

Specifications for revisions to the Elective Surgery Information System (ESIS) for 1 July 2016

December 2015

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Executive Summary

The revisions to ESIS for 1 July 2016 include:

New data item

- Addition of Previous Total Waiting Time of Transferred Episode to include the waiting time of previous waiting list episodes at other campuses or health services in the calculation of total waiting time

Change to ESIS scope

- Amendment to definition of elective surgery to align with new national definitions for elective surgery, emergency surgery and other surgery. Includes amendment to reporting guide for Source of Referral.

Amendments to existing data items and associated validations

- Amendment to reporting guide for Removal Date and its use in calculation of total waiting time to align with national reporting requirements
- Amendment to Principal Prescribed Procedure code set to align with updated national Intended Procedure list
- Removal of Planned Length of Stay code 3 Planned 23 hour stay
- Amendments to Reason for Removal including:
 - removal of code K Received the awaited procedure at another campus under the Competitive Elective Surgery Funding Initiative
 - addition of code P Special purpose

New validations

- S433 Previous TWT of transferred episode does not match total waiting time of previous episode
- S434 Intra episode event, Event Date in earlier financial year
- S435 Reason for Removal P, not approved to report

Introduction

Each year the Department of Health and Human Services review the Elective Surgery Information System (ESIS) to ensure that the data collection supports the department's business objectives, including national reporting obligations, and reflects changes in hospital funding and service provision arrangements for the coming financial year.

Comments provided by the health sector in response to *Proposals for revisions to the Elective Surgery Information System (ESIS) for 1 July 2016* have been considered, and where possible, suggestions have been accommodated, resulting in changes to or withdrawal of some proposals.

The revisions set out in this document are complete as at the date of publication. Where further changes are required during the year, for example to reference files such as the postcode locality file, data validation rules or supporting documentation, these will be advised via the HDSS Bulletin.

An updated ESIS manual will be published in due course. Until then, the current ESIS manual and subsequent HDSS Bulletins, together with this document, form the data submission specifications for 2016-17.

Victorian health services must ensure their software can create a submission file in accordance with the revised specifications, and ensure reporting capability is achieved in order to maintain compliance with reporting timeframes set out in the relevant *Department of Health and Human Services policy and funding guidelines*.

Orientation to this document

- New data items are marked as (new).
- Changes to existing data items are highlighted in green.
- Redundant values and definitions relating to existing items are ~~struck through~~.
- Comments relating only to the specifications document appear in *[square brackets and italics]*.
- Validations changed are marked * when listed as part of a data item or below a validation table.
- Changes are shown under the appropriate manual section headings.

Outcome of proposals

Proposal 1- Transfer total waiting time with transfer of ownership of waiting episode

The proposal proceeds.

Proposal 2 - Amendment to definition of elective surgery

The proposal proceeds.

Proposal 3 - Amendment to reporting guide for Removal Date and its use in calculation of total waiting time

The proposal proceeds.

Proposal 4 – Amendment to Principal Prescribed Procedure code set

The proposal proceeds.

Proposal 5 – Removal of Planned Length of Stay code for planned 23 hour stay

The proposal proceeds.

Proposal 6 – Removal of Readiness for Surgery code F

The proposal does not proceed since health services find the code useful and codes can be mapped for national reporting.

Proposal 7 – Removal of Reason for Removal code K

The proposal proceeds.

Specification for changes from 1 July 2016

Revision 1 – Transfer total waiting time with transfer of ownership of waiting episode

Section 3A Data definitions – data collection items

Previous Total Waiting Time of Transferred Episode (new)

Specification

Definition	The patient's total waiting time as at the agreed transfer date from the campus/health service transferring the waiting episode.		
Label	Previous_TWT		
Field Size	4		
Layout	NNNN		
Reported in	Episode extract		
Reported for	All waiting list episodes that have been transferred from an ESIS reporting campus /health service (Source of Referral = 2).		
Reported when	The waiting list episode is first registered at this campus/health service.		
Reporting guide	Report the total waiting time from the transferred waiting episode For example if you have received a waiting episode from Peninsula Health, and the Total Waiting Time at Peninsula Health on the agreed transfer date was 20 days, report 0020. S433 Previous TWT of transferred episode does not match total waiting time of previous episode		
	Section 4	Transfer of Ownership of Waiting Episode Calculation of Total Waiting Time	

Administration

Purpose	Used for calculation of total waiting time		
Principal data users	Department of Health & Human Services		
Collection start	July 2016	Version	1 Effective 1 July 2016
Definition source	Department of Health & Human Services	Code set source	N/A

Section 4 Business rules

Calculation of Total Waiting Time (amended)

See updated [business rules](#) in Revision 3 – Amendment to reporting guide for Removal Date and its use in calculation of total waiting time

Transfer of Ownership of Waiting Episode (amended)

An ESIS waiting episode may be transferred from one ESIS reporting campus or health service to another ESIS reporting campus or health service. The transfer must be reported to ESIS.

A waiting episode is not reported as transferred between campuses of a health service reporting to ESIS at the health service level. This is simply reported as a change in the Treatment Campus field.

Transfer of ownership of a waiting episode will involve dialogue between the campus or health service sending the episode and the campus or health service receiving the episode. It needs to cover the following:

- an agreed transfer date. This date represents the Removal Date from the sending campus/health service and Clinical Registration Date at the receiving campus/health service. It cannot be a future date.
- the total waiting time as at the agreed transfer date
- the current Readiness for Surgery
- the current Urgency Category
- the sending campus/health service informing the receiving campus/health service of the Episode Identifier
- the sending campus/health service informing the receiving campus/health service of the sending campus/health service's Campus Code (or Health Service Code)

When a transfer of ownership of a waiting episode occurs, the following reporting requirements apply:

Sending ESIS campus/health service:

Reason for Removal	T	Transfer of waiting episode to another ESIS Campus/Health service
Removal Date	Agreed transfer date	
Destination	Campus (or Health Service) Code of the receiving campus (or Health Service).	

Receiving ESIS campus/health service:

Source of Referral	2	Referral from waiting list at other ESIS campus/health service
Previous Total Waiting Time of transferred episode	NNNN	
Previous Identifier of Transferred Episode	NNNNXXXXXXXXXX	
Clinical Registration Date	Agreed transfer date	
Intra Episode Event Date (initial)	Agreed transfer date	

Section 5 Compilation and submission

Episode Extract Structure (amended)

Note	Data Item	Label	Field size	Layout/Code Set
M	Episode Identifier	Episode_Identifier	9	XXXXXXXXXX
M	Patient Identifier	Patient_Identifier	10	XXXXXXXXXXXX
2	Date Of Admission	Date_Of_Admission	8	DDMMYYYY
3	Destination	Destination	N/A	Code from code set
4	Insurance Declaration	Insurance_Declaration	N/A	Code from code set
M	Planned Length Of Stay	Planned_Length_Of_Stay	N/A	Code from code set
M	Principal Prescribed Procedure	Principal_Prescribed_Procedure	N/A	Code from code set
5	Principal Prescribed Procedure Description	PPP_Description	Up to 100	Free text excluding tabs, linefeeds and carriage returns
M	Reason For Removal	Reason_For_Removal	N/A	Code from code set
M	Administrative Registration Date	Administrative_Registration_Date	8	DDMMYYYY
M	Clinical Registration Date	Clinical_Registration_Date	8	DDMMYYYY
M	Removal Date	Removal_Date	8	DDMMYYYY
M	Source Of Referral	Source_Of_Referral	N/A	Code from code set
M	Surgical Specialty	Surgical_Specialty	N/A	Code from code set
M	Treatment Campus	Treatment_Campus	N/A	Code from code set
6	Previous Identifier of Transferred Episode	Previous_Identifier_of_Transferred_Episode	13	XXXXXXXXXXXXXX
6	Previous Total Waiting Time of Transferred Episode	Previous_TWT	4	NNNN

Key To Note	
M	Mandatory
2	Mandatory for Reason for Removal codes W, M, S, Y, P and X
3	Mandatory for Reason For Removal codes N, S, K and X
4	Mandatory for Reason For Removal codes W, M, S, Y, K, P and X
5	Mandatory for non-specific PPP codes
6	Mandatory for Source of Referral code 2

Census ODS File Structure (XXXX_YY_MM_DD_ODS_C.txt) (amended)

Data Item	Label	Format / Values	Description
Patient Identifier	Patient Identifier	NNNNNNNNNN	An identifier unique to a patient within this submitting health service. Commonly referred to as the unit record, or UR number.
Episode Identifier	Episode Identifier	NNNNNNNNNN	A string of characters that uniquely identifies a waiting episode for a given health service.
Treatment Campus	Treatment_Campus	NNNN	Where reporting at the campus level, the Treatment Campus is the reporting campus in all cases. Where reporting at the health service level, the Treatment Campus is the campus within the health service at which it is intended treatment will take place
Census Date	Census Date	DD MMM YYYY	Date on which a snapshot of a waiting list is taken for reporting purposes. ESIS census dates occur on the 15 th and the final day of each month.
Reportable Prescribed Principal Procedure	Reportable PPP	PPP < 500 (Reportable) PPP > 500 (Not reportable)	A code describing the elective surgery procedure for which the patient has principally been placed on the waiting list
Total Ready For Surgery Days	Total RFS Days	N	The total number of days an episode has been waiting as “ready for surgery”
Total Not Ready For Surgery Days	Total NRFS Days	N	The total number of days an episode has been waiting as “NOT ready for surgery”
Day of Surgery on Admission	DOSA Flag	N/A	Flag to indicate whether admission was on same day as surgery

Flag		Yes No	
Census Urgency	Census Urgency	1 – Category 1 2 – Category 2 3 – Category 3	Clinical urgency category at census date.
Census Readiness	Census Readiness	Ready – Ready for surgery Not Ready – Not ready for surgery	Readiness for surgery status as at census date.
Within Time	Within Time	Y – Yes, within desired waiting time N – No, not within desired waiting time	Flag which denotes whether a record is within desired waiting time for each urgency. Desired waiting times; Category 1 < 30 days Category 2 < 90 days Category 3 < 365 days
Census Removal	Census Rmvl	<p>Adm as planned – Patient admitted for procedure as planned on the scheduled admission date. Returned when Reason For Removal is reported as W, S, K, P or X</p> <p>Adm not as planned – Patient admitted for procedure but surgery not performed on the scheduled admission date. Returned when Reason For Removal is reported as B, I, U, M, & Y</p> <p>Not Rmvd – Not removed from the waiting list Returned when Reason For Removal is reported as blank</p> <p>Other Rmvl – Removed from the waiting list for reasons other than admission for surgery, i.e. Not admitted. Returned when Reason For Removal is reported as R, Z, Q, F, O, N & T</p>	This field defines the removal status at the census date.
Total Waiting Time	TWT	N	The total number of days an episode has been waiting as “ready for surgery” plus previous total waiting time of transferred episode
Waiting List Counter	0	N	This field provides a counter for each waiting list episode within the month of ESIS data. ‘1’ is assigned for each waiting list episode in the given ESIS month.

Episode ODS File Structure (XXXX_YY_MM_DD_ODS_E.txt) (amended)

Data Item	Label	Field size	Layout/Code Set
Episode Identifier	Episode_Identifier	9	XXXXXXXXXX
Clinical Registration Date	Clinical_Registration_Date	8	DDMMYYYY
Administrative Registration Date	Administrative_Registration_Date	8	DDMMYYYY
Source Of Referral	Source_Of_Referral	N/A	Code from code set
Principal Prescribed Procedure	Principal_Prescribed_Procedure	N/A	Code from code set
Principal Prescribed Procedure Description	PPP_Description	Up to 100	Free text excluding tabs, linefeeds and carriage returns
Surgical Specialty	Surgical_Specialty	N/A	Code from code set
Treatment Campus	Treatment_Campus	N/A	Code from code set
Destination	Destination	N/A	Code from code set
Insurance Declaration	Insurance_Declaration	N/A	Code from code set
Planned Length Of Stay	Planned_Length_Of_Stay	N/A	Code from code set
Date Of Admission	Date_Of_Admission	8	DDMMYYYY
Removal Date	Removal_Date	8	DDMMYYYY
Reason For Removal	Reason_For_Removal	N/A	Code from code set
Patient Identifier	Patient_Identifier	10	XXXXXXXXXX
Previous Identifier of Transferred Episode	Previous_Identifier_of_Transferred_Episode	13	XXXXXXXXXXXXXX
Previous Total Waiting Time of Transferred Episode	Previous_TWT	4	NNNN

Section 6 Validation

S433 Previous TWT of transferred episode does not match total waiting time of previous episode (new)

Effect	Correction
Problem	The Previous Total Waiting Time (TWT) reported by this receiving campus/health service does not match the total waiting time of the previous episode.
Remedy	<p>If the episode is a received transfer, contact the originating submitting organisation and verify that you have reported the correct:</p> <ul style="list-style-type: none">• Previous Identifier of Transferred Episode and• Previous Total Waiting Time of transferred episode <p>If the episode is not a received transfer, re-submit without the Previous TWT.</p> <p>The error will be cleared by the receiving and/or originating submitting organisation correcting and resubmitting so that the records in both datasets match. It therefore cannot be applied in real-time because it is reliant on the receipt of data from both the originating submitting organisation and the receiving submitting organisation. It applies only to transfers between ESIS submitting organisations.</p> <p>Section 4 Calculation of Total Waiting Time Transfer Of Ownership Of Waiting Episode</p>

Revision 2 – Amendment to definition of elective surgery to exclude referrals for surgery from ED

Section 1 Introduction

ESIS Scope

The ESIS data collection covers waiting episodes for elective surgery at public hospital campuses that have demonstrated to DHHS:

- their compliance with the Victorian Elective Surgery Access Policy, July 2009 **2015**, and
- their capacity to reliably report elective surgery activity in accordance with the data specifications outlined in this manual

~~Elective surgery is hospital care that, in the opinion of the treating clinician, is necessary and admission for which can be delayed for at least twenty-four hours for a clinical intervention (procedure) that:~~

- ~~• is surgical in nature; and/or~~
- ~~• carries a procedural risk; and/or~~
- ~~• carries an anaesthetic risk; and/or~~
- ~~• requires specialised training; and/or~~
- ~~• requires special facilities or equipment only available in an acute care setting.~~

Elective surgery is planned surgery that can be booked in advance as a result of a specialist clinical assessment resulting in placement on an elective surgery waiting list.

Procedures reportable to ESIS are in ~~accordance with~~ the surgical operations section of the Medicare Benefits Schedule, with the exclusion of specific procedures commonly performed by non-surgical clinicians.

A number of procedures are not ESIS-reportable and these generally include procedures for which the waiting time cannot be controlled, such as caesarean sections and organ transplants.

For health service convenience, ESIS allows episodes for non-reportable procedures and non-elective surgery waiting lists to be reported; however, these are outside the formal collection scope.

Section 2 Concepts and derived items definitions

~~Elective Care (removed)~~

Elective Surgery (new)

Definition Elective surgery is planned surgery that can be booked in advance as a result of a specialist clinical assessment resulting in placement on an elective surgery waiting list.

Guide for use Surgery is classified as either emergency surgery, elective surgery or other surgery on the basis of a patient's presentation and subsequent care (not by time periods to surgery).

Excludes:

Emergency surgery to treat trauma or acute illness subsequent to an emergency presentation. The patient may require immediate surgery or present for surgery at a later time following this unplanned presentation. This includes where the patient leaves hospital and returns for a subsequent admission. Emergency surgery includes unplanned surgery for admitted patients and unplanned surgery for patients already awaiting an elective surgery procedure (for example, in cases of acute deterioration of an existing condition). (Meteor ID 534125)

Other surgery where the procedure cannot be defined as either emergency surgery or elective surgery, for example, transplant surgery and planned obstetrics procedures. (Meteor ID 568786)

Section 3A Data definitions – data collection items

Source of Referral (amended)

Specification

Definition	The source of the patient's referral to the waiting list.
Label	Source_Of_Referral
Field Size	N/A
Valid values	Code from Source Of Referral code set
Reported in	Episode extract
Reported for	All waiting list episodes.
Reported when	The episode is first registered on the waiting list.
Code set	

Code	Descriptor
1	Referred by private practitioner or private clinic.
2	Referred from waiting list at other ESIS campus/health service.
3	Referred by outpatient department at this campus/health service.
4	Referred by other department at this campus/health service.
5	Referred by other (not at this campus/health service).

Reporting guide

If reporting at the health service level, the term campus/health service means health service. If reporting at the campus level, the term campus/health service means campus.

1 Referred by private practitioner or private clinic

A private practitioner has referred the patient to the waiting list at this reporting health service from his/her private rooms or private clinic where the patient has been billed under Medicare for the consultation.

2 Referred from waiting list at other ESIS campus/health service

The reporting responsibility for the patient's waiting episode has been transferred from another ESIS reporting campus/health service.

When this code is reported in the Source of Referral field, the campus/health service code concatenated with the nine-character Episode Identifier for the referring campus/health service must be reported in the Previous Identifier Of Transferred Episode field.

Refer to: [Section 4 Transfer of ownership of waiting episode](#).

Excludes:

Transfer of waiting episode from a non-ESIS reporting hospital (report code 5 Referred by other (not at this campus/health service)).

Patients treated at this campus/health service under contract from another campus/health service. When a patient is treated under contract, that patient's waiting episode remains the reporting responsibility of the

Reporting guide (Cont'd)	contracting campus/health service and not the campus/health service where the procedure is performed.		
	3	Referred by outpatient department at this campus/health service	
	Patient has been referred from an Outpatient Department at this campus/health service.		
	4	Referred by other department at this campus/health service	
	Patient has been referred from a department within this campus/health service excluding Outpatient Departments. This includes admitted patient wards and the Emergency Department.		
	Excludes:		
	Patients referred from the Emergency Department. Not in scope for ESIS		
	5	Referred by other (not at this campus/health service)	
	Patient has been referred from a source other than those outlined in the codes above. This includes patients who have been referred directly to the waiting list by a public hospital that does not report to ESIS.		
	Excludes:		
Patients referred from other hospitals who first attend the Outpatient Department at this campus/health service (report code 3 Referred by Outpatient Department at this campus/health service).			
Validations	S193	Source of Referral Invalid.	
	S397	Unmatched Transfer As Reported By Receiving Health Service.	
	S414	Previous Identifier of Transferred Episode Invalid.	
	Section 3a	Previous Identifier Of Transferred Episode	
Related items	Section 4	Transfer Of Ownership Of Waiting Episode.	
Administration			
Purpose	Used for analysis of referral patterns.		
Principal data users	Department of Health & Human Services		
Collection start	July 1999	Version	1 (Effective 1 July 1999)
			2 (Effective 1 July 2005)
Definition source	Department of Health & Human Services	Code set source	Department of Health & Human Services

Revision 3 – Amendment to reporting guide for Removal Date and its use in calculation of total waiting time

Section 3 Data definitions

Removal Date (amended)

Specification

Definition	The date on which the patient's waiting episode is completed by an event listed in the Reason For Removal code set.
Label	Removal_Date
Field Size	8
Layout	DDMMYYYY or blank
Reported in	Episode extract
Reported for	All waiting episodes removed from the waiting list
Reported when	The Reason For Removal is reported.
Reporting guide	<p>Admission at or arranged by this health service/campus Removal Date is the date of procedure.</p> <p>Admission at another health service/campus, not arranged by this health service/campus Removal Date is the date that the hospital becomes aware that the patient has already received the awaited procedure.</p> <p>Transfer of waiting episode Removal Date is the agreed transfer date of the waiting episode. Refer to Section 4: Transfer of ownership of waiting episode for further details.</p> <p>Patient is deceased Removal Date is the patient's date of death or if this is unable to be determined, the date on which the health service was notified of the patient's death.</p> <p><i>[No change to remainder of item]</i></p>

Section 4 Business rules

Includes amendments related to revisions 1, 3 and 6

Calculation of Total Waiting Time (amended)

- Count starts on Administrative Registration Date (~~day 1 if Ready for Surgery~~)
- Includes days where patient is ready for surgery – situation ‘as of midnight’
- End date is the Admission Date (when procedure received) or Removal Date when not admitted (~~not counted since ‘as at midnight’ patient is either admitted or otherwise removed from waiting list~~)
- When start date and end date are the same total waiting time = 0 days

Exception – when Administrative Registration Date is after the Removal Date or Admission Date, the start date is the Clinical Registration Date

Exception – when the Urgency Category has increased (eg from 3 to 2) then the start date is the event date of the most recent urgency increase. Please note that this means that if a record has had an urgency increase then it will have different start dates for the purpose of the calculation depending on whether the census date for the calculation is before or after the urgency increase.

For records that are:

- Not removed (ie Removal Date is either null or greater than census date) and not admitted (ie Admission Date is either null or greater than census date) at census date, the census date is included in the count if patient is RFS since still waiting ‘as at midnight’
- Admitted (ie Admission Date is <= census date and Reason For Removal is B, I, M, U, Y, W, X, K, P or S) on or before census date regardless of whether removed or not at census date, then end date is Admission Date.
- Treated elsewhere - not arranged by this campus/health service (ie Admission Date is <= census date and Reason For Removal is B, I or U) on or before census date, then end date is Removal Date.
- Removed (ie Removal Date is <= census date) but not admitted (ie Reason for Removal is N, T, O, Q, R, F or Z) at census date, then end date is Removal Date.
- Transferred from another ESIS campus/health service (Source of Referral 2) total waiting time includes the Previous Total Waiting Time of Transferred Episode

Table 1 End dates by Reason for Removal

Aggregation of Reason For Removal	Reason For Removal Code	Reason For Removal Description	End Date (not included in count of total waiting time)	Exception – i.e. what to do in case of erroneous data
Admitted Other	B	Treated Elsewhere for awaited procedure at a public facility	Admission Removal Date	
	I	Treated Elsewhere for awaited procedure at a private facility	Admission Removal Date	
	M	Admitted for awaited procedure as emergency patient to this hospital	Admission Removal Date	
	U	Treated Elsewhere for awaited procedure - unknown whether public or private	Admission-Rem oval Date	

	Y	Procedure received - neither planned nor emergency	Admission Date	If Admission Date is blank or
Admitted Planned	W	Admitted to this campus and has received the awaited procedure	Admission Date	invalid, then substitute
	X	Hospital arranged admission at other hospital	Admission Date	Removal Date
	K	Hospital arranged treatment at another campus under CESFI	Admission Date	
	S	Treatment for proc arranged by ESAS	Admission Date	
	P	Special purpose <i>[No change to remainder of table]</i>	Admission Date	

Revision 4 – Amendment to Principal Prescribed Procedure code set

An updated Principal Prescribed Procedure list will be published on the HDSS website at a later date.

Principal Prescribed Procedure (code set amended)

PPP	PPP Code Description	Comments
001	Coronary artery bypass graft	
002	Replacement of heart valve	
003	Lobectomy / Pneumonectomy of lung	
004	Excision / destruction of lesion / tissue of lung	
005	Pleurodesis/pleurosclerosis	
006	Open biopsy of lung	
007	Repair/closure of atrial and/or ventricular septal defect	
008	Repair/closure of patent ductus arteriosus	
009	Thoracotomy	
011	Tonsillectomy or tonsillectomy and adenoidectomy	
012	Myringotomy	
013	Septoplasty	
014	Turbinectomy	
015	Myringoplasty/tympanoplasty	
016	Ethmoidectomy	
017	Mastoidectomy	
018	Excision / destruction of lesion / tissue of larynx	
019	Excision procedures on salivary/submandibular gland or duct	
020	Excision of lesion / tissue of lip	
021	Maxillary antrostomy	
022	Excision / destruction of lesion / tissue of tongue	
023	FESS (Functional endoscopic sinus surgery)	
030	Other ENT surgery	
032	Cholecystectomy	
033	Local excision of lesion/lump of breast	
034	Release of carpal tunnel	
035	Ligation and stripping of varicose veins of legs	
036	Circumcision	
037	Procedures for haemorrhoids	
038	Mastectomy	
039	Thyroidectomy	
040	Anal sphincterotomy	
041	Bowel resection	
042	Appendicectomy	
043	Laparotomy (exploratory)	
044	Excision of lymph nodes	
045	Excision of ingrown nail(s)	
046	Removal of foreign body	
050	Other general surgery	
052	Dilation and curettage	
054	Hysterectomy	

055	Excision / destruction of lesion / tissue of cervix	
056	Procedures on ovary	
057	Procedures on fallopian tube	
058	Vaginal repair - anterior/posterior	
059	Excision / destruction of lesion/tissue of uterus	
060	Lysis of peritoneal adhesions	
064	Procedures on Bartholin's gland	2 new PPPs
062	Local excision / destruction of lesion / tissue of vulva or perineum	
070	Other gynaecological surgery	
071	Excision / destruction of lesion / tissue of brain or cerebral meninges	
072	Lobectomy of brain	
073	Incision, division, excision and decompression of spinal canal and spinal cord structures	
074	Incision, division, excision and decompression of cranial, spinal and peripheral nerves	
075	Invertebral discectomy	
077	Repair of aneurysm	
079	Spinal fusion	
081	Hypophysectomy	
082	Insertion of ventricular peritoneal (VP) shunt	
083	Revision, replacement, removal and/or irrigation of ventricular shunt	
084	Repair of cranial and/or peripheral nerve	
085	Transposition of cranial and peripheral nerves	
086	Craniotomy and/or craniectomy	
090	Other neurosurgery	
091	Repair of cataract	
092	Excision / destruction of lesion / tissue of eyelid	
093	Procedures on extraocular muscles	
094	Procedures on lacrimal system	
095	Trabeculectomy	
096	Excision of pterygium	
097	Procedures on vitreous	
098	Repair of ectropion or entropion	
099	Repair of blepharoptosis	
100	Insertion of prosthetic lens	
110	Other ophthalmic surgery	
111	Removal of internal fixation device of bone	
112	Excision of meniscus of knee (meniscectomy)	
113	Total hip replacement	
114	Total knee replacement	
115	Excision / repair of bunion and other toe deformities	2 new PPPs
116	Arthroscopy of knee	
117	Repair procedures on shoulder and elbow	4 new PPPs
118	Local excision / destruction of lesion of joint	
119	Arthrotomy	
120	Repair of cruciate ligaments	
121	Release of joint capsule	
122	Ostectomy	
123	Osteotomy	
124	Arthrodesis (surgical joint fixation)	
130	Other orthopaedic surgery	
131	Ganglionectomy	
132	Incision procedures on muscle, tendon or fascia of hand	

133	Release of Dupytren's contracture	
134	Reduction of fracture with internal fixation	
135	Tenotomy excluding of hip	
136	Reduction of facial fracture	
137	Suture of muscle, tendon and fascia of hand	
138	Bursectomy	
140	Excision of Baker's cyst	
141	Reduction of nasal fracture	
142	Repair procedures on palate and/or uvula	
143	Local excision / destruction of lesion of nose	
150	Local excision / destruction of lesion / tissue of skin and subcutaneous tissue	
160	Other plastic surgery	
161	Prostatectomy	
162	Excision / destruction of lesion / tissue of bladder	
163	Orchidopexy	
164	Excision / repair of hydrocele and/or varicocele	
165	Orchidectomy	
166	Nephrectomy	
167	Sphincterotomy of bladder	
168	Release of urethral stricture	
169	Nephrotomy and / or nephrostomy	
170	Cystoscopy	
171	Transurethral removal of obstruction from ureter and renal pelvis	
172	Repair of hypospadias	
173	Excision of epididymal cyst	
174	Arteriovenostomy	
175	Anastomosis and/or bypass of ureter	
176	Pyeloplasty	
180	Other urological surgery	
181	Open angioplasty	
182	Endarterectomy	
183	Vascular shunt/bypass	
184	Repair of vessel with graft replacement	
185	Amputation of upper or lower limb	
186	Revision, replacement, removal or declotting of arteriovenous shunt/fistula	
187	Sympathectomy	
188	Exploration/incision of vein or artery	
190	Other vascular surgery	
191	Rhinoplasty	
192	Excision of pre-auricular sinus or cyst	
193	Laryngectomy	
194	Radical neck dissection	
195	Stapedectomy	
196	Inguinal herniorrhaphy	
197	Other herniorrhaphy	
198	Procedures for pilonidal sinus or cyst	
199	Procedures for morbid obesity	
200	Procedures Not Reportable To ESIS	
202	Gastrectomy	
203	Closure intestinal stoma and/or restoration of bowel continuity	
204	Male sterilisation	
205	Repair / closure of anal fistula	

206	Laparoscopy	
207	Temporal artery biopsy	
208	Repair of retinal detachment	
209	Enucleation of eyeball	
210	Conjunctiva grafts	
211	Keratoplasty / corneal graft	
212	Excisional debridement of skin and soft tissue wound, infection or burn	
213	Skin graft	
214	Scar revision	
215	Excision of extra digit for polydactyly	
216	Correction of syndactyly	
217	Frontal bone advancement	
218	Insertion or removal of tissue expander	
219	Pollicisation	
220	Trigger finger or thumb release	
221	Tongue tie release	Plus new PPP
222	Lithotripsy	
223	Partial hip replacement	
224	Partial knee replacement	
225	Rectal resection	
226	Fundoplication/fundoplasty (anti-reflux procedure)	
227	Oesophagectomy	
228	Pancreaticoduodenectomy/Whipples Procedure	
229	Splenectomy	
230	Other surgery on the heart	
231	Other thoracic surgery	
232	Breast procedures	3 new PPPs
233	Abdominal or thoracic aortic aneurysm - repair/replacement	
234	Acromioplasty	
235	Adenoidectomy	
236	Arthroplasty - revision of	
237	Arthroscopy shoulder/sub acromial decompression	
238	Arthroscopy other	
239	Axillary node dissection	
240	Branchial apparatus remnant - removal of	
241	Breast prosthesis - removal of	
242	Breast reconstruction	
243	Breast reduction	
244	Bunion (hallux valgus) - removal of	
245	Carotid endarterectomy	
246	Cerebral haematoma - evacuation of	
247	Cervical discectomy and fusion	
248	Chalazion - excision of	
249	Chiari malformation decompression	
250	Common peroneal nerve release	
251	Cone biopsy	
252	Congenital cardiac defect/s – procedure for	
253	Congenital pulmonary lesion - removal of	
254	Cranioplasty	
255	Curettage and evacuation of uterus	
256	Cystectomy	
257	Dacryocystorhinostomy	

258	Dermoid cyst - removal of	
259	Dialysis access surgery	
260	Diathermy of wart(s)	
261	Endometrial ablation	
262	Examination of eye under anaesthesia	
263	Exostosis - excision of	
264	Female sterilisation	
265	Femoro-popliteal bypass graft	
266	Fracture non-union - treatment of	
267	Hammer/claw/mallet toe - correction of	
268	Laminectomy	
269	Large loop excision of the transformation zone cervix (LLETZ)	
270	Lymphangioma - surgery for	
271	Maxillary frenulum surgery	
272	Meatoplasty	
273	Muscle biopsy/temporal artery biopsy	
274	Muscle or tendon length - change of	
275	Myomectomy	
276	Nasal cautery	
277	Nasal polypectomy	
278	Nasendoscopy	
279	Neonatal surgery	
280	Parathyroidectomy	
281	Pectus surgery	
282	Pedicle screw fusion	
283	Pharyngoplasty	
284	Pharynx - excision of	
285	Posterior fossa decompression	
286	Pressure equalising tubes (grommets) - insertion of*	
287	Probing of naso-lacrimal duct	
288	Prostate biopsy	
289	Ptosis - repair of	
290	Pyogenic granuloma - removal of	
291	Repair of obstructing hiatus hernia	
292	Repair procedures on elbow	
293	Replacement of aortic aneurysm with bifurcation graft	
294	Rotator cuff - repair of	
295	Shoulder joint replacement	
296	Shoulder reconstruction	
297	Stress incontinence surgery	
298	Sub-mucosal resection	
299	Tendon release	
298	Tenotomy of hip	
300	Thyroglossal remnant - removal of	
302	Untethering of spinal cord	
303	Ureteric - reimplantation	
304	Ureteric stent - insertion of	
500	Cardiology Procedures	
501	Dental Procedures	
502	Endoscopic (and other closed) Procedures of Biliary Tract	
503	Endoscopic (and other closed) Procedures of Oesophagus	
504	Endoscopic (and other closed) Procedures of Stomach and Small Intestine	

505	Endoscopic (and other closed) Procedures of Large Intestine	
506	Endoscopic (and other closed) Gastroenterology Procedures	
507	Gynaecological procedures	
508	Pain Management Procedures	
509	Plastics/Aesthetic (Cosmetic) Procedures	
510	Radiological Procedures	
511	Endoscopic (and other closed) Respiratory Procedures	
512	Endoscopic (and other closed) Urology Procedures	
513	Endoscopic (and other closed) Vascular Procedures	

Section 6 Validation

S134 Principal Prescribed Procedure invalid (change to function only)

Revision 5 – Removal of Planned Length of Stay code for planned 23 hour stay

Section 3 Data definitions

Planned Length of Stay (amended)

Specification

Definition	The intention of the responsible clinician at the time the patient is placed on the waiting list, to separate the patient either on the day of admission or a subsequent date.
Label	Planned_Length_Of_Stay
Reported in	Episode extract
Reported for	All waiting list episodes.
Reported when	The waiting list episode is first registered and updated when the planned length of stay is revised during the waiting episode.

Code set	<table><tr><th>Code</th><th>Descriptor</th></tr><tr><td>1</td><td>Planned same day.</td></tr><tr><td>3</td><td>Planned 23-hour stay.</td></tr><tr><td>4</td><td>Planned multiday stay.</td></tr></table>	Code	Descriptor	1	Planned same day.	3	Planned 23-hour stay.	4	Planned multiday stay.
Code	Descriptor								
1	Planned same day.								
3	Planned 23-hour stay.								
4	Planned multiday stay.								

Reporting guide	<p>May be altered at any time during the waiting episode, for example, after a clinical review of the patient or because a procedure that had been considered multi-day is now being performed on a same-day basis.</p> <p>The field represents planning during the waiting period, not intention as decided on day of admission; therefore the field must not be altered at or after admission regardless of any change in planned length of stay apparent at that time. In such an event, the ESIS Planned Length of Stay and the VAED Intended Duration of Stay will differ.</p>
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Planned same day

Patient is intended to be admitted and separated on the same day.

Planned 23 hour stay

~~This is a '...model of care for elective surgery patients who require no more than one overnight stay. The model is not an alternative or substitute for day surgery, but an extension of services for patients unsuitable for day surgery...' (Extended Day Surgery. State of Victoria, Department of Health, 2007).~~

Validations	S167 Planned Length of Stay invalid*
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Administration

Purpose	Used in calculation of Day of Surgery Admission (DOSA) rates.
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Principal data users	Department of Health & Human Services, AIHW and the Commonwealth Department of Health		
Collection start	July 1997	Version	3 (Effective 1 July 2007)
			4 (Effective 1 July 2016)
Definition source	DHHS	Code set Source	DHHS

Section 8 Validation

S167 Planned Length of Stay invalid (change to function only)

Revision 6 – Amendments to Reason for Removal

Section 3 Data definitions

Reason for Removal (amended)

Specification

Definition The reason a waiting episode is removed from the waiting list.

Label Reason_For_Removal

Field Size N/A

Valid values Code from Reason For Removal code set

Reported in Episode extract

Reported for All waiting list episodes removed from the waiting list.

Code set

Admitted to this campus	
Code	Descriptor
W	Admitted to the intended campus and has received the awaited procedure
M	Admitted to the intended campus or (if reporting at health service level) any campus within the health service and has received the awaited procedure as an emergency admission
Y	Procedure received at intended campus, not planned at admission (excludes emergency admission)
Treated elsewhere	
Code	Descriptor
B	Received the awaited procedure at another public campus, not arranged by this campus/health service
I	Received the awaited procedure at a private campus, not arranged by this campus/health service
U	Received the awaited procedure at another campus unknown whether public or private, not arranged by this campus/health service
S	Admitted to another campus arranged by ESAS and has received the awaited procedure
X	Admitted to another campus arranged by this campus/health service and has received the awaited procedure under contract or similar arrangement
K	Received the awaited procedure at another campus under the Competitive Elective Surgery Funding Initiative.

Code set (cont'd)

P	Special purpose
Transfer of ESIS episode	
Code	Descriptor
N	Transfer of waiting episode to a non-ESIS (public) campus
T	Transfer of waiting episode to another ESIS campus/health service
Cancellation	
Code	Descriptor
R	Died
Z	Not contactable
Q	Surgery declined or not required
F	Failure of the patient to arrive for treatment
O	Other reason for cancellation

Reporting guide

The patient is removed from the waiting list when they are no longer waiting for their elective surgery. This may be because:

1. the surgery has been performed
2. the surgery is no longer required
3. the patient has been unable to be contacted, or
4. another reason

A removal refers to the end of a valid waiting list episode that occurs on a Removal Date and has a Reason for Removal.

Report the appropriate reason to explain why the patient's waiting episode has been removed from the waiting list.

W Admitted to the intended campus and has received the awaited procedure.

Patient was admitted to the intended campus and received the awaited procedure as a planned (rather than an emergency) admission.

Includes:

Patients treated under a Hub and Spoke arrangement where the Spoke retains responsibility for the patient's waiting episode.

M Admitted to the intended campus or (if reporting at health service level) any campus with the health service and has received the awaited procedure as an emergency admission.

Patient was admitted and has received the awaited procedure through the Emergency Department at this campus (or another campus of this health service) rather than as an elective admission.

Excludes: A patient admitted to another campus outside this health service for the awaited procedure as an emergency patient. Report a Reason for Removal code B, I or U Treated elsewhere for awaited procedure, not

arranged by this campus/health service.

**Reporting guide
(cont'd)**

Y Procedure received at intended campus, not planned at admission (excludes emergency admission)

Patient was already registered on the waiting list for the procedure before this (non-emergency) admission occurred. The intent of this admission was for a reason other than the performance of this waiting list procedure. During this admission the clinician makes the decision to perform the awaited procedure.

The Date Of Admission must be after the Clinical Registration Date. The Date Of Admission need not equal any Scheduled Admission Date (SAD) whether the SAD has been cancelled or not because the procedure is unplanned (unscheduled) at the time of admission.

Excludes:

- Patients receiving the awaited procedure as an emergency admission.
- Where a patient is already admitted before the need for a procedure is determined. These episodes are outside the scope of ESIS as the Date of Admission is before the Clinical Registration Date.

B, I, U Treated elsewhere for the awaited procedure not arranged by this campus/health service

Patient whose awaited procedure has been performed at another campus or health service. Procedure was not arranged by this campus/health service.

Includes:

- Patient has initiated treatment at another campus (including a private hospital)
- Patient admitted through the Emergency Department of another campus for the awaited procedure. If reporting at the health service level, it must be a campus outside this health service.

Determine, wherever possible, whether the patient was treated at a private or public campus.

[Do not report a Destination code.](#)

**Reporting guide
(cont'd)**

S Admitted to another campus arranged by ESAS and has received the awaited procedure

The Elective Surgery Access Service has arranged the patient's treatment at another campus.

The responsibility for the patient's waiting episode remains with the campus/health service that originally placed the patient on their waiting list.

[Report a Destination code to indicate the campus where the patient was admitted and received the awaited procedure arranged by ESAS.](#)

X Admitted to another campus arranged by this campus/health service and has received the awaited procedure under contract or similar arrangement

This campus/health service arranged for the patient to be treated at another campus under contract or similar arrangement. The responsibility for the patient's waiting episode remains with the ESIS campus/health service reporting this episode.

This patient should remain on the waiting list until admitted.

Includes:

- Patients treated under a Hub and spoke arrangement where the Hub retains responsibility for the patient's waiting episode.

Report a Destination code to indicate the campus where the patient was admitted and received the awaited procedure under contract or similar arrangement.

Excludes:

- Where the patient initiates treatment at another hospital, report Reason for Removal codes B, I or U Treated elsewhere for the awaited procedure, not arranged by this campus/health service.

~~K Received the awaited procedure at another campus under the Competitive Elective Surgery Funding Initiative~~

~~This campus/health service arranged for the patient to be treated at another campus under the Competitive Elective Surgery Funding Initiative.~~

~~Report a Destination code to indicate the campus where the patient was admitted and received the awaited procedure.~~

P Special purpose

As approved by DHHS

N Transfer of waiting episode to a non ESIS (public) campus

The reporting responsibility for the patient's waiting episode has been transferred from this ESIS reporting health service to a non-ESIS reporting (public) campus. The patient's surgery will be performed at the receiving campus.

Report a Destination code to indicate the campus to which responsibility has been transferred.

Excludes:

- Where the patient has initiated their own treatment at another campus. Report Reason for Removal code B, I or U.

Reporting guide
(cont'd)

T Transfer of waiting episode to another ESIS campus/health service

The reporting responsibility for the patient's waiting episode has been transferred from this ESIS reporting health service to another ESIS reporting health service. Usually this occurs when it is possible for the patient to be treated in a timely manner at the receiving campus/health

service.

It is essential that the Episode Identifier, the Removal Date, and the originating campus/health service's code are provided to the receiving campus/health service.

Report a Destination code to indicate the ESIS campus/health service to which responsibility has been transferred.

Excludes:

Where the patient has initiated their own treatment at another campus.

Report Reason for Removal code B, I or U.

Q Surgery declined or not required

Includes:

- Patients who refuse treatment at their own initiative and no longer wish to receive treatment at the hospital
- Patients whose clinical condition has either improved or worsened to the extent that they are no longer suitable candidates for the awaited surgery
- Patients on the waiting list for an ESIS reportable procedure but after study require alternative treatment that is not within the scope of ESIS (refer to Section: Common procedures that are not considered to be elective surgery).
- Episodes removed from the waiting list by a surgeon for non-clinical reasons. This includes instances where the patient's surgeon considers the patient's deferral of this episode to be unreasonable for example, the patient wishes to defer this episode indefinitely, or repeatedly defers this episode for long periods.

Refer to the Elective Surgery Access Policy for guidelines regarding removal of patients from the waiting list.

<http://www.health.vic.gov.au/surgery/policies.htm>

F Failure of the patient to arrive for treatment

- Patient who is booked for admission, and fails to arrive at the hospital on that day without giving prior notice, may be removed from the waiting list.
- Health services are required to exercise discretion to avoid disadvantaging patients in hardship, misunderstanding and other extenuating circumstances.

The alternative is for the reporting health service to rebook the patient (see Reason For Scheduled Admission Date Change) leaving Reason for Removal blank.

Reporting guide (cont'd)

O Other reason for removal

Circumstances for removal that do not fit into any other Reason for Removal category.

Includes:

Patient has received awaited procedure but treatment did not meet any criterion for admission.

Excludes:

- [Waiting list episode created in error. Submit a deletion.](#)

Validations

S287	Scheduled Admission Date Exceeded
S296	Reason For Removal Implies Procedure Performed, But Not Ready For Surgery
S298	Reason For Removal Invalid
S303	Insurance Declaration Invalid
S310	Invalid Destination/Reason For Removal Combination
S375	Clinical Urgency Category For ESAS Reason For Removal Invalid
S395	Removal Date/Reason For Removal Mismatch
S397	Unmatched Transfer As Reported By Receiving Health Service
S398	Unmatched Transfer As Reported By Originating Health Service
S399	Date Of Admission For Awaited Procedure But No Removal Date
S400	Date Of Admission For Awaited Procedure Invalid
S401	Date Of Admission/Reason For Removal Mismatch

Related items

Section 2	Admission For The Awaited Procedure, Total Waiting Time
Section 3a	Destination, Treatment Campus
Section 4	Deletion, Tabular Business Rules, Transfer Of Ownership Of Waiting Episode

Administration**Purpose**

Used to monitor waiting list management.

Principal data users

Department of Health & Human Services, AIHW and the Commonwealth Department of Health

Collection start

July 1997

Version

- 1 (Effective 1 July 1997)
- 2 (Effective 1 July 2001)
- 3 (Effective 1 July 2005)
- 4 (Effective 1 July 2014)
- 5 (Effective 1 July 2016)

Definition source

Department of Health & Human Services

Code set source

Department of Health & Human Services

Date of Admission (amended)

Specification

Definition	Date on which an admitted patient commences an episode of care during which the patient receives the awaited procedure.		
Label	Date_Of_Admission		
Field Size	8		
Layout	DDMMYYYY		
Reported in	Episode extract		
Reported for	Episodes where the patient has received the awaited procedure. (Reason for Removal codes W, M, Y, B, I, U, S, X, P K).		
Reported when	The patient is admitted for, and has received, the awaited procedure for this waiting episode.		
Reporting guide	Report the Date of Admission for all waiting episodes where the patient has received the awaited procedure. The Date Of Admission will be on or before the Removal Date. Do not report any scheduling that occurs after the Date Of Admission.		
Validations	S295	Date Of Admission greater than Scheduled Admission Date	
	S297	Date Of Admission less than Scheduled Admission Date	
	S399	Date Of Admission For Awaited Procedure But No Removal Date	
	S400	Date Of Admission For Awaited Procedure Invalid	
	S401	Date Of Admission/Reason For Removal Mismatch	
	S403	Date Of Admission For Awaited Procedure Is After Removal Date	
Related items	Section 3a	Reason For Removal Removal Date .	

Administration

Purpose	Calculation of key performance indicators under Performance Monitoring Framework.		
Principal data users	Department of Health & Human Services		
Collection start	July 2005	Version	1 (Effective 1 July 2005)
Definition source	July 2005	Code set source	N/A

Destination (amended)

Specification

Definition	<p>Identification of the Campus:</p> <p>that is accepting responsibility for the patient's waiting episode</p> <p>or</p> <p>where the patient is receiving treatment under contract or similar arrangement.</p>
Label	Destination
Field Size	N/A
Layout	Valid Values Code from Campus Codes code set or blank
Reported in	Episode extract
Reported for	Episodes removed from the waiting list with a Reason for Removal of N, T, S, X, K.
Reported when	The patient is removed from the waiting list.
Reporting guide	<p>Patients treated at another hospital, arranged by ESAS</p> <p>A patient treated at another hospital, arranged by ESAS, is not considered to be a transfer of the waiting episode, because the responsibility for the patient's waiting episode remains with the original hospital. In order to identify where the patient has received treatment report the Destination code for the treating campus.</p> <p>Patients who are treated under other contract or similar arrangement at another hospital (public or private)</p> <p>A patient treated under other contract or similar arrangement at another hospital (public or private), arranged by this hospital, is not considered to be a transfer of the waiting episode because the reporting responsibility for the patient's waiting episode remains with the contracting hospital. In order to identify where the patient has received treatment, report the Destination code for the treating campus.</p> <p>Includes:</p> <p>Patients treated under Hub and spoke arrangement where the Hub retains responsibility for the patient's waiting episode.</p> <p>Patients who are treated at another campus under the Competitive Elective Surgery Funding Initiative</p> <p>A patient treated at another hospital, under CESFI, is not considered to be a transfer of the waiting episode, because the responsibility for the patient's waiting episode remains with the original hospital. In order to identify where the patient has received treatment, report the Destination code for the treating campus.</p> <p>Patients who elect to be treated in a private hospital</p> <p>Where a patient elects to be treated in a private hospital and this has not been arranged by this hospital, this is not considered to be a transfer of</p>

the waiting episode. In this instance, the patient should be removed from the waiting list with a removal code of I. Do not report a Destination code.

Validations **S310** Invalid Destination / Reason for Removal Combination*

Related items Section 2 [Elective Surgery Access Service](#)

Section 3a [Reason for Removal](#).

Administration

Purpose Used for analysis of service delivery patterns.

Principal data users Department of Health & Human Services

Collection start July 1999 **Version** 5 (Effective 1 July 2005)

Definition source Department of Health & Human Services **Code set source** Department of Health & Human Services

Section 4 Business rules

Calculation of Total Waiting Time (amended)

See updated [business rules](#) in Revision 3 – Amendment to reporting guide for Removal Date and its use in calculation of total waiting time.

Section 6 Validation

S296 Reason for Removal implies procedure received, but not ready for surgery (amended)

Effect **Correction**

Problem This waiting episode has a Reason for Removal of W, X, ~~K~~ **P** or S but the patient was not ready for surgery at removal for this episode.

Remedy If the waiting episode ended with the patient receiving the awaited procedure, determine the date the patient became ready for surgery, and report an intra-episode event reflecting that.

If the episode has ended, but with the patient not receiving the awaited procedure, correct the Reason for Removal.

If the episode has not ended, correct the Reason For Removal and the Removal Date.

See Section 3a Reason for Removal

Section 3b Event Type, Event Value

S298 Reason for Removal invalid (change to function only)

Effect	Correction
Problem	The Reason for Removal does not exist in the Reason for Removal code set.
Remedy	Enter the correct Reason for Removal and resubmit See Section 3a Reason for Removal

S303 Insurance Declaration invalid (amended)

Effect	Correction
Problem	<ul style="list-style-type: none">The value reported does not exist in the Insurance Declaration code set, ORThis record has a Reason for Removal of W, X, M, K, P or Y but Insurance Declaration is null (blank), ORThis record has a reason for removal of S, AND a destination that is a valid ESAS campus code AND Insurance Declaration is null (blank). <p>Note: Insurance Declaration for episodes removed with an S, whose destination is a valid Public/Private Elective Surgery Initiative campus code, can be either null (blank) or any valid Insurance Declaration code.</p>
Remedy	Correct or allocate the Insurance Declaration and resubmit See Section 3a Insurance Declaration, Reason for Removal

S310 Invalid Destination/Reason for Removal combination (change to function only)

Effect	Correction
Problem	The waiting episode has a Reason for Removal that requires a valid Destination code to be completed OR The waiting episode has a Destination code, but either no Reason for Removal, or a Reason for Removal that does not require a Destination code.
Remedy	Check whether the record was transferred to another hospital or treated at another hospital under contract, ESAS, or similar arrangement: If Reason for Removal is: N, Destination must be in the 'Non ESIS campus' codeset. X, Destination must be in the 'Destination (Contract Arrangement)' codeset. S, Destination must be in the 'Destination (ESAS Treatment Campus)' codeset. If the patient has not been removed, do not report a Destination. See Section 3a Reason for Removal, Destination

S401 Date of Admission/Reason for Removal mismatch (amended)

Effect	Correction
Problem	<p>This record has a Date of Admission for Awaited Procedure but Reason for Removal is not W, S, X, K, M, Y, B, U, P or I.</p> <p>OR</p> <p>This record's Date of Admission is blank but Reason for Removal is W, S, X, K, M, Y, B, U, P or I.</p>
Remedy	<p>If Reason for Removal is not W, S, X, K, M, Y, B, U, P or I, remove data from Date of Admission for Awaited Procedure field and resubmit.</p> <p>If Reason for Removal should be W, S, X, K, M, B, U, P or I, correct and resubmit.</p> <p>Where Reason For Removal is B, U or I, it may be impractical to determine the exact dates of admission and procedure. If this is the case record the most plausible dates possible given the available evidence.</p> <p>See Section 3a Date of Admission, Reason for Removal, Removal Date</p>

S435 Reason for Removal P, not approved to report (new)

Effect	Correction
Problem	<p>The Reason for Removal is P Special purpose but this submitting organisation is not approved to report this code.</p>
Remedy	<p>Enter the correct Reason for Removal and resubmit</p> <p>See Section 3a Reason for Removal</p>

Revision 7 – Amendment / new validation for Removal Date / Event Date in earlier financial year

S430 New Episode record, Removal Date in earlier fin year (amended)

Effect **Rejection**

Problem An episode record has been submitted that:

~~Does not currently exist in the ESIS editing database, **AND**~~

- Has a Removal Date in a previous financial year, **AND**
- Final consolidation for that year has passed.

Remedy Each year, ~~around mid-September~~, all the episodes with Removal Dates falling in any previous financial years (and their intra episode events) are cleared out of the ESIS Editing Database. It may transpire that some systems will attempt to update one of these deleted records. Systems may also attempt to send an old episode (one removed in a previous financial year) for the first time. In either case, because final consolidation for that financial year has passed, the episode and any related intra episode records will not be inserted into the editing database.

If the episode was meant to have either:

- no Removal Date, **OR**
- a Removal Date in the current financial year,

Then correct the episode record and resend it and all related intra-episode events.

If the Removal Date is correct then **contact the department**. ~~no further action is necessary, as the final consolidation for year of removal has passed.~~

S434 Intra episode event, Event Date in earlier fin year (new)

Effect **Rejection**

Problem An intra episode record has been submitted that:

- Has an Event Date in a previous financial year, **AND**
- Final consolidation for that year has passed.

Remedy Each year, all the episodes with Removal Dates falling in any previous financial years (and their intra episode events) are cleared out of the ESIS Editing Database. It may transpire that some systems will attempt to update one of these deleted records. In either case, because final consolidation for that financial year has passed, the episode and any related intra episode records will not be inserted into the editing database.

If the intra episode record should have an Event Date in the current financial year, correct the intra episode record and resend.

If the Event Date is correct contact the department.

Revision 8 – Updated Medicare Eligibility Status

The following concepts were reviewed and updates will be included in the next edition of the ESIS manual. These changes have no impact on the ESIS extract.

Section 2 Concepts and derived items

~~Medicare Eligibility Status – Eligible Person (removed)~~

~~Medicare Eligibility Status – Ineligible Person (removed)~~

Medicare Eligibility Status (new)