

Itemized List of OASIS-E1 Data Elements

<i>Item</i>	<i>Description</i>	<i>SOC</i>	<i>ROC</i>	<i>FU</i>	<i>TOC</i>	<i>DAH</i>	<i>DC</i>
M0018	National Provider Identifier (NPI)	1	0	0	0	0	0
M0010	CMS Certification Number	1	0	0	0	0	0
M0014	Branch State	1	0	0	0	0	0
M0016	Branch ID Number	1	0	0	0	0	0
M0020	Patient ID Number	1	0	0	0	0	0
M0030	Start of Care Date	1					
M0032	Resumption of Care Date		1				
M0040	Patient Name	1	0	0	0	0	0
M0050	Patient State of Residence	1	0	0	0	0	0
M0060	Patient ZIP Code	1	0	0	0	0	0
M0064	Social Security Number	1	0	0	0	0	0
M0063	Medicare Number	1	0	0	0	0	0
M0065	Medicaid Number	1	0	0	0	0	0
M0069	Gender	1	0	0	0	0	0
M0066	Birth Date	1	0	0	0	0	0

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A1005	Ethnicity	1	0				0
A1010	Race	6	0				0
M0150	Current Payment Sources for Home Care	8	0	0	0	0	0
A1110	Language	1	0				0
M0080	Discipline of Person Completing Assessment	1	1	1	1	1	1
M0090	Date Assessment Completed	1	1	1	1	1	1
M0100	This Assessment is Currently Being Completed for the Following Reason	1	1	1	1	1	1
M0906	Discharge/Transfer/ Death Date				1	1	1
M0102	Date of Physician-ordered Start of Care (Resumption of Care)	1	1				
M0104	Date of Referral	1	1				
A1250	Transportation	1	1				1
M1000	Inpatient Facilities from which the patient was discharged within the past 14 days?	7	7				
M1005	Inpatient Discharge Date	1	1				
M2301	Emergent Care				1		1
M2310	Reason for Emergent Care				3		3

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M2410	To which Inpatient Facility has the patient been admitted?				1		1
M2420	Discharge Disposition						1
A2120	Provision of Current Reconciled Medication List to Subsequent Provider at Transfer				1		
A2121	Provision of Current Reconciled Medication List to Subsequent Provider at Discharge						1
A2123	Provision of Current Reconciled Medication List to Patient at Discharge						1
A2122	Route of Current Reconciled Medication List Transmission to Subsequent Provider				0		
A2124	Route of Current Reconciled Medication List to Transmission to Patient						0
B0200	Hearing	1	0				0
B1000	Vision	1	0				0
B1300	Health Literacy	1	1				1
C0100	Should Brief Interview for Mental Status (C0200-C0500) be Conducted?	1	1				1
C0200	Repetition of Three Words	1	1				1

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C0300	Temporal Orientation	3	3				3
C0400	Recall	3	3				3
C0500	BIMS Summary Score	1	1				1
C1310	Signs and Symptoms of Delirium (from CAM©)	4	4				4
M1700	Cognitive Functioning	1	1				1
M1710	When Confused (Reported or Observed Within the Last 14 Days)	1	1				1
M1720	When Anxious (Reported or Observed Within the Last 14 Days)	1	1				1
D0150	Patient Mood Interview PHQ-2 to 9	9	9				9
D0160	Total Severity Score	0	0				0
D0700	Social Isolation	1	1				1
M1740	Cognitive, behavioral, and psychiatric symptoms that are demonstrated at least once a week (Reported or Observed)	6	6				6
M1745	Frequency of Disruptive Behavior Symptoms (Reported or Observed)	1	1				1
M1100	Patient Living Situation	1	1				
M2102	Types and Sources of Assistance	1	1				4

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M1800	Grooming	1	1	1			1
M1810	Ability to Dress Upper Body	1	1	1			1
M1820	Ability to Dress Lower Body	1	1	1			1
M1830	Bathing: Excludes grooming (washing face, washing hands, and shampooing hair).	1	1	1			1
M1840	Toilet Transferring	1	1	1			1
M1845	Toileting Hygiene	1	1				1
M1850	Transferring	1	1	1			1
M1860	Ambulation/Locomotion	1	1	1			1
GG 0100	Prior Functioning: Everyday Activities	4	4				
GG 0110	Prior Device Use	5	5				
GG 0130A	Eating	1	1	1			1
GG 0130B	Oral hygiene	1	1	1			1
GG 0130C	Toilet hygiene	1	1	1			1
GG 0130E	Shower/bathe self	1	1	1			1
GG 0130F	Upper body dressing	1	1	1			1

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GG 0130G	Lower body dressing	1	1	1			1
GG 0130H	Putting on/taking off footwear	1	1	1			1
GG 0170A	Roll left and right	1	1	1			1
GG 0170B	Sit to lying	1	1	1			1
GG 0170C	Lying to sitting	1	1	1			1
GG 0170D	Sit to stand	1	1	1			1
GG 0170E	Chair/bed-to-chair transfer	1	1	1			1
GG 0170F	Toilet transfer	1	1	1			1
GG 0170G	Car transfer	1	1	1			1
GG 0170I	Walk 10 feet	1	1	1			1
GG 0170J	Walk 50 feet with two turns	1	1	1			1
GG 0170K	Walk 150 feet	1	1	1			1
GG 0170L	Walking 10 feet on uneven surfaces	1	1	1			1
GG 1070M	1 step (curb)	1	1	1			1
GG 0170N	4 steps	1	1	1			1
GG 0170O	12 steps	1	1	1			1

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GG 0170P	Pick up object	1	1				1
GG 0170Q	Does patient use wheelchair and/or scooter?	1	1	1			1
GG 0170R	Wheel 50 feet with two turns	1	1	1			1
GG 0170RR	Type of wheelchair or scooter	1	1				1
GG 0170S	Wheel 150 feet	1	1	1			1
GG 0170SS	Type of wheelchair or scooter	1	1				1
M1600	Has this patient been treated for a Urinary Tract Infection in the past 14 days?	1	1				1
M1610	Urinary Incontinence or Urinary Catheter Presence	1	1				
M1620	Bowel Incontinence Frequency	1	1				1
M1630	Ostomy for Bowel Elimination	1	1				
M1021	Primary Diagnosis, ICD-10-CM and Symptom Control Rating	2	2				
M1023	Other Diagnosis, ICD-10-CM and Symptom Control Rating	10	10				
M1028	Active Diagnoses – Comorbidities and Co-existing Conditions	2	2				
M1033	Risk for Hospitalization	9	9	9			
J0510	PAIN: Pain Effect on sleep	1	1				1

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J0520	PAIN: Pain Interference with therapy	1	1				1
J0530	PAIN: Pain Interference with activities (replace M1242)	1	1				1
J1800	Any Falls Since SOC/ROC				1	1	1
J1900	Number of Falls Since SOC/ROC				3	3	3
M1400	When is the patient dyspneic or noticeably Short of Breath?	1	1				1
M1060	Height and Weight	2	2				
K0520A	NUTRITION: Parenteral/IV feeding	1	1				1
K0520B	NUTRITION: Feeding tube	1	1				1
K0520C	NUTRITION: Mechanically altered diet	1	1				1
K0520D	NUTRITION: Therapeutic diet	1	1				1
K0520Z	NUTRITION: None of the above	0	0				0
M1870	Feeding or Eating	1	1				1
M1306	Does this patient have at least one Unhealed Pressure Ulcer at Stage 2 or Higher or designated as Unstageable	1	1				1
M1307	The Oldest Stage 2 Pressure Ulcer that is present at discharge						1
M1311	Current Number of Unhealed Pressure Ulcers at Each Stage	6	6				12

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M1322	Current Number of Stage 1 Pressure Ulcers	1	1	0			
M1324	Stage of Most Problematic Unhealed Pressure Ulcer that is Stageable	1	1				1
M1330	Does this patient have a Stasis Ulcer?	1	1				1
M1332	Current Number of Stasis Ulcer(s) that are Observable	1	1				
M1334	Status of Most Problematic Stasis Ulcer that is Observable	1	1				1
M1340	Does this patient have a Surgical Wound?	1	1				1
M1342	Status of Most Problematic Surgical Wound that is Observable	1	1				1
N0415A	HIGH RISK DRUGS: Antipsychotic	1	1				1
N0415E	HIGH RISK DRUGS: Anticoagulant	1	1				1
N0415F	HIGH RISK DRUGS: Antibiotic	1	1				1
N0415H	HIGH RISK DRUGS: Opioid	1	1				1
N0415I	HIGH RISK DRUGS: Antiplatelet	1	1				1
N0415J	HIGH RISK DRUGS: Hypoglycemic (including insulin)	1	1				1
N0415Z	HIGH RISK DRUGS: None of the above	0	0				0
M2001	Drug Regimen Review	1	1				

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M2003	Medication Follow-up	1	1				
M2005	Medication Intervention				1	1	1
M2010	Patient/Caregiver High-Risk Drug Education	1	1				
M2020	Management of Oral Medications: Excludes injectable and IV medications.	1	1				1
M2030	Management of Injectable Medications: Excludes IV medications	1	1				
O0110A	Chemotherapy and child items	1	1				1
O0110B	Radiation	1	1				1
O0110C	Oxygen therapy and child items	1	1				1
O0110D	Suctioning and child items	1	1				1
O0110E	Tracheostomy care	1	1				1
O0110F	Invasive mechanical ventilation	1	1				1
O0110G	Non-invasive mechanical vent and child items	1	1				1
O0110H	IV medications and child items	1	1				1
O0110I	Transfusions	1	1				1
O0110J	Dialysis and child items	1	1				1

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O01100	IV access and child items	1	1				1
O0110Z	None of the above	0	0				0
M1041	Influenza Vaccine Data Collection Period				1		1
M1046	Influenza Vaccine Received				1		1
O0350	COVID-19 Vaccine Status				1	1	1
M2401	Intervention Synopsis				5		5
Total number of Data Elements		200	169	43	23	10	147
Total minutes per timepoint (.15 - .3 minutes per data element)		56.4	47.1	12.9	6.9	3	40.5