



EHR Variables

	Data Item	Emergency Department Visits	Inpatient Discharges	Outpatient Visits	Meaningful Use Data Element
Personal Identifiable Information	Patient Name	R	R	R	✓
	Patient Address including zip code	R	R	R	
	Patient SSN and Medicare number	R	R	R	
	Patient medical record number	R	R	R	
Patient Information	Date of birth	R	R	R	✓
	Sex	R	R	R	✓
	Race	R	D	R	✓
	Ethnicity	R	D	R	✓
	Height		D		✓
	Weight		D		✓
	Marital Status		D		
	Tobacco use			D	✓
	If female, is patient pregnant and gestation week			D	
	If patient has asthma: Asthma Severity (intermittent, mild persistent...severe persistent)			D	
	If patient has asthma: Asthma Control (well controlled...very poorly controlled)			D	
Encounter Information	Encounter number	R	R	R	
	Date of admission		R		✓
	Date of visit			R	✓
	Date and time of arrival	R			✓
	Date and time of provider contact	R			

R = Required

D = Desired

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Encounter Information (cont'd)	Date and time of departure/discharge	R	R		✓
	Date and time of departure/discharge	R	R		✓
	Date and time of admission order	R			
	Source(s) of payment	R	D	R	
Dx Information	Admission diagnosis		R	R	✓
	All (other) diagnoses including E codes and V codes	R	R	R	✓
Admission, Discharge, and Notes	Priority of admission		R		
	Source of admission (e.g. emergency room)		R		
	All reason(s) for visit and/or Chief Complaint	R		R	✓
	Present on Admission (POA) flags for diagnoses		R		✓
	Any ICU, NICU or CCU use and number of days of care		D		
	Clinician notes (e.g., physicians', nurses', P.A.s', N.P.s' and C.N.M.s' notes)	R	D	D	
	Discharge disposition (Return appointment, Referred, Routine discharge (if surgery), Admitted to ED/hospital, etc.)	R	R	R	
Orders, Observations and Medications	Provided or Ordered Diagnostic testing (e.g., lab, imaging, EKG, audiometry, biopsy)	R	R	R	✓
	Provided or Ordered Therapeutic procedures, including surgery, and non-medication treatments (e.g. physical therapy, speech therapy, home health care)	R	R	R	✓
	Results of testing or procedures provided or ordered during the admission, as many as are available	R	R	R	✓
	Medications on admission, during hospital stay and at discharge	R	R	R	

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Care Providers	NPIs of physicians	D	D	D	
	Health care providers seen (including attending, resident, intern, N.P., P.A., consulting, specialist(s), Nurse, mental health providers, social workers)			D	
	Is this provider the patient's primary care provider or was patient referred for visit			D	
Clinic	Type of clinic/location where visit occurred (family practice, cardiology, etc.)			D	
	Has patient been seen in clinic/ location before			D	
	If yes, how many visits in previous 12 months (excluding this visit)			D	
Detailed Observations	Vital signs (height, weight, blood pressure, temperature)			D	✓
	Vital signs on arrival and last taken (temperature, pulse, respiratory rate, blood pressure, pulse oximetry)	D			
	Most recent results and dates blood drawn for Total cholesterol			R	
	Most recent results and dates blood drawn for HDL			R	
	Most recent results and dates blood drawn for LDL			R	
	Most recent results and dates blood drawn for Triglycerides			R	
	Most recent results and dates blood drawn for HbA1c			R	
	Most recent results and dates blood drawn for Blood glucose			R	
	Most recent results and dates blood drawn for Serum creatinine			R	
	Immunizations - previous and administered	R		R	✓
	Active problems	R		R	
	Pain level	D			

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Detailed Observations (cont'd)	Is this visit for a new problem, chronic problem (routine or flare-up), preventive care, pre-/post-surgery, surgery/procedure			D	
	If injury, cause and intentionality			D	
ED Visit Details	Was patient triaged and if so, triage level	R			
	Mode of arrival (e.g., ambulance, police transport)	R			
	Was patient transferred from another hospital or urgent care facility	D			
	Has patient been seen in this ED within last 72 hours and discharged	D			
	Initial or follow-up visit	D			
Out Patient Surgery	Date and time Surgery/Procedure began and ended			D	
	Provider(s) of anesthesia (e.g. anesthesiologist, CRNA, resident, surgeon)			D	
	Symptom(s) present during or after surgery/procedure			D	
	Any follow-up with patient within 24 hours and outcome			D	
ED Disposition to Observation	If admitted to observation unit, Dates and times (ED discharge, observation unit discharge)	D			
ED admit to Hospital	Date and time bed requested for hospital admission	D			
	If admitted to hospital, Specialty of admitting physician (e.g., hospitalist)	D			
	If admitted to hospital, Type of unit admitted to	D			
	If admitted to hospital, Hospital discharge date	D			
	If admitted to hospital, Hospital discharge diagnosis	D			
	If admitted to hospital, Hospital discharge disposition	D			