The Consolidated Health Informatics (CHI) Initiative unanimously endorsed selected content and messaging standards for use with federally-required patient assessments that include functional and disability content. The National Committee for Vital and Health Statistics (NCVHS) has recommended that the Secretary approve and adopt these CHI standards into federal programs.

The choice of CHI standards was based, in large part, on the results of an U.S. Department of Health and Human Services (HHS), Office of the Assistant Secretary for Planning and Evaluation (ASPE) contract with Apelon and a subcontract with Thomas White, MD. This effort resulted in: (i) a representation and coding of the federally-required nursing home Minimum Data Set (MDS) questions and answers in Logical Observation Identifiers Names and Codes (LOINC®); and (ii) an identification of standardized vocabulary matching terms (i.e., semantic matches) for the LOINC® represented and coded MDS questions and answers. The standards are intended to support standardized information exchange and re-use, such as may occur with the newly adopted Continuity of Care Document (CCD) standard.

The following briefly describes the MDS standardization process and the attached spreadsheet identifies the current vocabulary and LOINC® matches that were identified through the ASPE contract. For additional information, the following resources are available:

1. LOINC® is a registered United States trademark of Regenstrief Institute, Inc.

• CHI recommendations report for disability and patient assessments (http://www.hhs.gov/healthit/chiinitiative.html).

• NCVHS letter of recommendation to the Secretary (http://ncvhs.hhs.gov/061128lt.pdf).

Background

HHS/ASPE contracted with Apelon to identify “usefully related matches” between elements of MDS and the CHI endorsed terminologies (such as SNOMED-CT), and to create a representation for transmitting these matches using messaging standards (such as HL7). Thomas White, MD, State of New York collaborated, focusing on the use of LOINC® as a standard representation for MDS elements and associated vocabulary matches.

MDS Deconstruction, LOINC®-ification, Semantic Matching, Messaging and the UMLS

MDS Deconstruction

Several iterations of the MDS standardization effort produced the “deconstruction” of the MDS into the questions and answers that appears in columns D, E, and F in the attached spreadsheet. The purpose of the deconstruction was to maximize the linking of MDS question-and-answer pairs with CHI-endorsed standard vocabulary matches, while at the same time retaining the Centers for Medicare and Medicaid Services (CMS) intent (meaning) of each question-and-answer option, and to enable the exchange of assessment content using health information technology (HIT) messaging standards. Specifically, the deconstruction enables the representation and coding of the MDS questions and answers in LOINC® and supports the linking of these LOINC® coded items with any available semantic-matching terms from the CHI-endorsed standard vocabularies.

LOINC®-ification

Given a deconstruction of an assessment instrument, such as the MDS, “LOINC®-ification” is the process of representing and coding the elements resulting from the deconstruction. In this case, the elements are question-and-answer pairs.
Given a LOINC®-ified assessment instrument, elements of that instrument -- the question-and-answer pairs -- can be matched -- by meaning -- to terms in standard vocabularies, as further explained and illustrated in the example below. The spreadsheet attached identifies the LOINC®-coded MDS item and any available matching vocabulary concepts (such as those that were found in SNOMED).

The LONIC representation and coding of assessment question-and-answer pairs, and associated vocabulary matches is specifically supportive of data exchange and re-use because: (i) exact semantic matches to assessments concepts are not always available; and (ii) often identified semantic matches provide “usefully related” (cut frequently not exact) matches to an assessment item. Thus, coding in LOINC® ensures the availability of codes that can be exchanged in an HL7 message even when there is not an exact semantic match. Currently (and in the accompanying spreadsheet) LOINC® codes are provided for only the MDS “questions.” LOINC® is working to assign “answer codes” (i.e., LOINC®-Answer IDs), to each answer option on the MDS forms (and other LOINC®-coded patient assessments). These codes will further support health information exchange and re-use, particularly when exact semantic matches are not available.

**Semantic Matching**

Most MDS elements, whether they are questions, answers, or combinations of the two, do not have exact equivalents in SNOMED (or any other CHI standard terminology). However, and electronic health record (EHR) or personal health record (PHR) for a given patient that makes use of CHI standard terminologies may include terms that are “usefully-related” to an assessment question and/or answer. The presence of terms in an EHR and/or PHR that are usefully related to (or are an exact match of) an MDS question or answer option, might be of interest to a provider charged with completing an MDS assessment, and they may facilitate the completion of the assessment or other clinical applications (e.g., care planning). Simple examples include standard terms describing the patient’s visual acuity or incontinence; such terms rarely translate directly into the related MDS assessment responses, but they are certainly “usefully related” to such responses.

**Messaging**

Because of prior work on the problem, assessment instruments represented in LOINC® can leverage existing HL7 standard messages. To exchange assessment results in a standard way, an HL7 message will include:
• The LOINC® code for the native assessment question-code from the assessment form.
• The response for the specified patient including, at minimum, the LOINC® answer ID code and also including, if available, the semantic matching term.

**UMLS**

A future release of the National Library of Medicine/Unified Medical Language System (NLM/UMLS) will represent “LOINC®-ified” assessment instruments. This representation will display for each standardized assessment the:

• LOINC® code for each assessment question.
• LOINC® answer IDs for each answer option.
• All identified semantic matching codes and terms for each assessment question-and-answer option.

The UMLS representation will allow the re-use of standard terms, for example, by HIT vendors as they develop software that supports the completion of and/or use of standard assessments.

The deconstructed, LOINC®-ified, semantically matched MDS will be the first assessment instrument to appear in the UMLS. As additional semantic matches are identified (or retired), these changes will be updated in the UMLS.

**The Spreadsheet**

Accompanying this document is a spreadsheet representing the current state of an effort both to link MDS question-and-answer pairs to: (i) concepts and codes in SNOMED-CT (and other CHI-endorsed vocabularies); and (ii) LOINC® codes.

The spreadsheet columns D (“Concept Name”), E (“MDS Code”), and F (“QA Pair for Matching”) contain, respectively, MDS elements (e.g., “H1.b.4. Incontinent”), MDS Question Numbers (e.g., “H1.b.4.”), and the phrases used for matching (e.g., “Is incontinent”). The latter phrases were “synthesized” by domain experts as part of the matching effort. To improve readability, duplicates entries have been removed from these columns. That is, if 20 different SNOMED “matches” are linked to a given MDS element, the spreadsheet has been “uncluttered” by removing the 19 repeats of the MDS element name, code and
match phrase from columns D, E, and F. Columns A, B, and C (initially hidden\(^3\)), have the duplicates still in place, in case users wish to sort or extract selected rows.

Some MDS elements -- such as “SECTION G: PHYSICAL FUNCTION” -- provide the MDS hierarchical context for nearby question-and-answer pairs. These elements are not assigned a LOINC\(^\text{®}\) code, although sometimes their presence is required to interpret the meaning of the nearby coded elements.

Column G contains the name of the standard terminology the MDS element is linked to (either SNOMED or LOINC\(^\text{®}\)); column H has the associated SNOMED or LOINC\(^\text{®}\) code, and column I has the SNOMED or LOINC\(^\text{®}\) concept name. Thus, in spreadsheet row 1036, MDS element “H1.b.4. Incontinent,” represented in columns D, E, and F as shown above, is linked to LOINC\(^\text{®}\) code “45619-4” and the LOINC\(^\text{®}\) concept named “BLADDER CONTINENCE: FIND: PT: ^PATIENT: NAM: MDS.” In spreadsheet rows 1037-1049, are codes and concept names from SNOMED that are “usefully related” to the MDS element “H1.b.4. Incontinent.” That is, for example, if a patient’s EHR or PHR contained the SNOMED term “Abnormal bladder continence (finding),” or its SNOMED code “150003” (or both), the provider is alerted to a potentially relevant finding. In most cases, the “usefully related” SNOMED terms ignore any MDS-specified “look-back” period or other “count-related” notions, but the presence of the related terms in an EHR or PHR may help the assessing provider find the portions of the record needed to complete MDS’s quantitative requirements.

**Apelon-MDS Database**

For a short time, interested parties may apply for Web browser access to the Apelon database which can be used to search for the semantic matches included in the spreadsheet and review them in context. Access will be free, but on a first-come first-served basis. Those interested in such access should send an email message:

TO:  tony.weida@apelon.com
    CC:  Jennie.Harvell@hhs.gov

A brief telephonic training session may be required.

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\(^3\) To view these columns, “drag” the left-hand column boundary for column D to the right until the desired portions of the next column to the left is visible, and then do the same for column C and then column B.
Acknowledgements

John Carter led the MDS deconstruction and matching effort, and introduced the “synthetic” terms created to aid MDS matching. Several persons from LOINC® spent many hours working on refining the LOINC® data model, extracting the question data from RAVEN, building the hierarchies and answer lists, as well as developing new capabilities in RELMA to display such information. Notably, we are very appreciative of the efforts by Clement McDonald, Daniel Vreeman, and Kathy Mercer from LOINC® for their assistance with these efforts. Betsy Humphreys, Clement McDonald, and Kin Wah Fung of the NLM also provided key leadership in this project, including working to include the LOINC® represented MDS and linked semantic matches in the UMLS.

This report was prepared for the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, Office of Disability, Aging and Long-Term Care Policy. For additional information about this subject, you can visit the DALTCP home page at http://aspe.hhs.gov/_/office_specific/daltcp.cfm or contact the ASPE Project Officer, Jennie Harvell, at HHS/ASPE/DALTCP, Room 424E, H.H. Humphrey Building, 200 Independence Avenue, S.W., Washington, D.C. 20201. Her e-mail address is: Jennie.Harvell@hhs.gov.
Resident admitted from private home/a
LOINC 45393-6  MIDDLE INITIAL ID:PT=\*PATIENT:NM:DS
AA1c (Last)  AA1c
LOINC 45394-4  LAST NAME:PN:PT=\*PATIENT:NM:
AA1d. Name Suffix (Jr/Sr)  AA1d
LOINC 45395-1  NAME SUFFIX:PN:PT=\*PATIENT:NM:
AA2. Gender  AA2
AA2.1. Male  AA21
LOINC 46098-0  GENDER:TYPE:PT=\*PATIENT:NM:DS
AA2.2. Female  AA22
LOINC 46098-0  GENDER:TYPE:PT=\*PATIENT:NM:DS
AA2.3. UTD  AA23
LOINC 46098-0  GENDER:TYPE:PT=\*PATIENT:NM:DS
AA3. Birth Date  AA3
AA4. Race/Ethnicity  AA4
AA4.1. American Indian/Alaskan  AA41
LOINC 32624-9  RACE:TYPE:PT=\*PATIENT:NM:DS
AA4.2. Asian/Pacific Islander  AA42
LOINC 32624-9  RACE:TYPE:PT=\*PATIENT:NM:DS
AA4.3. Black, not of Hispanic origin  AA43
LOINC 32624-9  RACE:TYPE:PT=\*PATIENT:NM:DS
AA4.4. Hispanic  AA44
LOINC 32624-9  RACE:TYPE:PT=\*PATIENT:NM:DS
AA4.5. White, not of Hispanic origin  AA45
LOINC 32624-9  RACE:TYPE:PT=\*PATIENT:NM:DS
AA5. SSD  AA5
AA5.a. (SSN)  AA5a
LOINC 45396-9  SOCIAL SECURITY NUMBER:ID:PT=\*PATIENT:NM:
AA5.b. Medicare Number  AA5b
LOINC 45397-7  MEDICARE OR COMPARABLE NUMBER:ID:PT=\*PATIENT:NM:
AA6. Facility Provider No.  AA6
AA6.a. State No.  AA6a
LOINC 45388-5  STATE PROVIDER NUMBER:ID:PT=FACILITY:NM:
AA6.b. Federal No.  AA6b
LOINC 45393-3  FEDERAL PROVIDER NUMBER:ID:PT=FACILITY:NM:
AA7. Medicare No.  AA7
LOINC 45400-9  MEDICARE NUMBER:ID:PT=\*PATIENT:NM:
AA8. Reasons for Assessment  AA8
AA8.a. Primary reason for assessment  AA8a
AA8.a.0. NONE OF ABOVE  AA8a0
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.1. Admission assessment (req. t AA8a1
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.10. Significant correction of prior AA8a10
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.2. Annual assessment  AA8a2
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.3. Significant change in status a AA8a3
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.4. Significant correction of prior AA8a4
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.5. Quarterly review assessment  AA8a5
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.6. Discharged, return not antici AA8a6
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.7. Discharged, return anticipated AA8a7
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.8. Discharged prior to completi AA8a8
LOINC 45408-2  REASON FOR ASSESSMENT:PRIMARY:PT=\*PATIENT:NM:DS
AA8.a.9. Reentry  AA8a9
AA8.b. Codes for assessments req. by AA8b
AA8.b.1. Medicare 5-day assessment  AA8b1
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.2. Medicare 30-day assessment  AA8b2
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.3. Medicare 60-day assessment  AA8b3
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.4. Medicare 90-day assessment  AA8b4
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.5. Medicare readmission/reassess AA8b5
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.6. Other state req. assessment  AA8b6
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.7. Medicare 14-day assessment  AA8b7
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA8.b.8. Other Medicare req. assessm AA8b8
LOINC 45409-0  REASON FOR ASSESSMENT:SPECIAL:PT=\*PATIENT:NM:DS
AA9. Signatures Persons Complete  AA9
SECTION AB: DEMOGRAPHIC  AB
AB1. Date of Entry  AB1
AB2. Information Related to MR/DD St AB21
AB2.1. Date of Admission/Imp AB21
LOINC 45392-8  FIRST NAME:PN:PT=\*PATIENT:NM:
AB2.1a. (First)  AB21a
LOINC 45393-6  MIDDLE INITIAL ID:PT=\*PATIENT:NM:DS
AB2.1b. (Middle Initial)  AB21b
LOINC 45394-4  LAST NAME:PN:PT=\*PATIENT:NM:
AB2.1c. (Last)  AB21c
LOINC 45395-1  NAME SUFFIX:PN:PT=\*PATIENT:NM:
AB2.2. Gender  AB22
AB2.2.1. Male  AB22a
LOINC 46098-0  GENDER:TYPE:PT=\*PATIENT:NM:DS
AB2.2. Female  AB22b
LOINC 46098-0  GENDER:TYPE:PT=\*PATIENT:NM:DS
AB2.3. Race  AB23
LOINC 32624-9  RACE:TYPE:PT=\*PATIENT:NM:DS
AB2.4. Ethnicity  AB24
AB2.4.1. American Indian/Alaskan  AB24a
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.a. (SSN)  AB24a
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.b. Hispanic  AB24b
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.c. Other related organic condition  AB24c
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.d. White, not of Hispanic origin  AB24d
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.e. Black, not of Hispanic origin  AB24e
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.f. Asian/Pacific Islander  AB24f
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.g. Other related organic condition  AB24g
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.4.h. American Indian/Alaskan  AB24h
LOINC 45409-0  MEDICAL CONDITION:PT=\*PATIENT:NM:DS
AB2.5. Hospital  AB25
AB2.5.a. (At Entry)  AB25a
LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.a.1. Private home/apt, w/o home he AB25a1
Resident admitted from private home/apt:LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.a.2. Private home/apt, w/ home heal AB25a2
Resident admitted from private home/apt:LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.a.3. Board & care/assisted living/gro AB25a3
Resident admitted from board & care/apt:LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.b. Nursing home  AB25b
Resident admitted from nursing home  LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.c. Acute care hospital  AB25c
Resident admitted from acute care hosp:LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.d. Psych. hospital, MR/DD facility  AB25d
Resident admitted from psychiatric hospital, MR/DD facility  LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.5.e. Rehabilitation hospital  AB25e
Resident admitted from rehabilitation hosp:LOINC 45410-8  ADMITTED FROM:PT=\*FACILITY:NM:DS
AB2.6. Admission Location  AB26
 resident admitted from other facility

Did not live alone

Living alone prior to admission

Living alone prior to admission

Living alone in other facility

Living alone in other facility

Lived alone

Lived alone

No history of mental problems

Resident had no schooling

Resident had schooling up to grades 9

Resident had schooling up to 8th grade

Resident had stay in other home

Resident lived in MR/DD setting

Resident lived in mental health setting

Resident attended technical or trade school

Resident is high school graduate

Resident received graduate degree

Resident received bachelor's degree

Resident received graduate degree

Uses tobacco products

Has animal companion/presence

Attends worship services

Shows distinct food preferences

Involved in group activities

Eats between meals

Stays up late

Naps regularly

Spends most time alone or watching TV

Uses tobacco products

Resident received graduate degree

Uses alcoholic beverages

WAKENS TO TOILET MOST NIGHTS

Stays busy with hobbies, reading, etc.

Attends worship services

Unknown - resident or family unable to provide

SECTION AC: CUSTOMARY ROUTINE

AC.1. Customary Routine

AC.1.a. Stays up late at night (e.g., after AC1a)

AC.1.a-h. Cycle of Daily Events

AC.1.b. Naps regularly during day (at le AC1b)

AC.1.c. Goes out 1 or more days a week

AC.1.d. Stays busy w/ hobbies, reading, AC1d

AC.1.e. Spends most of time alone or w AC1e

AC.1.f. Moves independently indoors (w AC1f

AC.1.g. Use of tobacco products at AC1g

AC.1.h. Use of alcohol beverages(s) AC1h

AC.1.i. NONE OF ABOVE

AC.1.i-l. Eating Patterns

AC.1.j. Eats between meals all or most AC1j

AC.1.k. NONE OF ABOVE

AC.1.n. Image of bedclothes

AC.1.o. ADL Patterns

AC.1.p. Waakens to toilet all or most AC1p

AC.1.q. Has irregular bowel movement

AC.1.r. Showers for bathing

AC.1.s. Daily contact with relatives

AC.1.t. Usually attends church, temple

AC.1.u. Finds strength in faith

AC.1.v. Daily animal companion

AC.1.w. Involves in group activities

AC.1.x. None of above

AC.1.y. Unknown - resident or family ac

ACTY.1. Residence family unable to provide

SECTION AD: FACE SHEET

A.1. Resident Name

A.1.a. (First)

A.1. Resident Name

A1.1. Residence Family Unable to Provide
SECTION B: COGNITIVE PATTERNS

B1. Comatose
B1.0. No
B1.1. Yes

B2. Memory
B2.a. Short-Term Memory OK
B2.a.0. Memory OK
B2.a.1. Memory Problem

B2.b. Long-Term Memory OK
B2.b.0. Memory OK
B2.b.1. Memory Problem

B2.c. Staff names/faces
B2.c.0. Knows staff names/faces
B2.c.1. Knows staff names/faces
B2.c.2. Resident's cognitive status, skills, or abilities

B2.d.2. - UTD
B2.d.2.a. UTD if comatose

B3. Memory/Recall Ability
B3.a. Current season
B3.a.0. Knows current season
B3.a.1. Knows location of own room
B3.a.2. Knows location of own room
B3.b.0. Knows staff names/faces
B3.b.1. Knows staff names/faces
B3.c.0. Knows is in a nursing home
B3.c.1. Knows is in a nursing home
B3.c.2. Able to remember faces

B4. Cognitive Skills For Daily Decision-H B4
B4.0. INDEPENDENT--decisions consis B40
B4.1. MODIFIED INDEPENDENCE--solo B41
B4.2. MODERATELY IMPAIRED--decis B42
B4.3. SEVERELY IMPAIRED--never B43
B4.4. - UTD
B4.5. Indicators of Delirium - Periodic Dis B5
B5.a. Easily distracted
B5.a.0. Behavior not present
B5.a.1. Behavior present, not of recent B5a1
B5.a.2. Behavior present, over last 7 da B5a2
B5.b.0. Perception/awareness not altered
B5.b.1. Behavior present, not of recent B5b1
B5.b.2. Behavior present, over last 7 da B5b2
B5.c.0. Speech not disorganized or rambling
B5.c.1. Behavior present, not of recent B5c1
B5.c.2. Behavior present, over last 7 da B5c2
B5.d.0. Restlessness
B5.d.1. Behavior present, not of recent B5d1
B5.d.2. Behavior present, over last 7 da B5d2
B5.e.0. Perilharhy
B5.e.1. Behavior not present
B5.e.2. Behavior present, over last 7 da B5e2
B5.f. Mental function varies over the cos B5f
B5.f.0. Behavior not present
B5.f.1. Behavior present, not of recent B5f1
B5.f.2. Behavior present, over last 7 da B5f2
B5.f.3. Mental function varies over the course of a day
B5.f.4. Mental function does not vary over the course of a day
B6. Change in Cognitive Status
B6.0. No change
B6.1. Improved
B6.2. Deteriorated
B6.3. - UTD

SECTION C: COMMUNICATION/HEAR C
C1. Hearing
C1.0. HEARS ADEQUATELY...
C1.1. Hearing is normal

LOINC 45498-3 HEARING FIND:PT: PATIENT: ORD: MDS
C1.1. MINIMAL DIFFICULTY... C11

Hears with minimal difficulty

LOINC SNOMED CT HEARING:FIND:PT:*PATIENT:NON:MDS
45548-3 162339002 Hearing normal (finding)

C1.2. HEARS IN SPECIAL SITUATION C12

Hears if speaker adjusts tone and speaks

LOINC SNOMED CT HEARING:FIND:PT:*PATIENT:NON:MDS
45498-3 36697007 Unable to hear conversational voice (finding)

C1.3. HIGHLY IMPAIRED... C13

Hearing absent

LOINC SNOMED CT HEARING:FIND:PT:*PATIENT:NON:MDS
45498-3 15188001 Hearing loss (disorder)

C1.4. - UTD C14

UTD ability to hear

SNOMED CT 164061000 On examination - significantly deaf (disorder)

C2. Communication Devices/Technique C2

C2.a. Hearing aid, present and used C2a

Has and uses hearing aid

SNOMED CT 277213009 Hearing aid worn (finding)

C2.b. Hearing aid, present and not used C2b

Has and sometimes uses hearing aid

SNOMED CT 277213009 Hearing aid worn (finding)

C2.c. Other receptive communication tech C2c

Uses receptive communication technique

SNOMED CT 45501-4 OTHER RECEPTIVE COMMUNICATION TECHNIQUES USED:FIND:PT:*PATIENT:ORD:MDS

C2.d. NONE OF ABOVE C2d

Does not use hearing aid or receptive comm tech

SNOMED CT 45552-2 NO COMMUNICATION DEVICE:FIND:PT:*PATIENT:ORD:MDS

C3. Modes of Expression C3

C3.a. Speech C3a

Uses speech to make needs known

LOINC SNOMED CT USES SPEECH:FIND:PT:*PATIENT:ORD:MDS
45500-7 288599003 Uses speech to make needs known

C3.b. Writing messages to express/clarify C3b

Writes messages to make needs known

LOINC SNOMED CT USES WRITTEN MESSAGES:FIND:PT:*PATIENT:ORD:MDS
45504-8 288599003 Uses written messages (finding)

C3.c. American sign language or Braille C3c

Uses American sign language or Braille

SNOMED CT 45509-7 USES COMMUNICATION BOARD:FIND:PT:*PATIENT:ORD:MDS

C3.d. Signs/gestures/sounds C3d

Uses signs, gestures and/or sounds

LOINC SNOMED CT USES SIGNS/GESTURES/SOUNDS:FIND:PT:*PATIENT:ORD:MDS
45506-3 288599003 Uses signs, gestures, and sounds (finding)

C3.e. Communication board used C3e

Uses a communication board to make needs known

SNOMED CT 45510-5 USES COMMUNICATION BOARD:FIND:PT:*PATIENT:ORD:MDS

C3.f. Other C3f

Uses unspecified method to make needs known

SNOMED CT 45508-9 USES OTHER MODES OF EXPRESSION:FIND:PT:*PATIENT:ORD:MDS

C3.g. NONE OF ABOVE C3g

C4. Making Self Understood C4

C4.0. UNDERSTOOD C40

Consistently makes self understood

LOINC SNOMED CT MAKING SELF UNDERSTOOD:FIND:PT:*PATIENT:ORD:MDS
45510-5 288744005 Able to make self understood (finding)

C4.1. USUALLY UNDERSTOOD... C41

Usually makes self understood

LOINC SNOMED CT MAKING SELF UNDERSTOOD:FIND:PT:*PATIENT:ORD:MDS
45510-5 288744005 Able to make self understood (finding)

C4.2. SOMETIMES UNDERSTOOD... C42

Sometimes makes self understood

LOINC SNOMED CT MAKING SELF UNDERSTOOD:FIND:PT:*PATIENT:ORD:MDS
45510-5 288744005 Able to make self understood (finding)

C4.3. RARELY/NEVER UNDERSTOOD C43

Rarely or never makes self understood

LOINC SNOMED CT MAKING SELF UNDERSTOOD:FIND:PT:*PATIENT:ORD:MDS
45510-5 288744005 Able to make self understood (finding)

C4.4. - UTD C44

UTD if makes self understood

SNOMED CT 45509-7 MODES OF EXPRESSION - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MDS

C5. Speech Clarity C5

C5.0. CLEAR SPEECH C50

Words are distinct, intelligible

LOINC SNOMED CT SPEECH CLARITY:FIND:PT:*PATIENT:NON:MDS
45511-3 289193001 Clear speech (finding)

C5.1. UNCLEAR SPEECH C51

Words are slurred or mumbled

LOINC SNOMED CT SPEECH CLARITY:FIND:PT:*PATIENT:NON:MDS
45511-3 289195008 Slurred speech (finding)

C5.2. NO SPEECH C52

C6. Ability to Understand Others C6

C6.0. UNDERSTANDS C60

Understands verbal information

LOINC SNOMED CT UNDERSTANDS:COMMUNICATION:FIND:PT:*PATIENT:ORD:MDS
45400-8 289599003 Able to use verbal communication (finding)

C6.1. USUALLY UNDERSTANDS... C61

Usually understands verbal information

SNOMED CT 45400-8 ABILITY TO UNDERSTAND OTHERS:FIND:PT:*PATIENT:ORD:MDS

C6.2. SOMETIMES UNDERSTANDS... C62

Sometimes understands verbal information

SNOMED CT 45400-8 ABILITY TO UNDERSTAND OTHERS:FIND:PT:*PATIENT:ORD:MDS

C6.3. RARELY/NEVER UNDERSTAND C63

Rarely or never understands verbal info

SNOMED CT 45400-8 ABILITY TO UNDERSTAND OTHERS:FIND:PT:*PATIENT:ORD:MDS

C6.4. - UTD C64

UTD if understands verbal information

SNOMED CT 45509-7 MODES OF EXPRESSION - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MDS

C7. Change in Communication/Hearing C7

C7.0. No change C70

C7.1. Improved C71

Ability to express, understand, or hear

LOINC SNOMED CT ABILITY TO EXPRESS, UNDERSTAND, OR HEAR:FIND:PT:*PATIENT:NON:MDS
45406-6 45406-6 CHANGE IN COMMUNICATION & OR HEARING:FIND:PT:*PATIENT:ORD:MDS

C7.2. Deteriorated C72

C7.3. - UTD C73

C8. Vision C8

C8.1. ADEQUATE C81

Vision is normal

LOINC SNOMED CT VISION:FIND:PT:*PATIENT:NON:MDS
45407-4 45407-4 Normal vision (finding)

C8.2. IMPAIRED C82

Reduced visual acuity

LOINC SNOMED CT VISION:FIND:PT:*PATIENT:NON:MDS
45407-4 13164000 Reduced visual acuity (finding)

C8.3. SEVERELY IMPAIRED C83

C8.4. - UTD C84

UTD visual acuity

SNOMED CT 45407-4 VISION:FIND:PT:*PATIENT:ORD:MDS

D1. Vision D1

D1.0. ADEQUATE D10

Vision is normal

LOINC SNOMED CT VISION:FIND:PT:*PATIENT:NON:MDS
45407-4 45407-4 Normal vision (finding)

D1.1. IMPAIRED D11

Reduced visual acuity

LOINC SNOMED CT VISION:FIND:PT:*PATIENT:NON:MDS
45407-4 13164000 Reduced visual acuity (finding)

D1.2. MODERATELY IMPAIRED D12

Poor visual acuity

LOINC SNOMED CT VISION:FIND:PT:*PATIENT:ORD:MDS
45407-4 170728008 Poor visual acuity (finding)

D1.3. HIGHLY IMPAIRED D13

Eyes follow movement, identification of

SNOMED CT 246770004 Pursuit eye movement (finding)

D1.4. SEVERELY IMPAIRED D14

Blindness or low vision

LOINC SNOMED CT VISION:FIND:PT:*PATIENT:ORD:MDS
45407-4 287729001 Blindness or low vision (finding)

D1.6. - UTD D16

D2. Visual Limitations/Difficulties D2

D2.a. Side vision problems D2a

decreased peripheral vision

LOINC SNOMED CT VISION PROBLEMS:FIND:PT:*PATIENT:ORD:MDS
45512-1
<table>
<thead>
<tr>
<th>E1.a. Negative statements</th>
<th>LOINC 45515-4</th>
<th>VISUAL APPLIANCES: FIND: PT = PATIENT: ORD: MDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>E1.d. Persistent anger w/self or others</td>
<td>LOINC 162726003 On examination - angry (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.e. No repetitive (non-health related) complaints</td>
<td>SNOMED CT 247892001 Self-depression (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.f. Unpleasant mood in morning</td>
<td>SNOMED CT 162726003 On examination - angry (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.g. No repetitive health complaints</td>
<td>SNOMED CT 247892001 Self-depression (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.h. Unpleasant mood in morning</td>
<td>SNOMED CT 247892001 Self-depression (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.i. Repetitive anxious complaints</td>
<td>SNOMED CT 285247003 Catastrophization (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.j. Persistent anger w/self or others</td>
<td>SNOMED CT 285247003 Catastrophization (finding)</td>
<td></td>
</tr>
<tr>
<td>E1.k. No repetitive physical movements</td>
<td>SNOMED CT 285247003 Catastrophization (finding)</td>
<td></td>
</tr>
</tbody>
</table>

**SECTION E: MOOD AND BEHAVIOR**

<table>
<thead>
<tr>
<th>E1.a. Indicator of depression, anxiety, or other findings</th>
<th>LOINC 45515-4</th>
<th>VISUAL APPLIANCES: FIND: PT = PATIENT: ORD: MDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>E1.d. Persistent anger w/self or others</td>
<td>LOINC 45515-6</td>
<td>PERSISTENT ANGER WITH SELF OR OTHERS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>E1.e. No repetitive verbalizations</td>
<td>LOINC 45516-2</td>
<td>MAKES NEGATIVE STATEMENTS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>E1.f. No repetitive physical movements</td>
<td>LOINC 45547-7</td>
<td>REPEATED ANXIOUS COMPLAINTS OR CONCERNS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>E1.g. No repetitive questions</td>
<td>LOINC 45516-2</td>
<td>MAKES NEGATIVE STATEMENTS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>E1.h. No repetitive health complaints</td>
<td>LOINC 45547-7</td>
<td>REPEATED ANXIOUS COMPLAINTS OR CONCERNS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>E1.i. No repetitive questions</td>
<td>LOINC 45516-2</td>
<td>MAKES NEGATIVE STATEMENTS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>E1.j. No repetitive physical movements</td>
<td>LOINC 45547-7</td>
<td>REPEATED ANXIOUS COMPLAINTS OR CONCERNS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
</tbody>
</table>

**SECTION D: PHYSICAL APPEARANCE**

<table>
<thead>
<tr>
<th>D2.a. Experiences any of following: see D2b</th>
<th>LOINC 45514-7</th>
<th>NO VISUAL LIMITATIONS: FIND: PT = PATIENT: ORD: MDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>D2.c. None of above</td>
<td>LOINC 45515-4</td>
<td>VISUAL APPLIANCES: FIND: PT = PATIENT: ORD: MDS</td>
</tr>
</tbody>
</table>

**SECTION C: VISION**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>C1.b. Glass lenses</td>
<td>LOINC 45515-4</td>
<td>VISUAL APPLIANCES: FIND: PT = PATIENT: ORD: MDS</td>
</tr>
<tr>
<td>C1.c. Magnifying glass</td>
<td>LOINC 45515-4</td>
<td>VISUAL APPLIANCES: FIND: PT = PATIENT: ORD: MDS</td>
</tr>
</tbody>
</table>

**SECTION B: HEALTH COMPLAINTS**

<table>
<thead>
<tr>
<th>B1.a. Repetitive health complaints</th>
<th>LOINC 45551-9</th>
<th>SAD, PAINED, OR WORRIED FACSIAL EXPRESSIONS: FIND: PT = PATIENT: NOM: MDS</th>
</tr>
</thead>
<tbody>
<tr>
<td>B1.b. No repetitive health complaints</td>
<td>LOINC 45551-9</td>
<td>SAD, PAINED, OR WORRIED FACSIAL EXPRESSIONS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>B1.c. No repetitive physical movements</td>
<td>LOINC 45551-9</td>
<td>SAD, PAINED, OR WORRIED FACSIAL EXPRESSIONS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
<tr>
<td>B1.d. No repetitive physical movements</td>
<td>LOINC 45551-9</td>
<td>SAD, PAINED, OR WORRIED FACSIAL EXPRESSIONS: FIND: PT = PATIENT: NOM: MDS</td>
</tr>
</tbody>
</table>

**SECTION A: ACTIVITY AND INTEREST**

<table>
<thead>
<tr>
<th>A1.a. No withdrawal from activities of interest</th>
<th>LOINC 45551-9</th>
<th>SAD, PAINED, OR WORRIED FACSIAL EXPRESSIONS: FIND: PT = PATIENT: NOM: MDS</th>
</tr>
</thead>
</table>
G1B.B. 2. One person physical assist
G1.b. B.3. Transfer w/ two+ persons phy G1B.B3
G1.B.B. 3. Two+ persons physical assist
G1.b. B.8. No transfer activity occurred G1B.B8
G1.B.B. 8. ADL activity did not occur durit
G1.c. Walk in Room self-perf/support G1c
G1.c. A. Walk in Room self-performance G1cA
G1.c. A.0. Walks in room independently G1cA0
G1.c. A.1. Walks in room w/ supervision G1cA1
G1.c. A.2. Walks in room w/ limited assis G1cA2
G1.c. A.3. Walks in room w/ extensive G1cA3
G1.c. A.4. Walk in room totally dependent G1cA4
G1.c. A.8. No walking in room occurred G1cA8
G1.c. B. Walk in Room support provided G1cB
G1.c. B.0. Walking in room requires no G1cB0
G1.c. B.1. Walking in room w/ setup help G1cB1
G1.c. B.2. Walk in room w/ one person G1cB2
G1.c. B.3. Walk in room w/ two+ persons G1cB3
G1.c. B.8. No walking in room occurred G1cB8
G1.d. Walk in Corridor self-perf/support G1d
G1.d. A. Walk in Corridor self-performance G1dA
G1.d. A.0. Walks in corridor independent G1dA0
G1.d. A.1. Walks in corridor w/ supervision G1dA1
G1.d. A.2. Walks in corridor w/ limited assis G1dA2
G1.d. A.3. Walks in corridor w/ extensive G1dA3
G1.d. A.4. Walk in corridor totally dependent G1dA4
G1.d. A.8. No walking in corridor occurred G1dA8
G1.d. B. Walk in Corridor support provided G1dB
G1.d. B.0. Walking in corridor requires no G1dB0
G1.d. B.1. Walking in corridor w/ setup help G1dB1
G1.d. B.2. Walking in corridor w/ one person G1dB2
G1.d. B.3. Walking in corridor w/ two+ persons G1dB3
G1.d. B.8. No walking in corridor occurred G1dB8
G1.e. Locomotion on unit self-perf/support G1e
G1.e. A. Locomotion on unit self-performance G1eA
G1.e. A.0. Independent locomotion on unit G1eA0
G1.e. A.1. Locomotion on unit w/ supervision G1eA1
G1.e. A.2. Locomotion on unit w/ limited assis G1eA2
G1.e. A.3. Locomotion on unit w/ extensive G1eA3
G1.e. A.4. Locomotion on unit totally dependent G1eA4
G1.e. A.8. No locomotion on unit during G1eA8
G1.e. B. Locomotion on unit support provided G1eB
G1.e. B.0. Locomotion on unit w/ no seta G1eB0
G1.e. B.1. Locomotion on unit w/ setup help G1eB1
G1.e. B.2. Locomotion on unit w/ one person G1eB2
G1.e. B.3. Locomotion on unit w/ two+ persons G1eB3
G1.e. B.8. No locomotion on unit during G1eB8
G1.f. Locomotion off unit self-perf/support G1f
G1.f. A. Locomotion off unit self-perform G1fA
G1.f. A.0. Independent locomotion off G1fA0
G1.f. A.1. Locomotion off unit w/ limited G1fA1
G1.f. A.2. Locomotion off unit w/ limited G1fA2
G1.f. A.3. Locomotion off unit w/ extensive G1fA3
G1.f. A.4. Locomotion off unit totally dependent G1fA4
G1.f. A.8. No locomotion off unit during G1fA8
G1.f. B. Locomotion off unit support provided G1fB
G1.f. B.0. Locomotion off unit w/ no setup G1fB0
G1.f. B.1. Locomotion off unit w/ setup help G1fB1

Assistance from two or more persons nLOINC 45591-5 TRANSFER - SUPPORT PROVIDED:FIND:PT:**PATIENT:NOM:MDS
SNOMED CT 129047006 Transfer assisted (finding)

WALK IN ROOM - SELF-PERFORMANCE:FIND:PT:**PATIENT:NOM:MDS
LOINC 45592-3 Does not walk (finding)

WALK BETWEEN LOCATIONS IN ROOM ONLY:LOINC 282147000 Does not walk (finding)

ASSISTANCE FROM ONE PERSON NEEDED TO LOINC 45593-1

WALK IN CORRIDOR W/ ONE PERSON:LOINC 301499006 Does not walk (finding)

WALK IN CORRIDOR W/ TWO+ PERSONS:LOINC 282147000 Does not walk (finding)

WALK IN ROOM W/ ONE PERSON:LOINC 282147000 Does not walk (finding)

WALK IN ROOM W/ TWO+ PERSONS:LOINC 282147000 Does not walk (finding)

WALK IN ROOM:LOINC 282147000 Does not walk (finding)

WALK IN ROOM WITH OCCASIONAL:LOINC 165245003 Independent walking (finding)

WALK IN ROOM WITH PHYSICAL:LOINC 165245003 Independent walking (finding)

WALK IN ROOM W/ EXTENSIVE:LOINC 165245003 Independent walking (finding)

WALK IN ROOM TOTALLY DEPENDENT:LOINC 165245003 Independent walking (finding)

WALK IN CORRIDOR:LOINC 165245003 Independent walking (finding)

WALK IN CORRIDOR W/ ONE PERSON:LOINC 165245003 Independent walking (finding)

WALK IN CORRIDOR W/ TWO+ PERSONS:LOINC 165245003 Independent walking (finding)

ASSISTANCE FROM ONE PERSON TO LOINC 45591-5

ASSISTANCE FROM TWO OR MORE PERSONS:LOINC 45591-5

ASSISTANCE FROM TWO OR MORE PERSONS:LOINC 45591-5

SAFETY EXISTENCE:LOINC 45598-0

SAFETY EXISTENCE:LOINC 45598-0

SAFETY EXISTENCE:LOINC 45598-0

SAFETY EXISTENCE:LOINC 45598-0

SAFETY EXISTENCE:LOINC 45598-0

SAFETY EXISTENCE:LOINC 45598-0

SAFETY EXISTENCE:LOINC 45598-0
G1.f.2. Locomotion off unit w/ one per G1f.B.
Assistance from one person needed to rLOINC
45599-8 LOCOMOTION OFF UNIT - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
G1.f.B.3. Locomotion off unit w/ two+ per G1f.B.
Assistance from 2 or more persons needed LOINC
45599-8 LOCOMOTION OFF UNIT - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
G1.f.B.8. No locomotion off unit during G1f.B.
Did not move about off unit
LOINC
45599-8 LOCOMOTION OFF UNIT - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS

g.1. Dressing self-perf/support G1g

g.1.a. Dressing self-performance G1gA
Dresses self and applies prosthesis
ind LOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129035000 Independent with dressing (finding)
G1gA0
Dresses independently G1gA0
Dresses self and applies prosthesis withLOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284973007 Able to dress (finding)
G1gA1
Dresses self w/ supervision G1gA1
Dresses self and applies prosthesis withLOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129039006 Needs help with dressing (finding)
G1gA2
Dresses self w/ limited assistance G1gA2
Dresses self and applies prosthesis withLOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129039006 Needs help with dressing (finding)
G1gA3
Dresses self w/ extensive assist G1gA3
Dresses self and applies prosthesis withLOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129039006 Needs help with dressing (finding)
G1gA4
Dressing totally dependent G1gA4
Clothing and prosthesis only with assistLOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129065005 Dependent for dressing (finding)
G1gA8
No dressing during entire 7-ds G1gA8
No wearing of street clothes or prosthesis
LOINC
45600-4 DRESSING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284976004 Does not dress (finding)

g.1.b. Dressing support provided G1gB

g.1.b.0. Dressing requires no setup or G1gB0
No setup or physical help needed to dressLOINC
45601-2 DRESSING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129035000 Independent with dressing (finding)
G1gB1
Dressing requires setup help G1gB1
Setup help needed to dress self or applyLOINC
45601-2 DRESSING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129035000 Independent with dressing (finding)
G1gB2
Dressing requires one person G1gB2
Assistance from one person needed to dressLOINC
45601-2 DRESSING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129035000 Independent with dressing (finding)
G1gB3
Dressing requires 2-4 persons G1gB3
Assistance from 2 or more persons neededLOINC
45601-2 DRESSING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129035000 Independent with dressing (finding)
G1gB8
No dressing occurred during G1gB8
Did not dress or apply prosthesis
LOINC
45601-2 DRESSING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284976004 Does not dress (finding)

g.1.h. Eating self-perf./support G1h

g.1.h.0. Eating self-performance G1hA
Eats independently
LOINC
45602-0 EATING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
165224005 Independent feeding (finding)
G1hA0
Eats with occasional cueing and/or assistLOINC
45602-0 EATING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
165223004 Needs help with feeding (finding)
G1hA1
Eats with limited assistance G1hA1
Eats with physical help
LOINC
45602-0 EATING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
289034002 Difficulty feeding self (finding)
G1hA2
Eats with extensive assistance G1hA2
Eats with extensive assistance
LOINC
45602-0 EATING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
289034002 Difficulty feeding self (finding)
G1hA3
Eating totally dependent G1hA4
Food and fluids only with assistance
LOINC
45602-0 EATING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
289030008 Does not feed self (finding)
G1hA8
No eating during entire 7-day G1hA8
No intake of nourishment
LOINC
45602-0 EATING - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284976004 Does not eat (finding)
G1hB0
Eating support provided G1hB
No setup or physical help needed to eat
LOINC
45603-8 EATING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
165224005 Independent feeding (finding)
G1hB1
Eating requires setup help G1hB1
Setup help needed to eat or drink
LOINC
45603-8 EATING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
165223004 Needs help with feeding (finding)
G1hB2
Eating requires one person G1hB2
One person assistance needed to eat or drinkLOINC
45603-8 EATING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
165223004 Needs help with feeding (finding)
G1hB3
Eating requires two+ persons G1hB3
2 or more person assistance needed to eatLOINC
45603-8 EATING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
165223004 Needs help with feeding (finding)
G1hB8
No eating during entire 7-day G1hB8
No intake of nourishment
LOINC
45603-8 EATING - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
G1i. Toilet use self-perf./support G1i
G1i.A.0. Uses toilet independently G1iA0
Manages all aspects of elimination inde
LOINC
45604-6 TOILET USE - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284900006 Able to perform toileting activities (finding)
G1iA1
Manages all aspects of elimination w/LOINC
45604-6 TOILET USE - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284900006 Able to perform toileting activities (finding)
G1iA2
Uses toilet w/ limited assistance G1iA2
Manages all aspects of elimination withLOINC
45604-6 TOILET USE - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129045003 Needs help with toileting (finding)
G1iA3
Uses toilet w/ extensive assist G1iA3
Requires extensive assistance for all asLOINC
45604-6 TOILET USE - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284905001 Difficulty performing toileting activities (finding)
G1iA4
Toilet use totally dependent G1iA4
All aspects of elimination only with assistLOINC
45604-6 TOILET USE - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284901005 Unable to perform toileting activities (finding)
G1iA8
No toilet use during entire 7-d G1iA8
No toileting
LOINC
45604-6 TOILET USE - SELF-PERFORMANCE:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
284902003 Does perform toileting activities (finding)
G1iB0
Toilet use support provided G1iB
No setup or physical help needed for an
LOINC
45605-3 TOILET USE - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129062008 Independent in toilet (finding)
G1iB1
Toilet use requires setup help G1iB1
Setup help needed to manage aspects
LOINC
45605-3 TOILET USE - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129045003 Needs help in toilet (finding)
G1iB2
Toilet use requires one person G1iB2
 Assistance from one person needed to r
LOINC
45605-3 TOILET USE - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129045003 Needs help in toilet (finding)
G1iB3
Toilet use requires two+ persons G1iB3
 Assistance from two or more persons
LOINC
45605-3 TOILET USE - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
SNOmed CT
129045003 Needs help in toilet (finding)
G1iB8
No toilet use during entire 7-ds G1iB8
No toileting
LOINC
45605-3 TOILET USE - SUPPORT PROVIDED:FIND:PT:**PATIENT:NON:MODS
G1.1. A. Personal hygiene self perform 01(A).
G1.1. A.1. Independent personal hygiene 01(A)0.
G1.1. A.1.1. Personal hygiene w/ supervision 01(A)1.
G1.1. A.1.1.1. Personal hygiene w/ supervision 01(A)1.
G1.1. A.1.2. Independent personal hygiene 01(A)2.
G1.1. A.1.2.1. Personal hygiene w/ physical assistance 01(A)2.
G1.1. A.1.3. Independent personal hygiene 01(A)3.
G1.1. A.1.3.1. Personal hygiene w/ external physical assistance 01(A)3.
G1.1. A.1.4. Independent personal hygiene totally dependent 01(A)4.
G1.1. A.8. No personal hygiene during or before 01(A)8.
G1.1. B. Personal hygiene support provided 01(B).
G1.1. B.0. Personal hygiene support no 01(B)0.
G1.1. B.1. Personal hygiene support provided 01(B)1.
G1.1. B.1.1. Personal hygiene support provided 01(B)1.
G1.1. B.1.2. Personal hygiene support provided 01(B)1.
G1.1. B.1.3. Personal hygiene support provided 01(B)1.
G1.1. B.1.4. No personal hygiene during or before 01(B)1.
G2. Bathing.
G2.2. Bathing self performance 02A.
G2.2. A. Bathes independently 02A0.
G2.2. A.2. Bathes w/ physical help for tran 02A2.
G2.2. A.3. Requires physical help in part of 02A3.
G2.2. A.8. No bathing during entire 7-day 02A8.
G2.2. B. Bathing support provided 02B.
G2.2. B.0. Bathing requires no setup or 02B0.
G2.2. B.2. Bathing requires one person 02B2.
G2.2. B.3. Bathing requires two persons 02B3.
G2.2. B.8. No bathing during entire 7-day 02B8.
G2.3. Test for Balance.
G2.3. a. Balance while standing 03a.
G2.3. a.0. Maintained position as required 03a0.
G2.3. a.1. Unsteady, able to balance 03a1.
G2.3. a.2. Partial physical support during 03a2.
G2.3. a.3. Not able to attempt test without 03a3.
G2.3. b. Balance while sitting 03b.
G2.3. b.0. Maintained position as required 03b0.
G2.3. b.1. Unsteady, able to balance 03b1.
G2.3. b.2. Partial physical support during 03b2.
G2.3. b.3. Not able to attempt test without 03b3.
G4. a.0. No limitation in range of mot 04a0.
G4. a.1. Limitation of range of motion 04a1.
G4. a.2. Limitation of range of motion 04a2.
G4. b.0. No loss of voluntary movement 04b0.
G4. b.2. Full loss of voluntary move 04b2.
G4. b.3. Not able to attempt test without 04b3.
G4. c. Range of motion in arm 04c.
G4. c.0. No limitation in range of mot 04c0.
G4. c.1. Limitation of range of motion 04c1.
G4. c.2. Limitation of range of motion 04c2.
G4. c.3. Not able to attempt test without 04c3.
G4.b.A1. Limitation of range of motion (04bA1)  Limitation of range of motion on one side of arm, shoulder, elbow
G4.b.A2. Limitation of range of motion (04bA2)  Limitation of range of motion on both sides of arm, shoulder, elbow
G4.b.B. Voluntary movement of arm, sh (04bB)  No loss of voluntary movement of arm, shoulder, elbow
G4.b.B.0. No loss of voluntary movement (04bB0)  No loss of voluntary movement of arm, shoulder, elbow
G4.b.B.2. Full loss of voluntary movement (04bB2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c. Range of motion in hand, wrist, ft (04cB)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.A. Range of motion limitation in ha (04cA)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.A.0. No limitation of range of mot (04cA0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.A.1. Limitation of range of motion (04cA1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.A.2. Limitation of range of motion (04cA2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.B. Voluntary movement of hand, w (04cB)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.B.0. No loss of voluntary movement (04cB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.B.1. Partial loss of voluntary move (04cB1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.c.B.2. Full loss of voluntary movement (04cB2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d. Range of motion in leg, hp, knee (04dB)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.A. Range of motion limitation in le (04dA)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.A.0. No limitation of range of mot (04dA0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.A.1. Limitation of range of motion (04dA1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.A.2. Limitation of range of motion (04dA2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.B. No loss of voluntary movement (04dB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.B.0. No loss of voluntary movement (04dB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.d.B.2. Full loss of voluntary movement (04dB2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e. Range of motion in foot, ankle, toe (04eB)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.A. Range of motion limitation in fo (04eA)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.A.0. No limitation of range of mot (04eA0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.A.1. Limitation of range of motion (04eA1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.A.2. Limitation of range of motion (04eA2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.B. No loss of voluntary movement (04eB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.B.0. No loss of voluntary movement (04eB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.B.1. Partial loss of voluntary move (04eB1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.e.B.2. Full loss of voluntary movement (04eB2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f. Other limitation of range of motion (04f)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.A. Limitation of range of motion (04fA)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.A.0. No limitation of range of mot (04fA0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.A.1. Limitation of range of motion (04fA1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.A.2. Limitation of range of motion (04fA2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B. No loss of voluntary movement (04fB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B.0. No loss of voluntary movement (04fB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B.1. Partial loss of voluntary move (04fB1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B.2. Full loss of voluntary movement (04fB2)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.0. Limitation of range of motion of o (04f0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B.0. Limitation of range of motion of o (04fB0)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B.1. Partial loss of voluntary move (04fB1)  Full loss of voluntary movement of arm, shoulder, elbow
G4.f.B.2. Full loss of voluntary movement (04fB2)  Full loss of voluntary movement of arm, shoulder, elbow
G5. Modes of locomotion (05)
G5.a. Cane/walker/crutch (05a)
G5.b. Wheel self (05b)
G5.c. Other person wheeled (05c)
G5.d. Wheelchair primary mode of loco (05d)
G5.e. None of above (05e)
G6. Modes of Transfer (06)
G6.a. Bedfast all or most of time (06a)
G6.b. Bed rails used for bed mobility (06b)
G6.c. Lifted manually (06c)
G6.d. Lifted mechanically (06d)
G6.e. Transfer aid... (06e)
G6.f. None of above (06f)
G7. Task Segmentation (07)
G7.0. No (070)
G7.1. Yes (071)
G7.2. - UTD (072)
G8. ADL Functional Rehab Potential (08)
G8.a. Resident believes he/she is capable (08a)
G8.b. Direct care staff believe resident i (08b)
G8.c. Resident able to perform task/act (08c)
G8.d. Difference in ADL Self-Performan (08d)
### Section H: Continence in Last 1 Week

#### H1. Continence Self-Control Categories

<table>
<thead>
<tr>
<th>Subsection</th>
<th>Description</th>
<th>LOINC Code</th>
<th>SNOMED CT Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>H1.a.1. Continuity</td>
<td>Completely continent</td>
<td>BOWEL CONTINENCE:FIND:PT:*PATIENT:ORD:MDS 45616-6</td>
<td>SNOMED CT 40500000 Ability to maintain bowel continence (observable entity)</td>
</tr>
<tr>
<td>H1.a.2. Occasional Incontinence</td>
<td>Bowel incontinence episodes once a week</td>
<td>BOWEL CONTINENCE:FIND:PT:*PATIENT:ORD:MDS 45618-6</td>
<td>SNOMED CT 406217005 Bowel continence status (observable entity)</td>
</tr>
<tr>
<td>H1.a.3. Frequently Incontinent</td>
<td>Has episodes of bowel incontinence</td>
<td>BOWEL CONTINENCE:FIND:PT:*PATIENT:ORD:MDS 45619-7</td>
<td>SNOMED CT 406218006 Bowel continence status (observable entity)</td>
</tr>
</tbody>
</table>

#### H1.a.1. Usually Continent

| SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT |
|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|
| 40500000  | Ability to maintain bowel continence (observable entity) | 406217005 | Bowel continence status (observable entity) | 406218006 | Bowel continence status (observable entity) | 406219007 | Bowel continence status (observable entity) | 406220008 | Bowel continence status (observable entity) | 406221009 | Bowel continence status (observable entity) | 406222000 | Bowel continence status (observable entity) | 406223001 | Bowel continence status (observable entity) | 406224002 | Bowel continence status (observable entity) | 406225003 | Bowel continence status (observable entity) | 406226004 | Bowel continence status (observable entity) | 406227005 | Bowel continence status (observable entity) | 406228006 | Bowel continence status (observable entity) |

#### H1.a.2. Occasionally Incontinent

| SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT |
|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|
| 40500000  | Ability to maintain bowel continence (observable entity) | 406217005 | Bowel continence status (observable entity) | 406218006 | Bowel continence status (observable entity) | 406219007 | Bowel continence status (observable entity) | 406220008 | Bowel continence status (observable entity) | 406221009 | Bowel continence status (observable entity) | 406222000 | Bowel continence status (observable entity) | 406223001 | Bowel continence status (observable entity) | 406224002 | Bowel continence status (observable entity) | 406225003 | Bowel continence status (observable entity) | 406226004 | Bowel continence status (observable entity) | 406227005 | Bowel continence status (observable entity) | 406228006 | Bowel continence status (observable entity) |

#### H1.a.3. Frequently Incontinent

| SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT | SNOMED CT | LOINC CT |
|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|-----------|----------|
| 40500000  | Ability to maintain bowel continence (observable entity) | 406217005 | Bowel continence status (observable entity) | 406218006 | Bowel continence status (observable entity) | 406219007 | Bowel continence status (observable entity) | 406220008 | Bowel continence status (observable entity) | 406221009 | Bowel continence status (observable entity) | 406222000 | Bowel continence status (observable entity) | 406223001 | Bowel continence status (observable entity) | 406224002 | Bowel continence status (observable entity) | 406225003 | Bowel continence status (observable entity) | 406226004 | Bowel continence status (observable entity) | 406227005 | Bowel continence status (observable entity) | 406228006 | Bowel continence status (observable entity) |

### Notes
- Section H: Continence in Last 1 Week covers the evaluation of bowel continence in the last week.
- Each subsection includes detailed assessments and possible procedures for managing bowel continence issues.
- SNOMED CT codes are provided for each category to facilitate standardized data collection and reporting.
H2. Bowel Elimination Pattern

H2.a. Elimination pattern regular

H2.b. Constipation

H2.c. Diarrhea

H2.d. Fecal impaction

H2.e. NONE OF ABOVE

H3. Appliances and Programs

H3.a. Any scheduled toileting plan

H3.b. Bladder retraining program

H3.c. External (condom) catheter

H3.d. Indwelling catheter

H3.e. Intermittent catheter

H3.f. Did not use toilet room/commode/urinal
Snomed CT 129045003 Needs help in toilet (finding)
Snomed CT 373191003 Self-toileting deficit (finding)
Snomed CT 284901005 Unable to perform toileting activities (finding)
Snomed CT 284914006 Unable to use commode (finding)

H3.g. Pads/briefs used
Snomed CT 38561-9 PADS OR BRIEFS USED:FIND:PT:*PATIENT:ORD:MDS
Snomed CT 385610007 Briefs (physical object)
Snomed CT 52065008 Diaper, device (physical object)
Snomed CT 339123006 Disposable bed pad (physical object)
Snomed CT 74300007 Sanitary pad, device (physical object)
Snomed CT 252900060 Urinary pad weighing (procedure)

H3.h. Enemas/irrigation
Snomed CT 45632-7 ENEMAS & OR IRRIGATION:FIND:PT:*PATIENT:ORD:MDS
Snomed CT 385618005 Enema (product)
Snomed CT 385711002 Enema administration management (procedure)
Snomed CT 385710001 Enema administration education (procedure)
Snomed CT 45925007 Enema for removal of impacted feces (procedure)
Snomed CT 287612004 Evacuation by irrigation NOS (procedure)
Snomed CT 37889009 Irrigation (procedure)
Snomed CT 386225006 Irrigation of bowel (procedure)
Snomed CT 174228003 Irrigation of colon (procedure)
Snomed CT 233537000 Irrigation of colon via cecostomy tube (procedure)
Snomed CT 28177007 Rectal irrigation (procedure)
Snomed CT 26684008 Simple enema administered (procedure)
Snomed CT 21373005 Soap enema (substance)
Snomed CT 22515002 Sloma irrigation (regime/therapy)

H3.i. Ostomy present
Snomed CT 45633-5 OSTOMY PRESENT:FIND:PT:*PATIENT:ORD:MDS
Snomed CT 401790000 Ostomy adhesive discs (physical object)
Snomed CT 401770004 Ostomy adhesive plasters (physical object)
Snomed CT 385712009 Ostomy care (regime/therapy)
Snomed CT 410990002 Ostomy care assessment (regime/therapy)
Snomed CT 385713004 Ostomy irrigation (regime/therapy)
Snomed CT 17098009 Ostomy monitoring (regime/therapy)
Snomed CT 170901005 Ostomy patient problem (finding)
Snomed CT 40595002 Ostomy self-management behavior (observable entity)

H3.j. NONE OF ABOVE
Snomed CT 45634-3 CONTINENCE APPLIANCES AND PROGRAMS - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MDS

H4. Urinary continence changed
H4.0. No change
Snomed CT 281047000 Bladder continence assessment (regime/therapy)
Snomed CT 416865006 Continence assessment (regime/therapy)
Snomed CT 417301002 Continence reassessment (regime/therapy)
Snomed CT 423821000 Urinary continence status (observable entity)

H4.1. Improved
Snomed CT 45635-0 CHANGE IN URINARY CONTINENCE:FIND:PT:*PATIENT:NOM:MDS
Snomed CT 281047000 Bladder continence assessment (regime/therapy)
Snomed CT 416865006 Continence assessment (regime/therapy)
Snomed CT 417301002 Continence reassessment (regime/therapy)
Snomed CT 423821000 Urinary continence status (observable entity)

H4.2. Deteriorated
Snomed CT 45635-5 CHANGE IN URINARY CONTINENCE:FIND:PT:*PATIENT:NOM:MDS
Snomed CT 281047000 Bladder continence assessment (regime/therapy)
Snomed CT 416865006 Continence assessment (regime/therapy)
Snomed CT 417301002 Continence reassessment (regime/therapy)
Snomed CT 423821000 Urinary continence status (observable entity)

H4.3. - UTD urinary continence status
Snomed CT 385714009 Urinary continence status NOS (procedure)
Snomed CT 385713004 Ostomy irrigation (regime/therapy)
Snomed CT 17098009 Ostomy monitoring (regime/therapy)
Snomed CT 170901005 Ostomy patient problem (finding)
Snomed CT 40595002 Ostomy self-management behavior (observable entity)
<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
<th>SNOMED CT</th>
<th>LOINC</th>
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<tr>
<td>I1.1f</td>
<td>Manic depression (bipolar disease)</td>
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<td>I1.g</td>
<td>Deep vein thrombosis</td>
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<td>I1.gg</td>
<td>Clostridium difficile (c. diff.)</td>
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<td>I1.h</td>
<td>Hypertension</td>
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<td>I1.hh</td>
<td>Asthma</td>
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<tr>
<td>I1.i</td>
<td>Hypertension</td>
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<tr>
<td>I1.ii</td>
<td>Emphysema/COPD</td>
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<td>I1.j</td>
<td>Peripheral vascular disease</td>
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<tr>
<td>I1.k</td>
<td>Other cardiovascular disease</td>
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<td>Diabetic retinopathy</td>
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<td>Arthritis</td>
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<td>Glaucoma</td>
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<td>I1.l2</td>
<td>Infections</td>
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<td>I1.m</td>
<td>Hip fracture</td>
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<tr>
<td>I1.mm</td>
<td>Macular degeneration</td>
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<tr>
<td>I1.n</td>
<td>Missing limb (e.g., amputation)</td>
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<tr>
<td>I1.nn</td>
<td>Allergies</td>
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<tr>
<td>I1.o</td>
<td>Osteoporosis</td>
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<td>Anemia</td>
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<tr>
<td>I1.p</td>
<td>Pathological bone fracture</td>
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<td>I1.pp</td>
<td>Cancer</td>
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<td>Alzheimer's disease</td>
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<td>I1.qq</td>
<td>Renal failure</td>
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<td>I1.s</td>
<td>Cerebral palsy</td>
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<td>I1.rr</td>
<td>Cerebrovascular accident (stroke)</td>
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<td>I1.u</td>
<td>Dementia other than Alzheimer's disease</td>
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<td>I1.v</td>
<td>Hemiplegia/Hemiparesis</td>
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<td>Parkinson's disease</td>
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<td>Quadriplegia</td>
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<td>I2</td>
<td>Infections</td>
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<td>I2.a</td>
<td>Antibiotic resistant infection (e.g., MRSA)</td>
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<tr>
<td>I2.b</td>
<td>Clostridium difficile (c. diff.)</td>
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<td>I2.c</td>
<td>Conjunctivitis</td>
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<td>I2.d</td>
<td>HIV infection</td>
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<tr>
<td>I2.e</td>
<td>Pneumonia</td>
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</tbody>
</table>
I2.f. Respiratory infection  
I2g. Septicemia  
I2h. Sexually transmitted diseases  
I2i. Tuberculosis  
I2j. Urinary tract infection in last 30 days  
I2k. Viral hepatitis  
I2l. Wound infection  
I2.m. NONE OF ABOVE  
I3. Other current diagnoses  
I3a. Other current diagnoses (1)  
I3b. Other current diagnoses (2)  
I3c. Other current diagnoses (3)  
I3d. Other current diagnoses (4)  
I3e. Other current diagnoses (5)  
SECTION J: HEALTH CONDITIONS  
J1. Problem Conditions  
J1.a. Weight gain/loss of 3 or more pounds  
J1.b. Inability to lie flat due to shortness of breath  
J1.c. Dehydrated, output exceeds input  
J1.d. Insufficient fluid intake during last 24h  
J1.e. Delusions  
J1.f. Dizziness/Vertigo  
J1.g. Edema  
J1.h. Fever  
J1.i. Hallucinations  
J1.j. Internal bleeding  
J1.k. Recurrent lung aspirations in last 5 days  
J1.i. Shortness of breath  
J1.m. Syncope (fainting)  
J1.n. Unsteady gait  
J1.o. Vomiting  
J1.p. NONE OF ABOVE  
J2. Pain Symptoms  
J2.1. Pain less than daily  
J2.2. Pain daily  
J2.3. - UTD  
J2.b. Intensity of pain  
J2.b.1. Mild pain  
J2.b.2. Moderate pain  
J2.b.3. Times when pain is horrible or excruciating  
J2.b.4. - UTD  
J3. Other conditions  
J3.a. Back pain  
J3.b. Bone pain  

LOINC 45685-5 RESPIRATORY TRACT INFECTION:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 275408002 Respiratory tract infection (disorder)
LOINC 45686-3 SEPTICEMIA:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 105592009 Septicemia (disorder)
LOINC 45687-1 SEXUALLY TRANSMITTED DISEASE:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 899809 Sexual transmitted infectious disease (disorder)
LOINC 45688-9 TUBERCULOSIS:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 18628009 Tuberculosis NOS (disorder)
LOINC 45697-0 URINARY TRACT INFECTION IN LAST 30 DAYS:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 19793008 Urinary tract infection, site not specified NOS (disorder)
LOINC 45698-8 UNSTEADY GAIT:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 37380000 Local infection of wound (disorder)
LOINC 45700-2 SYNCOPE:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 267104002 Syncope (fainting)
LOINC 45701-0 VOMITING:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 30395004 Finding of vomiting (finding)
LOINC 45703-6 INABILITY TO LIE FLAT DUE TO SHORTNESS OF BREATH:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 62744002 Orthopnea (finding)
LOINC 45704-4 INFECTIOUS DISEASES:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 162685008 Finding of insufficient fluid intake (finding)
LOINC 45705-2 MILD PAIN:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 394616008 Finding of a pain (finding)
LOINC 45706-9 MILD PAIN:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 40464003 Dizziness (finding)
LOINC 45707-7 INTERNAL BLEEDING:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 195511004 Hemorrhage NOS (disorder)
LOINC 45709-3 PROBLEM CONDITIONS - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 45710-6 PAIN FREQUENCY:NRAUT:PT:*PATIENT:ORD:MDS
LOINC 45710-7 PAIN FREQUENCY:NRAUT:PT:*PATIENT:ORD:MDS
SNOMED CT 394615006 Finding of vomiting (finding)
LOINC 45714-8 BACK PAIN:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 491258005 Back pain (finding)
LOINC 45715-3 BONE PAIN:FIND:PT:*PATIENT:ORD:MDS

SNOMED CT 45699-7 WEIGHT FLUCTUATION 3+ LBS. IN 7 DAYS:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 365921005 Weight change finding (finding)
LOINC 45701-9 INABILITY TO LIE FLAT DUE TO SHORTNESS OF BREATH:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 62744002 Orthopnea (finding)
LOINC 45703-6 INFECTIOUS DISEASES:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 162685008 Finding of insufficient fluid intake (finding)
LOINC 45706-9 MILD PAIN:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 40464003 Dizziness (finding)
LOINC 45707-7 INTERNAL BLEEDING:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 195511004 Hemorrhage NOS (disorder)
LOINC 45709-3 PROBLEM CONDITIONS - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 45710-6 PAIN FREQUENCY:NRAUT:PT:*PATIENT:ORD:MDS
LOINC 45710-7 PAIN FREQUENCY:NRAUT:PT:*PATIENT:ORD:MDS
SNOMED CT 394615006 Finding of vomiting (finding)
LOINC 45714-8 BACK PAIN:FIND:PT:*PATIENT:ORD:MDS
SNOMED CT 491258005 Back pain (finding)
LOINC 45715-3 BONE PAIN:FIND:PT:*PATIENT:ORD:MDS
J3.c. Chest pain while doing usual activities J3c
Chest pain while doing usual activities
SNOMED CT 12584003 Bone pain (finding)

J3.d. Headache J3d
Headache
LOINC 45714-3 CHEST PAIN DURING USUAL ACTIVITIES:FIND:PT:*PATIENT:ORD:MD

J3.e. Hip pain J3e
Hip pain
SNOMED CT 25094002 Headache (finding)

J3.f. Incisional pain J3f
Incisional pain
LOINC 45716-8 HIP PAIN:FIND:PT:*PATIENT:ORD:MD

J3.g. Joint pain (other than hip) J3g
Joint pain (other than hip)
LOINC 49218002 Hip pain (finding)

J3.h. Soft tissue pain (e.g., lesion, muscle) J3h
Soft tissue pain (e.g., lesion, muscle)
SNOMED CT 57676002 Joint pain (finding)

J3.i. Stomach pain J3i
Stomach pain
LOINC 45720-0 STOMACH PAIN:FIND:PT:*PATIENT:ORD:MD

J3.j. Other J3j
LOINC 21522001 Abdominal pain (finding)

J4. Accidents J4
LOINC 45721-8 OTHER PAIN:FIND:PT:*PATIENT:ORD:MD

J4.a. Fell in past 30 days J4a
Resident fell
LOINC 45722-6 FELL IN PAST 30D:FIND:PT:*PATIENT:ORD:MD

J4.b. Fell in past 31-180 days J4b
Falls (finding)
SNOMED CT 161898004 Falls (finding)

J4.c. Hip fracture in last 180 days J4c
Hip fracture
LOINC 45724-2 HIP FRACTURE IN LAST 180D:FIND:PT:*PATIENT:ORD:MD

J4.d. Other fracture in last 180 days J4d
FRACTURE OTHER THAN HIP
SNOMED CT 263230006 Hip fracture NOS (disorder)

J4.e. NONE OF ABOVE J4e
ACUTE EPISODE OF RECURRENT/CHRONIC PROBLEM: FIND:PT:* PATIENT: ORD:MD
LOINC 45726-7 ACADICNTS - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MD

J5. Stability of Conditions J5
K1. Oral Problems K1
C1.a. Chewing problem C1a
Chewing problem
LOINC 45731-7 CHEWING PROBLEM:FIND:PT:*PATIENT:ORD:MD

K1.b. Swallowing problem K1b
Swallowing problem
SNOMED CT 45732-5 SWALLOWING PROBLEM:FIND:PT:*PATIENT:ORD:MD

K1.c. Mouth pain K1c
Mouth pain
LOINC 45733-3 MOUTH PAIN:FIND:PT:*PATIENT:ORD:MD

K1.d. NONE OF ABOVE K1d
MOUTH PAIN (disorder)
LOINC 102616008 Painful mouth (finding)

K2. Height and Weight K2
K2.a. Height in inches K2a
Height in inches
SNOMED CT 162755006 On examination - height (finding)

K2.b. Weight in pounds K2b
Weight in pounds
SNOMED CT 162763007 On examination - weight (finding)

K3. Weight Change K3
K3.a. Weight Loss of 5% or more K3a
K3.a.0. No weight loss
LOINC 45739-9 WEIGHT LOSS:FIND:PT:*PATIENT:ORD:MD

K3.a.1. Yes K3a1
Weight loss
SNOMED CT 271398006 Weight steady (finding)

K3.a.2. - UTD K3a2
K3.a.2.0. UTD weight loss
LOINC 45735-8 WEIGHT LOSS:FIND:PT:*PATIENT:ORD:MD

K3.b. Weight Gain of 5% or more K3b
K3.b.0. No weight gain
LOINC 45736-6 WEIGHT GAIN:FIND:PT:*PATIENT:ORD:MD

K3.b.1. Yes K3b1
Weight gain
SNOMED CT 271398006 Weight steady (finding)

K3.b.2. - UTD K3b2
K3.b.2.0. UTD weight gain
LOINC 45736-6 WEIGHT GAIN:FIND:PT:*PATIENT:ORD:MD

K4. Nutritional Problems K4
K4.a. Complains about the taste of many foods K4a
Complains about the taste of many food
LOINC 45737-4 COMPLAINS ABOUT TASTE OF MANY FOODS:FIND:PT:*PATIENT:ORD:MD

K4.b. Regular or repetitive complaints of hunger K4b
Regular or repetitive complaints of hunger
SNOMED CT 49472009 Always hungry (finding)

K4.c. Leaves 25% or more of food uneaten K4c
Leaves food uneaten
LOINC 45739-0 LEAVES 25% FOOD UNEATEEN AT MOST MEALS:FIND:PT:*PATIENT:ORD:MD

K4.d. NONE OF ABOVE K4d
NUTRITIONAL PROBLEMS - NONE OF ABOVE:FIND:PT:*PATIENT:ORD:MD
LOINC 45740-8 NUTRITIONAL PROBLEMS:FIND:PT:*PATIENT:ORD:MD

K5. Nutritional Approaches K5
K5.a. Parenteral IV K5a
Nutrition by parenteral IV
LOINC 45741-6 PARENTERAL IV:FIND:PT:*PATIENT:ORD:MD

K5.f. Feeding tube K5f
K5.f.0. Nutrition by feeding tube
LOINC 45742-4 FEEDING TUBE:FIND:PT:*PATIENT:ORD:MD

K5.g. Plate guard, stabilized built-up utensils K5g
Plate guard, stabilized built-up utensils, etc.
SNOMED CT 39593004 Tube feeding by syringe method (regime/therapy)

K5.h. Dietary supplement between meals K5h
Dietary supplement between meals
LOINC 45745-5 DIETARY SUPPLEMENT BETWEEN MEALS:FIND:PT:*PATIENT:ORD:MD

K5.i. Dietary supplement between meals K5i
Dietary supplement between meals
LOINC 45746-5 DIETARY SUPPLEMENT BETWEEN MEALS:FIND:PT:*PATIENT:ORD:MD
M2. Type of Ulcer
M2a. Pressure Ulcer highest stage
M2a0. No ulcer
M2a1. Stage 1 ulcer
M2a2. Stage 2 ulcer
M2a3. Stage 3 ulcer
M2a4. Stage 4 ulcer

M2a0. No ulcer
No pressure ulcer

M2a1. Stage 1 ulcer
Stage 1 pressure ulcer

M2a2. Stage 2 ulcer
Stage 2 pressure ulcer

M2a3. Stage 3 ulcer
Stage 3 pressure ulcer

M2a4. Stage 4 ulcer
Stage 4 pressure ulcer
On examination - no skin ulcer (situation)
Non-pressure ulcer lower limb (disorder)
Mixed arteriovenous leg ulcer (disorder)
Chronic ulcer of lower extremity (disorder)
Venous ulcer of leg (disorder)
Pressure ulcer Stage 4 care (regime/therapy)
Ulcer of lower extremity (disorder)
History of - venous leg ulcer (situation)
Leg ulcer NOS (disorder)
Pressure ulcer Stage 4 care (regime/therapy)
History of - venous leg ulcer (situation)
Ulcer of lower extremity (disorder)
Pressure ulcer surface area (observable entity)
Pressure ulcer exudate amount (observable entity)
Stage 3 or 4 pressure ulcers acquired after admission to a healthcare facility (event)
Resident had an ulcer that was resolve
Stage 1 stasis ulcer
Stage 2 stasis ulcer
Stage 3 ulcer
Stage 4 ulcer
History of resolved ulcers
No history of ulcer resolved/cured
Resident had an ulcer that was resolved
M2.b. Stasis Ulcer highest stage
M2.b.0. No ulcer
M2.b.1. Stage 1 ulcer
M2.b.2. Stage 2 ulcer
M2.b.3. Stage 3 ulcer
M2.b.4. Stage 4 ulcer
M3. History of resolved ulcers
M3.0. No
M3.1. Yes
M4.e. Skin desensitized to pain or pressure

LOINC 45787-9 SKIN DESENSITIZED TO PAIN OR PRESSURE:FIND:PT:^PATIENT:ORD:MDS

M4.f. Skin tears or cuts (other than surg)

LOINC 38432004 No sensitivity to pain (finding)

M4.g. Surgical wounds

LOINC 45789-5 SURGICAL WOUNDS:FIND:PT:^PATIENT:ORD:MDS

M4.h. NONE OF ABOVE

LOINC 45790-3 OTHER SKIN PROBLEMS - NONE OF ABOVE:FIND:PT:^PATIENT:ORD:MDS

M5. Skin treatments

M5.a. Pressure relieving device(s) for chair

LOINC 22394001 Positioning equipment (physical object)

M5.b. Pressure relieving device(s) for bed

LOINC 23962009 Pressure relief device (physical object)

M5.c. Turning/repositioning program

LOINC 45793-7 TURNING OR REPOSITIONING PROGRAM:FIND:PT:^PATIENT:ORD:MDS

M5.d. Nutrition or hydration intervention

LOINC 45794-5 NUTRITION OR HYDRATION INTERVENTION:FIND:PT:^PATIENT:ORD:MDS

M5.e. Ulcer care

LOINC 45795-2 ULCER CARE:FIND:PT:^PATIENT:ORD:MDS

1. Pressure ulcer Stage 2 care education (procedure)
2. Pressure ulcer Stage 2 care management (procedure)
3. Pressure ulcer Stage 3 care (regime/therapy)
4. Pressure ulcer Stage 3 care assessment (regime/therapy)
5. Pressure ulcer Stage 3 care education (procedure)
6. Pressure ulcer Stage 4 care (regime/therapy)
7. Pressure ulcer Stage 4 care assessment (regime/therapy)
8. Pressure ulcer Stage 4 care management (procedure)
9. Pressure ulcer Stage 4 care (regime/therapy)
10. Pressure ulcer Stage 4 care education (procedure)
11. Pressure ulcer Stage 4 care management (procedure)
12. Pressure ulcer Stage 4 care assessment (regime/therapy)
13. Pressure ulcer Stage 4 care education (procedure)

M5.f. Surgical wound care


M5.g. Application of dressings (with or without LOINC: 45796-0 APPLICATION OF OINTMENTS OR MEDICATIONS: FIND: PT: *PATIENT: ORD: MDS)

M5.h. Application of ointments/medications

- M5h. Application of ointments/medications (with or without LOINC: 45798-6 APPLICATION OF OINTMENTS OR MEDICATIONS: FIND: PT: *PATIENT: ORD: MDS)

M5.i. Other preventative or protective skin care

- M5i. Other preventative or protective skin care (with or without LOINC: 45799-4 OTHER PREVENTATIVE OR PROTECTIVE SKIN CARE: FIND: PT: *PATIENT: ORD: MDS)

M5.j. NONE OF ABOVE

- M5j. None of above (with or without LOINC: 45801-8 SKIN TREATMENTS - NONE OF ABOVE: FIND: PT: *PATIENT: ORD: MDS)

M6. Foot problems and care

- M6a. Resident has one or more foot problems (with or without LOINC: 45801-8 ONE OR MORE FOOT PROBLEMS: FIND: PT: *PATIENT: ORD: MDS)

M6.b. Infection of the foot--e.g., cellulitis

- M6b. Infection of the foot--e.g., cellulitis, purulent (with or without SNOMED CT: 200685005 Cellulitis and abscess of foot unspecified (disorder))

M6.c. Open lesions on the foot

- M6c. Open lesions on the foot (with or without SNOMED CT: 200687002 Cellulitis in diabetic foot (disorder))
M6.d. Nails/calluses trimmed during last 6M6

Nails/calluses trimmed

SNOMED CT 249025005 Soft tissue lesion of foot region (disorder)
SNOMED CT 45804-2 NAILS OR CALLUSES TRIMMED IN LAST 90 DAYS: FIND:PT: *PATIENT: ORD:MDS
SNOMED CT 20140101 Callus on toe (disorder)
SNOMED CT 278507002 Corn and callus procedures (procedure)
SNOMED CT 20137000 Com and callus (disorder)
SNOMED CT 228911005 Foot callus (disorder)
SNOMED CT 1345007 Hang nail (disorder)
SNOMED CT 275320004 Injury of nail (disorder)
SNOMED CT 286855007 Nail care activities, function (observable entity)
SNOMED CT 313320002 Nail care procedure (procedure)
SNOMED CT 416960008 Nail changes (finding)
SNOMED CT 78279003 Nail clipper, device (physical object)
SNOMED CT 36543004 Nail hygiene (observable entity)
SNOMED CT 29789000 Nail problem (finding)
SNOMED CT 24787009 Overcurvature of nail (disorder)
SNOMED CT 129172009 Procedure on nail (procedure)
SNOMED CT 228926007 Reduction of callus (procedure)
SNOMED CT 386018007 Removal of nail (procedure)
SNOMED CT 265898006 Removal of nail plate (procedure)
SNOMED CT 177730008 Repair of a nail (procedure)
SNOMED CT 111982005 Thickened nails (finding)
SNOMED CT 84533007 Trimming of nail (procedure)
SNOMED CT 261572003 Trimming of skin (procedure)

M6.e. Received preventative/protectiveFoot care

Received preventative/protective foot care

SNOMED CT 289555003 Foot care (regime/therapy)
SNOMED CT 389540004 Foot care assessment (regime/therapy)
SNOMED CT 389556002 Foot care education (procedure)
SNOMED CT 38957006 Foot care management (procedure)
SNOMED CT 18547007 Podiatry outreach clinic (environment)
SNOMED CT 129440001 Preventive evaluation - action (qualifier value)
SNOMED CT 302805002 Preventive monitoring (regime/therapy)
SNOMED CT 198430000 Preventive procedure (procedure)
SNOMED CT 306160005 Referral to podiatry service (procedure)
SNOMED CT 408394009 Under care of diabetic foot screener (finding)

M6.f. Application of dressings (with or w/o LOINC

Application of dressings (with or without LOINC

SNOMED CT 39895000 Foot dressing (with or without LOINC
SNOMED CT 123040000 Removal of dressing of skin of feet (procedure)

M6.g. NONE OF ABOVE M6g

SECTION N: ACTIVITY PATTERNS
N
N1. Time awake
N1.a. Morning
N1.b. Afternoon
N1.c. Evening
N1.d. NONE OF ABOVE
N1.e. AWAKE IN MORNING:FIND:PT: *PATIENT:ORD:MDS
N1.f. AWAKE IN AFTERNOON:FIND:PT: *PATIENT:ORD:MDS
N1.g. AWAKE IN EVENING:FIND:PT: *PATIENT:ORD:MDS
N1.h. TIME AWAKE: NONE OF ABOVE:FIND:PT: *PATIENT:ORD:MDS
N1.i. AWAKE IN NIGHT:FIND:PT: *PATIENT:ORD:MDS
N2. Average time involved in activities
N2.a. MOST--more than 2/3 of time
N2.b. Somewhat involved in activity
N2.c. Rarely involved in activity
N2.d. NONE OF ABOVE
N3. PREFERRED ACTIVITY SETTING
N3.a. Own room
N3.b. Day/activity room
N3.c. Inside NH/off unit
N3.d. Outside facility
N3.e. NONE OF ABOVE
N4. General activity preferences
N4.a. Cards/other games
N4.b. Crafts/arts
N4.c. Exercise/sports
N4.d. Music
N4.e. Reading/writing
N4.f. Spiritual/religious activities
N4.g. Trips/shopping
N4.h. Walking/wheeling outdoors
N4.i. Watching TV
N4.j. Gardening or plants
N4.k. Talking or conversing
N4.l. Helping others
N4.m. NONE OF ABOVE
N5. Prefers Change in Daily Routine
N5.a. Type of activities in which resident
N5.a.0. No change in daily routine
N5.a.1. Slight change in daily activities
N5.a.2. Moderate change in daily activities
N5.a.3. Major change in daily activities
N5.b. Type of activities in which resident
N5.b.0. No change in daily routine
N5.b.1. Slight change in daily activities
N5.b.2. Moderate change in daily activities
N5.b.3. Major change in daily activities
N5.c. Type of activities in which resident
N5.c.0. No change in daily routine
N5.c.1. Slight change in daily activities
N5.c.2. Moderate change in daily activities
N5.c.3. Major change in daily activities
N6. Household duties
N6.a. Housekeeping
N6.b. Cooking
N6.c. Cleaning
N6.d. Laundry
N6.e. Other household duties
N6.f. NONE OF ABOVE
N7. General activity preferences
N7.a. Type of activity
N7.a.0. No change in daily routine
N7.a.1. Slight change in daily activities
N7.a.2. Moderate change in daily activities
N7.a.3. Major change in daily activities
P1.a.p. Pediatric unit P1ap
Resident received treatment in pediatric unit LOINC 45764-6
PEDIATRIC UNIT: FIND: PT= PATIENT: ORD:MDS

P1.a.q. Respite care P1aq
Resident received respite care LOINC 45772-2
RESPITE CARE: FIND: PT= PATIENT: ORD:MDS

P1.a.r. Skills training for return to communciation P1ar
Resident received training in skills required LOINC 45780-8
TRAINING IN COMMUNITY SKILLS: FIND: PT= PATIENT: ORD:MDS

P1.a.s. NONE OF ABOVE P1as
Resident received no special care or care LOINC 228841002
Community living skills training (regime/therapy)

P1.b. Therapies P1b
Therapies received for more than 15 min. daily in last 7 days

P1.b.a. Speech P1ba
speech therapy administered LOINC 45760-6
NUMBER OF DAYS WITH AT LEAST 15 MINUTES OF SPEECH THERAPY: NUM: PT= PATIENT: QN:MDS

P1.b.a.A. Number of days therapy administered P1baA

P1.b.a.A.b. Occupational therapy P1baAb

P1.b.a.A.c. Physical therapy P1baAc

P1.b.a.A.e. Psychological therapy P1baAe


P1.b.a.A.q. Psychological therapy P1baAq

P1.b.a.B. Total number of minutes of therapy P1baB

P1.b.a.B.A. Number of days therapy administered P1baBA

P1.b.a.B.B. Total number of minutes of therapy P1baBB

P2. Intervention programs for mood, behavior and activity P2

P2.a. Special behavior symptom evaluation P2a

P2.b. Evaluation by a licensed mental health P2b

P2.c. Group therapy P2c

P2.d. Deliberate environment changes P2d

P2.e. Reorientation-e., cuing P2e

P2.f. NONE OF ABOVE P2f

P3. Nursing Rehabilitation/Restorative Care P3

P3.a. Range of motion (passive) P3a

P3.b. Range of motion (active) P3b

P3.c. Sling or brace assistance P3c

P3.d. Bed mobility P3d

P3.e. Transfer P3e

P3.f. Walking P3f

P3.g. Dressing or grooming P3g

P3.h. Eating or swallowing P3h

P3.i. Amputation/prosthesis P3i

P3.j. Communication P3j

P3.k. Other P3k

P4. Devices and Restraints P4

P4.a. Full bed rails on sides P4a

P4.b. Other types of side rails P4b

P4.c. Trunk restraint P4c

P4.d. Limb restraint P4d

P4.e. Chair prevents rising
P4.e.0. Not used
P4.e.1. Used less than daily
P4.e.2. Used daily
P5. Hospital stays
P6. Emergency room (ER) visits
P7. Physician visits
P8. Physician orders
P9. Abnormal lab values
P9.0. No
P9.1. Yes
P9.2. - UTD
SECTION Q: DISCHARGE POTENTIAL Q1. Discharge Potential Q1.a. Resident prefers to return to the community Q1.a.0. No Q1.a.1. Yes Q1.a.2. - UTD Q1.b. Resident has a support person within 90 days Q1.b.0. No Q1.b.1. Yes Q1.b.2. - UTD Q1.c. Stay expected to be of short duration Q1.c.0. No Q1.c.1. Within 30 days Q1.c.2. Within 31-90 days Q1.c.3. Discharge status uncertain Q1.c.4. - UTD Q2. Overall change in care needs Q2.0. No change Q2.1. Improved Q2.2. Deteriorated Q2.3. - UTD
SECTION T: THERAPY SUPPLEMENT T1. Special Treatments/Procedures T1.a. Recreation therapy T1.a.0. Number of days administered to T1.a.a T1.a.b. Total number of minutes provided T1.a.b.0. No T1.a.b.1. Recreation therapy administered T1.a.b.2. Recreation therapy provided T1.b. Ordered Therapies T1.b.0. No
T1.b.1. T1b1 Therapies were ordered LOINC 45888-5 THERAPY ORDERS TO BEGIN IN 1ST 14 DAYS OF STAY:FIND:PT:*PATIENT:ORD:MDS
T1.b.2. - UTD UTD if therapies were ordered LOINC 45889-3 ESTIMATED NUMBER OF DAYS THERAPY CAN BE ADMINISTERED UNTIL DAY 15:NUM:PT:*PATIENT:ORD:MDS
T1.c. Estimate of number of days when T1c LOINC 45890-1 ESTIMATED DAYS THERAPY CAN BE ADMINISTERED UNTIL DAY 15:TIME:PT:*PATIENT:ORD:MDS
T1.d. Estimate of number of therapy mT1d LOINC
T2. Walking when most self-sufficient T2a
T2.a. Furthest distance walked T2a0
T2.a.0. 150+ feet T2a0
Walking 150 feet or more LOINC 45891-9 FURTHEST DISTANCE WALKED:FIND:PT:*PATIENT:NOM:MDS
T2.a.1. 51-149 feet T2a1
Walked 51 - 149 feet LOINC 45891-9 FURTHEST DISTANCE WALKED:FIND:PT:*PATIENT:NOM:MDS
T2.a.2. 26-50 feet T2a2
Walked 26 - 50 feet LOINC 45891-9 FURTHEST DISTANCE WALKED:FIND:PT:*PATIENT:NOM:MDS
T2.a.3. 10-25 feet T2a3
T2.a.4. Less than 10 feet T2a4
Walked less than 10 feet LOINC 45891-9 FURTHEST DISTANCE WALKED:FIND:PT:*PATIENT:NOM:MDS
T2.a.5. - UTD T2a5
UTD distance walked LOINC
T2.b. Time walked without sitting T2b
T2.b.0. 1-2 minutes T2b0
Walked for 1 - 2 minutes LOINC 45892-7 TIME WALKED WITHOUT SITTING DOWN:FIND:PT:*PATIENT:NOM:MDS
T2.b.1. 3-4 minutes T2b1
Walked for 3 - 4 minutes LOINC 45892-7 TIME WALKED WITHOUT SITTING DOWN:FIND:PT:*PATIENT:NOM:MDS
T2.b.2. 5-10 minutes T2b2
Walked for 5 - 10 minutes LOINC 45892-7 TIME WALKED WITHOUT SITTING DOWN:FIND:PT:*PATIENT:NOM:MDS
T2.b.3. 11-15 minutes T2b3
Walked for 11 - 15 minutes LOINC 45892-7 TIME WALKED WITHOUT SITTING DOWN:FIND:PT:*PATIENT:NOM:MDS
T2.b.4. 16-30 minutes T2b4
Walked for 16 - 30 minutes LOINC 45892-7 TIME WALKED WITHOUT SITTING DOWN:FIND:PT:*PATIENT:NOM:MDS
T2.b.5. 31+ minutes T2b5
Walked for 31 min. or more LOINC 45892-7 TIME WALKED WITHOUT SITTING DOWN:FIND:PT:*PATIENT:NOM:MDS
T2.b.6. - UTD T2b6
UTD amount of time walked LOINC
T2.c. Walking self-performance T2c
T2.c.0. Independent T2c0
Walked independently LOINC 45893-5 SELF-PERFORMANCE IN WALKING:FIND:PT:*PATIENT:NOM:MDS
T2.c.1. Supervision T2c1
Walked with supervision LOINC 165245003 Independent walking (finding)
T2.c.2. Limited assistance T2c2
Walked with limited assistance LOINC 45893-5 SELF-PERFORMANCE IN WALKING:FIND:PT:*PATIENT:NOM:MDS
T2.c.3. Extensive assistance T2c3
Walked with extensive assistance LOINC 45893-5 SELF-PERFORMANCE IN WALKING:FIND:PT:*PATIENT:NOM:MDS
T2.c.4. - UTD T2c4
UTD walking self-performance LOINC
T2.d. Walking support provided T2d
T2.d.0. No setup or physical help from a T2d0
Walking required no setup or physical help LOINC 165245003 Independent walking (finding)
T2.d.1. Setup help only T2d1
Walking required setup help only LOINC
T2.d.2. One person physical assist T2d2
Walking with one person physically assisting LOINC
T2.d.3. Two+ persons physical assist T2d3
Walking with two or more persons physically assisting LOINC 45894-3 WALKING SUPPORT PROVIDED:FIND:PT:*PATIENT:NOM:MDS
T2.d.4. - UTD T2d4
UTD level of walking support provided LOINC
T2.e. Parallel bars used T2e
T2.e.0. No T2e0
No parallel bars used LOINC 45895-0 PARALLEL BARS USED:FIND:PT:*PATIENT:NOM:MDS
T2.e.1. Yes T2e1
Parallel bars used LOINC 45895-0 PARALLEL BARS USED:FIND:PT:*PATIENT:NOM:MDS
T2.e.2. - UTD T2e2
UTD if parallel bars were used LOINC 45895-0 PARALLEL BARS USED:FIND:PT:*PATIENT:NOM:MDS
SECTION W: SUPPLEMENTAL MDS I W
W1. National Provider ID W1
W2. Receipt of influenza vaccine W2
W2.A.1. Did not receive influenza vaccine W2a1
Did not receive influenza vaccine LOINC 45993-7 INFLUENZA VIRUS VACCINE RECEIVED IN FACILITY:FIND:PT:*PATIENT:NOM:MDS
W2.A.2. Received influenza vaccine W2a2
Received influenza vaccine LOINC 4633009 Influenza virus vaccine (product)
Reason Vaccine Not Received W2B
W2.B. - UTD W2B
UTD reason vaccine not received W2B
W2.B.1. Not in facility during this year's W2B1
Vaccine not received because not in fac:LOINC 45994-5 REASON INFLUENZA VIRUS VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
W2.B.2. Received outside of this facility W2B2
Vaccine not received because received elsewhere LOINC 45994-5 REASON INFLUENZA VIRUS VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
W2.B.3. - UTD W2B3
Vaccine not received because not eligible LOINC 45994-5 REASON INFLUENZA ORDERS TO BEGIN IN 1ST 14 DAYS OF STAY:FIND:PT:*PATIENT:NOM:MDS
W2.B.4. Offered and declined W2B4
Vaccine not received because offered but refused:LOINC 45994-5 REASON INFLUENZA VIRUS VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
W2.B.5. Not offered W2B5
Vaccine not received because not offered:LOINC 45994-5 REASON INFLUENZA VIRUS VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
Vaccine not received because of inability:LOINC 45994-5 REASON INFLUENZA VIRUS VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
W3. Pneumococcal vaccine status W3
W3.A. - UTD W3A
UTD Pneumococcal vaccine status W3A
W3.A.0. Vaccine not up to date W3a0
Pneumococcal vaccine not up to date LOINC 45995-2 PNEUMOCOCCAL VACCINE STATUS UP TO DATE:FIND:PT:*PATIENT:ORD:MDS
W3.A.1. Vaccine up to date W3a1
Pneumococcal vaccine up to date LOINC 33358008 Pneumococcal vaccine (product)
Reason PPV Not Received W3B
W3.B. - UTD W3B
UTD reason PPV not received W3B
W3.B.1. Not eligible W3B1
Not eligible to receive PPV LOINC 45996-0 REASON PNEUMOCOCCAL VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
W3.B.2. Offered and declined W3B2
Offered and declined PPV LOINC 45996-0 REASON PNEUMOCOCCAL VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS
W3.B.3. Not offered W3B3
Not offered PPV LOINC 45996-0 REASON PNEUMOCOCCAL VACCINE NOT RECEIVED:FIND:PT:*PATIENT:NOM:MDS