

Commonly requested data items

Data item	Comments	Required	Justification
Linkage variables			
Facility ID	For linkage, can be supplied upon request, see below		
UR number	For linkage only, not to be released to the researcher		
Full name	For linkage only, not to be released to the researcher		
Date of birth	For linkage only, not to be released to the researcher		
Sex	For linkage, can be supplied upon request, see below		
Address	For linkage only, not to be released to the researcher		
Episode information			
Facility ID	Private facility IDs will be supplied as 99999/Private		
Facility type	Public acute, public psychiatric, private etc.		
Episode start date	Admission date DDMMYYYY (requires strong justification)		
	Admission date MMYYYY		
	Admission time HHMM (requires strong justification)		
Episode end date	Separation date DDMMYYYY (requires strong justification)		
	Separation date MMYYYY		
	Separation time HHMM (requires strong justification)		
Length of Stay	Length of stay in days (capped at 30 days unless strong justification)		
Care Type	AKA episode type, e.g. acute, newborn, rehab		
Source of Referral	Referral/transfer source – ED, outpatient department etc.		
Facility Transferred From	Code or name. Public only. Private facilities will be returned as code '99999' or name 'Private'		
Facility Transferred To	Code or name. Public only. Private facilities will be returned as code '99999' or name 'Private'		
Planned Same Day	Whether patient is planned to be discharged on the same day as admitted		
Mode of Separation	Patient status at separation, e.g. discharged to home, transferred to another hospital, died in hospital		
Elective Status	Elective, emergency, not assigned		
Fund Source	Expected Principal source of patient funding - health service budget, private health insurance etc.		
Contract Role	Whether contracting or contracted hospital		

Data item	Comments	Required	Justification
ICU Length of stay	Length of stay in level 6 ICU in hours and minutes (only available from 1 July 2013) (usually capped at 30 days unless strong justification)		
Duration of CVS	Duration of continuous ventilatory support (only available from 1 July 2013) (usually capped at 30 days unless strong justification)		
Psych Days	Length of stay in a psychiatric unit in days (usually capped at 30 days unless strong justification)		
Standard ward on admission	Standard ward on admission – standardised code to describe the physical ward location		
Standard unit on admission	Standard unit on admission – standardised code to describe the treating doctor specialty (SNAP only pre-July 2007)		
Patient demographics			
Preferred Language	ABS Australian Standard Classification of Languages (ASCL) (broad language groups unless strong justification)		
Age	Age on admission grouped in 5-year intervals, capped at 85+. If other grouping required, please provide strong justification.		
	Age on admission (requires strong justification)		
Marital Status	Never married, married/de facto, widowed, divorced/separated, not stated/unknown		
Hospital Insurance status	Hospital insurance, not insured, not stated		
Indigenous Status	Whether Aboriginal and/or Torres Strait Islander, not Aboriginal/Torres Strait Islander, not stated, not known		
Country of Birth (ABS Standard Australian Classification of Countries)	Detailed country of birth (requires strong justification)		
	Country of birth major groups (e.g. Oceania and Antarctica, North-west Europe, etc.)		
Australian South Sea Islander	Australian South Sea Islander status – yes, no, not known		
Sex	Female, male, intersex or indeterminate, not stated/inadequately described		
Clinical information			
Principal diagnosis	Principal diagnosis , ICD code		
Other diagnoses	Other diagnoses, ICD codes		
External causes	External causes, ICD codes		
Morphology	Morphology, ICD code		

Commonly requested data items. PLEASE NOTE: All data items are released at the discretion of the Data Custodian. Please provide a justification for each data item requested that relates back to your research questions.

Data item	Comments	Required	Justification
Procedures	Procedures, ACHI codes		
Block codes	ACHI block codes for procedures		
Procedure dates (only recorded for surgical blocks)	Procedure date DDMMYYYY (requires strong justification)		
	Procedure date MMYYYY		
DRG	Diagnosis Related Group (DRG) – version assigned based on period of coverage requested		
MDC	Major Diagnostic Category		
Geographical information			
Facility HHS	Hospital and Health Service (HHS) area of hospital		
Patient HHS	HHS of patient's usual residence		
ARIA+	Accessibility and Remoteness Index of Australia		
SEIFA	Socio-Economic Index for Areas based on the Index of Relative Advantage and Disadvantage		
SA2 code	Statistical Area level 2 (SA2) of usual residence – available from 1 July 2002 (back-mapped); prior to this SLA code is available (requires strong justification)		
State of residence	Australian state of usual residence (Queensland/Other unless strong justification provided)		

Please note that a strong justification is required for release of data items that carry a higher risk of identifying an individual.

For years of data available for this data collection please refer to the [Master Linkage File coverage dates](#).

For more details about these and other data items collected on admitted patients, please refer to the [QHAPDC Manual](#). Please note that not all data items listed in the QHAPDC manual are available for all facilities. Please check availability with the data custodian prior to requesting any data items that are not included on the commonly requested data item list.

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