

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
		Items:	
			M0032_ROC_DT_NA No resumption of care date
			M0050_PAT_ST Patient state of residence
			M0064_SSN_UK No Social Security number
			M0063_MEDICARE_NA No Medicare number
			M0065_MEDICAID_NA No Medicaid number
			M0069_PAT_GENDER Gender
			M0150_CPAY_NONE Payment sources: no charge for current services
			M0150_CPAY_MCARE_FFS Payment sources: Medicare fee-for-service
			M0150_CPAY_MCARE_HMO Payment sources: Medicare HMO/managed care
			M0150_CPAY_MCAID_FFS Payment sources: Medicaid fee-for-service
			M0150_CPAY_MCAID_HMO Payment sources: Medicaid HMO/managed care
			M0150_CPAY_WRKCOMP Payment sources: worker's compensation
			M0150_CPAY_TITLEPGMS Payment sources: title programs
			M0150_CPAY_OTH_GOVN Payment sources: other government
			M0150_CPAY_PRIV_INS Payment sources: private insurance
			M0150_CPAY_PRIV_HMO Payment sources: private HMO/managed care
			M0150_CPAY_SELFPAY Payment sources: self-pay
			M0150_CPAY_OTHER Payment sources: other
			M0150_CPAY_UK Payment sources: unknown
			M0080_ASSESSOR_DISCIPLINE Discipline of person completing assessment

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ID	Type	Severity	Text/Items
			Items: M0100_ASSMT_REASON Reason for assessment
			M0102_PHYSN_ORDRD_SOCROC_DT_NA Physician ordered SOC/ROC date - NA
			M1000_DC_LTC_14_DA Past 14 days: disch from LTC NH
			M1000_DC_SNF_14_DA Past 14 days: disch from skilled nursing facility
			M1000_DC_IPPS_14_DA Past 14 days: disch from short stay acute hospital
			M1000_DC_LTCH_14_DA Past 14 days: disch from long term care hospital
			M1000_DC_IRF_14_DA Past 14 days: disch from inpatient rehab facility
			M1000_DC_PSYCH_14_DA Past 14 days: disch from psych hospital or unit
			M1000_DC_OTH_14_DA Past 14 days: disch from other
			M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility
			M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown
			A1005A Ethnicity: No, Not Hispanic, Latino/a, Spanish
			A1005B Ethnicity: Yes, Mex, Mex Amer, Chicano/a
			A1005C Ethnicity: Yes, Puerto Rican
			A1005D Ethnicity: Yes, Cuban
			A1005E Ethnicity: Yes, Another Hispanic/Latino/Spanish
			A1005X Ethnicity: Patient unable to respond
			A1005Y Ethnicity: Patient declines to respond
			A1010A Race: White
			A1010B Race: Black or African American

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ID	Type	Severity	Text/Items
		Items:	A1010C Race: American Indian or Alaska Native
			A1010D Race: Asian Indian
			A1010E Race: Chinese
			A1010F Race: Filipino
			A1010G Race: Japanese
			A1010H Race: Korean
			A1010I Race: Vietnamese
			A1010J Race: Other Asian
			A1010K Race: Native Hawaiian
			A1010L Race: Guamanian or Chamorro
			A1010M Race: Samoan
			A1010N Race: Other Pacific Islander
			A1010X Race: Patient unable to respond
			A1010Y Race: Patient declines to respond
			A1010Z Race: None of the above
			A1110B Do you need or want an interpreter
			A1250A Transportation: Yes, medical
			A1250B Transportation: Yes, non-medical
			A1250C Transportation: No
			A1250X Transportation: Patient unable to respond

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ID	Type	Severity	Text/Items
		Items:	A1250Y Transportation: Patient declines to respond
			M2301_EMER_USE_AFTR_LAST_ASMT Emergent care: use since most recent SOC/ROC
			M2310_ECR_MEDICATION Emergent care reason: medication
			M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia
			M2310_ECR_OTHER Emergent care reason: other than above
			M2310_ECR_UNKNOWN Emergent care reason: unknown
			M2410_INPAT_FACILITY Inpatient facility
			M2420_DSCHRG_DISP Discharge disposition
			A2121 Current Reconciled Medication List - Prvdr (Dis)
			A2120 Current Reconciled Medication List - Prvdr (Tra)
			A2122A Provider Trans - Electronic Health Record
			A2122B Provider Trans - Health Info Exchange
			A2122C Provider Trans - Verbal
			A2122D Provider Trans - Paper-based
			A2122E Provider Trans - Other Methods
			A2123 Current Reconciled Medication List - Ptnt (Dis)
			A2124A Patient Trans - Electronic Health Record
			A2124B Patient Trans - Health Info Exchange
			A2124C Patient Trans - Verbal
			A2124D Patient Trans - Paper-based

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ID	Type	Severity	Text/Items
		Items:	A2124E Patient Trans - Other Methods
			B0200 Hearing
			B1000 Vision
			B1300 Health Literacy
			C0100 Brief Interview for Mental Status
			C0200 Repetition of three words
			C0300A Temporal Orientation: Able to report correct year
			C0300B Temporal Orientation: Able to report correct month
			C0300C Temporal Orientation: Able to report correct day
			C0400A Recall: Able to recall "sock"
			C0400B Recall: Able to recall "blue"
			C0400C Recall: Able to recall "bed"
			C1310A Delirium: Acute Onset Mental Status Change
			C1310B Delirium: Inattention
			C1310C Delirium: Disorganized thinking
			C1310D Delirium: Altered level of consciousness
			M1700_COG_FUNCTION Cognitive functioning
			M1710_WHEN_CONFUSED When confused (reported or observed)
			M1720_WHEN_ANXIOUS When anxious (reported or observed)
			D0150A1 Mood: Little interest/pleasure doing things: Pres

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ID	Type	Severity	Text/Items
		Items:	D0150A2
			Mood: Little interest/pleasure doing things: Freq
			D0150B1
			Mood: Feeling down, depressed, or hopeless: Pres
			D0150B2
			Mood: Feeling down, depressed, or hopeless: Freq
			D0150C1
			Mood: Trouble falling or staying asleep: Pres
			D0150C2
			Mood: Trouble falling or staying asleep: Freq
			D0150D1
			Mood: Feeling tired or having little energy: Pres
			D0150D2
			Mood: Feeling tired or having little energy: Freq
			D0150E1
			Mood: Poor appetite or overeating: Pres
			D0150E2
			Mood: Poor appetite or overeating: Freq
			D0150F1
			Mood: Feeling bad about yourself: Pres
			D0150F2
			Mood: Feeling bad about yourself: Freq
			D0150G1
			Mood: Trouble concentrating on things: Pres
			D0150G2
			Mood: Trouble concentrating on things: Freq
			D0150H1
			Mood: Moving or speaking so slowly: Pres
			D0150H2
			Mood: Moving or speaking so slowly: Freq
			D0150I1
			Mood: Thoughts of better off dead: Pres
			D0150I2
			Mood: Thoughts of better off dead: Freq
			D0700
			Social Isolation
			M1740_BD_MEM_DEFICIT
			Behavior demonstrated: memory deficit
			M1740_BD_IMP_DECISN
			Behavior demonstrated: impaired decision-making

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ID	Type	Severity	Text/Items
		Items:	M1740_BD_VERBAL Behavior demonstrated: verbal disruption
			M1740_BD_PHYSICAL Behavior demonstrated: physical aggression
			M1740_BD_SOC_INAPPRO Behavior demonstrated: socially inappropriate
			M1740_BD_DELUSIONS Behavior demonstrated: delusions
			M1740_BD_NONE Behavior demonstrated: none of the above
			M1745_BEH_PROB_FREQ Frequency of behavior problems
			M1100_PTNT_LVG_STUTN Patient living situation
			M2102_CARE_TYPE_SRC_ADL Care mgmt, types/sources: ADL
			M2102_CARE_TYPE_SRC_MDCTN Care mgmt, types/sources: med admin
			M2102_CARE_TYPE_SRC_PRCDR Care mgmt, types/sources: med procs tx
			M2102_CARE_TYPE_SRC_SPRVSN Care mgmt, types/sources: supervision and safety
			M1800_CRNT_GROOMING Current: grooming
			M1810_CRNT_DRESS_UPPER Current: dress upper body
			M1820_CRNT_DRESS_LOWER Current: dress lower body
			M1830_CRNT_BATHG Current: bathing
			M1840_CRNT_TOILTG Current: toileting
			M1845_CRNT_TOILTG_HYGN Current: toileting hygiene
			M1850_CRNT_TRNSFRNG Current: transferring
			M1860_CRNT_AMBLTN Current: ambulation
			GG0100A Prior Function - Self Care

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		Items:	GG0100B
			GG0100C
			GG0100D
			GG0110A
			GG0110B
			GG0110C
			GG0110D
			GG0110E
			GG0110Z
			GG0130A1
			GG0130A3
			GG0130A4
			GG0130B1
			GG0130B3
			GG0130B4
			GG0130C1
			GG0130C3
			GG0130C4
			GG0130E1
			GG0130E3

Prior Function - Indoor Mobility (Ambulation)

Prior Function - Stairs

Prior Function - Functional Cognition

Prior Device - Manual wheelchair

Prior Device - Motorized wheelchair and/or scooter

Prior Device - Mechanical lift

Prior Device - Walker

Prior Device - Orthotics/Prosthetics

Prior Device - None of the above

Eating (SOC/ROC Perf)

Eating (Dschg Perf)

Eating (Follow-Up Perf)

Oral Hygiene (SOC/ROC Perf)

Oral Hygiene (Dschrg Perf)

Oral Hygiene (Follow-Up Perf)

Toileting hygiene (SOC/ROC Perf)

Toileting hygiene (Dschrg Perf)

Toileting hygiene (Follow-Up Perf)

Shower/bathe self (SOC/ROC Perf)

Shower/bathe self (Dschrg Perf)

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ID	Type	Severity	Text/Items
		Items:	GG0130F1
			Upper body dressing (SOC/ROC Perf)
			GG0130F3
			Upper body dressing (Dschr Perf)
			GG0130G1
			Lower body dressing (SOC/ROC Perf)
			GG0130G3
			Lower body dressing (Dschr Perf)
			GG0130H1
			Put on/take off footwear (SOC/ROC Perf)
			GG0130H3
			Put on/take off footwear (Dschr Perf)
			GG0170A1
			Roll left and right (SOC/ROC Perf)
			GG0170A3
			Roll left and right (Dschr Perf)
			GG0170A4
			Roll left and right (Follow-Up Perf)
			GG0170B1
			Sit to lying (SOC/ROC Perf)
			GG0170B3
			Sit to lying (Dschr Perf)
			GG0170B4
			Sit to lying (Follow-Up Perf)
			GG0170C_MOBILITY_SOCROC_PERF
			Lying to sitting on bed side (SOC/ROC Perf)
			GG0170C3
			Lying to sitting on bed side (Dschr Perf)
			GG0170C4
			Lying to sitting on bed side (Follow-Up Perf)
			GG0170D1
			Sit to stand (SOC/ROC Perf)
			GG0170D3
			Sit to stand (Dschr Perf)
			GG0170D4
			Sit to stand (Follow-Up Perf)
			GG0170E1
			Chair/bed-to-chair transfer (SOC/ROC Perf)
			GG0170E3
			Chair/bed-to-chair transfer (Dschr Perf)

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ID	Type	Severity	Text/Items
			Items: GG0170E4 Chair/bed-to-chair transfer (Follow-Up Perf)
			GG0170F1 Toilet transfer (SOC/ROC Perf)
			GG0170F3 Toilet transfer (Dschrng Perf)
			GG0170F4 Toilet transfer (Follow-Up Perf)
			GG0170G1 Car transfer (SOC/ROC Perf)
			GG0170G3 Car transfer (Dschrng Perf)
			GG0170I1 Walk 10 feet (SOC/ROC Perf)
			GG0170I3 Walk 10 feet (Dschrng Perf)
			GG0170I4 Walk 10 feet (Follow-Up Perf)
			GG0170J1 Walk 50 feet with two turns (SOC/ROC Perf)
			GG0170J3 Walk 50 feet with two turns (Dschrng Perf)
			GG0170J4 Walk 50 feet with two turns (Follow-Up Perf)
			GG0170K1 Walk 150 feet (SOC/ROC Perf)
			GG0170K3 Walk 150 feet (Dschrng Perf)
			GG0170L1 Walking 10 feet uneven surf (SOC/ROC Perf)
			GG0170L3 Walking 10 feet uneven surf (Dschrng Perf)
			GG0170L4 Walking 10 feet uneven surf (Follow-Up Perf)
			GG0170M1 1 step (curb) (SOC/ROC Perf)
			GG0170M3 1 step (curb) (Dschrng Perf)
			GG0170M4 1 step (curb) (Follow-Up Perf)

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ID	Type	Severity	Text/Items
		Items:	
			GG0170N1 4 steps (SOC/ROC Perf)
			GG0170N3 4 steps (Dschrng Perf)
			GG0170N4 4 steps (Follow-Up Perf)
			GG0170O1 12 steps (SOC/ROC Perf)
			GG0170O3 12 steps (Dschrng Perf)
			GG0170P1 Picking up object (SOC/ROC Perf)
			GG0170P3 Picking up object (Dschrng Perf)
			GG0170Q1 Use wheelchair and/or scooter (SOC/ROC Perf)
			GG0170Q3 Use wheelchair and/or scooter (Dschrng Perf)
			GG0170Q4 Use wheelchair and/or scooter (Follow-Up Perf)
			GG0170R1 Wheel 50 feet with two turns (SOC/ROC Perf)
			GG0170R3 Wheel 50 feet with two turns (Dschrng Perf)
			GG0170R4 Wheel 50 feet with two turns (Follow-Up Perf)
			GG0170RR1 Type of wheelchair or scooter (SOC/ROC Perf)
			GG0170RR3 Type of wheelchair or scooter (Dschrng Perf)
			GG0170S1 Wheel 150 feet (SOC/ROC Perf)
			GG0170S3 Wheel 150 feet (Dschrng Perf)
			GG0170SS1 Type of wheelchair or scooter (SOC/ROC Perf)
			GG0170SS3 Type of wheelchair or scooter (Dschrng Perf)
			M1600_UTI Treated for urinary tract infection past 14 days

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		Items:	
		M1610_UR_INCONT	Urinary incontinence or urinary catheter present
		M1620_BWL_INCONT	Bowel incontinence frequency
		M1630_OSTOMY	Ostomy for bowel elimination
		M1028_ACTV_DIAG_PVD_PAD	Active Diagnoses - PVD or PAD
		M1028_ACTV_DIAG_DM	Active Diagnoses - Diabetes Mellitus
		M1028_ACTV_DIAG_NOA	Active Diagnoses - None of the above
		M1021_PRIMARY_DIAG_SEVERITY	Primary diagnosis severity rating
		M1023_OTH_DIAG1_SEVERITY	Other diagnosis 1: severity rating
		M1023_OTH_DIAG2_SEVERITY	Other diagnosis 2: severity rating
		M1023_OTH_DIAG3_SEVERITY	Other diagnosis 3: severity rating
		M1023_OTH_DIAG4_SEVERITY	Other diagnosis 4: severity rating
		M1023_OTH_DIAG5_SEVERITY	Other diagnosis 5: severity rating
		M1033_HOSP_RISK_HSTRY_FALLS	Hosp risk: 2+ falls or injury fall in past year
		M1033_HOSP_RISK_WEIGHT_LOSS	Hosp risk: unintentional weight loss
		M1033_HOSP_RISK_MLTPL_HOSPZTN	Hosp risk: 2+ hospitalizations in past 6 months
		M1033_HOSP_RISK_MLTPL_ED_VISIT	Hosp risk: 2+ emergency dept visits in past 6 months
		M1033_HOSP_RISK_MNTL_BHV_DCLN	Hosp risk: decline mental/emotional/behav status
		M1033_HOSP_RISK_COMPLIANCE	Hosp risk: difficulty with medical instructions
		M1033_HOSP_RISK_5PLUS_MDCTN	Hosp risk: taking five or more medications
		M1033_HOSP_RISK_CRNT_EXHSTN	Hosp risk: current exhaustion

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ID	Type	Severity	Text/Items
		Items:	M1033_HOSP_RISK_OTHR_RISK Hosp risk: other risk(s) not listed
			M1033_HOSP_RISK_NONE_ABOVE Hosp risk: none of the above
			J0510 Pain effect on sleep
			J0520 Pain interference with therapy activities
			J0530 Pain interference with day-to-day activities
			J1800 Falls since SOC/ROC: any falls
			J1900A Num falls since SOC/ROC: no injury
			J1900B Num falls since SOC/ROC: injury (except major)
			J1900C Num falls since SOC/ROC: major injury
			M1400_WHEN_DYSPNEIC When dyspneic
			K0520A1 Nutritional Approaches (Admission): Parenteral
			K0520A4 Nutritional Approaches (7 days): Parenteral
			K0520A5 Nutritional Approaches (Discharge): Parenteral
			K0520B1 Nutritional Approaches (Admission): Feeding tube
			K0520B4 Nutritional Approaches (7 days): Feeding tube
			K0520B5 Nutritional Approaches (Discharge): Feeding Tube
			K0520C1 Nutritional Approaches (Admission) : Mech Alt Diet
			K0520C4 Nutritional Approaches (7 days): Mech Alt Diet
			K0520C5 Nutritional Approaches (Discharge): Mech Alt Diet
			K0520D1 Nutritional Approaches (Admission) : Therapeutic

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		Items:	
			K0520D4 Nutritional Approaches (7 day): Therapeutic
			K0520D5 Nutritional Approaches (Discharge): Therapeutic
			K0520Z1 Nutritional Approaches (Admission) : None
			K0520Z4 Nutritional Approaches (7 days): None
			K0520Z5 Nutritional Approaches (Discharge): None
			M1870_CRNT_FEEDING Current: feeding
			M1306_UNHLD_STG2_PRSR_ULCR Patient has 1+ unhealed PU/injury at stage 2+
			M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch
			M1322_NBR_PRSULC_STG1 Number of stage 1 pressure injuries
			M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury
			M1330_STAS_ULCR_PRSNT Does this patient have a stasis ulcer
			M1332_NBR_STAS_ULCR Number of stasis ulcers
			M1334_STUS_PRBLM_STAS_ULCR Status of most problematic stasis ulcer
			M1340_SRGCL_WND_PRSNT Does this patient have a surgical wound
			M1342_STUS_PRBLM_SRGCL_WND Status of most problematic surgical wound
			N0415A1 High-Risk Drug (Is Taking): Antipsychotic
			N0415A2 High-Risk Drug (Indication) : Antipsychotic
			N0415E1 High-Risk Drug (Is taking): Anticoagulant
			N0415E2 High-Risk Drug (Indication): Anticoagulant
			N0415F1 High-Risk Drug (Is taking): Antibiotic

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		Items:	N0415F2 High-Risk Drug (Indication): Antibiotic
			N0415H1 High-Risk Drug (Is taking): Opioid
			N0415H2 High-Risk Drug (Indication): Opioid
			N0415I1 High-Risk Drug (Is taking): Antiplatelet
			N0415I2 High-Risk Drug (Indication): Antiplatelet
			N0415J1 High-Risk Drug (Is taking): Hypoglycemic
			N0415J2 High-Risk Drug (Indication): Hypoglycemic
			N0415Z1 High-Risk Drug (Is taking): None of the above
			M2001_DRUG_RGMN_RVW Drug regimen review
			M2003_MDCTN_FLWP Medication follow-up
			M2005_MDCTN_INTRVTN Medication intervention
			M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education
			M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications
			M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications
			O0110A1A Treatment: Chemotherapy (Admission)
			O0110A1C Treatment: Chemotherapy (Discharge)
			O0110A2A Treatment: Chemo - IV (Admission)
			O0110A2C Treatment: Chemo - IV (Discharge)
			O0110A3A Treatment: Chemo - Oral (Admission)
			O0110A3C Treatment: Chemo - Oral (Discharge)

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		Items:	O0110A10A Treatment: Chemo - Other (Admission)
			O0110A10C Treatment: Chemo - Other (Discharge)
			O0110B1A Treatment: Radiation (Admission)
			O0110B1C Treatment: Radiation (Discharge)
			O0110C1A Therapies: Oxygen Therapy (Admission)
			O0110C1C Therapies: Oxygen Therapy (Discharge)
			O0110C2A Therapies: Oxygen - Continuous (Admission)
			O0110C2C Therapies: Oxygen - Continuous (Discharge)
			O0110C3A Therapies: Oxygen - Intermittent (Admission)
			O0110C3C Therapies: Oxygen - Intermittent (Discharge)
			O0110C4A Therapies: Oxygen - High-concentration (Admission)
			O0110C4C Therapies: Oxygen - High-concentration (Discharge)
			O0110D1A Therapies: Suctioning (Admission)
			O0110D1C Therapies: Suctioning (Discharge)
			O0110D2A Therapies: Suctioning - Scheduled (Admission)
			O0110D2C Therapies: Suctioning - Scheduled (Discharge)
			O0110D3A Therapies: Suctioning - As Needed (Admission)
			O0110D3C Therapies: Suctioning - As Needed (Discharge)
			O0110E1A Therapies: Tracheostomy Care (Admission)
			O0110E1C Therapies: Tracheostomy Care (Discharge)

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		Items:	
			O0110F1A Therapies: Invasive Mechanical Ventilator (Admis)
			O0110F1C Therapies: Invasive Mechanical Ventilator (Disch)
			O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis)
			O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch)
			O0110G2A Therapies: BiPAP (Admission)
			O0110G2C Therapies: BiPAP (Discharge)
			O0110G3A Therapies: CPAP (Admission)
			O0110G3C Therapies: CPAP (Discharge)
			O0110H1A Other: IV Medications (Admission)
			O0110H1C Other: IV Medications (Discharge)
			O0110H2A Other: IV - Vasoactive medications (Admission)
			O0110H2C Other: IV - Vasoactive medications (Discharge)
			O0110H3A Other: IV - Antibiotics (Admission)
			O0110H3C Other: IV - Antibiotics (Discharge)
			O0110H4A Other: IV - Anticoagulation (Admission)
			O0110H4C Other: IV - Anticoagulation (Discharge)
			O0110H10A Other: IV - Other (Admission)
			O0110H10C Other: IV - Other (Discharge)
			O0110I1A Other: Transfusions (Admission)
			O0110I1C Other: Transfusions (Discharge)

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		Items:	O0110J1A Other: Dialysis (Admission)
			O0110J1C Other: Dialysis (Discharge)
			O0110J2A Other: Hemodialysis (Admission)
			O0110J2C Other: Hemodialysis (Discharge)
			O0110J3A Other: Peritoneal dialysis (Admission)
			O0110J3C Other: Peritoneal dialysis (Discharge)
			O0110O1A Other: IV Access (Admission)
			O0110O1C Other: IV Access (Discharge)
			O0110O2A Other: IV Access - Peripheral (Admission)
			O0110O2C Other: IV Access - Peripheral (Discharge)
			O0110O3A Other: IV Access - Mid-line (Admission)
			O0110O3C Other: IV Access - Mid-line (Discharge)
			O0110O4A Other: IV Access - Central (Admission)
			O0110O4C Other: IV Access - Central (Discharge)
			O0110Z1A Other: None of the above (Admission)
			O0110Z1C Other: None of the above (Discharge)
			O0350 COVID-19 Vaccination Up To Date
			M1041_IN_INFLNZ_SEASON Does episode include Oct 1 thru Mar 31
			M1046_INFLNZ_RECD_CRNT_SEASON Did patient receive influenza vaccine
			M2401_INTRVTN_SMRY_FALL_PRVNT Intervention synopsis: falls prevention

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M2401_INTRVTN_SMRY_DPRSN Intervention synopsis: depression intervention M2401_INTRVTN_SMRY_PAIN_MNTR Intervention synopsis: monitor and mitigate pain M2401_INTRVTN_SMRY_PRSULC_PRVN Intervention synopsis: prevent pressure ulcers M2401_INTRVTN_SMRY_PRSULC_WET Intervention synopsis: PU moist wound treatment
-3070	Format	Fatal	<p>VALUES OF DATE ITEMS</p> <p>This item must contain either (a) a valid date in YYYYMMDD format, or (b) one of the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report.</p> <p>Note that if a date in YYYYMMDD format is submitted, it must be 8 characters in length and each of the 8 characters must contain the digits 0 (zero) through 9. YYYY, MM, and DD must be zero filled, where necessary. For example, January 1, 2014 must be submitted as "20140101".</p> <p>Items: M0030_START_CARE_DT Start of care date M0032_ROC_DT Resumption of care date M0090_INFO_COMPLETED_DT Date assessment completed M0102_PHYSN_ORDRD_SOCROC_DT Physician ordered SOC/ROC date M0104_PHYSN_RFRL_DT Physician date of referral M1005_INP_DISCHARGE_DT Most recent inpatient discharge date M0906_DC_TRAN_DTH_DT Discharge, transfer, death date M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M1060_WEIGHT_B Weight (in pounds) M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: deep tissue injury SOC/ROC
-3100	Format	Fatal	<p>FORMATTING OF POSITIVE INTEGER NUMERIC ITEMS</p> <p>Only positive integer values and the special values (if any) that are listed in the "Item Values" table of the Detailed Data Specifications Report will be accepted for this item. Leading zeroes may be included or omitted from the submitted value as long as the resulting length of the string does not exceed the allowed maximum length for the item. A decimal point and decimal values are not allowed. A sign will not be accepted.</p> <p>The following examples are allowable if the value to be submitted is equal to [1] and the maximum length is equal to 2: [1], [01]. The following values are NOT allowed and will lead to a fatal error: [1.], [1.0], [01.], [01.0], [1.1], [01.1], [1.01], [+1], [-2], [+1.3], [-4.5].</p> <p>Items: CORRECTION_NUM Correction number</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: C0500 BIMS Summary Score D0160 Total severity score M1060_HEIGHT_A Height (in inches) M1060_WEIGHT_B Weight (in pounds) M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: deep tissue injury SOC/ROC
-3110	Format	Fatal	FORMATTING OF NUMERIC TEXT ITEMS If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only numeric characters: [0] through [9]. Items: NATL_PRVDR_ID Agency National Provider ID (NPI)

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: SFW_ID Software vendor federal employer tax ID M0018_PHYSICIAN_ID Attending physician National Provider ID (NPI) M0060_PAT_ZIP Patient zip code M0064_SSN Patient's Social Security number
-3120	Format	Fatal	<p>FORMATTING OF ALPHANUMERIC TEXT ITEMS</p> <p>If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <p>a) The numeric characters: [0] through [9].</p> <p>b) The letters [A] through [Z] and [a] through [z].</p> <p>Items: M0010_CCN Facility CMS certification number (CCN) M0063_MEDICARE_NUM Medicare number, including suffix M0065_MEDICAID_NUM Medicaid number</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items								
-3130	Format	Fatal	<p>FORMATTING OF ALPHANUMERIC TEXT ITEMS THAT CAN CONTAIN DASHES, SPACES, AND SPECIAL CHARACTERS</p> <p>If this item is not equal to one of the special values (if any) that are listed in the Item Values table of the Detailed Data Specifications Report, then it must contain a text string. This text string may contain only the following characters:</p> <ul style="list-style-type: none"> a) The numeric characters: [0] through [9]. b) The letters [A] through [Z] and [a] through [z]. c) The character [-]. d) The following special characters: <ul style="list-style-type: none"> [@] (at sign) ['] (single quote) [/] (forward slash) [+] (plus sign) [,] (comma) [.] (period) [_] (underscore) e) Embedded spaces (spaces surrounded by any of the characters listed above). For example, [LEGAL TEXT] would be allowed. <p>Items:</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 50%;">SFW_PROD_VRSN_CD</td> <td>Software product version code</td> </tr> <tr> <td>M0040_PAT_FNAME</td> <td>Patient's first name</td> </tr> <tr> <td>M0040_PAT_LNAME</td> <td>Patient's last name</td> </tr> <tr> <td>M0040_PAT_SUFFIX</td> <td>Patient's suffix</td> </tr> </table>	SFW_PROD_VRSN_CD	Software product version code	M0040_PAT_FNAME	Patient's first name	M0040_PAT_LNAME	Patient's last name	M0040_PAT_SUFFIX	Patient's suffix
SFW_PROD_VRSN_CD	Software product version code										
M0040_PAT_FNAME	Patient's first name										
M0040_PAT_LNAME	Patient's last name										
M0040_PAT_SUFFIX	Patient's suffix										

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: SFW_EMAIL_ADR Software vendor email address
-3160	Consistency	Fatal	HHA_AGENCY_ID is the provider's submission ID. The value submitted for HHA_AGENCY_ID must match the HHA_AGENCY_ID in the National Database for the provider. Items: HHA_AGENCY_ID Assigned agency submission ID
-3162	Consistency	Fatal	A user submitting a file must be authorized to submit for the provider identified by the HHA_AGENCY_ID item in the file. Items: HHA_AGENCY_ID Assigned agency submission ID
-3170	Consistency	Warning	The value submitted for M0010_CCN (provider's CMS Certification Number -- CCN) will be compared with the value that is currently in the National Database. If the values do not match, a warning will be Items: M0010_CCN Facility CMS certification number (CCN)
-3180	Format	Fatal	This is a required text item. A valid non-blank value must be submitted. Items: HHA_AGENCY_ID Assigned agency submission ID

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
-3190	Consistency	Fatal	<p>In order to modify or inactivate a record that has previously been accepted by the system, the system must be able to locate the previous record. Appropriate values from the record to be corrected must therefore be submitted for the following locator items:</p> <p>M0030_START_CARE_DT M0032_ROC_DT M0032_ROC_DT_NA M0040_PAT_FNAME M0040_PAT_LNAME M0064_SSN M0064_SSN_UK M0066_PAT_BIRTH_DT M0069_PAT_GENDER M0090_INFO_COMPLETED_DT M0100_ASSMT_REASON M0906_DC_TRAN_DTH_DT</p>

If a matching previously accepted record cannot be located, a fatal error will result and the submitted record will be rejected.

Items:	M0030_START_CARE_DT	Start of care date
	M0032_ROC_DT	Resumption of care date
	M0032_ROC_DT_NA	No resumption of care date
	M0040_PAT_FNAME	Patient's first name
	M0040_PAT_LNAME	Patient's last name
	M0064_SSN	Patient's Social Security number
	M0064_SSN_UK	No Social Security number
	M0069_PAT_GENDER	Gender

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M0066_PAT_BIRTH_DT Date of birth M0090_INFO_COMPLETED_DT Date assessment completed M0100_ASSMT_REASON Reason for assessment M0906_DC_TRAN_DTH_DT Discharge, transfer, death date
-3200	Consistency	Fatal	<p>The first record that is submitted to correct or inactivate an existing record must have a value of "01" in CORRECTION_NUM (correction number). If that correction/inactivation is accepted and if a subsequent correction/inactivation is required, it must have a value of "02", and so on. In other words, the correction number in CORRECTION_NUM on the first correction/inactivation must be "01", and the value on each subsequent correction/inactivation must be incremented by 1. If the value submitted in CORRECTION_NUM is incorrect, a fatal error will result and the submitted record will be</p> <p>Items: CORRECTION_NUM Correction number</p>
-3210	Format	Fatal	<p>The length of the text submitted for a free-form text item must not exceed the maximum length specified for that item.</p> <p>Items: HHA_AGENCY_ID Assigned agency submission ID SFW_NAME Software vendor company name SFW_EMAIL_ADR Software vendor email address SFW_PROD_NAME Software product name SFW_PROD_VRSN_CD Software product version code ACY_DOC_CD Document ID code (agency use) M0016_BRANCH_ID Branch ID M0020_PAT_ID Patient ID number M0040_PAT_FNAME Patient's first name</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M0040_PAT_MI Patient's middle initial M0040_PAT_LNAME Patient's last name M0040_PAT_SUFFIX Patient's suffix M0063_MEDICARE_NUM Medicare number, including suffix M0065_MEDICAID_NUM Medicaid number A1110A Preferred language
-3220	Consistency	Fatal	<p>If SFW_PROD_NAME is equal to [^], then SFW_PROD_VRSN_CD must be equal to [^].</p> Items: SFW_PROD_NAME Software product name SFW_PROD_VRSN_CD Software product version code
-3230	Consistency	Fatal	<p>If SFW_PROD_NAME is not equal to [^], then SFW_PROD_VRSN_CD must not be equal to [^].</p> Items: SFW_PROD_NAME Software product name SFW_PROD_VRSN_CD Software product version code
-3240	Consistency	Fatal	<p>The submission system will recalculate the ISC and compare the recalculated value with the value that is submitted in ITM_SBST_CD. If the recalculated value does not match the value submitted in ITM_SBST_CD, a fatal error will result.</p> Items: ITM_SBST_CD Item subset code

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items																
-3261	Consistency	Fatal	<p>DATE ITEM CONSISTENCY: PATTERN 1 Each active item in the list below that contains a valid date (not blank) must be in the specified order. If M0032_ROC_DT is equal to [^], then the following rules apply: M0066_PAT_BIRTH_DT < M1005_INP_DISCHARGE_DT <= M0102_PHYSN_ORDRD_SOCROC_DT <= M0030_START_CARE_DT <= M1307_OLDST_STG2_ONST_DT <= M0906_DC_TRAN_DTH_DT <= M0090_INFO_COMPLETED_DT <= Current date</p> <p>Items:</p> <table border="0"> <tr> <td>M0030_START_CARE_DT</td> <td>Start of care date</td> </tr> <tr> <td>M0032_ROC_DT</td> <td>Resumption of care date</td> </tr> <tr> <td>M0066_PAT_BIRTH_DT</td> <td>Date of birth</td> </tr> <tr> <td>M0090_INFO_COMPLETED_DT</td> <td>Date assessment completed</td> </tr> <tr> <td>M0102_PHYSN_ORDRD_SOCROC_DT</td> <td>Physician ordered SOC/ROC date</td> </tr> <tr> <td>M1005_INP_DISCHARGE_DT</td> <td>Most recent inpatient discharge date</td> </tr> <tr> <td>M0906_DC_TRAN_DTH_DT</td> <td>Discharge, transfer, death date</td> </tr> <tr> <td>M1307_OLDST_STG2_ONST_DT</td> <td>Date of onset of oldest stage 2 pressure ulcer</td> </tr> </table>	M0030_START_CARE_DT	Start of care date	M0032_ROC_DT	Resumption of care date	M0066_PAT_BIRTH_DT	Date of birth	M0090_INFO_COMPLETED_DT	Date assessment completed	M0102_PHYSN_ORDRD_SOCROC_DT	Physician ordered SOC/ROC date	M1005_INP_DISCHARGE_DT	Most recent inpatient discharge date	M0906_DC_TRAN_DTH_DT	Discharge, transfer, death date	M1307_OLDST_STG2_ONST_DT	Date of onset of oldest stage 2 pressure ulcer
M0030_START_CARE_DT	Start of care date																		
M0032_ROC_DT	Resumption of care date																		
M0066_PAT_BIRTH_DT	Date of birth																		
M0090_INFO_COMPLETED_DT	Date assessment completed																		
M0102_PHYSN_ORDRD_SOCROC_DT	Physician ordered SOC/ROC date																		
M1005_INP_DISCHARGE_DT	Most recent inpatient discharge date																		
M0906_DC_TRAN_DTH_DT	Discharge, transfer, death date																		
M1307_OLDST_STG2_ONST_DT	Date of onset of oldest stage 2 pressure ulcer																		

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items																
-3271	Consistency	Fatal	<p>DATE ITEM CONSISTENCY: PATTERN 2 Each active item in the list below that contains a valid date (not blank) must be in the specified order. If M0032_ROC_DT is NOT equal to [^], then the following rules apply: M0066_PAT_BIRTH_DT < M0030_START_CARE_DT <= M1005_INP_DISCHARGE_DT <= M0102_PHYSN_ORDRD_SOCROC_DT <= M0032_ROC_DT <= M1307_OLDST_STG2_ONST_DT <= M0906_DC_TRAN_DTH_DT <= M0090_INFO_COMPLETED_DT <= Current date</p> <p>Items:</p> <table border="0"> <tr> <td>M0030_START_CARE_DT</td> <td>Start of care date</td> </tr> <tr> <td>M0032_ROC_DT</td> <td>Resumption of care date</td> </tr> <tr> <td>M0066_PAT_BIRTH_DT</td> <td>Date of birth</td> </tr> <tr> <td>M0090_INFO_COMPLETED_DT</td> <td>Date assessment completed</td> </tr> <tr> <td>M0102_PHYSN_ORDRD_SOCROC_DT</td> <td>Physician ordered SOC/ROC date</td> </tr> <tr> <td>M1005_INP_DISCHARGE_DT</td> <td>Most recent inpatient discharge date</td> </tr> <tr> <td>M0906_DC_TRAN_DTH_DT</td> <td>Discharge, transfer, death date</td> </tr> <tr> <td>M1307_OLDST_STG2_ONST_DT</td> <td>Date of onset of oldest stage 2 pressure ulcer</td> </tr> </table>	M0030_START_CARE_DT	Start of care date	M0032_ROC_DT	Resumption of care date	M0066_PAT_BIRTH_DT	Date of birth	M0090_INFO_COMPLETED_DT	Date assessment completed	M0102_PHYSN_ORDRD_SOCROC_DT	Physician ordered SOC/ROC date	M1005_INP_DISCHARGE_DT	Most recent inpatient discharge date	M0906_DC_TRAN_DTH_DT	Discharge, transfer, death date	M1307_OLDST_STG2_ONST_DT	Date of onset of oldest stage 2 pressure ulcer
M0030_START_CARE_DT	Start of care date																		
M0032_ROC_DT	Resumption of care date																		
M0066_PAT_BIRTH_DT	Date of birth																		
M0090_INFO_COMPLETED_DT	Date assessment completed																		
M0102_PHYSN_ORDRD_SOCROC_DT	Physician ordered SOC/ROC date																		
M1005_INP_DISCHARGE_DT	Most recent inpatient discharge date																		
M0906_DC_TRAN_DTH_DT	Discharge, transfer, death date																		
M1307_OLDST_STG2_ONST_DT	Date of onset of oldest stage 2 pressure ulcer																		
-3280	Consistency	Warning	<p>If M0100_ASSMT_REASON=[01] and if M0030_START_CARE_DT and M1005_INP_DISCHARGE_DT are both active and contain valid dates (not [^]), then M0030_START_CARE_DT minus M1005_INP_DISCHARGE_DT should be greater than or equal to zero and less than or equal to 14 days.</p> <p>Items:</p> <table border="0"> <tr> <td>M0030_START_CARE_DT</td> <td>Start of care date</td> </tr> <tr> <td>M0100_ASSMT_REASON</td> <td>Reason for assessment</td> </tr> </table>	M0030_START_CARE_DT	Start of care date	M0100_ASSMT_REASON	Reason for assessment												
M0030_START_CARE_DT	Start of care date																		
M0100_ASSMT_REASON	Reason for assessment																		

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-3290	Consistency	Warning	<p>If M0100_ASSMT_REASON=[03] and if M0032_ROC_DT and M1005_INP_DISCHARGE_DT are both active and contain valid dates (not [^]), then M0032_ROC_DT minus M1005_INP_DISCHARGE_DT should be greater than or equal to zero and less than or equal to 14.</p> <p>Items: M1005_INP_DISCHARGE_DT Most recent inpatient discharge date</p> <p>M0032_ROC_DT Resumption of care date</p> <p>M0100_ASSMT_REASON Reason for assessment</p> <p>M1005_INP_DISCHARGE_DT Most recent inpatient discharge date</p>
-3300	Consistency	Warning	<p>If M0100_ASSMT_REASON=[01] and if M0090_INFO_COMPLETED_DT and M0030_START_CARE_DT are both active and contain valid dates (not [^]), then M0090_INFO_COMPLETED_DT minus M0030_START_CARE_DT should be greater than or equal to zero and less than or equal to 5.</p> <p>Items: M0030_START_CARE_DT Start of care date</p> <p>M0090_INFO_COMPLETED_DT Date assessment completed</p> <p>M0100_ASSMT_REASON Reason for assessment</p>
-3310	Consistency	Warning	<p>If M0100_ASSMT_REASON=[03] and if M0090_INFO_COMPLETED_DT and M0032_ROC_DT are both active and contain valid dates (not [^]), then M0090_INFO_COMPLETED_DT minus M0032_ROC_DT should be greater than or equal to zero and less than or equal to 2.</p> <p>Items: M0032_ROC_DT Resumption of care date</p> <p>M0090_INFO_COMPLETED_DT Date assessment completed</p> <p>M0100_ASSMT_REASON Reason for assessment</p>
-3320	Consistency	Warning	<p>If M0100_ASSMT_REASON=[09] and if M0090_INFO_COMPLETED_DT and M0906_DC_TRAN_DTH_DT are both active and contain valid dates (not [^]), then M0090_INFO_COMPLETED_DT minus M0906_DC_TRAN_DTH_DT should be greater than or equal to zero and less than or equal to 2.</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M0090_INFO_COMPLETED_DT Date assessment completed M0100_ASSMT_REASON Reason for assessment M0906_DC_TRAN_DTH_DT Discharge, transfer, death date
-3330	Consistency	Warning	If TRANS_TYPE_CD=[1] (new record), then submission date SUBMSN_DT minus M0090_INFO_COMPLETED_DT should be less than or equal to 30 days. Items: TRANS_TYPE_CD Transaction type code M0090_INFO_COMPLETED_DT Date assessment completed
-3340	Consistency	Fatal	If TRANS_TYPE_CD=[1], then CORRECTION_NUM must equal [00]. Items: TRANS_TYPE_CD Transaction type code CORRECTION_NUM Correction number
-3341	Consistency	Fatal	If TRANS_TYPE_CD=[2,3], then CORRECTION_NUM must not equal [00]. Items: TRANS_TYPE_CD Transaction type code CORRECTION_NUM Correction number

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-3420	Consistency	Fatal	If M0016_BRANCH_ID is equal to [N,P], then M0014_BRANCH_STATE must equal [^]. Items: M0014_BRANCH_STATE Branch state M0016_BRANCH_ID Branch ID
-3430	Format	Fatal	The patient ZIP code must be either 5 or 9 bytes in length. Do not include a dash if a ZIP+4 code is submitted. Items: M0060_PAT_ZIP Patient zip code
-3450	Consistency	Fatal	If M1005_INP_DSCHG_UNKNOWN=[0], then if M1005_INP_DISCHARGE_DT is active it must not equal Items: M1005_INP_DISCHARGE_DT Most recent inpatient discharge date M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown
-3460	Consistency	Fatal	If M1005_INP_DSCHG_UNKNOWN=[1], then if M1005_INP_DISCHARGE_DT is active it must equal [^]. Items: M1005_INP_DISCHARGE_DT Most recent inpatient discharge date M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown
-3470	Consistency	Fatal	If M0018_PHYSICIAN_UK=[0], then if M0018_PHYSICIAN_ID is active it cannot equal [^]. Items: M0018_PHYSICIAN_ID Attending physician National Provider ID (NPI) M0018_PHYSICIAN_UK Attending physician NPI: Unknown
-3480	Consistency	Fatal	If M0018_PHYSICIAN_UK=[1], then if M0018_PHYSICIAN_ID is active it must equal [^]. Items: M0018_PHYSICIAN_ID Attending physician National Provider ID (NPI) M0018_PHYSICIAN_UK Attending physician NPI: Unknown

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-3600	Consistency	Fatal	If M0102_PHYSN_ORDRD_SOCROC_DT=[^] then if M0104_PHYSN_RFRL_DT is active it must not equal Items: M0102_PHYSN_ORDRD_SOCROC_DT Physician ordered SOC/ROC date M0104_PHYSN_RFRL_DT Physician date of referral
-3630	Consistency	Fatal	***THIS EDIT WAS DELETED IN V3.01.0*** Items: M0150_CPAY_MCARE_FFS Payment sources: Medicare fee-for-service M0150_CPAY_MCARE_HMO Payment sources: Medicare HMO/managed care M0150_CPAY_MCAID_FFS Payment sources: Medicaid fee-for-service M0150_CPAY_MCAID_HMO Payment sources: Medicaid HMO/managed care
-3640	Consistency	Fatal	Both M0150_CPAY_NONE and M0150_CPAY_UK must equal [0]. Items: M0150_CPAY_NONE Payment sources: no charge for current services M0150_CPAY_UK Payment sources: unknown
-3650	Consistency	Fatal	If M1000_DC_NONE_14_DA=[0], then at least one active item from M1000_DC_LTC_14_DA through M1000_DC_OTH_14_DA must equal [1]. Items: M1000_DC_LTC_14_DA Past 14 days: disch from LTC NH M1000_DC_SNF_14_DA Past 14 days: disch from skilled nursing facility M1000_DC_IPPS_14_DA Past 14 days: disch from short stay acute hospital M1000_DC_LTCH_14_DA Past 14 days: disch from long term care hospital M1000_DC_IRF_14_DA Past 14 days: disch from inpatient rehab facility M1000_DC_PSYCH_14_DA Past 14 days: disch from psych hospital or unit

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: M1000_DC_OTH_14_DA Past 14 days: disch from other M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility
-3660	Consistency	Fatal	If M1000_DC_NONE_14_DA=[1], then all active items from M1000_DC_LTC_14_DA through M1000_DC_OTH_14_DA must equal [0]. Items: M1000_DC_LTC_14_DA Past 14 days: disch from LTC NH M1000_DC_SNF_14_DA Past 14 days: disch from skilled nursing facility M1000_DC_IPPS_14_DA Past 14 days: disch from short stay acute hospital M1000_DC_LTCH_14_DA Past 14 days: disch from long term care hospital M1000_DC_IRF_14_DA Past 14 days: disch from inpatient rehab facility M1000_DC_PSYCH_14_DA Past 14 days: disch from psych hospital or unit M1000_DC_OTH_14_DA Past 14 days: disch from other M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility
-4030	Skip pattern	Fatal	If M1307_OLDST_STG2_AT_DSCHRG=[01,NA], then if M1307_OLDST_STG2_ONST_DT is active it must equal [^]. Items: M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer
-4040	Skip pattern	Fatal	If M1307_OLDST_STG2_AT_DSCHRG=[02], then if M1307_OLDST_STG2_ONST_DT is active it must not equal [^]. Items: M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer

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ID	Type	Severity	Text/Items
-4171	Consistency	Fatal	If M0100_ASSMT_REASON=[01,03], AND M1324_STG_PRBLM_ULCER=[01], then if M1322_NBR_PRSULC_STG1 is active it must be > [00]. Items: M1322_NBR_PRSULC_STG1 Number of stage 1 pressure injuries M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury
-4182	Consistency	Fatal	If M0100_ASSMT_REASON=[01,03,09] AND M1324_STG_PRBLM_ULCER=[02], then if M1311_NBR_PRSULC_STG2_A1 is active it must not equal [^] and it must be greater than [00]. Items: M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury
-4192	Consistency	Fatal	If M0100_ASSMT_REASON=[01,03,09] AND M1324_STG_PRBLM_ULCER=[03], then if M1311_NBR_PRSULC_STG3_B1 is active it must not equal [^] and it must be greater than [00]. Items: M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury
-4202	Consistency	Fatal	If M0100_ASSMT_REASON = [01,03,09], AND M1324_STG_PRBLM_ULCER=[04], then if M1311_NBR_PRSULC_STG4_C1 is active it must not equal [^] and it must be greater than [00]. Items: M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury
-4221	Skip pattern	Fatal	If M0100_ASSMT_REASON = [01,03,09], and M1330_STAS_ULCR_PRSNT = [00,03], then all active items from M1332_NBR_STAS_ULCR through M1334_STUS_PRBLM_STAS_ULCR must equal [^]. Items: M1330_STAS_ULCR_PRSNT Does this patient have a stasis ulcer M1332_NBR_STAS_ULCR Number of stasis ulcers

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ID	Type	Severity	Text/Items
			Items: M1334_STUS_PRBLM_STAS_ULCR Status of most problematic stasis ulcer
-4231	Skip pattern	Fatal	If M0100_ASSMT_REASON = [01,03,09] and M1330_STAS_ULCR_PRSNT = [01,02], then all active items from M1332_NBR_STAS_ULCR through M1334_STUS_PRBLM_STAS_ULCR must not equal [^]. Items: M1330_STAS_ULCR_PRSNT Does this patient have a stasis ulcer M1332_NBR_STAS_ULCR Number of stasis ulcers M1334_STUS_PRBLM_STAS_ULCR Status of most problematic stasis ulcer
-4241	Skip pattern	Fatal	If M0100_ASSMT_REASON = [01,03,09] and M1340_SRGL_WND_PRSNT = [00,02], then if M1342_STUS_PRBLM_SRGL_WND is active it must equal [^]. Items: M1340_SRGL_WND_PRSNT Does this patient have a surgical wound M1342_STUS_PRBLM_SRGL_WND Status of most problematic surgical wound
-4251	Skip pattern	Fatal	If M0100_ASSMT_REASON = [01,03,09], and M1340_SRGL_WND_PRSNT = [01], then if M1342_STUS_PRBLM_SRGL_WND is active it must not equal [^]. Items: M1340_SRGL_WND_PRSNT Does this patient have a surgical wound M1342_STUS_PRBLM_SRGL_WND Status of most problematic surgical wound
-4320	Consistency	Fatal	If M0100_ASSMT_REASON=[09], then if M1600_UTI is active it cannot equal [UK]. Items: M0100_ASSMT_REASON Reason for assessment M1600_UTI Treated for urinary tract infection past 14 days
-4351	Consistency	Fatal	If M0100_ASSMT_REASON=[09], then if M1620_BWL_INCONT is active it cannot equal [UK]. Items: M0100_ASSMT_REASON Reason for assessment

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ID	Type	Severity	Text/Items
			Items: M1620_BWL_INCONT Bowel incontinence frequency
-4361	Consistency	Fatal	If M0100_ASSMT_REASON = [01,03,09], and M1620_BWL_INCONT = [00,01,02,03,04,05,UK], then if M1630_OSTOMY is active it must equal [00].
			Items: M1620_BWL_INCONT Bowel incontinence frequency M1630_OSTOMY Ostomy for bowel elimination
-4371	Consistency	Fatal	If M0100_ASSMT_REASON = [01,03,09], and M1620_BWL_INCONT = [NA], then if M1630_OSTOMY is active it must equal [01,02].
			Items: M1620_BWL_INCONT Bowel incontinence frequency M1630_OSTOMY Ostomy for bowel elimination
-4400	Consistency	Fatal	If M1740_BD_NONE=[0], then at least one active item from M1740_BD_MEM_DEFICIT through M1740_BD_DELUSIONS must equal [1].
			Items: M1740_BD_MEM_DEFICIT Behavior demonstrated: memory deficit M1740_BD_IMP_DECISN Behavior demonstrated: impaired decision-making M1740_BD_VERBAL Behavior demonstrated: verbal disruption M1740_BD_PHYSICAL Behavior demonstrated: physical aggression M1740_BD_SOC_INAPPRO Behavior demonstrated: socially inappropriate M1740_BD_DELUSIONS Behavior demonstrated: delusions M1740_BD_NONE Behavior demonstrated: none of the above
-4410	Consistency	Fatal	If M1740_BD_NONE=[1], then all active items from M1740_BD_MEM_DEFICIT through M1740_BD_DELUSIONS must equal [0].

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M1740_BD_MEM_DEFICIT Behavior demonstrated: memory deficit M1740_BD_IMP_DECISN Behavior demonstrated: impaired decision-making M1740_BD_VERBAL Behavior demonstrated: verbal disruption M1740_BD_PHYSICAL Behavior demonstrated: physical aggression M1740_BD_SOC_INAPPRO Behavior demonstrated: socially inappropriate M1740_BD_DELUSIONS Behavior demonstrated: delusions M1740_BD_NONE Behavior demonstrated: none of the above
-4421	Skip pattern	Fatal	If M2001_DRUG_RGMN_RVW=[0], then M2003_MDCTN_FLWP must equal [^]. Items: M2001_DRUG_RGMN_RVW Drug regimen review M2003_MDCTN_FLWP Medication follow-up
-4431	Skip pattern	Fatal	If M2001_DRUG_RGMN_RVW=[1], then all active items from M2003_MDCTN_FLWP through M2030_CRNT_MGMT_INJCTN_MDCTN must not equal [^]. Items: M2001_DRUG_RGMN_RVW Drug regimen review M2003_MDCTN_FLWP Medication follow-up M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications
-4441	Skip pattern	Fatal	If M2001_DRUG_RGMN_RVW=[9], then all active items from M2003_MDCTN_FLWP through M2030_CRNT_MGMT_INJCTN_MDCTN must equal [^]. Items: M2001_DRUG_RGMN_RVW Drug regimen review

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: M2003_MDCTN_FLWP Medication follow-up M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications M2030_CRNT_MGMT_INJCTN_MDCTN Current: management of injectable medications
-4480	Consistency	Fatal	If M0100_ASSMT_REASON=[09] then M2020_CRNT_MGMT_ORAL_MDCTN cannot equal [^]. Items: M0100_ASSMT_REASON Reason for assessment M2020_CRNT_MGMT_ORAL_MDCTN Current: management of oral medications
-4511	Skip pattern	Fatal	***THIS EDIT WAS DELETED IN V3.01.0*** Items: M0100_ASSMT_REASON Reason for assessment
-4521	Skip pattern	Fatal	***THIS EDIT WAS DELETED IN V3.01.0*** Items: M0100_ASSMT_REASON Reason for assessment
-4531	Skip pattern	Fatal	If M2301_EMER_USE_AFTR_LAST_ASMT=[00,UK], then all active items from M2310_ECR_MEDICATION through M2310_ECR_UNKNOWN must equal [^]. Items: M2301_EMER_USE_AFTR_LAST_ASMT Emergent care: use since most recent SOC/ROC M2310_ECR_MEDICATION Emergent care reason: medication M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia M2310_ECR_OTHER Emergent care reason: other than above M2310_ECR_UNKNOWN Emergent care reason: unknown

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-4541	Skip pattern	Fatal	<p>If M2301_EMER_USE_AFTR_LAST_ASMT=[01,02], then all active items from M2310_ECR_MEDICATION through M2310_ECR_UNKNOWN must not equal [^].</p> <p>Items: M2301_EMER_USE_AFTR_LAST_ASMT Emergent care: use since most recent SOC/ROC M2310_ECR_MEDICATION Emergent care reason: medication M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia M2310_ECR_OTHER Emergent care reason: other than above M2310_ECR_UNKNOWN Emergent care reason: unknown</p>
-4550	Consistency	Fatal	<p>If M2310_ECR_UNKNOWN=[0], then at least one active item from M2310_ECR_MEDICATION through M2310_ECR_OTHER must equal [1].</p> <p>Items: M2310_ECR_MEDICATION Emergent care reason: medication M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia M2310_ECR_OTHER Emergent care reason: other than above M2310_ECR_UNKNOWN Emergent care reason: unknown</p>
-4560	Consistency	Fatal	<p>If M2310_ECR_UNKNOWN=[1], then all active items from M2310_ECR_MEDICATION through M2310_ECR_OTHER must equal [0].</p> <p>Items: M2310_ECR_MEDICATION Emergent care reason: medication M2310_ECR_HYPOGLYC Emergent care reason: hypoglycemia/hyperglycemia M2310_ECR_OTHER Emergent care reason: other than above M2310_ECR_UNKNOWN Emergent care reason: unknown</p>
-4570	Consistency	Fatal	<p>If M0100_ASSMT_REASON=[09], then if M2410_INPAT_FACILITY is active it must equal [NA].</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M0100_ASSMT_REASON Reason for assessment M2410_INPAT_FACILITY Inpatient facility
-4580	Consistency	Fatal	If M0100_ASSMT_REASON=[06,07], then if M2410_INPAT_FACILITY is active it must not equal [NA].
			Items: M0100_ASSMT_REASON Reason for assessment M2410_INPAT_FACILITY Inpatient facility
-4690	Consistency	Fatal	If the assessment was performed by an HHA which has no branches or by a subunit which has no branches, then M0016_BRANCH_ID must contain [N]. This indicates that the assessment was completed by an HHA or subunit which has no branches.
			Items: M0016_BRANCH_ID Branch ID
-4700	Consistency	Fatal	If the assessment was performed by the home office of an HHA which has branches or by the home office of a subunit which has branches, then M0016_BRANCH_ID must contain [P]. This indicates that the assessment was completed by the home office (an HHA parent or subunit -- not a branch).
			Items: M0016_BRANCH_ID Branch ID
-4710	Consistency	Fatal	If M0016_BRANCH_ID does not contain a standard branch ID, [N], or [P], a fatal error will result and the record will be rejected. If a standard branch ID (i.e., not [N,P]) is submitted, then it will be checked against the system table of the HHA's or subunit's current and past branch IDs. If the submitted branch ID does not match a current or past branch ID, then the assessment record will be rejected (i.e., it will result in a fatal error).
			Items: M0016_BRANCH_ID Branch ID
-4730	Consistency	Fatal	If M0100_ASSMT_REASON=[01], then M0032_ROC_DT_NA must be [1].
			Items: M0032_ROC_DT_NA No resumption of care date

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M0100_ASSMT_REASON Reason for assessment
-4740	Consistency	Fatal	If M0100_ASSMT_REASON=[03], then M0032_ROC_DT_NA must be [0].
			Items: M0032_ROC_DT_NA No resumption of care date M0100_ASSMT_REASON Reason for assessment
-4850	Consistency	Fatal	If M0150_CPAY_MCARE_FFS=[1], then M0063_MEDICARE_NUM must not equal [^].
			Items: M0063_MEDICARE_NUM Medicare number, including suffix M0150_CPAY_MCARE_FFS Payment sources: Medicare fee-for-service
-4860	Consistency	Fatal	If M0150_CPAY_MCAID_FFS=[1], then M0065_MEDICAID_NUM must not equal [^].
			Items: M0065_MEDICAID_NUM Medicaid number M0150_CPAY_MCAID_FFS Payment sources: Medicaid fee-for-service
-4870	Consistency	Fatal	If the SFW_ID is not equal to [^], then SFW_NAME and SFW_EMAIL_ADR must not equal [^].
			Items: SFW_ID Software vendor federal employer tax ID SFW_NAME Software vendor company name SFW_EMAIL_ADR Software vendor email address
-4880	Consistency	Fatal	If the SFW_ID is equal to [^], then SFW_NAME and SFW_EMAIL_ADR must equal [^].
			Items: SFW_ID Software vendor federal employer tax ID SFW_NAME Software vendor company name SFW_EMAIL_ADR Software vendor email address

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items												
-4885	Format	Fatal	<p>FORMATTING OF ICD-10 DIAGNOSIS CODES ICD-10 diagnosis codes must conform with the following formatting rules: a) Character 1 must be alphabetic [A-Z,a-z]. b) Character 2 must be numeric [0-9]. c) Character 3 must be numeric [0-9] or alphabetic [A-Z,a-z]. d) Character 4 must be a decimal point. e) Characters 5 through 8 must be numeric [0-9], alphabetic [A-Z,a-z], or caret [^]. f) If any character 5 through 8 is equal to [^], all subsequent characters must equal [^].</p> <p>Note that additional formatting rules for particular items may further restrict the range of allowable values in character 1. Also note that an entirely blank ICD code must be submitted as a single caret:</p> <p>Items:</p> <table border="0"> <tr> <td>M1021_PRIMARY_DIAG_ICD</td> <td>Primary diagnosis ICD code</td> </tr> <tr> <td>M1023_OTH_DIAG1_ICD</td> <td>Other diagnosis 1: ICD code</td> </tr> <tr> <td>M1023_OTH_DIAG2_ICD</td> <td>Other diagnosis 2: ICD code</td> </tr> <tr> <td>M1023_OTH_DIAG3_ICD</td> <td>Other diagnosis 3: ICD code</td> </tr> <tr> <td>M1023_OTH_DIAG4_ICD</td> <td>Other diagnosis 4: ICD code</td> </tr> <tr> <td>M1023_OTH_DIAG5_ICD</td> <td>Other diagnosis 5: ICD code</td> </tr> </table>	M1021_PRIMARY_DIAG_ICD	Primary diagnosis ICD code	M1023_OTH_DIAG1_ICD	Other diagnosis 1: ICD code	M1023_OTH_DIAG2_ICD	Other diagnosis 2: ICD code	M1023_OTH_DIAG3_ICD	Other diagnosis 3: ICD code	M1023_OTH_DIAG4_ICD	Other diagnosis 4: ICD code	M1023_OTH_DIAG5_ICD	Other diagnosis 5: ICD code
M1021_PRIMARY_DIAG_ICD	Primary diagnosis ICD code														
M1023_OTH_DIAG1_ICD	Other diagnosis 1: ICD code														
M1023_OTH_DIAG2_ICD	Other diagnosis 2: ICD code														
M1023_OTH_DIAG3_ICD	Other diagnosis 3: ICD code														
M1023_OTH_DIAG4_ICD	Other diagnosis 4: ICD code														
M1023_OTH_DIAG5_ICD	Other diagnosis 5: ICD code														
-4900	Format	Fatal	<p>RESTRICTIONS ON ICD-10 DIAGNOSIS CODES Character 1 of the ICD code must not equal [V,W,X,Y,v,w,x,y].</p> <p>Items:</p> <table border="0"> <tr> <td>M1021_PRIMARY_DIAG_ICD</td> <td>Primary diagnosis ICD code</td> </tr> </table>	M1021_PRIMARY_DIAG_ICD	Primary diagnosis ICD code										
M1021_PRIMARY_DIAG_ICD	Primary diagnosis ICD code														
-4921	Skip pattern	Fatal	<p>If M1000_DC_NONE_14_DA=[1], then M1005_INP_DISCHARGE_DT and M1005_INP_DSCHG_UNKNOWN must equal [^].</p> <p>Items:</p> <table border="0"> <tr> <td>M1000_DC_NONE_14_DA</td> <td>Past 14 days: not disch from inpatient facility</td> </tr> <tr> <td>M1005_INP_DISCHARGE_DT</td> <td>Most recent inpatient discharge date</td> </tr> </table>	M1000_DC_NONE_14_DA	Past 14 days: not disch from inpatient facility	M1005_INP_DISCHARGE_DT	Most recent inpatient discharge date								
M1000_DC_NONE_14_DA	Past 14 days: not disch from inpatient facility														
M1005_INP_DISCHARGE_DT	Most recent inpatient discharge date														

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
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ID	Type	Severity	Text/Items
			Items: M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown
-4991	Consistency	Warning	If M0100_ASSMT_REASON=[01,03], then M1021_PRIMARY_DIAG_SEVERITY should equal Items: M1021_PRIMARY_DIAG_SEVERITY Primary diagnosis severity rating
-5001	Consistency	Fatal	If M0100_ASSMT_REASON=[01,03] and if a value submitted in items M1021_PRIMARY_DIAG_ICD, M1023_OTH_DIAG1_ICD, M1023_OTH_DIAG2_ICD, M1023_OTH_DIAG3_ICD, M1023_OTH_DIAG4_ICD, or M1023_OTH_DIAG5_ICD is not equal to [^], it must not equal (must not duplicate) any value submitted in the remaining items in this list. Items: M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code
-5050	Consistency	Fatal	If M1033_HOSP_RISK_NONE_ABOVE is equal to [0], then at least one active item from M1033_HOSP_RISK_HSTRY_FALLS through M1033_HOSP_RISK_OTHR_RISK must equal [1]. Items: M1033_HOSP_RISK_HSTRY_FALLS Hosp risk: 2+ falls or injury fall in past year M1033_HOSP_RISK_WEIGHT_LOSS Hosp risk: unintentional weight loss M1033_HOSP_RISK_MLTPH_HOSPZTN Hosp risk: 2+ hospitalizations in past 6 months M1033_HOSP_RISK_MLTPH_ED_VISIT Hosp risk: 2+ emergency dept visits in past 6 months M1033_HOSP_RISK_MNTL_BHV_DCLN Hosp risk: decline mental/emotional/behav status M1033_HOSP_RISK_COMPLIANCE Hosp risk: difficulty with medical instructions

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ID	Type	Severity	Text/Items
			Items: M1033_HOSP_RISK_5PLUS_MDCTN Hosp risk: taking five or more medications M1033_HOSP_RISK_CRNT_EXHSTN Hosp risk: current exhaustion M1033_HOSP_RISK_OTHR_RISK Hosp risk: other risk(s) not listed M1033_HOSP_RISK_NONE_ABOVE Hosp risk: none of the above
-5060	Consistency	Fatal	<p>If M1033_HOSP_RISK_NONE_ABOVE is equal to [1], then all active items from M1033_HOSP_RISK_HSTRY_FALLS through M1033_HOSP_RISK_OTHR_RISK must equal [0].</p> Items: M1033_HOSP_RISK_HSTRY_FALLS Hosp risk: 2+ falls or injury fall in past year M1033_HOSP_RISK_WEIGHT_LOSS Hosp risk: unintentional weight loss M1033_HOSP_RISK_MLTPL_HOSPZTN Hosp risk: 2+ hospitalizations in past 6 months M1033_HOSP_RISK_MLTPL_ED_VISIT Hosp risk: 2+ emergcy dept visits in past 6 months M1033_HOSP_RISK_MNTL_BHV_DCLN Hosp risk: decline mental/emotional/behav status M1033_HOSP_RISK_COMPLIANCE Hosp risk: difficulty with medical instructions M1033_HOSP_RISK_5PLUS_MDCTN Hosp risk: taking five or more medications M1033_HOSP_RISK_CRNT_EXHSTN Hosp risk: current exhaustion M1033_HOSP_RISK_OTHR_RISK Hosp risk: other risk(s) not listed M1033_HOSP_RISK_NONE_ABOVE Hosp risk: none of the above
-5070	Skip pattern	Fatal	<p>If M1041_IN_INFLNZ_SEASON=[1], then if M1046_INFLNZ_RECD_CRNT_SEASON is active it must not equal [^].</p> Items: M1041_IN_INFLNZ_SEASON Does episode include Oct 1 thru Mar 31 M1046_INFLNZ_RECD_CRNT_SEASON Did patient receive influenza vaccine

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ID	Type	Severity	Text/Items
-5080	Skip pattern	Fatal	If M1041_IN_INFLNZ_SEASON=[0], then if M1046_INFLNZ_RECD_CRNT_SEASON is active it must equal Items: M1041_IN_INFLNZ_SEASON Does episode include Oct 1 thru Mar 31 M1046_INFLNZ_RECD_CRNT_SEASON Did patient receive influenza vaccine
-5112	Skip pattern	Fatal	If M0100_ASSMT_REASON = [01,03,09] and M1306_UNHLD_STG2_PRSR_ULCR = [0], then all active items from M1307_OLDST_STG2_AT_DSCHRG through M1311_NSTG_DEEP_TSUE_SOCROC_F2 must Items: M1306_UNHLD_STG2_PRSR_ULCR Patient has 1+ unhealed PU/injury at stage 2+ M1307_OLDST_STG2_AT_DSCHRG Status of oldest stage 2 pressure ulcer at disch M1307_OLDST_STG2_ONST_DT Date of onset of oldest stage 2 pressure ulcer M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: deep tissue injury SOC/ROC

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Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items																
-5123	Skip pattern	Fatal	<p>If M0100_ASSMT_REASON = [01,03,09] and M1306_UNHLD_STG2_PRSR_ULCR = [1], then the following items must not equal [^]: M1307_OLDST_STG2_AT_DSCHRG, M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1, M1311_NBR_PRSULC_STG4_C1, M1311_NSTG_DRSG_D1, M1311_NSTG_CVRG_E1, M1311_NSTG_DEEP_TSUE_F1.</p> <p>Items:</p> <table border="0"> <tr> <td>M1306_UNHLD_STG2_PRSR_ULCR</td> <td>Patient has 1+ unhealed PU/injury at stage 2+</td> </tr> <tr> <td>M1307_OLDST_STG2_AT_DSCHRG</td> <td>Status of oldest stage 2 pressure ulcer at disch</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG2_A1</td> <td>Number of Stage 2 Pressure Ulcers</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG3_B1</td> <td>Number of Stage 3 Pressure Ulcers</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG4_C1</td> <td>Number of Stage 4 Pressure Ulcers</td> </tr> <tr> <td>M1311_NSTG_DRSG_D1</td> <td>Num unstage pressure ulcer non-remov dress</td> </tr> <tr> <td>M1311_NSTG_CVRG_E1</td> <td>Unstageable: coverage by slough or eschar</td> </tr> <tr> <td>M1311_NSTG_DEEP_TSUE_F1</td> <td>Unstageable: deep tissue injury</td> </tr> </table>	M1306_UNHLD_STG2_PRSR_ULCR	Patient has 1+ unhealed PU/injury at stage 2+	M1307_OLDST_STG2_AT_DSCHRG	Status of oldest stage 2 pressure ulcer at disch	M1311_NBR_PRSULC_STG2_A1	Number of Stage 2 Pressure Ulcers	M1311_NBR_PRSULC_STG3_B1	Number of Stage 3 Pressure Ulcers	M1311_NBR_PRSULC_STG4_C1	Number of Stage 4 Pressure Ulcers	M1311_NSTG_DRSG_D1	Num unstage pressure ulcer non-remov dress	M1311_NSTG_CVRG_E1	Unstageable: coverage by slough or eschar	M1311_NSTG_DEEP_TSUE_F1	Unstageable: deep tissue injury
M1306_UNHLD_STG2_PRSR_ULCR	Patient has 1+ unhealed PU/injury at stage 2+																		
M1307_OLDST_STG2_AT_DSCHRG	Status of oldest stage 2 pressure ulcer at disch																		
M1311_NBR_PRSULC_STG2_A1	Number of Stage 2 Pressure Ulcers																		
M1311_NBR_PRSULC_STG3_B1	Number of Stage 3 Pressure Ulcers																		
M1311_NBR_PRSULC_STG4_C1	Number of Stage 4 Pressure Ulcers																		
M1311_NSTG_DRSG_D1	Num unstage pressure ulcer non-remov dress																		
M1311_NSTG_CVRG_E1	Unstageable: coverage by slough or eschar																		
M1311_NSTG_DEEP_TSUE_F1	Unstageable: deep tissue injury																		
-5132	Consistency	Fatal	<p>If M0100_ASSMT_REASON = [01,03,09] and M1306_UNHLD_STG2_PRSR_ULCR = [1], then at least one of the following items must be greater than [00]: M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1, M1311_NBR_PRSULC_STG4_C1, M1311_NSTG_DRSG_D1, M1311_NSTG_CVRG_E1, and M1311_NSTG_DEEP_TSUE_F1.</p> <p>Items:</p> <table border="0"> <tr> <td>M1306_UNHLD_STG2_PRSR_ULCR</td> <td>Patient has 1+ unhealed PU/injury at stage 2+</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG2_A1</td> <td>Number of Stage 2 Pressure Ulcers</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG3_B1</td> <td>Number of Stage 3 Pressure Ulcers</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG4_C1</td> <td>Number of Stage 4 Pressure Ulcers</td> </tr> <tr> <td>M1311_NSTG_DRSG_D1</td> <td>Num unstage pressure ulcer non-remov dress</td> </tr> <tr> <td>M1311_NSTG_CVRG_E1</td> <td>Unstageable: coverage by slough or eschar</td> </tr> </table>	M1306_UNHLD_STG2_PRSR_ULCR	Patient has 1+ unhealed PU/injury at stage 2+	M1311_NBR_PRSULC_STG2_A1	Number of Stage 2 Pressure Ulcers	M1311_NBR_PRSULC_STG3_B1	Number of Stage 3 Pressure Ulcers	M1311_NBR_PRSULC_STG4_C1	Number of Stage 4 Pressure Ulcers	M1311_NSTG_DRSG_D1	Num unstage pressure ulcer non-remov dress	M1311_NSTG_CVRG_E1	Unstageable: coverage by slough or eschar				
M1306_UNHLD_STG2_PRSR_ULCR	Patient has 1+ unhealed PU/injury at stage 2+																		
M1311_NBR_PRSULC_STG2_A1	Number of Stage 2 Pressure Ulcers																		
M1311_NBR_PRSULC_STG3_B1	Number of Stage 3 Pressure Ulcers																		
M1311_NBR_PRSULC_STG4_C1	Number of Stage 4 Pressure Ulcers																		
M1311_NSTG_DRSG_D1	Num unstage pressure ulcer non-remov dress																		
M1311_NSTG_CVRG_E1	Unstageable: coverage by slough or eschar																		

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ID	Type	Severity	Text/Items
-5201	Consistency	Fatal	<p>If M0100_ASSMT_REASON=[01,03] and if character 1 of the Primary/Other ICD code in Column 2 is equal to [V,W,X,Y,Z,v,w,x,y,z], then the corresponding severity code must equal [^].</p> <p>Items: M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury</p> <p>M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code</p> <p>M1021_PRIMARY_DIAG_SEVERITY Primary diagnosis severity rating</p> <p>M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code</p> <p>M1023_OTH_DIAG1_SEVERITY Other diagnosis 1: severity rating</p> <p>M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code</p> <p>M1023_OTH_DIAG2_SEVERITY Other diagnosis 2: severity rating</p> <p>M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code</p> <p>M1023_OTH_DIAG3_SEVERITY Other diagnosis 3: severity rating</p> <p>M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code</p> <p>M1023_OTH_DIAG4_SEVERITY Other diagnosis 4: severity rating</p> <p>M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code</p> <p>M1023_OTH_DIAG5_SEVERITY Other diagnosis 5: severity rating</p>
-5211	Consistency	Fatal	<p>If M0100_ASSMT_REASON=[01,03] and if the Primary/Other ICD code in Column 2 is NOT equal to [^] AND character 1 of the ICD code is NOT equal to [V,W,X,Y,Z,v,w,x,y,z], then the corresponding severity code must not equal [^].</p> <p>Items: M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code</p> <p>M1021_PRIMARY_DIAG_SEVERITY Primary diagnosis severity rating</p> <p>M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code</p>

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ID	Type	Severity	Text/Items
			Items: M1023_OTH_DIAG1_SEVERITY Other diagnosis 1: severity rating M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code M1023_OTH_DIAG2_SEVERITY Other diagnosis 2: severity rating M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code M1023_OTH_DIAG3_SEVERITY Other diagnosis 3: severity rating M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code M1023_OTH_DIAG4_SEVERITY Other diagnosis 4: severity rating M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code M1023_OTH_DIAG5_SEVERITY Other diagnosis 5: severity rating
-5221	Consistency	Fatal	If M0100_ASSMT_REASON =[01,03], and if the Primary/Other ICD code in Column 2 is equal to [^], then the corresponding severity code must equal [^]. Items: M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code M1021_PRIMARY_DIAG_SEVERITY Primary diagnosis severity rating M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code M1023_OTH_DIAG1_SEVERITY Other diagnosis 1: severity rating M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code M1023_OTH_DIAG2_SEVERITY Other diagnosis 2: severity rating M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code M1023_OTH_DIAG3_SEVERITY Other diagnosis 3: severity rating M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code

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ID	Type	Severity	Text/Items
			Items: M1023_OTH_DIAG4_SEVERITY Other diagnosis 4: severity rating M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code M1023_OTH_DIAG5_SEVERITY Other diagnosis 5: severity rating
-5280	Format	Fatal	The value submitted in M0010_CCN must either be equal to [^] or it must be exactly 6 characters in Items: M0010_CCN Facility CMS certification number (CCN)
-5290	Consistency	Fatal	If M0100_ASSMT_REASON=[06,07,08,09], then M0906_DC_TRAN_DTH_DT must not equal [^]. Items: M0100_ASSMT_REASON Reason for assessment M0906_DC_TRAN_DTH_DT Discharge, transfer, death date
-5300	Consistency	Fatal	If TRANS_TYPE_CD=[3] (inactivate existing record) and M0100_ASSMT_REASON=[01,03,04,05], then M0906_DC_TRAN_DTH_DT must equal [^]. Items: TRANS_TYPE_CD Transaction type code M0100_ASSMT_REASON Reason for assessment M0906_DC_TRAN_DTH_DT Discharge, transfer, death date
-5320	Consistency	Fatal	If M1000_DC_NONE_14_DA=[0], then if M1005_INP_DSCHG_UNKNOWN is active it must not equal [^]. Items: M1000_DC_NONE_14_DA Past 14 days: not disch from inpatient facility M1005_INP_DSCHG_UNKNOWN Inpatient discharge date unknown
-5340	Consistency	Fatal	If M0104_PHYSN_RFRL_DT is not equal to [^] and if M0100_ASSMT_REASON=[01], then M0104_PHYSN_RFRL_DT must be less than or equal to M0030_START_CARE_DT and must be greater than M0066_PAT_BIRTH_DT.

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ID	Type	Severity	Text/Items
			Items: M0030_START_CARE_DT Start of care date M0066_PAT_BIRTH_DT Date of birth M0100_ASSMT_REASON Reason for assessment M0104_PHYSN_RFRL_DT Physician date of referral
-5350	Consistency	Fatal	<p>If M0104_PHYSN_RFRL_DT is not equal to [^] and if M0100_ASSMT_REASON=[03], then M0104_PHYSN_RFRL_DT must be less than or equal to M0032_ROC_DT and must be greater than M0066_PAT_BIRTH_DT.</p> Items: M0032_ROC_DT Resumption of care date M0066_PAT_BIRTH_DT Date of birth M0100_ASSMT_REASON Reason for assessment M0104_PHYSN_RFRL_DT Physician date of referral
-5360	Format	Warning	<p>Version Code Values: The version code submitted should match one of the values listed in the “Item Values” table of the Detailed Data Specifications Report.</p> Items: ITM_SET_VRSN_CD Item set version code
-5371	Skip pattern	Fatal	<p>(a) If M1311_NBR_PRSULC_STG2_A1=[0], then if M1311_NBR_ULC_SOCROC_STG2_A2 is active, it must be equal to [^].</p> <p>(b) If M1311_NBR_PRSULC_STG2_A1>0, then if M1311_NBR_ULC_SOCROC_STG2_A2 is active, it must not be equal to [^].</p> Items: M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC

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ID	Type	Severity	Text/Items
-5372	Consistency	Fatal	<p>If M1311_NBR_PRSULC_STG2_A1 is greater than 0, and M1311_NBR_ULC_SOCROC_STG2_A2 is active, then M1311_NBR_ULC_SOCROC_STG2_A2 must be (a) less than or equal to M1311_NBR_PRSULC_STG2_A1, or (b) equal to dash [-].</p> <p>Items: M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC</p>
-5373	Consistency	Fatal	<p>If M1311_NBR_PRSULC_STG2_A1=[-], then if M1311_NBR_ULC_SOCROC_STG2_A2 is active, it must be equal to [-].</p> <p>Items: M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG2_A2 Number of Stage 2 pressure ulcers at SOC/ROC</p>
-5381	Skip pattern	Fatal	<p>(a) If M1311_NBR_PRSULC_STG3_B1=[0], then if M1311_NBR_ULC_SOCROC_STG3_B2 is active, it must be equal to [^].</p> <p>(b) If M1311_NBR_PRSULC_STG3_B1>0, then if M1311_NBR_ULC_SOCROC_STG3_B2 is active, it must not be equal to [^].</p> <p>Items: M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC</p>
-5382	Consistency	Fatal	<p>If M1311_NBR_PRSULC_STG3_B1 is greater than 0, and M1311_NBR_ULC_SOCROC_STG3_B2 is active, then M1311_NBR_ULC_SOCROC_STG3_B2 must be (a) less than or equal to M1311_NBR_PRSULC_STG3_B1, or (b) equal to dash [-].</p> <p>Items: M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC</p>

Data Submission Specifications for the OASIS Item Set(V3.01.1)
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ID	Type	Severity	Text/Items
-5383	Consistency	Fatal	<p>If M1311_NBR_PRSULC_STG3_B1=[-], then if M1311_NBR_ULC_SOCROC_STG3_B2 is active, it must be equal to [-].</p> <p>Items: M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG3_B2 Number of Stage 3 pressure ulcers at SOC/ROC</p>
-5391	Skip pattern	Fatal	<p>(a) If M1311_NBR_PRSULC_STG4_C1=[0], then if M1311_NBR_ULC_SOCROC_STG4_C2 is active, it must be equal to [^].</p> <p>(b) If M1311_NBR_PRSULC_STG4_C1>0, then if M1311_NBR_ULC_SOCROC_STG4_C2 is active, it must not be equal to [^].</p> <p>Items: M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC</p>
-5392	Consistency	Fatal	<p>If M1311_NBR_PRSULC_STG4_C1 is greater than 0, and M1311_NBR_ULC_SOCROC_STG4_C2 is active, then M1311_NBR_ULC_SOCROC_STG4_C2 must be (a) less than or equal to M1311_NBR_PRSULC_STG4_C1, or (b) equal to dash [-].</p> <p>Items: M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC</p>
-5393	Consistency	Fatal	<p>If M1311_NBR_PRSULC_STG4_C1=[-], then if M1311_NBR_ULC_SOCROC_STG4_C2 is active, it must be equal to [-].</p> <p>Items: M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1311_NBR_ULC_SOCROC_STG4_C2 Number of Stage 4 pressure ulcers at SOC/ROC</p>

Data Submission Specifications for the OASIS Item Set(V3.01.1)
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ID	Type	Severity	Text/Items
-5401	Skip pattern	Fatal	<p>(a) If M1311_NSTG_DRSG_D1=[0], then if M1311_NSTG_DRSG_SOCROC_D2 is active, it must be equal to [^].</p> <p>(b) If M1311_NSTG_DRSG_D1>0, then if M1311_NSTG_DRSG_SOCROC_D2 is active, it must not be equal to [^].</p> <p>Items: M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress</p>
-5402	Consistency	Fatal	<p>If M1311_NSTG_DRSG_D1 is greater than 0, and M1311_NSTG_DRSG_SOCROC_D2 is active, then M1311_NSTG_DRSG_SOCROC_D2 must be (a) less than or equal to M1311_NSTG_DRSG_D1, or (b) equal to dash [-].</p> <p>Items: M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress</p>
-5403	Consistency	Fatal	<p>If M1311_NSTG_DRSG_D1=[-], then if M1311_NSTG_DRSG_SOCROC_D2 is active, it must be equal to [-].</p> <p>Items: M1311_NSTG_DRSG_D1 Num unstage pressure ulcer non-remov dress M1311_NSTG_DRSG_SOCROC_D2 Num unstage pressure ulcer non-remov dress</p>
-5411	Skip pattern	Fatal	<p>(a) If M1311_NSTG_CVRG_E1=[0], then if M1311_NSTG_CVRG_SOCROC_E2 is active, it must be equal to [^].</p> <p>(b) If M1311_NSTG_CVRG_E1 >0, then if M1311_NSTG_CVRG_SOCROC_E2 is active, it must not be equal to [^].</p> <p>Items: M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC</p>

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ID	Type	Severity	Text/Items
-5412	Consistency	Fatal	<p>If M1311_NSTG_CVRG_E1 is greater than 0, and M1311_NSTG_CVRG_SOCROC_E2 is active, then M1311_NSTG_CVRG_SOCROC_E2 must be (a) less than or equal to M1311_NSTG_CVRG_E1, or (b) equal to dash [-].</p> <p>Items: M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC</p>
-5413	Consistency	Fatal	<p>If M1311_NSTG_CVRG_E1=[-], then if M1311_NSTG_CVRG_SOCROC_E2 is active, it must be equal to [-].</p> <p>Items: M1311_NSTG_CVRG_E1 Unstageable: coverage by slough or eschar M1311_NSTG_CVRG_SOCROC_E2 Unstageable: coverage by slough or eschar SOC/ROC</p>
-5421	Skip pattern	Fatal	<p>(a) If M1311_NSTG_DEEP_TSUE_F=[0], then if M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, it must be equal to [^].</p> <p>(b) If M1311_NSTG_DEEP_TSUE_F1 >0, then if M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, it must not be equal to [^].</p> <p>Items: M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: deep tissue injury SOC/ROC</p>
-5422	Consistency	Fatal	<p>If M1311_NSTG_DEEP_TSUE_F1 is greater than 0, and M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, then M1311_NSTG_DEEP_TSUE_SOCROC_F2 must be (a) less than or equal to M1311_NSTG_DEEP_TSUE_F1, or (b) equal to dash [-].</p> <p>Items: M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: deep tissue injury SOC/ROC</p>
-5423	Consistency	Fatal	<p>If M1311_NSTG_DEEP_TSUE_F1=[-], then if M1311_NSTG_DEEP_TSUE_SOCROC_F2 is active, it must be equal to [-].</p>

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ID	Type	Severity	Text/Items
			Items: M1311_NSTG_DEEP_TSUE_F1 Unstageable: deep tissue injury M1311_NSTG_DEEP_TSUE_SOCROC_F2 Unstageable: deep tissue injury SOC/ROC
-5460	Consistency	Fatal	<p>The value for M0090_INFO_COMPLETED_DT must be within the allowable date range specified by the value for SPEC_VRSN_CD. The list of SPEC_VRSN_CD values and their corresponding date ranges are provided in the Overview document for the OASIS Data Specifications.</p> Items: SPEC_VRSN_CD Specifications version code M0090_INFO_COMPLETED_DT Date assessment completed
-5470	Consistency	Fatal	<p>If M2001_DRUG_RGMN_RVW=[-], then M2003_MDCTN_FLWP must equal [-].</p> Items: M2001_DRUG_RGMN_RVW Drug regimen review M2003_MDCTN_FLWP Medication follow-up
-5490	Skip pattern	Fatal	<p>If M2001_DRUG_RGMN_RVW=[0], then M2010_HIGH_RISK_DRUG_EDCTN must not equal [^].</p> Items: M2001_DRUG_RGMN_RVW Drug regimen review M2010_HIGH_RISK_DRUG_EDCTN Patient/caregiver high risk drug education
-5500	Consistency	Fatal	<p>GG0110 Consistency:</p> <p>a) If GG0110Z=[1], then all items from GG0110A through GG0110E must be equal to [0].</p> <p>b) If GG0110Z=[0], then at least one of the items GG0110A through GG0110E must be equal to [1].</p> <p>c) If GG0110Z=[-], then at least one item from GG0110A through GG0110E must equal [-], and all remaining items must equal [0,-].</p> Items: GG0110A Prior Device - Manual wheelchair

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ID	Type	Severity	Text/Items
			Items: GG0170R1 Wheel 50 feet with two turns (SOC/ROC Perf) GG0170RR1 Type of wheelchair or scooter (SOC/ROC Perf) GG0170S1 Wheel 150 feet (SOC/ROC Perf) GG0170SS1 Type of wheelchair or scooter (SOC/ROC Perf)
-5610	Skip pattern	Fatal	(a) If GG0170Q3=[0], then the following items must be equal to [^]: GG0170R3, GG0170RR3, GG0170S3, GG0170SS3. (b) If GG0170Q3=[1], then the following items must not be equal to [^]: GG0170R3, GG0170RR3, GG0170S3, GG0170SS3. (c) If GG0170Q3=[-], then the following items must be equal to [-]: GG0170R3, GG0170RR3, GG0170S3, GG0170SS3. Items: GG0170Q3 Use wheelchair and/or scooter (Dschrg Perf) GG0170R3 Wheel 50 feet with two turns (Dschrg Perf) GG0170RR3 Type of wheelchair or scooter (Dschrg Perf) GG0170S3 Wheel 150 feet (Dschrg Perf) GG0170SS3 Type of wheelchair or scooter (Dschrg Perf)
-5620	Skip pattern	Fatal	(a) If GG0170Q4=[0], then GG0170R4 must be equal to [^]. (b) If GG0170Q4=[1], then GG0170R4 must not be equal to [^]. (c) If GG0170Q4=[-], then GG0170R4 must be equal to [-]. Items: GG0170Q4 Use wheelchair and/or scooter (Follow-Up Perf) GG0170R4 Wheel 50 feet with two turns (Follow-Up Perf)

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Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items														
-5630	Skip pattern	Fatal	<p>(a) If J1800=[0], then all active items from J1900A through J1900C must equal [^].</p> <p>(b) If J1800=[1], then all active items from J1900A through J1900C must not equal [^] and at least one of these items must equal [-,1,2].</p> <p>(c) If J1800=[-], then all active items from J1900A through J1900C must equal [-].</p> <p>Items:</p> <table border="0"> <tr> <td>J1800</td> <td>Falls since SOC/ROC: any falls</td> </tr> <tr> <td>J1900A</td> <td>Num falls since SOC/ROC: no injury</td> </tr> <tr> <td>J1900B</td> <td>Num falls since SOC/ROC: injury (except major)</td> </tr> <tr> <td>J1900C</td> <td>Num falls since SOC/ROC: major injury</td> </tr> </table>	J1800	Falls since SOC/ROC: any falls	J1900A	Num falls since SOC/ROC: no injury	J1900B	Num falls since SOC/ROC: injury (except major)	J1900C	Num falls since SOC/ROC: major injury						
J1800	Falls since SOC/ROC: any falls																
J1900A	Num falls since SOC/ROC: no injury																
J1900B	Num falls since SOC/ROC: injury (except major)																
J1900C	Num falls since SOC/ROC: major injury																
-5661	Consistency	Fatal	<p>If M0100_ASSMT_REASON = [01,03], then none of the following items can be equal to [-]: M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1, M1311_NBR_PRSULC_STG4_C1, M1311_NSTG_DRSG_D1, M1311_NSTG_CVRG_E1, and M1311_NSTG_DEEP_TSUE_F1.</p> <p>Items:</p> <table border="0"> <tr> <td>M0100_ASSMT_REASON</td> <td>Reason for assessment</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG2_A1</td> <td>Number of Stage 2 Pressure Ulcers</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG3_B1</td> <td>Number of Stage 3 Pressure Ulcers</td> </tr> <tr> <td>M1311_NBR_PRSULC_STG4_C1</td> <td>Number of Stage 4 Pressure Ulcers</td> </tr> <tr> <td>M1311_NSTG_DRSG_D1</td> <td>Num unstage pressure ulcer non-remov dress</td> </tr> <tr> <td>M1311_NSTG_CVRG_E1</td> <td>Unstageable: coverage by slough or eschar</td> </tr> <tr> <td>M1311_NSTG_DEEP_TSUE_F1</td> <td>Unstageable: deep tissue injury</td> </tr> </table>	M0100_ASSMT_REASON	Reason for assessment	M1311_NBR_PRSULC_STG2_A1	Number of Stage 2 Pressure Ulcers	M1311_NBR_PRSULC_STG3_B1	Number of Stage 3 Pressure Ulcers	M1311_NBR_PRSULC_STG4_C1	Number of Stage 4 Pressure Ulcers	M1311_NSTG_DRSG_D1	Num unstage pressure ulcer non-remov dress	M1311_NSTG_CVRG_E1	Unstageable: coverage by slough or eschar	M1311_NSTG_DEEP_TSUE_F1	Unstageable: deep tissue injury
M0100_ASSMT_REASON	Reason for assessment																
M1311_NBR_PRSULC_STG2_A1	Number of Stage 2 Pressure Ulcers																
M1311_NBR_PRSULC_STG3_B1	Number of Stage 3 Pressure Ulcers																
M1311_NBR_PRSULC_STG4_C1	Number of Stage 4 Pressure Ulcers																
M1311_NSTG_DRSG_D1	Num unstage pressure ulcer non-remov dress																
M1311_NSTG_CVRG_E1	Unstageable: coverage by slough or eschar																
M1311_NSTG_DEEP_TSUE_F1	Unstageable: deep tissue injury																

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
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ID	Type	Severity	Text/Items
-5670	Consistency	Fatal	<p>(a) If M1028_ACTV_DIAG_NOA = [0], then at least one of M1028_ACTV_DIAG_PVD_PAD and M1028_ACTV_DIAG_DM must equal [1].</p> <p>(b) If M1028_ACTV_DIAG_NOA = [1], then M1028_ACTV_DIAG_PVD_PAD and M1028_ACTV_DIAG_DM must equal [0].</p> <p>(c) If M1028_ACTV_DIAG_NOA = [-], then at least one of M1028_ACTV_DIAG_PVD_PAD and M1028_ACTV_DIAG_DM must equal [-] and the other item must equal [0,-].</p> <p>Items: M1028_ACTV_DIAG_PVD_PAD Active Diagnoses - PVD or PAD M1028_ACTV_DIAG_DM Active Diagnoses - Diabetes Mellitus M1028_ACTV_DIAG_NOA Active Diagnoses - None of the above</p>
-5681	Consistency	Fatal	<p>(a) If M0100_ASSMT_REASON = [01,03], and M1322_NBR_PRSULC_STG1 and M1311_NBR_PRSULC_STG2_A1 and M1311_NBR_PRSULC_STG3_B1 and M1311_NBR_PRSULC_STG4_C1 are all equal to [00,^], then if M1324_STG_PRBLM_ULCER is active it must be equal to [NA].</p> <p>(b) If M0100_ASSMT_REASON=[09], and if M1311_NBR_PRSULC_STG2_A1, M1311_NBR_PRSULC_STG3_B1 and M1311_NBR_PRSULC_STG4_C1 are all equal to [00,-,^], then M1324_STG_PRBLM_ULCER must be equal to [1, NA].</p> <p>Items: M0100_ASSMT_REASON Reason for assessment M1311_NBR_PRSULC_STG2_A1 Number of Stage 2 Pressure Ulcers M1311_NBR_PRSULC_STG3_B1 Number of Stage 3 Pressure Ulcers M1311_NBR_PRSULC_STG4_C1 Number of Stage 4 Pressure Ulcers M1322_NBR_PRSULC_STG1 Number of stage 1 pressure injuries M1324_STG_PRBLM_ULCER Stage of most problematic pressure ulcer/injury</p>

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ID	Type	Severity	Text/Items														
-5710	Format	Fatal	<p>Incorrect Medicare Number: This item must conform to the format defined below:</p> <ul style="list-style-type: none"> • The Medicare Number shall be eleven characters in length • The first character must be numeric, excluding zero (0) • The second, fifth, eighth and ninth characters must be alphabetic, excluding the following letters: S, L, O, I, B, and Z. • The fourth, seventh, tenth and eleventh characters must be numeric. • The third and sixth characters must be alphabetic (excluding S, L, O, I, B, and Z) or numeric. <p>Items: M0063_MEDICARE_NUM Medicare number, including suffix</p>														
-5720	Consistency	Fatal	<p>(a) At least one active item from A1005A to A1005Y must equal [1]. (b) If A1005A=[1], then all active items from A1005B through A1005E must equal [0], and A1005Y must equal [0]. (c) If A1005B=[1] or A1005C=[1] or A1005D=[1] or A1005E=[1], then A1005A must equal [0] and A1005Y must equal [0]. (d) If A1005X=[1], then A1005Y must equal [0]. (e) If A1005Y=[1], then all active items from A1005A to A1005X must equal [0].</p> <p>Items:</p> <table border="0"> <tr> <td>A1005A</td> <td>Ethnicity: No, Not Hispanic, Latino/a, Spanish</td> </tr> <tr> <td>A1005B</td> <td>Ethnicity: Yes, Mex, Mex Amer, Chicano/a</td> </tr> <tr> <td>A1005C</td> <td>Ethnicity: Yes, Puerto Rican</td> </tr> <tr> <td>A1005D</td> <td>Ethnicity: Yes, Cuban</td> </tr> <tr> <td>A1005E</td> <td>Ethnicity: Yes, Another Hispanic/Latino/Spanish</td> </tr> <tr> <td>A1005X</td> <td>Ethnicity: Patient unable to respond</td> </tr> <tr> <td>A1005Y</td> <td>Ethnicity: Patient declines to respond</td> </tr> </table>	A1005A	Ethnicity: No, Not Hispanic, Latino/a, Spanish	A1005B	Ethnicity: Yes, Mex, Mex Amer, Chicano/a	A1005C	Ethnicity: Yes, Puerto Rican	A1005D	Ethnicity: Yes, Cuban	A1005E	Ethnicity: Yes, Another Hispanic/Latino/Spanish	A1005X	Ethnicity: Patient unable to respond	A1005Y	Ethnicity: Patient declines to respond
A1005A	Ethnicity: No, Not Hispanic, Latino/a, Spanish																
A1005B	Ethnicity: Yes, Mex, Mex Amer, Chicano/a																
A1005C	Ethnicity: Yes, Puerto Rican																
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**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items																																		
-5730	Consistency	Fatal	<p>(a) At least one active item from A1010A through A1010Z must equal [1]. (b) If any item from A1010A through A1010N=[1], then A1010Y must equal [0] and A1010Z must equal [0]. (c) If A1010X=[1], then A1010Y must equal [0]. (d) If A1010Y=[1], then all active items from A1010A to A1010X must equal [0], and A1010Z must equal [0].</p> <p>Items:</p> <table border="0"> <tr><td>A1010A</td><td>Race: White</td></tr> <tr><td>A1010B</td><td>Race: Black or African American</td></tr> <tr><td>A1010C</td><td>Race: American Indian or Alaska Native</td></tr> <tr><td>A1010D</td><td>Race: Asian Indian</td></tr> <tr><td>A1010E</td><td>Race: Chinese</td></tr> <tr><td>A1010F</td><td>Race: Filipino</td></tr> <tr><td>A1010G</td><td>Race: Japanese</td></tr> <tr><td>A1010H</td><td>Race: Korean</td></tr> <tr><td>A1010I</td><td>Race: Vietnamese</td></tr> <tr><td>A1010J</td><td>Race: Other Asian</td></tr> <tr><td>A1010K</td><td>Race: Native Hawaiian</td></tr> <tr><td>A1010L</td><td>Race: Guamanian or Chamorro</td></tr> <tr><td>A1010M</td><td>Race: Samoan</td></tr> <tr><td>A1010N</td><td>Race: Other Pacific Islander</td></tr> <tr><td>A1010X</td><td>Race: Patient unable to respond</td></tr> <tr><td>A1010Y</td><td>Race: Patient declines to respond</td></tr> <tr><td>A1010Z</td><td>Race: None of the above</td></tr> </table>	A1010A	Race: White	A1010B	Race: Black or African American	A1010C	Race: American Indian or Alaska Native	A1010D	Race: Asian Indian	A1010E	Race: Chinese	A1010F	Race: Filipino	A1010G	Race: Japanese	A1010H	Race: Korean	A1010I	Race: Vietnamese	A1010J	Race: Other Asian	A1010K	Race: Native Hawaiian	A1010L	Race: Guamanian or Chamorro	A1010M	Race: Samoan	A1010N	Race: Other Pacific Islander	A1010X	Race: Patient unable to respond	A1010Y	Race: Patient declines to respond	A1010Z	Race: None of the above
A1010A	Race: White																																				
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Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items												
-5740	Consistency	Fatal	<p>(a) At least one active item from A1250A to A1250Y must equal [1]. (b) If A1250A=[1] or A1250B=[1], then A1250C and A1250Y must equal [0]. (c) If A1250C=[1], then A1250A and A1250B must equal [0]. (d) If A1250X=[1], then A1250Y must equal [0]. (e) If A1250Y=[1], then the following items must equal [0]: A1250A, A1250B, A1250C, A1250X.</p> <p>Items:</p> <table border="0"> <tr> <td>A1250A</td> <td>Transportation: Yes, medical</td> </tr> <tr> <td>A1250B</td> <td>Transportation: Yes, non-medical</td> </tr> <tr> <td>A1250C</td> <td>Transportation: No</td> </tr> <tr> <td>A1250X</td> <td>Transportation: Patient unable to respond</td> </tr> <tr> <td>A1250Y</td> <td>Transportation: Patient declines to respond</td> </tr> </table>	A1250A	Transportation: Yes, medical	A1250B	Transportation: Yes, non-medical	A1250C	Transportation: No	A1250X	Transportation: Patient unable to respond	A1250Y	Transportation: Patient declines to respond		
A1250A	Transportation: Yes, medical														
A1250B	Transportation: Yes, non-medical														
A1250C	Transportation: No														
A1250X	Transportation: Patient unable to respond														
A1250Y	Transportation: Patient declines to respond														
-5750	Skip pattern	Fatal	<p>(a) If A2121=[0], then all active items from A2122A through A2122E must equal [^]. (b) If A2121=[1], then all active items from A2122A through A2122E must not equal [^]. (c) If A2121=[1], then at least one active item from A2122A through A2122E must equal [1].</p> <p>Items:</p> <table border="0"> <tr> <td>A2121</td> <td>Current Reconciled Medication List - Prvdr (Dis)</td> </tr> <tr> <td>A2122A</td> <td>Provider Trans - Electronic Health Record</td> </tr> <tr> <td>A2122B</td> <td>Provider Trans - Health Info Exchange</td> </tr> <tr> <td>A2122C</td> <td>Provider Trans - Verbal</td> </tr> <tr> <td>A2122D</td> <td>Provider Trans - Paper-based</td> </tr> <tr> <td>A2122E</td> <td>Provider Trans - Other Methods</td> </tr> </table>	A2121	Current Reconciled Medication List - Prvdr (Dis)	A2122A	Provider Trans - Electronic Health Record	A2122B	Provider Trans - Health Info Exchange	A2122C	Provider Trans - Verbal	A2122D	Provider Trans - Paper-based	A2122E	Provider Trans - Other Methods
A2121	Current Reconciled Medication List - Prvdr (Dis)														
A2122A	Provider Trans - Electronic Health Record														
A2122B	Provider Trans - Health Info Exchange														
A2122C	Provider Trans - Verbal														
A2122D	Provider Trans - Paper-based														
A2122E	Provider Trans - Other Methods														
-5760	Skip pattern	Fatal	<p>(a) If A2120=[0,2], then all active items from A2122A through A2122E must equal [^]. (b) If A2120=[1], then all active items from A2122A through A2122E must not equal [^]. (c) If A2120=[1], then at least one active item from A2122A through A2122E must equal [1].</p>												

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: A2120 Current Reconciled Medication List - Prvdr (Tra) A2122A Provider Trans - Electronic Health Record A2122B Provider Trans - Health Info Exchange A2122C Provider Trans - Verbal A2122D Provider Trans - Paper-based A2122E Provider Trans - Other Methods
-5770	Skip pattern	Fatal	If M2420_DSCHRG_DISP=[01,04,UK], then all active items from A2121 through A2122E must equal [^]. Items: M2420_DSCHRG_DISP Discharge disposition A2121 Current Reconciled Medication List - Prvdr (Dis) A2122A Provider Trans - Electronic Health Record A2122B Provider Trans - Health Info Exchange A2122C Provider Trans - Verbal A2122D Provider Trans - Paper-based A2122E Provider Trans - Other Methods
-5780	Consistency	Fatal	(a) If A2123=[0], then all active items from A2124A through A2124E must equal [^]. (b) If A2123=[1], then all active item from A2124A through A2124E must not equal [^]. (c) If A2123=[1], then at least one active item from A2124A through A2124E must equal [1]. Items: A2123 Current Reconciled Medication List - Ptnt (Dis) A2124A Patient Trans - Electronic Health Record A2124B Patient Trans - Health Info Exchange

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: A2124C Patient Trans - Verbal A2124D Patient Trans - Paper-based A2124E Patient Trans - Other Methods
-5790	Skip pattern	Fatal	(a) If C0100=[0], then all active items from C0200 through C0500 must equal [^]. (b) If C0100=[1], then all active items from C0200 through C0500 must not equal [^]. (c) If C0100=[-], then all active items from C0200 through C0500 must equal [-]. Items: C0100 Brief Interview for Mental Status C0200 Repetition of three words C0300A Temporal Orientation: Able to report correct year C0300B Temporal Orientation: Able to report correct month C0300C Temporal Orientation: Able to report correct day C0400A Recall: Able to recall "sock" C0400B Recall: Able to recall "blue" C0400C Recall: Able to recall "bed" C0500 BIMS Summary Score

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-5900	Consistency	Fatal	<p>(a) If D0150A2 = [0,1] and D0150B2 = [0,1], then the following active items must equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(b) If D0150A1 = [-] or D0150B1 = [-], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(c) If D0150A1 = [9] and D0150B1 = [9], then the following active items must equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(d) If (D0150A2 = [^] and D0150B2 = [0,1]) OR (D0150A2 = [0,1] and D0150B2 = [^]), then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>(e) If D0150A2 = [2,3] or D0150B2 = [2,3], then the following active items must not equal [^]: D0150C1, D0150D1, D0150E1, D0150F1, D0150G1, D0150H1, D0150I1.</p> <p>Items: D0150A1 Mood: Little interest/pleasure doing things: Pres</p> <p>D0150A2 Mood: Little interest/pleasure doing things: Freq</p> <p>D0150B1 Mood: Feeling down, depressed, or hopeless: Pres</p> <p>D0150B2 Mood: Feeling down, depressed, or hopeless: Freq</p> <p>D0150C1 Mood: Trouble falling or staying asleep: Pres</p> <p>D0150D1 Mood: Feeling tired or having little energy: Pres</p> <p>D0150E1 Mood: Poor appetite or overeating: Pres</p> <p>D0150F1 Mood: Feeling bad about yourself: Pres</p> <p>D0150G1 Mood: Trouble concentrating on things: Pres</p> <p>D0150H1 Mood: Moving or speaking so slowly: Pres</p> <p>D0150I1 Mood: Thoughts of better off dead: Pres</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items																								
-5910	Consistency	Fatal	<p>Total Severity Score Calculation:</p> <p>(a) If D0150A1 = [9] and D0150B1 = [9], then D0160 must equal [^].</p> <p>(b) If D0150A2 = [0,1] and D0150B2 = [0,1], then D0160 must equal the sum of the values from D0150A2 and D0150B2.</p> <p>Otherwise, the PHQ-9 must be completed, and D0160 must equal the sum of the values of the following nine items: D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 and Format Integer Items to nearest integer. These are referred to as the "items in Column 2", below.</p> <p>The following rules explain how to compute the score that is placed in item D0160. These rules consider the "number of missing items in Column 2" which is the number of items in Column 2 that are skipped.</p> <p>(c) If the following items D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 equal [0,1,2,3], then D0160 must equal the sum of these items.</p> <p>(d) If one of the following items: D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 = [^], then D0160 must equal the sum of the remaining items times 9/8(1.125), rounded to the nearest integer.</p> <p>(e) If two of the following items: D0150A2, D0150B2, D0150C2, D0150D2, D0150E2, D0150F2, D0150G2, D0150H2, D0150I2 = [^], then D0160 must equal the sum of the remaining items times 9/7(1.286), rounded to the nearest integer.</p> <table border="0"> <tr> <td data-bbox="653 932 730 951">Items:</td> <td data-bbox="751 932 848 951">D0150A1</td> <td data-bbox="1220 932 1745 951">Mood: Little interest/pleasure doing things: Pres</td> </tr> <tr> <td></td> <td data-bbox="751 979 848 998">D0150A2</td> <td data-bbox="1220 979 1745 998">Mood: Little interest/pleasure doing things: Freq</td> </tr> <tr> <td></td> <td data-bbox="751 1026 848 1045">D0150B1</td> <td data-bbox="1220 1026 1745 1045">Mood: Feeling down, depressed, or hopeless: Pres</td> </tr> <tr> <td></td> <td data-bbox="751 1073 848 1092">D0150B2</td> <td data-bbox="1220 1073 1745 1092">Mood: Feeling down, depressed, or hopeless: Freq</td> </tr> <tr> <td></td> <td data-bbox="751 1120 848 1140">D0150C2</td> <td data-bbox="1220 1120 1703 1140">Mood: Trouble falling or staying asleep: Freq</td> </tr> <tr> <td></td> <td data-bbox="751 1167 848 1187">D0150D2</td> <td data-bbox="1220 1167 1734 1187">Mood: Feeling tired or having little energy: Freq</td> </tr> <tr> <td></td> <td data-bbox="751 1214 848 1234">D0150E2</td> <td data-bbox="1220 1214 1656 1234">Mood: Poor appetite or overeating: Freq</td> </tr> <tr> <td></td> <td data-bbox="751 1261 848 1281">D0150F2</td> <td data-bbox="1220 1261 1646 1281">Mood: Feeling bad about yourself: Freq</td> </tr> </table>	Items:	D0150A1	Mood: Little interest/pleasure doing things: Pres		D0150A2	Mood: Little interest/pleasure doing things: Freq		D0150B1	Mood: Feeling down, depressed, or hopeless: Pres		D0150B2	Mood: Feeling down, depressed, or hopeless: Freq		D0150C2	Mood: Trouble falling or staying asleep: Freq		D0150D2	Mood: Feeling tired or having little energy: Freq		D0150E2	Mood: Poor appetite or overeating: Freq		D0150F2	Mood: Feeling bad about yourself: Freq
Items:	D0150A1	Mood: Little interest/pleasure doing things: Pres																									
	D0150A2	Mood: Little interest/pleasure doing things: Freq																									
	D0150B1	Mood: Feeling down, depressed, or hopeless: Pres																									
	D0150B2	Mood: Feeling down, depressed, or hopeless: Freq																									
	D0150C2	Mood: Trouble falling or staying asleep: Freq																									
	D0150D2	Mood: Feeling tired or having little energy: Freq																									
	D0150E2	Mood: Poor appetite or overeating: Freq																									
	D0150F2	Mood: Feeling bad about yourself: Freq																									

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: D0150G2 Mood: Trouble concentrating on things: Freq D0150H2 Mood: Moving or speaking so slowly: Freq D0150I2 Mood: Thoughts of better off dead: Freq D0160 Total severity score
-5920	Consistency	Fatal	(a) If J0510=[0], then all active items from J0520 through J0530 must equal [^]. (b) If J0510=[1,2,3,4,8], then all active items from J0520 through J0530 must not equal [^]. Items: J0510 Pain effect on sleep J0520 Pain interference with therapy activities J0530 Pain interference with day-to-day activities
-5930	Consistency	Fatal	(a) If K0520Z1=[1], then all active items from K0520A1 through K0520D1 must equal [0]. (b) If K0520Z1=[0], then at least one active item from K0520A1 through K0520D1 must equal [1], and the remaining items must equal [0,1]. (c) If K0520Z1=[-], then at least one active item from K0520A1 through K0520D1 must equal [-], and the remaining items must equal [0,-]. Items: K0520A1 Nutritional Approaches (Admission): Parenteral K0520B1 Nutritional Approaches (Admission): Feeding tube K0520C1 Nutritional Approaches (Admission) : Mech Alt Diet K0520D1 Nutritional Approaches (Admission) : Therapeutic K0520Z1 Nutritional Approaches (Admission) : None

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
			Items: N0415A2 High-Risk Drug (Indication) : Antipsychotic
-5970	Skip pattern	Fatal	(a) If N0415E1=[0], then N0415E2 must equal [^]. (b) If N0415E1=[1], then N0415E2 must not equal [^].
			Items: N0415E1 High-Risk Drug (Is taking): Anticoagulant N0415E2 High-Risk Drug (Indication): Anticoagulant
-5980	Skip pattern	Fatal	(a) If N0415F1=[0], then N0415F2 must equal [^]. (b) If N0415F1=[1], then N0415F2 must not equal [^].
			Items: N0415F1 High-Risk Drug (Is taking): Antibiotic N0415F2 High-Risk Drug (Indication): Antibiotic
-5990	Skip pattern	Fatal	(a) If N0415H1=[0], then N0415H2 must equal [^]. (b) If N0415H1=[1], then N0415H2 must not equal [^].
			Items: N0415H1 High-Risk Drug (Is taking): Opioid N0415H2 High-Risk Drug (Indication): Opioid
-6000	Skip pattern	Fatal	(a) If N0415I1=[0], then N0415I2 must equal [^]. (b) If N0415I1=[1], then N0415I2 must not equal [^].
			Items: N0415I1 High-Risk Drug (Is taking): Antiplatelet N0415I2 High-Risk Drug (Indication): Antiplatelet
-6010	Skip pattern	Fatal	(a) If N0415J1=[0], then N0415J2 must equal [^]. (b) If N0415J1=[1], then N0415J2 must not equal [^].
			Items: N0415J1 High-Risk Drug (Is taking): Hypoglycemic

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: N0415J2 High-Risk Drug (Indication): Hypoglycemic
-6020	None of above	Fatal	(a) If N0415Z1=[1], then the following items must equal [0]: N0415A1, N0415E1, N0415F1, N0415H1, N0415I1, N0415J1. (b) If N0415Z1=[0], then at least one of the following items must equal [1]: N0415A1, N0415E1, N0415F1, N0415H1, N0415I1, N0415J1. (c) If N0415Z1=[-], then at least one of the following active items must equal [-], and the rest of the active items must be [0,-]: N0415A1, N0415E1, N0415F1, N0415H1, N0415I1, N0415J1.
			Items: N0415A1 High-Risk Drug (Is Taking): Antipsychotic N0415E1 High-Risk Drug (Is taking): Anticoagulant N0415F1 High-Risk Drug (Is taking): Antibiotic N0415H1 High-Risk Drug (Is taking): Opioid N0415I1 High-Risk Drug (Is taking): Antiplatelet N0415J1 High-Risk Drug (Is taking): Hypoglycemic N0415Z1 High-Risk Drug (Is taking): None of the above
-6030	Consistency	Fatal	(a) If O0110A1A=[0], then all active items from O0110A2A through O0110A10A must equal [0]. (b) If O0110A1A=[1], then at least one active item from O0110A2A through O0110A10A must equal [1], and the remaining items must equal [0,1]. (c) If O0110A1A=[-], then all active items from O0110A2A through O0110A10A must equal [-].
			Items: O0110A1A Treatment: Chemotherapy (Admission) O0110A2A Treatment: Chemo - IV (Admission) O0110A3A Treatment: Chemo - Oral (Admission) O0110A10A Treatment: Chemo - Other (Admission)

Data Submission Specifications for the OASIS Item Set(V3.01.1)
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ID	Type	Severity	Text/Items
-6040	Consistency	Fatal	<p>(a) If O0110C1A=[0], then all active items from O0110C2A through O0110C4A must equal [0]. (b) If O0110C1A=[1], then at least one active item from O0110C2A through O0110C4A must equal [1], and the remaining items must equal [0,1]. (c) If O0110C1A=[-], then all active items from O0110C2A through O0110C4A must equal [-].</p> <p>Items: O0110C1A Therapies: Oxygen Therapy (Admission) O0110C2A Therapies: Oxygen - Continuous (Admission) O0110C3A Therapies: Oxygen - Intermittent (Admission) O0110C4A Therapies: Oxygen - High-concentration (Admission)</p>
-6050	Consistency	Fatal	<p>(a) If O0110D1A=[0], then the following items must equal [0]: O0110D2A, O0110D3A. (b) If O0110D1A=[1], then at least one of the following items must equal [1], and the remaining items must equal [0,1]: O0110D2A, O0110D3A. (c) If O0110D1A=[-], then the following items must equal [-]: O0110D2A, O0110D3A.</p> <p>Items: O0110D1A Therapies: Suctioning (Admission) O0110D2A Therapies: Suctioning - Scheduled (Admission) O0110D3A Therapies: Suctioning - As Needed (Admission)</p>
-6060	Consistency	Fatal	<p>(a) If O0110G1A=[0], then the following items must equal [0]: O0110G2A, O0110G3A. (b) If O0110G1A=[1], then at least one of the following items must equal [1], and the remaining items must equal [0,1]: O0110G2A, O0110G3A. (c) If O0110G1A=[-], then the following items must equal [-]: O0110G2A, O0110G3A.</p> <p>Items: O0110G1A Therapies: Non-Invas Mechanical Ventilator (Admis) O0110G2A Therapies: BiPAP (Admission) O0110G3A Therapies: CPAP (Admission)</p>

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-6110	Consistency	Fatal	<p>(a) If O0110A1C=[0], then all active items from O0110A2C through O0110A10C must equal [0]. (b) If O0110A1C=[1], then at least one active item from O0110A2C through O0110A10C must equal [1], and the remaining items must equal [0,1]. (c) If O0110A1C=[-], then all active items from O0110A2C through O0110A10C must equal [-].</p> <p>Items: O0110A1C Treatment: Chemotherapy (Discharge) O0110A2C Treatment: Chemo - IV (Discharge) O0110A3C Treatment: Chemo - Oral (Discharge) O0110A10C Treatment: Chemo - Other (Discharge)</p>
-6120	Consistency	Fatal	<p>(a) If O0110C1C=[0], then all active items from O0110C2C through O0110C4C must equal [0]. (b) If O0110C1C=[1], then at least one active item from O0110C2C through O0110C4C must equal [1], and the remaining items must equal [0,1]. (c) If O0110C1C=[-], then all active items from O0110C2C through O0110C4C must equal [-].</p> <p>Items: O0110C1C Therapies: Oxygen Therapy (Discharge) O0110C2C Therapies: Oxygen - Continuous (Discharge) O0110C3C Therapies: Oxygen - Intermittent (Discharge) O0110C4C Therapies: Oxygen - High-concentration (Discharge)</p>
-6130	Consistency	Fatal	<p>(a) If O0110D1C=[0], then the following items must equal [0]: O0110D2C, O0110D3C. (b) If O0110D1C=[1], then at least one of the following items must equal [1], and the remaining items must equal [0,1]: O0110D2C, O0110D3C. (c) If O0110D1C=[-], then the following items must equal [-]: O0110D2C, O0110D3C.</p> <p>Items: O0110D1C Therapies: Suctioning (Discharge) O0110D2C Therapies: Suctioning - Scheduled (Discharge) O0110D3C Therapies: Suctioning - As Needed (Discharge)</p>

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-6140	Consistency	Fatal	<p>(a) If O0110G1C=[0], then the following items must equal [0]: O0110G2C, O0110G3C. (b) If O0110G1C=[1], then at least one of the following items must equal [1], and the remaining items must equal [0,1]: O0110G2C, O0110G3C. (c) If O0110G1C=[-], then the following items must equal [-]: O0110G2C, O0110G3C.</p> <p>Items: O0110G1C Therapies: Non-Invas Mechanical Ventilator (Disch) O0110G2C Therapies: BiPAP (Discharge) O0110G3C Therapies: CPAP (Discharge)</p>
-6150	Consistency	Fatal	<p>(a) If O0110H1C=[0], then all active items from O0110H2C through O0110H10C must equal [0]. (b) If O0110H1C=[1], then at least one active item from O0110H2C through O0110H10C must equal [1], and the remaining items must equal [0,1]. (c) If O0110H1C=[-], then all active items from O0110H2C through O0110H10C must equal [-].</p> <p>Items: O0110H1C Other: IV Medications (Discharge) O0110H2C Other: IV - Vasoactive medications (Discharge) O0110H3C Other: IV - Antibiotics (Discharge) O0110H4C Other: IV - Anticoagulation (Discharge) O0110H10C Other: IV - Other (Discharge)</p>
-6160	Consistency	Fatal	<p>(a) If O0110J1C=[0], then the following items must equal [0]: O0110J2C, O0110J3C. (b) If O0110J1C=[1], then at least one of the following items must equal [1], and the remaining items must equal [0,1]: O0110J2C, O0110J3C. (c) If O0110J1C=[-], then the following items must equal [-]: O0110J2C, O0110J3C.</p> <p>Items: O0110J1C Other: Dialysis (Discharge) O0110J2C Other: Hemodialysis (Discharge) O0110J3C Other: Peritoneal dialysis (Discharge)</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: O0110H1C Other: IV Medications (Discharge) O0110I1C Other: Transfusions (Discharge) O0110J1C Other: Dialysis (Discharge) O0110O1C Other: IV Access (Discharge) O0110Z1C Other: None of the above (Discharge)
-6190	Skip pattern	Fatal	If M2420_DSCHRG_DISP =[02,03], then A2121 must not equal [^].
			Items: M2420_DSCHRG_DISP Discharge disposition A2121 Current Reconciled Medication List - Prvdr (Dis)
-7000	Skip pattern	Fatal	If M2420_DSCHRG_DISP = [01,04,UK], then A2123 must not equal [^].
			Items: M2420_DSCHRG_DISP Discharge disposition A2123 Current Reconciled Medication List - Ptnt (Dis)
-7010	Skip pattern	Fatal	If M2420_DSCHRG_DISP = [02,03], then all active items from A2123 through A2124E must equal [^].
			Items: M2420_DSCHRG_DISP Discharge disposition A2123 Current Reconciled Medication List - Ptnt (Dis) A2124A Patient Trans - Electronic Health Record A2124B Patient Trans - Health Info Exchange A2124C Patient Trans - Verbal A2124D Patient Trans - Paper-based A2124E Patient Trans - Other Methods

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ID	Type	Severity	Text/Items
-7020	Skip pattern	Fatal	<p>(a) If GG0170Q1=[0], then the following items must be equal to [^]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.</p> <p>(b) If GG0170Q1=[1], then the following items must not be equal to [^]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.</p> <p>(c) If GG0170Q1=[-], then the following items must be equal to [-]: GG0170R1, GG0170RR1, GG0170S1, GG0170SS1.</p> <p>Items: GG0170Q1 Use wheelchair and/or scooter (SOC/ROC Perf) GG0170R1 Wheel 50 feet with two turns (SOC/ROC Perf) GG0170RR1 Type of wheelchair or scooter (SOC/ROC Perf) GG0170S1 Wheel 150 feet (SOC/ROC Perf) GG0170SS1 Type of wheelchair or scooter (SOC/ROC Perf)</p>
-9010	Information	None	<p>Vendor's version number for the software that was used to create the OASIS data submission file.</p> <p>Items: SFW_PROD_VRSN_CD Software product version code</p>
-9020	Information	None	<p>Valid federal tax ID (EIN) for the company that developed the software used to create the OASIS data submission file.</p> <p>Items: SFW_ID Software vendor federal employer tax ID</p>
-9030	Information	None	<p>Name of the software that was used to create the OASIS data submission file.</p> <p>Items: SFW_PROD_NAME Software product name</p>
-9040	Information	None	<p>Email address of the vendor who created the software that was used to produce the OASIS submission</p>

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items	
			Items: M0090_INFO_COMPLETED_DT	Date assessment completed
			M0100_ASSMT_REASON	Reason for assessment
			M0906_DC_TRAN_DTH_DT	Discharge, transfer, death date
			ASMT_EFF_DATE	Effective date

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
-9080	Information	None	<p>COMPLETION OF FOLLOW-UP ASSESSMENTS</p> <p>The allowable completion dates for the first and any subsequent follow-up assessments will be calculated relative to the start of care date. Follow-up assessments must be completed every 60 days that a patient is under care. Each time a follow-up assessment is due, it should be completed on or after the 56th day and on or before the 60th day of the period.</p>

More formally, the rules can be stated as follows:

-Let j be the follow-up period number (i.e., 1=first follow-up period, 2=second follow-up period, etc.).

-Let SOC be the start of care date (M0030_START_CARE_DT).

-Let FCD be the completion date (M0090_INFO_COMPLETED_DT) of a follow-up assessment.

Given these symbols, the rule for completion of follow-up assessments is as follows:

$$SOC + (60*j) - 5 \leq FCD \leq SOC + (60*j) - 1$$

Where j=1, 2, 3, etc.

If a patient is under care by a home health agency during one of the follow-up windows defined above, a follow-up assessment must be submitted. An exception to this rule can occur if a patient resumes care following an inpatient stay and if the resumption of care date (M0032_ROC_DT) falls within one of the follow-up windows. In this case, the home health agency should submit an RFA 03 resumption of care (after inpatient stay) (M0100_ASSMT_REASON=[03]) instead of the normal follow-up assessment. Submission of such a resumption of care assessment fulfills the requirement for the follow-up assessment because it includes all of the data items contained in the normal follow-up

Items:	M0030_START_CARE_DT	Start of care date
	M0032_ROC_DT	Resumption of care date
	M0090_INFO_COMPLETED_DT	Date assessment completed

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
			Items: M0100_ASSMT_REASON Reason for assessment
-9090	Information	None	This is an optional item that can be used by agency for unique identification of record and tracking of records submitted to the system. Items: ACY_DOC_CD Document ID code (agency use)
-9100	Information	None	If a non-blank value for National Provider ID (NPI) in NATL_PRVDR_ID is submitted, it should represent the NPI of the parent agency, not of any branches if they have separate NPIs. The NPI that is submitted should be the one that is used on the agency's HIPAA billing transactions with CMS. Items: NATL_PRVDR_ID Agency National Provider ID (NPI)
-9110	Information	None	If state law prohibits transmission of certain ICD codes (e.g., HIV or STD diagnoses), these codes will be removed by iQIES if found on records submitted by HHAs within that state. If any item within an ICD list contains such a code on a submitted record, it will be removed from the list. If any of these items is removed, but a valid code remains in a subsequent item on the list, the subsequent codes will be "moved up" so that no missing codes remain. Therefore, if a non-blank value is required in an ICD code list and all of the submitted items in that list contain blank and/or prohibited codes, a fatal error will result and the record will be rejected. As long as at least one item in such a list contains a non-blank, correctly-formatted, allowable code, a fatal error will not occur. Items: M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code

Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID

ID	Type	Severity	Text/Items
-9160	Information	None	<p>The Item Subset Code (ISC) is a two-character code that indicates the type of record that is being submitted. The set of active items is controlled by the ISC. The ISC is defined as follows:</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [01] then ITM_SBST_CD = [01]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [03] then ITM_SBST_CD = [03]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [04] then ITM_SBST_CD = [04]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [05] then ITM_SBST_CD = [05]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [06] then ITM_SBST_CD = [06]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [07] then ITM_SBST_CD = [07]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [08] then ITM_SBST_CD = [08]</p> <p>If TRANS_TYPE_CD = [1,2] and M0100_ASSMT_REASON = [09] then ITM_SBST_CD = [09]</p> <p>If TRANS_TYPE_CD = [3] and M0100_ASSMT_REASON = [01-09] then ITM_SBST_CD = [XX]</p>

For a more complete explanation of the meaning and use of the ISC codes, please refer to the documentation that accompanies these data specifications.

Items:	TRANS_TYPE_CD	Transaction type code
	ITM_SBST_CD	Item subset code
	M0100_ASSMT_REASON	Reason for assessment

**Data Submission Specifications for the OASIS Item Set(V3.01.1)
Unduplicated Edits Report by Edit ID**

ID	Type	Severity	Text/Items
-9170	Information	None	<p>SUBMITTING ICD-10 DIAGNOSIS CODES</p> <p>If the ICD-10 item is active, it must be submitted as an 8 character, fixed-format string with all blanks replaced with [^], and with a decimal point as the 4th character. The only exception to this rule is that an entirely blank ICD-10 item must be submitted as a single [^].</p> <p>For example:</p> <ul style="list-style-type: none"> -The ICD-10 code "A12." would be submitted as [A12.^^^]. -The ICD-10 code "A12.3" would be submitted as [A12.3^^]. -The ICD-10 code "A12.34" would be submitted as [A12.34^^]. -The ICD-10 code "A12.345" would be submitted as [A12.345^]. -The ICD-10 code "A12.3456" would be submitted as [A12.3456]. -An entirely blank ICD-10 code would be submitted as [^].
			<p>Items: M1021_PRIMARY_DIAG_ICD Primary diagnosis ICD code</p> <p> M1023_OTH_DIAG1_ICD Other diagnosis 1: ICD code</p> <p> M1023_OTH_DIAG2_ICD Other diagnosis 2: ICD code</p> <p> M1023_OTH_DIAG3_ICD Other diagnosis 3: ICD code</p> <p> M1023_OTH_DIAG4_ICD Other diagnosis 4: ICD code</p> <p> M1023_OTH_DIAG5_ICD Other diagnosis 5: ICD code</p>
-9180	Information	None	<p>When a record is submitted, the system will determine if the provider has been certified. If the provider is not certified, then the submitted record is considered (processed as) a test record. If the provider is certified, then the submitted record is considered (processed as) a production record. If the record is a production record, then a system edit will reject the record if M0010_CCN is equal to</p> <p>Items: M0010_CCN Facility CMS certification number (CCN)</p>

