>
<td>Physics teachers (2215)</td>
</tr>
<tr>
<td>117</td>
<td>Natural science teachers, n.e.c. (2216)</td>
</tr>
<tr>
<td>118</td>
<td>Psychology teachers (2217)</td>
</tr>
<tr>
<td>119</td>
<td>Economics teachers (2218)</td>
</tr>
<tr>
<td>123</td>
<td>History teachers (2222)</td>
</tr>
<tr>
<td>124</td>
<td>Political science teachers (2223)</td>
</tr>
<tr>
<td>125</td>
<td>Sociology teachers (2224)</td>
</tr>
<tr>
<td>126</td>
<td>Social science teachers, n.e.c. (2225)</td>
</tr>
<tr>
<td>127</td>
<td>Engineering teachers (2226)</td>
</tr>
<tr>
<td>128</td>
<td>Mathematical science teachers (2227)</td>
</tr>
<tr>
<td>129</td>
<td>Computer science teachers (2228)</td>
</tr>
<tr>
<td>133</td>
<td>Medical science teachers (2231)</td>
</tr>
<tr>
<td>134</td>
<td>Health specialties teachers (2232)</td>
</tr>
<tr>
<td>135</td>
<td>Business, commerce, &amp; marketing teachers (2233)</td>
</tr>
<tr>
<td>136</td>
<td>Agriculture &amp; forestry teachers (2234)</td>
</tr>
<tr>
<td>137</td>
<td>Art, drama, &amp; music teachers (2235)</td>
</tr>
<tr>
<td>138</td>
<td>Physical education teachers (2236)</td>
</tr>
<tr>
<td>139</td>
<td>Education teachers (2237)</td>
</tr>
<tr>
<td>143</td>
<td>English teachers (2238)</td>
</tr>
<tr>
<td>144</td>
<td>Foreign language teachers (2242)</td>
</tr>
<tr>
<td>145</td>
<td>Law teachers (2243)</td>
</tr>
<tr>
<td>146</td>
<td>Social work teachers (2244)</td>
</tr>
<tr>
<td>147</td>
<td>Theology teachers (2245)</td>
</tr>
<tr>
<td>148</td>
<td>Trade &amp; industrial teachers (2246)</td>
</tr>
<tr>
<td>149</td>
<td>Home economics teachers (2247)</td>
</tr>
<tr>
<td>153</td>
<td>Teachers, postsecondary, n.e.c. (2249)</td>
</tr>
<tr>
<td>154</td>
<td>Postsecondary teachers, subject not specified</td>
</tr>
<tr>
<td>155</td>
<td>Teachers, pre-kindergarten &amp; kindergarten (231)</td>
</tr>
<tr>
<td>156</td>
<td>Teachers, elementary school (232)</td>
</tr>
<tr>
<td>157</td>
<td>Teachers, secondary school (233)</td>
</tr>
<tr>
<td>158</td>
<td>Teachers, special education (235)</td>
</tr>
<tr>
<td>159</td>
<td>Teachers, n.e.c. (236, 239)</td>
</tr>
<tr>
<td>163</td>
<td>Counselors, educational &amp; vocational (24)</td>
</tr>
</tbody>
</table>

#### Librarians, Archivists, & Curators

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>164</td>
<td>Librarians (251)</td>
</tr>
<tr>
<td>165</td>
<td>Archivists &amp; curators (252)</td>
</tr>
</tbody>
</table>

#### Social Scientists & Urban Planners

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>166</td>
<td>Economists (1912)</td>
</tr>
<tr>
<td>167</td>
<td>Psychologists (1915)</td>
</tr>
<tr>
<td>168</td>
<td>Sociologists (1916)</td>
</tr>
<tr>
<td>169</td>
<td>Social scientists, n.e.c. (1913, 1914, 1919)</td>
</tr>
<tr>
<td>173</td>
<td>Urban planners (192)</td>
</tr>
</tbody>
</table>

#### Social, Recreation, & Religious Workers

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>174</td>
<td>Social workers (2032)</td>
</tr>
<tr>
<td>175</td>
<td>Recreation workers (2033)</td>
</tr>
<tr>
<td>176</td>
<td>Clergy (2042)</td>
</tr>
<tr>
<td>177</td>
<td>Religious workers, n.e.c. (2049)</td>
</tr>
</tbody>
</table>

#### Lawyers & Judges

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>178</td>
<td>Lawyers (211)</td>
</tr>
<tr>
<td>179</td>
<td>Judges (212)</td>
</tr>
</tbody>
</table>

#### Writers, Artists, Entertainers, & Athletes

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation</th>
</tr>
</thead>
<tbody>
<tr>
<td>183</td>
<td>Authors (321)</td>
</tr>
<tr>
<td>184</td>
<td>Technical writers (398)</td>
</tr>
<tr>
<td>185</td>
<td>Designers (322)</td>
</tr>
<tr>
<td>186</td>
<td>Musicians &amp; composers (323)</td>
</tr>
<tr>
<td>187</td>
<td>Actors &amp; directors (324)</td>
</tr>
<tr>
<td>188</td>
<td>Painters, sculptors, craft-artists, &amp; artist printmakers (325)</td>
</tr>
<tr>
<td>189</td>
<td>Photographers (326)</td>
</tr>
<tr>
<td>193</td>
<td>Dancers (327)</td>
</tr>
<tr>
<td>194</td>
<td>Artists, performers, &amp; related workers, n.e.c. (328, 329)</td>
</tr>
<tr>
<td>195</td>
<td>Editors &amp; reporters (331)</td>
</tr>
<tr>
<td>197</td>
<td>Public relations specialists (332)</td>
</tr>
<tr>
<td>198</td>
<td>Announcers (333)</td>
</tr>
<tr>
<td>199</td>
<td>Athletes (34)</td>
</tr>
</tbody>
</table>

---

NSCISC: 03/2001 C2
## APPENDIX C
### 1990 Occupational Classification System (for Variables 124 and 207)

### 03 Technicians & Related Support Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
<th>Subcode(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>03</td>
<td>Health Technologists &amp; Technicians</td>
<td>203 Clinical laboratory technologists &amp; technicians (362), 204 Dental hygienists (363), 205 Health record technologists &amp; technicians (364), 206 Radiologic technicians (365), 207 Licensed practical nurses (366), 208 Health technologists &amp; technicians, n.e.c. (369)</td>
</tr>
<tr>
<td></td>
<td>Technologists &amp; Technicians, Except Health Engineering &amp; Related Technologists &amp; Technicians</td>
<td>213 Electrical &amp; electronic technicians (3711), 214 Industrial engineering technicians (3712), 215 Mechanical engineering technicians (3713), 216 Engineering technicians, n.e.c. (3719), 217 Drafting occupations (372), 218 Surveying &amp; mapping technicians (373)</td>
</tr>
<tr>
<td></td>
<td>Science Technicians</td>
<td>223 Biological technicians (382), 224 Chemical technicians (3831), 225 Science technicians, n.e.c. (3832, 3833, 384, 389)</td>
</tr>
<tr>
<td></td>
<td>Technicians; Except Health, Engineering, &amp; Science</td>
<td>226 Airplane pilots &amp; navigators (825), 227 Air traffic controllers (392), 228 Broadcast equipment operators (393), 229 Computer programmers (3971, 3972), 233 Tool programmers, numerical control (3974), 234 Legal assistants (396), 235 Technicians, n.e.c. (399)</td>
</tr>
</tbody>
</table>

### 04 Sales Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>243</td>
<td>Supervisors &amp; proprietors, sales occupations (40)</td>
</tr>
<tr>
<td></td>
<td>Sales Representatives, Finance &amp; Business Services</td>
</tr>
<tr>
<td></td>
<td>Sales Representatives, Commodities Except Retail</td>
</tr>
<tr>
<td></td>
<td>Sales Workers, Retail &amp; Personal Services</td>
</tr>
<tr>
<td></td>
<td>Cashiers (4364), 277 Street &amp; door-to-door sales workers (4366), 278 News vendors (4365)</td>
</tr>
<tr>
<td></td>
<td>Sales-Related Occupations</td>
</tr>
</tbody>
</table>
### 05 Administrative Support Occupations, Including Clerical

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>NSC Code(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>303</td>
<td>Supervisors, general office (4511, 4513, 4514, 4516, 4519, 4529)</td>
<td></td>
</tr>
<tr>
<td>304</td>
<td>Supervisors, computer equipment operators (4512)</td>
<td></td>
</tr>
<tr>
<td>305</td>
<td>Supervisors, financial records processing (4521)</td>
<td></td>
</tr>
<tr>
<td>306</td>
<td>Chief communications operators (4523)</td>
<td></td>
</tr>
<tr>
<td>307</td>
<td>Supervisors; distribution, scheduling, &amp; adjusting clerks (4522, 4524-4528)</td>
<td></td>
</tr>
<tr>
<td>308</td>
<td>Computer operators (4612)</td>
<td></td>
</tr>
<tr>
<td>309</td>
<td>Peripheral equipment operators (4613)</td>
<td></td>
</tr>
<tr>
<td>310</td>
<td>Secretaries (4622)</td>
<td></td>
</tr>
<tr>
<td>311</td>
<td>Stenographers (4623)</td>
<td></td>
</tr>
<tr>
<td>312</td>
<td>Typists (4624)</td>
<td></td>
</tr>
<tr>
<td>313</td>
<td>Interviewers (4642)</td>
<td></td>
</tr>
<tr>
<td>314</td>
<td>Hotel clerks (4643)</td>
<td></td>
</tr>
<tr>
<td>315</td>
<td>Transportation ticket &amp; reservation agents (4644)</td>
<td></td>
</tr>
<tr>
<td>316</td>
<td>Receptionists (4645)</td>
<td></td>
</tr>
<tr>
<td>317</td>
<td>Information clerks, n.e.c. (4649)</td>
<td></td>
</tr>
<tr>
<td>318</td>
<td>Classified-ad clerks (4662)</td>
<td></td>
</tr>
<tr>
<td>319</td>
<td>Correspondence clerks (4663)</td>
<td></td>
</tr>
<tr>
<td>320</td>
<td>Personnel clerks, except payroll &amp; timekeeping (4692)</td>
<td></td>
</tr>
<tr>
<td>321</td>
<td>Library clerks (4694)</td>
<td></td>
</tr>
<tr>
<td>322</td>
<td>File clerks (4696)</td>
<td></td>
</tr>
<tr>
<td>323</td>
<td>Records clerks (4699)</td>
<td></td>
</tr>
<tr>
<td>324</td>
<td>Bookkeepers, accounting, &amp; auditing clerks (4712)</td>
<td></td>
</tr>
<tr>
<td>325</td>
<td>Payroll &amp; timekeeping clerks (4713)</td>
<td></td>
</tr>
<tr>
<td>326</td>
<td>Billing clerks (4715)</td>
<td></td>
</tr>
<tr>
<td>327</td>
<td>Cost &amp; rate clerks (4716)</td>
<td></td>
</tr>
<tr>
<td>328</td>
<td>Billing, posting, &amp; calculating machine operators (4718)</td>
<td></td>
</tr>
</tbody>
</table>

### 06 Private Household Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>NSC Code(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>403</td>
<td>Launderers &amp; ironers (503)</td>
<td></td>
</tr>
<tr>
<td>404</td>
<td>Cooks, private household (504)</td>
<td></td>
</tr>
<tr>
<td>405</td>
<td>Housekeepers &amp; butlers (505)</td>
<td></td>
</tr>
<tr>
<td>406</td>
<td>Child care workers, private household (506)</td>
<td></td>
</tr>
<tr>
<td>407</td>
<td>Private household cleaners &amp; servants (502, 507, 509)</td>
<td></td>
</tr>
</tbody>
</table>
### Appendix C

**1990 Occupational Classification System (for variables 124 and 207)**

#### 07 Protective Service Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>07</td>
<td></td>
</tr>
<tr>
<td>413</td>
<td>Supervisors, firefighting &amp; fire prevention occupations (5111)</td>
</tr>
<tr>
<td>414</td>
<td>Supervisors, police, &amp; detectives (5112)</td>
</tr>
<tr>
<td>415</td>
<td>Supervisors, guards (5113)</td>
</tr>
<tr>
<td>416</td>
<td>Fire inspection &amp; fire prevention occupations (5122)</td>
</tr>
<tr>
<td>417</td>
<td>Firefighting occupations (5123)</td>
</tr>
<tr>
<td>418</td>
<td>Police &amp; detectives, public service (5132)</td>
</tr>
<tr>
<td>423</td>
<td>Sheriffs, bailiffs, &amp; other law enforcement officers (5134)</td>
</tr>
<tr>
<td>424</td>
<td>Correctional institution officers (5133)</td>
</tr>
<tr>
<td>425</td>
<td>Crossing guards (5142)</td>
</tr>
<tr>
<td>426</td>
<td>Guards &amp; police, exc. public service (5144)</td>
</tr>
<tr>
<td>427</td>
<td>Protective service occupations, n.e.c. (5149)</td>
</tr>
</tbody>
</table>

#### 08 Service Occupations, Except Protective & Household

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>08</td>
<td></td>
</tr>
<tr>
<td>433</td>
<td>Supervisors, food preparation &amp; service occupations (5211)</td>
</tr>
<tr>
<td>434</td>
<td>Bartenders (5212)</td>
</tr>
<tr>
<td>435</td>
<td>Waiters &amp; waitresses (5213)</td>
</tr>
<tr>
<td>436</td>
<td>Cooks (5214, 5215)</td>
</tr>
<tr>
<td>438</td>
<td>Food counter, fountain &amp; related occupations (5216)</td>
</tr>
<tr>
<td>439</td>
<td>Kitchen workers, food preparation (5217)</td>
</tr>
<tr>
<td>443</td>
<td>Waiters’/waitresses’ assistants (5218)</td>
</tr>
<tr>
<td>444</td>
<td>Miscellaneous food preparation occupations (5219)</td>
</tr>
<tr>
<td>445</td>
<td>Dental assistants (5232)</td>
</tr>
<tr>
<td>446</td>
<td>Health aides, except nursing (5233)</td>
</tr>
<tr>
<td>447</td>
<td>Nursing aides, orderlies, &amp; attendants (5236)</td>
</tr>
<tr>
<td>448</td>
<td>Supervisors, cleaning &amp; building service workers (5241)</td>
</tr>
<tr>
<td>449</td>
<td>Maids &amp; housemen (5242, 5249)</td>
</tr>
<tr>
<td>453</td>
<td>Janitors &amp; cleaners (5244)</td>
</tr>
<tr>
<td>454</td>
<td>Elevator operators (5245)</td>
</tr>
<tr>
<td>455</td>
<td>Pest control occupations (5246)</td>
</tr>
<tr>
<td>456</td>
<td>Supervisors, personal service occupations (5251)</td>
</tr>
<tr>
<td>457</td>
<td>Barbers (5252)</td>
</tr>
<tr>
<td>458</td>
<td>Hairdressers &amp; cosmetologists (5253)</td>
</tr>
<tr>
<td>459</td>
<td>Attendants, amusement &amp; recreation facilities (5254)</td>
</tr>
<tr>
<td>461</td>
<td>Guides (5255)</td>
</tr>
<tr>
<td>462</td>
<td>Ushers (5256)</td>
</tr>
<tr>
<td>463</td>
<td>Public transportation attendants (5257)</td>
</tr>
<tr>
<td>464</td>
<td>Baggage porters &amp; bellhops (5262)</td>
</tr>
<tr>
<td>465</td>
<td>Welfare service aides (5263)</td>
</tr>
<tr>
<td>466</td>
<td>Family child care providers (pt 5264)</td>
</tr>
<tr>
<td>467</td>
<td>Early childhood teacher’s assistants (pt 5264)</td>
</tr>
<tr>
<td>468</td>
<td>Child care workers, n.e.c. (pt 5264)</td>
</tr>
<tr>
<td>469</td>
<td>Personal service occupations, n.e.c. (5258, 5269)</td>
</tr>
</tbody>
</table>

#### 09 Farming, Forestry & Fishing Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>09</td>
<td></td>
</tr>
<tr>
<td>473</td>
<td>Farmers, except horticultural (5512-5514)</td>
</tr>
<tr>
<td>474</td>
<td>Horticultural specialty farmers (5515)</td>
</tr>
<tr>
<td>475</td>
<td>Managers, farms, except horticultural (5522-5524)</td>
</tr>
<tr>
<td>476</td>
<td>Managers, horticultural specialty farms (5525)</td>
</tr>
<tr>
<td>477</td>
<td>Supervisors, farm workers (5611)</td>
</tr>
<tr>
<td>479</td>
<td>Farm workers (5612-5617)</td>
</tr>
<tr>
<td>483</td>
<td>Marine life cultivation workers (5618)</td>
</tr>
<tr>
<td>484</td>
<td>Nursery workers (5619)</td>
</tr>
<tr>
<td>485</td>
<td>Supervisors, related agricultural occupations (5621)</td>
</tr>
<tr>
<td>486</td>
<td>Groundskeepers &amp; gardeners, except farm (5622)</td>
</tr>
<tr>
<td>487</td>
<td>Animal caretakers, except farm (5624)</td>
</tr>
<tr>
<td>488</td>
<td>Graders &amp; sorters, agricultural products (5625)</td>
</tr>
<tr>
<td>489</td>
<td>Inspectors, agricultural products (5627)</td>
</tr>
<tr>
<td>494</td>
<td>Supervisors, forestry, &amp; logging workers (571)</td>
</tr>
<tr>
<td>495</td>
<td>Forestry workers, except logging (572)</td>
</tr>
<tr>
<td>496</td>
<td>Timber cutting &amp; logging occupations (573, 579)</td>
</tr>
<tr>
<td>497</td>
<td>Captains &amp; other officers, fishing vessels (pt 8241)</td>
</tr>
<tr>
<td>498</td>
<td>Fishers (583)</td>
</tr>
<tr>
<td>499</td>
<td>Hunters &amp; trappers (584)</td>
</tr>
</tbody>
</table>
APPENDIX C
1990 OCCUPATIONAL CLASSIFICATION SYSTEM (FOR VARIABLES 124 AND 207)

<table>
<thead>
<tr>
<th>10 PRECISION PRODUCTION, CRAFT, &amp; REPAIR OCCUPATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Mechanics &amp; Repairers</strong></td>
</tr>
<tr>
<td>503 Supervisors, mechanics &amp; repairers (60)</td>
</tr>
<tr>
<td><strong>Mechanics &amp; Repairers, Except Supervisors</strong></td>
</tr>
<tr>
<td><strong>Vehicle &amp; Mobile Equipment Mechanics &amp; Repairers</strong></td>
</tr>
<tr>
<td>505 Automobile mechanics (pt 6111)</td>
</tr>
<tr>
<td>506 Automobile mechanic apprentices (pt 6111)</td>
</tr>
<tr>
<td>507 Bus, truck, &amp; stationary engine mechanics (6112)</td>
</tr>
<tr>
<td>508 Aircraft engine mechanics (6113)</td>
</tr>
<tr>
<td>509 Small engine repairers (6114)</td>
</tr>
<tr>
<td>514 Automobile body &amp; related repairers (6115)</td>
</tr>
<tr>
<td>515 Aircraft mechanics, exc. engine (6116)</td>
</tr>
<tr>
<td>516 Heavy equipment mechanics (6117)</td>
</tr>
<tr>
<td>517 Farm equipment mechanics (6118)</td>
</tr>
<tr>
<td>518 Industrial machinery repairers (613)</td>
</tr>
<tr>
<td>519 Machinery maintenance occupations (614)</td>
</tr>
<tr>
<td><strong>Electrical &amp; Electronic Equipment Repairers</strong></td>
</tr>
<tr>
<td>523 Electronic repairers, communications, &amp; industrial equipment (6151, 6153, 6155)</td>
</tr>
<tr>
<td>525 Data processing equipment repairers (6154)</td>
</tr>
<tr>
<td>526 Household appliance &amp; power tool repairers (6156)</td>
</tr>
<tr>
<td>527 Telephone line installers &amp; repairers (6157)</td>
</tr>
<tr>
<td>529 Telephone installers &amp; repairers (6158)</td>
</tr>
<tr>
<td>533 Miscellaneous electrical &amp; electronic equipment repairers (6152, 6159)</td>
</tr>
<tr>
<td>534 Heating, air conditioning, &amp; refrigeration mechanics (616)</td>
</tr>
<tr>
<td><strong>Miscellaneous Mechanics &amp; Repairers</strong></td>
</tr>
<tr>
<td>535 Camera, watch, &amp; musical instrument repairers (6171, 6172)</td>
</tr>
<tr>
<td>536 Locksmiths &amp; safe repairers (6173)</td>
</tr>
<tr>
<td>538 Office machine repairers (6174)</td>
</tr>
<tr>
<td>539 Mechanical controls &amp; valve repairers (6175)</td>
</tr>
<tr>
<td>543 Elevator installers &amp; repairers (6176)</td>
</tr>
<tr>
<td>544 Millwrights (6178)</td>
</tr>
<tr>
<td>547 Specified mechanics &amp; repairers, n.e.c. (6177, 6179)</td>
</tr>
<tr>
<td>549 Not specified mechanics &amp; repairers</td>
</tr>
<tr>
<td><strong>Construction Trades</strong></td>
</tr>
<tr>
<td><strong>Supervisors, Construction Occupations</strong></td>
</tr>
<tr>
<td>553 Supervisors; brickmasons, stonemasons, &amp; tile setters (6312)</td>
</tr>
<tr>
<td>554 Supervisors, carpenters &amp; related workers (6313)</td>
</tr>
<tr>
<td>555 Supervisors, electricians &amp; power transmission installers (6314)</td>
</tr>
<tr>
<td>556 Supervisors; painters, paperhangers, &amp; plasterers (6315)</td>
</tr>
<tr>
<td>557 Supervisors; plumbers, pipefitters, &amp; steamfitters (6316)</td>
</tr>
<tr>
<td>558 Supervisors, n.e.c. (6311, 6318)</td>
</tr>
<tr>
<td><strong>Construction Trades, Except Supervisors</strong></td>
</tr>
<tr>
<td>563 Brickmasons &amp; stonemasons (pt 6412, pt 6413)</td>
</tr>
<tr>
<td>564 Brickmason &amp; stonemason apprentices (pt 6412, pt 6413)</td>
</tr>
</tbody>
</table>

---

| 565 Tile setters, hard & soft (pt 6414, pt 6462)       |
| 566 Carpet installers (pt 6462)                        |
| 567 Carpenters (pt 6422)                               |
| 569 Carpenter apprentices (pt 6422)                    |
| 573 Drywall installers (6424)                          |
| 575 Electricians (pt 6432)                             |
| 576 Electrician apprentices (pt 6432)                  |
| 577 Electrical power installers & repairers (6433)      |
| 579 Painters, construction & maintenance (6442)         |
| 583 Paperhangers (6443)                               |
| 584 Plasterers (6444)                                  |
| 585 Plumbers, pipefitters, & steamfitters (pt 645)     |
| 587 Plumber, pipefitter, & steamfitter apprentices (pt 645) |
| 588 Concrete & terrazzo finishers (6463)               |
| 589 Glaziers (6464)                                   |
| 593 Insulation workers (6465)                          |
| 594 Paving, surfacing, & tamping equipment operators (6466) |
| 595 Roofers (6468)                                    |
| 596 Sheetmetal duct installers (6472)                  |
| 597 Structural metal workers (6473)                    |
| 598 Drillers, earth (6474)                            |
| 599 Construction trades, n.e.c. (6467, 6475, 6476, 6479) |

**Extractive Occupations**

| 613 Supervisors, extractive occupations (632)        |
| 614 Drillers, oil well (652)                          |
| 615 Explosives workers (653)                          |
| 616 Mining machine operators (654)                    |
| 617 Mining occupations, n.e.c. (656)                  |

**Precision Production Occupations**

| 628 Supervisors, production occupations (67, 71)      |

**Precision Metal Working Occupations**

| 634 Tool & die makers (pt 6811)                        |
| 635 Tool & die maker apprentices (pt 6811)             |
| 636 Precision assemblers, metal (6812)                 |
| 637 Machinists (pt 6813)                               |
| 639 Machinist apprentices (pt 6813)                    |
| 643 Boilermakers (6814)                               |
| 644 Precision grinders, filers, & tool sharpeners (6816) |
| 645 Patternmakers & model makers, metal (6817)         |
| 646 Lay-out workers (6821)                             |
| 647 Precious stones & metals workers (Jewelers) (6822, 6866) |
| 649 Engravers, metal (6823)                            |
| 653 Sheet metal workers (pt 6824)                      |
| 654 Sheet metal worker apprentices (pt 6824)           |
| 655 Miscellaneous precision metal workers (6829)       |

**Precision Woodworking Occupations**

| 656 Patternmakers & model makers, wood (6831)         |
| 657 Cabinet makers & bench carpenters (6832)           |
| 658 Furniture & wood finishers (6835)                  |
| 659 Miscellaneous precision workers (6839)            |
### APPENDIX C

**1990 OCCUPATIONAL CLASSIFICATION SYSTEM (FOR VARIABLES 124 AND 207)**

<table>
<thead>
<tr>
<th>Precision Textile, Apparel, &amp; Furnishings Machine Workers</th>
</tr>
</thead>
<tbody>
<tr>
<td>666 Dressmakers (pt 6852, pt 7752)</td>
</tr>
<tr>
<td>667 Tailors (pt 6852)</td>
</tr>
<tr>
<td>668 Upholsterers (6853)</td>
</tr>
<tr>
<td>669 Shoe repairers (6854)</td>
</tr>
<tr>
<td>674 Miscellaneous precision apparel &amp; fabric workers (6856, 6859, pt 7752)</td>
</tr>
</tbody>
</table>

**Precision Workers, Assorted Materials**

| 675 Hand molders & shapers, except jewelers (6861)      |
| 676 Patternmakers, lay-out workers, & cutters (6862)    |
| 677 Optical goods workers (6864, pt 7477, pt 7677)      |
| 678 Dental laboratory & medical appliance technicians (6865) |
| 679 Bookbinders (6844)                                  |
| 683 Electrical & electronic equipment assemblers (6867) |
| 684 Miscellaneous precision workers, n.e.c. (6869)      |

**Precision Food Production Occupations**

| 686 Butchers & meat cutters (6871)                     |
| 687 Bakers (6872)                                     |
| 688 Food batchmakers (6873, 6879)                     |

**Precision Inspectors, Testers, & Related Workers**

| 689 Inspectors, testers, & graders (6881, 828)         |
| 693 Adjusters & calibrators (6882)                     |

**Plant & System Operators**

| 694 Water & sewage treatment plant operators (691)     |
| 695 Power plant operators (pt 693)                     |
| 696 Stationary engineers (pt 693, 7668)                |
| 699 Miscellaneous plant & system operators (692, 694, 695, 696) |
APPENDIX C
1990 OCCUPATIONAL CLASSIFICATION SYSTEM (FOR VARIABLES 124 AND 207)

<table>
<thead>
<tr>
<th>Machine Operators &amp; Assemblers, &amp; Inspectors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Machine Operators &amp; Tenders, Except Precision</td>
</tr>
<tr>
<td>Metalworking &amp; Plastic Working Machine Operators</td>
</tr>
<tr>
<td>703 Lathe &amp; turning machine set-up operators (7312)</td>
</tr>
<tr>
<td>704 Lathe &amp; turning machine operators (7512)</td>
</tr>
<tr>
<td>705 Milling planing machine operators (7313, 7513)</td>
</tr>
<tr>
<td>706 Punching &amp; stamping press machine operators (7314, 7317, 7514, 7517)</td>
</tr>
<tr>
<td>707 Rolling machine operators (7316, 7516)</td>
</tr>
<tr>
<td>708 Drilling boring machine operators (7318, 7518)</td>
</tr>
<tr>
<td>709 Grinding, abrading, buffing, &amp; polishing machine operators (7322, 7324, 7522)</td>
</tr>
<tr>
<td>713 Forging machine operators (7319, 7519)</td>
</tr>
<tr>
<td>714 Numerical control machine operators (7326)</td>
</tr>
<tr>
<td>715 Miscellaneous metal, plastic, stone, &amp; glass working machine operators (7329, 7529)</td>
</tr>
<tr>
<td>717 Fabricating machine operators, n.e.c. (7339, 7539)</td>
</tr>
<tr>
<td>Metal &amp; Plastic Processing Machine Operators</td>
</tr>
<tr>
<td>719 Molding &amp; casting machine operators (7315, 7342, 7515, 7542)</td>
</tr>
<tr>
<td>723 Metal plating machine operators (7343, 7543)</td>
</tr>
<tr>
<td>724 Heat treating equipment operators (7344, 7544)</td>
</tr>
<tr>
<td>725 Miscellaneous metal &amp; plastic processing machine operators (7349, 7549)</td>
</tr>
<tr>
<td>Woodworking Machine Operators</td>
</tr>
<tr>
<td>726 Wood lathe, routing, &amp; planing machine operators (7431, 7432, 7631, 7632)</td>
</tr>
<tr>
<td>727 Sawing machine operators (7433, 7633)</td>
</tr>
<tr>
<td>728 Shaping &amp; joining machine operators (7435, 7635)</td>
</tr>
<tr>
<td>729 Nailing &amp; tapping machine operators (7636)</td>
</tr>
<tr>
<td>733 Miscellaneous woodworking machine operators (7434, 7439, 7634, 7639)</td>
</tr>
<tr>
<td>Printing Machine Operators</td>
</tr>
<tr>
<td>734 Printing press operators (7443, 7643)</td>
</tr>
<tr>
<td>735 Photoengravers &amp; lithographers (6842, 7444, 7644)</td>
</tr>
<tr>
<td>736 Typesetters &amp; compositors (6841, 7642)</td>
</tr>
<tr>
<td>737 Miscellaneous printing machine operators (6849, 7449, 7649)</td>
</tr>
<tr>
<td>Textile, Apparel, &amp; Furnishings Machine Operators</td>
</tr>
<tr>
<td>738 Winding &amp; twisting machine operators (7451, 7651)</td>
</tr>
<tr>
<td>739 Knitting, looping, tapeing, &amp; weaving machine operators (7452, 7652)</td>
</tr>
<tr>
<td>743 Textile cutting machine operators (7654)</td>
</tr>
<tr>
<td>744 Textile sewing machine operators (7655)</td>
</tr>
<tr>
<td>745 Shoe machine operators (7656)</td>
</tr>
<tr>
<td>747 Pressing machine operators (7657)</td>
</tr>
<tr>
<td>748 Laundering &amp; dry cleaning machine operators (6855, 7658)</td>
</tr>
<tr>
<td>749 Misc. textile machine operators (7459, 7659)</td>
</tr>
<tr>
<td>Machine Operators, Assorted Materials</td>
</tr>
<tr>
<td>753 Cementing &amp; gluing machine operators (7661)</td>
</tr>
<tr>
<td>754 Packaging &amp; filling machine operators (7462, 7562)</td>
</tr>
<tr>
<td>755 Extruding forming machine operators (7463, 7663)</td>
</tr>
<tr>
<td>756 Mixing &amp; blending machine operators (7664)</td>
</tr>
<tr>
<td>757 Separating, filtering, &amp; clarifying machine operators (7476, 7666, 7676)</td>
</tr>
<tr>
<td>758 Compressing &amp; compacting machine operators (7477, 7667)</td>
</tr>
<tr>
<td>759 Painting paint spraying machine operators (7669)</td>
</tr>
<tr>
<td>763 Roasting/baking machine operators, food (7472, 7672)</td>
</tr>
<tr>
<td>764 Washing, cleaning, &amp; pickling machine operators (7673)</td>
</tr>
<tr>
<td>765 Folding machine operators (7474, 7674)</td>
</tr>
<tr>
<td>766 Furnace, kiln, &amp; oven operators, exc. food (7675)</td>
</tr>
<tr>
<td>768 Crushing &amp; grinding machine operators (pt 7477, pt 7677)</td>
</tr>
<tr>
<td>769 Slicing &amp; cutting machine operators (7478, 7678)</td>
</tr>
<tr>
<td>773 Motion picture projectionists (pt 7479)</td>
</tr>
<tr>
<td>774 Photographic process machine operators (6863, 6868, 7671)</td>
</tr>
<tr>
<td>777 Miscellaneous machine operators, n.e.c. (Pt 7479, 7665, 7679)</td>
</tr>
<tr>
<td>779 Machine operators, not specified</td>
</tr>
<tr>
<td>Fabricators, Assemblers, Hand Working Occupations</td>
</tr>
<tr>
<td>783 Welders &amp; cutters (7332, 7532, 7714)</td>
</tr>
<tr>
<td>784 Solderers &amp; brazers (7333, 7533, 7717)</td>
</tr>
<tr>
<td>785 Assemblers (772, 774)</td>
</tr>
<tr>
<td>786 Hand cutting &amp; brazing occupations (7753)</td>
</tr>
<tr>
<td>787 Hand molding, casting, forming occupations (7754, 7755)</td>
</tr>
<tr>
<td>789 Hand Painting, coating, decorating occupations (7756)</td>
</tr>
<tr>
<td>793 Hand engraving &amp; printing occupations (7757)</td>
</tr>
<tr>
<td>795 Miscellaneous Hand working occupations (7758, 7759)</td>
</tr>
<tr>
<td>Production Inspectors, Testers, Samplers, &amp; Weighers</td>
</tr>
<tr>
<td>796 Production inspectors, checkers, &amp; examiners (782, 787)</td>
</tr>
<tr>
<td>797 Production testers (783)</td>
</tr>
<tr>
<td>798 Production samplers &amp; weighers (784)</td>
</tr>
<tr>
<td>799 Graders &amp; sorters, exc. agricultural (785)</td>
</tr>
</tbody>
</table>
# 12 Transportation & Material Moving Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>803</td>
<td>Supervisors, motor vehicle operators (8111)</td>
<td>828</td>
<td>Ship captains &amp; mates, except fishing boats (pt 8241, 8242)</td>
</tr>
<tr>
<td>804</td>
<td>Truck drivers (8212-8214)</td>
<td>829</td>
<td>Sailors &amp; deckhands (8243)</td>
</tr>
<tr>
<td>806</td>
<td>Driver-sales workers (8218)</td>
<td>833</td>
<td>Marine engineers (8244)</td>
</tr>
<tr>
<td>808</td>
<td>Bus drivers (8215)</td>
<td>834</td>
<td>Bridge, lock, &amp; lighthouse tenders (8245)</td>
</tr>
<tr>
<td>809</td>
<td>Taxicab drivers &amp; chauffeurs (8216)</td>
<td>813</td>
<td>Parking lot attendants (874)</td>
</tr>
<tr>
<td>814</td>
<td>Motor transportation occupations, n.e.c. (8219)</td>
<td>814</td>
<td>Motor transportation occupations (874)</td>
</tr>
<tr>
<td>823</td>
<td>Railroad conductors &amp; yardmasters (8113)</td>
<td>829</td>
<td>Sailors &amp; deckhands (8243)</td>
</tr>
<tr>
<td>824</td>
<td>Locomotive operating occupations (8232)</td>
<td>833</td>
<td>Marine engineers (8244)</td>
</tr>
<tr>
<td>825</td>
<td>Railroad brake, signal, &amp; switch operators (8233)</td>
<td>834</td>
<td>Bridge, lock, &amp; lighthouse tenders (8245)</td>
</tr>
<tr>
<td>826</td>
<td>Rail vehicle operators, n.e.c. (8239)</td>
<td>835</td>
<td>Bridge, lock, &amp; lighthouse tenders (8245)</td>
</tr>
</tbody>
</table>

## 13 Handlers, Equipment, Cleaners, Helpers & Laborers

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>864</td>
<td>Supervisors, handlers, equipment cleaners &amp; laborers, n.e.c.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>865</td>
<td>Helpers, mechanics &amp; repairers (863)</td>
<td>887</td>
<td>Vehicle washers &amp; equipment cleaners (875)</td>
</tr>
<tr>
<td>866</td>
<td>Helpers, construction trades (8641-8645, 8648)</td>
<td>888</td>
<td>Hand packers &amp; packagers (8761)</td>
</tr>
<tr>
<td>867</td>
<td>Helpers, surveyor (8646)</td>
<td>889</td>
<td>Laborers, except construction (8769)</td>
</tr>
<tr>
<td>868</td>
<td>Helpers, extractive occupations (865)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>869</td>
<td>Construction laborers (871)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>874</td>
<td>Production helpers (861, 862)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## 14 Military Occupations

<table>
<thead>
<tr>
<th>Code</th>
<th>Occupation Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>903</td>
<td>Commissioned Officers &amp; Warrant Officers</td>
</tr>
<tr>
<td>904</td>
<td>Non-commissioned Officers &amp; Other Enlisted Personnel</td>
</tr>
<tr>
<td>905</td>
<td>Military occupation, rank not specified</td>
</tr>
</tbody>
</table>
APPENDIX C
External Causes of Injury (V01-Y98) for V118_1

This section provides information on the classification of environmental events and circumstances as the cause of injury and other adverse effects.

This section provides the following blocks:

**V00-X58 Accidents**

**V00-V99 Transport Accidents**

V00-V09 Pedestrian injured in transport accident
V10-V19 Pedal cyclist injured in transport accident
V20-V29 Motorcycle rider injured in transport accident
V30-V39 Occupant of three-wheeled motor vehicle injured in transport accident
V40-V49 Car occupant injured in transport accident
V50-V59 Occupant of pick-up truck or van injured in transport accident
V60-V69 Occupant of heavy transport vehicle injured in transport accident
V70-V79 Bus occupant injured in transport accident
V80-V89 Other land transport accidents
V90-V94 Water transport accidents
V95-V97 Air and space transport accidents
V98-V99 Other and unspecified transport accidents

**W00-X58 Other external causes of accidental injury**

W00-W19 Falls
W20-W49 Exposure to inanimate mechanical forces
W50-W64 Exposure to animate mechanical forces
W65-W74 Accidental drowning and submersion
W85-W99 Exposure to electric current, radiation and extreme ambient air temperature and pressure
X00-X09 Exposure to smoke, fire, and flames
X10-X19 Contact with heat and hot substances
X30-X39 Exposure to forces of nature
X52-X58 Accidental exposure to other specified factors

**X71-X83 Intentional self-harm**

**X92-Y08 Assault**

**Y21-Y33 Event of undetermined intent**

**Y35-Y38 Legal intervention, operations of war, military operations, and terrorism**

**Y62-Y69 Misadventures to patients during surgical and medical care**

**Y70-Y82 Medical devices associated with adverse incidents in diagnostic and therapeutic use**

**Y83-Y84 Surgical and other medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure**
Transport Accidents (V00-V99)

This section is broken down into 12 groups: those relating to land transport accidents (V01-V89) reflect the victim’s mode of transport and are subdivided to identify the victim’s “counterpart” or the type of event. The vehicle of which the injured person is an occupant is identified in the first two characters since it is seen as the most important factor to identify for prevention purposes. A transport accident is one in which the vehicle involved must be moving or running or in use for transport purposes at the time of the accident.

Use additional code to identify:
- Airbag injury (W22.1)
- Use of electronic equipment at the time of the transport accident (Y93.5_)
- Type of street or road (Y92.4_)
- Place of occurrence (Y92._)

Excludes:
- Agricultural vehicles in stationary use of maintenance (W31._)
- Assault by crashing of motor vehicle (Y03._)
- Automobile of motorcycle in stationary use or maintenance – code to type of accident
- Crashing of motor vehicle, undetermined intent (Y32)
- Intentional self-harm by crashing of motor vehicle (X82)
- Transport accidents due to cataclysm (X34-X38)

Definitions of transport vehicles:

Transport accident
- any accident involving a device designed primarily for, or used at the time primarily for, conveying persons or good from one place to another

Public highway [traffic way] or street
- the entire width between property lines (or other boundary lines) of land open to the public as a matter of right or custom for purposes of moving persons or property from one place to another. A roadway is that part of the public highway designed, improved and customarily used for vehicular traffic.

Traffic accident
- any vehicle accident occurring on the public highway [i.e. originating on, terminating on, or involving a vehicle partially on the highway]. A vehicle accident is assumed to have occurred on the public highway unless another place is specified, except in the case of accidents involving only off-road motor vehicles, which are classified as non traffic accidents unless the contrary is stated.

Non-traffic accident
- any vehicle accident that occurs entirely in any place other than a public highway.

Pedestrian
- any person involved in an accident who was not at the time of the accident riding in or on a motor vehicle, railway train, streetcar or animal-drawn or other vehicle, or on a pedal cycle or animal. This includes, a person changing a tire or working on a parked car. It also includes the use of a pedestrian conveyance such as a baby carriage, ice-skates, roller skates, a skateboard, non motorized wheelchair, or non-motorized scooter.

Driver
- an occupant of a transport vehicle who is operating or intending to operate it.
**Passenger**
any occupant of a transport vehicle other than the driver, except a person traveling on the outside of the vehicle.

**Person on the outside of a vehicle**
any person being transported by a vehicle but not occupying the space normally reserved for the driver or passengers, or the space intended for the transport of property. This includes the body, bumper, fender, roof, running board or step of a vehicle.

**Pedal cycle**
any land transport vehicle operated solely by non motorized pedals including a bicycle or tricycle.

**pedal cyclist**
any person riding a pedal cycle or in a sidecar or trailer attached to a pedal cycle.

**Motorcycle**
a two-wheeled motor vehicle with one or two riding saddles and sometimes with a third wheel for the support of a sidecar. The sidecar is considered part of the motorcycle.

**motorcycle rider**
any person riding a motorcycle or in a sidecar or trailer attached to the motorcycle.

**three-wheeled motor vehicle**
a motorized tricycle designed primarily for on-road use. This includes a motor-driven tricycle, a motorized rickshaw, or a three-wheeled motor car. A car [automobile] is a four-wheeled motor vehicle designed primarily for carrying up to 7 persons.

**pick-up truck or van**
a four or six-wheeled motor vehicle designed for carrying passengers as well as property or cargo weighing less than the local limit for classification as a heavy goods vehicle, and not requiring a special driver's license. This includes a minivan and a sport-utility vehicle (SUV).

**heavy transport vehicle**
a motor vehicle designed primarily for carrying property, meeting local criteria for classification as a heavy goods vehicle in terms of weight and requiring a special driver's license.

**bus (coach)**
a motor vehicle designed or adapted primarily for carrying more than 10 passengers, and requiring a special driver's license.

**railway train or railway vehicle**
any device, with or without freight or passenger cars couple to it, designed for traffic on a railway track. This includes subterranean (subways) or elevated trains.

**streetcar**
a device designed and used primarily for transporting passengers within a municipality, running on rails, usually subject to normal traffic control signals, and operated principally on a right-of-way that forms part of the roadway. This includes a tram or trolley that runs on rails. A trailer being towed by a streetcar is considered part of the streetcar.

**special vehicle mainly used on industrial premises**
a motor vehicle designed primarily for use within the buildings and premises of industrial or commercial establishments. This includes battery-powered trucks, forklifts, coal-cars in a coal mine, logging cars and trucks used in mines or quarries.

**special vehicle mainly used in agriculture**
a motor vehicle designed specifically for use in farming and agriculture (horticulture), to work the land, tend and harvest crops and transport materials on the farm. This includes harvesters, farm machinery and tractor and trailers.
special construction vehicle
a motor vehicle designed specifically for use on construction and demolition sites. This includes bulldozers, diggers, earth levelers, dump trucks, backhoes, front-end loaders, pavers, and mechanical shovels.

special all-terrain vehicle
a motor vehicle of special design to enable it to negotiate over rough or soft terrain, snow or sand. This includes snow mobiles, All-terrain vehicles (ATV), and dune buggies. It does not include passenger vehicle designated as Sport Utility Vehicles. (SUV)

watercraft
any device designed for transporting passengers or goods on water. This includes motor or sail boats, ships, and hovercraft.

aircraft
any device for transporting passengers or goods in the air. This includes hot-air balloons, gliders, helicopters and airplanes.

military vehicle
any motorized vehicle operating on a public roadway owned by the military and being operated by a member of the military.

Pedestrian injured in transport accident (V00-V09)

Includes:
Person changing tire on transport vehicle
Person examining engine of vehicle broken down in (on side of) road

Excludes:
Fall due to non-transport collision with other person (W03)
Pedestrian on foot falling (slipping) on ice and snow (W00._)
Struck or bumped by another person (W51)

V00 Pedestrian conveyance accident

Use additional place of occurrence and activity external cause codes, if known (Y92._, Y93._)

Excludes:
Collision with another person without fall (W51)
Fall due to person on foot colliding with another person on foot (W03)
Fall from wheelchair without collision (W05)
Pedestrian (conveyance) collision with other land transport vehicle (V01-V09)
Pedestrian on foot falling (slipping) on ice and snow (W00._)

The following 7th character extensions are to be added to each code from category V00:
a initial encounter
d subsequent encounter
q sequelae
V00.0 Pedestrian on foot injured in collision with pedestrian conveyance
V00.01 Pedestrian on foot injured in collision with roller skater
V00.02 Pedestrian on foot injured in collision with skateboarder
V00.09 Pedestrian on foot injured in collision with other pedestrian conveyance

V00.1 Rolling-type pedestrian conveyance accident
  Excludes:
  Accident with baby stroller (V00.82_)
  Accident with wheelchair (powered) (V00.81_)

V00.11 In-line roller skate accident
  V00.111 Fall from in-line roller-skates
  V00.112 In-line roller-skater colliding with stationary object
  V00.118 Other in-line roller-skate accident (excludes roller skater with other land transport vehicle (V01-V09 with 5th character 1))

V00.12 Non-in-line roller-skate accident
  V00.121 Fall from non-in-line roller-skates
  V00.122 Non-in-line roller-skater colliding with stationary object
  V00.128 Other non-in-line roller-skating accident (excludes roller skater with other land transport vehicle (V01-V09 with 5th character 1))

V00.13 Skateboard accident
  V00.131 Fall from skateboard
  V00.132 Skateboarder colliding with stationary object
  V00.138 Other skateboard accident (excludes skateboarder collision with other land transport vehicle (V01-V09 with 5th character 2))

V00.14 Scooter (non-motorized) accident
  Excludes:
  Motor scooter accident (V20-V29)

  V00.141 Fall from scooter (non-motorized)
  V00.142 Scooter (non-motorized) colliding with stationary object
  V00.148 Other scooter (non-motorized) accident (excludes scooter (non-motorized) collision with other land transport vehicle (V01-V09 with 5th character 9))

V00.18 Accident on other rolling-type pedestrian conveyance
  V00.181 Fall from other rolling-type pedestrian conveyance
  V00.182 Pedestrian on other rolling-type pedestrian conveyance with stationary object
  V00.188 Other accident on other rolling-type pedestrian conveyance

V00.2 Gliding-type pedestrian conveyance accident

V00.21 Ice-skates accident
  V00.211 Fall from ice-skates
  V00.212 Ice-skater colliding with stationary object
  V00.218 Other ice-skates accident (excludes ice-skater collision with other land transport vehicle (V01-V09 with 5th digit 9))

V00.22 Sled accident
  V00.221 Fall from sled
  V00.222 Sleder colliding with stationary object
V00.28  Other sled accident *(excludes sled collision with other land transport vehicle (V01-V09 with 5th digit 9))*
V00.28  Other gliding-type pedestrian conveyance accident
V00.281  Fall from other gliding-type pedestrian conveyance
V00.282  Pedestrian on other gliding-type pedestrian conveyance colliding with stationary object
V00.288  Other accident on other gliding-type pedestrian conveyance *(excludes gliding-type pedestrian conveyance collision with other land transport vehicle (V01-V09 with 5th digit 9))*

V00.3  Flat-bottomed pedestrian conveyance accident
V00.31  Snowboard accident
V00.311  Fall from snowboard
V00.312  Snowboarder colliding with stationary object
V00.318  Other snowboard accident *(excludes snowboarder collision with other land transport vehicle (V01-V09 with 5th digit 9))*
V00.32  Snow-ski accident
V00.331  Fall from snow-skis
V00.332  Snow-skier colliding with stationary object
V00.328  Other snow-ski accident *(excludes snow-skier collision with other land transport vehicle (V01-V09 with 5th digit 9))*

V00.8  Accident on other pedestrian conveyance
V00.81  Accident with wheelchair (powered)
V00.811  Fall from moving wheelchair (powered) *(excludes fall from non-moving wheelchair (W05))*
V00.812  Wheelchair (powered) colliding with stationary object
V00.818  Other accident with wheelchair (powered)
V00.82  Accident with baby stroller
V00.821  Fall from baby stroller
V00.822  Baby stroller colliding with stationary object
V00.828  Other accident with baby stroller
V00.89  Accident on other pedestrian conveyance
V00.891  Fall from other pedestrian conveyance
V00.892  Pedestrian on other pedestrian conveyance colliding with stationary object
V00.898  Other accident on other pedestrian conveyance *(excludes other pedestrian (conveyance) collision with other land transport vehicle (V01-V09 with 5th digit 9))*

V01  Pedestrian injured in collision with pedal cycle

The following 7th character extensions are to be added to each code from category V01:
- a initial encounter
- d subsequent encounter
- q sequelae
V01.0 Pedestrian injured in collision with pedal cycle in non-traffic accident
V01.00 Pedestrian on foot injured in collision with pedal cycle in non-traffic accident
Pedestrian NOS injured in collision with pedal cycle in non-traffic accident
V01.01 Pedestrian on roller skates injured in collision with pedal cycle in non-traffic accident
V01.02 Pedestrian on skateboard injured in collision with pedal cycle in non-traffic accident
V01.09 Pedestrian with other conveyance injured in collision with pedal cycle in non-traffic accident
Pedestrian with baby stroller injured in collision with pedal cycle in non-traffic accident
Pedestrian on ice-skates injured in collision with pedal cycle in non-traffic accident
Pedestrian on sled injured in collision with pedal cycle in non-traffic accident
Pedestrian on snowboard injured in collision with pedal cycle in non-traffic accident
Pedestrian on snow-skis injured in collision with pedal cycle in non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with pedal cycle in non-traffic accident

V01.1 Pedestrian injured in collision with pedal cycle in traffic accident
V01.10 Pedestrian on foot injured in collision with pedal cycle in traffic accident
Pedestrian NOS injured in collision with pedal cycle in traffic accident
V01.11 Pedestrian on roller-skates injured in collision with pedal cycle in traffic accident
V01.12 Pedestrian on skateboard injured in collision with pedal cycle in traffic accident
V01.19 Pedestrian with other conveyance injured in collision with pedal cycle in traffic accident
Pedestrian with baby stroller injured in collision with pedal cycle in traffic accident
Pedestrian on sled injured in collision with pedal cycle in traffic accident
Pedestrian injured on snowboard injured in collision with pedal cycle in traffic accident
Pedestrian on snow-skis injured in collision with pedal cycle in traffic accident
Pedestrian in wheelchair (powered) injured in collision with pedal cycle in traffic accident

V01.9 Pedestrian injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
V01.90 Pedestrian on foot injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
Pedestrian NOS injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
V01.91 Pedestrian on roller-skates injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
V01.92 Pedestrian on skateboard injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
V01.99 Pedestrian with other conveyance injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
Pedestrian with baby stroller injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
Pedestrian on ice-skates injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
Pedestrian on snowboard injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
Pedestrian on snow-skis injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with pedal cycle, unspecified whether traffic or non-traffic accident

**V02 Pedestrian injured in collision with two- or three-wheeled motor vehicle**

The following 7th character extensions are to be added to each code from category V02:

- a initial encounter
- d subsequent encounter
- q sequelae

**V02.0 Pedestrian injured in collision with two- or three-wheeled motor vehicle in non-traffic accident**

- **V02.00** Pedestrian on foot injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian NOS injured in collision with two- or three-wheeled motor vehicle in non-traffic accident

- **V02.01** Pedestrian on roller skates injured in collision with two- or three-wheeled motor vehicle in non-traffic accident

- **V02.02** Pedestrian on skateboard injured in collision with two- or three-wheeled motor vehicle in non-traffic accident

- **V02.09** Pedestrian with other conveyance injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian with baby stroller injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian on ice-skates injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian on sled injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian on snowboard injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian snow-skis injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
- Pedestrian in wheelchair (powered) injured in collision with two- or three-wheeled motor vehicle in non-traffic accident

**V02.1 Pedestrian injured in collision with two- or three-wheeled motor vehicle in traffic accident**

- **V02.10** Pedestrian on foot injured in collision with two- or three-wheeled motor vehicle in traffic accident
- Pedestrian NOS injured in collision with two- or three-wheeled motor vehicle in traffic accident

- **V02.11** Pedestrian on roller skates injured in collision with two- or three-wheeled motor vehicle in traffic accident

- **V02.12** Pedestrian on skateboard injured in collision with two- or three-wheeled motor vehicle in traffic accident
V02.19  Pedestrian with other conveyance injured in collision with two- or three-wheeled motor vehicle in traffic accident
Pedestrian with baby stroller injured in collision with two- or three-wheeled motor vehicle in traffic accident
Pedestrian on ice-skates injured in collision with two- or three-wheeled motor vehicle in traffic accident
Pedestrian on sled injured in collision with two- or three-wheeled motor vehicle in traffic accident
Pedestrian on snowboard injured in collision with two- or three-wheeled motor vehicle in traffic accident
Pedestrian on snow-skis injured in collision with two- or three-wheeled motor vehicle in traffic accident
Pedestrian in wheelchair (powered) injured in collision with two- or three-wheeled motor vehicle in traffic accident

V02.9  Pedestrian injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic of non-traffic accident

V02.90  Pedestrian on foot injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian NOS injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident

V02.91  Pedestrian on roller-skates injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident

V02.92  Pedestrian on skateboard injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident

V02.99  Pedestrian with other conveyance injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian with baby stroller injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on ice-skates injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on sled injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on snowboard injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on snow-skis injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with two- or three-wheeled motor vehicle, unspecified whether traffic or non-traffic accident
V03  Pedestrian injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V03:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

V03.0  Pedestrian injured in collision with car, pick-up truck, or van in non-traffic accident

V03.00  Pedestrian on foot injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian NOS injured in collision with car, pick-up truck, or van in non-traffic accident
V03.01  Pedestrian on roller-skates injured in collision with car, pick-up truck, or van in non-traffic accident
V03.02  Pedestrian on skateboard injured in collision with car, pick-up truck, or van in non-traffic accident
V03.09  Pedestrian with other conveyance injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian with baby stroller injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian on ice-skates injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian on sled injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian on snowboard injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian on snow-skis injured in collision with car, pick-up truck, or van in non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with car, pick-up truck, or van in non-traffic accident

V03.1  Pedestrian injured in collision with car, pick-up truck, or van in traffic accident

V03.10  Pedestrian on foot injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian NOS injured in collision with car, pick-up truck, or van in traffic accident
V03.11  Pedestrian on roller-skates injured in collision with car, pick-up truck, or van in traffic accident
V03.12  Pedestrian on skateboard injured in collision with car, pick-up truck, or van in traffic accident
V03.19  Pedestrian with other conveyance injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian with baby stroller injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian on ice-skates injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian on sled injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian on snowboard injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian on snow-skis injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian in wheelchair (powered) injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian on snow-skis injured in collision with car, pick-up truck, or van in traffic accident
Pedestrian in wheelchair (powered) injured in collision with car, pick-up truck, or van in traffic accident

V03.9 Pedestrian injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident

- V03.90 Pedestrian on foot injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
- V03.91 Pedestrian on roller skates injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
- V03.92 Pedestrian on skateboard injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
- V03.99 Pedestrian with other conveyance injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident

Pedestrian with baby stroller injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
Pedestrian on ice-skates injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
Pedestrian on sled injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
Pedestrian on snowboard injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
Pedestrian on snow-skis injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with car, pick-up truck, or van, unspecified whether traffic or non-traffic accident

V04 Pedestrian injured in collision with heavy transport vehicle or bus

Excludes:
Pedestrian injured in collision with military vehicle (V09.01, V09.21)

The following 7th character extensions are to be added to each code from category V04:
- a initial encounter
- d subsequent encounter
- q sequela

V04.0 Pedestrian injured in collision with heavy transport vehicle or bus in non-traffic accident

- V04.00 Pedestrian on foot injured collision with heavy transport vehicle or bus in non-traffic accident
- V04.01 Pedestrian on roller-skates injured collision with heavy transport vehicle or bus in non-traffic accident
- V04.02 Pedestrian on skateboard injured collision with heavy transport vehicle or bus in non-traffic accident
V04.09 Pedestrian with other conveyance injured collision with heavy transport vehicle or bus in non-traffic accident
Pedestrian with baby stroller injured collision with heavy transport vehicle or bus in non-traffic accident
Pedestrian on ice-skates injured collision with heavy transport vehicle or bus in non-traffic accident
Pedestrian on sled injured collision with heavy transport vehicle or bus in non-traffic accident
Pedestrian on snowboard injured collision with heavy transport vehicle or bus in non-traffic accident
Pedestrian on snow-skis injured collision with heavy transport vehicle or bus in non-traffic accident
Pedestrian in wheelchair (powered) injured collision with heavy transport vehicle or bus in non-traffic accident

V04.1 Pedestrian injured collision with heavy transport vehicle or bus in traffic accident

V04.10 Pedestrian on foot injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian NOS injured in collision with heavy transport vehicle or bus in traffic accident

V04.11 Pedestrian on roller-skates injured in collision with heavy transport vehicle or bus in traffic accident

V04.12 Pedestrian on skateboard injured in collision with heavy transport vehicle or bus in traffic accident

V04.19 Pedestrian with other conveyance injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian with baby stroller injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian on ice-skates injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian on sled injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian on snowboard injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian on snow-skis injured in collision with heavy transport vehicle or bus in traffic accident
Pedestrian in wheelchair (powered) injured in collision with heavy transport vehicle or bus in traffic accident

V04.9 Pedestrian injured collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident

V04.90 Pedestrian on foot injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident

V04.91 Pedestrian on roller-skates injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident

V04.92 Pedestrian on skateboard injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident

V04.99 Pedestrian with other conveyance injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident
Pedestrian with baby stroller injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident
Pedestrian on ice-skates injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident
Pedestrian on sled injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident
Pedestrian on snowboard injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident
Pedestrian on snow-skis injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with heavy transport vehicle or bus, unspecified whether traffic or non-traffic accident

**V05  Pedestrian injured in collision with railway train or railway vehicle**

The following 7th character extensions are to be added to each code from category V05:

- a  initial encounter
- d  subsequent encounter
- q  sequelae

**V05.0  Pedestrian injured in collision with railway train or railway vehicle in non-traffic accident**

- **V05.00** Pedestrian on foot injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian NOS injured in collision with railway train or railway vehicle in non-traffic accident

- **V05.01** Pedestrian on roller-skates injured in collision with railway train or railway vehicle in non-traffic accident

- **V05.02** Pedestrian on skateboard injured in collision with railway train or railway vehicle in non-traffic accident

- **V05.09** Pedestrian with other conveyance injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian with baby stroller injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian on ice-skates injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian on sled injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian on snowboard injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian on snow-skis injured in collision with railway train or railway vehicle in non-traffic accident
- Pedestrian in wheelchair (powered) injured in collision with railway train or railway vehicle in non-traffic accident

**V05.1  Pedestrian injured in collision with railway train or railway train or railway vehicle in traffic accident**

- **V05.10** Pedestrian on foot injured in collision with railway train or railway vehicle in traffic accident
- Pedestrian NOS injured in collision with railway train or railway vehicle in traffic accident

- **V05.11** Pedestrian on roller-skates injured in collision with railway train or railway vehicle in traffic accident
V05.12 Pedestrian on skateboard injured in collision with railway train or railway vehicle in traffic accident

V05.19 Pedestrian with other conveyance injured in collision with railway train or railway vehicle in traffic accident
Pedestrian with baby stroller injured in collision with railway train or railway vehicle in traffic accident
Pedestrian on ice-skates injured in collision with railway train or railway vehicle in traffic accident
Pedestrian on sled injured in collision with railway train or railway vehicle in traffic accident
Pedestrian on snowboard injured in collision with railway train or railway vehicle in traffic accident
Pedestrian on snow-skis injured in collision with railway train or railway vehicle in traffic accident
Pedestrian in wheelchair (powered) injured in collision with railway train or railway vehicle in traffic accident

V05.9 Pedestrian injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident

V05.9 Pedestrian on foot injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian NOS injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident

V05.91 Pedestrian on roller-skates injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident

V05.92 Pedestrian on skateboard injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident

V05.99 Pedestrian with other conveyance injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian with baby stroller injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on ice-skates injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on sled injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on snowboard injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on snow-skis injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with railway train or railway vehicle, unspecified whether traffic or non-traffic accident
V06  Pedestrian injured in collision with other motor vehicle

*Includes:*

- Collision with animal-drawn vehicle, animal being ridden, non-powered streetcar

*Excludes:*

- Pedestrian in collision with pedestrian conveyance (V00.0_)

The following 7th character extensions are to be added to each code from category V06:

- a  initial encounter
- d  subsequent encounter
- q  sequelae

### V06.0 Pedestrian injured in collision with other non-motor vehicle in non-traffic accident

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V06.00</td>
<td>Pedestrian on foot injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian NOS injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td>V06.01</td>
<td>Pedestrian on roller-skates injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td>V06.02</td>
<td>Pedestrian on skateboard injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td>V06.09</td>
<td>Pedestrian with other conveyance injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian with baby stroller injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian on ice-skates injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian on sled injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian on snowboard injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian on snow-skis injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian in wheelchair (powered) injured in collision with other non-motor vehicle in non-traffic accident</td>
</tr>
</tbody>
</table>

### V06.1 Pedestrian injured in collision with other non-motor vehicle in traffic accident

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V06.10</td>
<td>Pedestrian on foot injured in collision with other non-motor vehicle in traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian NOS injured in collision with other non-motor vehicle in traffic accident</td>
</tr>
<tr>
<td>V06.11</td>
<td>Pedestrian on roller-skates injured in collision with other non-motor vehicle in traffic accident</td>
</tr>
<tr>
<td>V06.12</td>
<td>Pedestrian on skateboard injured in collision with other non-motor vehicle in traffic accident</td>
</tr>
<tr>
<td>V06.19</td>
<td>Pedestrian with other conveyance injured in collision with other non-motor vehicle in traffic accident</td>
</tr>
<tr>
<td></td>
<td>Pedestrian with baby stroller injured in collision with other non-motor vehicle in traffic accident</td>
</tr>
</tbody>
</table>
Pedestrian on ice-skates injured in collision with other non-motor vehicle in traffic accident
Pedestrian on sled injured in collision with other non-motor vehicle in traffic accident
Pedestrian on snowboard injured in collision with other non-motor vehicle in traffic accident
Pedestrian on snow-skis injured in collision with other non-motor vehicle in traffic accident
Pedestrian in wheelchair (powered) injured in collision with other non-motor vehicle in traffic accident

**V06.9 Pedestrian injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident**

V06.90 Pedestrian on foot injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian NOS injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
V06.91 Pedestrian on roller-skates injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
V06.92 Pedestrian on skateboard injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
V06.99 Pedestrian with other conveyance injured in collision with other non-motor vehicle, unspecified whether traffic or non-motor accident
Pedestrian with baby stroller injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on ice-skates injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on sled injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on snowboard injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian on snow-skis injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident
Pedestrian in wheelchair (powered) injured in collision with other non-motor vehicle, unspecified whether traffic or non-traffic accident

**V09 Pedestrian injured in other and unspecified transport accidents**

The following 7th character extensions are to be added to each code from category V09:

a initial encounter
d subsequent encounter
q sequelae

**V09.0 Pedestrian injured in non-traffic accident involving other and unspecified motor vehicles**

V09.00 Pedestrian injured in non-traffic accident involving unspecified motor vehicles
V09.01 Pedestrian injured in non-traffic accident involving military vehicle
V09.09 Pedestrian injured in non-traffic accident involving other motor vehicles
Pedestrian injured in non-traffic accident by special vehicle

**V09.1 Pedestrian injured in unspecified non-traffic accident**
V09.2  Pedestrian injured in traffic accident involving other and unspecified motor vehicles
   V09.20  Pedestrian injured in traffic accident involving unspecified motor vehicles
   V09.21  Pedestrian injured in traffic accident involving military vehicle
   V09.29  Pedestrian injured in traffic accident involving other motor vehicles
V09.3  Pedestrian injured in unspecified traffic accident
V09.9  Pedestrian injured in unspecified transport accident

Pedal cycle rider injured in transport accident (V10-V19)

Includes:
   Any non-motorized vehicle, excluding and animal-drawn vehicle, or a sidecar or trailer attached to the pedal cycle

Excludes:
   Rupture of pedal cycle tire (W37.0)

V10  Pedal cycle rider injured in collision with pedestrian or animal

Excludes:
   Pedal cycle rider collision with animal-drawn vehicle or animal being ridden (V16._)

The following 7th character extensions are to be added to each code from category V10:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

V10.0  Pedal cycle driver injured collision with pedestrian or animal in non-traffic accident
V10.1  Pedal cycle passenger injured in collision with pedestrian or animal in non-traffic accident
V10.2  Unspecified pedal cyclist injured in collision with pedestrian or animal in non-traffic accident
V10.3  Person boarding or alighting a pedal cycle injured in collision with pedestrian or animal
V10.4  Pedal cycle driver injured in collision with pedestrian or animal in traffic accident
V10.5  Pedal cycle passenger injured in collision with pedestrian or animal in traffic accident
V10.9  Unspecified pedal cyclist injured in collision with pedestrian or animal in traffic accident

V11  Pedal cycle rider injured in collision with other pedal cycle

The following 7th character extensions are to be added to each code from category V11:
   a  initial encounter
   d  subsequent encounter
   q  sequelae
V11.0 Pedal cycle driver injured in collision with other pedal cycle in non-traffic accident
V11.1 Pedal cycle passenger injured in collision with other pedal cycle in non-traffic accident
V11.2 Unspecified pedal cyclist injured in collision with other pedal cycle in non-traffic accident
V11.3 Person boarding or alighting a pedal cycle injured in collision with other pedal cycle
V11.4 Pedal cycle driver injured in collision with other pedal cycle in traffic accident
V11.5 Pedal cycle passenger injured in collision with other pedal cycle in traffic accident
V11.9 Unspecified pedal cyclist injured in collision with other pedal cycle in traffic accident

V12 Pedal cycle ridden injured in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V12:
    a initial encounter
    d subsequent encounter
    q sequelae

V12.0 Pedal cycle driver injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V12.1 Pedal cycle passenger injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V12.2 Unspecified pedal cyclist injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V12.3 Person boarding or alighting a pedal cycle injured in collision with two- or three-wheeled motor vehicle
V12.4 Pedal cycle driver injured in collision with two- or three-wheeled motor vehicle in traffic
V12.5 Pedal cycle passenger injured in collision with two- or three-wheeled motor vehicle in traffic accident
V12.9 Unspecified pedal cyclist injured in collision with two- or three-wheeled motor vehicle in traffic accident

V13 Pedal cycle rider injured in collision with, car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V13:
    a initial encounter
    d subsequent encounter
    q sequelae

V13.0 Pedal cycle driver injured in collision with car, pick-up truck, or van in non-traffic accident
V13.1 Pedal cycle passenger injured in collision with car, pick-up truck, or van in non-traffic accident
V13.2 Unspecified pedal cyclist injured in collision with car, pick-up truck, or van in non-traffic accident
V13.3 Person boarding or alighting a pedal cycle injured in collision with car, pick-up truck, or van
V13.4 Pedal cycle driver injured in collision with car, pick-up truck, or van in traffic accident
V13.5 Pedal cycle passenger injured in collision with car, pick-up truck, or van in traffic accident
V13.9 Unspecified pedal cyclist injured in collision with car, pick-up truck, or van in traffic accident

V14 Pedal cycle rider injured in collision with heavy transport vehicle or bus

Excludes:
Pedal cycle rider injured in collision with military vehicle (V19.81)

The following 7th character extensions are to be added to each code from category V14:
   a initial encounter
   d subsequent encounter
   q sequelae

V14.0 Pedal cycle driver injured in collision with heavy transport vehicle or bus in non-traffic accident
V14.1 Pedal cycle passenger injured in collision with heavy transport vehicle or bus in non-traffic accident
V14.2 Unspecified pedal cyclist injured in collision with heavy transport vehicle or bus in non-traffic accident
V14.3 Person boarding or alighting a pedal cycle injured in collision with heavy transport vehicle or bus
V14.4 Pedal cycle driver injured in collision with heavy transport vehicle or bus in traffic accident
V14.5 Pedal cycle passenger injured in collision with heavy transport vehicle or bus in traffic accident
V14.9 Unspecified pedal cyclist injured in collision with heavy transport vehicle or bus in traffic accident

V15 Pedal cycle rider injured in collision with railway train or railway vehicle

The following 7th character extensions are to be added to each code from category V15:
   a initial encounter
   d subsequent encounter
   q sequelae

V15.0 Pedal cycle driver injured in collision with railway train or railway vehicle in non-traffic accident
V15.1 Pedal cycle passenger injured in collision with railway train or railway vehicle in non-traffic accident
V15.2 Unspecified pedal cyclist injured in collision with railway train or railway vehicle in non-traffic accident
V15.3 Person boarding or alighting a pedal cycle injured in collision with railway train or railway vehicle
V15.4 Pedal cycle driver injured in collision with railway train or railway vehicle in traffic accident
V15.5 Pedal cycle passenger injured in collision with railway train or railway vehicle in traffic accident
V15.9 Unspecified pedal cyclist injured in collision with railway train or railway vehicle in traffic accident

V16 Pedal cycle rider injured in collision with other non-motor vehicle

The following 7th character extensions are to be added to each code from category V16:
   a initial encounter
   d subsequent encounter
   q sequelae

V16.0 Pedal cycle driver injured in collision with other non-motor vehicle in non-traffic accident
V16.1 Pedal cycle passenger injured in collision with other non-motor vehicle in non-traffic accident
V16.2 Unspecified pedal cyclist injured in collision with other non-motor vehicle in non-traffic accident
V16.3 Person boarding or alighting a pedal cycle injured in collision with other non-motor vehicle in non-traffic accident
V16.4 Pedal cycle driver injured in collision with other non-motor vehicle in traffic accident
V16.5 Pedal cycle passenger injured in collision with other non-motor vehicle in traffic accident
V16.9 Unspecified pedal cyclist injured in collision with other non-motor vehicle in traffic accident

V17 Pedal cycle rider injured in collision with fixed or stationary object

The following 7th character extensions are to be added to each code from category V17:
   a initial encounter
   d subsequent encounter
   q sequelae

V17.0 Pedal cycle driver injured in collision with fixed or stationary object in non-traffic accident
V17.1 Pedal cycle passenger injured in collision with fixed or stationary object in non-traffic accident
V17.2 Unspecified pedal cyclist injured in collision with fixed or stationary object in non-traffic accident
V17.3 Person boarding or alighting a pedal cycle injured in collision with fixed or stationary object
V17.4 Pedal cycle driver injured in collision with fixed or stationary object in traffic accident
V17.5 Pedal cycle passenger injured in collision with fixed or stationary object in traffic accident
V17.9 Unspecified pedal cyclist injured in collision with fixed or stationary object in traffic accident
V18 Pedal cycle rider injured in non-collision transport accident

*Includes:*
- Fall or thrown from pedal cycle (without antecedent collision)
- Overturning pedal cycle NOS
- Overturning pedal cycle without collision

The following 7th character extensions are to be added to each code from category V18:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

**V18.0** Pedal cycle driver injured in non-collision transport accident in non-traffic accident
**V18.1** Pedal cycle passenger injured in non-collision transport accident in non-traffic accident
**V18.2** Unspecified pedal cyclist injured in non-collision transport accident in non-traffic accident
**V18.3** Person boarding or alighting a pedal cycle injured in non-collision transport accident
**V18.4** Pedal cycle driver injured in non-collision transport accident in traffic accident
**V18.5** Pedal cycle passenger injured in non-collision transport accident in traffic accident
**V18.9** Unspecified pedal cyclist injured in non-collision transport accident in traffic accident

V19 Pedal cycle rider injured in other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V19:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

**V19.0** Pedal cycle driver injured in collision with other and unspecified motor vehicles in non-traffic accident
  - **V19.00** Pedal cycle driver injured in collision with other and unspecified motor vehicles in non-traffic accident
  - **V19.09** Pedal cycle driver injured in collision with other motor vehicles in non-traffic accident

**V19.1** Pedal cycle passenger injured in collision with other and unspecified motor vehicles in non-traffic accident
  - **V19.10** Pedal cycle passenger injured in collision with unspecified motor vehicles in non-traffic accident
  - **V19.19** Pedal cycle passenger injured in collision with other motor vehicles in non-traffic accident
V19.2 Unspecified pedal cyclist injured in collision with other and unspecified motor vehicles in non-traffic accident
  V19.20 Unspecified pedal cyclist injured in collision with unspecified motor vehicles in non-traffic accident
  Pedal cycle collision, NOS
  V19.29 Unspecified pedal cyclist injured in collision with other motor vehicles in non-traffic accident
V19.3 Pedal cyclist (driver) (passenger) injured in unspecified non-traffic accident
  Pedal cycle accident NOS, non-traffic pedal cyclist injured in non-traffic accident NOS
V19.4 Pedal cycle driver injured in collision with other and unspecified motor vehicles in traffic accident
  V19.40 Pedal cycle driver injured in collision with unspecified motor vehicles in traffic accident
  V19.49 Pedal cycle driver injured in collision with other motor vehicles in traffic accident
V19.5 Pedal cycle passenger injured in collision with other and unspecified motor vehicles in traffic accident
  V19.50 Pedal cycle passenger injured in collision with unspecified motor vehicles in traffic accident
  V19.59 Pedal cycle passenger injured in collision with other and unspecified motor vehicles in traffic accident
V19.6 Unspecified pedal cyclist injured in collision with other and unspecified motor vehicles in traffic accident
  V19.60 Unspecified pedal cyclist injured in collision with unspecified motor vehicles in traffic accident
  Pedal cycle collision NOS (traffic)
  V19.69 Unspecified pedal cyclist injured in collision with other motor vehicles in traffic accident
V19.8 Pedal cyclist (driver) (passenger) injured in other specified transport accidents
  V19.81 Pedal cyclist (driver) (passenger) injured in transport accident with military vehicle
  V19.88 Pedal cyclist (driver) (passenger) injured in other specified transport accidents
V19.9 Pedal cyclist (driver) (passenger) injured in unspecified traffic accident
  Pedal cycle accident NOS
Motorcycle rider injured in transport accident (V20-V29)

*Includes:*
- Moped
- Motorcycle with sidecar
- Motorized bicycle
- Motor scooter

*Excludes:*
- Three-wheeled motor vehicle (V30-V39)

**V20  Motorcycle rider injured in collision with pedestrian or animal**

*Excludes:*
- Motorcycle rider collision with animal-drawn vehicle or animal being ridden (V26._)

The following 7th character extensions are to be added to each code from category V20:
- a initial encounter
- d subsequent encounter
- q sequelae

**V20.0  Motorcycle driver injured in collision with pedestrian or animal in non-traffic accident**
**V20.1  Motorcycle passenger injured in collision with pedestrian or animal in non-traffic accident**
**V20.2  Unspecified motorcycle rider injured in collision with pedestrian or animal in non-traffic accident**
**V20.3  Person boarding or alighting a motorcycle injured in collision with pedestrian or animal**
**V20.4  Motorcycle driver injured in collision with pedestrian or animal in traffic accident**
**V20.5  Motorcycle passenger injured in collision with pedestrian or animal in traffic accident**
**V20.9  Unspecified motorcycle rider injured in collision with pedestrian or animal in traffic accident**

**V21  Motorcycle rider injured in collision with pedal cycle**

The following 7th character extensions are to be added to each code from category V21:
- a initial encounter
- d subsequent encounter
- q sequelae

**V21.0  Motorcycle driver injured in collision with pedal cycle in non-traffic accident**
**V21.1  Motorcycle passenger injured in collision with pedal cycle in non-traffic accident**
**V21.2  Unspecified motorcycle rider injured in collision with pedal cycle in non-traffic accident**
V21.3 Person boarding or alighting a motorcycle injured in collision with pedal cycle
V21.4 Motorcycle driver injured in collision with pedal cycle in traffic accident
V21.5 Motorcycle passenger injured in collision with pedal cycle in traffic accident
V21.9 Unspecified motorcycle rider injured in collision with pedal cycle in traffic accident

V22 Motorcycle rider injured in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V22:
  a initial encounter
  d subsequent encounter
  q sequelae

V22.0 Motorcycle driver injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V22.1 Motorcycle passenger injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V22.2 Unspecified motorcycle rider injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V22.3 Person boarding or alighting a motorcycle injured in collision with two- or three-wheeled motor vehicle
V22.4 Motorcycle driver injured in collision with two- or three-wheeled motor vehicle in traffic accident
V22.5 Motorcycle passenger injured in collision with two- or three-wheeled motor vehicle in traffic accident
V22.9 Unspecified motorcycle rider injured in collision with two- or three-wheeled motor vehicle in traffic accident

V23 Motorcycle rider injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V23:
  a initial encounter
  d subsequent encounter
  q sequelae

V23.0 Motorcycle driver injured in collision with car, pick-up truck or van in non-traffic accident
V23.1 Motorcycle passenger injured in collision with car, pick-up truck or van in non-traffic accident
V23.2 Unspecified motorcycle rider injured in collision with car, pick-up truck or van in non-traffic accident
V23.3 Person boarding or alighting a motorcycle injured in collision with car, pick-up truck or van
V23.4 Motorcycle driver injured in collision with car, pick-up truck or van in traffic accident
V23.5 Motorcycle passenger injured in collision with car, pick-up truck or van in traffic accident
V23.9  Unspecified motorcycle rider injured in collision with car, pick-up truck or van in traffic accident

V24  Motorcycle rider injured in collision with heavy transport vehicle or bus

Excludes:
  Motorcycle rider injured in collision with military vehicle (V29.81)

The following 7th character extensions are to be added to each code from category V24:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V24.0  Motorcycle driver injured in collision with heavy transport vehicle or bus in non-traffic accident
V24.1  Motorcycle passenger injured in collision with heavy transport vehicle or bus in non-traffic accident
V24.2  Unspecified motorcycle rider injured in collision with heavy transport vehicle or bus in non-traffic accident
V24.3  Person boarding or alighting a motorcycle injured in collision with heavy transport vehicle or bus
V24.4  Motorcycle driver injured in collision with heavy transport vehicle or bus in traffic accident
V24.5  Motorcycle passenger injured in collision with heavy transport vehicle or bus in traffic accident
V24.9  Unspecified motorcycle rider injured in collision with heavy transport vehicle or bus in traffic accident

V25  Motorcycle rider injured in collision with railway train or railway vehicle

The following 7th character extensions are to be added to each code from category V25:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V25.0  Motorcycle driver injured in collision with railway train or railway vehicle in non-traffic accident
V25.1  Motorcycle passenger injured in collision with railway train or railway vehicle in non-traffic accident
V25.2  Unspecified motorcycle rider injured in collision with railway train or railway vehicle in non-traffic accident
V25.3  Person boarding or alighting a motorcycle injured in collision with railway train or railway vehicle
V25.4  Motorcycle driver injured in collision with railway train or railway vehicle in traffic accident
V25.5  Motorcycle passenger injured in collision with railway train or railway vehicle in traffic accident
V25.9 Unspecified motorcycle rider injured in collision with railway train or railway vehicle in traffic accident

V26 Motorcycle rider injured in collision with other non motor vehicle

The following 7th character extensions are to be added to each code from category V26:
  a initial encounter
  d subsequent encounter
  q sequelae

V26.0 Motorcycle driver injured in collision with other non-motor vehicle in non-traffic accident
V26.1 Motorcycle passenger injured in collision with other non-motor vehicle in non-traffic accident
V26.2 Unspecified motorcycle rider injured in collision with other non-motor vehicle in non-traffic accident
V26.3 Person boarding or alighting a motorcycle injured in collision with other non-motor vehicle
V26.4 Motorcycle driver injured in collision with other non-motor vehicle in traffic accident
V26.5 Motorcycle passenger injured in collision with other non-motor vehicle in traffic accident
V26.9 Unspecified motorcycle rider injured in collision with other non-motor vehicle in traffic accident

V27 Motorcycle rider injured in collision with fixed or stationary object

The following 7th character extensions are to be added to each code from category V27:
  a initial encounter
  d subsequent encounter
  q sequelae

V27.0 Motorcycle driver injured in collision with fixed or stationary object in non-traffic accident
V27.1 Motorcycle passenger injured in collision with fixed or stationary object in non-traffic accident
V27.2 Unspecified motorcycle rider injured in collision with fixed or stationary object in non-traffic accident
V27.3 Person boarding or alighting a motorcycle injured in collision with fixed or stationary object
V27.4 Motorcycle driver injured in collision with fixed or stationary object in traffic accident
V27.5 Motorcycle passenger injured in collision with fixed or stationary object in traffic accident
V27.9 Unspecified motorcycle rider injured in collision with fixed or stationary object in traffic accident
V28 Motorcycle rider injured in non-collision transport accident

Includes:
Fall or thrown from motorcycle (without antecedent collision)
Overturning motorcycle NOS
Overturning motorcycle without collision

The following 7th character extensions are to be added to each code from category V28:
a initial encounter
d subsequent encounter
q sequelae

V28.0 Motorcycle driver injured in non-collision transport accident in non-traffic accident
V28.1 Motorcycle passenger injured in non-collision transport accident in non-traffic accident
V28.2 Unspecified motorcycle rider injured in non-collision transport accident in non-traffic accident
V28.3 Person boarding or alighting a motorcycle injured in non-collision transport accident
V28.4 Motorcycle driver injured in non-collision transport accident in traffic accident
V28.5 Motorcycle passenger injured in non-collision transport accident in traffic accident
V28.9 Unspecified motorcycle rider injured in non-collision transport accident in traffic accident

V29 Motorcycle rider injured in other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V29:
a initial encounter
d subsequent encounter
q sequelae

V29.0 Motorcycle driver injured in collision with other and unspecified motor vehicles in non-traffic accident
V29.00 Motorcycle driver injured in collision with unspecified motor vehicles in non-traffic accident
V29.09 Motorcycle driver injured in collision with other motor vehicles in non-traffic accident
V29.1 Motorcycle passenger injured in collision with other and unspecified motor vehicles in non-traffic accident
V29.10 Motorcycle passenger injured in collision with unspecified motor vehicles in non-traffic accident
V29.19 Motorcycle passenger injured in collision with other motor vehicles in non-traffic accident
V29.2 Unspecified motorcycle rider injured in collision with other and unspecified motor vehicles in non-traffic accident
V29.20 Unspecified motorcycle rider injured in collision with unspecified motor vehicles in non-traffic accident
Motorcycle collision NOS, non-traffic
V29.29 Unspecified motorcycle rider injured in collision with other motor vehicles in non-traffic accident
V29.3 Motorcycle rider (driver) (passenger) injured in unspecified non-traffic accident
Motorcycle accident NOS, non-traffic
Motorcycle rider injured in non-traffic accident, NOS
V29.4 Motorcycle driver injured in collision with other and unspecified motor vehicles in traffic accident
V29.40 Motorcycle driver injured in collision with unspecified motor vehicles in traffic accident
V29.49 Motorcycle driver injured in collision with other motor vehicles in traffic accident
V29.5 Motorcycle passenger injured in collision with other and unspecified motor vehicles in traffic accident
V29.50 Motorcycle passenger injured in collision with other and unspecified motor vehicles in traffic accident
V29.59 Motorcycle passenger injured in collision with other motor vehicles in traffic accident
V29.6 Unspecified motorcycle rider injured in collision with other and unspecified motor vehicles in traffic accident
V29.60 Unspecified motorcycle rider injured in collision with unspecified motor vehicles in traffic accident
Motorcycle collision NOS (traffic)
V29.69 Unspecified motorcycle rider injured in collision with other motor vehicles in traffic accident
V29.8 Motorcycle rider (driver) (passenger) injured in other specified transport accidents
V29.81 Motorcycle rider (driver) (passenger) injured in transport accident with military vehicle
V29.88 Motorcycle rider (driver) (passenger) injured in other specified transport accidents
V29.9 Motorcycle rider (driver) (passenger) injured in unspecified traffic accident
Motorcycle accident NOS
Occupant of three-wheeled motor vehicle injured in transport accident (V30-V39)

Includes:
- Motorized tricycle
- Motorized rickshaw
- Three-wheeled motor car

Exclusion:
- All-terrain vehicles (V86._)
- Motorcycle with sidecar (V20-V29)
- Vehicle designed primarily for off-road use (V86._)

V30 Occupant of three-wheeled motor vehicle injured in collision with pedestrian or animal

Excludes:
- Three-wheeled motor vehicle collision with animal-drawn vehicle or animal being ridden (V36._)

The following 7th character extensions are to be added to each code from category V30:
  a initial encounter
  d subsequent encounter
  q sequelae

V30.0 Driver of three-wheeled motor vehicle injured in collision with pedestrian or animal in non-traffic accident
V30.1 Passenger in three-wheeled motor vehicle injured in collision with pedestrian or animal in non-traffic accident
V30.2 Person on outside of three-wheeled motor vehicle injured in collision with pedestrian or animal in non-traffic accident
V30.3 Unspecified occupant of three-wheeled motor vehicle injured in collision with pedestrian or animal in non-traffic accident
V30.4 Person boarding or alighting a three-wheeled motor vehicle injured in collision with pedestrian or animal
V30.5 Driver of three-wheeled motor vehicle injured in collision with pedestrian or animal in traffic accident
V30.6 Passenger in three-wheeled motor vehicle injured in collision with pedestrian or animal in traffic accident
V30.7 Person on outside of three-wheeled motor vehicle injured in collision with pedestrian or animal in traffic accident
V30.9 Unspecified occupant of three-wheeled motor vehicle injured in collision with pedestrian or animal in traffic accident
V31  Occupant of three-wheeled motor vehicle injured in collision with pedal cycle

The following 7th character extensions are to be added to each code from category V31:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

V31.0  Driver of three-wheeled motor vehicle injured in collision with pedal cycle in non-traffic accident
V31.1  Passenger in three-wheeled motor vehicle injured in collision with pedal cycle in non-traffic accident
V31.2  Person on outside of three-wheeled motor vehicle injured in collision with pedal cycle in non-traffic accident
V31.3  Unspecified occupant of three-wheeled motor vehicle injured in collision with pedal cycle in non-traffic accident
V31.4  Person boarding or alighting a three-wheeled motor vehicle injured in collision with pedal cycle
V31.5  Driver of three-wheeled motor vehicle injured in collision with pedal cycle in traffic accident
V31.6  Passenger in three-wheeled motor vehicle injured in collision with pedal cycle in traffic accident
V31.7  Person on outside of three-wheeled motor vehicle injured in collision with pedal cycle in traffic accident
V31.9  Unspecified occupant of three-wheeled motor vehicle injured in collision with pedal cycle in traffic accident

V32  Occupant of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V32:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

V32.0  Driver of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V32.1  Passenger in three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V32.2  Person on outside of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V32.3  Unspecified occupant of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V32.4  Person boarding or alighting a three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle
V32.5  Driver of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident
V32.6  Passenger in three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident
V32.7 Person on outside of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident
V32.9 Unspecified occupant of three-wheeled motor vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident

V33 Occupant of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V33:
   a initial encounter
   d subsequent encounter
   q sequelae

V33.0 Driver of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in non-traffic accident
V33.1 Passenger in three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in non-traffic accident
V33.2 Person on outside of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in non-traffic accident
V33.3 Unspecified occupant of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in non-traffic accident
V33.4 Person boarding or alighting a three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in traffic accident
V33.5 Driver of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in traffic accident
V33.6 Passenger in three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in traffic accident
V33.7 Person on outside of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in traffic accident
V33.9 Unspecified occupant of three-wheeled motor vehicle injured in collision with car, pick-up truck, or van in traffic accident

V34 Occupant of three-wheeled motor vehicle injured in collision with heavy transport vehicle of bus

Excludes:
   Occupant of three-wheeled motor vehicle injured in collision with military vehicle (V39.81)

The following 7th character extensions are to be added to each code from category V34:
   a initial encounter
   d subsequent encounter
   q sequelae

V34.0 Driver of three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V34.1 Passenger in three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V34.2 Person on outside of three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V34.3 Unspecified occupant of three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V34.4 Person boarding or alighting a three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus
V34.5 Driver of three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in traffic accident
V34.6 Passenger in three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in traffic accident
V34.7 Person on outside of three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in traffic accident
V34.9 Unspecified occupant of three-wheeled motor vehicle injured in collision with heavy transport vehicle or bus in traffic accident

V35 Occupant on three-wheeled motor vehicle injured in collision with railway train or railway vehicle

The following 7th character extensions are to be added to each code from category V35:
  a initial encounter
  d subsequent encounter
  q sequelae

V35.0 Driver of three-wheeled motor vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V35.1 Passenger in three-wheeled motor vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V35.2 Person on outside of three-wheeled motor vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V35.3 Unspecified occupant of three-wheeled motor vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V35.4 Person boarding or alighting a three-wheeled motor vehicle injured in collision with railway train or railway vehicle
V35.5 Driver of three-wheeled motor vehicle injured in collision with railway train or railway vehicle in traffic accident
V35.6 Passenger in three-wheeled motor vehicle injured in collision with railway train or railway vehicle in traffic accident
V35.7 Person on outside of three-wheeled motor vehicle injured in collision with railway train or railway vehicle in traffic accident
V35.9 Unspecified occupant of three-wheeled motor vehicle injured in collision with railway train or railway vehicle in traffic accident
V36  **Occupant of three-wheeled motor vehicle injured in collision with other non-motor vehicle**

*Includes:*
- Collision with animal-drawn vehicle
- Animal being ridden
- Streetcar

The following 7th character extensions are to be added to each code from category V36:
- a initial encounter
- d subsequent encounter
- q sequelae

V36.0  **Driver of three-wheeled motor vehicle injured in collision with other non-motor vehicle in non-traffic accident**
V36.1  **Passenger in three-wheeled motor vehicle injured in collision with other non-motor vehicle in non-traffic accident**
V36.2  **Person on outside of three-wheeled motor vehicle injured in collision with other non-motor vehicle in non-traffic accident**
V36.3  **Unspecified occupant of three-wheeled motor vehicle injured in collision with other non-motor vehicle in non-traffic accident**
V36.4  **Person boarding or alighting a three-wheeled motor vehicle injured in collision with other non-motor vehicle**
V36.5  **Driver of three-wheeled motor vehicle injured in collision with other non-motor vehicle in traffic accident**
V36.6  **Passenger in three-wheeled motor vehicle injured in collision with other non-motor vehicle in traffic accident**
V36.7  **Person on outside of three-wheeled motor vehicle injured in collision with other non-motor vehicle in traffic accident**
V36.9  **Unspecified occupant of three-wheeled motor vehicle injured in collision with other non-motor vehicle in traffic accident**

V37  **Occupant of three-wheeled motor vehicle injured in collision with fixed or stationary object**

The following 7th character extensions are to be added to each code from category V37:
- a initial encounter
- d subsequent encounter
- q sequelae

V37.0  **Driver of three-wheeled motor vehicle injured in collision with fixed or stationary object in non-traffic accident**
V37.1  **Passenger in three-wheeled motor vehicle injured in collision with fixed or stationary object in non-traffic accident**
V37.2  **Person on outside of three-wheeled motor vehicle injured in collision with fixed or stationary object in non-traffic accident**
V37.3  **Unspecified occupant of three-wheeled motor vehicle injured in collision with fixed or stationary object in non-traffic accident**
V37.4  **Person boarding or alighting a three-wheeled motor vehicle injured in collision with fixed or stationary object**
V37.5  Driver of three-wheeled motor vehicle injured in collision with fixed or stationary object in traffic accident
V37.6  Passenger in three-wheeled motor vehicle injured in collision with fixed or stationary object in traffic accident
V37.7  Person on outside of three-wheeled motor vehicle injured in collision with fixed or stationary object in traffic accident
V37.9  Unspecified occupant of three-wheeled motor vehicle injured in collision with fixed or stationary object in traffic accident

V38  Occupant of three-wheeled motor vehicle injured in non-collision transport accident

Includes:
Fall or thrown from three-wheeled motor vehicle
Overturning of three-wheeled motor vehicle NOS
Overturning of three-wheeled motor vehicle without collision

The following 7th character extensions are to be added to each code from category V38:
- a initial encounter
- d subsequent encounter
- q sequelae

V38.0  Driver of three-wheeled motor vehicle injured in non-collision transport accident in non-traffic accident
V38.1  Passenger in three-wheeled motor vehicle injured in non-collision transport accident in non-traffic accident
V38.2  Person on outside of three-wheeled motor vehicle injured in non-collision transport accident in non-traffic accident
V38.3  Unspecified occupant of three-wheeled motor vehicle injured in non-collision transport accident in non-traffic accident
V38.4  Person boarding or alighting a three-wheeled motor vehicle injured in non-collision transport accident
V38.5  Driver of three-wheeled motor vehicle injured in non-collision transport accident in traffic accident
V38.6  Passenger in three-wheeled motor vehicle injured in non-collision transport accident in traffic accident
V38.7  Person on outside of three-wheeled motor vehicle injured in non-collision transport accident in traffic accident
V38.9  Unspecified occupant of three-wheeled motor vehicle injured in non-collision transport accident in traffic accident
V39  Occupant of three-wheeled motor vehicle injured in collision with other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V39:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V39.0  Driver of three-wheeled motor vehicle injured in collision with other and unspecified motor vehicles in non-traffic accident

V39.00  Driver of three-wheeled motor vehicle injured in collision with unspecified motor vehicles in non-traffic accident
V39.09  Driver of three-wheeled motor vehicle injured in collision with other motor vehicles in non-traffic accident

V39.1  Passenger in three wheeled motor-vehicle injured in collision with other and unspecified motor vehicles in non-traffic accident

V39.10  Passenger in three-wheeled motor vehicle injured in collision with unspecified motor vehicles in non-traffic accident
V39.19  Passenger in three-wheeled motor vehicle injured in collision with other motor vehicles in non-traffic accident

V39.2  Unspecified occupant of three-wheeled motor vehicle injured in collision with other and unspecified motor vehicles in non-traffic accident

V39.20  Unspecified occupant of three-wheeled motor vehicle injured in collision with unspecified motor vehicles in non-traffic accident
V39.29  Unspecified occupant of three-wheeled motor vehicle injured in collision with other motor vehicles in non-traffic accident

V39.3  Occupant (driver) (passenger) of three-wheeled motor vehicle injured in unspecified non-traffic accident

Collision NOS involving three-wheeled motor vehicle, non-traffic
Occupant of three wheeled motor vehicle injured in non-traffic accident

V39.4  Driver of three-wheeled motor vehicle injured in collision with unspecified motor vehicles in traffic accident

V39.40  Driver of three-wheeled motor vehicle injured in collision with unspecified motor vehicles in traffic accident
V39.49  Driver of three-wheeled motor vehicle injured in collision with other motor vehicles in traffic accident

V39.5  Passenger in three-wheeled motor vehicle injured in collision with other and unspecified motor vehicles in traffic accident

V39.50  Passenger in three-wheeled motor vehicle injured in collision with unspecified motor vehicles in traffic accident
V39.59  Passenger in three-wheeled motor vehicle injured in collision with other motor vehicles in traffic accident

V39.6  Unspecified occupant of three-wheeled motor vehicle injured in collision with other motor vehicles in traffic accident
V39.8 Occupant (driver) (passenger) of three-wheeled motor vehicle injured in other specified transport accidents

V39.81 Occupant (driver) (passenger) of three-wheeled motor vehicle injured in transport accident with military vehicle

V39.89 Occupant (driver) (passenger) of three-wheeled motor vehicle injured in other specified transport accidents

V39.9 Occupant (driver) (passenger) of three-wheeled motor vehicle injured in unspecified traffic accident

Accident NOS involving three-wheeled motor vehicle

Car occupant injured in transport accident (V40-V49)

Includes:
A four-wheeled motor vehicle designed primarily for carrying passengers
Automobile pulling a trailer of camper

Excludes:
Bus (V50-V59)
Minibus (V50-V59)
Motorcoach (V70-V79)
Pick-up truck (V50-V59)
Sport utility vehicle (SUV) (V50-V59)

V40 Car occupant injured in collision with pedestrian or animal

Excludes:
Car collision with animal-drawn vehicle or animal being ridden (V46._)

The following 7th character extensions are to be added to each code from category V40:
  a initial encounter
  d subsequent encounter
  q sequelae

V40.0 Car driver injured in collision with pedestrian or animal in non-traffic accident

V40.1 Car passenger injured in collision with pedestrian or animal in non-traffic accident

V40.2 Person on outside of car injured in collision with pedestrian or animal in Non-traffic accident

V40.3 Unspecified car occupant injured in collision with pedestrian or animal in non-traffic accident

V40.4 Person boarding or alighting a car injured in collision with pedestrian or animal

V40.5 Car driver injured in collision with pedestrian or animal in traffic accident

V40.6 Car passenger injured in collision with pedestrian or animal in traffic accident

V40.7 Person on outside of car injured in collision with pedestrian or animal in traffic accident
V40.9 Unspecified car occupant injured in collision with pedestrian or animal in traffic accident

V41 Car occupant injured in collision with pedal cycle

The following 7th character extensions are to be added to each code from category V41:
  a initial encounter
  d subsequent encounter
  q sequelae

V41.0 Car driver injured in collision with pedal cycle in non-traffic accident
V41.1 Car passenger injured in collision with pedal cycle in non-traffic accident
V41.2 Person on outside of car injured in collision with pedal cycle in non-traffic accident
V41.3 Unspecified car occupant injured in collision with pedal cycle in non-traffic accident
V41.4 Person boarding or alighting a car injured in collision with pedal cycle
V41.5 Car driver injured in collision with pedal cycle in traffic accident
V41.6 Car passenger injured in collision with pedal cycle in traffic accident
V41.7 Person on outside of car injured in collision with pedal cycle in traffic accident
V41.9 Unspecified car occupant injured in collision with pedal cycle in traffic accident

V42 Car occupant in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V42:
  a initial encounter
  d subsequent encounter
  q sequelae

V42.0 Car driver injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V42.1 Car passenger injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V42.2 Person on outside of car injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V42.3 Unspecified car occupant injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V42.4 Person boarding or alighting a car injured in collision with two- or three-wheeled motor vehicle
V42.5 Car driver injured in collision with two- or three-wheeled motor vehicle in traffic accident
V42.6 Car passenger injured in collision with two- or three-wheeled motor vehicle in traffic accident
V42.7 Person on outside of car injured in collision with two- or three-wheeled motor vehicle in traffic accident
V42.9 Unspecified car occupant injured in collision with two- or three-wheeled motor vehicle in traffic accident
V43 Car occupant injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V43:

a initial encounter

d subsequent encounter

q sequelae

V43.0 Car driver injured in collision with car, pick-up truck, or van in non-traffic accident
V43.01 Car driver injured in collision with sport utility vehicle in non-traffic accident
V43.02 Car driver injured in collision with other type car in non-traffic accident
V43.03 Car driver injured in collision with pick-up truck in non-traffic accident
V43.04 Car driver injured in collision with van in non-traffic accident

V43.1 Car passenger injured in collision with car, pick-up truck, or van in non-traffic accident
V43.11 Car passenger injured in collision with sport utility vehicle in non-traffic accident
V43.12 Car passenger injured in collision with other type car in non-traffic accident
V43.13 Car passenger injured in collision with other pick-up truck in non-traffic accident
V43.14 Car passenger injured in collision with van in non-traffic accident

V43.2 Person on outside of car injured in collision with car, pick-up truck, or van in non-traffic accident
V43.21 Person on outside of car injured in collision with sport utility vehicle in non-traffic accident
V43.22 Person on outside of car injured in collision with other type car in non-traffic accident
V43.23 Person on outside of car injured in collision with pick-up truck in non-traffic accident
V43.24 Person on outside of car injured in collision with van in non-traffic accident

V43.3 Unspecified car occupant injured in collision with car, pick-up truck, or van in non-traffic accident
V43.31 Unspecified car occupant injured in collision with sport utility vehicle in non-traffic accident
V43.32 Unspecified car occupant injured in collision with other type car in non-traffic accident
V43.33 Unspecified car occupant injured in collision with pick-up truck in non-traffic accident
V43.34 Unspecified car occupant injured in collision with van in non-traffic accident

V43.4 Person boarding or alighting a car injured in collision with car, pick-up truck, or van
V43.41 Person boarding or alighting a car injured in collision with sport utility vehicle
V43.42 Person boarding or alighting a car injured in collision with other type car
V43.43 Person boarding or alighting a car injured in collision with a pick-up truck
V43.44 Person boarding or alighting a car injured in collision with van

V43.5 Car driver injured in collision with car, pick-up truck, or van in traffic accident
V43.51 Car driver injured in collision with sport utility vehicle in traffic accident
V43.52 Car driver injured in collision with other type car in traffic accident
V43.53 Car driver injured in collision with pick-up truck in traffic accident
V43.54 Car driver injured in collision with van in traffic accident

V43.6 Car passenger injured in collision with car, pick-up truck, or van in traffic accident
V43.61 Car passenger injured in collision with sport utility vehicle in traffic accident
V43.62 Car passenger injured in collision with other type car in traffic accident
V43.63 Car passenger injured in collision with pick-up truck in traffic accident
V43.64 Car passenger injured in collision with van in traffic accident

V43.7 Person on outside of car injured in collision with car, pick-up, truck or van in traffic accident
V43.71 Person on outside of car injured in collision with sport utility vehicle in traffic accident
V43.72 Person on outside of car injured in collision with other type car in traffic accident
V43.73 Person on outside of car injured in collision with pick-up truck in traffic accident
V43.74 Person on outside of car injured in collision with van in traffic accident

V43.9 Unspecified car occupant injured in collision with car, pick-up truck, or van in traffic accident
V43.91 Unspecified car occupant injured in collision with sport utility vehicle in traffic accident
V43.92 Unspecified car occupant injured in collision with other type car in traffic accident
V43.93 Unspecified car occupant injured in collision with pick-up truck in traffic accident
V43.94 Unspecified car occupant injured in collision with van in traffic accident

V44 Car occupant injured in collision with heavy transport vehicle or bus

Excludes:
Car occupant injured in collision with military vehicle (V49.81)

The following 7th character extensions are to be added to each code from category V44:
- a initial encounter
- d subsequent encounter
- q sequelae

V44.0 Car driver injured in collision with heavy transport vehicle or bus in non-traffic accident
V44.1 Car passenger injured in collision with heavy transport vehicle or bus in non-traffic accident
V44.2 Person on outside of car injured in collision with heavy transport vehicle or bus in non-traffic accident
V44.3  Unspecified car occupant injured in collision with heavy transport vehicle or bus in non-traffic accident
V44.4  Person boarding or alighting a car injured in collision with heavy transport vehicle or bus
V44.5  Car driver injured in collision with heavy transport vehicle or bus in traffic accident
V44.6  Car passenger injured in collision with heavy transport vehicle or bus in traffic accident
V44.7  Person on outside of car injured in collision with heavy transport vehicle or bus in traffic accident
V44.9  Unspecified car occupant injured in collision with heavy transport vehicle or bus in traffic accident

V45  Car occupant injured in collision with railway train or railway vehicle

The following 7th character extensions are to be added to each code from category V45:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V45.0  Car driver injured in collision with railway train or railway vehicle in non-traffic accident
V45.1  Car passenger injured in collision with railway train or railway vehicle in non-traffic accident
V45.2  Person on outside of car injured in collision with railway train or railway vehicle in non-traffic accident
V45.3  Unspecified car occupant injured in collision with railway train or railway vehicle in non-traffic accident
V45.4  Person boarding or alighting a car injured in collision with railway train or railway vehicle
V45.5  Car driver injured in collision with railway train or railway vehicle in traffic accident
V45.6  Car passenger injured in collision with railway train or railway vehicle in traffic accident
V45.7  Person on outside of car injured in collision with railway train or railway vehicle in traffic accident
V45.9  Unspecified car occupant injured in collision with railway train or railway vehicle in traffic accident

V46  Car occupant injured in collision with other non-motor vehicle

The following 7th character extensions are to be added to each code from category V46:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V46.0  Car driver injured in collision with other non-motor vehicle in non-traffic accident
V46.1  Car passenger injured in collision with other non-motor vehicle in non-traffic accident
V46.2 Person on outside of car injured in collision with other non-motor vehicle in non-traffic accident
V46.3 Unspecified car occupant injured in collision with other non-motor vehicle in non-traffic accident
V46.4 Person boarding or alighting a car injured in collision with other non-motor vehicle
V46.5 Car driver injured in collision with other non-motor vehicle in traffic accident
V46.6 Car passenger injured in collision with other non-motor vehicle in traffic accident
V46.7 Person on outside of car injured in collision with other non-motor vehicle in traffic accident
V46.9 Unspecified car occupant injured in collision with other non-motor vehicle in traffic accident

V47 Car occupant in collision with fixed or stationary object

The following 7th character extensions are to be added to each code from category V47:
   a initial encounter
   d subsequent encounter
   q sequelae

V47.0 Car driver injured in collision with fixed or stationary object in non-traffic accident
   V47.01 Driver of sport utility vehicle injured in collision with fixed or stationary object in non-traffic accident
   V47.02 Driver of other type car injured in collision with fixed or stationary object in non-traffic accident

V47.1 Car passenger injured in collision with fixed or stationary object in non-traffic accident
   V47.11 Passenger of sport utility vehicle injured in collision with fixed or stationary object in non-traffic accident
   V47.12 Passenger of other type car injured in collision with fixed or stationary object in non-traffic accident

V47.2 Person on outside of car injured in collision with fixed or stationary object in non-traffic accident

V47.3 Unspecified car occupant injured in collision with fixed or stationary object in non-traffic accident
   V47.31 Unspecified occupant of sport utility vehicle injured in collision with fixed or stationary object in non-traffic accident
   V47.32 Unspecified occupant of other type car injured in collision with fixed or stationary object in non-traffic accident

V47.4 Person boarding or alighting a car injured in collision with fixed or stationary object

V47.5 Car driver injured in collision with fixed or stationary object in traffic accident
   V47.51 Driver of sport utility vehicle injured in collision with fixed or stationary object in traffic accident
   V47.52 Driver of other type car injured in collision with fixed or stationary object in traffic accident
V47.6 Car passenger injured in collision with fixed or stationary object in traffic accident
  V47.61 Passenger of a sport utility vehicle injured in collision with fixed or stationary object in traffic accident
  V47.62 Passenger of other type car injured in collision with fixed or stationary object in traffic accident
V47.7 Person on outside of car injured in collision with fixed or stationary object in traffic accident
V47.9 Unspecified car occupant injured in collision with fixed or stationary object in traffic accident
  V47.91 Unspecified occupant of sport utility vehicle injured in collision with fixed or stationary object in traffic accident
  V47.92 Unspecified occupant of other type car injured in collision with fixed or stationary object in traffic accident

V48 Car occupant injured in non-collision transport accident

Includes:
  Overturning car NOS
  Overturning car without collision

The following 7th character extensions are to be added to each code from category V48:
  a initial encounter
  d subsequent encounter
  q sequelae

V48.0 Car driver injured in non-collision transport accident in non-traffic accident
V48.1 Car passenger injured in non-collision transport accident in non-traffic accident
V48.2 Person on outside of car injured in non-collision transport accident in non-traffic accident
V48.3 Unspecified car occupant injured in non-collision transport accident in non-traffic accident
V48.4 Person boarding or alighting a car injured in non-collision transport accident
V48.5 Car driver injured in non-collision transport accident in traffic accident
V48.6 Car passenger injured in non-collision transport accident in traffic accident
V48.7 Person on outside of car injured in non-collision transport accident in traffic accident
V48.9 Unspecified car occupant injured in non-collision transport accident in traffic accident
V49 Car occupant injured in other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V49:
   a initial encounter
   d subsequent encounter
   q sequelae

V49.0 Driver injured in collision with other and unspecified motor vehicles in non-traffic accident
   V49.00 Driver injured in collision with unspecified motor vehicles in non-traffic accident
   V49.09 Driver injured in collision with other motor vehicles in non-traffic accident

V49.1 Passenger injured in collision with other and unspecified motor vehicles in non-traffic accident
   V49.10 Passenger injured in collision with unspecified motor vehicles in non-traffic accident
   V49.19 Passenger injured in collision with other motor vehicles in non-traffic accident

V49.2 Unspecified car occupant injured in collision with other and unspecified motor vehicles in non-traffic accident
   V49.20 Unspecified car occupant injured in collision with unspecified motor vehicles in non-traffic accident
   V49.29 Unspecified car occupant injured in collision with other motor vehicles in non-traffic accident

V49.3 Car occupant (driver) (passenger) injured in unspecified non-traffic accident
   Car accident NOS, non-traffic
   Car occupant injured in non-traffic accident NOS

V49.4 Driver injured in collision with other and unspecified motor vehicles in traffic accident
   V49.40 Driver injured in collision with unspecified motor vehicles in traffic accident
   V49.49 Driver injured in collision with other motor vehicles in traffic accident

V49.5 Passenger injured in collision with other and unspecified motor vehicles in traffic accident
   V49.50 Passenger injured in collision with unspecified motor vehicles in traffic accident
   V49.59 Passenger injured in collision with other motor vehicles in traffic accident

V49.6 Unspecified car occupant injured in collision with other and unspecified motor vehicles in traffic accident
   V49.60 Unspecified car occupant injured in collision with unspecified motor vehicles in traffic accident
   V49.69 Unspecified car occupant injured in collision with other motor vehicles in traffic accident
V49.8 Car occupant (driver) (passenger) injured in other specified transport accidents
   V49.81 Car occupant (driver) (passenger) injured in transport accident with military vehicle
   V49.88 Car occupant (driver) (passenger) injured in other specified transport accidents
V49.9 Car occupant (driver) (passenger) injured in unspecified traffic accident
   Car accident NOS

Occupant of pick-up truck or van injured in transport accident (V50-V59)

Includes:
   A four or six wheel motor vehicle designed primarily for carrying passengers and property but weighing less than the local limit for classification as a heavy goods vehicle
      Minibus
      Minivan
      Sport utility vehicle (SUV)
      Truck
      Van

Excludes:
   Heavy transport vehicle (V60-V69)

V50 Occupant of pick-up truck or van injured in collision with pedestrian or animal

Excludes:
   Pick-up truck or van collision with animal-drawn vehicle or animal being ridden (V56._)

The following 7th character extensions are to be added to each code from category V50:
   a initial encounter
   d subsequent encounter
   q sequelae

V50.0 Driver of pick-up truck or van injured in collision with pedestrian or animal in non-traffic accident
V50.1 Passenger in pick-up truck or van injured in collision with pedestrian or animal in non-traffic accident
V50.2 Person on outside of pick-up truck or van injured in collision with pedestrian or animal in non-traffic accident
V50.3 Unspecified occupant of pick-up truck or van injured in collision with pedestrian or animal in non-traffic accident
V50.4 Person boarding or alighting a pick-up truck or van injured in collision with pedestrian or animal
V50.5 Driver of pick-up truck or van injured in collision with pedestrian or animal in traffic accident
V50.6 Passenger in pick-up truck or van injured in collision with pedestrian or animal in traffic accident
V50.7 Person on outside of pick-up truck or van injured in collision with pedestrian or animal in traffic accident
V50.9 Unspecified occupant of pick-up truck or van injured in collision with pedestrian or animal in traffic accident

V51 Occupant of pick-up truck or van injured in collision with pedal cycle

The following 7th character extensions are to be added to each code from category V51:
  a initial encounter
  d subsequent encounter
  q sequelae

V51.0 Driver of pick-up truck or van injured in collision with pedal cycle in non-traffic accident
V51.1 Passenger in pick-up truck or van injured in collision with pedal cycle in non-traffic accident
V51.2 Person on outside of pick-up truck or van injured in collision with pedal cycle in non-traffic accident
V51.3 Unspecified occupant of pick-up truck or van injured in collision with pedal cycle in non-traffic accident
V51.4 Person boarding or alighting a pick-up truck or van injured in collision with pedal cycle
V51.5 Driver of pick-up truck or van injured in collision with pedal cycle in traffic accident
V51.6 Passenger in pick-up truck or van injured in collision with pedal cycle in traffic accident
V51.7 Person on outside of pick-up truck or van injured in collision with pedal cycle in traffic accident
V51.9 Unspecified occupant of pick-up truck or van injured in collision with pedal cycle in traffic accident

V52 Occupant of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V52:
  a initial encounter
  d subsequent encounter
  q sequelae

V52.0 Driver of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V52.1 Passenger in pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V52.2 Person on outside of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V52.3 Unspecified occupant of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V52.4 Person boarding or alighting a pick-up truck or van injured in collision with two- or three-wheeled motor vehicle
V52.5 Driver of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in traffic accident
V52.6 Passenger in pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in traffic accident
V52.7 Person on outside of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in traffic accident
V52.9 Unspecified occupant of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle in traffic accident

V52 Occupant of pick-up truck or van injured in collision with two- or three-wheeled motor vehicle

V53 Occupant of pick-up truck or van injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V53:
- a initial encounter
- d subsequent encounter
- q sequelae

V53.0 Driver of pick-up truck or van injured in collision with car, pick-up truck, or van in non-traffic accident
V53.1 Passenger in pick-up truck or van injured in collision with car, pick-up truck, or van in non-traffic accident
V53.2 Person on outside of pick-up truck or van injured in collision with car, pick-up truck, or van in non-traffic accident
V53.3 Unspecified occupant of pick-up truck or van injured in collision with car, pick-up truck, or van in non-traffic accident
V53.4 Person boarding or alighting a pick-up truck or van injured in collision with car, pick-up truck, or van
V53.5 Driver of pick-up truck or van injured in collision with car, pick-up truck, or van in traffic accident
V53.6 Passenger in pick-up truck or van injured in collision with car, pick-up truck, or van in traffic accident
V53.7 Person on outside of pick-up truck or van injured in collision with car, pick-up truck, or van in traffic accident
V53.9 Unspecified occupant of pick-up truck or van injured in collision with car, pick-up truck, or van in traffic accident

V54 Occupant of pick-up truck or van injured in collision with heavy transport vehicle or bus

Excludes:
- Occupant of pick-up truck or van injured in collision with military vehicle (V59.81)

The following 7th character extensions are to be added to each code from category V54:
- a initial encounter
- d subsequent encounter
- q sequelae

V54.0 Driver of pick-up truck or van injured in collision with heavy transport vehicle or bus in non-traffic accident
V54.1  Passenger in pick-up truck or van injured in collision with heavy transport vehicle or bus in non-traffic accident
V54.2  Person on outside of pick-up truck or van injured in collision with heavy transport vehicle or bus in non-traffic accident
V54.3  Unspecified occupant of pick-up truck or van injured in collision with heavy transport vehicle or bus
V54.4  Person boarding or alighting a pick-up truck or van injured in collision with heavy transport vehicle or bus
V54.5  Driver of pick-up truck or van injured in collision with heavy transport vehicle or bus in traffic accident
V54.6  Passenger in pick-up truck or van injured in collision with heavy transport vehicle or bus in traffic accident
V54.7  Person on outside of pick-up truck or van injured in collision with heavy transport vehicle or bus in traffic accident
V54.9  Unspecified occupant of pick-up truck or van injured in collision with heavy transport vehicle or bus in traffic accident

V55  Occupant of pick-up truck or van injured in collision with railway train or railway vehicle

The following 7th character extensions are to be added to each code from category V55:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V55.0  Driver of pick-up truck or van injured in collision with railway train or railway vehicle in non-traffic accident
V55.1  Passenger in pick-up truck or van injured in collision with railway train or railway vehicle in non-traffic accident
V55.2  Person on outside of pick-up truck or van injured in collision with railway train or railway vehicle in non-traffic accident
V55.3  Unspecified occupant of pick-up truck or van injured in collision with railway train or railway vehicle in non-traffic accident
V55.4  Person boarding or alighting a pick-up truck or van injured in collision with railway train or railway vehicle
V55.5  Driver of pick-up truck or van injured in collision with railway train or railway vehicle in traffic accident
V55.6  Passenger in pick-up truck or van injured in collision with railway train or railway vehicle in traffic accident
V55.7  Person on outside of pick-up truck or van injured in collision with railway train or railway vehicle in traffic accident
V55.9  Unspecified occupant of pick-up truck or van injured in collision with railway train or railway vehicle in traffic accident
**V56**  Occupant of pick-up truck or van injured in collision with other non-motor vehicle

*Includes:*
  - Collision with animal-drawn vehicle, animal being ridden, or streetcar

The following 7th character extensions are to be added to each code from category V56:
  - a  initial encounter
  - d  subsequent encounter
  - q  sequela

**V56.0**  Driver of pick-up truck or van injured in collision with other non-motor vehicle in non-traffic accident

**V56.1**  Passenger in pick-up truck or van injured in collision with other non-motor vehicle in non-traffic accident

**V56.2**  Person on outside of pick-up truck or van injured in collision with other non-motor vehicle in non-traffic accident

**V56.3**  Unspecified occupant of pick-up truck or van injured in collision with other non-motor vehicle in non-traffic accident

**V56.4**  Person boarding or alighting a pick-up truck or van injured in collision with other non-motor vehicle

**V56.5**  Driver of pick-up truck or van injured in collision with other non-motor vehicle in traffic accident

**V56.6**  Passenger in pick-up truck or van injured in collision with other non-motor vehicle in traffic accident

**V56.7**  Person on outside of pick-up truck or van injured in collision with other Non-motor vehicle in traffic accident

**V56.9**  Unspecified occupant of pick-up truck or van injured in collision with other Non-motor vehicle in traffic accident

**V57**  Occupant of pick-up truck or van injured in collision with fixed or stationary object

The following 7th character extensions are to be added to each code from category V57:
  - a  initial encounter
  - d  subsequent encounter
  - q  sequela

**V57.0**  Driver of pick-up truck or van injured in collision with fixed or stationary object in non-traffic accident

**V57.1**  Passenger in pick-up truck or van injured in collision with fixed or stationary object in non-traffic accident

**V57.2**  Person on outside of pick-up truck or van injured in collision with fixed or stationary object in non-traffic accident

**V57.3**  Unspecified occupant of pick-up truck or van injured in collision with fixed or stationary object in non-traffic accident

**V57.4**  Person boarding or alighting a pick-up truck or van injured in collision with fixed or stationary object

**V57.5**  Driver of pick-up truck or van injured in collision with fixed or stationary object in traffic accident
V57.6 Passenger in pick-up truck or van injured in collision with fixed or stationary object in traffic accident
V57.7 Person on outside of pick-up truck or van injured in collision with fixed or stationary object in traffic accident
V57.9 Unspecified occupant of pick-up truck or van injured in collision with fixed or stationary object in traffic accident

V58 Occupant of pick-up truck or van injured in non-collision transport accident

Includes:
Overturning pick-up truck or van NOS
Overturning pick-up truck or van without collision

V58.0 Driver of pick-up truck or van injured in non-collision transport accident in non-traffic accident
V58.1 Passenger in pick-up truck or van injured in non-collision transport accident in non-traffic accident
V58.2 Person on outside of pick-up truck or van injured in non-collision transport accident in non-traffic accident
V58.3 Unspecified occupant of pick-up truck or van injured in non-collision transport accident in non-traffic accident
V58.4 Person boarding or alighting a pick-up truck or van injured in non-collision transport accident
V58.5 Driver of pick-up truck or van injured in non-collision transport accident in traffic accident
V58.6 Passenger in pick-up truck or van injured in non-collision transport accident in traffic accident
V58.7 Person on outside of pick-up truck or van injured in non-collision transport accident in traffic accident
V58.9 Unspecified occupant of pick-up truck or van injured in non-collision transport accident in traffic accident

V59 Occupant of pick-up truck or van injured in other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V59:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V59.0 Driver of pick-up truck or van injured in collision with other and unspecified motor vehicles in non-traffic accident
  V59.00 Driver of pick-up truck or van injured in collision with unspecified motor vehicles in non-traffic accident
  V59.09 Driver of pick-up truck or van injured in collision with other motor vehicles in non-traffic accident
V59.1 Passenger in pick-up truck or van injured in collision with other and unspecified motor vehicles in non-traffic accident
V59.10 Passenger in pick-up truck or van injured in collision with unspecified motor vehicles in non-traffic accident
V59.11 Passenger in pick-up truck of van injured in collision other motor vehicles in non-traffic accident

V59.2 Unspecified occupant of pick-up truck or van injured in collision with unspecified motor vehicles in non-traffic accident
V59.20 Unspecified occupant of pick-up truck or van injured in collision with unspecified motor vehicles in non-traffic accident
V59.21 Unspecified occupant of pick-up truck or van injured in collision with other motor vehicles in non-traffic accident

V59.3 Occupant (driver) (passenger) of pick-up truck or van injured in unspecified non-traffic accident
Accident NOS involving pick-up truck or van, non-traffic
Occupant of pick-up truck or van injured in non-traffic accident NOS

V59.4 Driver of pick-up truck or van injured in collision with other and unspecified motor vehicles in traffic accident
V59.40 Driver of pick-up truck or van injured in collision with unspecified motor vehicles in traffic accident
V59.49 Driver of pick-up truck or van injured in collision with other motor vehicles in traffic accident

V59.5 Passenger in pick-up truck or van injured in collision with other and unspecified motor vehicles in traffic accident
V59.50 Passenger in pick-up truck or van injured in collision with unspecified motor vehicles in traffic accident
V59.59 Passenger in pick-up truck or van injured in collision with other motor vehicles in traffic accident

V59.6 Unspecified occupant of pick-up truck or van injured in collision with other and unspecified motor vehicles in traffic accident
V59.60 Unspecified occupant of pick-up truck or van injured in collision with unspecified motor vehicles in traffic accident
Collision NOS involving pick-up truck or van
V59.69 Unspecified occupant of pick-up truck or van injured in collision with other motor vehicles in traffic accident

V59.8 Occupant (driver) (passenger) of pick-up truck or van injured in other specified transport accidents
V59.81 Occupant (driver) (passenger) of pick-up truck or van injured in transport accident with military vehicle
V59.88 Occupant (driver) (passenger) of pick-up truck or van injured in other specified transport accidents

V59.9 Occupant (driver) (passenger) of pick-up truck or van injured in unspecified traffic accident
Accident NOS involving pick-up truck or van
Occupant of heavy transport vehicle injured in transport accident (V60-V69)

*Includes:*
- Armored car
- Panel truck
- 18-wheeler

*Excludes:*
- Bus
- Motorcoach

**V60**  Occupant of heavy transport vehicle injured in collision with pedestrian or animal

*Excludes:*
- Heavy transport vehicle collision with animal-drawn vehicle or animal being ridden (V66.)

The following 7th character extensions are to be added to each code from category V60:
- A initial encounter
- D subsequent encounter
- Q sequelae

- **V60.0** Driver of heavy transport vehicle injured in collision with pedestrian or animal in non-traffic accident
- **V60.1** Passenger in heavy transport vehicle injured in collision with pedestrian or animal in non-traffic accident
- **V60.2** Person on outside of heavy transport vehicle injured in collision with pedestrian or animal in non-traffic accident
- **V60.3** Unspecified occupant of heavy transport vehicle injured in collision with pedestrian or animal in non-traffic accident
- **V60.4** Person boarding or alighting a heavy transport vehicle injured in collision with pedestrian or animal
- **V60.5** Driver of heavy transport vehicle injured in collision with pedestrian or animal in traffic accident
- **V60.6** Passenger in heavy transport vehicle injured in collision with pedestrian or animal in traffic accident
- **V60.7** Person on outside of heavy transport vehicle injured in collision with pedestrian or animal in traffic accident
- **V60.9** Unspecified occupant of heavy transport vehicle injured in collision with pedestrian or animal in traffic accident
V61 Occupant of heavy transport vehicle injured in collision with pedal cycle

The following 7th character extensions are to be added to each code from category V61:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V61.0 Driver of heavy transport vehicle injured in collision with pedal cycle in non-traffic accident
V61.1 Passenger in heavy transport vehicle injured in collision with pedal cycle in non-traffic accident
V61.2 Person on outside of heavy transport vehicle injured in collision with pedal cycle in non-traffic accident
V61.3 Unspecified occupant of heavy transport vehicle injured in collision with pedal cycle in non-traffic accident
V61.4 Person boarding or alighting a heavy transport vehicle injured in collision with pedal cycle while boarding or alighting
V61.5 Driver of heavy transport vehicle injured in collision with pedal cycle in traffic accident
V61.6 Passenger in heavy transport vehicle injured in collision with pedal cycle in traffic accident
V61.7 Person on outside of heavy transport vehicle injured in collision with pedal cycle in traffic accident
V61.9 Unspecified occupant of heavy transport vehicle injured in collision with pedal cycle in traffic accident

V62 Occupant of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V62:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V62.0 Driver of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V62.1 Passenger in heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V62.2 Person on outside of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V62.3 Unspecified occupant of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V62.4 Person boarding or alighting a heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle
V62.5 Driver of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident
V62.6 Passenger in heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident
V62.7 Person on outside of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident
V62.9 Unspecified occupant of heavy transport vehicle injured in collision with two- or three-wheeled motor vehicle in traffic accident

V63 Occupant of heavy transport vehicle injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V63:
  a initial encounter
  d subsequent encounter
  q sequelae

V63.0 Driver of heavy transport vehicle injured in collision with car, pick-up truck or van in non-traffic accident
V63.1 Passenger in heavy transport vehicle injured in collision with car, pick-up truck or van in non-traffic accident
V63.2 Person on outside of heavy transport vehicle injured in collision with car, pick-up truck or van in non-traffic accident
V63.3 Unspecified occupant of heavy transport vehicle injured in collision with car, pick-up truck or van in non-traffic accident
V63.4 Person boarding or alighting a heavy transport vehicle injured in collision with car, pick-up truck or van
V63.5 Driver of heavy transport vehicle injured in collision with car, pick-up truck or van in traffic accident
V63.6 Passenger in heavy transport vehicle injured in collision with car, pick-up truck or van in traffic accident
V63.7 Person on outside of heavy transport vehicle injured in collision with car, pick-up truck or van in traffic accident
V63.9 Unspecified occupant of heavy transport vehicle injured in collision with car, pick-up truck or van in traffic accident

V64 Occupant of heavy transport vehicle injured in collision with heavy transport vehicle or bus

Excludes:
  Occupant of heavy transport vehicle injured in collision with military vehicle (V69.81)

The following 7th character extensions are to be added to each code from category V64:
  a initial encounter
  d subsequent encounter
  q sequelae

V64.0 Driver of heavy transport vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V64.1 Passenger in heavy transport vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V64.2 Person on outside of heavy transport vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V64.3 Unspecified occupant of heavy transport vehicle injured in collision with heavy transport vehicle or bus in non-traffic accident
V64.4 Person boarding or alighting a heavy transport vehicle injured in collision with heavy transport vehicle or bus while boarding or alighting
V64.5 Driver of heavy transport vehicle injured in collision with heavy transport vehicle or bus in traffic accident
V64.6 Passenger in heavy transport vehicle injured in collision with heavy transport vehicle or bus in traffic accident
V64.7 Person on outside of heavy transport vehicle injured in collision with heavy transport vehicle or bus in traffic accident
V64.9 Unspecified occupant of heavy transport vehicle injured in collision with heavy transport vehicle or bus in traffic accident

V65 Occupant of heavy transport vehicle injured in collision with railway train of railway vehicle

The following 7th character extensions are to be added to each code from category V65:
  a initial encounter
  d subsequent encounter
  q sequelae

V65.0 Driver of heavy transport vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V65.1 Passenger in heavy transport vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V65.2 Person on outside of heavy transport vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V65.3 Unspecified occupant of heavy transport vehicle injured in collision with railway train or railway vehicle in non-traffic accident
V65.4 Person boarding or alighting a heavy transport vehicle injured in collision with railway train or railway vehicle
V65.5 Driver of heavy transport vehicle injured in collision with railway train or railway vehicle in traffic accident
V65.6 Passenger in heavy transport vehicle injured in collision with railway train or railway vehicle in traffic accident
V65.7 Person on outside of heavy transport vehicle injured in collision with railway train or railway vehicle in traffic accident
V65.9 Unspecified occupant of heavy transport vehicle injured in collision with railway train or railway vehicle in traffic accident
V66  Occupant of heavy transport vehicle injured in collision with other non-motor vehicle

Includes:
Collision with animal-drawn vehicle, animal being ridden and streetcar

The following 7th character extensions are to be added to each code from category V66:
- a initial encounter
- d subsequent encounter
- q sequelae

V66.0  Driver of heavy transport vehicle injured in collision with other non-motor vehicle in non-traffic accident
V66.1  Passenger in heavy transport vehicle injured in collision with other non-motor vehicle in non-traffic accident
V66.2  Person on outside of heavy transport vehicle injured in collision with other non-motor vehicle in non-traffic accident
V66.3  Unspecified occupant of heavy transport vehicle injured in collision with other non-motor vehicle in non-traffic accident
V66.4  Person boarding or alighting a heavy transport vehicle injured in collision with other non-motor vehicle
V66.5  Driver of heavy transport vehicle injured in collision with other non-motor vehicle in traffic accident
V66.6  Passenger in heavy transport vehicle injured in collision with other non-motor vehicle in traffic accident
V66.7  Person on outside of heavy transport vehicle injured in collision with other non-motor vehicle in traffic accident
V66.9  Unspecified occupant of heavy transport vehicle injured in collision with other non-motor vehicle in traffic accident

V67  Occupant of heavy transport vehicle injured in collision with fixed or stationary object

The following 7th character extensions are to be added to each code from category V67:
- a initial encounter
- d subsequent encounter
- q sequelae

V67.0  Driver of heavy transport vehicle injured in collision with fixed or stationary object in non-traffic accident
V67.1  Passenger in heavy transport vehicle injured in collision with fixed or stationary object in non-traffic accident
V67.2  Person on outside of heavy transport vehicle injured in collision with fixed or stationary object in non-traffic accident
V67.3  Unspecified occupant of heavy transport vehicle injured in collision with fixed or stationary object in non-traffic accident
V67.4  Person boarding or alighting a heavy transport vehicle injured in collision with fixed or stationary object
V67.5  Driver of heavy transport vehicle injured in collision with fixed or stationary object in traffic accident
V67.6 Passenger in heavy transport vehicle injured in collision with fixed or stationary object in traffic accident
V67.7 Person on outside of heavy transport vehicle injured in collision with fixed or stationary object in traffic accident
V67.9 Unspecified occupant of heavy transport vehicle injured in collision with fixed or stationary object in traffic accident

V68 Occupant of heavy transport vehicle injured in non-collision transport accident

Includes:
Overturning heavy transport vehicle NOS
Overturning heavy transport vehicle without collision

The following 7th character extensions are to be added to each code from category V68:
- a initial encounter
- d subsequent encounter
- q sequelae

V68.0 Driver of heavy transport vehicle injured in non-collision transport accident in non-traffic accident
V68.1 Passenger in heavy transport vehicle injured in non-collision transport accident in non-traffic accident
V68.2 Person on outside of heavy transport vehicle injured in non-collision transport accident in non-traffic accident
V68.3 Unspecified occupant of heavy transport vehicle injured in non-collision transport accident in non-traffic accident
V68.4 Person boarding or alighting a heavy transport vehicle injured in non-collision transport accident
V68.5 Driver of heavy transport vehicle injured in non-collision transport accident in traffic accident
V68.6 Passenger in heavy transport vehicle injured in non-collision transport accident in traffic accident
V68.7 Person on outside of heavy transport vehicle injured in non-collision transport accident in traffic accident
V68.9 Unspecified occupant of heavy transport vehicle injured in non-collision transport accident in traffic accident

V69 Occupant of heavy transport vehicle injured in other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V69:
- a initial encounter
- d subsequent encounter
- q sequelae

V69.0 Driver of heavy transport vehicle injured in collision with other and unspecified motor vehicles in non-traffic accident
V69.00 Driver of heavy transport vehicle injured in collision with unspecified motor vehicles in non-traffic accident
V69.09  Driver of heavy transport vehicle injured in collision with other motor vehicles in non-traffic accident

V69.1  Passenger in heavy transport vehicle injured in collision with unspecified motor vehicles in non-traffic accident

V69.10  Passenger in heavy transport vehicle injured in collision with unspecified motor vehicles in non-traffic accident

V69.19  Passenger in heavy transport vehicle injured in collision with other motor vehicles in non-traffic accident

V69.2  Unspecified occupant of heavy transport vehicle injured in collision with other and unspecified motor vehicles in non-traffic accident

V69.20  Unspecified occupant of heavy transport vehicle injured in collision with unspecified motor vehicles in non-traffic accident

Collision NOS involving heavy transport vehicle, non-traffic

V69.29  Unspecified occupant of heavy transport vehicle injured in collision with other motor vehicles in non-traffic accident

V69.3  Occupant (driver) (passenger) of heavy transport vehicle injured in unspecified non-traffic accident

Accident NOS involving heavy transport vehicle, non-traffic

V69.9  Occupant (driver) (passenger) of heavy transport vehicle injured in unspecified accident

Accident NOS involving heavy transport vehicle

V69.4  Driver of heavy transport vehicle injured in collision with other and unspecified motor vehicles in traffic accident

V69.40  Driver of heavy transport vehicle injured in collision with unspecified motor vehicles in traffic accident

V69.49  Driver of heavy transport vehicle injured in collision with other motor vehicles in traffic accident

V69.5  Passenger in heavy transport vehicle injured in collision with other and unspecified motor vehicles in traffic accident

V69.50  Passenger in heavy transport vehicle injured in collision with unspecified motor vehicles in traffic accident

V69.59  Passenger in heavy transport vehicle injured in collision with other motor vehicles in traffic accident

V69.6  Unspecified occupant of heavy transport vehicle injured in collision with other and unspecified motor vehicles in traffic accident

V69.60  Unspecified occupant of heavy transport vehicle injured in collision with unspecified motor vehicles in traffic accident

V69.69  Unspecified occupant of heavy transport vehicle injured in collision with other motor vehicles in traffic accident

V69.8  Occupant (driver) (passenger) of heavy transport vehicle injured in other specified transport accidents

V69.81  Occupant (driver) (passenger) of heavy transport vehicle injured in transport accidents with military vehicle

V69.88  Occupant (driver) (passenger) of heavy transport vehicle injured in other specified transport accidents

V69.9  Occupant (driver) (passenger) of heavy transport vehicle injured in unspecified accident

Accident NOS involving heavy transport vehicle
Bus occupant injured in transport accident (V70-V79)

Includes:
   Motorcoach

Excludes:
   Minibus (V50-V59)

V70   Bus occupant injured in collision with pedestrian or animal

Excludes:
   Bus collision with animal-drawn vehicle or animal being ridden (V76._)

The following 7th character extensions are to be added to each code from category V70:
   a initial encounter
   d subsequent encounter
   q sequelae

V70.0 Driver of bus injured in collision with pedestrian or animal in non-traffic accident
V70.1 Passenger on bus injured in collision with pedestrian or animal in non-traffic accident
V70.2 Person on outside of bus injured in collision with pedestrian or animal in non-traffic accident
V70.3 Unspecified occupant of bus injured in collision with pedestrian or animal in non-traffic accident
V70.4 Person boarding or alighting from bus injured in collision with pedestrian or animal
V70.5 Driver of bus injured in collision with pedestrian or animal in traffic accident
V70.6 Passenger on bus injured in collision with pedestrian or animal in traffic accident
V70.7 Person on outside of bus injured in collision with pedestrian or animal in traffic accident
V70.9 Unspecified occupant of bus injured in collision with pedestrian or animal in traffic accident

V71   Bus occupant injured in collision with pedal cycle

The following 7th character extensions are to be added to each code from category 71:
   a initial encounter
   d subsequent encounter
   q sequelae

V71.0 Driver of bus injured in collision with pedal cycle in non-traffic accident
V71.1 Passenger on bus injured in collision with pedal cycle in non-traffic accident
V71.2 Person on outside of bus injured in collision with pedal cycle in non-traffic accident
V71.3  Unspecified occupant of bus injured in collision with pedal cycle in non-traffic accident
V71.4  Person boarding or alighting from bus injured in collision with pedal cycle
V71.5  Driver of bus injured in collision with pedal cycle in traffic accident
V71.6  Passenger on bus injured in collision with pedal cycle in traffic accident
V71.7  Person on outside of bus injured in collision with pedal cycle in traffic accident
V71.9  Unspecified occupant of bus injured in collision with pedal cycle in traffic accident

V72  Bus occupant injured in collision with two- or three-wheeled motor vehicle

The following 7th character extensions are to be added to each code from category V72:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

V72.0  Driver of bus injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V72.1  Passenger on bus injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V72.2  Person on outside of bus injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V72.3  Unspecified occupant of bus injured in collision with two- or three-wheeled motor vehicle in non-traffic accident
V72.4  Person boarding or alighting from bus injured in collision with two- or three-wheeled motor vehicle
V72.5  Driver of bus injured in collision with two- or three-wheeled motor vehicle in traffic accident
V72.6  Passenger on bus injured in collision with two- or three-wheeled motor vehicle in traffic accident
V72.7  Person on outside of bus injured in collision with two- or three-wheeled motor vehicle in traffic accident
V72.9  Unspecified occupant of bus injured in collision with two- or three-wheeled motor vehicle in traffic accident

V73  Bus occupant injured in collision with car, pick-up truck, or van

The following 7th character extensions are to be added to each code from category V73:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

V73.0  Driver of bus injured in collision with car, pick-up truck, or van in non-traffic accident
V73.1  Passenger on bus injured in collision with car, pick-up truck, or van in non-traffic accident
V73.2  Person on outside of bus injured in collision with car, pick-up truck, or van in non-traffic accident
V73.3  Unspecified occupant of bus injured in collision with car, pick-up truck, or van in non-traffic accident
V73.4  Person boarding or alighting from bus injured in collision with car, pick-up truck, or van
V73.5  Driver of bus injured in collision with car, pick-up truck, or van in traffic accident
V73.6  Passenger on bus injured in collision with car, pick-up truck, or van in traffic accident
V73.7  Person on outside of bus injured in collision with car, pick-up truck, or van in traffic accident
V73.9  Unspecified occupant of bus injured in collision with car, pick-up truck, or van in traffic accident

V74  Bus occupant in collision with heavy transport vehicle or bus

Excludes:
Bus occupant in collision with military vehicle (V79.81)

The following 7th character extensions are to be added to each code from category V74:
a  initial encounter
d  subsequent encounter
q  sequelae

V74.0  Driver of bus injured in collision with heavy transport vehicle or bus in non-traffic accident
V74.1  Passenger on bus injured in collision with heavy transport vehicle or bus in non-traffic accident
V74.2  Person on outside of bus injured in collision with heavy transport vehicle or bus in non-traffic accident
V74.3  Unspecified occupant of bus injured in collision with heavy transport vehicle or bus in non-traffic accident
V74.4  Person boarding or alighting from bus injured in collision with heavy transport vehicle or bus
V74.5  Driver of bus injured in collision with heavy transport vehicle or bus in traffic accident
V74.6  Passenger on bus injured in collision with heavy transport vehicle or bus in traffic accident
V74.7  Person on outside of bus injured in collision with heavy transport vehicle or bus in traffic accident
V74.9  Unspecified occupant of bus injured in collision with heavy transport vehicle or bus in traffic accident
V75  Bus occupant injured in collision with railway train or railway vehicle

The following 7th character extensions are to be added to each code from category V75:
    a  initial encounter
    d  subsequent encounter
    q  sequelae

V75.0  Driver of bus injured in collision with railway train or railway vehicle in non-traffic accident
V75.1  Passenger on bus injured in collision with railway train or railway vehicle in non-traffic accident
V75.2  Person on outside of bus injured in collision with railway train or railway vehicle in non-traffic accident
V75.3  Unspecified occupant of bus injured in collision with railway train or railway vehicle in non-traffic accident
V75.4  Person boarding or alighting from bus injured in collision with railway train or railway vehicle
V75.5  Driver of bus injured in collision with railway train or railway vehicle in traffic accident
V75.6  Passenger on bus injured in collision with railway train or railway vehicle in traffic accident
V75.7  Person on outside of bus injured in collision with railway train or railway vehicle in traffic accident
V75.9  Unspecified occupant of bus injured in collision with railway train or railway vehicle in traffic accident

V76  Bus occupant injured in collision with other non-motor vehicle

Includes:
    Collision with animal-drawn vehicle, animal being ridden, and streetcar

The following 7th character extensions are to be added to each code from category V76:
    a  initial encounter
    d  subsequent encounter
    q  sequelae

V76.0  Driver of bus injured in collision with other non-motor vehicle in non-traffic accident
V76.1  Passenger on bus injured in collision with other non-motor vehicle in non-traffic accident
V76.2  Person on outside of bus injured in collision with other non-motor vehicle in non-traffic accident
V76.3  Unspecified occupant of bus injured in collision with other non-motor vehicle in non-traffic accident
V76.4  Person boarding or alighting from bus injured in collision with other non-motor vehicle
V76.5  Driver of bus injured in collision with other non-motor vehicle in traffic accident
V76.6 Passenger on bus injured in collision with other non-motor vehicle in traffic accident
V76.7 Person on outside of bus injured in collision with other non-motor vehicle in traffic accident
V76.9 Unspecified occupant of bus injured in collision with other non-motor vehicle in traffic accident

V77 Bus occupant injured in collision with fixed or stationary object

The following 7th character extensions are to be added to each code from category V77:
  a initial encounter
  d subsequent encounter
  q sequelae

V77.0 Driver of bus injured in collision with fixed or stationary object in non-traffic accident
V77.1 Passenger on bus injured in collision with fixed or stationary object in non-traffic accident
V77.2 Person on outside of bus injured in collision with fixed or stationary object in non-traffic accident
V77.3 Unspecified occupant of bus injured in collision with fixed or stationary object in non-traffic accident
V77.4 Person boarding or alighting from bus injured in collision with fixed or stationary object
V77.5 Driver of bus injured in collision with fixed or stationary object in traffic accident
V77.6 Passenger on bus injured in collision with fixed or stationary object in traffic accident
V77.7 Person on outside of bus injured in collision with fixed or stationary object in traffic accident
V77.9 Unspecified occupant of bus injured in collision with fixed or stationary object in traffic accident

V78 Bus occupant injured in non-collision transport accident

Includes:
  Overturning bus NOS
  Overturning bus without collision

The following 7th character extensions are to be added to each code from category V78:
  a initial encounter
  d subsequent encounter
  q sequelae

V78.0 Driver of bus injured in non-collision transport accident in non-traffic accident
V78.1 Passenger on bus injured in non-collision transport accident in non-traffic accident
V78.2 Person on outside of bus injured in non-collision transport accident in non-traffic accident
V78.3 Unspecified occupant of bus injured in non-collision transport accident in non-traffic accident
V78.4 Person boarding or alighting from bus injured in non-collision transport accident
V78.5 Driver of bus injured in non-collision transport accident in traffic accident
V78.6 Passenger on bus injured in non-collision transport accident in traffic accident
V78.7 Person on outside of bus injured in non-collision transport accident in traffic accident
V78.9 Unspecified occupant of bus injured in non-collision transport accident in traffic accident

V79 Bus occupant injured in other and unspecified transport accidents

The following 7th character extensions are to be added to each code from category V79:
  a initial encounter
  d subsequent encounter
  q sequelae

V79.0 Driver of bus injured in collision with other and unspecified motor vehicles in non-traffic accident
  V79.00 Driver of bus injured in collision with unspecified motor vehicles in non-traffic accident
  V79.09 Driver of bus injured in collision with other motor vehicles in non-traffic accident

V79.1 Passenger on bus injured in collision with other and unspecified motor vehicles in non-traffic accident
  V79.10 Passenger on bus injured in collision with unspecified motor vehicles in non-traffic accident
  V79.19 Passenger on bus injured in collision with other motor vehicles in non-traffic accident

V79.2 Unspecified bus occupant injured in collision with other and unspecified motor vehicles in non-traffic accident
  V79.20 Unspecified bus occupant injured in collision with unspecified motor vehicles in non-traffic accident
  V79.29 Unspecified bus occupant injured in collision with other motor vehicles in non-traffic accident

V79.3 Bus occupant (driver) (passenger) injured in unspecified non-traffic accident
  Bus accident NOS, non-traffic
  Bus occupant injured in non-traffic accident NOS

V79.4 Driver of bus injured in collision with other and unspecified motor vehicles in traffic accident
  V79.40 Driver of bus injured in collision with unspecified motor vehicles in traffic accident
  V79.49 Driver of bus injured in collision with other motor vehicles in traffic accident
V79.5  Passenger on bus injured in collision with other and unspecified motor vehicles in traffic accident
V79.50  Passenger on bus injured in collision with unspecified motor vehicles in traffic accident
V79.59  Passenger on bus injured in collision with other motor vehicles in traffic accident

V79.6  Unspecified bus occupant injured in collision with other and unspecified motor vehicles in traffic accident
V79.60  Unspecified bus occupant injured in collision with unspecified motor vehicles in traffic accident
V79.69  Unspecified bus occupant injured in collision with other motor vehicles in traffic accident

V79.8  Bus occupant (driver) (passenger) injured in other specified transport accident
V79.81  Bus occupant (driver) (passenger) injured in transport accidents with military vehicle
V79.88  Bus occupant (driver) (passenger) injured in other specified transport accidents

V79.9  Bus occupant (driver) (passenger) injured in unspecified traffic accident
Bus accident NOS

Other land transport accidents (V80-V89)

V80  Animal-rider or occupant of animal-drawn vehicle injured in transport accident

The following 7th character extensions are to be added to each code from category V80:
 a  initial encounter
 d  subsequent encounter
 q  sequelae

V80.0  Animal-rider or occupant of animal-drawn vehicle injured by fall from or being thrown from animal or animal-drawn vehicle in non-collision accident
V80.01  Animal-rider injured by fall from or being thrown from animal in non-collision accident
V80.010  Animal rider injured by fall from or being thrown from horse in non-collision accident
V80.018  Animal-rider injured by fall from being thrown from other animal in non-collision accident
V80.02  Occupant of animal-drawn vehicle injured by fall from or being thrown from animal-drawn vehicle in non-collision accident
Overturning animal-drawn vehicle NOS
Overturning animal-drawn vehicle without collision
V80.1 Animal rider or occupant of animal-drawn vehicle injured in collision with pedestrian or animal

Excludes:
Animal-rider or animal-drawn vehicle collision with animal-drawn vehicle or animal being ridden (V80.7)
V80.11 Animal-rider injured in collision with pedestrian or animal
V80.12 Occupant of animal-drawn vehicle injured in collision with pedestrian or animal

V80.2 Animal-rider or occupant of animal-drawn vehicle injured in collision with pedal cycle
V80.21 Animal-rider injured in collision with pedal cycle
V80.22 Occupant of animal-drawn vehicle injured in collision with pedal cycle

V80.3 Animal-rider or occupant of animal-drawn vehicle injured in collision with two- or three-wheeled motor vehicle
V80.31 Animal-rider injured in collision with two- or three-wheeled motor vehicle
V80.32 Occupant of animal-drawn vehicle injured in collision with two- or three-wheeled motor vehicle

V80.4 Animal-rider or occupant of animal-drawn vehicle injured in collision with car, pick-up truck, van, heavy transport vehicle, or bus

Excludes:
Animal-rider injured in collision with military vehicle (V80.910)
Occurrent of animal-drawn vehicle injured in collision with military vehicle (V80.920)
V80.41 Animal-rider injured in collision with car, pick-up truck, van, heavy transport vehicle, or bus
V80.42 Occupant of animal-drawn vehicle injured in collision with car, pick-up truck, van, heavy transport vehicle, or bus

V80.5 Animal-rider or occupant of animal-drawn vehicle injured in collision with other specified motor vehicle
V80.51 Animal-rider injured in collision with other specified motor vehicle
V80.52 Occupant of animal-drawn vehicle injured in collision with other specified motor vehicle

V80.6 Animal-rider or occupant of animal-drawn vehicle injured in collision with railway train or railway vehicle
V80.61 Animal-rider injured in collision with railway train or railway vehicle
V80.62 Occupant of animal-drawn vehicle injured in collision with railway train or railway vehicle

V80.7 Animal-rider or occupant of animal-drawn vehicle injured in collision with animal being ridden
V80.71 Animal-rider or occupant of animal-drawn vehicle injured in collision with animal being ridden
V80.710 Animal-rider injured in collision with other animal ridden
V80.711 Occupant of animal-drawn vehicle injured in collision with animal being ridden
V80.72 Animal-rider or occupant of animal-drawn vehicle injured in collision with other animal-drawn vehicle
V80.720 Animal-rider injured in collision with animal-drawn vehicle
V80.721 Occupant of animal-drawn vehicle injured in collision with other animal-drawn vehicle
V80.73  Animal-rider or occupant of animal-drawn vehicle injured in collision streetcar
V80.730 Animal-rider injured in collision with streetcar
V80.731 Occupant of animal-drawn vehicle injured in collision with streetcar
V80.79  Animal-rider or occupant of animal-drawn vehicle injured in collision with other non-motor vehicles
V80.790 Animal-rider injured in collision with other non-motor vehicles
V80.791 Occupant of animal-drawn vehicle injured in collision with other non-motor vehicles

V80.8  Animal-rider or occupant of animal-drawn vehicle injured in collision with fixed or stationary object
V80.81  Animal rider injured in collision with fixed or stationary object
V80.82  Occupant of animal-drawn vehicle injured in collision with fixed or stationary object

V80.9  Animal-rider or occupant of animal-drawn vehicle injured in other and unspecified transport accidents
V80.91  Animal-rider in other and unspecified transport accidents
V80.910 Animal-rider injured in transport accident with military vehicle
V80.918 Animal-rider injured in other transport accident
V80.919 Animal-rider injured in unspecified transport accident
  Animal-rider accident NOS
V80.92  Occupant of animal-drawn vehicle injured in transport accident with military vehicle
V80.920 Occupant of animal-drawn vehicle injured in transport accident with military vehicle
V80.928 Occupant of animal-drawn vehicle injured in other transport accident
V80.929 Occupant of animal-drawn vehicle injured in unspecified transport accident
  Animal-drawn vehicle NOS

V81  Occupant of railway train or railway vehicle injured in transport accident

Includes:
  Derailment of railway train or railway vehicle
  Person on outside of train

Excludes:
  Streetcar (V82._)

The following 7th character extensions are to be added to each code from category V81:
  a  initial encounter
  d  subsequent encounter
  q  sequela

V81.0  Occupant of railway train or railway vehicle injured in collision with motor vehicle in non-traffic accident

Excludes:
  Occupant of railway train or railway vehicle injured due to collision with military vehicle (V81.83)
V81.1 Occupant of railway train or railway vehicle injured in collision with motor vehicle in traffic accident

Excludes:
   Occupant of railway train or railway vehicle injured due to collision with military vehicle (V81.83)

V81.2 Occupant of railway train or railway vehicle injured in collision with or hit by rolling stock

V81.3 Occupant of railway train or railway vehicle injured in collision with other object

Railway collision NOS

V81.4 Person injured while boarding or alighting from railway train or railway vehicle

V81.5 Occupant of railway train or railway vehicle injured by fall in railway train or railway vehicle

V81.6 Occupant of railway train or railway vehicle injured by fall from railway train or railway vehicle

V81.7 Occupant of railway train or railway vehicle injured in derailment without antecedent collision

V81.8 Occupant of railway train or railway vehicle injured in other specified railway accidents

V81.81 Occupant of railway train or railway vehicle injured due to explosion or fire on train

V81.82 Occupant of railway train or railway vehicle injured due to object falling onto train
   Occupant of railway train or railway vehicle injured due to falling earth onto train
   Occupant of railway train or railway vehicle injured due to falling rock
   Occupant of railway train or railway vehicle injured due to falling snow
   Occupant of railway train or railway vehicle injured due to falling trees onto train

V81.83 Occupant of railway train or railway vehicle injured due to collision with military vehicle

V81.89 Occupant of railway train or railway vehicle injured due to other specified railway accident

V81.9 Occupant of railway train or railway vehicle injured in unspecified railway accident

Railway accident NOS

V82 Occupant of powered streetcar injured in transport accident

Includes:
   Interurban electric car
   Person on outside of streetcar
   Tran (car)
   Trolley (car)

Excludes:
   Bus (V70-V79)
   Motorcoach (V70-V79)
   Non-powered streetcar (V76._)
   Train (V81._)
The following 7th character extensions are to be added to each code from category V82:

- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

**V82.0** Occupant of streetcar injured in collision with motor vehicle in non-traffic accident

**V82.1** Occupant of streetcar injured in collision with motor vehicle in traffic accident

**V82.2** Occupant of streetcar injured in collision with or hit by rolling stock

**V82.3** Occupant of streetcar injured in collision with other object

*Excludes:*
- Collision with animal-drawn vehicle or animal being ridden (V82.8)

**V82.4** Person injured while boarding or alighting from streetcar

**V82.5** Occupant of streetcar injured by fall in streetcar

*Excludes:*
- Fall in streetcar
- While boarding or alighting (V82.4) with antecedent collision (V82.0-V82.3)

**V82.6** Occupant of streetcar injured by fall from streetcar

*Excludes:*
- Fall from streetcar
- While boarding or alighting (V82.4) with antecedent collision (V82.0-V82.3)

**V82.7** Occupant of streetcar injured in derailment without antecedent collision

*Excludes:*
- Occupant of streetcar injured in derailment with antecedent collision (V82.0-V82.3)

**V82.8** Occupant of streetcar injured in other specified transport accidents

- Streetcar collision with military vehicle
- Streetcar collision with train or non-motor vehicles

**V82.9** Occupant of streetcar injured in unspecified traffic accident

- Streetcar accident NOS

**V83** Occupant of special vehicle mainly used on industrial premises injured in transport accident

*Includes:*
- Battery-powered airport passenger vehicle
- Battery-powered truck (baggage) (mail)
- Coal-car in mine
- Forklift (truck)
- Logging car
- Self-propelled industrial truck
- Station baggage truck (powered)
- Tram, truck, or tub (powered) in mine or quarry

*Excludes:*
- Special construction vehicles (V85._)
- Special industrial vehicle in stationary use or maintenance (W31._)

The following 7th character extensions are to be added to each code from category V83:

- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae
V83.0 Driver of special industrial vehicle injured in traffic accident
V83.1 Passenger of special industrial vehicle injured in traffic accident
V83.2 Person on outside of special industrial vehicle injured in traffic accident
V83.3 Unspecified occupant of special industrial vehicle injured in traffic accident
V83.4 Person injured while boarding or alighting from special industrial vehicle
V83.5 Driver of special industrial vehicle injured in non-traffic accident
V83.6 Passenger of special industrial vehicle injured in non-traffic accident
V83.7 Person on outside of special industrial vehicle injured in non-traffic accident
V83.9 Unspecified occupant of special industrial vehicle injured in non-traffic accident
Special-industrial-vehicle accident NOS

V84 Occupant of special vehicle mainly used in agriculture injured in transport accident

Includes:
Self-propelled farm machinery
Tractor (and trailer)

Excludes:
Animal-powered farm machinery accident (W30.8_)
Contact with combines harvester (W30.0)
Special agricultural vehicle in stationary use or maintenance (W30._)

The following 7th character extensions are to be added to each code from category V84:
a initial encounter
d subsequent encounter
q sequelae

V84.0 Driver of special agricultural vehicle injured in traffic accident
V84.1 Passenger of special agricultural vehicle injured in traffic accident
V84.2 Person on outside of special agricultural vehicle injured in traffic accident
V84.3 Unspecified occupant of special agricultural vehicle injured in traffic accident
V84.4 Person injured while boarding or alighting from special agricultural vehicle
V84.5 Driver of special agricultural vehicle injured in non-traffic accident
V84.6 Passenger of special agricultural vehicle injured in non-traffic accident
V84.7 Person on outside of special agricultural vehicle injured in non-traffic accident
V84.9 Unspecified occupant of special agricultural vehicle injured in non-traffic accident
Special-agricultural-vehicle accident NOS
V85  Occupant of special construction vehicle injured in transport accident

Includes:
- Bulldozer
- Digger dump
- Truck
- Earth-leveller
- Mechanical shovel
- Road-roller

Excludes:
- Special industrial vehicle (V83._)
- Special construction vehicle in stationary use or maintenance (W31._)

The following 7th character extensions are to be added to each code from category V85:
- a initial encounter
- d subsequent encounter
- q sequelae

V85.0  Driver of special construction vehicle injured in traffic accident
V85.1  Passenger of special construction vehicle injured in traffic accident
V85.2  Person on outside of special construction vehicle injured in traffic accident
V85.3  Unspecified occupant of special construction vehicle injured in traffic accident
V85.4  Person injured while boarding or alighting from special construction vehicle
V85.5  Driver of special construction vehicle injured in non-traffic accident
V85.6  Passenger of special construction vehicle injured in non-traffic accident
V85.7  Person on outside of special construction vehicle injured in non-traffic accident
V85.9  Unspecified occupant of special construction vehicle injured in non-traffic accident

Special-construction-vehicle accident NOS

V86  Occupant of special all-terrain or other motor vehicle, injured in transport accident

Excludes:
- Special all-terrain vehicle in stationary use of maintenance (W31._)
- Sport-utility vehicle (V50-V59)
- Three-wheeled motor vehicle designed for on-road use (V30-V39)

The following 7th character extensions are to be added to each code from category V86:
- a initial encounter
- d subsequent encounter
- q sequelae

V86.0  Driver of special all-terrain or other motor vehicle injured in traffic accident
V86.01  Driver of ambulance or fire engine injured in traffic accident
V86.02  Driver of snowmobile injured in traffic accident
V86.03  Driver of dune buggy injured in traffic accident
V86.04  Driver of military vehicle injured in traffic accident
V86.09 Driver of other special all-terrain or other vehicle injured in traffic accident
Driver of dirt bike injured in traffic accident
Driver of go cart injured in traffic accident
Driver of golf cart injured in traffic accident

V86.1 Passenger of special all-terrain or other motor vehicle injured in traffic accident
V86.11 Passenger of ambulance of fire engine injured in traffic accident
V86.12 Passenger of snowmobile injured in traffic accident
V86.13 Passenger of dune buggy injured in traffic accident
V86.14 Passenger of military vehicle injured in traffic accident
V86.19 Passenger of other special all-terrain or other off-road motor vehicle injured in traffic accident
Passenger of dirt bike injured in traffic accident
Passenger of go cart injured in traffic accident
Passenger of golf cart injured in traffic accident

V86.2 Person on outside of special all-terrain or other motor vehicle injured in traffic accident
V86.21 Person on outside of ambulance or fire engine injured in traffic accident
V86.22 Person on outside of snowmobile injured in traffic accident
V86.23 Person on outside of dune buggy injured in traffic accident
V86.24 Person on outside of military vehicle injured in traffic accident
V86.29 Person on outside of other special all-terrain or other motor vehicle injured in traffic accident
Person on outside of dirt bike injured in traffic accident
Person on outside of go cart injured in traffic accident
Person on outside of golf cart injured in traffic accident

V86.3 Unspecified occupant of special all-terrain or other motor vehicle injured in traffic accident
V86.31 Unspecified occupant of ambulance or fire engine injured in traffic accident
V86.32 Unspecified occupant of snowmobile injured in traffic accident
V86.33 Unspecified occupant of dune buggy injured in traffic accident
V86.34 Unspecified occupant of military vehicle injured in traffic accident
V86.39 Unspecified occupant of other special all-terrain vehicle or other motor vehicle injured in traffic accident
Unspecified occupant of dirt bike injured in traffic accident
Unspecified occupant of go cart injured in traffic accident
Unspecified occupant of golf cart injured in traffic accident

V86.4 Person injured while boarding or alighting from ambulance or fire engine
V86.41 Person injured while boarding or alighting from ambulance or fire engine
V86.42 Person injured while boarding or alighting from snowmobile
V86.43 Person injured while boarding or alighting from dune buggy
V86.44 Person injured while boarding or alighting from military vehicle
V86.49 Person injured while boarding or alighting from other special all-terrain vehicle
Person injured while boarding or alighting from dirt bike
Person injured while boarding or alighting from go cart
Person injured while boarding or alighting from golf cart

V86.5 Driver of special all-terrain or other motor vehicle injured in non-traffic accident
V86.51 Driver of ambulance or fire engine injured in non-traffic accident
V86.52 Driver of snowmobile injured in non-traffic accident
V86.53 Driver of dune buggy injured in non-traffic accident
V86.54 Driver of military vehicle injured in non-traffic accident
Driver of other special all-terrain or other motor vehicle injured in non-traffic accident
Driver of dirt bike injured in non-traffic accident
Driver of go cart injured in non-traffic accident
Driver of golf-cart injured in non-traffic accident
Driver of race car injured in non-traffic accident

**V86.6 Passenger of special all-terrain vehicle or other motor vehicle injured in non-traffic accident**

- V86.61 Passenger of ambulance or fire engine injured in non-traffic accident
- V86.62 Passenger of snowmobile injured in non-traffic accident
- V86.63 Passenger of dune buggy injured in non-traffic accident
- V86.64 Passenger of military vehicle injured in non-traffic accident
- V86.69 Passenger of other special all-terrain or other vehicle injured in non-traffic accident
  - Passenger of dirt bike injured in non-traffic accident
  - Passenger of go cart injured in non-traffic accident
  - Passenger of golf cart injured in non-traffic accident
  - Passenger of race car injured in non-traffic accident

**V86.7 Person on outside of special all-terrain or other motor vehicles injured in non-traffic accidents**

- V86.71 Person on outside of ambulance or fire engine injured in non-traffic accident
- V86.72 Person on outside of snowmobile injured in non-traffic accident
- V86.73 Person on outside of dune buggy injured in non-traffic accident
- V86.74 Person on outside of military vehicle injured in non-traffic accident
- V86.79 Person on outside of other special all-terrain or other motor vehicles injured in non-traffic accident
  - Person on outside of dirt bike injured in non-traffic accident
  - Person on outside of go cart injured in non-traffic accident
  - Person on outside of golf cart injured in non-traffic accident
  - Person on outside of race car injured in non-traffic accident

**V86.9 Unspecified occupant of special all-terrain or other motor vehicle injured in non-traffic accident**

- V86.91 Unspecified occupant of ambulance or fire engine injured in non-traffic accident
- V86.92 Unspecified occupant of snowmobile injured in non-traffic accident
- V86.93 Unspecified occupant of dune buggy injured in non-traffic accident
- V86.94 Unspecified occupant of military vehicle injured in non-traffic accident
- V86.99 Unspecified occupant of other special all-terrain or other motor vehicle injured in non-traffic accident
  - All-terrain motor-vehicle accident NOS
  - Off-road motor-vehicle accident NOS
  - Other motor-vehicle accident NOS
  - Unspecified occupant of dirt bike injured in non-traffic accident
  - Unspecified occupant of go cart injured in non-traffic accident
  - Unspecified occupant of golf cart injured in non-traffic accident
  - Unspecified occupant of race car injured in non-traffic accident
V87  Traffic accident of specified type but victim’s mode of transport unknown

Excludes:
  Collision involving:
  1. Pedal cycle (V10-V19)
  2. Pedestrian (V01-V09)

The following 7th character extensions are to be added to each code from category V87:
  a initial encounter
  d subsequent encounter
  q sequelae

V87.0 Person injured in collision between car and two- or three-wheeled powered vehicle (traffic)
V87.1 Person injured in collision between other motor vehicle and two- or three-wheeled motor vehicle (traffic)
V87.2 Person injured in collision between car and pick-up truck or van (traffic)
V87.3 Person injured in collision between car and bus (traffic)
V87.4 Person injured in collision between car and heavy transport vehicle (traffic)
V87.5 Person injured in collision between heavy transport vehicle and bus (traffic)
V87.6 Person injured in collision between railway train or railway vehicle and car (traffic)
V87.7 Person injured in collision between other specified motor vehicles (traffic)
V87.8 Person injured in other specified non-collision transport accidents involving motor vehicle (traffic)
V87.9 Person injured in other specified (collision)(non-collision) transport accidents involving non-motor vehicle (traffic)

V88  Non-traffic accident of specified type but victim’s mode of transport unknown

Excludes:
  Collision involving:
  1. Pedal cycle (V10-V19)
  2. Pedestrian (V01-V09)

The following 7th character extensions are to be added to each code from category V88:
  a initial encounter
  d subsequent encounter
  q sequelae

V88.0 Person injured in collision between car and two- or three-wheeled motor vehicle, non-traffic
V88.1 Person injured in collision between other motor vehicle and two- or three-wheeled motor vehicle, non-traffic
V88.2 Person injured in collision between car and pick-up truck or van, non-traffic
V88.3 Person injured in collision between car and bus, non-traffic
V88.4 Person injured in collision between car and heavy transport vehicle, non-traffic
V88.5 Person injured in collision between heavy transport vehicle and bus, non-traffic
V88.6 Person injured in collision between railway train or railway vehicle and car, non-traffic
V88.7 Person injured in collision between other specified motor vehicle, non-traffic
V88.8 Person injured in other specified non-collision transport accidents involving motor vehicle, non-traffic
V88.9 Person injured in other specified (collision) (non-collision) transport accidents involving non-motor vehicle, non-traffic

V89 Motor- or non-motor vehicle accident, type of vehicle unclassified

The following 7th character extensions are to be added to each code from category V89:
  a initial encounter
  d subsequent encounter
  q sequelae

V89.0 Person injured in unspecified motor-vehicle accident, non-traffic
  Motor-vehicle accident NOS
V89.1 Person injured in unspecified non-motor vehicle accident, non-traffic
  Non-motor vehicle accident NOS
V89.2 Person injured in unspecified motor-vehicle accident, traffic
  Motor vehicle accident (MVA), NOS
  Road traffic accident (RTA), NOS
V89.3 Person injured in unspecified non-motor vehicle accident, traffic
  Non-motor vehicle traffic accident, NOS
V89.9 Person injured in unspecified vehicle accident
  Collision NOS

Water transport accidents (V90-V94)

V90 Drowning and submersion due to accident to watercraft

Excludes:
  Fall into water not from watercraft (W16._)
  Military watercraft accident (Y36.0_, Y37.0_)
  Water-transport-related drowning or submersion without accident to water craft (V92._)

The following 7th character extensions are to be added to each code from category V90:
  a initial encounter
  d subsequent encounter
  q sequelae
V90.0  Drowning and submersion due to watercraft overturning
V90.00  Drowning and submersion due to merchant ship overturning
V90.01  Drowning and submersion due to passenger ship overturning
Drowning and submersion due to Ferry-boat overturning
Drowning and submersion due to Liner overturning
V90.02  Drowning and submersion due to fishing boat overturning
V90.03  Drowning and submersion due to other powered watercraft overturning
Drowning and submersion due to Hovercraft (on open water) overturning
Drowning and submersion due to Jet ski overturning
V90.04  Drowning and submersion due to sailboat overturning
V90.05  Drowning and submersion due to canoe or kayak overturning
V90.06  Drowning and submersion due to (non-powered) inflatable craft overturning
V90.08  Drowning and submersion due to other unpowered watercraft overturning
Drowning and submersion due to windsurfer overturning
V90.09  Drowning and submersion due to unspecified watercraft overturning
Drowning and submersion due to boat NOS overturning
Drowning and submersion due to ship NOS overturning
Drowning and submersion due to watercraft NOS overturning

V90.1  Drowning and submersion due to watercraft sinking
V90.10  Drowning and submersion due to merchant ship sinking
V90.11  Drowning and submersion due to passenger ship sinking
Drowning and submersion due to Ferry-boat sinking
Drowning and submersion due to Liner sinking
V90.12  Drowning and submersion due to fishing boat sinking
V90.13  Drowning and submersion due to other powered watercraft sinking
Drowning and submersion due to Hovercraft (on open water) sinking
Drowning and submersion due to Jet ski sinking
V90.14  Drowning and submersion due to sailboat sinking
V90.15  Drowning and submersion due to canoe or kayak sinking
V90.16  Drowning and submersion due to (non-powered) inflatable craft sinking
V90.18  Drowning and submersion due to other unpowered watercraft sinking
V90.19  Drowning and submersion due to unspecified watercraft sinking
Drowning and submersion due to boat NOS sinking
Drowning and submersion due to ship NOS sinking
Drowning and submersion due to watercraft NOS sinking

V90.2  Drowning and submersion due to falling or jumping from burning merchant ship
V90.20  Drowning and submersion due to falling or jumping from burning merchant ship
V90.21  Drowning and submersion due to falling or jumping from burning passenger ship
Drowning and submersion due to falling or jumping from burning Ferry-boat
Drowning and submersion due to falling or jumping from burning Liner
V90.22  Drowning and submersion due to falling or jumping from burning fishing boat
V90.23  Drowning and submersion due to falling or jumping from other burning powered watercraft
Drowning and submersion due to falling and jumping from burning Hovercraft (on open water)
Drowning and submersion due to falling and jumping from burning Jet ski
V90.24  Drowning and submersion due to falling or jumping from burning sailboat
V90.25  Drowning and submersion due to falling or jumping from burning canoe or kayak
V90.26  Drowning and submersion due to falling or jumping from burning (non-powered) inflatable craft
V90.27  Drowning and submersion due to falling or jumping from burning water-skis
V90.28  Drowning and submersion due to falling or jumping from other burning unpowered watercraft
Drowning and submersion due to falling and jumping from burning surf-board
Drowning and submersion due to falling and jumping from burning windsurfer
V90.29  Drowning and submersion due to falling or jumping from unspecified burning watercraft
Drowning and submersion due to falling or jumping from burning boat, NOS
Drowning and submersion due to falling or jumping from burning ship, NOS
Drowning and submersion due to falling or jumping from burning watercraft, NOS
V90.3  Drowning and submersion due to falling or jumping from crushed watercraft
V90.30  Drowning and submersion due to falling or jumping from crushed merchant ship
V90.31  Drowning and submersion due to falling or jumping from crushed passenger ship
Drowning and submersion due to falling and jumping from crushed Ferry boat
Drowning and submersion due to falling and jumping from crushed Liner
V90.32  Drowning and submersion due to falling or jumping from crushed fishing boat
V90.33  Drowning and submersion due to falling or jumping from other crushed powered watercraft
Drowning and submersion due to falling and jumping from crushed Hovercraft
Drowning and submersion due to falling and jumping from crushed Jet ski
V90.34  Drowning and submersion due to falling or jumping from crushed sailboat
V90.35  Drowning and submersion due to falling or jumping from crushed canoe or kayak
V90.36  Drowning and submersion due to falling or jumping from crushed (non-powered) inflatable craft
V90.37  Drowning and submersion due to falling or jumping from crushed water-skis
V90.38  Drowning and submersion due to falling or jumping from other crushed unpowered watercraft
Drowning and submersion due to falling and jumping from crushed surf-board
Drowning and submersion due to falling and jumping from crushed windsurfer
V90.39  Drowning and submersion due to falling or jumping from crushed unspecified watercraft
Drowning and submersion due to falling and jumping from crushed boat, NOS
V90.8  Drowning and submersion due to other accident to watercraft
V90.80  Drowning and submersion due to other accident to merchant ship
V90.81  Drowning and submersion due to other accident to passenger ship
Drowning and submersion due to other accident to Ferry-boat
Drowning and submersion due to other accident to Liner
V90.82  Drowning and submersion due to other accident to fishing boat
V90.83  Drowning and submersion due to other accident to other powered watercraft
Drowning and submersion due to other accident to Hovercraft (on open water)
Drowning and submersion due to other accident to Jet ski
V90.84  Drowning and submersion due to other accident to sailboat
V90.85  Drowning and submersion due to other accident to canoe or kayak
V90.86  Drowning and submersion due to other accident to (non-powered) inflatable craft
V90.87 Drowning and submersion due to other accident to water-skis
V90.88 Drowning and submersion due to other accident to other unpowered watercraft
Drowning and submersion due to other accident to surf-board
Drowning and submersion due to other accident to windsurfer
V90.89 Drowning and submersion due to other accident to unspecified watercraft
Drowning and submersion due to other accident to boat, NOS
Drowning and submersion due to other accident to ship, NOS
Drowning and submersion due to other accident to watercraft, NOS

V91 Other injury due to accident to watercraft

Includes:
Any injury except drowning and submersion as a result of an accident to watercraft

Excludes:
Military watercraft accident (Y36._, Y37._)
Drowning and submersion due to accident to watercraft (V90._)

The following 7th character extensions are to be added to each code from category V91:
a initial encounter
d subsequent encounter
q sequelae

V91.0 Burn due to watercraft on fire

Excludes:
Burn from localized fire of explosion on board ship without accident to watercraft (V93._)

V91.00 Burn due to merchant ship on fire
V91.01 Burn due to passenger ship on fire
Burn due to Ferry-boat on fire
Burn due to Liner on fire
V91.02 Burn due to fishing boat on fire
V91.03 Burn due to other powered watercraft on fire
Burn due to Hovercraft (on open water) on fire
Burn due to Jet ski on fire
V91.04 Burn due to sailboat on fire
V91.05 Burn due to canoe or kayak on fire
V91.06 Burn due to (non-powered) inflatable craft on fire
V91.07 Burn due to water-skis on fire
V91.08 Burn due to other unpowered watercraft on fire
V91.09 Burn due to unspecified watercraft on fire
Burn due to boat NOS on fire
Burn due to ship NOS on fire
Burn due to watercraft NOS on fire
V91.1 Crushed between watercraft and other watercraft or other object due to collision
Crushed by lifeboat after abandoning ship in a collision

Note: Select the specified type of watercraft that the victim was on at the time of the collision

V91.10 Crushed between merchant ship and other watercraft or other object due to collision
V91.11 Crushed between passenger ship and other watercraft or other object due to collision
Crushed between Ferry-boat and other watercraft or other object due to collision
Crushed between Liner and other watercraft or other object due to collision
V91.12 Crushed between fishing boat and other watercraft or other object due to collision
V91.13 Crushed between other powered watercraft and other watercraft or other object due to collision
Crushed between Hovercraft (on open water) and other watercraft or other object due to collision
Crushed between Jet ski and other watercraft or other object due to collision
V91.14 Crushed between sailboat and other watercraft or other object due to collision
V91.15 Crushed between canoe or kayak and other watercraft or other object due to collision
V91.16 Crushed between (non-powered) inflatable craft and other watercraft or other object due to collision
V91.18 Crushed between other unpowered watercraft and other watercraft

V91.11

V92 Drowning and submersion due to accident on board watercraft, without accident to watercraft

Excludes:
Drowning or submersion of diver who voluntarily jumps from boat not involved in an accident (W16.711, W16.721)
Fall into water without watercraft (W16._)
Drowning or submersion due to accident to watercraft (V90-V91)
Military watercraft accident (Y36, Y37)

The following 7th character extensions are to be added to each code from category V92:
    a initial encounter
    d subsequent encounter
    q sequelae

V92.0 Drowning and submersion due to fall off watercraft
Drowning and submersion due to fall from gangplank of watercraft
Drowning and submersion due to fall overboard watercraft

Excludes:
Hitting head on object or bottom of body of water due to fall from watercraft (V94.0_)

V92.00 Drowning and submersion due to fall off merchant ship
V92.01 Drowning and submersion due to fall off passenger ship
Drowning and submersion due to fall off Ferry-boat
Drowning and submersion due to fall off Liner
V92.02 Drowning and submersion due to fall off fishing boat
V92.03 Drowning and submersion due to fall off other powered watercraft
Drowning and submersion due to fall off Hovercraft (on open water)
Drowning and submersion due to fall off Jet ski
V92.04 Drowning and submersion due to fall off sailboat
V92.05 Drowning and submersion due to fall off canoe or kayak
V92.06 Drowning and submersion due to fall off (non-powered) inflatable craft
V92.07 Drowning and submersion due to fall off water-skis
Excludes:
- Drowning and submersion due to falling off burning water-skis (V90.27)
- Drowning and submersion due to falling off crushed water skis (V90.37)
- Hit by boat while water-skiing, NOS (V94.)

V92.08 Drowning and submersion due to fall off other unpowered watercraft
- Drowning and submersion due to fall off surf-board
- Drowning and submersion due to fall off windsurfer

Excludes:
- Drowning and submersion due to fall off burning unpowered watercraft (V90.28)
- Drowning and submersion due to fall off crushed unpowered watercraft (V90.38)
- Drowning and submersion due to fall off damaged unpowered watercraft (V90.88)
- Drowning and submersion due to rider of non-powered watercraft being hit by other watercraft (V94.)
- Other injury due to rider of non-powered watercraft being hit by other watercraft (V94.)

V92.09 Drowning and submersion due to fall off unspecified watercraft
- Drowning and submersion due to fall off boat, NOS
- Drowning and submersion due to fall off ship
- Drowning and submersion due to fall off watercraft, NOS

**V92.1 Drowning and submersion due to being thrown overboard by motion of watercraft**

Excludes:
- Drowning and submersion due to fall off surf-board (V92.08)
- Drowning and submersion due to fall off water-skis (V92.07)
- Drowning and submersion due to fall of windsurfer (V92.08)

V92.10 Drowning and submersion due to being overboard by motion of merchant ship
V92.11 Drowning and submersion due to being thrown overboard by motion of passenger ship
- Drowning and submersion due to being thrown overboard by motion of Ferry-boat
- Drowning and submersion due to being thrown overboard by motion of Liner

V92.12 Drowning and submersion due to being thrown overboard by motion of fishing boat
V92.13 Drowning and submersion due to being thrown overboard by motion of other powered watercraft
- Drowning and submersion due to being thrown overboard by motion of Hovercraft

V92.14 Drowning and submersion due to being thrown overboard by motion of sailboat
V92.15 Drowning and submersion due to being thrown overboard by motion of canow or kayak
V92.16 Drowning and submersion due to being thrown overboard by motion of (non-powered) inflatable craft
V92.19 Drowning and submersion due to being thrown overboard by motion of unspecified watercraft
- Drowning and submersion due to being thrown overboard by motion of boat, NOS
- Drowning and submersion due to being thrown overboard by motion of ship, NOS
Drowning and submersion due to being thrown overboard by motion of watercraft, NOS

**V92.2 Drowning and submersion due to being washed overboard from watercraft**

*Code first any associated cataclysm (X37.0_)*

- **V92.20** Drowning and submersion due to being washed overboard from merchant ship
- **V92.21** Drowning and submersion due to being washed overboard from passenger ship
- **V92.22** Drowning and submersion due to being washed overboard from fishing boat
- **V92.23** Drowning and submersion due to being washed overboard from other powered watercraft
- **V92.24** Drowning and submersion due to being washed overboard from Jet ski
- **V92.25** Drowning and submersion due to being washed overboard from canoe or kayak
- **V92.26** Drowning and submersion due to being washed overboard from (non-powered) inflatable craft
- **V92.27** Drowning and submersion due to being washed overboard from water-skis

*Excludes:*

- Drowning and submersion due to fall off water-skis (V92.07)

- **V92.28** Drowning and submersion due to being washed overboard from other unpowered watercraft
- **V92.29** Drowning and submersion due to being washed overboard from unspecified watercraft

Drowning and submersion due to being washed overboard from boat NOS
Drowning and submersion due to being washed overboard from ship NOS
Drowning and submersion due to being washed overboard from watercraft NOS

**V93 Other injury due to accident on board watercraft, without accident to watercraft**

*Excludes:*

- Other injury due to accident to watercraft (V91._)
- Military watercraft accident (Y36, Y37)
- Drowning and submersion due to accident on board watercraft, without accident to watercraft (V92._)

The following 7th character extensions are to be added to each code from category V93:

- **a** initial encounter
- **d** subsequent encounter
- **q** sequela
**V93.0 Burn due to localized fire on board watercraft**

*Excludes:*
- Burn due to watercraft on fire (V91.0_)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V93.00</td>
<td>Burn due to localized on board merchant vessel</td>
</tr>
<tr>
<td>V93.01</td>
<td>Burn due to localized fire on board passenger vessel</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board Ferry-boat</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board Liner</td>
</tr>
<tr>
<td>V93.02</td>
<td>Burn due to localized fire on board fishing boat</td>
</tr>
<tr>
<td>V93.03</td>
<td>Burn due to localized fire on board other powered watercraft</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board Hovercraft</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board Jet ski</td>
</tr>
<tr>
<td>V93.04</td>
<td>Burn due to localized fire on board unspecified watercraft</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board boat, NOS</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board ship, NOS</td>
</tr>
<tr>
<td></td>
<td>Burn due to localized fire on board watercraft, NOS</td>
</tr>
</tbody>
</table>

**V93.1 Other burn on board watercraft**

*Burn due to source other than fire on board watercraft*

*Excludes:*
- Burn due to watercraft on fire (V91.0_)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V93.10</td>
<td>Other burn on board merchant vessel</td>
</tr>
<tr>
<td>V93.11</td>
<td>Other burn on board passenger vessel</td>
</tr>
<tr>
<td></td>
<td>Other burn on board Ferry-boat</td>
</tr>
<tr>
<td></td>
<td>Other burn on board Liner</td>
</tr>
<tr>
<td>V93.12</td>
<td>Other burn on board fishing boat</td>
</tr>
<tr>
<td>V93.13</td>
<td>Other burn on board other powered watercraft</td>
</tr>
<tr>
<td></td>
<td>Other burn on board Hovercraft Other burn on board Jet ski</td>
</tr>
<tr>
<td>V93.14</td>
<td>Other burn on board sailboat</td>
</tr>
<tr>
<td>V93.19</td>
<td>Other burn on board unspecified watercraft</td>
</tr>
<tr>
<td></td>
<td>Other burn on board boat, NOS</td>
</tr>
<tr>
<td></td>
<td>Other burn on board ship, NOS</td>
</tr>
<tr>
<td></td>
<td>Other burn on board watercraft, NOS</td>
</tr>
</tbody>
</table>

**V93.2 Heat exposure on board watercraft**

*Excludes:*
- Exposure to man-made hat not aboard water-craft (W92)
- Exposure to natural heat while on board watercraft (X30)
- Exposure to sunlight while on board watercraft (X32)
- Burn due to fire on board watercraft (V93.0_)

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>V93.20</td>
<td>Heat exposure on board merchant ship</td>
</tr>
<tr>
<td>V93.21</td>
<td>Heat exposure on board passenger ship</td>
</tr>
<tr>
<td></td>
<td>Heat exposure on board Ferry-boat</td>
</tr>
<tr>
<td></td>
<td>Heat exposure on board Liner</td>
</tr>
<tr>
<td>V93.22</td>
<td>Heat exposure on board fishing boat</td>
</tr>
<tr>
<td>V93.23</td>
<td>Heat exposure on board other powered watercraft</td>
</tr>
<tr>
<td></td>
<td>Heat exposure on board hovercraft</td>
</tr>
<tr>
<td>V93.24</td>
<td>Heat exposure on board sailboat</td>
</tr>
<tr>
<td>V93.29</td>
<td>Heat exposure on board unspecified watercraft</td>
</tr>
<tr>
<td></td>
<td>Heat exposure on board boat, NOS</td>
</tr>
<tr>
<td></td>
<td>Heat exposure on board ship, NOS</td>
</tr>
<tr>
<td></td>
<td>Heat exposure on board watercraft, NOS</td>
</tr>
</tbody>
</table>
V93.3 Fall on board watercraft

Excludes:
- Fall due to collision of watercraft (V91.2_)

V93.30 Fall on board merchant ship
V93.31 Fall on board passenger ship
- Fall on board Ferry-boat
- Fall on board Liner
V93.32 Fall on board fishing boat
V93.33 Fall on board other powered watercraft
- Fall on board Hovercraft (on open water)
- Fall on board Jet ski
V93.34 Fall on board sailboat
V93.35 Fall on board canoe or kayak
V93.36 Fall on board (non-powered) inflatable craft
V93.38 Fall on board other unpowered watercraft
V93.39 Fall on board unspecified watercraft
- Fall on board boat, NOS
- Fall on board ship, NOS
- Fall on board watercraft, NOS

V93.4 Struck by falling object on board watercraft

Hit by falling object on board watercraft

Excludes:
- Struck by falling object due to accident to watercraft (V91.3)

V93.40 Struck by falling object on merchant ship
V93.41 Struck by falling object on passenger ship
- Struck by falling object on Ferry-boat
- Struck by falling object on Liner
V93.42 Struck by falling object on fishing boat
V93.43 Struck by falling object on other powered watercraft
- Struck by falling object on Hovercraft
V93.44 Struck by falling object on sailboat
V93.48 Struck by falling object on other unpowered watercraft
V93.49 Struck by falling object on unspecified watercraft

V93.5 Explosion on board watercraft

Boiler explosion on steamship

Excludes:
- Fire on board watercraft (V93.0)

V93.50 Explosion on board merchant ship
V93.51 Explosion on board passenger ship
- Explosion on board Ferry-boat
- Explosion on board Liner
V93.52 Explosion on board fishing boat
V93.53 Explosion on board other powered watercraft
- Explosion on board Hovercraft
- Explosion on board Jet ski
V93.54 Explosion on board sailboat
V93.59 Explosion on board unspecified watercraft
- Explosion on board boat, NOS
- Explosion on board ship, NOS
- Explosion on board watercraft, NOS
V93.6 Machinery accident on board watercraft

Excludes:
- Machinery explosion on board watercraft (V93.4_)
- Machinery fire on board watercraft (V93.0)

V93.60 Machinery accident on board merchant ship
V93.61 Machinery accident on board passenger ship
- Machinery accident on board Ferry-boat
- Machinery accident on board Liner
V93.62 Machinery accident on board fishing boat
V93.63 Machinery accident on board other powered watercraft
- Machinery accident on board Hovercraft
V93.64 Machinery accident on board sailboat
V93.69 Machinery accident on board unspecified watercraft
- Machinery accident on board boat, NOS
- Machinery accident on board ship, NOS
- Machinery accident on board watercraft, NOS

V93.8 Other injury due to other accident on board watercraft

Accidental poisoning by gases or fumes on watercraft

V93.80 Other injury due to other accident on board merchant ship
V93.81 Other injury due to other accident on board passenger ship
- Other injury due to other accident on board Ferry-boat
- Other injury due to other accident on board Liner
V93.82 Other injury due to other accident on board fishing boat
V93.83 Other injury due to other accident on board other powered watercraft
- Other injury due to other accident on board Hovercraft
- Other injury due to other accident on board Jet ski
V93.84 Other injury due to other accident on board sailboat
V93.85 Other injury due to other accident on board canoe or kayak
V93.86 Other injury due to other accident on board (non-powered) inflatable craft
V93.87 Other injury due to other accident on board water-skis
- Hit or struck by object while waterskiing
V93.88 Other injury due to other accident on board other unpowered watercraft
- Hit or struck by object while surfing
- Hit or struck by object while on board windsurfer
V93.89 Other injury due to other accident on board unspecified watercraft
- Other injury due to other accident on board boat, NOS
- Other injury due to other accident on board ship, NOS
- Other injury due to other accident on board watercraft, NOS

V94 Other and unspecified water transport accidents

Excludes:
- Military watercraft accidents (Y36, Y37)

The following 7th character extensions are to be added to each code from category V94:
- a initial encounter
- d subsequent encounter
- q sequelae
V94.0 Hitting object or bottom of body of water due to fall from watercraft
  
  Excludes:
  Drowning and submersion due to fall from watercraft (V92.0)

V94.1 Bather struck by watercraft
  Swimmer struck by watercraft
  V94.11 Bather struck by powered watercraft
  V94.12 Bather struck by non-powered watercraft

V94.2 Rider of non-powered watercraft struck by other watercraft
  V94.21 Rider of non-powered watercraft struck by other non-powered watercraft
  Canoeer hit by other non-powered watercraft
  Surfer hit by other non-powered watercraft
  Windsurfer hit by other non-powered watercraft
  V94.22 Rider of non-powered watercraft struck by powered watercraft
  Canoeer hit by motorboat
  Surfer hit by motorboat
  Windsurfer hit by motorboat

V94.3 Injury to rider of (inflatable) watercraft being pulled behind other watercraft
  V94.31 Injury to rider of (inflatable) recreational watercraft being pulled behind other watercraft
  Injury to rider of inner-tube pulled behind motor boat
  V94.32 Injury to rider of non-recreational watercraft being pulled behind other watercraft
  Injury to occupant of dingy being pulled behind boat or ship
  Injury to occupant of life-raft being pulled behind boat or ship

V94.4 Injury to bare foot water-skier
  Injury to person being pulled behind boat or ship

V94.8 Other water transport accident

V94.9 Unspecified water transport accident
  Water transport accident, NOS

Air and space transport accidents (V95-V97)
  
  Excludes:
  Military aircraft accidents (Y36, Y37)

V95 Accident to powered aircraft causing injury to occupant
  
  The following 7th character extensions are to be added to each code from category V95:
  a initial encounter
  d subsequent encounter
  q sequelae

V95.0 Helicopter accident injuring occupant
  V95.00 Unspecified helicopter accident injuring occupant
  V95.01 Helicopter crash injuring occupant
  V95.02 Forced landing of helicopter injuring occupant
  V95.03 Helicopter collision injuring occupant
  Helicopter collision with any object, fixed, movable or moving
  V95.04 Helicopter fire injuring occupant
V95.05  Helicopter explosion injuring occupant
V95.09  Other helicopter accident injuring occupant

V95.1  Ultralight, microlight, or powered-glider accident injuring occupant
 V95.10  Unspecified ultralight, microlight or powered-glider accident injuring occupant
 V95.11  Ultralight, microlight or powered-glider crash injuring occupant
 V95.12  Forced landing of ultralight, microlight or powered-glider injuring occupant
 V95.13  Ultralight, microlight or powered-glider collision injuring occupant
      Ultralight, microlight or powered-glider collision with any object, fixed, movable or moving
 V95.14  Ultralight, microlight or powered-glider fire injuring occupant
 V95.15  Ultralight, microlight or powered-glider explosion injuring occupant
 V95.19  Other ultralight, microlight or powered-glider accident injuring occupant

V95.2  Other private fixed-wing aircraft accident injuring occupant
 V95.20  Unspecified accident to other private fixed-wing aircraft, injuring occupant
 V95.21  Other private fixed-wing aircraft crash injuring occupant
 V95.22  Forced landing of other private fixed-wing aircraft injuring occupant
 V95.23  Other private fixed-wing aircraft collision injuring occupant
      Other private fixed-wing aircraft collision with any object, fixed, movable or moving
 V95.24  Other private fixed-wing aircraft fire injuring occupant
 V95.25  Other private fixed-wing aircraft explosion injuring occupant
 V95.29  Other accident to other private fixed-wing aircraft injuring occupant

V95.3  Commercial fixed-wing aircraft accident injuring occupant
 V95.30  Unspecified accident to commercial fixed-wing aircraft injuring occupant
 V95.31  Commercial fixed-wing aircraft crash injuring occupant
 V95.32  Forced landing of commercial fixed-wing aircraft injuring occupant
 V95.33  Commercial fixed-wing aircraft collision injuring occupant
      Commercial fixed-wing aircraft collision with any object, fixed, movable or moving
 V95.34  Commercial fixed-wing aircraft fire injuring occupant
 V95.35  Commercial fixed-wing aircraft explosion injuring occupant
 V95.39  Other accident to commercial fixed-wing aircraft injuring occupant

V95.4  Spacecraft accident injuring occupant
 V95.40  Unspecified spacecraft accident injuring occupant
 V95.41  Spacecraft crash injuring occupant
 V95.42  Forced landing of spacecraft injuring occupant
 V95.43  Spacecraft collision injuring occupant
      Spacecraft collision with any object, fixed, moveable or moving
 V95.44  Spacecraft fire injuring occupant
 V95.45  Spacecraft explosion injuring occupant
 V95.49  Unspecified spacecraft accident injuring occupant

V95.8  Other powered aircraft accidents injuring occupant
V95.9  Unspecified aircraft accident injuring occupant
      Aircraft accident NOS
      Air transport accident NOS
V96  Accident to non-powered aircraft causing injury to occupant

The following 7th character extensions are to be added to each code from category V96:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

V96.0 Balloon accident injuring occupant
  V96.00  Unspecified balloon accident injuring occupant
  V96.01  Balloon crash injuring occupant
  V96.02  Forced landing of balloon injuring occupant
  V96.03  Balloon collision injuring occupant
          Balloon collision with any object, fixed, moveable or moving
  V96.04  Balloon fire injuring occupant
  V96.05  Balloon explosion injuring occupant
  V96.09  Other balloon accident injuring occupant

V96.1 Hang-glider accident injuring occupant
  V96.10  Unspecified hang-glider accident injuring occupant
  V96.11  Hang-glider crash injuring occupant
  V96.12  Forced landing of hang-glider injuring occupant
  V96.13  Hang-glider collision injuring occupant
          Hang-glider collision with any object, fixed, moveable or moving
  V96.14  Hang-glider fire injuring occupant
  V96.15  Hang-glider explosion injuring occupant
  V96.19  Other hang-glider accident injuring occupant

V96.2 Glider (non-powered) accident injuring occupant
  V96.20  Unspecified glider (non-powered) accident injuring occupant
  V96.21  Glider (non-powered) crash injuring occupant
  V96.22  Forced landing of glider (non-powered) injuring occupant
  V96.23  Glider (non-powered) collision injuring occupant
          Glider (non-powered) collision with any object, fixed, moveable or moving
  V96.24  Glider (non-powered) fire injuring occupant
  V96.25  Glider (non-powered) explosion injuring occupant
  V96.29  Other glider (non-powered) accident injuring occupant

V96.8 Other non-powered aircraft accidents injuring occupant
  Kite carrying a person accident injuring occupant

V96.9 Unspecified non-powered aircraft accident injuring occupant
  Non-powered aircraft accident

V97  Other specified air transport accidents

The following 7th character extensions are to be added to each code from category V97:
  a  initial encounter
  d  subsequent encounter
  q  sequelae
V97.0 Occupant of aircraft injured in other specified air transport accidents
   Fall in, on or from aircraft in air transport accident
   Excludes:
     Accident while boarding or alighting aircraft (V97.1)
   V97.1 Person injured while boarding or alighting from aircraft
V97.2 Parachutist accident
   V97.21 Parachutist entangled in object
   Parachutist landing in tree
   V97.22 Parachutist injured on landing
   V97.29 Other parachutist accident
V97.3 Person on ground injured in air transport accident
   V97.31 Hit by object falling from aircraft
   Hit by crashing aircraft
   Injured by aircraft hitting house
   Injured by aircraft hitting car
   V97.32 Injured by rotating propeller
   V97.33 Sucked into jet engine
   V97.39 Other injury to person on ground due to air transport accident
V97.8 Other air transport accidents, not elsewhere classified
   Injury from machinery on aircraft
   Excludes:
     Aircraft accident NOS (V95.9)
     Exposure to changes in air pressure during ascent or descent (W94._)
Other and unspecified transport accidents (V98-V99)
   Excludes:
     Vehicle accident, type of vehicle unspecified (V89._)
V98 Other specified transport accidents

The following 7th character extensions are to be added to each code from category V98:
   a initial encounter
   d subsequent encounter
   q sequelae

V98.0 Accident to, on, or involving cable-car, not on rails
   Caught or dragged by cable-car, not on rails
   Fall or jump from cable-car, not on rails
   Object thrown from or in cable-car, not on rails
V98.1 Accident to, on or involving land-yacht
V98.2 Accident to, on or involving ice yacht
V98.3 Accident to, on or involving ski lift
   Accident to, on or involving ski chair-lift
   Accident to, on or involving ski-lift with gondola
V98.8 Other specified transport accidents
**V99  Unspecified transport accident**

The following 7th character extensions are to be added to each code from category V99:

- a  initial encounter
- d   subsequent encounter
- q   sequelae

**Other external causes of accidental injury (W00-W58)**

**Falls (W00-W19)**

*Excludes:*
  - Assault involving a fall (Y01-Y02)
  - Fall (in) (from)
  - Animal (V80._)
  - Machinery (in operation) (W28-W31)
  - Transport vehicle (V01-V99)
  - Intentional self-harm involving a fall (X80-X81)

*Excludes:*
  - Fall (in) (from)
    - Burning building (X00.0_)
    - Into fire (X00-X04, X08-X09)

**W00  Fall due to ice and snow**

*Includes:*
  - Pedestrian on foot falling (slipping) on ice and snow

*Excludes:*
  - Fall on (from) ice and snow involving pedestrian conveyance (V00._)
  - Fall from stairs and steps not due to ice and snow (W10._)

The following 7th character extensions are to be added to each code from category W00:

- a  initial encounter
- d   subsequent encounter
- q   sequelae

**W00.0 Fall on same level due to ice and snow**
**W00.1 Fall from stairs and steps due to ice and snow**
**W00.2 Other fall from one level to another due to ice and snow**
**W00.9 Unspecified fall due to ice and snow**
W01  Fall on same level from slipping, tripping, and stumbling

*Includes:*
- Fall on moving sidewalk
- Slipping, tripping, and stumbling NOS

*Excludes:*
- Fall due to bumping (striking) against object (W18.0_)
- Fall in show or bathtub (W18.2_)
- Fall on same level from slipping, tripping, and stumbling due to ice or snow (W00.0)
- Fall off or from toilet (W18.1_)

The following 7th character extensions are to be added to each code from category W01:
- a initial encounter
- d subsequent encounter
- q sequela

W01.0 Fall on same level from slipping, tripping, and slipping without subsequent striking against object
W01.1 Fall on same level from slipping, tripping, and stumbling with subsequent striking against object

W01.10 Fall on same level from slipping, tripping, and stumbling with subsequent striking against unspecified object
W01.11 Fall on same level from slipping, tripping, and stumbling with subsequent striking against sharp object
  W01.110 Fall on same level from slipping, tripping, and stumbling with subsequent striking against sharp glass
  W01.111 Fall on same level from slipping, tripping, and stumbling with subsequent striking against power tool or machine
  W01.118 Fall on same level from slipping, tripping, and stumbling with subsequent striking against other sharp object
  W01.119 Fall on same level from slipping, tripping, and stumbling with subsequent striking against unspecified sharp object
W01.19 Fall on same level from slipping, tripping, and stumbling with subsequent striking against other object
  W01.190 Fall on same level from slipping, tripping, and stumbling with subsequent striking against furniture
  W01.198 Fall on same level from slipping, tripping, and stumbling with subsequent striking against other object

W02  Deactivated. See category V00
W03  Other fall on same level due to collision with another person

Includes:
Fall due to non-transport collision with other person

Excludes:
Crushed or pushed by a crowd or human stampede (W52)
Fall involving pedestrian conveyance (V00-V09)
Fall due to ice or snow (W00)
Collision with another person without fall (W51)

The following 7th character extensions are to be added to each code from category W03:
a  initial encounter
d  subsequent encounter
q  sequelae

W04  Fall while being carried or supported by other persons

Includes:
Accidentally dropped while being carried

The following 7th character extensions are to be added to each code from category W04:
a  initial encounter
d  subsequent encounter
q  sequelae

W05  Fall from non-moving wheelchair

Excludes:
Fall from moving wheelchair (V00.811)

The following 7th character extensions are to be added to each code from category W05:
a  initial encounter
d  subsequent encounter
q  sequelae

W06  Fall from bed

The following 7th character extensions are to be added to each code from category W06:
a  initial encounter
d  subsequent encounter
q  sequelae

W07  Fall from chair

The following 7th character extensions are to be added to each code from category W07:
a  initial encounter
d  subsequent encounter
q  sequelae
W08  Fall from other furniture

The following 7th character extensions are to be added to each code from category W08:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W09  Fall on and from playground equipment

The following 7th character extensions are to be added to each code from category W09:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W09.0 Fall on or from playground slide
W09.1 Fall from playground swing
W09.2 Fall on or from playground gym
W09.8 Fall on or from other playground equipment

W10  Fall on and from stairs and steps

Excludes:
  Fall from stairs due to ice and snow (W00.1)

The following 7th character extensions are to be added to each code from category W10:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W10.0 Fall on or from escalator
W10.1 Fall on or from side walk curb
W10.3 Fall on or from incline
    Fall on or from ramp
W10.8 Fall on or from other stairs or steps
W10.9 Fall on or from unspecified stairs and steps

W11  Fall on and from ladder

The following 7th character extensions are to be added to each code from category W11:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W12  Fall on and from scaffolding

The following 7th character extensions are to be added to each code from category W12:
  a  initial encounter
  d  subsequent encounter
  q  sequelae
W13  Fall from, out of, or through building or structure

The following 7th character extensions are to be added to each code from category W13:
  a  initial encounter
  d  subsequent encounter
  q  sequela

W13.0 Fall from, out of, or through balcony
    Fall from, out of, or through railing
W13.1 Fall from, out of, or through bridge
W13.2 Fall from, out of, or through roof
W13.3 Fall through floor
W13.4 Fall from, out of, or through window
  
  Excludes:
    Fall with subsequent striking against sharp glass (W01.110)

W13.8 Fall from, out of, or through other building or structure
    Fall from, out of, or through viaduct
    Fall from, out of, or through wall
    Fall from, out of, or through flag-pole
W13.9 Fall from, out of, or through building, NOS
  
  Excludes:
    Collapse of a building or structure (W20._)
    Fall or jump from burning building or structure

W14  Fall from tree

The following 7th character extensions are to be added to each code from category W14:
  a  initial encounter
  d  subsequent encounter
  q  sequela

W15  Fall from cliff

The following 7th character extensions are to be added to each code from category W15:
  a  initial encounter
  d  subsequent encounter
  q  sequela

W16  Fall, jump, or diving into water

  Excludes:
    Accidental non-watercraft drowning and submersion not involving fall (W65-W74)
    Effects of air pressure from diving (W94._)
    Fall into water from watercraft (V90-V94)
    Hitting an object or against bottom when falling from watercraft (V94.0)
    Striking or hitting diving board (W21.3)
The following 7th character extensions are to be added to each code from category W16:

a initial encounter
d subsequent encounter
q sequelae

W16.0 Fall into swimming pool

Fall into swimming pool NOS

Excludes:

Fall into empty swimming pool (W17.3)

W16.01 Fall into swimming pool striking water surface

W16.011 Fall into swimming pool striking water surface causing drowning and submersion

Excludes:

Drowning and submersion while in swimming pool without fall (W67)

W16.012 Fall into swimming pool striking water surface causing other injury

W16.02 Fall into swimming pool striking bottom

W16.021 Fall into swimming pool striking bottom causing drowning and submersion

Excludes:

Drowning and submersion while in swimming pool without fall (W67)

W16.022 Fall into swimming pool striking bottom causing other injury

W16.03 Fall into swimming pool striking wall

W16.031 Fall into swimming pool striking wall causing drowning and submersion

Excludes:

Drowning and submersion while in swimming pool without fall (W67)

W16.032 Fall into swimming pool striking wall causing other injury

W16.1 Fall into natural body of water

Fall into lake
Fall into open sea
Fall into river
Fall into stream

W16.11 Fall into natural body of water striking water surface

W16.111 Fall into natural body of water striking water surface causing drowning and submersion

Excludes:

Drowning and submersion while in natural body of water without fall (W69)

W16.112 Fall into natural body of water striking water surface causing other injury

W16.12 Fall into natural body of water striking bottom

W16.121 Fall into natural body of water striking bottom causing drowning and submersion

Excludes:

Drowning and submersion while in natural body of water without fall (W69)

W16.122 Fall into natural body of water striking bottom causing other injury

W16.13 Fall into natural body of water striking side

W16.131 Fall into natural body of water striking side causing drowning and submersion

Excludes:

Drowning and submersion while in natural body of water without fall (W69)
W16.132 Fall into natural body of water striking side causing other injury

**W16.2 Fall in (into) filled bathtub or bucket of water**

- **W16.21 Fall in (into) filled bathtub**
  - *Excludes:*
    - Fall into empty bathtub (W18.2)
      - **W16.211 Fall in (into) filled bathtub causing drowning and submersion**
        - *Excludes:*
          - Drowning and submersion while in filled bathtub without fall (W65)
      - **W16.212 Fall in (into) filled bathtub causing other injury**

- **W16.22 Fall in (into) bucket of water**
  - **W16.221 Fall in (into) bucket of water causing drowning and submersion**
    - *Excludes:*
      - Drowning and submersion while in filled bathtub without fall (W65)
  - **W16.222 Fall in (into) bucket of water causing other injury**

**W16.3 Fall into other water**

- **Fall into fountain**
- **Fall into reservoir**

- **W16.31 Fall into other water striking water surface**
  - **W16.311 Fall into other water striking water surface causing drowning and submersion**
    - *Excludes:*
      - Drowning and submersion while in other water without fall (W73)
  - **W16.312 Fall into other water striking water surface causing other injury**

- **W16.32 Fall into other water striking bottom**
  - **W16.321 Fall into other water striking bottom causing drowning and submersion**
    - *Excludes:*
      - Drowning and submersion while in other water without fall (W73)
  - **W16.322 Fall into other water striking bottom causing other injury**

- **W16.33 Fall into other water striking wall**
  - **W16.331 Fall into other water striking wall causing drowning and submersion**
    - *Excludes:*
      - Drowning and submersion while in other water without fall (W73)
  - **W16.332 Fall into other water striking wall causing other injury**

**W16.4 Fall into unspecified water**

- **W16.41 Fall into unspecified water causing drowning and submersion**
- **W16.42 Fall into unspecified water causing other injury**

**W16.5 Jumping or diving into swimming pool**

- **W16.51 Jumping or diving into swimming pool striking water surface**
  - **W16.511 Jumping or diving into swimming pool striking water surface causing drowning and submersion**
    - *Excludes:*
      - Drowning and submersion while in swimming pool without jumping or diving (W67)
  - **W16.512 Jumping or diving into swimming pool striking water surface causing other injury**

- **W16.52 Jumping or diving into swimming pool striking bottom**
  - **W16.521 Jumping or diving into swimming pool striking bottom causing drowning and submersion**
    - *Excludes:*
      - Drowning and submersion while in swimming pool without jumping or diving (W67)
W16.522 Jumping or diving into swimming pool striking bottom causing other injury

W16.53 Jumping or diving into swimming pool striking wall
W16.531 Jumping or diving into swimming pool striking wall causing drowning and submersion

Excludes:
Drowning and submersion while in swimming pool without jumping or diving (W67)

W16.532 Jumping or diving into swimming pool striking wall causing other injury

W16.6 Jumping or diving into natural body of water
  Jumping or diving into lake
  Jumping or diving into open sea
  Jumping or diving into river
  Jumping or diving into stream
W16.61 Jumping or diving into natural body of water striking water surface
W16.611 Jumping or diving into natural body of water striking water surface causing drowning and submersion

Excludes:
Drowning and submersion while in natural body of water without jumping or diving (W69)

W16.612 Jumping or diving into natural body of water striking water surface causing other injury

W16.62 Jumping or diving into natural body of water striking bottom
W16.621 Jumping or diving into natural body of water striking bottom causing drowning and submersion

Excludes:
Drowning and submersion while in natural body of water without jumping or diving (W69)

W16.622 Jumping or diving into natural body of water striking bottom causing other injury

W16.7 Jumping or diving from boat
Excludes:
Fall from boat into water - see watercraft accident (V90-V94)
W16.71 Jumping or diving from boat striking water surface
W16.711 Jumping or diving from boat striking water surface causing drowning and submersion

W16.712 Jumping or diving from boat striking water surface causing other injury

W16.72 Jumping or diving from boat striking bottom
W16.721 Jumping or diving from boat striking bottom causing drowning and submersion

W16.722 Jumping or diving from boat striking bottom causing other injury

W16.8 Jumping or diving into other water
  Jumping or diving into fountain
  Jumping or diving into reservoir
W16.81 Jumping or diving into other water striking water surface
W16.811 Jumping or diving into other water striking water surface causing drowning and submersion
Excludes:
  Drowning and submersion while in other water without jumping or diving
  (W73)
W16.812 Jumping or diving into other water striking water surface causing other
  injury

W16.82 Jumping or diving into other water striking bottom
W16.821 Jumping or diving into other water striking bottom causing drowning
  and submersion
Excludes:
  Drowning and submersion while in other water without jumping or diving
  (W73)
W16.822 Jumping or diving into other water striking bottom causing other
  injury

W16.83 Jumping or diving into other water striking wall
W16.831 Jumping or diving into other water striking wall causing drowning and
  submersion
Excludes:
  Drowning and submersion while in other water without jumping or diving
  (W73)
W16.832 Jumping or diving into other water striking wall causing other injury

W16.9 Jumping or diving into unspecified water
W16.91 Jumping or diving into unspecified water causing drowning and submersion
W16.92 Jumping or diving into unspecified water causing other injury

W17 Other fall from one level to another

The following 7th character extensions are to be added to each code from category W17:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W17.0 Fall into well
W17.1 Fall into storm drain or manhole
W17.2 Fall into hole
  Fall into pit
W17.3 Fall into empty swimming pool
  Excludes:
    Fall into filled swimming pool (W16.0_)
W17.4 Fall from dock
W17.8 Other fall from one level to another
  Fall down embankment or hill

W18 Other fall on same level

The following 7th character extensions are to be added to each code from category W18:
  a  initial encounter
  d  subsequent encounter
  q  sequelae
W18.0 Fall due to bumping against object
  Striking against object with subsequent fall
  Excludes:
    Fall on same level due to slipping, tripping, or stumbling with subsequent striking against object (W01.1_)
W18.00 Striking against unspecified object with subsequent fall
W18.01 Striking against sports equipment with subsequent fall
W18.02 Striking against glass with subsequent fall
W18.09 Striking against other object with subsequent fall

W18.1 Fall from or off toilet
  W18.11 Fall from or off toilet without subsequent striking against object
  Fall from (off) toilet NOS
  W18.12 Fall from or off toilet with subsequent striking against object

W18.2 Fall in (into) shower or empty bathtub
  Excludes:
    Fall in full bathtub (W16.21-)

W18.9 Fall on same level NOS

W19 Unspecified Fall

Includes:
  Accidental fall, NOS

The following 7th character extensions are to be added to each code from category W19:
  a initial encounter
  d subsequent encounter
  q sequela

Exposure to inanimate mechanical forces (W20-W49)

Excludes:
  Assault (X91-Y08)
  Contact or collision with animals or persons (W50-W64)
  Exposure to inanimate mechanical forces involving military or war operations (Y36._, Y37._)
  Intentional self-harm

W20 Struck by thrown, projected, or falling object

Code first any associated:
  Cataclysm (X34-X39)
  Lightning strike (T75.0)

Excludes:
  Machinery accident (W24, W28-W31)
  Transport accident (V01-V99)
  Object set in motion by:
    Explosion (W35-W40)
    Firearm (W32-W34)
The following 7th character extensions are to be added to each code from category W20:
  a  initial encounter
  d  subsequent encounter
  q  sequela

**W20.0  Struck by falling object in cave-in**

*Excludes:*
- Asphyxiation due to cave-in (T71.21)

**W20.1  Struck by object due to collapse of building**

*Excludes:*
- Struck by object due to collapse of burning building (X00.2, X02.2)

**W20.8  Other cause of strike by thrown, projected or falling object**

*Excludes:*
- Struck by thrown sports equipment (W21._)

**W21  Striking against or struck by sports equipment**

*Excludes:*
- Assault with sports equipment (Y08.1_)
- Striking against or struck by sports equipment with subsequent fall (W18.01)

The following 7th character extensions are to be added to each code from category W21:
  a  initial encounter
  d  subsequent encounter
  q  sequela

**W21.0  Struck by hit or thrown ball**

- W21.00 Struck by hit or thrown ball, unspecified type
- W21.01 Struck by football
- W21.02 Struck by soccer ball
- W21.03 Struck by baseball
- W21.04 Struck by golf ball
- W21.05 Struck by basketball
- W21.06 Struck by volleyball
- W21.07 Struck by softball
- W21.09 Struck by other hit or thrown ball

**W21.1  Struck by bat, racquet or club**

- W21.11 Struck by baseball bat
- W21.12 Struck by tennis racquet
- W21.13 Struck by golf club
- W21.19 Struck by other bat, racquet or club

**W21.2  Struck by hockey stick or puck**

- W21.21 Struck by hockey stick
  - W21.210 Struck by ice hockey stick
  - W21.211 Struck by field hockey stick
- W21.22 Struck by hockey puck
  - W21.220 Struck by ice hockey puck
  - W21.221 Struck by field hockey puck
W21.3 Struck by sports foot wear
   W21.31  Struck by shoe cleats
            Stepped on by shoe cleats
   W21.32  Struck by skate blades
            Skated over by skate blades
   W21.39  Struck by other sports foot wear
W21.4 Striking against diving board
   Use additional code for subsequent falling into water, if applicable (W16. _)
W21.8 Striking against or struck by other sports equipment
   W21.81  Striking against or struck by football helmet
   W21.89  Striking against or struck by other sports equipment
   W21.9   Striking against or struck by unspecified sports equipment

W22  Striking against or struck by other objects

Excludes:
   Striking against or struck by object with subsequent fall (W18.09)

The following 7th character extensions are to be added to each code from category W22:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W22.0 Striking against stationary object
   Excludes:
      Striking against stationary sports equipment (W21.8)
   W22.01  Walked into wall
   W22.02  Walked into lamppost
   W22.03  Walked into furniture
   W22.04  Striking against wall of swimming pool
            W22.041 Striking against wall of swimming pool causing drowning and
                     submersion
   Excludes:
      Drowning and submersion while swimming without striking against wall
      (W67)
      W22.042 Striking against wall of swimming pool causing other injury
   W22.09  Striking against other stationary object

W22.1 Striking against or struck by automobile airbag
   W22.10  Striking against or struck by unspecified automobile airbag
   W22.11  Striking against or struck by driver side automobile airbag
   W22.12  Striking against or struck by front passenger side automobile airbag
   W22.19  Striking against or struck by other automobile airbag

W22.8 Striking against or struck by other objects
   Striking against or struck by object, NOS
   Excludes:
      Struck by thrown, projected or falling object (W20._)
**W23  Caught, crushed, jammed, or pinched in or between objects**

*Excludes:*
- Injury caused by cutting or piercing instruments (W25-W27)
- Injury caused by lifting and transmission devices (W24._)
- Injury caused by machinery (W28-W31)
- Injury caused by non-powered hand tools (W27._)
- Injury cause by transport vehicle (V01-V99)
- Injury caused by struck by thrown, projected, or falling object (W20._)

The following 7th character extensions are to be added to each code from category W23:
- a initial encounter
- d subsequent encounter
- q sequelae

**W23.0 Caught, crushed, jammed, or pinched between moving objects**
**W23.1 Caught, crushed, jammed, or pinched between stationary objects**
**W23.2 Caught, crushed, jammed, or pinched in object**

**W24  Contact with lifting and transmission devices, not elsewhere classified**

*Excludes:*
- Transport accidents (V01-V99)

The following 7th character extensions are to be added to each code from category W24:
- a initial encounter
- d subsequent encounter
- q sequelae

**W24.0 Contact with lifting devices, not elsewhere classified**
- Contact with chain hoist
- Contact with drive belt
- Contact with pulley (block)

**W24.1 Contact with transmission devices, not elsewhere classified**
- Contact with transmission belt or cable

**W25  Contact with sharp glass**

Code first any associated:
- Injury due to flying glass from explosion or firearm discharge (W32-W40)
- Transport accident (V00-V99)

*Excludes:*
- Fall on same level due to slipping, tripping, and stumbling with subsequent striking against sharp glass (W01.10)
- Striking against sharp glass with subsequent fall (W18.02)
The following 7th character extensions are to be added to each code from category W25:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W26  Contact with knife, sword, or dagger

The following 7th character extensions are to be added to each code from category W26:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W26.0 Contact with knife
   Excludes:
      Contact with electric knife (W29.1)

W26.1 Contact with sword or dagger

W27  Contact with non-powered hand tool

The following 7th character extensions are to be added to each code from category W27:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W27.0 Contact with workbench tool
   Contact with auger
   Contact with axe
   Contact with chisel
   Contact with handsaw
   Contact with screwdriver

W27.1 Contact with garden tool
   Contact with hoe
   Contact with non-powered lawn mower
   Contact with pitchfork
   Contact with rake

W27.2 Contact with scissors

W27.3 Contact with hypodermic needle
   Contact with contaminated hypodermic needle
   Hypodermic needle stick

W27.4 Contact with needle (sewing)
   Excludes:
      hypodermic needle (W27.3)

W27.5 Contact with kitchen utensil
   Contact with fork
   Contact with ice-pick
   Contact with can-opener, NOS

W27.6 Contact with paper-cutter

W27.8 Contact with other non-powered hand tool
   Contact with non-powered sewing machine
   Contact with shovel
W28  Contact with powered lawn mower

Includes:
Powered lawn mower (commercial) (residential)

Excludes:
Contact with non-powered lawn mower (W27.1)
Exposure to electric current (W86._)

The following 7th character extensions are to be added to each code from category W28:

- a  initial encounter
- d  subsequent encounter
- q  sequelae

W29  Contact with other powered hand tools and household machinery

Excludes:
Contact with commercial machinery (W31.82)
Contact with how household appliance (X15)
Contact with non-powered hand tool (W27._)
Exposure to electric current (W86)

The following 7th character extensions are to be added to each code from category W29:

- a  initial encounter
- d  subsequent encounter
- q  sequelae

W29.0 Contact with powered kitchen appliance
  - Contact with blender
  - Contact with can-opener
  - Contact with garbage disposal
  - Contact with mixer

W29.1 Contact with electric knife

W29.2 Contact with other powered household machinery
  - Contact with electric fan
  - Contact with powered dryer (clothes) (powered) (spin)
  - Contact with washing-machine

W29.3 Contact with powered garden and outdoor hand tools and machinery
  - Contact with chainsaw
  - Contact with edger
  - Contact with garden cultivator (tiller)
  - Contact with hedge trimmer

Excludes:
Contact with powered lawn mower (W28)

W29.4 Contact with nail gun

W29.8 Contact with other powered hand tools and household machinery
  - Contact with do-it-yourself tool NOS
W30  Contact with agricultural machinery

Includes:
   Animal-powered farm machine

Excludes:
   Agricultural transport vehicle accident (V01-V99)
   Explosion of grain store (W40.8)
   Exposure to electric current (W86._)

The following 7th character extensions are to be added to each code from category W30:
   a initial encounter
   d subsequent encounter
   q sequelae

W30.0 Contact with combine harvester
   Contact with reaper
   Contact with thresher
W30.1 Contact with power take-off devices (PTO)
W30.2 Contact with hay derrick
W30.3 Contact with grain storage elevator
   Excludes:
      Explosion of grain store (W40.8)
W30.8 Contact with other specified agricultural machinery
   W30.81 Contact with agricultural transport vehicle in stationary use
   Contact with agricultural transport vehicle under repair, not on public roadway
   Excludes:
      agricultural transport vehicle accident (V01-V99)
   W30.89 Contact with other specified agricultural machinery
W30.9 Contact with unspecified agricultural machinery
   Contact with farm machinery, NOS

W31  Contact with other and unspecified machinery

Excludes:
   Contact with agricultural machinery (W30._)
   Contact with machinery in transport under own power or being towed by a vehicle (V01-V99)
   Exposure to electric current (W86)

The following 7th character extensions are to be added to each code from category W31:
   a initial encounter
   d subsequent encounter
   q sequelae

W31.0 Contact with mining and earth-drilling machinery
   Contact with bore or drill (land) (seabed)
   Contact with shaft hoist Contact with shaft lift Contact with undercutter
W31.1 Contact with metalworking machines
   Contact with abrasive wheel
   Contact with forging machine
   Contact with lathe
   Contact with mechanical shears
   Contact with metal drilling machine
   Contact with milling machine
   Contact with power press
   Contact with rolling-mill
   Contact with metal sawing machine
W31.2 Contact with powered woodworking and forming machines
   Contact with band saw
   Contact with bench saw
   Contact with circular saw
   Contact with molding machine
   Contact with overhead plane
   Contact with powered saw
   Contact with radial saw
   Contact with sander

Excludes:
   Non-powered woodworking tools (W27.0)

W31.3 Contact with prime movers
   Contact with gas turbine
   Contact with internal combustion engine
   Contact with steam engine
   Contact with water driven turbine

W31.8 Contact with other specified machinery
   W31.81 Contact with recreational machinery
      Contact with roller-coaster
   W31.82 Contact with other commercial machinery
      Contact with commercial electric fan
      Contact with commercial kitchen appliances
      Contact with commercial powered dryer (clothes) (powered) (spin)
      Contact with commercial washing-machine
      Contact with commercial sewing machine
      Excludes:
         Contact with household machinery (W29.-)
         Contact with powered lawn mower (W28)
   W31.83 Contact with special construction vehicle in stationary use
      Contact with special construction vehicle under repair, not on public roadway
      Excludes:
         Special construction vehicle accident (V01-V99)
   W31.89 Contact with other specified machinery
W31.9 Contact with unspecified machinery
   Contact with machinery NOS
**W32 Accidental handgun discharge**

*Includes:*
- Accidental discharge of gun for single hand use
- Accidental discharge of pistol
- Accidental discharge of revolver
- Handgun discharge, NOS

*Excludes:*
- Accidental airgun discharge (W34.01)
- Accidental BB gun discharge (W34.01)
- Accidental pellet gun discharge (W34.01)
- Accidental shotgun discharge (W33.0)
- Assault by handgun discharge (X93)
- Handgun discharger involving legal intervention (Y35.0)
- Handgun discharge involving military or war operations (Y36.4)
- Intentional self-harm by handgun discharge (X72)
- Very pistol discharge (W34.8)

The following 7th character extensions are to be added to each code from category W32:
- a initial encounter
- d subsequent encounter
- q sequelae

**W33 Accidental rifle, shotgun, and larger firearm discharge**

*Includes:*
- Rifle, shotgun, and larger firearm discharge, NOS

*Excludes:*
- Accidental airgun discharge (W34.01)
- Accidental BB gun discharge (W34.01)
- Accidental pellet gun discharge (W34.01)
- Accidental handgun discharge (W32)
- Assault by rifle, shotgun, and larger firearm discharge (X94)
- Firearm discharge involving legal intervention (Y35.0)
- Firearm discharge involving military or war operations (Y36.4)
- Intentional self-harm by rifle, shotgun, and larger firearm discharge (X73)

The following 7th character extensions are to be added to each code from category W33:
- a initial encounter
- d subsequent encounter
- q sequelae
Discharge of other larger firearm, NOS
W33.9 Accidental discharge of unspecified larger firearm
Discharge of other larger firearm, NOS

W34 Accidental discharge from other and unspecified firearms and guns

The following 7th character extensions are to be added to each code from category W34:
   a initial encounter
   d subsequent encounter
   q sequela

W34.0 Accidental discharge of gas, air, or spring-operated guns
   W34.01 Accidental discharge of airgun
            Accidental discharge of BB gun
            Accidental discharge of pellet gun
   W34.02 Accidental discharge of paintball gun
            Unintentional injury due to paintball discharge
   W34.09 Accidental discharge of other gas, air or spring-operated gun

W34.8 Accidental discharge from other specified firearms
   Accidental discharge from Very pistol [flare]
W34.9 Accidental discharge from unspecified firearms or gun
   Gunshot wound, NOS
   Shot, NOS

W35 Explosion and rupture of boiler

Excludes:
   Explosion and rupture of boiler on watercraft (V93.4)

The following 7th character extensions are to be added to each code from category W35:
   a initial encounter
   d subsequent encounter
   q sequela

W36 Explosion and rupture of gas cylinder

The following 7th character extensions are to be added to each code from category W36:
   a initial encounter
   d subsequent encounter
   q sequela

W36.1 Explosion and rupture of aerosol can
W36.2 Explosion and rupture of air tank
W36.3 Explosion and rupture of pressurized-gas tank
W36.8 Explosion and rupture of other gas cylinder
W36.9 Explosion and rupture of unspecified gas cylinder
W37  Explosion and rupture of pressurized tire, pipe, or hose

The following 7th character extensions are to be added to each code from category W37:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W37.0 Explosion of bicycle tire
W37.8 Explosion and rupture of other pressurized tire, pipe, or hose

W38  Explosion and rupture of other specified pressurized devices

The following 7th character extensions are to be added to each code from category W38:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W39  Discharge of firework

The following 7th character extensions are to be added to each code from category W39:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W40  Explosion of other materials

*Excludes:*
  Assault by explosive material (X96)
  Explosion involving legal intervention (Y35.1_)
  Explosion involving military or war operations (Y36.0_, Y36.2_)
  Intentional self-harm by explosive material (X75)

The following 7th character extensions are to be added to each code from category W40:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W40.0 Explosion of blasting material
  Explosion of blasting cap
  Explosion of detonator
  Explosion of dynamite
  Explosion of explosive (any) used in blasting operations

W40.1 Explosion of explosive gases
  Explosion of acetylene
  Explosion of butane
  Explosion of coal gas
  Explosion in mine, NOS
  Explosion of explosive gas
  Explosion of fire damp
  Explosion of gasoline fumes
Explosion of methane
Explosion of propane

W40.8 Explosion of other specified explosive materials
  Explosion in dump, NOS
  Explosion in factory, NOS
  Explosion in grain store
  Explosion in munitions

Excludes:
  explosion involving legal intervention (Y35.1-)
  explosion involving military or war operations (Y36.0-, Y36.2-)

W40.9 Explosion of unspecified explosive materials
  Explosion, NOS

W41 Deactivated. See T70.4

W42 Exposure to noise

The following 7th character extensions are to be added to each code from category W42:
  a initial encounter
  d subsequent encounter
  q sequelae

W42.0 Exposure to supersonic waves
W41.9 Exposure to other noise
  Exposure to sound waves, NOS

W43 Deactivated. See T75.2

W44 Deactivated. See T15-T19

W45 Foreign body or object entering through skin

Excludes:
  Contact with hand tools (non-powered) (powered) (W27-W29)
  Contact with knife, sword, or dagger (W26._)
  Contact with sharp glass (W25._)
  Struck by objects (W20-W22)

The following 7th character extensions are to be added to each code from category W45:
  a initial encounter
  d subsequent encounter
  q sequelae

W45.0 Nail entering through skin
W45.1 Paper entering through skin
  Paper cut
W45.2 Lid of can entering through skin
W45.8 Other foreign body or object entering through skin
  Splinter in skin, NOS
**W46 Item causing external constriction**

The following 7th character extensions are to be added to each code from category W46:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

**W46.0 Hair causing external constriction**
**W46.1 String or thread causing external constriction**
**W46.2 Rubber band causing external constriction**
**W46.3 Ring or other jewelry causing external constriction**
**W46.8 Other item causing external constriction**

**W49 Exposure to other inanimate mechanical forces**

*Includes:*
- Exposure to abnormal gravitational [G] Forces
- Exposure to inanimate mechanical forces, NEC

*Excludes:*
- Exposure to inanimate mechanical forces involving military or war operations (Y36._, Y37._)

The following 7th character extensions are to be added to each code from category W49:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

**Exposure to animate mechanical forces (W50-W64)**

*Excludes:*
- Toxic effect of contact with venomous animals and plants (T63._)

**W50 Accidental hit, strike, kick, twist, bite, or scratch by another person**

*Includes:*
- Hit, strike, kick , twist, bite, or scratch by another person, NOS

*Excludes:*
- Assault by bodily force (Y04)
- Struck by objects (W20-W22)

The following 7th character extensions are to be added to each code from category W50:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae
W50.0 Accidental hit or strike by another person  
   Hit or strike by another person, NOS  
W50.1 Accidental kick by another person  
   Kick by another person, NOS  
W50.2 Accidental twist by another person  
   Twist by another person, NOS  
W50.3 Accidental bite by another person  
   Human bite  
   Bite by another person, NOS  
W50.4 Accidental scratch by another person  
   Scratch by another person, NOS

W51 Accidental striking against or bumped into by another person

Excludes:
   Assault by striking against or bumping into by another person (Y08.2_)  
   Fall due to collision with another person (W03)

The following 7th character extensions are to be added to each code from category W51:
   a initial encounter  
   d subsequent encounter  
   q sequelae

W52 Crushed, pushed, or stepped on by crowd or human stampede
   Crushed, pushed, or stepped on by crowd or human stampede with or without fall

The following 7th character extensions are to be added to each code from category W52:
   a initial encounter  
   d subsequent encounter  
   q sequelae

W53 Contact with rodent
   Contact with saliva, feces, or urine of rodent,

The following 7th character extensions are to be added to each code from category W53:
   a initial encounter  
   d subsequent encounter  
   q sequelae

W53.0 Contact with mouse
   W53.01 Bitten by mouse  
   W53.09 Other contact with mouse

W53.1 Contact with rat
   W53.11 Bitten by rat  
   W53.19 Other contact with rat

W53.2 Contact with squirrel
   W53.21 Bitten by squirrel  
   W53.29 Other contact with squirrel
W53.8 Contact with other rodent
  W53.81  Bitten by other rodent
  W53.89  Other contact with other rodent

W54  Contact with dog
  Contact with saliva, feces, or urine of dog

  The following 7th character extensions are to be added to each code from category W54:
    a  initial encounter
    d  subsequent encounter
    q  sequelae

W54.0  Bitten by dog
W54.1  Struck by dog
    Knocked over by dog
W54.8  Other contact with dog

W55  Contact with other mammals
  Contact with saliva, feces, or urine of mammal

  Excludes:
    Animal being ridden-see transport accidents
    Bitten or struck by dog (W54)
    Bitten or struck by rodent (W53._)
    Contact with marine mammals (W56._)

  The following 7th character extensions are to be added to each code from category W55:
    a  initial encounter
    d  subsequent encounter
    q  sequelae

W55.0  Contact with cat
  W55.01  Bitten by cat
  W55.03  Stratched by cat
  W55.09  Other contact with cat
W55.1  Contact with horse
  W55.11  Bitten by horse
  W55.12  Struck by horse
  W55.19  Other contact with horse
W55.2  Contact with cow
    Contact with bull
      W55.21  Bitten by cow
      W55.22  Struck by cow
      Gored by bull
    W55.29  Other contact with cow
W55.3  Contact with other hoof stock
    Contact with goats
    Contact with sheep
      W55.31  Bitten by other hoof stock
      W55.32  Struck by other hoof stock
Gored by goat
Gored by ram
W55.39 Other contact with other hoof stock

W55.4 Contact with pig
W55.41 Bitten by pig
W55.42 Struck by pig
W55.49 Other contact with pig

W55.5 Contact with raccoon
W55.51 Bitten by raccoon
W55.52 Struck by raccoon
W55.59 Other contact with raccoon

W55.8 Contact with other mammals
W55.81 Bitten by other mammals
W55.82 Struck by other mammals
W55.89 Other contact with other mammals

W56 Contact with non-venomous marine animal

Excludes:
Contact with venomous marine animal (T63._)

The following 7th character extensions are to be added to each code from category W56:
a initial encounter
d subsequent encounter
q sequelae

W56.0 Contact with dolphin
W56.01 Bitten by dolphin
W56.02 Struck by dolphin
W56.09 Other contact with dolphin

W56.1 Contact with sea lion
W56.11 Bitten by sea lion
W56.12 Struck by sea lion
W56.19 Other contact with sea lion

W56.2 Contact with orca
Contact with killer whale
W56.21 Bitten by orca
W56.22 Struck by orca
W56.29 Other contact with orca

W56.3 Contact with other marine mammals
W56.31 Bitten by other marine mammals
W56.32 Struck by other marine mammals
W56.39 Other contact with other marine mammals

W56.4 Contact with shark
W56.41 Bitten by shark
W56.42 Struck by shark
W56.49 Other contact with shark

W56.5 Contact with other fish
W56.51 Bitten by other fish
W56.52 Struck by other fish
W56.59 Other contact with other fish

**W56.8 Contact with other non-venomous marine animals**
- W56.81 Bitten by other non-venomous marine animals
- W56.82 Struck by other non-venomous marine animals
- W56.89 Other contact with other non-venomous marine animals

**W57 Bitten or stung by non-venomous insect and other non-venomous arthropods**

*Excludes:*
- Contact with venomous insects and arthropods (T62.2_, T63.3_, T63.4_)

The following 7th character extensions are to be added to each code from category W57:
- a initial encounter
- d subsequent encounter
- q sequelae

**W58 Contact with crocodile or alligator**

The following 7th character extensions are to be added to each code from category W58:
- a initial encounter
- d subsequent encounter
- q sequelae

**W58.0 Contact with alligator**
- W58.01 Bitten by alligator
- W58.02 Struck by alligator
- W58.03 Crushed by alligator

**W58.1 Contact with crocodile**
- W58.11 Bitten by crocodile
- W58.12 Struck by crocodile
- W58.13 Crushed by crocodile

**W59 Contact with other non-venomous reptiles**

*Excludes:*
- Contact with venomous reptile (T63.0_, T63.1_)

The following 7th character extensions are to be added to each code from category W59:
- a initial encounter
- d subsequent encounter
- q sequelae

**W59.0 Contact with non-venomous lizards**
- W59.01 Bitten by non-venomous lizards
- W59.02 Struck by non-venomous lizards
- W59.09 Other contact with non-venomous lizards
  - Exposure to non-venomous lizards
W59.1 Contact with non-venomous snakes
   W59.11 Bitten by non-venomous snake
   W59.12 Struck by non-venomous snake
   W59.13 Crushed by non-venomous snake
   W59.19 Other contact with non-venomous snake

W59.2 Contact with turtles
   *Excludes:*
   - Contact with tortoises (W59.8-)
   W59.21 Bitten by turtle
   W59.22 Struck by turtle
   W59.29 Other contact with turtle
       Exposure to turtles

W59.8 Contact with other non-venomous reptiles
   W59.81 Bitten by other non-venomous reptiles
   W59.82 Struck by other non-venomous reptiles
   W59.83 Crushed by other non-venomous reptiles
   W59.89 Other contact with other non-venomous reptiles

W60 Contact with non-venomous plant thorns and spines and sharp leaves
   *Excludes:*
   - Contact with venomous plants (T63._)

   The following 7th character extensions are to be added to each code from category W60:
   - initial encounter
   - subsequent encounter
   - sequela

W61 Contact with birds (domestic) (wild)
   Contact with excreta of birds

   The following 7th character extensions are to be added to each code from category W61:
   - initial encounter
   - subsequent encounter
   - sequela

W61.0 Contact with parrot
   W61.01 Bitten by parrot
   W61.02 Struck by parrot
   W61.09 Other contact with parrot
       Exposure to parrots

W61.1 Contact with macaw
   W61.11 Bitten by macaw
   W61.12 Struck by macaw
   W61.19 Other contact with macaw
       Exposure to macaws

W61.2 Contact with other psittacines
   W61.21 Bitten by other psittacines
   W61.22 Struck by other psittacines
   W61.29 Other contact with other psittacines
Exposure to other psittacines

**W61.3 Contact with chicken**
- W61.32 Struck by chicken
- W61.33 Pecked by chicken
- W61.39 Other contact with chicken

Exposure to chickens

**W61.4 Contact with turkey**
- W61.42 Struck by turkey
- W61.43 Pecked by turkey
- W61.49 Other contact with turkey

**W61.5 Contact with goose**
- W61.51 Bitten by goose
- W61.52 Struck by goose
- W61.59 Other contact with goose

**W61.6 Contact with duck**
- W61.61 Bitten by duck
- W61.62 Struck by duck
- W61.69 Other contact with duck

**W61.9 Contact with other birds**
- W61.91 Bitten by other birds
- W61.92 Struck by other birds
- W61.99 Other contact with other birds

**W62 Contact with non-venomous amphibians**

*Excludes:*
- Contact with venomous amphibians (T63.81-R63.83)

The following 7th character extensions are to be added to each code from category W62:
- a initial encounter
- d subsequent encounter
- q sequelae

**W64 Exposure to other animate mechanical forces**

The following 7th character extensions are to be added to each code from category W64:
- a initial encounter
- d subsequent encounter
- q sequelae

**Accidental non-transport drowning and submersion (W65-W74)**

*Excludes:*
- Accidental drowning and submersion due to fall into water (W16._)
- Accidental drowning and submersion due to water transport accident (V90._, V92._)
- Accidental drowning and submersion due to cataclysm (X34-X39)
W65  Accidental drowning and submersion while in bath tub

Excludes:
  Accidental drowning and submersion due to fall in (into) bathtub (W16.211)

The following 7th character extensions are to be added to each code from category W65:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W66  Deactivated.  See W16

W67  Accidental drowning and submersion while in swimming pool

Excludes:
  Accidental drowning and submersion due to fall into swimming pool (W16.011, W16.021, W16.031)
  Accidental drowning and submersion due to striking into wall of swimming pool (W22.041)

The following 7th character extensions are to be added to each code from category W67:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W68  Deactivated.  See W16

W69  Accidental drowning and submersion while in natural water

Includes:
  Accidental drowning and submersion while in lake
  Accidental drowning and submersion while in open sea
  Accidental drowning and submersion while in river
  Accidental drowning and submersion while in stream

Excludes:
  Accidental drowning and submersion due to fall into natural body of water (W16.111, W16.121, W16.131)

The following 7th character extensions are to be added to each code from category W69:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

W70  Deactivated.  See W16
W73 Other specified cause of accidental non-transport drowning and submersion

Includes:
Accidental drowning and submersion while in quenching tank
Accidental drowning and submersion while in reservoir

Excludes:
Accidental drowning and submersion due to fall into other water (W16.311, W16.321, W16.331)

The following 7th character extensions are to be added to each code from category W73:
- a initial encounter
- d subsequent encounter
- q sequelae

W74 Unspecified cause of accidental drowning and submersion

Includes:
Drowning, NOS

W75-W77 Deactivated. See T71

W78 Deactivated. See T17.81, T18.81

W79-W80 Deactivated. See T18 and T18

W81 Deactivated. See T71.2

W83 Deactivated. See T71

W84 Deactivated. See T71.9

Exposure to electric current, radiation, and extreme ambient air temperature and pressure (W85-W99)

Excludes:
Exposure to:
Natural cold (X31)
Natural heat (X30)
Natural radiation, NOS (X39)
Sunlight (X32)
Lightning (T75.0_)
W85 Exposure to electric transmission lines

Includes:
   Broken power line

The following 7th character extensions are to be added to each code from category W85:
   a initial encounter
   d subsequent encounter
   q sequelae

W86 Exposure to other specified electric current

The following 7th character extensions are to be added to each code from category W86:
   a initial encounter
   d subsequent encounter
   q sequelae

W86.0 Exposure to domestic wiring and appliances
W86.1 Exposure to industrial wiring, appliances and electrical machinery
   Exposure to conductors
   Exposure to control apparatus
   Exposure to electrical equipment and machinery
   Exposure to transformers
W86.8 Exposure to other electric current
   Exposure to wiring and appliances in or on farm (not farmhouse)
   Exposure to wiring and appliances outdoors
   Exposure to wiring and appliances in or on public building
   Exposure to wiring and appliances in or on residential institutions
   Exposure to wiring and appliances in or on schools

W87 Deactivated. See W86.

W88 Exposure to ionizing radiation

Excludes:
   Exposure to sunlight (X32)

The following 7th character extensions are to be added to each code from category W88:
   a initial encounter
   d subsequent encounter
   q sequelae

W88.0 Exposure to X-rays
W88.1 Exposure to radioactive isotopes
W89  Exposure to man-made visible and ultraviolet light

*Includes:*
   Exposure to welding light (arc)

*Excludes:*
   Exposure to sunlight (X32)

The following 7th character extensions are to be added to each code from category W89:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W89.0 Exposure to welding light (arc)
W89.1 Exposure to tanning bed
W89.8 Exposure to other man-made visible and ultraviolet light
W89.9 Exposure to unspecified man-made visible and ultraviolet light

W90  Exposure to other non-ionizing radiation

*Excludes:*
   Exposure to sunlight (X32)

The following 7th character extensions are to be added to each code from category W90:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W90.0 Exposure to radiofrequency
W90.1 Exposure to infrared radiation
W90.2 Exposure to laser radiation
W90.8 Exposure to other non-ionizing radiation

W91  Deactivated. See W90.

W92  Exposure to excessive heat of man-made origin

The following 7th character extensions are to be added to each code from category W92:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

W93  Exposure to excessive cold of man-made origin

The following 7th character extensions are to be added to each code from category W93:
   a  initial encounter
   d  subsequent encounter
   q  sequelae
W93.0 Contact with or inhalation of dry ice
   W93.01 Contact with dry ice
   W93.02 Inhalation of dry ice
W93.1 Contact with or inhalation of liquid air
   W93.11 Contact with liquid air
   Contact with liquid hydrogen
   Contact with liquid nitrogen
   W93.12 Inhalation of liquid air
   Inhalation of liquid hydrogen
   Inhalation of liquid nitrogen
W93.2 Prolonged exposure in deep freeze unit or refrigerator
W93.8 Exposure to other excessive cold of man-made origin

W94 Exposure to high and low pressure and changes in air pressure

The following 7th character extensions are to be added to each code from category W94:
   a initial encounter
   d subsequent encounter
   q sequelae

W94.0 Exposure to prolonged high air pressure
W94.1 Exposure to prolonged low air pressure
   W94.11 Exposure to residence or prolonged visit at high altitude
   W94.12 Exposure to other prolonged low air pressure
W94.2 Exposure to rapid changes in air pressure during ascent
   W94.21 Exposure to reduction in atmospheric pressure while surfacing from deep-water diving
   W94.22 Exposure to reduction in atmospheric pressure while surfacing from underground
   W94.23 Exposure to sudden change in air pressure in aircraft during ascent
   W94.29 Exposure to other rapid changes in air pressure during ascent
W94.3 Exposure to rapid changes in air pressure during descent
   W94.31 Exposure to sudden change in air pressure in aircraft during ascent or descent
   W94.32 Exposure to high air pressure from rapid descent in water
   W94.39 Exposure to other rapid changes in air pressure during descent
W99 Exposure to other man-made environmental factors

The following 7th character extensions are to be added to each code from category W99:
   a initial encounter
   d subsequent encounter
   q sequelae

Exposure to smoke, fire, and flames (X00-X09)

Excludes:
   Arson (X97)
   Explosions (W35-W40)
   Lightning (T75.0_)
   Transport accident (V01-V99)
X00 Exposure to uncontrolled fire in building or structure

Includes:
Conflagration in building or structure
**Code first any cataclysm**

Excludes:
Exposure to ignition or melting of nightwear (X05)
Exposure to ignition or melting of other clothing and apparel (X06_)
Exposure to other specified smoke, fire, flames (X08_)

The following 7th character extensions are to be added to each code from category X00:
a initial encounter
d subsequent encounter
q sequelae

X00.0 Exposure to flames in uncontrolled fire in building or structure
X00.1 Exposure to smoke in uncontrolled fire in building or structure
X00.2 Injury due to collapse of burning building or structure in uncontrolled fire

Excludes:
Injury due to collapse of building not on fire (W20.1)

X00.3 Fall from burning building or structure in uncontrolled fire
X00.4 Hit by object from burning building or structure in uncontrolled fire
X00.5 Jump from burning building or structure in uncontrolled fire
X00.8 Other exposure to uncontrolled fire in building or structure

X01 Exposure to uncontrolled fire, not in building or structure
Exposure to forest fire

The following 7th character extensions are to be added to each code from category X01:
a initial encounter
d subsequent encounter
q sequelae

X01.0 Exposure to flames in uncontrolled fire, not in building or structure
X01.1 Exposure to smoke in uncontrolled fire, not in building or structure
X01.3 Fall due to uncontrolled fire, not in building or structure
X01.4 Hit by object due to uncontrolled fire, not in building or structure
X01.8 Other exposure to uncontrolled fire, not in building or structure

X02 Exposure to controlled fire in building or structure

Includes:
Exposure to fire in fireplace
Exposure to fire in stove

The following 7th character extensions are to be added to each code from category X02:
a initial encounter
d subsequent encounter
q sequelae
X02.0 Exposure to flames in controlled fire in building or structure
X02.1 Exposure to smoke in controlled fire in building or structure
X02.2 Injury due to collapse of burning building or structure in controlled fire
    Excludes:
    Injury due to collapse of building not on fire (W20.1)
X02.3 Fall from burning building or structure in controlled fire
X02.4 Hit by object from burning building or structure in controlled fire
X02.5 Jump from burning building or structure in controlled fire
X02.8 Other exposure to controlled fire in building or structure

X03 Exposure to controlled fire, non in building or structure

Includes:
   Exposure to bon fire
   Exposure to camp-fire
   Exposure to trash fire

The following 7th character extensions are to be added to each code from category X03:
   a initial encounter
   d subsequent encounter
   q sequelae

X03.0 Exposure to flames in controlled fire, not in building or structure
X03.1 Exposure to smoke in controlled fire, not in building or structure
X03.3 Fall due to controlled fire, not in building or structure
X03.4 Hit by object due to controlled fire, not in building or structure
X03.8 Other exposure to controlled fire, not in building or structure

X04 Exposure to ignition of highly flammable material

Includes:
   Exposure to ignition of gasoline
   Exposure to ignition of kerosene
   Exposure to ignition of petrol
   Exposure to ignition or melting of nightwear (X05)
   Exposure to or melting of other clothing and apparel (X06)

The following 7th character extensions are to be added to each code from category X04:
   a initial encounter
   d subsequent encounter
   q sequelae

X05 Exposure to ignition or melting of nightwear

Excludes:
   Exposure to uncontrolled fire in building or structure (X00._)
   Exposure to uncontrolled fire, not in building or structure (X01._)
   Exposure to controlled fire in building or structure (X02._)
   Exposure to controlled fire, not in building or structure (X03._)
   Exposure to ignition of highly flammable materials (X04._)
The following 7th character extensions are to be added to each code from category X05:
   a initial encounter
   d subsequent encounter
   q sequelae

X06  Exposure to ignition or melting of other clothing and apparel

Excludes:
   Exposure to uncontrolled fire in building or structure (X00._)
   Exposure to uncontrolled fire, not in building or structure (X01._)
   Exposure to controlled fire in building or structure (X02._)
   Exposure to controlled fire, not in building or structure (X03._)
   Exposure to ignition of highly flammable materials (X04._)

The following 7th character extensions are to be added to each code from category X06:
   a initial encounter
   d subsequent encounter
   q sequelae

X06.0  Exposure to ignition of plastic jewelry
X06.1  Exposure to melting of plastic jewelry
X06.2  Exposure to ignition of other clothing and apparel
X06.3  Exposure to melting of other clothing and apparel

X08  Exposure to other specified smoke, fire, and flames

The following 7th character extensions are to be added to each code from category X08:
   a initial encounter
   d subsequent encounter
   q sequelae

X08.0  Exposure to bed fire
   Exposure to mattress fire
   X08.00  Exposure to bed fire due to unspecified burning material
   X08.01  Exposure to bed fire due to burning cigarette
   X08.09  Exposure to bed fire due to other burning material
X08.1  Exposure to sofa fire
   X08.10  Exposure to sofa fire due to unspecified burning material
   X08.11  Exposure to sofa fire due to burning cigarette
   X08.19  Exposure to sofa fire due to other burning material
X08.2  Exposure to other furniture fire
   X08.20  Exposure to other furniture fire due to unspecified burning material
   X08.21  Exposure to other furniture fire due to burning cigarette
   X08.29  Exposure to fire other furniture due to other burning material
X08.8  Exposure to other specified smoke, fire and flames

X09  Deactivated. See X08
Contact with heat and hot substances (X10-X19)

Excludes:
  Exposure to excessive natural heat (X30)
  Exposure to fire and flames (X00-X09)

X10 Contact with hot drinks, food, fats, and cooking oils

The following 7th character extensions are to be added to each code from category X10:
  a initial encounter
  d subsequent encounter
  q sequelae

X10.0 Contact with hot drinks
X10.1 Contact with hot food
X10.2 Contact with fats and cooking oils

X11 Contact with hot tap-water
  Contact with boiling tap-water
  Contact with boiling water, NOS

Excludes:
  Contact with water heated on stove (X12)

The following 7th character extensions are to be added to each code from category X11:
  a initial encounter
  d subsequent encounter
  q sequelae

X11.0 Contact with hot water in bath or tub
  Excludes:
    Contact with running hot water in bath or tub (X11.1)
X11.1 Contact with running hot water
  Contact with hot water running out of hose
  Contact with hot water running out of tap
X11.8 Contact with other hot tap-water
  Contact with hot water in bucket
  Contact with hot tap-water, NOS
X12  **Contact with other hot fluids**

*Includes:*
   - Contact with water heated on stove

*Excludes:*
   - Hot (liquid) metals (X18)

The following 7th character extensions are to be added to each code from category X12:
   - a initial encounter
   - d subsequent encounter
   - q sequelae

X13  **Contact with steam and other hot vapors**

The following 7th character extensions are to be added to each code from category X13:
   - a initial encounter
   - d subsequent encounter
   - q sequelae

X13.0  Inhalation of steam and other hot vapors

X13.1  Other contact with steam and other hot vapors

X14  **Contact with hot air and other hot gases**

The following 7th character extensions are to be added to each code from category X14:
   - a initial encounter
   - d subsequent encounter
   - q sequelae

X14.0  Inhalation of hot air and gases

X14.1  Other contact with hot air and other hot gases

X15  **Contact with hot household appliances**

*Excludes:*
   - Contact with heating appliances (X16)
   - Exposure to controlled fir in building or structure due to household appliance (X02.8)
   - Exposure to household appliances electrical current (W86.0)

The following 7th character extensions are to be added to each code from category X15:
   - a initial encounter
   - d subsequent encounter
   - q sequelae

X15.0  Contact with hot stove (kitchen)

X15.1  Contact with hot toaster

X15.2  Contact with hotplate

X15.3  Contact with hot saucepan or skillet

X15.8  Contact with other hot household appliances
Contact with cooker
Contact with kettle
Contact with light bulbs

X16  Contact with hot heating appliances, radiators, and pipes

*Excludes:*
- Contact with powered appliances (W29._)
- Exposure to controlled fire in building or structure due to appliance (X02.8)
- Exposure to industrial appliances electrical current (W86.1)

The following 7th character extensions are to be added to each code from category X16:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X17  Contact with hot engines, machinery, and tools

*Excludes:*
- Contact with hot heating appliances, radiators and pipes (X16)
- Contact with hot household appliances (X15)

The following 7th character extensions are to be added to each code from category X17:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X18  Contact with other hot metals

*Includes:*
- Contact with liquid metal

The following 7th character extensions are to be added to each code from category X18:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X19  Contact with other heat and hot substances

*Excludes:*
- Objects that are not normally hot, e.g. an object made hot by a house fire (X00-X09)

The following 7th character extensions are to be added to each code from category X19:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X20-X29  Deactivated. See T63.
Exposure to forces of nature (X30-X39)

X30  Exposure to excessive natural heat

Includes:
- Exposure to excessive heat as the cause of sunstroke
- Exposure to heat NOS

Excludes:
- Excessive heat of man-made origin (W92)
- Exposure to man-made radiation (W89)
- Exposure to sunlight (X32)
- Exposure to tanning bed (W89)

The following 7th character extensions are to be added to each code from category X30:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X31  Exposure to excessive natural cold

Includes:
- Excessive cold as the cause of chilblains, NOS
- Excessive cold as the cause of immersion foot or hand exposure to cold, NOS
- Exposure to weather conditions

Excludes:
- Cold of man-made origin (W93._)
- Contact with or inhalation of:
  - Dry ice (W93._)
  - Liquefied gas (W93._)

The following 7th character extensions are to be added to each code from category X31:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X32  Exposure to sunlight

Excludes:
- Radiation-related disorders of the skin and subcutaneous tissue (L55-L59)
- Man-made radiation, i.e. tanning bed (W89)

The following 7th character extensions are to be added to each code from category X32:
  a  initial encounter
  d  subsequent encounter
  q  sequelae
X34  Earthquake

The following 7th character extensions are to be added to each code from category X34:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X35  Volcanic eruption

The following 7th character extensions are to be added to each code from category X35:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X36  Avalanche, landslide, and other earth movements

Includes:
  Victim of mudslide of cataclysmic nature

Excludes:
  Earthquake (X34)
  Transport accident involving collision with avalanche or landslide not in motion (V01-V99)

The following 7th character extensions are to be added to each code from category X36:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X37  Cataclysmic storm

The following 7th character extensions are to be added to each code from category X37:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X37.0  Hurricane
  Storm surge
  Typhoon

X37.1  Tornado
  Cyclone
  Twister

X37.2  Blizzard (snow)(ice)

X37.3  Dust storm

X37.4  Tidalwave
  X37.41  Tidal wave due to earthquake or volcanic eruption
  Tidal wave, NOS
  Tsunami
  X37.42  Tidal wave due to storm
X37.8 Other cataclysmic storms
   Cloudburst
   Torrential rain
   Excludes:
   Flood (X38)

X37.9 Unspecified cataclysmic storm
   Storm NOS
   Excludes:
   Collapse of dam or man-made structure causing earth movement (X39.0)

X38 Flood

Includes:
   Flood arising from remote storm
   Flood of cataclysmic nature arising from melting snow
   Flood resulting directly from storm

Excludes:
   Collapse of dam or man-made structure causing earth movement (X39.0)
   Tidal wave NOS (X39.2)
   Tidal wave caused by storm (X37.2)

The following 7th character extensions are to be added to each code from category X38:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X39 Exposure to other forces of nature

The following 7th character extensions are to be added to each code from category X39:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X39.0 Exposure to natural radiation
   Excludes:
   Man-made radiation (W88-W90)
   Sunlight (X32)
   X39.01 Exposure to radon
   X39.08 Exposure to other natural radiation

X39.8 Other exposure to forces of nature

X40-X49 Deactivated. See T36-T65 with sixth-character 1

X50-X51 Deactivated. See Y92 and Y93

Accidental exposure to other specified factors (X52, X58)
X52  Prolonged stay in weightless environment

*Includes:*
  Weightlessness in spacecraft (simulator)

The following 7th character extensions are to be added to each code from category X52:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X58  Exposure to other specified factors

The following 7th character extensions are to be added to each code from category X58:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

**Intentional self-harm (X71-X83)**

*Includes:*
  Purposely self-inflicted injury
  Suicide (attempted)

X60-X69  Deactivated. See T36-T65 with sixth-character 2.

X70  Deactivated. See T71.

X71  Intentional self-harm by drowning and submersion

The following 7th character extensions are to be added to each code from category X71:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X71.0  Intentional self-harm by drowning and submersion while in bathtub
X71.1  Intentional self-harm by drowning and submersion while in swimming pool
X71.2  Intentional self-harm by drowning and submersion after jump into swimming pool
X71.3  Intentional self-harm by drowning and submersion in natural water
X71.8  Other internationals self-harm by drowning and submersion
X71.9  Intentional self-harm by drowning and submersion, unspecified

X72  Intentional self-arm by handgun discharge

*Includes:*
  Intentional self-harm by gun for single hand use
  Intentional self-harm by pistol
  Intentional self-harm by revolver
Excludes:
  Very pistol (X74.8)

The following 7th character extensions are to be added to each code from category X72:
  a initial encounter
  d subsequent encounter
  q sequelae

**X73 Intentional self-harm by rifle, shotgun, and larger firearm discharge**

Excludes:
  Airgun (X74.01)

The following 7th character extensions are to be added to each code from category X73:
  a initial encounter
  d subsequent encounter
  q sequelae

**X73.0 Intentional self-harm by shotgun discharge**
**X73.1 Intentional self-harm by hunting rifle discharge**
**X73.2 Intentional self-harm by machine gun discharge**
**X73.8 Intentional self-harm by other larger firearm discharge**
**X73.9 Intentional self-harm by unspecified larger firearm discharge**

**X74 Intentional self-harm by other and unspecified firearm and gun discharge**

The following 7th character extensions are to be added to each code from category X74:
  a initial encounter
  d subsequent encounter
  q sequelae

**X74.0 Intentional self-harm by gas, air, or spring-operated guns**
  X74.01 Intentional self-harm by airgun
  Intentional self-harm by BB gun discharge
  Intentional self-harm by pellet gun discharge
  X74.02 Intentional self-harm by paintball gun
  X74.09 Intentional self-harm by other gas, air, or spring-operated gun

**X74.8 Intentional self-harm by other firearm discharge**
  Intentional self-harm by Very pistol (Flare) discharge
**X74.9 Intentional self-harm by unspecified firearm discharge**

**X75 Intentional self-harm by explosive material**

The following 7th character extensions are to be added to each code from category X75:
  a initial encounter
  d subsequent encounter
  q sequelae
X76  Intentional self-harm by smoke, fire, and flames

The following 7th character extensions are to be added to each code from category X76:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X77  Intentional self-harm by steam, hot vapors, and hot objects

The following 7th character extensions are to be added to each code from category X77:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X77.0  Intentional self-harm by steam or hot vapors
X77.1  Intentional self-harm by hot tap water
X77.2  Intentional self-harm by other hot fluids
X77.3  Intentional self-harm by hot household appliances
X77.8  Intentional self-harm by other hot objects
X77.9  Intentional self-harm by unspecified objects

X78  Intentional self-harm by sharp object

The following 7th character extensions are to be added to each code from category X78:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X78.0  Intentional self-harm by sharp glass
X78.1  Intentional self-harm by knife
X78.2  Intentional self-harm by sword or dagger
X78.8  Intentional self-harm by other sharp object
X78.9  Intentional self-harm by unspecified sharp object

X79  Intentional self-harm by blunt object

The following 7th character extensions are to be added to each code from category X79:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X80  Intentional self-harm by jumping from a high place

The following 7th character extensions are to be added to each code from category X80:
   a  initial encounter
   d  subsequent encounter
   q  sequelae
X81  Intentional self-harm by jumping or lying in front of moving object

The following 7th character extensions are to be added to each code from category X81:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X81.0  Intentional self-harm by jumping or lying in front of motor vehicle
X81.1  Intentional self-harm by jumping or lying in front of (subway) train
X81.8  Intentional self-harm by jumping or lying in front of moving object

X82  Intentional self-harm by crashing of motor vehicle

The following 7th character extensions are to be added to each code from category X82:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X82.0  Intentional collision of motor vehicle with other motor vehicle
X82.1  Intentional collision of motor vehicle with train
X82.2  Intentional collision of motor vehicle with tree
X82.8  Other intentional self-harm by crashing of motor vehicle

X83  Intentional self-harm by other specified means

Excludes:
   Intentional self-harm by poisoning or contact with toxic substance (see table of toxic drugs
   and chemicals)

The following 7th character extensions are to be added to each code from category X83:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

X84  Deactivated. See T14.0

Assault (X92-Y08)

Includes:
   Homicide
   Injuries inflicted by another person with intent to injure or kill, by any means

Excludes:
   Injuries due to legal intervention (Y35._)
   Injuries due to operations of war (Y36._)
   Injuries due to terrorism (Y38._)
X85-X90 Deactivated. See categories T36-T65 with sixth-character 3

X91 Deactivated. See T71.

X92 Assault by drowning and submersion

The following 7th character extensions are to be added to each code from category X92:
- a initial encounter
- d subsequent encounter
- q sequelae

X92.0 Assault by drowning and submersion while in bathtub
X92.1 Assault by drowning and submersion while in swimming pool
X92.2 Assault by drowning and submersion after push into swimming pool
X92.3 Assault by drowning and submersion in natural water
X92.8 Other assault by drowning and submersion
X92.9 Assault by drowning and submersion, unspecified

X93 Assault by handgun discharge

Includes:
- Assault by discharge of gun for single hand use
- Assault by discharge of pistol
- Assault by discharge of revolver

Excludes:
- Very pistol (X95.8)

The following 7th character extensions are to be added to each code from category X93:
- a initial encounter
- d subsequent encounter
- q sequelae

X94 Assault by rifle, shotgun, and larger firearm discharge

Excludes:
- Airgun (X95.01)

The following 7th character extensions are to be added to each code from category X94:
- a initial encounter
- d subsequent encounter
- q sequelae

X94.0 Assault by shotgun
X94.1 Assault by hunting rifle
X94.2 Assault by machine gun
X94.8 Assault by other larger firearm discharge
X94.9 Assault by unspecified larger firearm discharge
X95  Assault by other and unspecified firearm and gun discharge

The following 7th character extensions are to be added to each code from category X95:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X95.0  Assault by gas, air, or spring-operated guns
  X95.01  Assault by airgun discharge
           Assault by BB gun discharge
           Assault by pellet gun discharge
  X95.02  Assault by paintball gun discharge
  X95.09  Assault by other gas, air, or spring-operated gun

X95.8  Assault by other firearm discharge
  Assault by very pistol (Flare) discharge

X95.9  Assault by unspecified firearm discharge

X96  Assault by explosive material

Excludes:
  Incendiary device (X97)
  Terrorism involving explosive material (Y38.2_)

The following 7th character extensions are to be added to each code from category X96:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

X96.0  Assault by antipersonnel bomb
X96.1  Assault by gasoline bomb
X96.2  Assault by letter bomb
X96.3  Assault by fertilizer bomb
X96.4  Assault by pipe bomb
X96.8  Assault by other specified explosive
X96.9  Assault by unspecified explosive

X97  Assault by smoke, fire, and flames

Includes:
  Assault by arson
  Assault by cigarettes
  Assault by incendiary device

The following 7th character extensions are to be added to each code from category X97:
  a  initial encounter
  d  subsequent encounter
  q  sequelae
**X98  Assault by steam, hot vapors, and hot objects**

The following 7th character extensions are to be added to each code from category X98:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

- **X98.0** Assault by steam or hot vapors
- **X98.1** Assault by hot tap water
- **X98.2** Assault by hot fluids
- **X98.3** Assault by hot household appliances
- **X98.8** Assault by other hot objects
- **X98.9** Assault by unspecified hot objects

**X99  Assault by sharp object**

*Excludes:*
- Assault by strike by sports equipment (Y08.0)

The following 7th character extensions are to be added to each code from category X99:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

- **X99.0** Assault by sharp glass
- **X99.1** Assault by knife
- **X99.2** Assault by sword or dagger
- **X99.8** Assault by other sharp object
- **X99.9** Assault by unspecified sharp object
  - Assault by stabbing, NOS

**Y00  Assault by blunt object**

*Excludes:*
- Assault by strike by sports equipment (Y08.0)

The following 7th character extensions are to be added to each code from category Y00:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae

**Y01  Assault by pushing from high place**

The following 7th character extensions are to be added to each code from category Y01:
- **a** initial encounter
- **d** subsequent encounter
- **q** sequelae
Y02  Assault by pushing or placing victim in front of moving object

The following 7th character extensions are to be added to each code from category Y02:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y02.0  Assault by pushing or placing victim in front of motor vehicle
Y02.1  Assault by pushing or placing victim in front of (subway) train
Y02.8  Assault by pushing of placing victim in front of other moving object

Y03  Assault by crashing of motor vehicle

The following 7th character extensions are to be added to each code from category Y03:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y03.0  Assault by being hit or run over by motor vehicle
Y03.8  Other assault by crashing motor vehicle

Y04  Assault by bodily force

Excludes:
  Assault by:
    Submersion (X92._)
    Use of weapon (X93-X95, X99, Y00)
    Sexual assault (Y05._)

The following 7th character extensions are to be added to each code from category Y04:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y04.0  Assault by unarmed brawl or fight
Y04.1  Assault by human bite
Y04.2  Assault by strike against of bumped into by another person
Y04.8  Assault by other bodily force
    Assault by bodily force, NOS

Y05  Sexual assault

Includes:
  Rape (attempted)
  Sodomy (attempted)

Excludes:
  Adult sexual abuse (T74.21)
  Child sexual abuse (T74.22)
The following 7th character extensions are to be added to each code from category Y05:
   a  initial encounter
   d  subsequent encounter
   q  sequelae

**Y06  Deactivated. See T74.0, T76.0.**

**Y07  Perpetrator of assault, maltreatment, and neglect**

**Codes from this category are for use only in cases of confirmed abuse (T74._). Selection of the correct perpetrator code is based on the relationship between the perpetrator and the victim**

*Includes:*
   Perpetrator of abandonment
   Perpetrator of emotional neglect
   Perpetrator of mental cruelty
   Perpetrator of physical abuse
   Perpetrator of physical neglect
   Perpetrator of sexual abuse
   Perpetrator of torture

**Y07.0  Spouse of partner as perpetrator of maltreatment and neglect**

*Spouse or partner as perpetrator of maltreatment and neglect against spouse or partner*

Y07.01  Husband as perpetrator of maltreatment and neglect
Y07.02  Wife as perpetrator of maltreatment and neglect
Y07.03  Male partner as perpetrator of maltreatment and neglect
Y07.04  Female partner as perpetrator of maltreatment and neglect

**Y07.1  Parent (adoptive) (biological) as perpetrator of maltreatment and neglect**

Y07.11  Biological father as perpetrator of maltreatment and neglect
Y07.12  Biological mother as perpetrator of maltreatment and neglect
Y07.13  Adoptive father as perpetrator of maltreatment and neglect
Y07.14  Adoptive mother as perpetrator of maltreatment and neglect

**Y07.4  Other family member as perpetrator of maltreatment and neglect**

Y07.41  Sibling
   Y07.410  Brother as perpetrator of maltreatment and neglect
   Y07.411  Sister as perpetrator of maltreatment and neglect

Y07.42  Foster parent
   Y07.420  Foster father as perpetrator of maltreatment and neglect
   Y07.421  Foster mother as perpetrator of maltreatment and neglect

Y07.43  Stepparent or stepsibling as perpetrator of maltreatment and neglect
   Y07.430  Stepfather as perpetrator of maltreatment and neglect
   Y07.432  Male friend of parent (co-residing in household) as perpetrator of maltreatment and neglect
   Y07.433  Stepmother as perpetrator of maltreatment and neglect
   Y07.434  Female friend of parent (co-residing in household) as perpetrator of maltreatment and neglect
   Y07.435  Stepbrother as perpetrator of maltreatment and neglect
   Y07.436  Stepsister as perpetrator of maltreatment and neglect
Y07.49 Other family member
Y07.490 Male cousin as perpetrator of maltreatment and neglect
Y07.491 Female cousin as perpetrator of maltreatment and neglect
Y07.499 Other family member as perpetrator of maltreatment and neglect
Y07.5 Non-family member
Y07.50 Unspecified non-family member as perpetrator of maltreatment and neglect
Y07.51 Daycare provider
Y07.510 At-home childcare provider as perpetrator of maltreatment and neglect
Y07.511 Daycare center childcare provider as perpetrator of maltreatment and neglect
Y07.512 At-home adult care provider as perpetrator of maltreatment and neglect
Y07.513 Adult care center provider as perpetrator of maltreatment and neglect
Y07.519 Unspecified daycare provider as perpetrator of maltreatment and neglect
Y07.52 Healthcare provider
Y07.521 Mental health provider as perpetrator of maltreatment and neglect
Y07.528 Other therapist or healthcare provider as perpetrator of maltreatment and neglect
  Nurse
  Occupational therapist
  Physical therapist
  Speech therapist
Y07.529 Unspecified healthcare provider as perpetrator of maltreatment and neglect
Y07.53 Teacher or instructor as perpetrator of maltreatment and neglect
  Coach as perpetrator of maltreatment and neglect
Y07.59 Other non-family member as perpetrator of maltreatment and neglect

Y08 Assault by other specified means

The following 7th character extensions are to be added to each code from category Y08:
  a initial encounter
  d subsequent encounter
  q sequela

Y08.0 Assault by strike by sport equipment
Y08.01 Assault by strike by hockey stick
Y08.02 Assault by strike by baseball bat
Y08.09 Assault by strike, other sport equipment

Y08.8 Assault by other specified means
Y08.81 Assault by crashing aircraft
Y08.89 Assault by other specified means

Event of undetermined intent (Y20-Y33)

**Undetermined intent is only for use when there is specific documentation in the record that the intent of the injury cannot be determined. If no such documentation is present, code to accidental (unintentional)**
Y10-Y19  Deactivated. See codes T36-T65 with a 6th-character 4

Y20  Deactivated. See T71.

Y21  Drowning and submersion, undetermined intent

The following 7th character extensions are to be added to each code from category Y21:
  a  initial encounter  
  d  subsequent encounter  
  q  sequelae

Y21.0  Drowning and submersion while in bathtub, undetermined intent
Y21.1  Drowning and submersion after fall into bathtub, undetermined intent
Y21.2  Drowning and submersion while in swimming pool, undetermined intent
Y21.3  Drowning and submersion after fall into swimming pool, undetermined intent
Y21.4  Drowning and submersion in natural water, undetermined intent
Y21.8  Other drowning and submersion, undetermined intent
Y21.9  Unspecified drowning and submersion, undetermined intent

Y22  Handgun discharge, undetermined intent

Includes:
   Discharge of gun for single hand use, undetermined use  
   Discharge of pistol, undetermined intent  
   Discharge of revolver, undetermined intent

Excludes:
   Very pistol (Y24.8)

The following 7th character extensions are to be added to each code from category Y22:
  a  initial encounter  
  d  subsequent encounter  
  q  sequelae

Y23  Rifle, shotgun, and larger firearm discharge, undetermined intent

Excludes:
   Airgun (Y24.0)

The following 7th character extensions are to be added to each code from category Y23:
  a  initial encounter  
  d  subsequent encounter  
  q  sequelae

Y23.0  Shotgun discharge, undetermined intent
Y23.1  Hunting rifle discharge, undetermined intent
Y23.2  Military firearm discharge, undetermined intent
Y23.3  Machine gun discharge, undetermined intent
Y23.8  Other large firearm discharge, undetermined intent
Y23.9  Unspecified larger firearm discharge, undetermined intent
Y24  Other and unspecified firearm discharge, undetermined intent

The following 7th character extensions are to be added to each code from category Y24:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y24.0  Airgun discharge, undetermined intent
      BB gun discharge, undetermined intent
      Pellet gun discharge, undetermined intent
Y24.8  Other firearm discharge, undetermined intent
      Paintball gun discharge, undetermined intent
      Very pistol (Flare) discharge, undetermined intent
Y24.9  Unspecified firearm discharge, undetermined intent

Y25  Contact with explosive material, undetermined intent

The following 7th character extensions are to be added to each code from category Y25:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y26  Exposure to smoke, fire, and flames, undetermined intent

The following 7th character extensions are to be added to each code from category Y26:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y27  Contact with steam, hot vapors, and hot objects, undetermined intent

The following 7th character extensions are to be added to each code from category Y27:
  a  initial encounter
  d  subsequent encounter
  q  sequelae

Y27.0  Contact with steam and hot vapors, undetermined intent
Y27.1  Contact with hot tap water, undetermined intent
Y27.2  Contact with hot fluids, undetermined intent
Y27.3  Contact with hot household appliance, undetermined intent
Y27.8  Contact with other hot objects, undetermined intent
Y27.9  Contact with unspecified hot objects, undetermined intent

Y28  Contact with sharp object, undetermined intent

The following 7th character extensions are to be added to each code from category Y28:
  a  initial encounter
  d  subsequent encounter
  q  sequelae
Y28.0 Contact with sharp glass, undetermined intent  
Y28.1 Contact with knife, undetermined intent  
Y28.2 Contact with sword or dagger, undetermined intent  
Y28.8 Contact with other sharp object, undetermined intent  
Y28.9 Contact with unspecified object, undetermined intent

Y29 Contact with blunt object, undetermined event

The following 7th character extensions are to be added to each code from category Y29:
   a initial encounter
   d subsequent encounter
   q sequelae

Y30 Falling, jumping, or pushed from a high place, undetermined intent

Includes:
   Victim falling from one level to another, undetermined intent

The following 7th character extensions are to be added to each code from category Y30:
   a initial encounter
   d subsequent encounter
   q sequelae

Y31 Falling, lying, or running before or into moving object, undetermined intent

The following 7th character extensions are to be added to each code from category Y31:
   a initial encounter
   d subsequent encounter
   q sequelae

Y32 Crashing of motor vehicle, undetermined intent

The following 7th character extensions are to be added to each code from category Y32:
   a initial encounter
   d subsequent encounter
   q sequelae

Y33 Other specified events, undetermined intent

The following 7th character extensions are to be added to each code from category Y33:
   a initial encounter
   d subsequent encounter
   q sequelae
Legal Intervention, operations of war, military operations, and terrorism (Y35-Y38)

Y35 Legal Intervention

Includes:
Any injury sustained as a result of an encounter with any law enforcement official, serving in any capacity at the time of the encounter, whether on-duty or off-duty.
Injury to law enforcement official, suspect and bystander

The following 7th character extensions are to be added to each code from category Y35:
a initial encounter
d subsequent encounter
q sequelae

Y35.0 Legal intervention involving firearm discharge
Y35.00 Legal intervention involving unspecified firearm discharge
Legal intervention involving gunshot wound
Legal intervention involving shot, NOS
Y35.001 Legal intervention involving unspecified firearm discharge, law enforcement official injured
Y35.002 Legal intervention involving unspecified firearm discharge, bystander injured
Y35.003 Legal intervention involving unspecified firearm discharge, suspect injured

Y35.01 Legal intervention involving injury by machine gun
Y35.011 Legal intervention involving injury by machine gun, law enforcement official injured
Y35.012 Legal intervention involving injury by machine gun, bystander injured
Y35.013 Legal intervention involving injury by machine gun, suspect injured

Y35.02 Legal intervention involving injury by handgun
Y35.021 Legal intervention involving injury by handgun, law enforcement official injured
Y35.022 Legal intervention involving injury by handgun, bystander injured
Y35.023 Legal intervention involving injury by handgun, suspect injured

Y35.03 Legal intervention involving injury by rifle pellet
Y35.031 Legal intervention involving injury by rifle pellet, law enforcement official injured
Y35.032 Legal intervention involving injury by rifle pellet, bystander injured
Y35.033 Legal intervention involving injury by rifle pellet, suspect injured

Y35.04 Legal intervention involving injury by rubber bullet
Y35.041 Legal intervention involving injury by rubber bullet, law enforcement official injured
Y35.042 Legal intervention involving injury by rubber bullet, bystander injured
Y35.043 Legal intervention involving injury by rubber bullet, suspect injured

Y35.09 Legal intervention involving other firearm discharge
Y35.091 Legal intervention involving other firearm discharge, law enforcement official injured
Y35.092  Legal intervention involving other firearm discharge, bystander injured
Y35.093  Legal intervention involving other firearm discharge, suspect injured

Y35.1  Legal intervention involving explosives
Y35.10  Legal intervention involving unspecified explosives
Y35.101 Legal intervention involving unspecified explosives, law enforcement official injured
Y35.102 Legal intervention involving unspecified explosives, bystander injured
Y35.103 Legal intervention involving unspecified explosives, suspect injured
Y35.11  Legal intervention involving injury by dynamite
Y35.111 Legal intervention involving injury by dynamite, law enforcement official injured
Y35.112 Legal intervention involving injury by dynamite, bystander injured
Y35.113 Legal intervention involving injury by dynamite, suspect injured
Y35.12  Legal intervention involving injury by explosive shell
Y35.121 Legal intervention involving injury by explosive shell, law enforcement official injured
Y35.122 Legal intervention involving injury by explosive shell, bystander injured
Y35.123 Legal intervention involving injury by explosive shell, suspect injured
Y35.19  Legal intervention involving other explosives
Legal intervention involving injury by grenade
Legal intervention involving injury by mortar bomb
Y35.191 Legal intervention involving other explosives, law enforcement official injured
Y35.192 Legal intervention involving other explosives, bystander injured
Y35.193 Legal intervention involving other explosives, suspect injured

Y35.2  Legal intervention involving gas
Legal intervention involving asphyxiation by gas
Legal intervention involving poisoning by gas
Y35.20  Legal intervention involving unspecified gas
Y35.201 Legal intervention involving unspecified gas, law enforcement official injured
Y35.202 Legal intervention involving unspecified gas, bystander injured
Y35.203 Legal intervention involving unspecified gas, suspect injured
Y35.21  Legal intervention involving injury by tear gas
Y35.211 Legal intervention involving injury by tear gas, law enforcement official injured
Y35.212 Legal intervention involving injury by tear gas, bystander injured
Y35.213 Legal intervention involving injury by tear gas, suspect injured
Y35.29  Legal intervention involving other gas
Y35.291 Legal intervention involving other gas, law enforcement official injured
Y35.292 Legal intervention involving other gas, bystander injured
Y35.293 Legal intervention involving other gas, suspect injured

Y35.3  Legal intervention involving blunt objects
Legal intervention involving being hit or struck by blunt object
Y35.30  Legal intervention involving unspecified blunt objects
Y35.301 Legal intervention involving unspecified blunt objects, law enforcement official injured
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
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</thead>
<tbody>
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<td>Y35.302</td>
<td>Legal intervention involving unspecified blunt objects, bystander injured</td>
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<tr>
<td>Y35.303</td>
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<tr>
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<td>Legal intervention involving baton, bystander injured</td>
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<td>Y35.313</td>
<td>Legal intervention involving baton, suspect injured</td>
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<td>Y35.39</td>
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<td>Y35.391</td>
<td>Legal intervention involving other blunt objects, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.392</td>
<td>Legal intervention involving other blunt objects, bystander injured</td>
</tr>
<tr>
<td>Y35.393</td>
<td>Legal intervention involving other blunt objects, suspect injured</td>
</tr>
<tr>
<td>Y35.4</td>
<td>Legal intervention involving sharp objects</td>
</tr>
<tr>
<td>Y35.40</td>
<td>Legal intervention involving being cut by sharp objects</td>
</tr>
<tr>
<td>Y35.41</td>
<td>Legal intervention involving being stabbed by sharp objects</td>
</tr>
<tr>
<td>Y35.401</td>
<td>Legal intervention involving unspecified sharp objects, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.402</td>
<td>Legal intervention involving unspecified sharp objects, bystander injured</td>
</tr>
<tr>
<td>Y35.403</td>
<td>Legal intervention involving unspecified sharp objects, suspect injured</td>
</tr>
<tr>
<td>Y35.41</td>
<td>Legal intervention involving bayonet</td>
</tr>
<tr>
<td>Y35.411</td>
<td>Legal intervention involving bayonet, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.412</td>
<td>Legal intervention involving bayonet, bystander injured</td>
</tr>
<tr>
<td>Y35.413</td>
<td>Legal intervention involving bayonet, suspect injured</td>
</tr>
<tr>
<td>Y35.49</td>
<td>Legal intervention involving other sharp objects</td>
</tr>
<tr>
<td>Y35.491</td>
<td>Legal intervention involving other sharp objects, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.492</td>
<td>Legal intervention involving other sharp objects, bystander injured</td>
</tr>
<tr>
<td>Y35.493</td>
<td>Legal intervention involving other sharp objects, suspect injured</td>
</tr>
<tr>
<td>Y35.8</td>
<td>Legal intervention involving other specified means</td>
</tr>
<tr>
<td>Y35.81</td>
<td>Legal intervention involving manhandling</td>
</tr>
<tr>
<td>Y35.811</td>
<td>Legal intervention involving manhandling, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.812</td>
<td>Legal intervention involving manhandling, bystander injured</td>
</tr>
<tr>
<td>Y35.813</td>
<td>Legal intervention involving manhandling, suspect injured</td>
</tr>
<tr>
<td>Y35.89</td>
<td>Legal intervention involving other specified means</td>
</tr>
<tr>
<td>Y35.891</td>
<td>Legal intervention involving other specified means, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.892</td>
<td>Legal intervention involving other specified means, bystander injured</td>
</tr>
<tr>
<td>Y35.893</td>
<td>Legal intervention involving other specified means, suspect injured</td>
</tr>
<tr>
<td>Y35.9</td>
<td>Legal intervention, means unspecified</td>
</tr>
<tr>
<td>Y35.91</td>
<td>Legal intervention, means unspecified, law enforcement official injured</td>
</tr>
<tr>
<td>Y35.92</td>
<td>Legal intervention, means unspecified, bystander injured</td>
</tr>
<tr>
<td>Y35.93</td>
<td>Legal intervention, means unspecified, suspect injured</td>
</tr>
</tbody>
</table>
Y36    Operations of war

Includes:
Injuries to military personnel and civilians caused by war and civil insurrection

Excludes:
Injury to military personnel occurring during peacetime military operations (Y37._)
Military vehicles involved in transport accidents with non-military vehicles during peacetime (V09.01, V09.21, V19.81, V29.81, V39.81, V49.81, V59.81, V69.81, V79.81)

The following 7th character extensions are to be added to each code from category Y36:
a  initial encounter
  d  subsequent encounter
  q  sequelae

Y36.0    War operations involving explosion of marine weapons and military watercraft
  Y36.0x  War operations involving explosion of marine weapons and military watercraft
  Y36.0x1 War operations involving explosion of depth-charge
  Y36.0x2 War operations involving explosion of marine mine
  Y36.0x3 War operations involving explosion of mine NOS, at sea or in harbor
  Y36.0x4 War operations involving explosion of sea-based artillery shell
  Y36.0x5 War operations involving explosion of torpedo
  Y36.0x6 War operations involving underwater blast

Y36.0x1  War operations involving explosion of marine weapons and military watercraft, military personnel injured due to enemy fire
Y36.0x2  War operations involving explosion of marine weapons and military watercraft, military personnel injured due to friendly fire
Y36.0x3  War operations involving explosion of marine weapons and military watercraft, civilian injured due to enemy fire
Y36.0x4  War operations involving explosion of marine weapons and military watercraft, civilian injured due to friendly fire

Y36.1    War operations involving aircraft
  Y36.11  War operations involving helicopter
  Y36.111 War operations involving helicopter, military personnel injured due to enemy fire
  Y36.112 War operations involving helicopter, military personnel injured due to friendly fire
  Y36.113 War operations involving helicopter, civilian injured due to enemy fire
  Y36.114 War operations involving helicopter, civilian injured due to friendly fire

Y36.12  War operations involving fixed-wing powered aircraft
  Y36.121 War operations involving fixed-wing powered aircraft, military personnel injured due to enemy fire
  Y36.122 War operations involving fixed-wing powered aircraft, military personnel injured due to friendly fire
  Y36.123 War operations involving fixed-wing powered aircraft, civilian injured due to enemy fire
  Y36.124 War operations involving fixed-wing powered aircraft, civilian injured due to friendly fire
Y36.13  War operations involving ultra-light or micro-light aircraft
  Y36.131 War operations involving ultra-light or micro-light aircraft, military personnel injured due to enemy fire
  Y36.132 War operations involving ultra-light or micro-light aircraft, military personnel injured due to friendly fire
  Y36.133 War operations involving ultra-light or micro-light aircraft, civilian injured due to enemy fire
  Y36.134 War operations involving ultra-light or micro-light aircraft, civilian injured due to friendly fire

Y36.19  War operations involving destruction of other aircraft
  Y36.191 War operations involving destruction of other aircraft, military personnel injured due to enemy fire
  Y36.192 War operations involving destruction of other aircraft, military personnel injured due to friendly fire
  Y36.193 War operations involving destruction of other aircraft, civilian injured due to enemy fire
  Y36.194 War operations involving destruction of other aircraft, civilian injured due to friendly fire

Y36.2  War operations involving other explosions and fragments
  Y36.2x  War operations involving other explosions and fragments
  War operations involving accidental explosion of munitions being used in war
  War operations involving accidental explosion of own weapons
  War operations involving accidental explosion of antipersonnel bomb (fragments)
  War operations involving blast, NOS
  War operations involving explosion from mine, NOS
  War operations involving explosion, NOS
  War operations involving explosion of artillery shell
  War operations involving explosion of breech-block
  War operations involving explosion of cannon block
  War operations involving explosion of mortar bomb
  War operations involving fragments from artillery shell
  War operations involving fragments from bomb
  War operations involving fragments from grenade
  War operations involving fragments from guided missile
  War operations involving fragments from land-mine
  War operations involving fragments from rocket
  War operations involving fragments from shell
  War operations involving fragments from shrapnel
  Y36.2x1 War operations involving other explosions and fragments, military personnel injured due to enemy fire
  Y36.2x2 War operations involving other explosions and fragments, military personnel injured due to friendly fire
  Y36.2x3 War operations involving other explosions and fragments, civilian injured due to enemy fire
  Y36.2x4 War operations involving other explosions and fragments, civilian injured due to friendly fire
Y36.3 War operations involving fires, conflagrations and hot substances

Y36.31 Fire due to conventional weapon during war operations
  Y36.311 Fire due to conventional weapon during war operations, military personnel injured due to enemy fire
  Y36.312 Fire due to conventional weapon during war operations, military personnel injured due to friendly fire
  Y36.313 Fire due to conventional weapon during war operations, civilian injured due to enemy fire
  Y36.314 Fire due to conventional weapon during war operations, civilian injured due to friendly fire

Y36.32 Fire due to fire-producing device during war operations
  Y36.321 Fire due to fire-producing device during war operations, military personnel injured due to enemy fire
  Y36.322 Fire due to fire-producing device during war operations, military personnel injured due to friendly fire
  Y36.323 Fire due to fire-producing device during war operations, civilian injured due to enemy fire
  Y36.324 Fire due to fire-producing device during war operations, civilian injured due to friendly fire

Y36.33 Heat due to conventional weapon during war operations
  Y36.331 Heat due to conventional weapon during war operations, military personnel injured due to enemy fire
  Y36.332 Heat due to conventional weapon during war operations, military personnel injured due to friendly fire
  Y36.333 Heat due to conventional weapon during war operations, civilian injured due to enemy fire
  Y36.334 Heat due to conventional weapon during war operations, civilian injured due to friendly fire

Y36.34 Heat due to fire-producing device during war operations
  Y36.341 Heat due to fire-producing device during war operations, military personnel injured due to enemy fire
  Y36.342 Heat due to fire-producing device during war operations, military personnel injured due to friendly fire
  Y36.343 Heat due to fire-producing device during war operations, civilian injured due to enemy fire
  Y36.344 Heat due to fire-producing device during war operations, civilian injured due to friendly fire

Y36.35 Other cause of injury due to fire, conflagrations and hot substances during war operations
  Y36.351 Other cause of injury due to fire, conflagrations and hot substances during war operations, military personnel injured due to enemy fire
  Y36.352 Other cause of injury due to fire, conflagrations and hot substances during war operations, military personnel injured due to friendly fire
  Y36.353 Other cause of injury due to fire, conflagrations and hot substances during war operations, civilian injured due to enemy fire
  Y36.354 Other cause of injury due to fire, conflagrations and hot substances during war operations, civilian injured due to friendly fire
Y36.4  War operations involving firearm discharge and other forms of conventional warfare

Y36.41  War operations involving firearm discharge
- War operations involving bayonet injury
- War operations involving carbine bullet
- War operations involving machine gun bullet
- War operations involving pellets (shotgun)
- War operations involving pistol bullet
- War operations involving rifle bullet
- War operations involving rubber (rifle) bullet

Y36.411  War operations involving firearm discharge, military personnel injured due to enemy fire
Y36.412  War operations involving firearm discharge, military personnel injured due to friendly fire
Y36.413  War operations involving firearm discharge, civilian injured due to enemy fire
Y36.414  War operations involving firearm discharge, civilian injured due to friendly fire

Y36.49  War operations involving other forms of conventional warfare

Y36.491  War operations involving other forms of conventional warfare, military personnel injured due to enemy fire
Y36.492  War operations involving other forms of conventional warfare, military personnel injured due to friendly fire
Y36.493  War operations involving other forms of conventional warfare, civilian injured due to enemy fire
Y36.494  War operations involving other forms of conventional warfare, civilian injured due to friendly fire

Y36.5  War operations involving nuclear weapons

Y36.51  Direct effects of nuclear weapons during war operations
- Blast effects from nuclear weapons during war operations
- Direct heat from nuclear weapon during war operations
- Exposure to immediate ionizing radiation from nuclear weapon during war operations
- Fireball effects from nuclear weapon during war operation

Y36.511  Direct effects of nuclear weapons during war operations, military personnel injured due to enemy fire
Y36.512  Direct effects of nuclear weapons during war operations, military personnel injured due to friendly fire
Y36.513  Direct effects of nuclear weapons during war operations, civilian injured due to enemy fire
Y36.514  Direct effects of nuclear weapons during war operations, civilian injured due to friendly fire

Y36.52  Secondary effects of nuclear weapons during war operations
- Blast wave from nuclear weapon during war operation
- Fire following nuclear explosion during war operation

Y36.521  Secondary effects of nuclear weapons during war operations, military personnel injured due to enemy fire
Y36.522  Secondary effects of nuclear weapons during war operations, military personnel injured due to friendly fire
Y36.53  Sequelae of nuclear weapons (during) (following) war operations
Exposure to residual radiation from nuclear weapons (during) (following) war operations
Ingestion of radioactive products from nuclear weapons (during) (following) war operations
Inhalation of radioactive products from nuclear weapons (during) (following) war operations

Y36.531  Sequelae of nuclear weapons (during) (following) war operations, military personnel injured due to enemy fire
Y36.532  Sequelae of nuclear weapons (during) (following) war operations, military personnel injured due to friendly fire
Y36.533  Sequelae of nuclear weapons (during) (following) war operations, civilian injured due to enemy fire
Y36.534  Sequelae of nuclear weapons (during) (following) war operations, civilian injured due to friendly fire

Y36.6  War operations involving biological weapons
Y36.6x  War operations involving biological weapons
Y36.6x1  War operations involving biological weapons, military personnel injured due to enemy fire
Y36.6x2  War operations involving biological weapons, military personnel injured due to friendly fire
Y36.6x3  War operations involving biological weapons, civilian injured due to enemy fire
Y36.6x4  War operations involving biological weapons, civilian injured due to friendly fire

Y36.7  War operations involving chemical weapons and other forms of unconventional warfare
Excludes:
War operations involving incendiary devices (Y36.3-, Y36.5-)

Y36.71  War operations involving chemical weapons
War operations involving gases, fumes and chemicals
Y36.711  War operations involving chemical weapons, military personnel injured due to enemy fire
Y36.712  War operations involving chemical weapons, military personnel injured due to friendly fire
Y36.713  War operations involving chemical weapons, civilian injured due to enemy fire
Y36.714  War operations involving chemical weapons, civilian injured due to friendly fire

Y36.79  War operations involving other forms of unconventional warfare
War operations involving lasers
Y36.791  War operations involving other forms of unconventional warfare, military personnel injured due to enemy fire
Y36.792  War operations involving other forms of unconventional warfare, military personnel injured due to friendly fire
Y36.793 War operations involving other forms of unconventional warfare, civilian injured due to enemy fire
Y36.794 War operations involving other forms of unconventional warfare, civilian injured due to friendly fire

Y36.9 War operations, unspecified

Y37 Military Operations

*Includes:*
- Injuries to military personnel and civilians occurring during peacetime on military property during routine military exercises and operations

*Excludes:*
- Military aircraft involved in aircraft accident with civilian aircraft (???)
- Military vehicles involved in transport accident with civilian vehicle (V09.01, V09.21, V19.81, V29.81, V39.81, V49.81, V59.81, V69.81, V79.81)
- Military watercraft involved in water accident with civilian watercraft (???)
- War operation (Y36._)

The following 7th character extensions are to be added to each code from category Y37:
- a initial encounter
- d subsequent encounter
- q sequelae

Y37.0 Military operations involving explosion of marine weapons and military watercraft

Y37.0x Military operations involving explosion of marine weapons and military watercraft
- Military operations involving explosion of depth-charge
- Military operations involving explosion of marine mine
- Military operations involving explosion of mine NOS, at sea or in harbor
- Military operations involving explosion of sea-based artillery shell
- Military operations involving explosion of torpedo
- Military operations involving underwater blast

Y37.0x1 Military operations involving explosion of marine weapons and military watercraft, military personnel injured due to enemy fire
Y37.0x2 Military operations involving explosion of marine weapons and military watercraft, military personnel injured due to friendly fire
Y37.0x3 Military operations involving explosion of marine weapons and military watercraft, civilian injured due to enemy fire
Y37.0x4 Military operations involving explosion of marine weapons and military watercraft, civilian injured due to friendly fire

Y37.1 Military operations involving aircraft

Y37.11 Military operations involving helicopter

Y37.111 Military operations involving helicopter, military personnel injured due to enemy fire
Y37.112 Military operations involving helicopter, military personnel injured due to friendly fire
Y37.113 Military operations involving helicopter, civilian injured due to enemy fire
Y37.114 Military operations involving helicopter, civilian injured due to friendly fire
Y37.12 Military operations involving fixed-wing powered aircraft
  Y37.121 Military operations involving fixed-wing powered aircraft, military personnel injured due to enemy fire
  Y37.122 Military operations involving fixed-wing powered aircraft, military personnel injured due to friendly fire
  Y37.123 Military operations involving fixed-wing powered aircraft, civilian injured due to enemy fire
  Y37.124 Military operations involving fixed-wing powered aircraft, civilian injured due to friendly fire
Y37.13 Military operations involving ultra-light or micro-light aircraft
  Y37.131 Military operations involving ultra-light or micro-light aircraft, military personnel injured due to enemy fire
  Y37.132 Military operations involving ultra-light or micro-light aircraft, military personnel injured due to friendly fire
  Y37.133 Military operations involving ultra-light or micro-light aircraft, civilian injured due to enemy fire
  Y37.134 Military operations involving ultra-light or micro-light aircraft, civilian injured due to friendly fire
Y37.19 Military operations involving destruction of other aircraft
  Y37.191 Military operations involving destruction of other aircraft, military personnel injured due to enemy fire
  Y37.192 Military operations involving destruction of other aircraft, military personnel injured due to friendly fire
  Y37.193 Military operations involving destruction of other aircraft, civilian injured due to enemy fire
  Y37.194 Military operations involving destruction of other aircraft, civilian injured due to friendly fire

Y37.2 Military operations involving other explosions and fragments
  Y37.2x Military operations involving other explosions and fragments
    Military operations involving accidental explosion of munitions being used in war
    Military operations involving accidental explosion of own weapons
    Military operations involving accidental explosion of antipersonnel bomb (fragments)
    Military operations involving blast, NOS
    Military operations involving explosion from mine, NOS
    Military operations involving explosion, NOS
    Military operations involving explosion of artillery shell
    Military operations involving explosion of breech-block
    Military operations involving explosion of cannon block
    Military operations involving explosion of mortar bomb
    Military operations involving fragments from artillery shell
    Military operations involving fragments from bomb
    Military operations involving fragments from grenade
    Military operations involving fragments from guided missile
    Military operations involving fragments from land-mine
    Military operations involving fragments from rocket
    Military operations involving fragments from shell
    Military operations involving fragments from shrapnel
Y37.2x1 Military operations involving other explosions and fragments, military personnel injured due to enemy fire
Y37.2x2 Military operations involving other explosions and fragments, military personnel injured due to friendly fire
Y37.2x3 Military operations involving other explosions and fragments, civilian injured due to enemy fire
Y37.2x4 Military operations involving other explosions and fragments, civilian injured due to friendly fire

Y37.3 Military operations involving fires, conflagrations and hot substances
Y37.31 Fire due to conventional weapon during military operations
Y37.311 Fire due to conventional weapon during military operations, military personnel injured due to enemy fire
Y37.312 Fire due to conventional weapon during military operations, military personnel injured due to friendly fire
Y37.313 Fire due to conventional weapon during military operations, civilian injured due to enemy fire
Y37.314 Fire due to conventional weapon during military operations, civilian injured due to friendly fire
Y37.32 Fire due to fire-producing device during military operations
Y37.321 Fire due to fire-producing device during military operations, military personnel injured due to enemy fire
Y37.322 Fire due to fire-producing device during military operations, military personnel injured due to friendly fire
Y37.323 Fire due to fire-producing device during military operations, civilian injured due to enemy fire
Y37.324 Fire due to fire-producing device during military operations, civilian injured due to friendly fire
Y37.33 Heat due to conventional weapon during military operations
Y37.331 Heat due to conventional weapon during military operations, military personnel injured due to enemy fire
Y37.332 Heat due to conventional weapon during military operations, military personnel injured due to friendly fire
Y37.333 Heat due to conventional weapon during military operations, civilian injured due to enemy fire
Y37.334 Heat due to conventional weapon during military operations, civilian injured due to friendly fire
Y37.34 Heat due to fire-producing device during military operations
Y37.341 Heat due to fire-producing device during military operations, military personnel injured due to enemy fire
Y37.342 Heat due to fire-producing device during military operations, military personnel injured due to friendly fire
Y37.343 Heat due to fire-producing device during military operations, civilian injured due to enemy fire
Y37.344 Heat due to fire-producing device during military operations, civilian injured due to friendly fire
Y37.35 Other cause of injury due to fire, conflagrations and hot substances during military operations
Y37.351 Other cause of injury due to fire, conflagrations and hot substances during military operations, military personnel injured due to enemy fire
Y37.352 Other cause of injury due to fire, conflagrations and hot substances during military operations, military personnel injured due to friendly fire
Y37.353 Other cause of injury due to fire, conflagrations and hot substances during military operations, civilian injured due to enemy fire
Y37.354 Other cause of injury due to fire, conflagrations and hot substances during military operations, civilian injured due to friendly fire

Y37.4 Military operations involving firearm discharge and other forms of conventional warfare
Y37.41 Military operations involving firearm discharge
   Military operations involving bayonet injury
   Military operations involving carbine bullet
   Military operations involving machine gun bullet
   Military operations involving pellets (shotgun)
   Military operations involving pistol bullet
   Military operations involving rifle bullet
   Military operations involving rubber (rifled) bullet
Y37.411 Military operations involving firearm discharge, military personnel injured due to enemy fire
Y37.412 Military operations involving firearm discharge, military personnel injured due to friendly fire
Y37.413 Military operations involving firearm discharge, civilian injured due to enemy fire
Y37.414 Military operations involving firearm discharge, civilian injured due to friendly fire

Y37.49 Military operations involving other forms of conventional warfare
Y37.491 Military operations involving other forms of conventional warfare, military personnel injured due to enemy fire
Y37.492 Military operations involving other forms of conventional warfare, military personnel injured due to friendly fire
Y37.493 Military operations involving other forms of conventional warfare, civilian injured due to enemy fire
Y37.494 Military operations involving other forms of conventional warfare, civilian injured due to friendly fire

Y37.5 Military operations involving nuclear weapons
Y37.51 Direct effects of nuclear weapons during military operations
   Blast effects from nuclear weapons during military operations
   Direct heat from nuclear weapon during military operations
   Exposure to immediate ionizing radiation from nuclear weapon during military operations
   Fireball effects from nuclear weapon during military operation
Y37.511 Direct effects of nuclear weapons during military operations, military personnel injured due to enemy fire
Y37.512 Direct effects of nuclear weapons during military operations, military personnel injured due to friendly fire
Y37.513 Direct effects of nuclear weapons during military operations, civilian injured due to enemy fire
Y37.514 Direct effects of nuclear weapons during military operations, civilian injured due to friendly fire
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y37.52</td>
<td>Secondary effects of nuclear weapons during military operations</td>
</tr>
<tr>
<td></td>
<td>Blast wave from nuclear weapon during military operation</td>
</tr>
<tr>
<td></td>
<td>Fire following nuclear explosion during military operation</td>
</tr>
<tr>
<td>Y37.521</td>
<td>Secondary effects of nuclear weapons during military operations, military personnel injured due to enemy fire</td>
</tr>
<tr>
<td>Y37.522</td>
<td>Secondary effects of nuclear weapons during military operations, military personnel injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.523</td>
<td>Secondary effects of nuclear weapons during military operations, civilian injured due to enemy fire</td>
</tr>
<tr>
<td>Y37.524</td>
<td>Secondary effects of nuclear weapons during military operations, civilian injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.53</td>
<td>Sequelae of nuclear weapons (during) (following) military operations</td>
</tr>
<tr>
<td></td>
<td>Exposure to residual radiation from nuclear weapons (during) (following) military operations</td>
</tr>
<tr>
<td></td>
<td>Ingestion of radioactive products from nuclear weapons (during) (following) military operations</td>
</tr>
<tr>
<td></td>
<td>Inhalation of radioactive products from nuclear weapons (during) (following) military operations</td>
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<tr>
<td>Y37.531</td>
<td>Sequelae of nuclear weapons (during) (following) military operations, military personnel injured due to enemy fire</td>
</tr>
<tr>
<td>Y37.532</td>
<td>Sequelae of nuclear weapons (during) (following) military operations, military personnel injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.533</td>
<td>Sequelae of nuclear weapons (during) (following) military operations, military personnel injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.534</td>
<td>Sequelae of nuclear weapons (during) (following) military operations, civilian injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.6</td>
<td>Military operations involving biological weapons</td>
</tr>
<tr>
<td>Y37.6x</td>
<td>Military operations involving biological weapons</td>
</tr>
<tr>
<td>Y37.6x1</td>
<td>Military operations involving biological weapons, military personnel injured due to enemy fire</td>
</tr>
<tr>
<td>Y37.6x2</td>
<td>Military operations involving biological weapons, military personnel injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.6x3</td>
<td>Military operations involving biological weapons, civilian injured due to enemy fire</td>
</tr>
<tr>
<td>Y37.6x4</td>
<td>Military operations involving biological weapons, civilian injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.7</td>
<td>Military operations involving chemical weapons and other forms of unconventional warfare</td>
</tr>
<tr>
<td></td>
<td><strong>Excludes</strong>: Military operations involving incendiary devices (Y36.3-, Y36.5-)</td>
</tr>
<tr>
<td>Y37.71</td>
<td>Military operations involving chemical weapons</td>
</tr>
<tr>
<td></td>
<td>Military operations involving gases, fumes and chemicals</td>
</tr>
<tr>
<td>Y37.711</td>
<td>Military operations involving chemical weapons, military personnel injured due to enemy fire</td>
</tr>
<tr>
<td>Y37.712</td>
<td>Military operations involving chemical weapons, military personnel injured due to friendly fire</td>
</tr>
<tr>
<td>Y37.713</td>
<td>Military operations involving chemical weapons, civilian injured due to enemy fire</td>
</tr>
</tbody>
</table>
Y37.714 Military operations involving chemical weapons, civilian injured due to friendly fire
Y37.79 Military operations involving other forms of unconventional warfare
    Military operations involving lasers
Y37.791 Military operations involving other forms of unconventional warfare, military personnel injured due to enemy fire
Y37.792 Military operations involving other forms of unconventional warfare, military personnel injured due to friendly fire
Y37.793 Military operations involving other forms of unconventional warfare, civilian injured due to enemy fire
Y37.794 Military operations involving other forms of unconventional warfare, civilian injured due to friendly fire

Y37.9 Military operations, unspecified

Y38 Terrorism

**These codes are for use to identify injuries resulting from the unlawful use of force or violence against persons or property to intimidate or coerce a Government, the civilian population, or any segment thereof, in furtherance of political or social objective**

**Use additional code for place of occurrence (Y93.81)**

The following 7th character extensions are to be added to each code from category Y38:
- a initial encounter
- d subsequent encounter
- q sequelae

Y38.0 Terrorism involving explosion of marine weapons
    Terrorism involving depth-charge
    Terrorism involving marine mine
    Terrorism involving mine, NOS, at sea or in harbour
    Terrorism involving sea-based artillery shell
    Terrorism involving torpedo
    Terrorism involving underwater blast
Y38.0x Terrorism involving explosion of marine weapons
    Y38.0x1 Terrorism involving explosion of marine weapons, public safety official injured
    Y38.0x2 Terrorism involving explosion of marine weapons, civilian injured
    Y38.0x3 Terrorism involving explosion of marine weapons, terrorist injured

Y38.1 Terrorism involving destruction of aircraft
    Terrorism involving aircraft burned
    Terrorism involving aircraft exploded
    Terrorism involving aircraft being shot down
    Terrorism involving aircraft used as a weapon
Y38.1x Terrorism involving destruction of aircraft
    Y38.1x1 Terrorism involving destruction of aircraft, public safety official injured
    Y38.1x2 Terrorism involving destruction of aircraft, civilian injured
    Y38.1x3 Terrorism involving destruction of aircraft, terrorist injured
Y38.2 Terrorism involving other explosions and fragments
   Terrorism involving antipersonnel (fragments) bomb
   Terrorism involving blast, NOS
   Terrorism involving explosion, NOS
   Terrorism involving explosion of breech block
   Terrorism involving explosion of cannon block
   Terrorism involving explosion (fragments) of artillery shell
   Terrorism involving explosion (fragments) of bomb
   Terrorism involving explosion (fragments) of grenade
   Terrorism involving explosion (fragments) of guided missile
   Terrorism involving explosion (fragments) of land mine
   Terrorism involving explosion of mortar bomb
   Terrorism involving explosion of munitions
   Terrorism involving explosion (fragments) of rocket
   Terrorism involving explosion (fragments) of shell
   Terrorism involving shrapnel
   Terrorism involving mine, NOS, on land

Excludes:
   Terrorism involving explosion of nuclear weapon (Y38.5)
   Terrorism involving suicide bomber (Y38.81)

Y38.2x Terrorism involving other explosions and fragments
   Y38.2x1 Terrorism involving other explosions and fragments, public safety official injured
   Y38.2x2 Terrorism involving other explosions and fragments, civilian injured
   Y38.2x3 Terrorism involving other explosions and fragments, terrorist injured

Y38.3 Terrorism involving fires, conflagration and hot substances
   Terrorism involving conflagration NOS
   Terrorism involving fire NOS
   Terrorism involving petrol bomb

Excludes:
   terrorism involving fire or heat of nuclear weapon (Y38.5)

Y38.3x Terrorism involving fires, conflagration and hot substances
   Y38.3x1 Terrorism involving fires, conflagration and hot substances, public safety official injured
   Y38.3x2 Terrorism involving fires, conflagration and hot substances, civilian injured
   Y38.3x3 Terrorism involving fires, conflagration and hot substances, terrorist injured

Y38.4 Terrorism involving firearms
   Terrorism involving carbine bullet
   Terrorism involving machine gun bullet
   Terrorism involving pellets (shotgun)
   Terrorism involving pistol bullet
   Terrorism involving rifle bullet
   Terrorism involving rubber (rifle) bullet
Y38.4x Terrorism involving firearms
   Y38.4x1 Terrorism involving firearms, public safety official injured
   Y38.4x2 Terrorism involving firearms, civilian injured
   Y38.4x3 Terrorism involving firearms, terrorist injured

Y38.5 Terrorism involving nuclear weapons
   Y38.5x Terrorism involving nuclear weapons
      Y38.5x1 Terrorism involving nuclear weapons, public safety official injured
      Y38.5x2 Terrorism involving nuclear weapons, civilian injured
      Y38.5x3 Terrorism involving nuclear weapons, terrorist injured

Y38.6 Terrorism involving biological weapons
   Y38.6x Terrorism involving biological weapons
      Y38.6x1 Terrorism involving biological weapons, public safety official injured
      Y38.6x2 Terrorism involving biological weapons, civilian injured
      Y38.6x3 Terrorism involving biological weapons, terrorist injured

Y38.7 Terrorism involving chemical weapons
   Y38.7x Terrorism involving chemical weapons
      Y38.7x1 Terrorism involving chemical weapons, public safety official injured
      Y38.7x2 Terrorism involving chemical weapons, civilian injured
      Y38.7x3 Terrorism involving chemical weapons, terrorist injured

Y38.8 Terrorism involving other and unspecified means
   Y38.80 Terrorism involving unspecified means
      Terrorism, NOS
   Y38.81 Terrorism involving suicide bomber
      Y38.811 Terrorism involving suicide bomber, public safety official injured
      Y38.812 Terrorism involving suicide bomber, civilian injured
   Y38.89 Terrorism involving other means
      Terrorism involving drowning and submersion
      Terrorism involving lasers
      Terrorism involving piercing or stabbing instruments
      Y38.891 Terrorism involving other means, public safety official injured
      Y38.892 Terrorism involving other means, civilian injured
      Y38.893 Terrorism involving other means, terrorist injured

Y38.9 Terrorism, secondary effects

**This code is for use to identify injuries occurring subsequent to a terrorist attack, not due to the initial attack itself.**

   Y38.9x Terrorism, secondary effects
      Y38.9x1 Terrorism, secondary effects, public safety official injured

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Complications of medical and surgical care (Y62-Y84)

Includes:
- Complications of medical devices
  - Surgical and medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Misadventures to patients during surgical and medical care (Y62-Y69)

Excludes:
- Medical devices associated with adverse incidents in diagnostic and therapeutic use (Y70-Y82)
  - Surgical and medical procedures as the cause of abnormal reaction of the patient, without mention of misadventure at the time of the procedure (Y83-Y84)

Y60  Deactivated. See complications within body system chapters

Y61  Deactivated. See T81.5

Y62  Failure of sterile precautions during surgical care and medical care

Y62.0  Failure of sterile precautions during surgical operation
Y62.1  Failure of sterile precautions during infusion or transfusion
Y62.2  Failure of sterile precautions during kidney dialysis and other perfusion
Y62.3  Failure of sterile precautions during injection or immunization
Y62.4  Failure of sterile precautions during endoscopic examination
Y62.5  Failure of sterile precautions during heart catheterization
Y62.6  Failure of sterile precautions during aspiration, puncture and other catheterization
Y62.8  Failure of sterile precautions during other surgical and medical care
Y62.9  Failure of sterile precautions during unspecified surgical and medical care

Y63  Failure in dosage during surgical and medical care

Excludes:
- Accidental overdose of drug or wrong drug given in error

Y63.0  Excessive amount of blood or other fluid given during transfusion or infusion
Y63.1  Incorrect dilution of fluid used during infusion
Y63.2  Overdose of radiation given during therapy
Y63.3  Inadvertent exposure of patient to radiation during medical care
Y63.4  Failure in dosage in electroshock or insulin-shock therapy
Y63.5  Inappropriate temperature in local application and packing
Y63.6  Underdosing and non-administration of necessary drug, medicament, or biological substance
  - Y63.61  Underdosing of necessary drug, medicament or biological substance
  - Y63.62  Non-administration of necessary drug, medicament or biological substance
Y63.8 Failure in dosage during other surgical and medical care
Y63.9 Failure in dosage during unspecified surgical and medical care

Y64 Contaminated medical or biological substances

Y64.0 Contaminated medical or biological substance, transfused or infused
Y64.1 Contaminated medical or biological substance, injected or used for immunization
Y64.8 Contaminated medical or biological substance administered by other means
Y64.9 Contaminated medical or biological substance administered by unspecified means

Administered contaminated medical or biological substance, NOS

Y65 Other misadventures during surgical and medical care

Y65.0 Mismatched blood in transfusion
Y65.1 Wrong fluid used in infusion
Y65.2 Failure in suture or ligature during surgical operation
Y65.3 Endotracheal tube wrongly placed during anesthetic procedure
Y65.4 Failure to introduce or to remove other tube or instrument
Y65.5 Performance of inappropriate operation
Y65.8 Other specified misadventures during surgical and medical care

Y66 Non-administration of surgical and medical care

Includes:
Premature cessation of surgical and medical care

Excludes:
DNR status (Z66)
Palliative care (Z51.5)

Y69 Unspecified misadventure during surgical and medical care

Medical devices associated with adverse incidents in diagnostic and therapeutic use (Y70-Y82)

Y70 Anesthesiology devices associated with adverse incidents

Y70.0 Diagnostic and monitoring anesthesiology devices associated with adverse incidents
Y70.1 Therapeutic (non-surgical) and rehabilitative anesthesiology devices associated with adverse incidents
Y70.2 Prosthetic and other implants, materials and accessory anesthesiology devices associated with adverse incidents
Y70.3 Surgical instruments, materials and anesthesiology devices (including sutures) associated with adverse incidents
Y70.8 Miscellaneous anesthesiology devices associated with adverse incidents, not elsewhere classified

Y71 Cardiovascular devices associated with adverse incidents

Y71.0 Diagnostic and monitoring cardiovascular devices associated with adverse incidents
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Y71.1</td>
<td>Therapeutic (non-surgical) and rehabilitative cardiovascular devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y71.2</td>
<td>Prosthetic and other implants, materials and accessory cardiovascular devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y71.3</td>
<td>Surgical instruments, materials and cardiovascular devices (including sutures) associated with adverse incidents</td>
</tr>
<tr>
<td>Y71.8</td>
<td>Miscellaneous cardiovascular devices associated with adverse incidents, not elsewhere classified</td>
</tr>
<tr>
<td>Y72.0</td>
<td>Otorhinolaryngology devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y72.1</td>
<td>Therapeutic (non-surgical) and rehabilitative otorhinolaryngological devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y72.2</td>
<td>Prosthetic and other implants, materials and accessory otorhinolaryngological devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y72.3</td>
<td>Surgical instruments, materials and otorhinolaryngological devices (including sutures) associated with adverse incidents</td>
</tr>
<tr>
<td>Y72.8</td>
<td>Miscellaneous otorhinolaryngological devices associated with adverse incidents, not elsewhere classified</td>
</tr>
<tr>
<td>Y73.0</td>
<td>Gastroenterology and urology devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y73.1</td>
<td>Therapeutic (non-surgical) and rehabilitative gastroenterology and urology devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y73.2</td>
<td>Prosthetic and other implants, materials and accessory gastroenterology and urology devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y73.3</td>
<td>Surgical instruments, materials and gastroenterology and urology devices (including sutures) associated with adverse incidents</td>
</tr>
<tr>
<td>Y73.8</td>
<td>Miscellaneous gastroenterology and urology devices associated with adverse incidents, not elsewhere classified</td>
</tr>
<tr>
<td>Y74.0</td>
<td>General hospital and personal-use devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y74.1</td>
<td>Therapeutic (non-surgical) and rehabilitative general hospital and personal-use devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y74.2</td>
<td>Prosthetic and other implants, materials and accessory general hospital and personal-use devices associated with adverse incidents</td>
</tr>
<tr>
<td>Y74.3</td>
<td>Surgical instruments, materials and general hospital and personal-use devices (including sutures) associated with adverse incidents</td>
</tr>
<tr>
<td>Y74.8</td>
<td>Miscellaneous general hospital and personal-use devices associated with adverse incidents, not elsewhere classified</td>
</tr>
<tr>
<td>Y75.0</td>
<td>Neurological devices associated with adverse incidents</td>
</tr>
</tbody>
</table>
Y75.0  Diagnostic and monitoring neurological devices associated with adverse incidents
Y75.1  Therapeutic (non-surgical) and rehabilitative neurological devices associated with adverse incidents
Y75.2  Prosthetic and other implants, materials and neurological devices associated with adverse incidents
Y75.3  Surgical instruments, materials and neurological devices (including sutures) associated with adverse incidents
Y75.8  Miscellaneous neurological devices associated with adverse incidents, not elsewhere classified

Y76  Obstetric and gynecological devices associated with adverse incidents
Y76.0  Diagnostic and monitoring obstetric and gynecological devices associated with adverse incidents
Y76.1  Therapeutic (non-surgical) and rehabilitative obstetric and gynecological devices associated with adverse incidents
Y76.2  Prosthetic and other implants, materials and accessory obstetric and gynecological devices associated with adverse incidents
Y76.3  Surgical instruments, materials and obstetric and gynecological devices (including sutures) associated with adverse incidents
Y76.8  Miscellaneous obstetric and gynecological devices associated with adverse incidents, not elsewhere classified

Y77  Ophthalmic devices associated with adverse incidents
Y77.0  Diagnostic and monitoring ophthalmic devices associated with adverse incidents
Y77.1  Therapeutic (non-surgical) and rehabilitative ophthalmic devices associated with adverse incidents
Y77.2  Prosthetic and other implants, materials and accessory ophthalmic devices associated with adverse incidents
Y77.3  Surgical instruments, materials and ophthalmic devices (including sutures) associated with adverse incidents
Y77.8  Miscellaneous ophthalmic devices associated with adverse incidents, not elsewhere classified

Y78  Radiologic devices associated with adverse incidents
Y78.0  Diagnostic and monitoring radiological devices associated with adverse incidents
Y78.1  Therapeutic (non-surgical) and rehabilitative radiological devices associated with adverse incidents
Y78.2  Prosthetic and other implants, materials and accessory radiological devices associated with adverse incidents
Y78.3  Surgical instruments, materials and radiological devices (including sutures) associated with adverse incidents
Y78.8  Miscellaneous radiological devices associated with adverse incidents, not elsewhere classified

Y79  Orthopedic devices associated with adverse incidents
Y79.0 Diagnostic and monitoring orthopedic devices associated with adverse incidents
Y79.1 Therapeutic (non-surgical) and rehabilitative orthopedic devices associated with adverse incidents
Y79.2 Prosthetic and other implants, materials and accessory orthopedic devices associated with adverse incidents
Y79.3 Surgical instruments, materials and orthopedic devices (including sutures) associated with adverse incidents
Y79.8 Miscellaneous orthopedic devices associated with adverse incidents, not elsewhere classified

Y80 Physical medicine devices associated with adverse incidents
Y80.0 Diagnostic and monitoring physical medicine devices associated with adverse incidents
Y80.1 Therapeutic (non-surgical) and rehabilitative physical medicine devices associated with adverse incidents
Y80.2 Prosthetic and other implants, materials and accessory physical medicine devices associated with adverse incidents
Y80.3 Surgical instruments, materials and physical medicine devices (including sutures) associated with adverse incidents
Y80.8 Miscellaneous physical medicine devices associated with adverse incidents, not elsewhere classified

Y81 General- and plastic-surgery devices associates with adverse incidents
Y81.0 Diagnostic and monitoring general- and plastic-surgery devices associated with adverse incidents
Y81.1 Therapeutic (non-surgical) and rehabilitative general- and plastic-surgery devices associated with adverse incidents
Y81.2 Prosthetic and other implants, materials and accessory general- and plastic-surgery devices associated with adverse incidents
Y81.3 Surgical instruments, materials and general- and plastic-surgery devices (including sutures) associated with adverse incidents
Y81.8 Miscellaneous general- and plastic-surgery devices associated with adverse incidents, not elsewhere classified

Y82 Other and unspecified medical devices associated with adverse incidents
Y82.0 Other medical devices associated with adverse incidents
Y82.9 Unspecified medical devices associated with adverse incidents

Surgical and other medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure (Y83-Y84)

Y83 Surgical operation and other surgical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure
Y83.0 Surgical operation with transplant of whole organ as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.1 Surgical operation with implant of artificial internal device as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.2 Surgical operation with anastomosis, bypass or graft as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.3 Surgical operation with formation of external stoma as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.4 Other reconstructive surgery as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.5 Amputation of limb(s) as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.6 Removal of other organ (partial) (total) as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.8 Other surgical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y83.9 Surgical procedure, unspecified as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84 Other medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.0 Cardiac catheterization as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.1 Kidney dialysis as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.2 Radiological procedure and radiotherapy as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.3 Shock therapy as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.4 Aspiration of fluid as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.5 Insertion of gastric or duodenal sound as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.6 Urinary catheterization as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.7 Blood-sampling as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.8 Other medical procedures as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure

Y84.9 Medical procedure, unspecified as the cause of abnormal reaction of the patient, or of later complication, without mention of misadventure at the time of the procedure
Y85-Y89 Deactivated. Extension q is to be used to indicate sequelae of external cause
APPENDIX D
TIPS FOR TRACKING PATIENTS

The following are recommendations from the Follow-up Tracking Committee (a sub-group of the Model SCI project directors):

☑ Prior to discharge:
  o Build a strong relationship with the patient
    ▪ Have the person who will be contacting the patient for follow-up data meet with the patient
    ▪ Inform the patient of the value of the program
  o Obtain the names, addresses and phone numbers of at least 3 contacts
  o Encourage patients to inform you of new addresses and telephone numbers
    ▪ Give them a change of address card

☑ Send birthday cards and/or newsletters

☑ Use Equifax to locate patients:
  o Send (by tape, diskette or hard copy):
    ▪ Patient’s full name; last known address; Social Security number (or date of birth)
  o Cost: $6.00 per find (a find includes Equifax supplying a more recent address than the one that was submitted). They do not call to confirm the address and telephone number. If you want them to confirm, the cost is $12.00 per find. However, Equifax stated that 99% of the time, the new address and phone number are correct. If they cannot find a more recent address than the one submitted, the System will not be charged for the search. Equifax deals with large volumes and will not negotiate a cheaper price than $6.00 per find unless there are over 40,000 persons needed to be tracked. Check with Equifax for current fees.

☑ Check these internet sites for addresses and phone numbers:
  o http://home.netscape.com/netcenter/whitepages.html
  o www.theultimate.com/white

☑ Check the Social Security Internet site to see if the patient is deceased (http://www.ancestry.com/ssdi/advanced.htm). When searching, enter only what you’re sure of (e.g. it won’t find Dave if it’s in the database as David).

Also, the Follow-up Tracking Committee recommends reading the publication Retaining and Tracking Cohort Study Members (see pages D2 to D15).
Retaining and Tracking Cohort Study Members

Julie R. Hunt¹ and Emily White¹, ²

INTRODUCTION

Retaining and tracking cohort participants is crucial for “longitudinal” cohort studies, i.e., those that require periodic contact with participants after cohort entry to update exposures and/or ascertain outcome events. A major effort in such studies will be devoted to follow-up, one of the greatest challenges to the success of a longitudinal cohort study. While even well-designed studies will have some loss to follow-up, there are several strategies and activities that can be undertaken to keep the loss to a minimum. Loss to follow-up may occur because the participant has decided that he/she no longer wishes to participate (drop outs) or because the study investigator has lost track of the participant. Maintaining contact with cohort study participants is crucial, as there is some evidence to suggest that lost participants may differ more from participants who respond than participants who can be found but refuse to respond (1). Thus, locating lost participants may be as, or more, important in minimizing bias as obtaining a high response rate in those who are easily found. Of particular concern is that those who cannot be found may be lost to follow-up because they have developed the disease outcome of the study or have died. These types of losses lead to reduced study power and may lead to bias in the odds ratio (2, 3). Therefore, every effort should be made to encourage participation of, and contact with, all cohort members until the end of the study. Methods to maximize retention and keep track of cohort members, use of proxies to collect follow-up data, and procedures for locating hard-to-find or “lost” participants are discussed in this presentation. Although our focus is on participants in longitudinal cohort studies, the section on Tracing hard to find or lost participants, below, may also apply to tracking participants in retrospective cohort studies.

STRATEGIES TO MAXIMIZE RETENTION AND MINIMIZE NONRESPONSE

Retention of study participants is the primary focus of activity following enrollment in a longitudinal cohort study. Cohort studies have used a range of strategies and procedures to assure a participant’s retention throughout the course of the study, from initial screening to the last follow-up contact. Choice of strategy is driven by many factors, including length of follow-up, cost, and study population of interest. Most of the strategies described below are for use when following members of the general population, as opposed to the more difficult to reach segments of society such as intravenous drug users or homeless teenagers. While most of the procedures can be adapted for many different types of study populations, special procedures for enrolling, following, and tracing hard-to-reach or “high risk” members of the population may be necessary (4–6).

To help illustrate the types of retention strategies used, we identified four longitudinal studies that provided sufficient detail of their procedures: the Multicenter AIDS Cohort Study (7), the Nurses’ Health Study (8), the Women’s Health Initiative Clinical Trial and Observational Study (9), and the St. Louis Effort to Reduce the Spread of AIDS (ERSA) study (4); an overview of their retention strategies is presented in table 1. These studies involve follow-up of four different populations: men at risk for human immunodefiency virus (HIV), registered nurses, postmenopausal women, and intravenous drug abusers. The strategies used by these studies, and others, are based on a combination of empirically supported techniques, experience, and intuition. While there are many similarities in the follow-up procedures shown in table 1 (i.e., additional mailings and telephone calls to nonresponders; collection of extensive information at baseline to enhance ability to track hard-to-find participants; use of the US Postal Service, telephone directories, and the National Death Index to search for lost participants), differences can be noted when comparing procedures for tracking members of the general population (e.g., postmenopausal women) versus those of hard-to-reach members of society (e.g., drug users).
### Table 1. Methods used to maximize retention in four cohort studies: The Multicenter AIDS Cohort Study, The Nurses' Health Study, The Women's Health Initiative Observational Study, and The St. Louis Effort to Reduce the Spread of AIDS Study

#### The Multicenter AIDS Cohort Study (7)

**Design and population.**
A longitudinal, multicenter study of 4,954 men to observe the natural history of HIV-1* among homosexual and bisexual men

**Length of follow-up**
9.5 years (April 1984–September 1993)

**Enrollment, consent, and baseline activities**
- Participants were recruited at four centers through notices placed in gay bars, newspapers, and community centers
- Participants were enrolled during a clinic visit consisting of physical examination, blood draw, and questionnaire completion
- At enrollment, participants provided Social Security number, driver's license number, names and addresses of two people who would always know how to contact them, and name of physician
- Participants signed consent to the release of medical records

**Follow-up procedures and intervals**
- Participants reexamined at clinic at 6-month intervals
- At each visit, participants are encouraged to make appointment for next visit
- Reminder letter sent 2–4 weeks before appointment
- 2 weeks after letter, telephone contacts are initiated until participant is reached to confirm appointment

**Extra efforts to minimize nonresponse**
- If full participation is not feasible, men can respond to a short mailed questionnaire to collect primary outcomes and vital status
- After 3 weeks, nonresponders are interviewed by telephone
- Quarterly telephone contact is maintained with those too ill to visit study site
- Home visits are made when possible
- If participants move outside of clinic area, they are given a blood kit that their own physician can use to obtain blood specimens, which is then shipped to the laboratory. Interview is conducted by telephone

**Tracing hard to find and lost participants**
- Extended search is initiated for those who cannot be reached
- Postal services, such as registered mail, address correction, and mail forwarding, are used
- Search includes: contacts named by participant, county and state death certificates, obituaries, AIDS-registries, the National Death Index, departments of motor vehicles, consumer information services, and tax and voters lists

**Success rate**
At 9.5 years, AIDS and/or vital status was known for 89% of cohort

#### The Nurses' Health Study (8)

**Design and population**
A longitudinal study of a cohort of 121,700 registered nurses to examine the relation between contraception and breast cancer; later expanded to include diet and other exposures and outcomes

**Length of follow-up**
Women enrolled in 1976; 20 year follow-up conducted in 1996

**Enrollment, consent, and baseline activities**
- Participants were registered nurses recruited by mail via an introductory letter, two-page questionnaire, and prepaid return envelope
- Information collected at baseline to assist in tracking included the participant's name, Social Security number, birthdate, and the name, address, and phone number of a personal contact

**Follow-up procedures and intervals**
- Follow-up questionnaires are mailed to all cohort members every 2 years
- Questionnaires are mailed with a cover and a newsletter updating participants on study progress
- Personal contacts are identified by study members every 4 years
- First questionnaire is mailed in June; second mailing is sent to nonresponders in September
- Third and fourth mailings with full questionnaire are sent to nonresponders
- Fifth mailing of short version questionnaire with key exposure variables and outcomes is sent to nonresponders
- Newsletter with study updates is included in fifth mailing

**Extra efforts to minimize nonresponse**
- A telephone follow-up to nonresponders (to the five mailings) was added in 1982
- Additional approaches were added in 1986, including sending questionnaires by United Parcel Service and certified mail
- In 1990, used both telephone and certified mail to reach nonresponders from earlier years

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### TABLE 1. Continued

**Tracing hard to find and lost participants**
- Women are traced through the local postmaster, state boards of nursing, and personal contacts listed by participants
- Deaths are reported by participant's next of kin or by postal authorities
- National Death Index is searched for deaths among nonrespondents

**Success rate**
- Using the combined approaches since 1990, responses have been received from over 90% of cohort

*The Women's Health Initiative Observational Study (9)*

**Design and population**
- A longitudinal, multicenter study of 100,000 postmenopausal women to examine the relationship between lifestyle, health and risk factors, and specific disease outcomes

**Length of follow-up**
- Women enrolled 1994–1998; follow-up for 8–12 years (depending on year of enrollment)

**Enrollment, consent, and baseline activities**
- Participants were enrolled during a clinic visit consisting of physical examination, blood draw, physical measures, and questionnaire completion
- At baseline, participant tracking information was collected, including Social Security number, birthdate, the names, addresses, and phone numbers of at least two personal contacts, and physician's name

**Follow-up procedures and intervals**
- Mailed questionnaire with cover letter is sent annually
- Reminder/thank you postcard is sent 1 month later
- Second full questionnaire and cover letter is sent 3 months after first questionnaire to nonresponders
- Third full questionnaire and cover letter is sent 5 months after first questionnaire to nonresponders
- Participants are reexamed at clinic 3 years after enrollment
- Telephone and/or mailed reminders are made during the month before the visit
- Small incentive item, with study logo, is provided during visit
- Study newsletters are sent to all participants annually at 6 months post-enrollment month
- Birthday and holiday cards are sent annually by some clinic sites
- Personal contacts are identified by study members every 3 years

**Extra efforts to minimize nonresponse**
- Telephone contacts to nonresponders are made every other year to collect data on key variables and primary outcomes
- Proxy interviews to collect primary outcomes are conducted if participant is deceased or has diminished cognitive functioning

**Tracing hard to find and lost participants**
- Search is initiated to trace participants who cannot be located, including contact with personal contacts and physician
- National Death Index is searched to determine vital status of those lost to follow-up

**Success rate**
- Study in progress—responses to data to the first annual mail and telephone follow-up were received from 95% of those due

*The St. Louis Effort to Reduce the Spread of AIDS Study (4)*

**Design and population**
- A cohort study of 479 intravenous drug-users designed to reduce the spread of HIV among St. Louis' drug-using population while improving drug abuse treatment

**Length of follow-up**
- Participants were followed for 18 months

**Enrollment, consent, and baseline activities**
- Participants were enrolled by street outreach workers
- Baseline assessment included psychiatric illness, high risk behavior, and treatment response
- At baseline, participant tracking information was collected, including legal name, nicknames and aliases, best mailing address, mother's and father's full names, Social Security number, birthdate, the name, address, and phone number of lawyer, probation officer, or parole officer, if any
- Informed consent guaranteed confidentiality of data
- Drug treatment was made available to those interested

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D4
TABLE 1. Continued

Follow-up procedures and intervals
- Participants were interviewed 3, 6, 9, 12, and 18 months post-baseline to determine changes in behavior; blood drawn at baseline and 12 months
- Reminder letters were sent to each participant that an interview will soon be scheduled
- Once the participant was reached, an interview appointment was scheduled

Extra efforts to minimize nonresponse
- Additional contacts were made by a refusal converter to persuade participants refusing to be interviewed at follow-up
- Participants were compensated with supermarket food gift certificates (various denominations for each task and bonuses provided for completion of all waves)

Tracing hard to find and lost participants
- Study 'trackers' used a three-stage tracking system: phone, systems, and field
- Phone tracking included search of telephone books, directory assistance, Haines Criss-Cross directories
- Systems tracking included credit agencies, various state and local agencies, hospitals, treatment programs, prisons, welfare agencies, voter registration, and department of motor vehicles
- Field tracking included visits to participant's and neighbor's homes and "allegedly frequented" hangouts (e.g., bars, pool halls, barber, street corners)
- Conducted weekly team meetings to coordinate tracking efforts

Success rate
At 18 month follow-up, 455 of the 470 participants still alive were located and interviewed (96.8%)

- AIDS, acquired immunodeficiency syndrome; HIV, human immunodeficiency virus.

A summary of the general strategies to maximize retention described below are summarized in table 2.

Enrollment, consent, and baseline activities
Retention begins during recruitment, even during the first contacts with potential study participants. Before enrollment into the study, potential participants should be assessed for their willingness to participate. If they seem hesitant to participate or their future cooperation is at all questionable, they should not be enrolled. (This assumes that the response bias due to losses at baseline is generally less than the response bias due to failure to follow-up all enrollees, because the former is less likely to be jointly influenced by exposure and [future] disease occurrence than the latter.) Also, before enrollment, participants should be required to complete the types of tasks that will be required during the follow-up phase, similar to a “run

TABLE 2. General strategies to maximize retention

Enrollment, consent, and baseline activities
- Screen potential participants for willingness to participate over the long-term
- Have participants complete set of tasks at baseline before enrollment
- Fully inform participants of commitment and requirements of study
- Collect participant tracing information, such as address, phone number, Social Security number, date and place of birth
- Collect names of personal contacts and proxies

Bonding
- Create study logo and theme
- Send newsletters, holiday cards, and study updates

Frequency of contact
- Regular contacts with participant, at least every 6–24 months
- Strive to collect primary outcomes, at a minimum
- Use tracking system to monitor follow-up activities

Staff characteristics
- Well trained and enthusiastic
- Open communication
- Respond promptly to questions or problems
- Scheduling flexibility

Incentives
- Small tokens of appreciation with study logo
- Regular feedback of information and study progress
- Cash for mailed surveys
in" phase before randomization in a clinical trial. For example, if the participant is expected to complete surveys or diaries or come in for a physical examination, these tasks should be part of the baseline requirements. Investigators should not continue to reschedule no-shows or allow multiple attempts to enroll the participant. If it is difficult to get the participant to complete the tasks at baseline, it may be impossible to get him or her to participate during the follow-up period.

During the enrollment period, it is very important to clearly communicate expectations of participation, including the frequency, duration, and number of follow-up visits or contacts that will occur. Sharing these expectations helps participants make an informed decision about participation. For example, in the Women’s Health Initiative, a 12-year observational study of 100,000 women, expectations of participation, including a physical examination and blood drawn at baseline, completion of annual questionnaires, and a follow-up clinic visit at year 3, were clearly reviewed with cohort members during the consent process (10). Enrollment did not occur unless all baseline tasks were completed.

Collecting baseline information to minimize loss-to-follow-up

Longitudinal studies generally require collection of information at baseline that will help the investigator locate lost participants, or, at the very least, determine their vital status. Useful items include the names and addresses of at least two friends or relatives not living with the participant who are likely to know his or her whereabouts, the participant’s birthdate and Social Security number, the name under which the participant’s telephone is listed, and the names of family members and health care providers who may be able to serve as a proxy respondent in the event of the participant’s death. Additional items that may enhance the success of searching the National Death Index to determine vital status of lost cohort members are summarized in a later section of this presentation. As shown in Table 1, the type of information collected for tracking purposes varies across studies, determined in part by the study population. For example, in the St. Louis Effort to Reduce the Spread of AIDS study (4), information not typically collected, such as aliases and the names, addresses, and telephone numbers of lawyers and parole and probation officers, was obtained at baseline.

Frequency of contact

Once a participant has been enrolled, frequent personal and mail contact with participants should be maintained. The frequency of follow-up contact in most longitudinal epidemiologic studies has generally been in the range of 6–24 months. While this depends on the frequency needed to collect accurate exposure and outcome data, generally contact every 6–12 months is needed to maintain current addresses. Because the US Postal Service generally keeps change of address records for 6 months only, contact should ideally occur at least every 6 months to obtain up-to-date address information, as well as to maintain interest in the study and remind the participant that he/she is a cohort member.

The study investigator should, at least annually, try to contact participants who have dropped out of the study in an attempt to collect primary outcomes and/or to get them to rejoin the study. The personal information collected at baseline, especially information about friends or relatives who will know the participant’s whereabouts, will help trace participants who cannot be initially located and should, therefore, be updated periodically.

When cohort members are reluctant to continue with full participation during the follow-up period, collection from the participant of information on the primary outcomes of interest should be continued, at a minimum. In the Oxford Family Planning Association contraceptive study, a cohort of 17,000 women received annual clinic follow-up examinations for 10 years. Women who stopped attending the clinic were sent a mailed questionnaire annually and, when this was not returned, were interviewed by telephone or during a home visit in an attempt to collect data on several of the primary outcomes (11).

Staff characteristics

Selection, training, and supervision of staff and data collectors are important parts of maintaining participation in longitudinal studies. Staff members must have skills that enhance the participant’s desire to participate, reflect the importance of the study, and demonstrate enthusiasm and commitment to the project (12). These skills may help reduce participants’ reluctance to continue in the long-term and encourage accuracy in their responses (13, 14). In a study evaluating factors encouraging retention in the Framingham Children’s Study, Marmor et al. (15) found that staff characteristics, including their attitudes, responses to questions and problems, and scheduling flexibility, to be among the factors most important in keeping participants in the study.

Bonding

Participants in a longitudinal study need to identify and bond with the study and become committed to
active involvement. Given et al. (12) suggest creation of a study logo and theme and use of these in letters, envelopes, questionnaires, newsletters, and other communications to establish a connection with the study. Continuity of contact between participants and study investigators will enhance bonding and help ensure ongoing identification with the study. Newsletters, holiday cards, and updates on study progress have been used as bonding tools, as well as to provide an opportunity to obtain updated address correction information from the US Postal Service through use of a “Change Service Requested” instruction on the mailed piece (8, 16).

Community advisory boards

The formation of community advisory boards, consisting, for example, of health professionals, members of the population being studied, members of the business community, and other prominent community members, can provide a link between study investigators, the study population, and the community at large. Advisory boards may serve many valuable functions and help solve retention problems, such as identifying and providing transportation options or soliciting incentive items from local merchants. Including participant representatives on the board may also help promote bonding and long-term study participation. Representatives can provide the participant’s perspective on study activities and may be able to help identify barriers to retention.

Incentives

Providing incentives, especially those that are linked to the tasks of the study (for example, a pocket calendar to keep track of medical events) may enhance retention, as well as help with the collection of outcomes (17). Incentives may also be effective when something additional is being asked of the participant (e.g., completion of a diary or submission to some form of physical examination or test) (18). In the Framingham Children’s Study, periodic updates on study results and results of cholesterol screening tests were found to be successful incentives for encouraging participation (15). Incentives are often used in longitudinal studies to express appreciation for the participant’s involvement, and mementos and gifts remind participants of their participation throughout the year. In the Family Caregiver’s Study, participants were given coffee mugs, desk calendars, clocks, and ballpoint pens embossed with the study’s logo (12). For hard-to-reach study populations (e.g., drug abusers, prostitutes), the type (e.g., food certificates, free health care) and amount of incentives can be central to retaining and tracking cohort members (19).

For mailed surveys, the most effective incentive appears to be something enclosed with the letter, usually cash (20–23). There is evidence that final response rates may be just as high if the incentive is enclosed only with later mailings to nonrespondents, which may lead to cost savings (22).

Tracking systems

Using some type of tracking system for monitoring follow-up activities is essential (24). A successful system will enhance study efficiency, and perhaps overall response, by providing an organizational framework to help keep track of activities. When designing a tracking system, study needs, length, resources, and cohort size should be taken into consideration. Tracking systems vary from simple paper logs of follow-up phone calls to elaborate computer-based systems that track every aspect of participation, from baseline participant information to final follow-up contact. Several software packages used for tracking, called “workgroup contact managers”, are available on the market (25, 26). While new packages are continually being developed, examples of Windows-based contact managers currently available include GoldMine (Elan Software Corporation, Pacific Palisades, CA), Maximizer (Modatech Systems International, Dallas, TX), Tracker (Tracker Software, Inc., Minneapolis, MN), and ACT! (Symantec Corporation, Cupertino, CA). Computer-based tracking systems to fit the individual tracking and monitoring needs of most studies can also be developed by using database packages. Examples of two database software packages available on the market are FoxPro and Access for Windows (both from Microsoft Corporation, Redmond, WA); these are relational database managers that operate on IBM-compatible computers.

A tracking system may be used for multiple purposes, such as allowing study investigators to:

- Track participant’s current participation status (e.g., refuses contact; location unknown, etc.);
- Access and update contact information on the participant and his/her proxies, relatives, friends, and health care providers;
- Schedule follow-up activities, such as annual mailings or appointment reminders;
- Track responses to follow-up contacts and completion rates;
- Automatically produce letters or forms (e.g., appointment reminders);
- Generate reports that prompt follow-up activity (e.g., a list of participants needing telephone follow-up due to nonresponse to a mailed survey).
TABLE 3. Examples of tasks included in a cohort participant tracking system

<table>
<thead>
<tr>
<th>Participant contact information</th>
<th>Scheduling and monitoring task completion</th>
<th>Reports generated</th>
<th>Forms and materials generated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full name</td>
<td>Scheduling prompts</td>
<td>Participants with undeliverable or problematic address in database</td>
<td>Labels for annual questionnaire mailing</td>
</tr>
<tr>
<td>Nicknames</td>
<td></td>
<td>Participants requiring search (current location is not known or invalid)</td>
<td>Thank you/reminder postcards</td>
</tr>
<tr>
<td>Enrollment date</td>
<td></td>
<td>Participants needing follow-up phone calls due to non-response to mailing</td>
<td>Labels for nonresponders needing follow-up mailings</td>
</tr>
<tr>
<td>Date for annual follow-ups</td>
<td></td>
<td>Participants to schedule this week for annual appointments due next month</td>
<td>Labels to send annual newsletter</td>
</tr>
<tr>
<td>Current participation status</td>
<td></td>
<td>Participants needing phone calls this week due to recent appointment no-show</td>
<td>Postcards for appointment reminders</td>
</tr>
<tr>
<td>Birthdate</td>
<td></td>
<td>Participants with incomplete questionnaire data</td>
<td>Labels for those needing birthday cards this month</td>
</tr>
<tr>
<td>Place of birth</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sex</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Race</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marital status</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Security no.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Driver's license no.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Home phone no.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Work phone no.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other phone no.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Address</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Employer Information</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spouse contact information</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information on mother</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Information on father</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other friends/relatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contact information</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Physician contact Information</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- Generate mailing labels with the most up-to-date address;
- Track results of activities to search for participants who cannot be located; and
- Provide statistical summaries of response rates.

Table 3 provides an example of the types of reports, materials, participant tasks, and staff activities that can be tracked, generated, and monitored with a computerized tracking system.

ENHANCING RESPONSE RATES FOR VARIOUS DATA COLLECTION METHODS

A major challenge of longitudinal cohort studies is maximizing the response rate at each data collection point. The following discussion focuses on the three major types of data collection methods: mailed survey, telephone interview, and in-person interview, including clinic visits. Although many of the strategies discussed are based on research on enhancing initial recruitment rates, most of the recommendations may also hold for increasing the response rates of cohort members who already have been recruited and agreed to participate. Factors that may increase response rates for each of the three methods of data collection are summarized in Table 4.

Mail surveys

A large number of approaches for follow-up by mail surveys that may increase response rates have been discussed by Kanuk and Berenson (27), Linsky (20), Dillman (28), Baumgartner and Heberlein (21), Fox et al. (29), and Armstrong et al. (30).

Cover letter. Findings from the Hypertension Prevention Trial found that a higher response rate to a recruitment mailing was achieved when a cover letter and brochure were included in the mailing versus sending a brochure alone (31). Elements to include in a cover letter requesting follow-up data from cohort members are: a reminder of what the study is about and who the sponsor is, a statement of why the participant is important to the study, a promise of confidentiality, reference to the incentive, a statement of what to do if questions arise, and an expression of appreciation. In second and third mailings to nonresponders, the cover letter should include similar elements along with an additional reminder that the response has still not been received and that participation is very important.

Questionnaire. Dillman (28) suggests that questionnaires be printed on both sides of the paper, in booklet form, for ease of use. While research shows that the length of the questionnaire, up to about 12 pages, does not impact response rates, Dillman recommends that questionnaires be printed with reduction to 8¼ × 6¾ inches so that they appear to be small (28). Regardless of paper size, the questionnaire should not look crowded and should have a font size that is easy to read.

Outside envelope. The use of hand-addressed envelopes was found to significantly increase the rate of response from cohort members in the Health Professionals Follow-up Study who had not responded to three previous mailings (32). There is also some evidence that using commemorative or multiple small denomination stamps on the outer mailing envelope.
TABLE 4. Factors that may increase response rates in mail, telephone, and in-person interviews

<table>
<thead>
<tr>
<th>Mail surveys</th>
<th>Telephone interviews</th>
<th>In-person interviews and clinic visits</th>
<th>Telephone or home visit for nonrespondents to mailed questionnaires</th>
</tr>
</thead>
<tbody>
<tr>
<td>Advance notice that a questionnaire will be sent</td>
<td>Advance letter</td>
<td>Advance letter</td>
<td>Response rates may be increased substantially if additional methods are used to try to contact initial nonresponders (35). Several longitudinal cohort studies have used a combination of mailed questionnaires with additional telephone or in-person contacts to nonresponders to maximize response. For example, the Alameda County Study, a longitudinal cohort study that has followed the physical health and well-being of a population sample of a California county for nearly 30 years, uses data collection procedures that consist of an initial mailing followed by repeated contact of nonresponders by mail, telephone, and in-person contact (36). The initial contact by mail, followed by two additional mailings resulted in a response rate of 81 percent; follow-up by telephone or home visit increased the response rate to 88 percent. In the Washington County, Maryland,</td>
</tr>
<tr>
<td>Cover letter explaining importance of participation</td>
<td>Experienced interviewers who sound confident and competent</td>
<td>Careful selection and training of interviewers</td>
<td></td>
</tr>
<tr>
<td>Government or University sponsorship</td>
<td>Use of most effective interviewers to contact reluctant respondents</td>
<td>Convenient appointment times</td>
<td></td>
</tr>
<tr>
<td>Personalization of correspondence</td>
<td>Personalized and carefully constructed introduction</td>
<td>Appointment reminders</td>
<td></td>
</tr>
<tr>
<td>A handwritten address</td>
<td>Multiple attempts to contact at a variety of times</td>
<td>Free parking or transportation provided</td>
<td></td>
</tr>
<tr>
<td>Small format questionnaire</td>
<td>Mailings or home visits for nonresponders</td>
<td>Multiple attempts at contact</td>
<td></td>
</tr>
<tr>
<td>An incentive included with the questionnaire</td>
<td>Requesting address correction on the mailing envelope</td>
<td>Mail or telephone contact for nonresponders</td>
<td></td>
</tr>
<tr>
<td>Stamped return envelope</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Special class (e.g., certified) mailings to nonresponders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Commemorative stamps on outward mailing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inclusion of a questionnaire with mailings to nonresponders</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Telephone or in-person follow-up to interview nonresponders</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

increases response rates (33). At a minimum, the study’s name or logo should appear on the outer envelope so as to be recognizable to the study participant.

In order to keep address information up-to-date, outer mailing envelopes should be printed with “Change Service Requested” below the study’s return address in the upper left-hand corner. For a minimal fee per mailpiece, the US Postal Service will supply the study investigator with updated address information.

Return envelope. Using a stamped return envelope, as compared with a “business reply paid” envelope, has been shown to result in higher response rates (34). While this can be quite costly for initial recruitment mailings, it is generally cost-effective in cohort follow-up mailings when response rates are expected to be high.

Mailing schedule. Several studies have shown that probably the most important strategy for increasing response rates in mail surveys is the use of multiple mailings (20, 21, 27–29, 32). Dillman (28) recommends the following strategy as part of his “total design method”:

Mail initial questionnaire;
short study, 93 percent of the participants interviewed in 1978 were successfully traced and sent a mailed questionnaire in 1995. Those participants who did not return their questionnaire after two mailings were contacted and interviewed by telephone, resulting in a 90 percent response rate (37).

A study by Battistutta et al. (38) suggests that telephone or home visit contacts that serve merely as reminders are unlikely to be effective in increasing response rates and so, when contact is made, the questionnaire should be completed by an interviewer at that time.

**Telephone interviews**

Factors that may increase response rates in telephone surveys have been reviewed by Dillman (28), Groves and Lyberg (39), and Armstrong et al. (30), and are summarized in table 4.

*Advance warning or letter.* As with any type of follow-up data collection, the participant should be given advance warning during the enrollment/recruitment phase of the project that periodic telephone interviews will occur. A mailed reminder before the telephone call occurs may help reduce the element of surprise and may increase the response (18, 40).

*Interviewers.* Oksenberg and Cannell (41) found evidence to suggest that better response rates are obtained by interviewers who are perceived as sounding confident and competent (i.e., by speaking rapidly, loudly, and with standard pronunciation) than by those who do not. In addition, callbacks by another, usually more experienced, interviewer to participants who initially refuse to provide follow-up data may result in responses.

*Carefully constructed introduction.* Because most refusals occur during the introduction, including carefully worded and relevant information at the beginning of the call is important. Dillman (28) recommends that the introduction should ascertain that the correct telephone number and person have been reached, inform the participant of the purpose of the call, remind him/her of the purpose of the study and the importance of his/her contribution, and give the expected duration of the interview. When a proxy respondent is being interviewed following the death or illness of the cohort participant, carefully worded scripts should be provided for interviewers.

*Timing and number of calls.* Several attempts may be necessary to obtain a completed interview by phone; interviewers should not give up on trying to reach a participant until at least 12–15 attempts have been made (42). Attempts to reach the participant should be made both in the evening and during weekends and again after several weeks. Careful record-keeping of calling attempts will allow for periodic review and possible revision of the call strategy.

*Mailings or home visits for nonresponders.* Response rates to telephone surveys can be increased by a mailing or home visit, if contact is not established by telephone. Respondents not reached by telephone may be willing to complete a mailed questionnaire or in-person interview; attempting contact by either or both of these methods may also provide information about the reason for noncontact by telephone (e.g., participant has moved to a new location) that can help lead to later contact. In research conducted at the Alameda County Human Population Laboratory, Hochstim (35) observed that adding mail follow-up to nonrespondents to the initial telephone interview increased response rates from 86 to 91 percent.

**In-person interviews and clinic visits**

In-person data collection may occur at a variety of locations, including the cohort member's home or workplace, or at the study clinic itself in the case where procedures or specimens, such as blood collection, are required. Several of the principles outlined above for telephone interviews can be applied to in-person interviews; additional suggestions follow.

*Convenience of the appointment.* A variety of times and days for the appointment or interview, including evenings and weekends, should be made available to the participant. When appointments have been set up weeks or months in advance, a call or letter should be used to remind the participant of the appointment. When the participant is required to keep an appointment at the study site, free, convenient parking should be provided. Thorough directions and clearly marked signs are crucial. It may also be necessary to provide transportation (e.g., a study van or bus tickets) for some study participants.

*Mail or telephone contact with nonresponders.* Some participants will refuse study visits, be unable to participate in visits due to health or a move out of the area, or not show up even after appointments have been rescheduled several times. In these situations, collection of data, particularly that pertaining to primary outcomes, should be attempted by mail or telephone.

**USE OF PROXIES TO OBTAIN FOLLOW-UP INFORMATION**

Proxy or surrogate respondents are often used to provide information about study participants who are unable to continue to participate due to death, illness, or dementia. When cohort participants are enrolled in the study, it is important to obtain consent to interview...
proxies in the event that the participant is unable to provide data at some point. During enrollment, the participant should be asked to provide the names of several relatives, close friends, and physician(s) from whom proxy information can be sought. Any required medical release forms should also be completed at the onset of the study to aid in the procurement of information related to medical outcomes.

Missing data (item nonresponse) is more likely in information provided by proxy respondents than that obtained from the index participant (30, 43–45). Selection of the proxy respondents to be used should be based on consideration of which person would be most likely to know the facts required. Pickle et al. (44) found that the prevalence of nonresponse was generally lower for the spouse than for any other type of proxy respondents, such as siblings, offspring, and friends. Physicians can also serve as proxy respondents for medical outcomes.

Because proxy respondents are more likely to be unable to reply or to be in error than index participants are themselves (30, 43–45), it is common to reduce the amount of information asked of proxy respondents. Often only the most important exposures and outcomes of interest are included in the proxy interview; this also reduces the burden on the proxy respondent.

**TRACING HARD TO FIND OR LOST PARTICIPANTS**

Another potential source of response bias in cohort studies, in addition to bias due to participants dropping out, is failure to locate some cohort members. The only way to reduce this later source of nonresponse is through intensive efforts to locate each cohort member.

Strategies that can be used to trace participants are discussed below and summarized in Table 5. Note that some of these strategies can be used in retrospective as well as prospective cohort studies. Not all approaches are available in all areas. Since multiple approaches must often be employed before the participant can be located, it is usual to pursue the simpler, least expensive approaches first, and then to resort to the more difficult or expensive approaches. With the advent of

<table>
<thead>
<tr>
<th>TABLE 5. Strategies to locate hard to find cohort members*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Send letter to last known address with “Address Correction Requested”</td>
</tr>
<tr>
<td>2. Contact US Post Office for current address</td>
</tr>
<tr>
<td>3. Check local telephone directory for current telephone number and address</td>
</tr>
<tr>
<td>4. Check with directory assistance for current telephone number</td>
</tr>
<tr>
<td>5. Send certified letter to the participant’s home</td>
</tr>
<tr>
<td>6. Consult city directories (Polk, Cole’s)</td>
</tr>
<tr>
<td>7. Contact relatives and friends of member</td>
</tr>
<tr>
<td>8. Contact member’s physician/medical contacts</td>
</tr>
<tr>
<td>9. Call participant’s employer, if applicable and appropriate</td>
</tr>
<tr>
<td>10. For someone with an unusual last name, call others with the same last name living in the same area</td>
</tr>
<tr>
<td>11. For cohorts defined by occupation, health care source (e.g., health maintenance organization), or other source, contact the organization or appropriate professional licensing group</td>
</tr>
<tr>
<td>12. Contact current resident and/or neighbors at last known address</td>
</tr>
<tr>
<td>13. Check with landlords/rent collectors</td>
</tr>
<tr>
<td>14. If the home has been sold, contact the real estate agency for a new address</td>
</tr>
<tr>
<td>15. Check with local, state, and national registers for current address and vital status information:</td>
</tr>
<tr>
<td>Department of motor vehicles</td>
</tr>
<tr>
<td>Social Security Administration</td>
</tr>
<tr>
<td>State death records</td>
</tr>
<tr>
<td>Marriage records (for change of last name among women)</td>
</tr>
<tr>
<td>Voter registration records</td>
</tr>
<tr>
<td>Public utility or taxation records</td>
</tr>
<tr>
<td>Health insurance records</td>
</tr>
<tr>
<td>16. Obtain credit bureau reports (for current address only)</td>
</tr>
<tr>
<td>17. Submit search to the National Change of Address (NCOA) System</td>
</tr>
<tr>
<td>18. Submit search to National Death Index</td>
</tr>
<tr>
<td>19. Use services of a professional tracing company</td>
</tr>
</tbody>
</table>

**Additional strategies for hard-to-reach and high-risk populations:**

1. Contact state welfare and other social service agencies
2. Contact treatment programs and hospitals in area
3. Contact local, state, and federal prisons
4. Contact probation, parole, corinter’s, and warrant offices
5. Check with temporary employment agencies

* Listed in order of suggested implementation (from easiest to most difficult and/or most costly to implement).
high-speed computers and the computerization of large files, even more intensive efforts, such as searching files from credit bureaus and departments of motor vehicles, have become cost-effective in recent years. For additional review and discussion of maintaining contact with and finding the whereabouts of participants of cohort studies, see Kelsey et al. (46) and Checkoway et al. (47).

Activities to locate lost or hard to find participants should continue until the participant’s location and/or vital status have been ascertained, or until search strategies have been exhausted. Even if contact is not established during initial attempts, further attempts to locate the participant after several months or years may be successful. If upon reestablishing contact, the participant is no longer willing to continue as a cohort member, he/she may be willing to at least provide major outcome information at data collection points.

Telephone contacts

Initial attempts to locate a hard to find participant usually begin with mail or telephone contacts. If the participant is employed, he/she could be contacted at work as well as at home. Among those participants not initially reachable, some will be available weeks or even months later, as would be the case with retired persons who may live elsewhere for several months during the year.

For participants whose phone number has changed, sources of new numbers include the phone book, directory assistance, or city directories which list residents by name and by street address (e.g., Cole’s, Polk) (48, 49). If the participant has changed to an unlisted phone number, a supervisor from directory assistance may be willing to contact the participant and ask him/her to call the study. For someone with an unusual last name, other people who live in the same area with the same last name could be called. They may be related to the missing participant and have information on his/her whereabouts.

Mail contacts

Early mailed attempts often consist of sending the participant a letter requesting that he/she contact the study. As with all mailings, the envelope should indicate a request for address correction. If no response is received to initial attempts and the known address is believed to be correct, a certified letter can be sent to the participant’s last known address requesting that he/she contact the study.

Personal and medical contacts

The personal contacts provided by the participant during baseline can be contacted by phone or by mail to obtain updated address and phone number information on the participant, and to confirm that he/she is not deceased. If personal contacts cannot be reached, the participant’s physician might provide this information. If these contacts are unwilling to provide the new phone number or address of the participant, they may be willing to contact the participant and have him/her call the study office. If attempts at contacting personal contacts and the physician are unsuccessful, others who might be able to provide a new address or phone number include former neighbors, the current resident at the participant’s last known address (using city directories), or the real estate agency who sold the participant’s home.

The National Change of Address (NCOA) system

The US Postal Service developed the National Change of Address (NCOA) system (50) to reduce the amount of undeliverable commercial mail, and this system can be useful in tracking cohort members. All change-of-address data from almost the entire country are telecommunicated daily to a national customer support center. The resulting file (40 million changes of address annually, maintained for 3 years) is provided to licensed private companies, with updates provided every 2 weeks.

To search for lost participants, a file of current participant names and addresses is submitted to a NCOA licensee, who, for a minimum fee, will search for matches on the NCOA. If the change of address indicates an individual has moved, then a new address is provided if there is an exact match on first name, last name, middle initial, and address, whereas if the change of address indicates a household move, all that is required is a match on last name and address. As an option, however, the NCOA licensee will provide footnotes for close matches, without returning the new address, to indicate that the person might have moved. The US Postal Service estimates that 50–75 percent of moves are captured by the NCOA system. Failures are due to inexact matches, the addressee not filing a change of address with the post office, and the delay of several weeks from filing the change of address to availability on the file of the licensee.

Other local, state, and national sources

Other state and local sources that may provide vital status or current address information include state vital statistics office and health department records, department of motor vehicles, local social security office, local voter registration records, public utility records, health insurance records, marriage records (for last name changes), and taxation records. National
sources, such as the Social Security Administration and Health Care Financing Administration (Medicare), may also be a source for updated information. For cohorts defined by occupations or other characteristics, specialized resources might be available. For example, the Nurses’ Health Study uses state boards of nursing to help locate lost participants.

Credit bureaus track a fairly large proportion of US adults through national databases on loans and other financial matters. Investigators can request reports from credit bureaus on lost participants (only current address and phone number can be obtained; financial information is omitted). Large cohort studies can purchase a computer system to conduct their own searches of these databases. In addition to credit bureaus, commercial companies that specialize in tracing participants can be used.

**Tracing hard-to-reach and high-risk participants**

Creative and innovative strategies must often be employed when tracing hard-to-reach and high-risk segments of the population. As briefly described in table 1, the St. Louis Effort to Reduce the Spread of AIDS (ERSA) study used several innovative methods to trace intravenous drug users, such as contacting parole officers and prisoners (4). Additional strategies and sources for locating cohort members from these populations include: contacting state welfare agencies; state and local social services agencies; drug treatment programs; local hospitals; federal, state, and local prisons; federal, state, and local probation and parole officers; city and county coroner and warrant offices; and temporary employment agencies. It may also be necessary to visit homeless shelters and popular neighborhood hangouts, such as bars, barbershops, pool halls, churches, and social clubs, to determine a participant’s whereabouts.

**The National Death Index and disease registries**

Many of the large US cohort studies trace the vital status of lost participants using the National Death Index, a computer index of all deaths occurring in the United States since 1979. For a fee, the National Death Index, established by the National Center for Health Statistics, will attempt to match cohort members with their file of deceased persons (51). Patterson and Bilgrad (52) provide detailed instructions on using the National Death Index.

The basic information required for requesting searches of the National Death Index includes the participant’s name and birthdate. Having additional identifiers increases the chance of a valid match and minimizes the chance of a false match being made. These include: full name of the participant, including first name, middle initial, and last name; parents’ surnames; Social Security number; date and place of birth; sex; race; marital status; last known state of residence; and age at death (estimate) or age when the participant was last known to be alive.

When any death listed in the index matches a cohort member within the specified criteria, the National Death Index provides the investigator with the date of death, the state in which the death occurred, and the death certificate number. Copies of individual death certificates from the states can then be requested by the investigator.

Several studies have found the quality of results provided by the National Death Index to be quite good (53–56). For example, Stampler et al. (55) found that 96.5 percent of known deaths in a cohort of women were successfully matched by National Death Index; Wentworth et al. (56) reported 98.4 percent successful matches in a cohort of men. Quality improves if a Social Security number is available; a middle initial also adds to the likelihood of an accurate match. Ascertainment of full and accurate information at the beginning of the cohort study is extremely important; to enhance the likelihood that a valid match will be made. When complete and accurate member data are available, the majority of those not matched by the National Death Index can be considered to be alive as of the most recent date for which the National Death Index has been updated.

Disease registries can sometimes be used to track outcomes in a cohort study. For example, the Iowa Women’s Health Study (57) ascertained cancer outcomes in the cohort by linkage to the Iowa Surveillance Epidemiology and End Results (SEER) cancer registry.

**Implications of tracking strategies on data analysis**

The strategies used to track vital status and disease endpoint information need to be considered in the data analysis, particularly in determining the censored time in a survival analysis. For participants without the endpoint event, the date of censoring is generally the date of death or the date last known to be alive and free of the outcome. If data on the occurrence of the endpoint are limited to information provided by the participant (or proxy), then the date of last contact would be his/her censoring date. However, if the outcome can be completely ascertained without contacting the participant (e.g., by linkage to a national disease incidence registry), then one could reasonably assume that participants without a reported outcome are free of the endpoint. This type of “passive follow-up”
up" means that censoring does not occur at date of last contact with each participant, but, rather, at the last date of information on the linked registry (58, 59).

An additional complexity is that for many studies, there might be only partial information on the occurrence of the endpoint or the date of endpoint, and this needs to be taken into consideration in the analysis. Passive follow-up often provides near complete, but not perfect, ascertainment of endpoints (e.g., linkage to a statewide cancer registry would provide cancer endpoints for all participants except those who have left the state). Another situation occurs when there is an indication that the event occurred but not the exact date (e.g., when incidence of cancer is the outcome of interest and death from cancer is recorded on the death certificate of a lost participant). In such cases, the researcher only knows that the incident event occurred between the time of last follow-up when the participant was free of the event and the date of death. When the progression of a condition to a defined event is the outcome (e.g., progression of human immunodeficiency virus infection to acquired immunodeficiency syndrome or of cancer incidence to death), then the researcher should obtain markers of disease progression before the outcome has occurred (e.g., CD4+ T-cell levels or cancer stage). This could provide partial information of the probability of the event if the subject is subsequently lost to follow-up (59).

SUMMARY

The only way to ensure that losses to follow-up have not biased study results is to keep all losses to an absolute minimum. Since more complete follow-up leads to the identification of additional disease events, the effort spent in locating cohort members also improves the precision as well as the validity of the study results.

This presentation reviewed approaches for maximizing retention and minimizing loss to follow-up, including the importance of communicating the expectations of participation and collecting personal information at baseline, conducting frequent personal and mail contact, and providing incentives for participation. Response rates can be increased by repeated attempts to contact each cohort member using a range of approaches (e.g., telephone, mail, personal contacts) and by other procedures specific to mailed questionnaires, telephone interviews, or in-person visits. Lost participants can be traced by use of the NCVA system and contact with other local, state, and national sources. Finally, for those participants who are unable or unwilling to continue or who cannot be found, proxy interviews and/or use of the National Death Index may provide information on the outcomes of interest and vital status.

Additional research evaluating the efficacy of the various approaches to retention and tracking is needed to help investigators learn how to best apply study resources to retain and keep track of the largest possible number of cohort members.

REFERENCES


WHERE TO WRITE FOR VITAL RECORDS

Go to this National Center for Health Statistics web site:

[http://www.cdc.gov/nchs/howto/w2w/w2welcom.htm](http://www.cdc.gov/nchs/howto/w2w/w2welcom.htm)

An alphabetical directory is provided for those users who want direct access to individual State and territory information. To use this valuable tool, you must first determine the State or area where the event occurred and then select the first letter in the State name from the alphabet. Please follow the provided guidelines to ensure an accurate response to your request. The Federal Government does not distribute certificates, files, or indexes with identifying information for vital records. Also,

Next, double click on the state or territory name.
This is an example of information available from this site:

**Hawaii**

**Event:** Birth or death

**Cost of copy:** $10.00

**Address:**
State Department of Health  
Office of Health Status Monitoring  
Vital Records Section  
P.O. Box 3878  
Honolulu, HI 96813-9984

**Remarks:** State office has had records since 1853. Additional copies ordered at the same time are $4.00 each.

Cashier's check or money order should be made payable to State Department of Health. Personal checks are not accepted. To verify current fees, the telephone number is (808) 586-1533. This is a recorded message. Information on how to obtain certified copies is also available via the internet at State Department of Health.

**Event:** Marriage

**Cost of copy:** $10.00

**Address:**
State Department of Health  
Office of Health Status Monitoring  
Vital Records Section  
P.O. Box 3878  
Honolulu, HI 96813-9984

**Event:** Divorce (State)

**Cost of copy:** $2.00

**Address:**
State Department of Health  
Office of Health Status Monitoring  
Vital Records Section  
P.O. Box 3878  
Honolulu, HI 96813-9984

**Remarks:** Records since July 1951.

**Event:** Divorce (county)

**Cost of copy:** Varies

**Address:** See remarks

**Remarks:** Circuit Court in county where divorce was granted.
Application Guidelines From The National Center For Health Statistics Web Site

An official certificate of every birth, death, marriage, and divorce should be on file in the locality where the event occurred. The Federal Government does not maintain files or indexes of these records. These records are filed permanently in a State vital statistics office or in a city, county, or other local office.

To obtain a certified copy of any of the certificates, write or go to the vital statistics office in the State or area where the event occurred. Addresses and fees are given for each event in the State or area concerned.

To ensure that you receive an accurate record for your request and that your request is filled expeditiously, please follow the steps outlined below for the information in which you are interested:

For all requests make check or money order payable to the identified office, in the correct amount for the number of copies requested. Sending cash is not recommended because the office cannot refund cash lost in transit.

Because all fees are subject to change, a telephone number has been included in the information for each State for use in verifying the current fee.

Some States have provided their home page address for obtaining current information.

Type or print all names and addresses in the letter.

Give the following facts when writing for birth or death records:

1. Full name of person whose record is requested.
2. Sex.
3. Parents' names, including maiden name of mother.
4. Month, day, and year of birth or death.
5. Place of birth or death (city or town, county, and State; and name of hospital, if known).
6. Purpose for which copy is needed.
7. Relationship to person whose record is requested.

Be sure you know the state's rule regarding disclosure of the cause of death information on the Death Certificate. You may have to submit a letter stipulating that you wish to have the cause of death information.
APPENDIX E
QUALITY CONTROL DOCUMENTATION

A001 FRM2   V201: lost to follow-up
IF <V201> = 5 THEN all variables except <V100>, <V101>, V200>, <QStat2>, <Batch2>, <Indate2> and <Update2> must = blank

A001 REG   Check for blanks

A003 FRM2   Blank fields in core data
IF [<V200> = 1,5,10,15,20,25,30 or 35 and <V201> not = 5 (or = blank) THEN 201 & 202 & 203 & 204 & 205 & 206 & 207 & 208 & 209 & 210_1 & 211 & 212 & 213 & 214_1 & 216 & 217D_1 & 217R_1 & 218 & 219 & 220 & 221C & 221D & 222A & 222B & 222C & 222D must NOT = blank] OR IF [<V200> <> 1,5,10,15,20,25,30 or 35 and <V201> = 8 THEN 201 & 202 & 203 & 204 & 205 & 206 & 207 & 208 & 209 & 210_1 & 211 & 212 & 213 & 214_1 & 216 & 217D_1 & 217R_1 & 218 & 219 & 220 & 221C & 221D & 222A & 222B & 222C & 222D must NOT = blank]

A004 FRM2   Blank fields in interview data
IF <V201> not=5 & <V200>=01,05,10,15,20,25,30 or 35 THEN <V223> to <V226> & <V227A> to <V227M> & <V228_1> to <V228T> & <V229_1A> to <V229_T> & <V230_1> to <V230T> & <V231_1> to <V231S> & <V232_1> to <V232_6> & <V233> to <V236> & <V237_1> to <V237T> & <V238> & <V239> must not = blank

A005 FRM2   Blank fields in year 01 data
IF <V201> not = 5 AND <V200> = 01 THEN <V240A> to <V249R> must not = blank

A006 FRM2   V200 x V240 through V241: Outpatient therapy at year 02 (when year 02 is substituted for year 01)
[(<V200> = 01 is NOT found and <V200> = 02 is found) and <V200> is > 02] THEN <V240A> through <V241C> must = blank

A101 FRM2   FIM: current age less than 018
IF <V111> + <V200> is < 006 AND NOT blanks in <V227T> THEN <V227A> to <V227M> must = 9 AND <V227T> must = 99

A102 FRM2   Satisfaction with life: current age less than 018
IF <V111> + <V200> is < 018 AND NOT blanks in any variable from <V228_1> to <V228T> THEN <V228_1> to <V228_5> must = 9 AND <V228T> must = 99

A103 FRM2   CHART: current age less than 018
IF <V111> + <V200> is < 018 AND NOT blanks from <V229_1A> to <V229_T> THEN <V229_1A>, <_1B>, <_4> & <_7> to <_12> & <_14> to <_15> must = 99 AND <V229_2>, <_3>, <_5>, <_6>, <_13> & <V229_16> to <V229_19> must = 9 & <V229_20> to <V229T> must = 999

A104 FRM2   Self-reported health: current age less than 018
IF <V111> + <V200> is < 018 AND not blanks in <V225> and <V226> and <Indate2> > 09/30/2000 THEN <V225> and <V226> must both = 9

A105 FRM2   CHIEF: current age less than 018
IF <V111> + <V200> is < 018 AND not blanks in <V230_1> to <V230T> THEN <V230_12A> must = 9 AND <V230_13> to <V230T> must = 9.99

A106 FRM2   BHQ: current age less than 018
IF <V111> + <V200> is < 018 AND not blanks in <V231_1> to <V231S> THEN <V231_1> to <V231M> must = 9 AND <V231S> must = 99

A107 FRM2   Drug use and CAGE: age less than 018
IF <V111> + <V200> is < 018 AND not blanks in <V232> to <V237T> THEN <V232> to <V237T> must = 9

A202 FRM2   V200 x V240 through V241: Outpatient therapy at year 01
IF <V200> = 01 is found and <V200> is > 01 THEN <V240A> through <V241C> must = blank

B001 FRM1   V128 blank secondary positions
IF <V128_1> = 0 THEN blanks in every variable from <V128_2> to <V128_5>
APPENDIX E
QUALITY CONTROL DOCUMENTATION

B002 PERS V103 Invalid Social Security Number
<V103> must = blank or have 9 characters

B002 FRM1 V126 blank secondary positions
IF <V126_1> = 0 or 9 THEN blanks in every variable from <V126_2> to <V126_5>

B002 FRM2 V210 blank secondary positions
IF <V210_1> = 0 or 8 or 9 THEN blanks in every variable from <V210_2> to <V210_5>

B003 PERS V104 Invalid Date of Birth
<V104> must = valid date or blank

B003 FRM1 V143AB blank secondary positions
IF <V143AB_1> = 0 or 9 THEN <V143AB_2> & <V143AB_3> must = blank

B003 FRM2 V232 blank secondary positions
IF <V232_1> = 0 or 9 THEN blanks in every variable from <V232_2> to <V232_5>

B004 FRM1 V143RB blank secondary positions
IF <V143RB_1> = 0 or 9 THEN <V143RB_2> & <V143RB_3> must = blank

B004 FRM2 V217D, V217R blank secondary positions
IF <V217D_1>=999 and <Indate2> >09/30/2001 THEN blanks
in <V217D_2>&<V217D_3>&<V217D_4>&<V217D_5>&<V217D_6>&<V217D_7>&<V217D_8>&<V
217R_2>&<V217R_3>&<V217R_4>&<V217R_5>&<V217R_6>&<V217R_7>&<V217R_8>

B005 FRM1 V143AC blank secondary positions
IF <V143AC_1> = 0 or 9 THEN <V143AC_2> & <V143AC_3> must = blank

B005 FRM2 V232 blank secondary positions
IF <V232_1>=0 or 9 THEN blanks in <V232_2>&<V232_3>&<V232_4>&<V232_5>&<V232_6

B006 FRM1 V143RC blank secondary positions
IF <V143RC_1> = 0 or 9 THEN <V143RC_2> & <V143RC_3> must = blank

B007 FRM1 V143AD blank secondary positions
IF <V143AD_1> = 0 or 9 THEN <V143AD_2> & <V143AD_3> must = blank

B008 FRM1 V143RD blank secondary positions
IF <V143RD_1> = 0 or 9 THEN <V143RD_2> & <V143RD_3> must = blank

B009 FRM1 V143AE blank secondary positions
IF <V143AE_1> = 0 or 8 or 9 THEN <V143AE_2> & <V143AE_3> must = blank

B010 FRM1 V143RE blank secondary positions
IF <V143RE_1> = 0 or 8 or 9 THEN <V143RE_2> & <V143RE_3> must = blank

B011 FRM1 V143AF blank secondary positions
IF <V143AF_1> = 0 or 8 or 9 THEN <V143AF_2> & <V143AF_3> must = blank

B012 FRM1 V143RF blank secondary positions
IF <V143RF_1> = 0 or 8 or 9 THEN <V143RF_2> & <V143RF_3> must = blank

B013 FRM1 Blank V144AT
IF any blank in <V144AA> to <V144AM> (excluding <V144ALM>) THEN <V144AT> must = blank

B014 FRM1 Blank V144DT
IF any blank in <V144DA> to <V144DM> (excluding <V144DLM>) THEN <V144DT> must = blank

B015 FRM1 Blank V146 2 to V146 5
IF <V146_1> = _888.88 or _999.99 THEN <V146_2> & <V146_3> & <V146_4> & <V146_5> must = blank

B016 FRM1 Blanks in V154 to V162
IF <V149_1> not = 1 THEN <V154_1>, <V155_1>, <V156_1>, <V157_1>, <V158_1>, <V159_1>, <V160_1>, <V161_1>& <V162_1> must = blank; same for <V149_2> to <V149_12> against <V154_2> to <V162_12>

B017 FRM1 No blanks in V154 and V155 for system phases
IF <V149_1> = 1 THEN <V154_1> and <V155_1> must not = blank; same for all <V149_*> to each corresponding <V154_*> and <V155_*>
APPENDIX E
QUALITY CONTROL DOCUMENTATION

B018 FRM1 Blanks in V130 to 133 (acute, left)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V130A> & <V131A> & <V132A> & <V133AAL> & <V133ABL> & <V133ADL> & <V133AEL> & <V133AFL> & <V133AGL> & <V133AHL> & <V133AIL> & <V133AL> must = blank

B019 FRM1 Blanks in V133 (acute right, total)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V133AAR> & <V133ABR> & <V133ACR> & <V133ADR> & <V133AER> & <V133AFR> & <V133AGR> & <V133AH> & <V133AIL> & <V133AIL> & <V133AJL> & <V133AL> & <V133AT> must = blank

B020 FRM1 Blanks in V130 to 133 (rehab, left)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V130R> & <V131R> & <V132R> & <V133RAL> & <V133RBL> & <V133RCL> & <V133RDL> & <V133REL> & <V133RFL> & <V133RGL> & <V133RHL> & <V133RIL> & <V133RJL> & <V133RL> & <V133RJR> must all = blank

B021 FRM1 Blanks in V133 (rehab right, total)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V133RAR> & <V133RBR> & <V133CRC> & <V133DRA> & <V133DER> & <V133FR> & <V133GAR> & <V133HAR> & <V133MAR> & <V133NAR> & <V133NMR> & <V133RR> & <V133RT> must all = blank

B022 FRM1 Blanks in V134, V135, V136 (acute)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V134AL> & <V134AR> & <V135AL> & <V135AR> & <V136AL> & <V136AR> & <V137AL> & <V137ARR> & <V138AR> & <V138AR> & <V139AR> & <V139AR> & <V140AR> & <V140AR> & <V141AR> & <V141AR> must all = blank

B023 FRM1 Blanks in V134, V135, V136 (rehab)

B024 FRM1 Blank in V139
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V139A_1> to <V139A_27> & <V139R_1> to <V139R_27> must all = blank

B025 FRM1 Blank in V140, V141
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V140A> & <V140R> & <V141A> must = blank.

B026 FRM1 Blank in V142
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V142AA> & <V142AB> & <V142AC> & <V142AD> & <V142AE> & <V142AF> & <V142AG> & <V142AH> & <V142AI> must all = blank

B027 FRM1 Blank in V143A to V143C (acute)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V143AA> & <V143AB_1> & <V143AB_2> & <V143AB_3> & <V143AC_1> & <V143AC_2> & <V143AC_3> must all = blank

B028 FRM1 Blank in V143D to V143K (acute)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V143AD_1> & <V143AD_2> & <V143AD_3> & <V143AE_1> & <V143AE_2> & <V143AE_3> & <V143AF_1> & <V143AF_2> & <V143AF_3> & <V143AG> & <V143AH> & <V143AI> & <V143AJ> & <V143AK> must all = blank

B029 FRM1 Blank in V143A to V143C (rehab)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V143RA> & <V143RB_1> & <V143RB_2> & <V143RB_3> & <V143RC_1> & <V143RC_2> & <V143RC_3> must all = blank

B030 FRM1 Blank in V143D to V143K (rehab)
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V143RD_1> & <V143RD_2> & <V143RD_3> & <V143RE_1> & <V143RE_2> & <V143RE_3> & <V143RF_1> & <V143RF_2> & <V143RF_3> & <V143RG> & <V143RH> & <V143RI> & <V143RJ> & <V143RK> must all = blank

B031 FRM1 Blank in V164, V165
IF <Indate1> > 11/30/2000 and <V109A> is > 001 THEN <V164> & <V165> must = blank

B032 FRM1 No blanks allowed: V100 to V116
B033  FRM1  No blanks allowed: V118_1 & V118_2  
IF blank in <V118_1> or <V118_2> THEN please fill in the blank variable(s)

B034  FRM1  No blanks allowed: V119 to V129  
IF blank in any variable <V119>, <V120>, <V120D>, <V121>, <V122>, <V123>, <V124>, <V125>, <V126_1>, <V127_1>, <V128_1> or <V129> THEN please fill in the blank variable(s)

B035  FRM1  No blanks allowed: V130A to V136AR  
IF V109A = 001 THEN <V130A> to <V136AR> must not all be blank

B036  FRM1  No blanks allowed: V130R to V136RR & V138R  
IF <Indate1> > 11/30/2000 and V109A = 001 THEN <V130R> to <V136RR> & <V138R> must not = blank

B037  FRM1  No blanks allowed: V130D to V136DR, V137 & V138D  
IF blank in any variable between <V130D> & <V136DR> or <V137> or <V138D> THEN please fill in the blank variable(s)

B038  FRM1  No blanks allowed: V139A to V141, pressure sores  
IF <Indate1> > 11/30/2000 and V109A = 001 THEN <V139A_1> to <V139A_27> & <V139R_1> to <V139R_27> & <V140A> & <V140R> & <V141> must not all be blank

B039  FRM1  No blanks allowed: V142 to V143, complications & surgery (acute)  
IF <Indate1> > 11/30/2000 and V109A = 001 THEN <V142AA>, <V142AB>, <V142AC>, <V142AD>, <V143AA>, <V143AB_1>, <V143AC_1>, <V143AD_1>, <V143AE_1>, <V143AF_1>, <V143AG>, <V143AH>, <V143AJ>, & <V143AK> must not = blank

B040  FRM1  No blanks allowed: V142 to V143, complications & surgery (rehab)  
IF <Indate1> > 11/30/2000 and V109A = 001 THEN <V142RA>, <V142RB>, <V142RC>, <V142RD>, <V143RA>, <V143RB_1>, <V143RC_1>, <V143RD_1>, <V143RE_1>, <V143RF_1>, <V143RG>, <V143RH>, <V143RI>, & <V143RK> must not all be blank

B041  FRM1  No blanks allowed: V144 to V147, FIM & death info  
IF blank in any variable from <V144AA> to <V144DT> or <V145> or <V146_1> or <V147> THEN please fill in the blank variable(s)

B042  FRM1  No blanks in treatment phase 1  
IF <V149_1> = 1 and blank in any variable from <V148_1> to <V153_1> THEN please fill in the blank variables(s)

B043  FRM1  Blanks in treatment phases V148 to V153  
IF <V148_2> = blank THEN <V149_2> to <V162_12> must all = blank; same for <V148_3> to <V148_12> against all variables that follow it to <V162_12>

B044  FRM1  Blanks in V163: length of stay  
IF blanks in either <V163A> or <V163R> THEN please fill in the blank variable(s)

B045  FRM1  Blanks in V164 or V165: charges  
IF V109A = 001 THEN <V164> & <V165> must both not = blank

B101  FRM2  Females (V112) and bladder management (V208)  
IF <V112> = 2 THEN <V208> must not = 03 or 04 or 05 or 08

B102  FRM2  Males (V112) and bladder management (V208)  
IF <V208> = 03 or 04 or 05 or 08 THEN <V112> must = 1

C001  FRM1  Patient alive (V145, V146, V147, V120D)  
IF <V145> = 88888888 THEN <V146_1> must = _888.88 & blanks in <V146_2> to <V146_5> & <V147> must = 8 & <V120D> must not = 07

C001  FRM2  V201 data collection only (V211, V212, V213)  
IF <V201> = 4 THEN <V211> must equal 88888888 or 99999999 AND <V212> must equal 9 AND <V213> must equal 99
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C002 FRM1  Patient alive (V146, V145)
IF <V146_1> = _888.88 THEN <V145> must = 88888888.

C002 FRM2  V201 data collection only (V244, V245, V247, V248, V249)
IF <V201> = 4 & <V244> NOT blank & <INDATE2> > 02/01/1996 THEN <V244> must = 9 & <V247> & <V248> & <V249> must = X99 & <V245> must = U

C003 FRM1  Patient not alive (V145, V146, V147)
IF <V146_1> not = _888.88 THEN <V145> must not = 88888888 & <V147> must not = 8

C003 FRM2  V201 Data collection only (V246)
IF <V201> = 4 & <V246T> NOT blank & <INDATE2> greater than 02/01/1996 THEN <V246AL> to <V246IL> & <V246AR> to <V246JR> must = 9 & <V246L> & <V246R> must = 99 & <V246T> must = 999

C004 FRM1  Patient deceased (V145, V146, V147)
IF <V145> not = 99999999 & <V145> not = 88888888 THEN <V146_1> must not = _888.88 & <V146_1> must not = _999.99 & <V147> must not = 8

C004 FRM2  V201 and V224 minimal/normal neuro
IF <V201> = 8 THEN <V244> must = 3 or 6 or 7 or 8 & vice versa

C005 FRM1  Patient died on Form I: (V145, V120D, V110)
IF <V120D> = 07 THEN <V145> must = <V110> & <V146_1> must not = _888.88 & <V147> must not = 8

C005 FRM2  V201 and V245 minimal/normal neuro
IF <V201> = 8 AND <V245> not = blank THEN <V245> must = D or E or 3 or 4

C006 FRM1  Patient status unknown (V145, V146, V147)
IF <V145> = 99999999 THEN <V146_1> must = _000.00 & blanks in <V146_2> to <V146_5> & <V147> must = 9 (patient is presumed dead unless <V145> = 88888888)

C006 FRM2  V245 x V201 normal neuro
IF <V245> = 4 or E THEN <V201> must = 8

C007 FRM1  Patient status unknown (V146, V145)
IF <V146_1> = _000.00 THEN <V145> must not = 88888888

C007 FRM2  V249 x V201 normal neuro
IF <V249L> = X00 AND <V249R> = X00 THEN <V201> must = 8

C008 FRM1 Autopsy & date of death (V147, V145)
IF <V147> = 0 or 1 or 2 THEN <V145> must not = 88888888

C008 FRM2  V201 x V202: not lost to follow-up
IF <V201> not = 5 THEN <V202> must = 8 & vice versa

C009 FRM1 Causes of death (V146_1) – first character
The first character of <V146_1> must = blank or E

C009 FRM2 V201 x V202: lost to follow-up
IF <V201> = 5 THEN <V202> must not = 8 & vice versa

C010 FRM1 Causes of death: external cause
IF The first character of <V146_1> = E THEN the second character of <V146_1> must = 8 or 9

C011 FRM2 Decrease in education level
IF <V122> is < 8 AND <V205> not = blank THEN <V205> must be greater than or = to <V122>

C021 FRM2 Decrease in education level
IF <V205> not = blank THEN <V205> must be greater than or = to <V205> on all previous Form IIs unless previous <V205> is 8 or 9 or blank

C022 FRM2 Constant education level
IF <V205> is < 8 and not blank AND <V205> on the most recent previous Form II = 9 THEN <V205> on the next most recent previous annual evaluation must = <V205>
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D001 FRM1 Females & Bladder Management (V112, V137D)
IF <V112> = 2 THEN the following CANNOT be true - <V137D> = 03 or 04 or 05 or 08

D101 FRM2 Marital status: single (V204, V121)
IF <V204> = 1 THEN <V121> must = 1

D102 FRM2 Marital status: not single (V121, V204)
IF <V121> not = 1 THEN <V204> must not = 1

D201 FRM2 Marital status: single (V204)
IF <V204> = 1 THEN <V204> on all previous Form IIs must = 1 or blank

D202 FRM2 V204 x V209: change in marital status
IF <Indate2> > 09/30/2000 and <V204> <> 4 and <V204> not = <V204> on the most recent previous Form II AND neither <V204> = blank or 9 THEN <V209> must not = 0

D204 FRM2 V204 x V209: no change in V204
IF <V204> = <V204> on the most recent previous Form II AND neither <V204> = blank or 9 THEN <V209> must not = 1 or 2 or 3 or 6

E001 FRM1 V165: unknown reliability --> unknown dollars (V164)
IF <V165> = 9 THEN <V164> must = 9999999 & vice versa

E001 FRM2 V204 x V209: single
IF <V204> = 1 THEN <V209> must = 0

E002 FRM1 V165: no system inpatient treatment phase (V164)
IF <V165> = 8 THEN <V164> must = 8888888 & vice versa

E002 FRM2 V209 x V204: married
IF <V209> = 2 THEN <V204> must = 2 or 4

E003 FRM1 Treatment Phases: No system inpatient acute medical or system acute rehab
IF <V164> = 8888888 THEN there can be no <V149> = 1 with corresponding <V148> = 1 or 3

E003 FRM2 V209 x V204: married
IF <V209> = 2 THEN <V204> must = 2 or 4

E004 FRM1 Charges: V164 (sum of all V154 for all system medical & system rehab phases)
IF V109A = 001 then, <V164> = sum of all <V154> when <V149> = 1 & corresponding <V148> = 1, 3, 4, or 5

E004 FRM2 V209 x V204: widowed
IF <V209> = 3 THEN <V204> must = 5

E005 FRM1 V165 (charges reliability)
<V165> must = the result determined by the calculate function in the data entry program

E005 FRM2 V204 x V209: married
IF <V204> = 2 THEN <V209> must not = 1 or 3

E006 FRM1 V148 No outpatient rehab phases collected after 3/31/2005
If <Indate1> > 03/31/2005 THEN no V148 can = 6, 7 or 8

E006 FRM2 V204 x V209: divorced
IF <V204> = 3 THEN <V209> must not = 2 or 3

E007 FRM2 V204 x V209: widowed
IF <V204> = 5 THEN <V209> must not = 1 or 2

E008 FRM2 V204 x V209: unknown
IF <V204> = 9 THEN <V209> must = 9

E009 FRM2 V209 x V204: known marital status change
IF <V204> =<> 9 THEN <V204> must not = 9

E101 FRM2 V210 x V125: not a veteran
IF <V210_1> = 8 THEN <V125> must = 0 IF <Indate1> > 09/30/2000

E102 FRM2 V210 x V126: not a veteran
IF <V210_1> = 8 THEN <V126_1> must = 8 IF <Indate1> > 09/30/2000
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E103  FRM2  V125 x V210: veteran
IF <V125> = 1 or 2 or 3 or 4 THEN <V210_1> must not = 8

E104  FRM2  V126 x V210: veteran
IF <V126_1> = 1 or 2 or 3 or 4 THEN <V210_1> must not = 8

E201  FRM2  V210: not a veteran
IF <V210_1> = 8 THEN <V210_1> on all previous Form IIs with <Indate2> > 09/30/2000 must = 8 or blank

E202  FRM2  V210: veteran
IF <V210_1> is < 8 THEN <V210_1> must not = 8 on any previous Form IIs with <Indate2> > 09/30/2000

F001  FRM1  Date sequencing (V106, V107)
IF valid date in <V106> & valid date in <V107> THEN <V107> must be greater than or = to <V106>

F001  PERS  Date sequencing (V104, V106)
IF valid date in <V104> AND valid date in <V106> THEN <V106> must be greater than or equal to <V104>

F001  REG  Date sequencing (V106, V107)
IF valid date in <V106> & valid date in <V107> THEN <V107> must be greater than or = to <V106>

F002  FRM1  Dates: No system admission
IF <V107> = 88888888 THEN <V108> must = 88888888 & <V110> must = 88888888

F002  PERS  Age at Injury V111 (V104, V106)
IF valid date in <V104> AND valid date in <V106> THEN <V111> must be equal to <V106> minus <V104> measured in years OR <V111> must be equal to 001 if <V106> minus <V104> is < one year

F002  REG  Date sequencing (V107, V110)
IF valid date in <V107> & valid date in <V110> THEN <V110> must be greater than or = to <V107>

F003  FRM1  Date of Discharge (V110), no system admission
IF <V110> = 88888888 THEN <V107> must = 88888888 & <V108> must = 88888888

F003  REG  Date sequencing (V110, V145)
IF valid date in <V110> & valid date in <V145> THEN <V145> must be greater than or = to <V110>

F004  FRM1  Date sequencing (V107, V108)
IF valid date in <V107> & valid date in <V108> THEN <V108> must be greater than or = to <V107>

F004  REG  Days to system admission (V109A)
IF <V106> is a valid date AND <V107> is a valid date THEN <V109A> must = the number of days between <V106> and <V107>

F005  FRM1  Date sequencing (V107, V110)
IF valid date in <V107> & valid date in <V110> THEN <V110> must be greater than or = to <V107>

F005  REG  Days to system admission (V109A)
IF <V106> is a valid date AND <V107> is a valid date THEN <V109A> must = 001

F006  FRM1  Date sequencing (V110, V145)
IF valid date in <V110> & valid date in <V145> THEN <V145> must be greater than or = to <V110>

F006  REG  Date of Discharge (V110), no system admission
IF <V107> = 88888888 THEN <V109A> must = 888 & vice versa

F007  FRM1  Date sequencing (V108, V110)
IF valid date in <V108> & valid date in <V110> THEN <V110> must be greater than or = to <V108>

F007  REG  Days to system admission (V109A), no system admission
IF <V107> = 88888888 & <V110> must = 88888888 & vice versa.
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F008 FRM1 Date sequencing (V107, V110, V130A)
IF valid date in <V130A> THEN <V107> must be less than or = to <V130A> & <V130A> must be less than or = to <V110>

F009 FRM1 Date sequencing (V107, V110, V130D)
IF valid date in <V130D> THEN <V107> must be less than or = to <V130D> & <V130D> must be less than or = to <V110>

F010 FRM1 Date sequencing (V130A, V130D)
IF valid date in <V130A> & valid date in <V130D> THEN <V130A> must be less than <V130D>

F011 FRM1 Date sequencing (V106, V150_1): Date of injury & date of admit to first treatment phase
IF valid date in <V106> & valid date in <V150_1> THEN <V150_1> must be greater than or = to <V106>

F012 FRM1 Date sequencing (V110, V151_1): Date of discharge & date of discharge from first treatment phase
IF valid date in <V110> & valid date in <V151_1> THEN <V110> must be greater than or = to <V151_1>

F013 FRM1 Date sequencing – treatment phases – admission & discharge dates
For all valid dates in <V150_1>to<V150_12> THEN sequence from earliest to most recent date must be <V150_1>,<V151_1> and same for <V150_2>,<V151_2> through <V150_12>,<V151_12> & V150 must = or be greater than previous V151

F014 FRM1 Date sequencing – injury date & Indate1
IF valid date in <V106> THEN <V106> must be less than or = to <INDATE1>

F015 FRM1 Date sequencing – first admission date & Indate1
IF valid date in <V107> THEN <V107> must be less than or = to <INDATE1>

F016 FRM1 V108 no rehab: V130R
IF <Indate1> > 11/30/2000 & <V108> = 88888888 and <V109A> = 001 THEN <V130R> must = 88888888

F017 FRM1 V108 "no rehab admit" not allowed after 3/31/2005 (when not deceased, not recovered & not minimal deficit at discharge)
IF <Indate1> > 03/31/2005 and [(<V110> <> <V145>) and (V131D not equal 3 or 6 or 7)] THEN <V108> cannot = 88888888.

F018 FRM1 V109R "no days to rehab admit" not allowed after 3/31/2005 (when not deceased, not recovered & not minimal deficit at discharge)
IF <Indate1> > 03/31/2005 and [(<V110> <> <V145>) and (V131D not equal 3 or 6 or 7)] THEN V109R cannot = 888.

F019 FRM1 V163R "no days in rehab" not allowed after 3/31/2005 (when not deceased, not recovered & not minimal deficit at discharge)
IF <Indate1> > 03/31/2005 and [(<V110> <> <V145>) and (V131D not equal 3 or 6 or 7)] THEN V163R cannot = 888.

F020 FRM1 V107 "no system admission" not allowed after 3/31/2005
IF <Indate1> > 03/31/2005 THEN <V107> cannot = 888 & <V110> cannot = 88888888.

F101 FRM2 Prior sphincterotomy
IF <Indate2> and <Indate1> > 12/31/1995 and <V208> = 03 or 06 or 07 or 08 or 09 or 10 or 13 THEN <V137> must not = 04 or 05

F102 FRM2 Prior augmentation/diversion
IF <V208> = 01 or 07 or 13 THEN <V137> must not = 02 or 09

F201 FRM2 Prior sphincterotomy
IF <V208> = 03 or 06 or 07 or 08 or 09 or 10 or 13 and <Indate2> > 12/31/1995 THEN <V208> must not = 04 on any previous Form IIs

F202 FRM2 Prior augmentation/diversion
IF <V208> = 01 or 07 or 13 and <Indate2> > 12/31/1995 THEN <V208> must not = 02 on any previous Form IIs

G001 FRM1 Days to system admission (V109A)
IF <V106> is a valid date AND <V107> is a valid date AND (<V106> NOT = <V107>) THEN <V109A> must = the number of days between <V106> and <V107>

G002 FRM1 Days to system admission (V109A)
IF <V106> is a valid date AND <V107> is a valid date AND (<V106> = <V107>) THEN <V109A> must = 001

G003 FRM1 Days to system admission (V109A), no system acute admission
IF <V107> = 88888888 THEN <V109A> must = 888 & vice versa

G003 FRM1 Date of Discharge (V110), no system admission
IF <V107> = 88888888 THEN <V109A> must = 888 & vice versa

G004 FRM1 Days injury to rehab (V109R)
IF valid date in <V106> & valid date in <V108> & <V106> not = <V108> THEN <V109R> must = the number of days between <V106> & <V108>
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G005 FRM1 Days injury-rehab (V109R): valid data in all fields
IF valid date in <V106> & valid date in <V108> & <V106> = <V108> THEN <V109R> must = 001

G006 FRM1 No inpatient rehab (V108, V109R)
IF <V108> = 88888888 THEN <V109R> must = 888 & vice versa

G007 FRM1 Days: No system inpatient admission (V107, V109R)
IF <V107> = 88888888 THEN <V109R> must = 888

G008 FRM1 Days in system acute & rehab: no system inpatient admission
IF <V107> = 88888888 THEN <V163A> must = 8888 & <V163R> must = 8888 & vice versa

G009 FRM1 Days in system acute (V163A), no system inpatient acute (or subacute) medical treatment phases
IF there is no <V149> = 1 with corresponding <V148> = 1 or 4 THEN <V163A> = 8888

G010 FRM1 Days in acute system (V163A)
<V163A> = the sum of all <V153_1> to <V153_12> FOR all <V149_1> to <V149_12> = 1 with corresponding <V148> = 1 or 4

G011 FRM1 Days in system acute (V163A) – unknown code
IF V163A = 9999 THEN Form I <INDATE1> cannot be greater than 02/01/1996

G012 FRM1 Days: No inpatient rehab (V108, V163R)
IF <V108> = 88888888 THEN <V163R> must = 8888 & vice versa

G013 FRM1 Days in system inpt rehab (V163R), no system inpt (acute or subacute) rehab admit
IF there is no <V149> = 1 with corresponding <V148> = 3 or 5 THEN <V163R> = 8888

G014 FRM1 Days in system rehab (V163R)
<V163R> = the sum of all <V153_1> to <V153_12> FOR [all <V149_1> to <V149_12> = 1 with corresponding <V148> = 3 or 5]

G015 FRM1 Days in system rehab (V163R) – unknown code
IF V163R = 9999 THEN Form I <INDATE1> cannot be greater than 02/01/1996

H001 FRM1 No system admission (V107, V148)
IF <V107> = 88888888 THEN there can be no <V149> = 1 with corresponding <V148> less than or to 5

H002 FRM1 Date of last inpatient system discharge (V110, V151)
IF valid date in <V110> & <INDATE1> is > 9/30/2001 THEN <V110> must = the last <V151> for which corresponding <V148> is < or = to 5 with corresponding <V149> = 1

H003 FRM1 Date of first inpatient system admission (V107, V150)
IF valid date in <V107> & <INDATE1> is > 9/30/2001 THEN <V107> must = the first <V150> for which corresponding <V148> is < or = to 5 with corresponding <V149> = 1

H004 FRM1 Date of first system inpatient rehab admission (V108, V150)
IF valid date in <V108> & <INDATE1> is > 9/30/2001 THEN <V108> must = the first <V150> for which corresponding <V148> = 3 or 5 with corresponding <V149> = 1

H005 FRM1 Days in each treatment phase (V153)
IF MM or DD of <V150> or <V151> = 99 or YYYY of <V150> or <V151> = 9999 THEN <V153> must = 9999; else <V153> = the days between <V150> and <V151> minus <V152>

H101 FRM2 V220: nursing home days on year 01 Form II
IF <V200> = 01 and <V220> not = 888 AND not = 999 THEN <V220> must be < or = to the number of days between the anniversary date for this <V200> and <V110>

I001 FRM1 V131A x V136A: paraplegia
IF <V131A> = 1 or 2 or 3 THEN the first character in <V136AL> & <V136AR> must = T or L or S or X

I002 FRM1 V131A x V136A: tetraplegia
IF <V131A> = 4 or 5 or 6 THEN the first character in <V136AL> OR <V136AR> must = C OR (<V136AL> must = X99 & <V136AR> must = X99)
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I003  FRM1  V131A x V136A: normal
IF <V131A> = 7 THEN <V136AL> AND <V136AR> must = X00

I004  FRM1  V131A x V134A: normal
IF <V131A> = 7 THEN (<V134AL> must = X00 & <V134AR> must = X00) OR (<V107> must be less than 08/15/1993 & <V134AL> must = X99 & <V134AR> must = X99)

I005  FRM1  V131A x V135A: normal
IF <V131A> = 7 THEN (<V135AL> must = X00 & <V135AR> must = X00) OR (<V107> must be less than 08/15/1993 & <V135AL> must = X99 & <V135AR> must = X99)

I006  FRM1  V131A x V132A: incomplete
IF <V131A> = 1 or 4 THEN <V132A> must = B or C or D or U or 1 or 2 or 3 or 9

I007  FRM1  V131A x V132A: complete
IF <V131A> = 2 or 5 THEN <V132A> must = A or 5 & vice versa

I008  FRM1  V131A x V132A: minimal
IF <V131A> = 3 or 6 THEN <V132A> must = D or 3

I009  FRM1  V131A x V132A: normal
IF <V131A> = 7 or 8 THEN <V132A> must = E or 4 & vice versa

I010  FRM1  V131A x V132A: minimal/normal (conversion)
IF <V131A> = 8 THEN <V132A> must = D or E or 3 or 4

I011  FRM1  V131A x V132A: unknown
IF <V131A> = 9 THEN <V132A> must = U or 9

I012  FRM1  V131A x V133A: normal -> normal or unknown
IF <V131A> = 7 or 8 THEN (<V133AL> must = 50 & <V133AR> must = 50 & <V133AT> must = 100) OR (<V133AL> must = 99 & <V133AR> must = 99 & <V133AT> must = 999)

I013  FRM1  V136A x V131A: cervical
If the first character in <V136AL> = C or the first character in <V136AR> = C THEN <V131A> must = 4 or 5 or 6 or 9

I014  FRM1  V136D x V131D: thoracic, lumbar, sacral
If the first character in <V136DL> = T or L or S & the first character in <V136DR> not = C) OR (the first character in <V136DR> = T or L or S and the first character in <V136DL> not = C) THEN <V131D> must = 1 or 2 or 3 or 9

I014  FRM2  V249 x V244: thoracic, lumbar, sacral
If (the first character in <V249L> = T or L or S & the first character in <V249R> is not = C) OR (the first character in <V249R> is not = C) THEN <V244> must = 1 or 2 or 3 or 9

I014  REG  V136D x V131D: thoracic, lumbar, sacral
If (the first character in <V136DL> = T or L or S & the first character in <V136DR> not = C) OR (the first character in <V136DR> = T or L or S AND the first character in <V136DL> is not = C) THEN <V244> must = 1 or 2 or 3 or 9

I015  FRM1  V136A x V131A: normal, norm/minimal
IF <V136AL> = X00 & <V136AR> = X00 THEN <V131A> must = 7 or 8

I016  FRM1  V136AL x V134AL, V135AL
IF Sensory Level Admit Left (V134AL) and Motor Level Admit Left (V135AL) are known THEN Level Admit Left (V136AL) must = Sensory Level Admit Left or Motor Level Admit Left (whichever is higher)

I017  FRM1  V136AR x V134AR, V135AR
IF Sensory Level Admit Right (V134AR) and Motor Level Admit Right (V135AR) are known THEN Level Admit Right (V136AR) must = Sensory Level Admit Right or Motor Level Admit Right (whichever is higher)

I018  FRM1  V132A x V131A: incomplete
IF <V132A> = B or C or 1 or 2 THEN <V131A> must = 1 or 4

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I019 FRM1 V132A x V131A: incomplete/minimal
IF <V132A> = D or 3 THEN <V131A> must = 1 or 3 or 4 or 6

I021 FRM1 V132A x V131A: unknown
IF <V132A> = U or 9 THEN <V131A> must = 1 or 4 or 9

I022 FRM1 V131D x V136D: paraplegia
IF <V131D> = 1 or 2 or 3 THEN the first character in <V136DL> & <V136DR> must = T or L or S or X

I022 FRM2 V244 x V249: paraplegia
IF <V244> = 1 or 2 or 3 THEN the first character in <V249L> & <V249R> must equal T or L or S or X

I022 REG V131D x V136D: paraplegia
IF <V131D> = 1 or 2 or 3 THEN the first character in <V136DL> & <V136DR> must = T or L or S or X

I023 FRM1 V131D x V136D: tetraplegia
IF <V131D> = 4 or 5 or 6 THEN the first character in <V136DL> OR <V136DR> must = C OR <V136DL> must = X99 AND <V136DR> must = X99

I023 FRM2 V244 x V249: tetraplegia
IF <V244> = 4 or 5 or 6 THEN the first character in <V249L> OR <V249R> must equal C OR (<V249L> must = X99 AND <V249R> must = X99)

I023 REG V131D x V136D: tetraplegia
IF <V131D> = 4 or 5 or 6 THEN the first character in <V136DL> OR <V136DR> must = C OR (<V136DL> must = X99 AND <V136DR> must = X99)

I024 FRM1 V131D x V136D: normal
IF <V131D> = 7 THEN <V136DL> AND <V136DR> must = X00

I024 FRM2 V244 x V249: normal
IF (<V200> = 1,5,10,15,20,25,30 or 35 and <V244> = 7 THEN <V249L> AND <V249R> must = X00) OR IF (<V200> <> 1,5,10,15,20,25,30 or 35 and <V201> = 8 and <V244> = 7 THEN <V249L> AND <V249R> must = X00)

I024 REG V131D x V136D: normal
IF <V131D> = 7 THEN <V136DL> AND <V136DR> must = X00

I025 FRM1 V131D x V134D: normal
IF <V131D> = 7 THEN (<V134DL> must = X00 & <V134DR> must = X00) OR (<V107> must be < 08/15/1993 & <V134DL> must = X99 & <V134DR> must = X99)

I025 FRM2 V244 x V247: normal
IF (<V200> = 1,5,10,15,20,25,30 or 35 and <V244> = 7 THEN <V247L> must = X00 AND <V247R> must = X00) OR IF (<INDATE2> must be < 08/15/1995 & <V247L> must = X00 & <V247R> must = X00) OR IF (<V200> <> 1,5,10,15,20,25,30 or 35 and <V201> = 8 and <V244> = 7 THEN <V247L> must = X00 AND <V247R> must = X00) OR (<INDATE2> must be < 08/15/1995 & <V247L> must = X99 & <V247R> must = X99)

I026 FRM1 V131D x V135D: normal
IF <V131D> = 7 THEN (<V135DL> must = X00 & <V135DR> must = X00) OR (<V107> must be < 08/15/1993 & <V135DL> must = X99 & <V135DR> must = X99)

I026 FRM2 V244 x V248: normal
IF (<V200> = 1,5,10,15,20,25,30 or 35 and <V244> = 7 THEN <V248L> must = X00 AND <V248R> must = X00) OR IF (<INDATE2> must be < 08/15/1995 & <V248L> must = X00 & <V248R> must = X00) OR IF (<V200> <> 1,5,10,15,20,25,30 or 35 and <V201> = 8 and <V244> = 7 THEN <V248L> must = X00 AND <V248R> must = X00) OR (<INDATE2> must be < 08/15/1995 & <V248L> must = X99 & <V248R> must = X99)

I027 FRM1 V131D x V132D: incomplete
IF <V131D> = 1 or 4 THEN <V132D> must = B or C or D or U or 1 or 2 or 3 or 9

I027 FRM2 V244 x V245: incomplete
IF <V244> = 1 or 4 THEN <V245> must = B or C or D or U or 1 or 2 or 3 or 9

I027 REG V131D x V132D: incomplete
IF <V131D> = 1 or 4 THEN <V132D> must = B or C or D or U or 1 or 2 or 3 or 9

I028 FRM1 V131D x V132D: complete
IF <V131D> = 2 or 5 THEN <V132D> must = A or 5 & vice versa

I028 FRM2 V244 x V245: complete
IF <V244> = 2 or 5 THEN <V245> must = A or 5 & vice versa

I028 REG V131D x V132D: complete
IF <V131D> = 2 or 5 THEN <V132D> must = A or 5 & vice versa
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1029 FRM1 V131D x V132D: minimal
IF \( <V131D> = 3 \) or 6 THEN \( <V132D> \) must = D or 3

1029 FRM2 V244 x V245: minimal
IF \( <V244> = 3 \) or 6 THEN \( <V245> \) must = D or 3

1029 REG V131D x V132D: minimal
IF \( <V131D> = 3 \) or 6 THEN \( <V132D> \) must = D or 3

1030 FRM1 V131D x V132D: normal
IF \( <V131D> = 7 \) or 8 THEN \( <V132D> \) must = E or 4 & vice versa

1030 FRM2 V244 x V245: normal
IF \( [<V200> = 1,5,10,15,20,25,30 or 35 \) and \( <V244> = 7 \) or 8 THEN \( <V245> \) must = E or 4 \) & vice versa \]
\ OR \( [IF <V200> <> 1,5,10,15,20,25,30 or 35 \) and \( <V201> = 8 \) and \( <V244> = 7 \) THEN \( <V245> \) must = E or 4 \) & vice versa \].

1030 REG V131D x V132D: normal
IF \( <V131D> = 7 \) or 8 THEN \( <V132D> \) must = E or 4 & vice versa

1031 FRM1 V131D x V132D: minimal/normal (conversion)
IF \( <V131D> = 8 \) THEN \( <V132D> \) must = D or E or 3 or 4

1031 FRM2 V244 x V245: minimal/normal (conversion)
IF \( <V244> = 8 \) THEN \( <V245> \) must = D or E or 3 or 4

1031 REG V131D x V132D: minimal/normal (conversion)
IF \( <V131D> = 8 \) THEN \( <V132D> \) must = D or E or 3 or 4

1032 FRM1 V131D x V132D: unknown
IF \( <V131D> = 9 \) THEN \( <V132D> \) must = U or 9

1032 FRM2 V244 x V245: unknown
IF \( <V244> = 9 \) THEN \( <V245> \) must = U or 9

1032 REG V131D x V132D: unknown
IF \( <V131D> = 9 \) THEN \( <V132D> \) must = U or 9

1033 FRM1 V131D x V133D: normal -> normal or unknown
IF \( <V131D> = 7 \) or 8 THEN \( <V133DL> = 50 \) or \( <V133DR> = 50 \) & \( <V133DT> = 100 \)
\ OR \( (<V133DL> = 99 \) or \( <V133DR> = 99 \) or \( <V133DT> = 999 \) \)

1033 FRM2 V244, V211 x V246: normal -> normal or unknown
IF \( <V244> = 7 \) or 8 AND valid date in \( <V211> \) THEN \( <V246L> = 50 \) AND \( <V246R> = 50 \)
\ AND \( <V246T> = 100 \) \ OR \( (<V246L> = 99 \) AND \( <V246R> = 99 \) AND \( <V246T> = 999 \) \)

1034 FRM1 V136D x V131D: cervical
IF the first character in \( <V136DL> = C \) OR the first character in \( <V136DR> = C \) THEN \( <V131D> \) must = 4 or 5 or 6 or 9

1034 FRM2 V249 x V244: cervical
IF the first character in \( <V249L> = C \) OR the first character in \( <V249R> = C \) THEN \( <V244> \) must = 4 or 5 or 6 or 9

1034 REG V136D x V131D: cervical
IF the first character in \( <V136DL> = C \) OR the first character in \( <V136DR> = C \) THEN \( <V131D> \) must = 4 or 5 or 6 or 9

1036 FRM1 V136D x V131D: normal, norm/minimal
IF \( <V136DL> = X00 \) AND \( <V136DR> = X00 \) THEN \( <V131D> \) must = 7 or 8

1036 FRM2 V249 x V244: normal, norm/minimal
IF \( <V249L> = X00 \) AND \( <V249R> = X00 \) THEN \( <V244> \) must = 7 or 8

1036 REG V136D x V131D: normal, norm/minimal
IF \( <V136DL> = X00 \) AND \( <V136DR> = X00 \) THEN \( <V131D> \) must = 7 or 8
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IF Sensory Level D/C Left (V134DL) and Motor Level D/C Left (V135DL) are known THEN Level D/C Left (V136DL) must = Sensory Level D/C Left or Motor Level D/C Left (whichever is higher)

IF Sensory Level Left (V247L) and Motor Level Left (V248L) are known THEN Level Left (V249L) must = Sensory Level Left or Motor Level Left (whichever is higher)

IF Sensory Level D/C Right (V134DR) and Motor Level D/C Right (V135DR) are known THEN Level D/C Right (V136DR) must = Sensory Level D/C Right or Motor Level D/C Right (whichever is higher)

IF Sensory Level Right (V247R) and Motor Level Right (V248R) are known THEN Level Right (V249R) must = Sensory Level Right or Motor Level Right (whichever is higher)

IF <V132D> = B or C or 1 or 2 THEN <V131D> must = 1 or 4

IF <V245> = B or C or 1 or 2 THEN <V244> must = 1 or 4

IF <V132D> = B or C or 1 or 2 THEN <V131D> must = 1 or 4

IF <V132D> = D or 3 THEN <V131D> must = 1 or 3 or 4 or 6

IF <V132D> = B or C or 1 or 2 THEN <V131D> must = 1 or 3 or 4 or 6

IF <V132D> = U or 9 THEN <V131D> must = 1 or 4 or 9

IF <V132D> = D or 3 THEN <V131D> must = 1 or 3 or 4 or 6

IF <V132D> = U or 9 THEN <V131D> must = 1 or 4 or 9

IF <V132D> = U or 9 THEN <V131D> must = 1 or 4 or 9

IF any variable from <V133AAL> to <V133AJL> not = 8 & any variable from <V133AAL> to <V133AJL> not = 9 THEN <V133AL> must = <V133AAL> + <V133ABL> + <V133ACL> + <V133ADL> + <V133AEL> + <V133AFL> + <V133AGL> + <V133AHL> + <V133AIL> + <V133AJL>

IF any variable from <V133AAL> to <V133AJL> = 8 THEN <V133AL> must = 88 (only if <Indate1> > 08/15/1993)

IF any variable from <V133AAL> to <V133AJL> = 8 THEN <V133AL> must = 88 and vice versa (only if <Indate1> > 08/15/1993)

IF any variable from <V133AAL> to <V133AJL> = 9 & any variable from <V133AAL> to <V133AJL> not = 8 THEN <V133AL> must = 99

IF any variable from <V133AAL> to <V133AJL> = 9 & any variable from <V133AAL> to <V133AJL> not = 8 THEN <V133AL> must = 99

IF any variable from <V133AAL> to <V133AJL> = 9 THEN <V133AL> must = 99

IF any variable from <V133AAL> to <V133AJL> = 9 THEN <V133AL> must = 99
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1048 FRM1 V133AR: acute right subtotal is unknown
IF <V107> > 08/15/1993 and any variable from <V133AAR> to <V133AJR> = 9 & any variable from
<V133AAR> to <V133AJR> not = 8 THEN <V133AR> must = 99

1049 FRM1 V133AT: acute total = sum of subtotals
IF <V133AL> not = 88 & <V133AL> not = 99 & <V133AR> not = 88 & <V133AR> not = 99 THEN
<V133AT> must = <V133AL> + <V133AR>

1050 FRM1 V133AT: acute total not applicable/not done
IF <V133AL> = 88 OR <V133AR> = 88 THEN <V133AT> must = 888 & vice versa

1051 FRM1 V133AT: acute total one side unknown
IF (<V133AL> = 99 & <V133AR> not = 88) OR (<V133AR> = 99 & <V133AL> not = 88) THEN
<V133AT> must = 999

1052 FRM1 V133AT: acute total both sides unknown
IF <V133AT> = 999 THEN [(<V133AL> must = 99 & <V133AR> must not = 88) OR (<V133AR> must
= 99 & <V133AL> must not = 88)]

1053 FRM1 V133AT x V131A: not tetra complete
IF <V133AT> = 100 THEN <V131A> must not = 5

1054 FRM1 V133RL: rehab left subtotal = sum of muscle scores
IF any variable from <V133RAL> to <V133RJL> not = 8 & any variable from <V133RAL> to
<V133RJL> not = 9 THEN <V133RL> must = <V133RAL> + <V133RBL> + <V133RCL> +
<V133RDL> + <V133REL> + <V133RFL> + <V133RGL> + <V133RHL> + <V133RIL> + <V133RJL>

1055 FRM1 V133RL: rehab left not applicable/not done
IF any variable from <V133RAL> to <V133RJL> = 8 THEN <V133RL> must = 88 (only if <Indate1> >
08/15/1993)

1056 FRM1 V133RL: rehab left subtotal unknown
IF <V108> > 08/15/1993 and any variable from <V133RAL> to <V133RJL> = 9 & any variable from
<V133RAL> to <V133RJL> not = 8 THEN <V133RL> must = 99

1057 FRM1 V133RR: rehab right subtotal = sum of muscle scores
IF any variable from <V133RAR> to <V133RJR> not = 8 & any variable from <V133RAR> to
<V133RJR> not = 9 THEN <V133RR> must = <V133RAR> + <V133RBR> + <V133RCR> +
<V133RDR> + <V133RER> + <V133RFR> + <V133RGR> + <V133RHR> + <V133RIR> + <V133RJR>

1058 FRM1 V133RR: rehab right not applicable/not done
IF any variable from <V133RAR> to <V133RJR> = 8 THEN <V133RR> must = 88 (only if <Indate1> >
08/15/1993)

1059 FRM1 V133RR: rehab right subtotal unknown
IF <V108> > 08/15/1993 and any variable from <V133RAR> to <V133RJR> = 9 & any variable from
<V133RAR> to <V133RJR> not = 8 THEN <V133RR> must = 99

1060 FRM1 V133RT: rehab total = sum of subtotals
IF <V133L> not = 88 & <V133L> not = 99 & <V133R> not = 88 & <V133R> not = 99 THEN
<V133RT> must = <V133L> + <V133R>

1061 FRM1 V133RT: rehab total not applicable/not done
IF <V133L> = 88 OR <V133R>= 88 THEN <V133RT> must = 888 & vice versa

1062 FRM1 V133RT: rehab total one side unknown
IF (<V133L> = 99 & <V133R> not = 88) OR (<V133R> = 99 & <V133L> not = 88) THEN
<V133RT> must = 999

1063 FRM1 V133RT: rehab total both sides unknown
IF <V133RT> = 999 THEN [(<V133L> must = 99 & <V133R> must not = 88) OR (<V133R> must =
99 & <V133L> must not = 88)]
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1064  **FRM1 V133DL: d/c left subtotal = sum of muscle scores**

If any variable from <V133DAL> to <V133DJL> not = 8 & any variable from <V133DAL> to <V133DJL> not = 9 THEN <V133DL> must = <V133DAL> + <V133DBL> + <V133DCL> + <V133DDL> + <V133DEL> + <V133DFL> + <V133DGL> + <V133DHL> + <V133DIL> + <V133DJL>

1064  **FRM2 V246L: left subtotal = sum of muscle scores**

If any variable from <V246AL> to <V246JL> not = 8 AND any variable from <V246AL> to <V246JL> not = 9 THEN <V246L> must = <V246AL> + <V246BL> + <V246CL> + <V246DL> + <V246EL> + <V246FL> + <V246GL> + <V246HL> + <V246IL> + <V246JL>

1065  **FRM1 V133DL: d/c left not applicable/not done**

If any variable from <V133DAL> to <V133DJL> = 8 THEN <V133DL> must = 88 (only if <Indate1> > 08/15/1993)

1065  **FRM2 V246L: left not applicable/not done**

If any variable from <V246AL> to <V246JL> = 8 THEN <V246L> must = 88 (only if <Indate2> > 08/15/1993)

1066  **FRM1 V133DL: d/c left subtotal unknown**

If <V107> > 08/15/1993 and any variable from <V133DAL> to <V133DJL> not = 9 THEN <V133DL> THEN must = 99

1066  **FRM2 V246L: left subtotal unknown**

If <V211> > 08/15/1993 and any variable from <V246AL> to <V246JL> not = 9 THEN <V246L> must = 99

1067  **FRM1 V133DR: d/c right subtotal = sum of muscle scores**

If any variable from <V133DAR> to <V133DJR> not = 8 & any variable from <V133DAR> to <V133DJR> not = 9 THEN <V133DR> must = <V133DAR> + <V133DBR> + <V133DCR> + <V133DDR> + <V133DER> + <V133DFR> + <V133DGR> + <V133DHR> + <V133DIR> + <V133DJR>

1067  **FRM2 V246R: right subtotal = sum of muscle scores**

If any variable from <V246AR> to <V246JR> not = 8 AND any variable from <V246AR> to <V246JR> not = 9 THEN <V246R> must = <V246AR> + <V246BR> + <V246CR> + <V246DR> + <V246ER> + <V246FR> + <V246GR> + <V246HR> + <V246IR> + <V246JR>

1068  **FRM1 V133DR: d/c right not applicable/not done**

If any variable from <V133DAR> to <V133DJR> = 8 THEN <V133DR> must = 88 (only if <Indate1> > 08/15/1993)

1068  **FRM2 V246R: right not applicable/not done**

If any variable from <V246AR> to <V246JR> = 8 THEN <V246R> must = 88 (only if <Indate2> > 08/15/1993)

1069  **FRM1 V133DR: d/c right subtotal unknown**

If <V017> > 08/15/1993 and any variable from <V133DAR> to <V133DJR> = 9 and any variable from <V133DAR> to <V133DJR> not = 8 THEN <V133DR> must = 99

1069  **FRM2 V246R: right subtotal is unknown**

If <V211> > 08/15/1993 and any variable from <V246AR> to <V246JR> = 9 and any variable from <V246AR> to <V246JR> not = 8 THEN <V246R> must = 99

1070  **FRM1 V133DT: d/c total = sum of subtotals**

If <V133D> not = 88 & <V133DL> not = 99 & <V133DR> not = 88 & <V133DR> not = 99 THEN <V133DT> must = <V133DL> + <V133DR>

1070  **FRM2 V246T: total = sum of subtotals**

If <V246L> not = 88 AND <V246L> not = 99 AND <V246R> not = 88 AND <V246R> not = 99 THEN <V246T> must = <V246L> + <V246R>
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I071  FRM1  V133DT: d/c total not applicable/not done
IF <V133DL> = 88 OR <V133DR> = 88 THEN <V133DT> must = 888 & vice versa

I071  FRM2  V246T: total not applicable/not done
IF <V246L> = 88 OR <V246R> = 88 THEN <V246T> must = 888 & vice versa

I072  FRM1  V133DT: d/c total one side unknown
IF (<V133DL> = 99 & <V133DR> not = 88) OR (<V133DR> = 99 & <V133DL> not = 88) THEN <V133DT> must = 999

I072  FRM2  V246T: total one side unknown
IF (<V246L> = 99 AND <V246R> not = 88) OR (<V246R> = 99 AND <V246L> not = 88) THEN <V246T> must = 999

I073  FRM1  V133DT: d/c total both sides unknown
IF <V133DT> = 999 THEN [(<V133DL> must = 99 & <V133DR> must not = 88) OR (<V133DR> must = 99 & <V133DL> must not = 88)]

I073  FRM2  V246T: total both sides unknown
IF <V246T> = 999 THEN [(<V246L> must = 99 & <V246R> must not = 88) OR (<V246R> must = 99 & <V246L> must not = 88)]

I074  FRM1  V133DT x V131D: not tetra complete
IF <V133DT> = 100 THEN <V131D> must not = 5

I074  FRM2  V246T x V244: not tetra complete
IF <V246T> = 100 THEN <V244> must not = 5

I075  FRM1  V136R x V131R: normal, norm/minimal
IF <V136RL> = X00 & <V136RR> = X00 THEN <V131R> must = 7 or 8

I076  FRM1  V136A x V131A: thoracic, lumbar, sacral
IF (the first character in <V136AL> = T or L or S & the first character in <V136AR> not = C) OR (the first character in <V136AR> = T or L or S & the first character in <V136AL> not = C) THEN <V131A> must = 1 or 2 or 3 or 9

I077  FRM1  V136R x V131R: cervical
IF the first character in <V136RL> = C OR the first character in <V136RR> = C THEN <V131R> must = 4 or 5 or 6 or 9

I078  FRM1  V136R x V131R: thoracic, lumbar, sacral
IF (the first character in <V136RL> = T or L or S & the first character in <V136RR> not = C) OR (the first character in <V136RR> = T or L or S & the first character in <V136RL> not = C ) THEN <V131R> must = 1 or 2 or 3 or 9

I080  FRM1  V132R x V131R: unknown
IF <V132R> = U or 9 THEN <V131R> must = 1 or 4 or 9

I081  FRM1  V131R x V132R: complete
IF <V131R> = 2 or 5 THEN <V132R> must = A or 5 & vice versa

I082  FRM1  V131R x V132R: minimal
IF <V131R> = 3 or 6 THEN <V132R> must = D or 3

I083  FRM1  V131R x V132R: normal
IF <V131R> = 7 or 8 THEN <V132R> must = E or 4 & vice versa

I084  FRM1  V131R x V133R: normal -> normal or unknown
IF <V131R> = 7 or 8 THEN (<V133RL> must = 50 & <V133RR> must = 50 & <V133RT> must = 100) OR (<V133RL> must = 99 & <V133RR> must = 99 & <V133RT> must = 999)

I085  FRM1  V131R x V132R: minimal/normal (conversion)
IF <V131R> = 8 THEN <V132R> must = D or E or 3 or 4

I086  FRM1  V131R x V132R: unknown
IF <V131R> = 9 THEN <V132R> must = U or 9
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I088 FRM1 V131R x V136R: normal
IF <V131R> = 7 THEN <V136RL> AND <V136RR> must = X00

I089 FRM1 V132R x V131R: incomplete/minimal
IF <V132R> = D or 3 THEN <V131R> must = 1 or 3 or 4 or 6

I090 FRM1 V136RL x V134RL, V135RL
IF Sensory Level Rehab Left (V134RL) and Motor Level Rehab Left (V135RL) are known THEN Level Rehab Left (V136RL) must = Sensory Level Rehab Left or Motor Level Rehab Left (whichever is higher)

I091 FRM1 V136RR x V134RR, V135RR
IF Sensory Level Rehab Right (V134RR) and Motor Level Rehab Right (V135RR) are known THEN Level Rehab Right (V136RR) must = Sensory Level Rehab Right or Motor Level Rehab Right (whichever is higher)

I092 FRM1 V133RT x V131R: not tetra complete
IF <V133RT> = 100 THEN <V131R> must not = 5

I093 FRM1 V131R x V136R: paraplegia
IF <V131R> = 1 or 2 or 3 THEN the first character in <V136RL> & <V136RR> must = T or L or S or X

I095 FRM1 V131R x V136R: tetraplegia
IF <V131R> = 4 or 5 or 6 THEN the first character in <V136RL> OR <V136RR> must = C OR (<V136RL> must = X99 & <V136RR> must = X99)

I096 FRM1 V131R x V134R: normal
IF <V131R> = 7 THEN (<V134RL> must = X00 & <V134RR> must = X00) OR (<V107> must be < 08/15/1993 & <V134RL> must = X99 & <V134RR> must = X99)

I097 FRM1 V131R x V135R: normal
IF <V131R> = 7 THEN (<V135RL> must = X00 & <V135RR> must = X00) OR (<V107> must be < 08/15/1993 & <V135RL> must = X99 & <V135RR> must = X99)

I098 FRM1 V131R x V132R: incomplete
IF <V131R> = 1 or 4 THEN <V132R> must = B or C or D or U or 1 or 2 or 3 or 9

I099 FRM1 V132R x V131R: incomplete
IF <V132R> = B or C or 1 or 2 THEN <V131R> must = 1 or 4

J001 FRM1 V139A x V140A: all 0's
IF <V107> is > or = to 12/01/1995 & the number of locations in <V139A> coded zero (0) = 27 THEN <V140A> must = 00

J002 FRM1 Pressure ulcers: no ulcers
IF <V212> = 0 THEN <V213> must = 00 & vice versa

J002 FRM1 V139A x V140A: at least one code 1,2,3,4,8
IF <V107> is > or = to 12/01/1995 & the number of locations in <V139A> coded 1, 2, 3, 4 or 8 is > 0 THEN <V140A> must be greater than or = to the number of locations in <V139A> coded 1, 2, 3, 4 or 8 & <V140A> must not = 99

J002 FRM2 Pressure ulcers: ulcer present
IF <V212> = 1 or 2 or 3 or 4 or 8 THEN <V213> must not = 00 AND <V213> must not = 99 & vice versa

J003 FRM1 V139A x V140A: at least one code 9 & no 1,2,3,4,8
IF <V107> is > or = to 12/01/1995 & the number of locations in <V139A> coded 9 is > 0 & the number of locations in <V139A> coded 1, 2, 3, 4 or 8 = 0 THEN <V140A> must = 99

J003 FRM2 Pressure ulcers: unknown
IF <V212> = 9 THEN <V213> must = 99 & vice versa

J004 FRM1 V139R x V140R: all 0's
IF the number of locations in <V139R> coded zero (0) = 27 THEN <V140R> must = 00 & vice versa

J005 FRM1 V139R x V140R: at least one code 1,2,3,4,8
IF the number of locations in <V139R> coded 1, 2, 3, 4 or 8 is > 0 THEN <V140R> must be greater than or = to the number of locations in <V139R> coded 1, 2, 3, 4 or 8 & <V140R> must not = 99
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J006  FRM1  V139R x V140R: at least one code 9 & no 1, 2, 3, 4, 8
If the number of locations in <V139R> coded 9 is > 0 & the number of locations in <V139R> = 1, 2, 3, 4 or 8 = 0 THEN <V140R> must = 99

J007  FRM1  V140A x V139A: all 0's
If <V107> is > or = to 12/01/1995 & <V140A> = 00 THEN the number of locations in <V139A> coded zero (0) must = 27

K001  FRM1  V142AA x V143AG: spine surgery occurs during acute care
If <V142AA> = 0 or 1 THEN <V143AG> must be greater than 00 & <V143AG> must be less than or = to 88

K001  FRM2  V222B x V221D: no stone
If <V222B> = 0 THEN <V221D> must = 0

K002  FRM1  V142AA x V143AG: spine surgery occurs during acute care
If <V143AG> is > 00 & <V143AG> is < or = to 88 THEN <V142AA> must not = 8

K002  FRM2  V221D x V222B: stone present or unknown
If <V221D> not = 0 THEN <V222B> must not = 0

K003  FRM1  V142RA x V143RG: spine surgery occurs during rehab
If <Indate1> > 11/30/2000 and <V142RA> = 1 THEN <V143RG> must be greater than 00 & <V143RG> must be less than or = to 88

K003  FRM2  V222D x V208: bladder management and sphincterotomy
If <V222D> = 1 and <Indate2> > 12/31/1995 THEN <V208> must not = 03 or 05 or 06 or 07 or 08 or 09 or 10 or 13

K004  FRM1  V142RA x V143RG: spine surgery occurs during rehab
If <V143RG> is > 00 & <V143RG> is < or = to 88 THEN <V142RA> must not = 8

K005  FRM1  V142AA x V143AG: no spine surgery during acute care
If <V142AA> = 8 THEN <V143AG> must = 00 & vice versa

K006  FRM1  V142RA x V143RG: no spine surgery during rehab
If <Indate1> > 11/30/2000 and <V142RA> = 8 THEN <V143RG> must = 00 & vice versa

L001  FRM1  V143: no OR visits --> no spine surgeries during acute care
If <Indate1> > 11/30/2000 and <V143AG> = 00 THEN <V143AA> must = 0 & <V143AB_1> must = 0 & <V143AC_1> must = 0 & <V143AD_1> must = 0 & <V143AE_1> must = 0 & <V143AF_1> must = 8 & <V143AG> must = 8

L002  FRM1  V143: no OR visits --> no spine surgeries during rehab
If <Indate1> > 11/30/2000 and <V143RG> = 00 THEN <V143RA> must = 0 & <V143RB_1> must = 0 & <V143RC_1> must = 0 & <V143RD_1> must = 0 & <V143RE_1> must = 8 & <V143RF_1> must = 8

L003  FRM1  V143: unknown OR visits --> unknown spine surgery during acute care
If <V143AG> = 99 THEN <V143AA> or <V143AB_1> or <V143AC_1> or <V143AD_1> or <V143AE_1> or <V143AF_1> must = 9 and [<V143AA> and <V143AB_1> and <V143AC_1> and <V143AD_1> and <V143AE_1> and <V143AF_1> must <> 1, 2, 3, 4 or 5]

L004  FRM1  V143: unknown OR visits --> unknown spine surgery during rehab
If <V143RG> = 99 THEN <V143RA> or <V143RB_1> or <V143RC_1> or <V143RD_1> or <V143RE_1> or <V143RF_1> must=9 and [<V143AA> and <V143AB_1> and <V143AC_1> and <V143AD_1> and <V143AE_1> and <V143AF_1> must <> 1, 2, 3, 4 or 5]

L005  FRM1  V143: spinal surgery --> OR visits during acute care
If <Indate1> > 11/30/2000 and <V143AA> not=0 OR <V143AB_1> not=0 OR <V143AC_1> not=0 OR <V143AD_1> not=0 OR <V143AE_1> not=8 OR <V143AF_1> not=8 THEN <V143AG> must not=00

L006  FRM1  V143: spinal surgery --> OR visits during rehab
If <V143RA> not=0 OR <V143RB_1> not=0 OR <V143RC_1> not=0 OR <V143RD_1> not=0 OR <V143RE_1> not=8 OR <V143RF_1> not=8 THEN <V143RG> must not=00

L007  FRM1  V143AC x V143AE: no fusion --> not app repair
If <Indate1> > 11/30/2000 and <V143AC_1> = 0 THEN <V143AE_1> must = 8 & vice versa
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L008  FRM1  V143AC x V143AE: unknown fusion --> unknown repair
IF <V143AC_1> = 9 THEN <V143AE_1> must = 9

L009  FRM1  V143AE x V143AC: no repair or unknown approach
IF <Indate1> > 11/30/2000 and <V143AC_1> = 0 or 5 OR <V143AE_2> = 5 OR <V143AE_3> = 5 THEN
  <V143AC_1> must = 1 or 2 or 3 or 4 or 5 OR <V143AC_2> must = 1 or 2 or 3 or 4 OR <V143AC_3> must = 1 or 2 or 3 or 4 or 5

L010  FRM1  V143AE x V143AC: repair of posterior fusion
IF <V143AE_1> = 1 or 4 OR <V143AE_2> = 1 or 4 OR <V143AE_3> = 1 or 4 THEN <V143AC_1> must = 2 or 3 or 4 OR <V143AC_2> must = 2 or 3 or 4 OR <V143AC_3> must = 2 or 3 or 4

L011  FRM1  V143AE x V143AC: repair of anterior fusion
IF <V143AE_1> = 2 or 3 OR <V143AE_2> = 2 or 3 OR <V143AE_3> = 2 or 3 THEN <V143AC_1> must = 1 or 3 OR <V143AC_2> must = 1 or 3 OR <V143AC_3> must = 1 or 3

L012  FRM1  V143AE x V143AC: unk repair --> cannot be no fusion
IF <V143AE_1> = 9 THEN <V143AC_1> must not = 0 OR (<V143AC_1> must = 0 & <INDATE1> must be < or =to 02/01/1996)

L013  FRM1  V143AD x V143AF: no internal fix --> not app repair
IF <Indate1> > 11/30/2000 and <V143AD_1> = 0 THEN <V143AF_1> must = 8 & vice versa

L014  FRM1  V143AD x V143AF: unknown fix --> unknown repair
IF <V143AD_1> = 9 THEN <V143AF_1> must = 9

L015  FRM1  V143AF x V143AD: no not app --> fixation
IF <Indate1> > 11/30/2000 and <V143AF_1> = 0 or 1 or 2 THEN <V143AD_1> must = 1 or 2 or 3 or 4 or 5

L016  FRM1  V143AF x V143AD: unk repair --> cannot be no internal fixation
IF <V143AF_1> = 9 THEN <V143AD_1> must not = 0 OR (<V143AD_1> must = 0 & <INDATE1> must be < or =to 02/01/1996)

L017  FRM1  V143RC x V143RE: no fusion --> not app repair
IF <Indate1> > 11/30/2000 and <V143RC_1> = 0 THEN <V143RE_1> must = 8 & vice versa

L018  FRM1  V143RC x V143RE: unknown fusion --> unknown repair
IF <Indate1> > 11/30/2000 and <V143RC_1> = 9 THEN <V143RE_1> must = 9

L019  FRM1  V143RE x V143RC: no repair or unknown approach
IF <Indate1> > 11/30/2000 and <V143RC_1> = 0 or 5 OR <V143RE_2> = 5 OR <V143RE_3> = 5 THEN
  <V143RC_1> must = 1 or 2 or 3 or 4 or 5 OR <V143RC_2> must = 1 or 2 or 3 or 4 OR <V143RC_3> must = 1 or 2 or 3 or 4 or 5

L020  FRM1  V143RE x V143RC: repair of posterior fusion
IF <V143RE_1> = 1 or 4 OR <V143RE_2> = 1 or 4 OR <V143RE_3> = 1 or 4 THEN <V143RC_1> must = 2 or 3 or 4 OR <V143RC_2> must = 2 or 3 or 4 OR <V143RC_3> must = 2 or 3 or 4

L021  FRM1  V143RE x V143RC: repair of anterior fusion
IF <V143RE_1> = 2 or 3 OR <V143RE_2> = 2 or 3 OR <V143RE_3> = 2 or 3 THEN <V143RC_1> must = 1 or 3 OR <V143RC_2> must = 1 or 3 OR <V143RC_3> must = 1 or 3

L022  FRM1  V143RE x V143RC: unk repair --> cannot be no fusion
IF <V143RE_1> = 9 THEN <V143RC_1> must not = 0 OR (<V143RC_1> must = 0 & <INDATE1> must be < or =to 02/01/1996)

L023  FRM1  V143RD x V143RF: no internal fix --> not app repair
IF <Indate1> > 11/30/2000 and <V143RD_1> = 0 THEN <V143RF_1> must = 8 & vice versa

L024  FRM1  V143RD x V143RF: unknown fix --> unknown repair
IF <Indate1> > 11/30/2000 and <V143RD_1> = 9 THEN <V143RF_1> must = 9

L025  FRM1  V143RF x V143RD: no not app --> fixation
IF <Indate1> > 11/30/2000 and <V143RF_1> = 0 or 1 or 2 THEN <V143RD_1> must = 1 or 2 or 3 or 4 or 5
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L026 FRM1 V143RF x V143RD: unkn repair --> cannot be no internal fixation
IF <V143RF_1> = 9 THEN <V143RD_1> must not = 0 OR (<V143RD_1> must = 0 & <INDATE1> must be < or =to 02/01/1996)

M001 FRM1 No rehab admission (V108, V109A, V131R)
IF <V108> = 88888888 & <V109A> = 001 THEN <V131R> must = 9

M002 FRM1 No rehab admission (V108, V109A, V132R)
IF <V108> = 88888888 & <V109A> = 001 THEN <V132R> must = U or 9

M003 FRM1 No rehab admission (V108, V133R)
IF <V108> = 88888888 & <V109A> = 001 THEN <V133RAL> to <V133RJL> must = 9 & <V133RAR> to <V133RJR> must = 9 & <V133RL> & <V133RR> must = 99 & <V133RT> must = 999

M004 FRM1 No rehab admission (V108, V134R, V135R, V136R)

M005 FRM1 No rehab admission (V108, V138R)
IF <Indate1> > 11/30/2000 and <V108> = 88888888 & <V109A> = 001 THEN <V138R> must = 9

M006 FRM1 No rehab admission (V108, V139R, V140R, V141)
IF <V108> = 88888888 & <V109A> = 001 THEN <V139R_1> to <V139R_27> must = 9 & <V140R> must = 99 & <V141> must = 9

M007 FRM1 No rehab admission (V108, V142, V143)
IF <Indate1> > 11/30/2000 and <V108> = 88888888 & <V109A> = 001 THEN <V142RA> & <V142RC> & <V142RD> & <V143RA> & <V143RL> & <V143RR> & <V143RL> & <V143RR> must all = X99

M008 FRM1 No rehab admission (V108, V142RB)
IF <Indate1> > 11/30/2000 and <V108> = 88888888 & <V109A> = 001 THEN <V142RB> must = 99

M009 FRM1 No rehab admission (V108, V143RB)
IF <V108> = 88888888 & <V109A> = 001 THEN <V143RB_1> must = 9 & blank in <V143RB_2> & blank in <V143RB_3>

M010 FRM1 No rehab admission (V108, V143RC)
IF <V108> = 88888888 & <V109A> = 001 THEN <V143RC_1> must = 9 & blank in <V143RC_2> & blank in <V143RC_3>

M011 FRM1 No rehab admission (V108, V143RD)
IF <V108> = 88888888 & <V109A> = 001 THEN <V143RD_1> must = 9 & blank in <V143RD_2> & blank in <V143RD_3>

M012 FRM1 No rehab admission (V108, V143RE)
IF <V108> = 88888888 & <V109A> = 001 THEN <V143RE_1> must = 9 & blank in <V143RE_2> & blank in <V143RE_3>

M013 FRM1 No rehab admission (V108, V143RF)
IF <V108> = 88888888 & <V109A> = 001 THEN <V143RF_1> must = 9 & blank in <V143RF_2> & blank in <V143RF_3>

M014 FRM1 No rehab admission (V108, V143RG)
IF <V108> = 88888888 & <V109A> = 001 THEN <V143RG> & must = 99

M015 FRM1 No rehab admission (V108, V144)
IF <V108> = 88888888 THEN <V144AA> to <V144AL> & <V144AM> & <V144DA> to <V144DL> & <V144DLM> & <V144DM> must = 9

M016 FRM1 No rehab admission (V108, V144T)
IF <V108> = 88888888 THEN <V144AT> & <V144DT> must = 99

M017 FRM1 No rehab admission (V108, V148)
IF <V108> = 88888888 THEN there can be no <V149> = 1 with corresponding <V148> = 3 or 5

N001 FRM1 V123 x V124: working
IF <V123> = 1 & <INDATE1> is > 9/30/2001 THEN <V124> must not = 88
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N002 FRM1 V124 x V123: working
IF <V124> is < or = to 14 THEN <V123> must = 1 or 3 or 4

N003 FRM1 V123 x V124: not working
IF <V123> not = 1 or 3 or 4 or 9 & <INDATE1> is > 9/30/2001 THEN <V124> must = 88

N004 FRM1 V124 x V123: not working
IF <V124> = 88 THEN <V123> must not = 1

N005 FRM1 V123 x V124: unknown
IF <V123> = 9 THEN <V124> must = 99

P001 FRM1 FIM: died during rehab
IF <V145> = <V110> & <V120D> = 07 THEN <V144DA> to <V144DM> must = 9 & <V144DT> must = 99

P001 FRM2 FIM: no component unknown --> total = sum
IF all <V227A> to <V227M> (excluding <V227LM>) not = 9 THEN <V227T> must = the sum of all values in <V227A> to <V227M> (excluding <V227LM>; zero = one for calculation only)

P002 FRM1 FIM: Admit: no component unknown --> total = sum
IF all <V144AA> to <V144AM> (excluding <V144ALM>) not = 9 THEN <V144AT> must = the sum of all values in <V144AA> to <V144AM> (excluding <V144ALM>; zero = one for calculation only)

P002 FRM2 FIM: any component unknown --> total unknown
IF one or more of <V227A> to <V227M> (excluding <V227LM>) = 9 THEN <V227T> must = 99 & vice versa

P003 FRM1 FIM Admit: any component unknown --> total = unknown
IF one or more of <V144AA> to <V144AM> (excluding <V144ALM>) = 9 THEN <V144AT> must = 99 & vice versa

P003 FRM2 FIM: Locomotion mode – walking
IF <V227L> = 7 THEN <V227LM> must = 0

P004 FRM1 FIM Admit: Locomotion mode – walking
IF <V144AL> = 7 THEN <V144ALM> must = 0

P004 FRM2 FIM: Locomotion mode - unknown
IF <V227L> = 9 THEN <V227LM> must = 9

P005 FRM1 FIM Admit: Locomotion mode - unknown
IF <V144AL> = 9 THEN <V144ALM> must = 9

P006 FRM1 FIM Disch: no component unknown --> total = sum
IF all <V144DA> to <V144DM> (excluding <V144DLM>) not = 9 THEN <V144DT> must = the sum of all values in <V144DA> to <V144DM> (excluding <V144DLM>; zero = one for calculation only)

P007 FRM1 FIM Disch: any component unknown --> total unknown
IF one or more of <V144DA> to <V144DM> (excluding <V144DLM>) = 9 THEN <V144DT> must = 99 & vice versa

P008 FRM1 FIM Disch: Locomotion mode - walking
IF <V144DL> = 7 THEN <V144DLM> must = 0

P009 FRM1 FIM Disch: Locomotion mode - unknown
IF <V144DL> = 9 THEN <V144DLM> must = 9

P010 FRM1 FIM: age less than 006
IF <V111> is < 006 THEN <V144AA> to <V144AM> must = 9 & <V144AT> must = 99 & <V144DA> to <V144DM> must = 9 & <V144DT> must = 99

Q001 FRM1 V125 x V126: veteran
IF <V125> = 1 or 2 or 3 or 4 THEN <V126_1> must not = 8

Q001 FRM2 Rehospitalizations: none
IF <V218> = 0 THEN <V219> must = 000 & vice versa
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Q002 FRM2 V125 x V126: not a veteran
IF <V125> = 0 THEN <V126_1> must = 8 & vice versa

Q002 FRM2 Rehospitalizations: none
IF <V218> = 0 THEN <V217D_1> must = 000 & vice versa

Q003 FRM1 V126 x V125: veteran
IF <V126_1> is < or = to 5 THEN <V125> must = 1 or 2 or 3 or 4

Q003 FRM2 Rehospitalizations: none
IF <V217D_1> = 000 THEN <V219> must = 000 & vice versa

Q004 FRM1 V125 x V126: veteran unknown
IF <V125> = 9 THEN <V126_1> must = 9

Q004 FRM2 Rehospitalizations: some
IF <V218> = 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 THEN <V219> must be > or = 001 AND <V219> must be < or = 888 & vice versa

Q005 FRM2 Rehospitalizations: some
IF <V218> = 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 THEN <V217D_1> must be > or = 001 AND <V217D_1> must be < or = 888 & vice versa

Q006 FRM1 V126 x V127: VA services used
IF <V126_1> = 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 THEN <V127_1> must = 08 OR <V127_2> must = 08 OR <V127_3> must = 08 OR <V127_4> must = 08 OR <V127_5> must = 08

Q006 FRM2 Rehospitalizations: some
IF <V218> = 2 or 3 or 4 or 5 or 6 or 7 THEN <V217D_2> must be > or = 001 AND <V217D_2> must be < or = 888 & vice versa

Q007 FRM2 Rehospitalizations: some
IF <V218> = 3 or 4 or 5 or 6 or 7 THEN <V217D_3> must be > or = 001 AND <V217D_3> must be < or = 888 & vice versa

Q008 FRM2 Rehospitalizations: some
IF <V218> = 4 or 5 or 6 or 7 THEN <V217D_4> must be > or = 001 AND <V217D_4> must be < or = 888 & vice versa

Q009 FRM2 Rehospitalizations: some
IF <V218> = 5 or 6 or 7 THEN <V217D_5> must be > or = 001 AND <V217D_5> must be < or = 888 & vice versa

Q010 FRM2 Rehospitalizations: some
IF <V218> = 6 or 7 THEN <V217D_6> must be > or = 001 AND <V217D_6> must be < or = 888 and vice versa

Q011 FRM2 Rehospitalizations: some
IF <V218> = 7 THEN <V217D_7> must be > or = 001 AND <V217D_7> must be < or = 888 & vice versa

Q012 FRM2 Rehospitalizations: some
IF <V217D_8> is > or = 001 AND <V217D_8> is < or = 888 THEN <V218> must = 7

Q013 FRM2 Rehospitalizations: unknown
IF <V218> = 9 THEN <V219> must = 999 & vice versa

Q014 FRM2 Rehospitalizations: unknown
IF <V217D_1> = 999 and <Indate2> > 09/30/2000 THEN <V218> must = 9 & vice versa

Q015 FRM2 Rehospitalizations: unknown
IF <V217D_1> = 999 and <Indate2> > 09/30/2000 THEN <V219> must = 999

Q016 FRM2 Rehospitalizations: residence = hospitalized
IF <V203> = 02 THEN <V218> must = 1 or 2 or 3 or 4 or 5 or 6 or 7 or 8 AND <V219> must be > or = 001 AND <V219> must be < or = 888
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Q017 FRM2 Rehospitalizations: residence = hospitalized
IF <V203> = .02 THEN <V217D_1> must be > or = 001 AND <V217D_1> must be < or = 888

Q018 FRM2 Rehospitalizations: blanks
IF <V218> is < or = 1 THEN <V217D_2> to <V217D_8> must = blank

Q019 FRM2 Rehospitalizations: blanks
IF <V218> is < or = 2 THEN <V217D_3> to <V217D_8> must = blank

Q020 FRM2 Rehospitalizations: blanks
IF <V218> is < or = 3 THEN <V217D_4> to <V217D_8> must = blank

Q021 FRM2 Rehospitalizations: blanks
IF <V218> is < or = 4 THEN <V217D_5> to <V217D_8> must = blank

Q022 FRM2 Rehospitalizations: blanks
IF <V218> is < or = 5 THEN <V217D_6> to <V217D_8> must = blank

Q023 FRM2 Rehospitalizations: blanks
IF <V218> is < or = 6 THEN <V217D_7> to <V217D_8> must = blank

Q024 FRM2 Rehospitalizations: sum of days
IF [<V200> = 1,5,10,15,20,25,30 or 35 and <V201> <> 5 and <Indate2> > 11/30/2000 THEN <V219>
must = <V217D_1>+<D_2>+<D_3>+<D_4>+<D_5>+<D_6>+<D_7>+<D_8>. But, if any <V217D_1> to
<D_8> = 888 THEN V219 must = 888; or if any <V217D_1> to <D_8> = 999 (and no 888) THEN V219
must = 999]. OR [IF <V200> = 1,5,10,15,20,25,30 or 35 <V201> = 8 and <V244> = 7 and <Indate2> >
11/30/2000 THEN <V219> must = V217D_1+<D_2>+<D_3>+<D_4>+<D_5>+<D_6>+<D_7>+<D_8>. But, if any <V217D_1> to <D_8> = 888 THEN V219 must = 888; or if any <V217D_1> to <D_8> = 999
(and no 888) THEN V219 must = 999].

Q025 FRM2 Rehospitalizations: V219=888
IF <V219> = 888 and <Indate2> > 11/30/2000 THEN <V217D_1> must = 888 OR <V217D_2> must =
888 OR <V217D_3> must = 888 OR <V217D_4> must = 888 OR <V217D_5> must = 888 OR
<V217D_6> must = 888 OR <V217D_7> must = 888 OR <V217D_8> must = 888

Q026 FRM2 Rehospitalization cause
IF <V217D_1> = 000 THEN <V217R_1> must = 88 & vice versa

R001 FRM2 V224 x V225, V226: no or unknown interview
IF <V224> = 8 and <Indate2> > 09/30/2000 THEN V225 must = 9 AND V226 must = 9

R002 FRM2 V223 x V224: no interview done
IF <V223> = 88888888 THEN <V224> must = 8

R003 FRM2 V224 x V227: no or unknown interview
IF <V224> = 8 or 9 THEN <V227A> through <V227M> must = 9 AND <V227T> must = 99

R004 FRM2 V224 x V228: no or unknown interview
IF <V224> = 8 or 9 THEN <V228_1> through <V228_5> must = 9 AND <V228T> must = 99

R005 FRM2 V227T x V224: valid total --> interview done
IF NOT blanks in <V227T> AND <V227T> not = 99 THEN <V224> must = 1 or 2 or 3 or 4

R006 FRM2 V228T x V224: valid total --> interview done
IF NOT blanks in <V228T> AND <V228T> not = 99 THEN <V224> must = 1 or 2 or 3 or 4

R008 FRM2 V228: no component unknown --> total = sum
IF <V228_1> not = 9 AND <V228_2> not = 9 AND <V228_3> not = 9 AND <V228_4> not = 9 AND
<V228_5> not = 9 THEN <V228T> must = <V228_1> + <V228_2> + <V228_3> + <V228_4> +
<V228_5>

R009 FRM2 V228: any component unknown --> total unknown
IF <V228_1> = 9 OR <V228_2> = 9 OR <V228_3> = 9 OR <V228_4> = 9 OR <V228_5> = 9 THEN
<V228T> must = 99 & vice versa

R012 FRM2 V229 x V224: any valid subtotal --> interview done
IF all <V229_20> to <V229_T> not = blanks and all <V229_20> to <V229_T> not = 999 THEN <V224>
must = 1 or 2 or 3 or 4
R013 FRM2  V224 x V229: no or unknown interview
IF \(<V224> = 8\) or \(9\) THEN \(<V229_{1A}, V229_{1B}, V229_{4}, V229_{7} to V229_{12}, V229_{14} to V229_{15} must = 99\) OR blanks in every variable from \(<V229_{1A}>\) to \(<V229_{T}>\)

R014 FRM2  V229_{12} x V229_{14}
IF \(<V229_{12}> \neq \) blank AND \(<V229_{14}> \neq 99\) or \(88\) or blank THEN \(<V229_{14}> must be \(<\) or \(\geq\) to \(<V229_{12}>\)

R015 FRM2  V229_{12} x V229_{14}; lives alone
IF \(<V229_{12}> = 00\) THEN \(<V229_{14}> must = 88\) & vice versa

R016 FRM2  V229_{13} x V229_{14}; lives alone
IF \(<V229_{13}> = 08\) THEN \(<V229_{14}> must = 88\) & vice versa

R017 FRM2  V229_{12} x V229_{13}; lives alone
IF \(<V229_{12}> = 00\) THEN \(<V229_{13}> must = 8\) & vice versa

R018 FRM2  V206 x V229_{8}; student
IF \(<V206> = 6\) and \(<\text{Indate2}> > 11/30/1995\) THEN \(<V229_{8}> must be \(> 00\) OR \(<V229_{8}> must = \) blank

R019 FRM2  V206 x V229_{9}; homemaker
IF \(<V206> = 2\) and \(<\text{Indate2}> > 11/30/1995\) THEN \(<V229_{9}> must be \(> 00\) OR \(<V229_{9}> must = \) blank

R020 FRM2  V206 x V229_{7}; not employed
IF \(<V206> = 5\) or \(7\) and \(<\text{Indate2}> > 09/30/2000\) and \(<V223> \leq 88888888\) and \(<\geq 99999999\) THEN \(<V229_{7}> must = 00\) OR \(<V229_{7}> must = \) blank

R021 FRM2  V206 x V229_{7}; employed
IF \(<V206> = 1\) and \(<\text{Indate2}> > 11/30/1995\) THEN \(<V229_{7}> must be \(> 00\) OR \(<V229_{7}> must = \) blank

R024 FRM2  CHART: Physical Independence Total
\(<V229_{20}> must = \) the result determined by the calculate function in the data entry program

R025 FRM2  CHART: Cognitive Independence Total
\(<V229_{21}> must = \) the result determined by the calculate function in the data entry program

R026 FRM2  CHART: Mobility Total
\(<V229_{22}> must = \) the result determined by the calculate function in the data entry program

R027 FRM2  CHART: Occupation Total
\(<V229_{23}> must = \) the result determined by the calculate function in the data entry program

R028 FRM2  CHART: Social Integration
\(<V229_{24}> must = \) the result determined by the calculate function in the data entry program

R029 FRM2  CHART: Economic Self-sufficiency
\(<V229_{25}> must = \) the result determined by the calculate function in the data entry program

R030 FRM2  CHART: Total
\(<V229_{T}> must = \) the result determined by the calculate function in the data entry program

S001 FRM1  V127 x V128, V129: Self-pay
IF \(<V127_1> = 07\) THEN \((<V128_1> must = 1\) OR \(<V128_1> must = 9\) AND \(<\text{INDATE1}> must be \(<02/01/1996))\) & \(<V129> must = 8\)

S001 FRM2  V230 x V224: no or unknown interview
IF \(<V224> = 8\) or \(9\) THEN \(<V230_{12}> must = 99\) AND \(<V230_{13}> to \(<V230_{T}> must = 9.99\)
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S002 FRM1 V127 x V128, V129: Indigent
If <V127_1> = 11 THEN <V128_1> must = 0 & <V129> must = 8

S002 FRM2 V230 x V224: interview done
If <Indate2> > 09/30/2000 and [(all <V230_1> to <V230T> not = blank) AND (all <V230_1> to <V230_12A> not = 9 and all <V230_13> to <V230T> not = 9.99)] THEN <V224> must = 1 or 2 or 3 or 4

S003 FRM1 V127 x V128, V129: Unknown
If <V127_1> = 99 THEN <V128_1> must = 9 & <V129> must = 9

S003 FRM2 V230_7 x V230_9
If <V230_7> = 8 THEN <V230_7A> must = 8 AND <V230_9> must = 8 AND <V230_9A> must = 8 AND <V230_15> must = 8.88

S004 FRM1 Workers comp & work related injury
If any <V127_1> to <V127_5> = 04 & <INDATE1> is > 9/30/2001 THEN <V119> must = 1

S004 FRM2 V230_7 x V230_9
If <V230_7A> = 8 THEN <V230_7> must = 8 AND <V230_9> must = 8 AND <V230_9A> must = 8 AND <V230_15> must = 8.88

S005 FRM1 Workers comp & employment status
If any <V127_1> to <V127_5> = 04 THEN <V123> must = 1 or 3 or 4

S005 FRM2 V230_7 x V230_9
If <V230_9> = 8 THEN <V230_7> must = 8 AND <V230_7A> must = 8 AND <V230_9A> must = 8 AND <V230_15> must = 8.88

S007 FRM2 V206 x V230_7, V230_9: employed or at school
If <V206> = 1 or 3 or 4 or 6 and <Indate2> > 09/30/2000 and <V223> <> 88888888 and <> 99999999 THEN <V230_7> must not = 8 AND <V230_7A> must not = 8 AND <V230_9> must not = 8 AND <V230_9A> must not = 8 AND <V230_9A> must not = 8 AND <V230_15> must not = 8.88

S008 FRM2 V206 x V230_7, V230_9: not employed and not at school
If <V206> = 2 or 5 or 7 and <Indate2> > 09/30/2000 and <V223> <> 88888888 and <> 99999999 THEN <V230_7> must = 8 AND <V230_7A> must = 8 AND <V230_9> must = 8 AND <V230_9A> must = 8 AND <V230_15> must = 8.88

S009 FRM2 CHIEF: Policies Total
<V230_13> must = the result determined by the calculate function in the data entry program

S010 FRM2 CHIEF: Physical/Independence Total
<V230_14> must = the result determined by the calculate function in the data entry program

S011 FRM2 CHIEF: Work/School Total
<V230_15> must = the result determined by the calculate function in the data entry program

S012 FRM2 CHIEF: Attitudes/Support Total
<V230_16> must = the result determined by the calculate function in the data entry program

S013 FRM2 CHIEF: Services/Assistance Total
<V230_17> must = the result determined by the calculate function in the data entry program

S014 FRM2 CHIEF: Total
<V230T> must = the result determined by the calculate function in the data entry program

S015 FRM2 CHIEF: V230_1 x V230_1A
If <V230_1> = 0 THEN <V230_1A> must = 0 & vice versa

S016 FRM2 CHIEF: V230_2 x V230_2A
If <V230_2> = 0 THEN <V230_2A> must = 0 & vice versa

S017 FRM2 CHIEF: V230_3 x V230_3A
If <V230_3> = 0 THEN <V230_3A> must = 0 & vice versa

S018 FRM2 CHIEF: V230_4 x V230_4A
If <V230_4> = 0 THEN <V230_4A> must = 0 & vice versa
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S019 FRM2 CHIEF: V230_5 x V230_5A
IF <V230_5> = 0 THEN <V230_5A> must = 0 & vice versa

S020 FRM2 CHIEF: V230_6 x V230_6A
IF <V230_6> = 0 THEN <V230_6A> must = 0 & vice versa

S021 FRM2 CHIEF: V230_7 x V230_7A
IF <V230_7> = 0 THEN <V230_7A> must = 0 & vice versa

S022 FRM2 CHIEF: V230_8 x V230_8A
IF <V230_8> = 0 THEN <V230_8A> must = 0 & vice versa

S023 FRM2 CHIEF: V230_9 x V230_9A
IF <V230_9> = 0 THEN <V230_9A> must = 0 & vice versa

S024 FRM2 CHIEF: V230_10 x V230_10A
IF <V230_10> = 0 THEN <V230_10A> must = 0 & vice versa

S025 FRM2 CHIEF: V230_11 x V230_11A
IF <V230_11> = 0 THEN <V230_11A> must = 0 & vice versa

S026 FRM2 CHIEF: V230_12 x V230_12A
IF <V230_12> = 0 THEN <V230_12A> must = 0 & vice versa

S027 FRM2 CHIEF: V230_1 x V230_1A
IF <V230_1> = 1 or 2 or 3 or 4 THEN <V230_1A> must = 1 or 2 or 9

S028 FRM2 CHIEF: V230_2 x V230_2A
IF <V230_2> = 1 or 2 or 3 or 4 THEN <V230_2A> must = 1 or 2 or 9

S029 FRM2 CHIEF: V230_3 x V230_3A
IF <V230_3> = 1 or 2 or 3 or 4 THEN <V230_3A> must = 1 or 2 or 9

S030 FRM2 CHIEF: V230_4 x V230_4A
IF <V230_4> = 1 or 2 or 3 or 4 THEN <V230_4A> must = 1 or 2 or 9

S031 FRM2 CHIEF: V230_5 x V230_5A
IF <V230_5> = 1 or 2 or 3 or 4 THEN <V230_5A> must = 1 or 2 or 9

S032 FRM2 CHIEF: V230_6 x V230_6A
IF <V230_6> = 1 or 2 or 3 or 4 THEN <V230_6A> must = 1 or 2 or 9

S033 FRM2 CHIEF: V230_7 x V230_7A
IF <V230_7> = 1 or 2 or 3 or 4 THEN <V230_7A> must = 1 or 2 or 9

S034 FRM2 CHIEF: V230_8 x V230_8A
IF <V230_8> = 1 or 2 or 3 or 4 THEN <V230_8A> must = 1 or 2 or 9

S035 FRM2 CHIEF: V230_9 x V230_9A
IF <V230_9> = 1 or 2 or 3 or 4 THEN <V230_9A> must = 1 or 2 or 9

S036 FRM2 CHIEF: V230_10 x V230_10A
IF <V230_10> = 1 or 2 or 3 or 4 THEN <V230_10A> must = 1 or 2 or 9

S037 FRM2 CHIEF: V230_11 x V230_11A
IF <V230_11> = 1 or 2 or 3 or 4 THEN <V230_11A> must = 1 or 2 or 9

S038 FRM2 CHIEF: V230_12 x V230_12A
IF <V230_12> = 1 or 2 or 3 or 4 THEN <V230_12A> must = 1 or 2 or 9

T002 FRM2 BHQ: no depression
IF <V231_10> = 8 THEN <V231_1> to <V231_9> must = 0 & vice versa

T003 FRM2 BHQ: major depressive syndrome
IF (<V200> = 1,5,10,15,20,25,30 or 35 and <V210> <> 5 THEN <V231M> must = the result determined by the calculate function in the data entry program) OR (IF <V200> <> 1,5,10,15,20,25,30 or 35 and <V201> = 8 and <V244> = 7 THEN <V231M> must = the result determined by the calculate function in the data entry program).

T004 FRM2 BHQ: severity of depression
<V231S> must = the result determined by the calculate function in the data entry program
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T005 FRM2 BHQ: no interview
IF <V224> = 8 THEN <V231_1> to <V231M> must = 9 AND <V231S> must = 99

T006 FRM2 BHQ: interview done
IF NOT blanks in every variable from <V231_1> to <V231S> AND NOT every variable from <V231_1>
to <V231M> = 9 THEN <V224> must = 1 or 2 or 3 or 4

U003 FRM2 Pain: V238 x V239
IF<Indate2> > 09/30/2000 and <V238> = 00 THEN <V239> must = 8 & vice versa

U004 FRM2 Alcohol: no alcohol use
IF <V233> = 0 THEN <V234> must = 8 AND <V235> must = 88 AND <V236> must = 88 AND 
<V237_1> through <V237T> must = 8

U005 FRM2 CAGE Total
<V237T> must = the result determined by the calculate function in the data entry program

U006 FRM2 Drug abuse: no interview
IF <V224> = 8 THEN <V232_1> must = 9

U007 FRM2 Drug abuse: interview done
IF <V232_1> not blank AND <V232_1> not = 9 THEN <V224> must = 1 or 2 or 3 or 4

U008 FRM2 Alcohol/CAGE: no interview
IF <V224> = 8 THEN <V233> to <V234> must = 9 AND <V235> to <V236> must = 99 AND <V237_1>
to <V237T> must = 9

U009 FRM2 Alcohol/CAGE: interview done
IF NOT blanks in every variable from <V233> to <V234> to <V237T> AND NOT every variable from <V233> to 
<V234> = 9 AND NOT every variable from <V235> to <V236> = 99 AND NOT every variable from 
<V237_1> to <V237T> = 9 THEN <V224> must = 1 or 2 or 3 or 4

U010 FRM2 Pain: no interview
IF <V224> = 8 THEN <V238> must = 99 AND <V239> must = 9

U011 FRM2 Pain: interview done
IF NOT blanks in every variable from <V238> through <V239> AND <V238> not = 99 AND <V239> not 
= 9 THEN <V224> must = 1 or 2 or 3 or 4

V001 FRM2 Ambulatory no
If <V250A> and <V250B> and <V250C> = 0 then, <V251_1> must = 8 and <V251_2> through 
<V251_5> must = blank.

V002 FRM2 Ambulatory unknown
If <V250A>, <V250B> and <V250C> = 9 then, <V251> must = 9 and <V251_2> through <V251_5> must 
= blank.

V003 FRM2 Mobility aids no, not app, unknown
If <V251_1> = 0, 8 or 9 then, <V251_2> through <V251_5> must = blank.

V004 FRM2 Wheelchair/scooter no
IF <V252> = 0 THEN, <V253> = 8 and <V254A> = 88 and <V254B> = 888 and <V255> = 88 and 
<V256_1> = 8 and blank in <V256_2> to <V256_6> and <V257> = 8 and <V258_1> = 8 and <V258_2>
to <V258_4> = blank and <V259A> = 88 and <V259B> = 88 and <V259C> = 88 and <V259D> = 88 and 
<V259E> = 88.

V005 FRM2 Wheelchair/scooter unknown
IF <V252> = 9 THEN, <V253> = 9 and <V254A> = 99 and <V254B> = 999 and <V255> = 99 and 
<V256_1> = 9 and blank in <V256_2> to <V256_6> and <V257> = 99 and <V258_1> = 9 and <V258_2>
to <V258_4> = blank and <V259A> = 99 and <V259B> = 99 and <V259C> = 99 and <V259D> = 99 and 
<V259E> = 99.

V006 FRM2 Manual wheelchair
If <V253> = 1 then, <V254B> must = 100 to 155 or 777 or 999
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V007 FRM2 Power wheelchair
If <V253> = 2 then, <V254B> must = 200 to 292 or 777 or 999.

V007A FRM2 Power assist wheelchair
If <V253> = 3 then, <V254B> must = 400 or 401 or 777 or 999.

V008 FRM2 Scooter
If <V253> = 4 then, <V254B> must = 500 to 517 or 777 or 999.

V009 FRM2 Manufacturer/Models Invacare
If <V254A> = 01 then, <V254B> must = 100 to 116 or 200 to 219 or 500 or 501 or 777 or 999.

V010 FRM2 Manufacturer/Models Sunrise
If <V254A> = 02 then, <V254B> must = 117 to 135 or 220 to 238 or 777 or 999.

V011 FRM2 Manufacturer/Models Pride Health Care
If <V254A> = 03 then, <V254B> must = 239 to 278 or 502 to 517 or 777 or 999.

V012 FRM2 Manufacturer/Models Permobil/Colours
If <V254A> = 04 then, <V254B> must = 136 to 144 or 279 to 291 or 777 or 999.

V013 FRM2 Manufacturer/Models Everest & Jennings
If <V254A> = 05 then, <V254B> must = 145 to 148 or 292 or 777 or 999.

V013A FRM2 Manufacturer/Models Tisport
If <V254A> = 06 then, <V254B> must = 149 to 155 or 777 or 999.

V013B FRM2 Manufacturer/Models Frank Mobility
If <V254A> = 07 then, <V254B> must = 400 or 401 or 777 or 999.

V014 FRM2 Models/Manufacturer Invacare
If <V254B> = 100 to 116 or 200 to 219 or 500 or 501 then, <V254A> must = 01.

V015 FRM2 Models/Manufacturer Sunrise
If <V254B> = 117 to 135 or 220 to 238 then, <V254A> must = 02.

V016 FRM2 Models/Manufacturer Pride Health Care
If <V254B> = 239 to 278 or 502 to 517 then, <V254A> must = 03.

V017 FRM2 Models/Manufacturer Permobil
If <V254B> = 136 to 144 or 279 to 291 then, <V254A> must = 04.

V018 FRM2 Models/Manufacturer Everest & Jennings
If <V254B> = 145 to 148 or 292 then, <V254A> must = 05.

V018A FRM2 Models/Manufacturer Tisport
If <V254B> = 149 to 155 then, <V254A> must = 06.

V018B FRM2 Models/Manufacturer Frank Mobility
If <V254B> = 400 or 401 then, <V254A> must = 07.

V019 FRM2 Features none/unknown
If <V256_1> = 0 or 9 then, <V256_2> through <V256_6> must = blank.

V020 FRM2 Repairs none
If <V257> = 00 then, <V258_1> must <> 0.

V021 FRM2 Repairs unknown
If <V257> = 99 then, <V258_1> must = 9 and <V258_2> to <V258_4> must = blank.

V022 FRM2 Repairs not applicable
If <V258_1> = 8 then, <V252> must = 0 OR <V257> must = 00

V023A FRM2 Repairs, reasons V258_1
If <V258_1> = 0, 1, 2, 3 or 4 then, <V257> must not = 88 or 99.

V023B FRM2 Repairs, reasons V258_2
If <V258_2> = 1, 2, 3 or 4 then, <V257> must not = 88 or 99.
V023C  FRM2 Repairs, reasons V258_3
If <V258_1> = 1, 2, 3 or 4 then, <V257> must not = 88 or 99.

V023D  FRM2 Repairs, reasons V258_4
If <V258_4> = 1, 2, 3 or 4 then, <V257> must not = 88 or 99.

V024  FRM2 Computer use, none
If <V260> = 0 then, <V261_1> = 88 and <V261_2> to <V261_10> = blank and <V262> = 8 and <V263_1> = 8 and <V263_2> and <V263_3> = blank and <V264A> = 8 and <V264B> = 8 and <V264C> = 8 and <V264D> = 8 and <V264E> = 8.

V025  FRM2 Computer use, unknown
If <V260> = 9 then, <V261_1> = 99 and <V261_2> to <V261_10> = blank and <V262> = 9 and <V263_1> = 9 and <V263_2> and <V263_3> = blank and <V264A> = 9 and <V264B> = 9 and <V264C> = 9 and <V264D> = 9 and <V264E> = 9.

V026  FRM2 Computer devices, none
If <V261_1> = 00 or 99 then, <V261_2> to <V261_10> must = blank.

V026A  FRM2 Devices Not Applicable Computer Use No
If <V261_1> = 88 then, <V260> must = 0.

V027  FRM2 Internet/Email usage, none
If <V262> = 0 then, <V263_1> must = 8 and <V263_2> and <V263_3> must = blank and <V264A> must = 8 and <V264B> must = 8 and <V264C> must = 8 and <V264D> must = 8 and <V264E> must = 8 and <V264F> must = 8.

V028  FRM2 Internet/Email usage, unknown
If <V262> = 9 then, <V263_1> must = 9 and <V263_2> and <V263_3> must = blank and <V264A> must = 9 and <V264B> must = 9 and <V264C> must = 9 and <V264D> must = 9 and <V264E> must = 9 and <V264F> must = 9.

V029  FRM2 Location internet/email usage, not app, unknown
If <V263_1> = 8 or 9, <V263_2> and <V263_3> must = blank.

V030  FRM2 Modified vehicle, no
If <V265> = 0 then, <V266> must = 8.

V031  FRM2 Modified vehicle, unknown
If <V265> = 9 then, <V266> must = 9.

V032  FRM2 No blanks in V250A through V267

V033  FRM2 Lost

W001  FRM2 V206 x V207: not working
If <Indate1> > 09/30/2000 and <V206> = 2 or 5 or 6 or 7 or 8 THEN <V207> must = 88 & vice versa.

W002  FRM2 V206 x V207: working
If <V206> = 1 or 3 or 4 THEN <V207> must not = 88.
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W003 FRM2 V206 x V207: unknown
IF <V206> = 9 THEN <V207> must = 99

Z001 FRM1 Patient ineligible: > 1 year injury to admit
IF [<V107> is < or = to 12/31/1986 OR <V107> is > 9/30/2000] & <V109A> is > 366 then this patient is not eligible for full data collection (Form I & Form II); please delete all records for this patient

Z001 FRM2 V203 nursing home: V220
IF <V203> = 03 THEN <V220> must not = 000 AND <V220> must not = 999

Z001 REG Patient ineligible: admitted before 01/01/87
IF <V107> is < 01/01/1987 THEN This patient is ineligible for the National SCI Database as a Registry patient; please delete.

Z002 FRM1 Patient ineligible: > 60 days injury to admit
IF <V107> is > 12/31/1986 &<V107> is < 10/1/2000 & <V109A> is > 60 then This patient is not eligible for Form I & Form II; please delete all records for this patient

Z002 FRM2 V214 x V216: Self-pay
IF <V214_1> = 07 THEN <V216> must = 8

Z002 REG Patient ineligible: > 1 year injury to admit
IF the number of days between <V106> and <V107> is > 366 THEN This patient is not eligible for the National Database; please delete.

Z003 FRM1 Patient ineligible: hospitalized < 1 week
IF <V108> = 88888888 & <V163A> is < or = to 0007 & <V110> not = <V145> & <V107> is < 10/1/2000 then This patient is not eligible for the National Database; please delete all records for this patient

Z003 FRM2 V214 x V215, V216: Indigent
IF <V214_1> = 11 THEN <V215_1> must = 0 AND <V216> must = 8

Z004 FRM1 Patient ineligible: no deficit at admission
IF <V131A> = 7 OR (<V136AL> = X00 & <V136AR> = X00) OR <V132A> = E or 4 then This patient is not eligible for the National Database; please delete all records for this patient

Z004 FRM2 V214 x V216: Unknown
IF <V214_1> = 99 THEN <V216> must = 9

Z006 FRM2 V211 annual exam not done or unknown: V212, V213
IF <V211> = 88888888 THEN <V212> must = 9 AND <V213> must = 99

Z007 FRM2 V211 annual exam not done or unknown: V246
IF (<V211> = 88888888 AND <Indate2> > 10/01/1986) AND <V246T> NOT blank THEN <V246AL> to <V246JE> AND <V246AR> to <V246JR> must = 9 AND <V246L> AND <V246R> must = 99 AND <V246T> must = 999

Z008 FRM2 V201 data collection only
IF <V201> = 4 THEN (<V211> must = 88888888 or 99999999) & <V212> & <V244> & <V246AL> to <V246JE> & <V246AR> to <V246JR> must = 9 & <V245> must = 9 or U & <V213> & <V246L> & <V246R> must = 99 & <V246T> must = 999 & <V247L> to <V249R> must = X99

Z009 FRM2 V246T x V211: valid score --> valid date
IF <V246T> not = 888 AND <V246T> not = 999 AND NOT blanks in <V246T> THEN there must be a valid date in <V211>

Z010 FRM2 V240B x V240C: no outpatient rehab
IF <V240B> = 0 THEN <V240C> must = 8 & vice versa

Z011 FRM2 V241B x V241C: no outpatient counseling
IF <V241B> = 0 THEN <V241C> must = 8 & vice versa