

# Data Submission Specifications for the OASIS Item Set (V3.01.0)

## Detailed Data Specifications Report

### Section: H

Item ID: M1600\_UTI

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Treated for urinary tract infection past 14 days	Asmt		Code	2	864-865

#### Item Subsets

Active: 01,03,09  
Inactive: 04,05,06,07,08,XX

#### Item Values

Value	LOINC Code	Value Text
00		No
01		Yes
NA		Patient on prophylactic treatment
UK		Unknown

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	VALUES OF CODE AND CHECKLIST ITEMS Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-4320	Consistency	Fatal	If M0100_ASSMT_REASON=[09], then if M1600_UTI is active it cannot equal [UK].

#### Changes for Version

Type	ID	Description
Format	-3060	[V3.01.0]-Removed mappings to the goal items for GG0130 and GG0170, M0110_EPISODE_TIMING and M2200_THER_NEED_NA, since those items were deleted. Added mapping to new item O0350.

# Data Submission Specifications for the OASIS Item Set (V3.01.0)

## Detailed Data Specifications Report

### Section: H

Item ID: M1610\_UR\_INCONT

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Urinary incontinence or urinary catheter present	Asmt		Code	2	866-867

#### Item Subsets

Active: 01,03  
Inactive: 04,05,06,07,08,09,XX

#### Item Values

Value	LOINC Code	Value Text
00		No incontinence or catheter (includes anuria or ostomy for urinary drainage)
01		Patient is incontinent
02		Patient requires a urinary catheter (specifically: external, indwelling, intermittent, suprapubic)

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	VALUES OF CODE AND CHECKLIST ITEMS Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

#### Changes for Version

Type	ID	Description
Format	-3060	[V3.01.0]-Removed mappings to the goal items for GG0130 and GG0170, M0110_EPISODE_TIMING and M2200_THER_NEED_NA, since those items were deleted. Added mapping to new item O0350.

# Data Submission Specifications for the OASIS Item Set (V3.01.0)

## Detailed Data Specifications Report

### Section: H

Item ID: M1620\_BWL\_INCONT

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Bowel incontinence frequency	Asmt		Code	2	870-871

#### Item Subsets

Active: 01,03,09  
 Inactive: 04,05,06,07,08,XX

#### Item Values

Value	LOINC Code	Value Text
00		Very rarely or never has bowel incontinence
01		Less than once weekly
02		One to three times weekly
03		Four to six times weekly
04		On a daily basis
05		More often than once daily
NA		Patient has ostomy for bowel elimination
UK		Unknown

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	VALUES OF CODE AND CHECKLIST ITEMS Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-4351	Consistency	Fatal	If M0100_ASSMT_REASON=[09], then if M1620_BWL_INCONT is active it cannot equal [UK].
-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].
-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].

**Data Submission Specifications for the OASIS Item Set (V3.01.0)**  
**Detailed Data Specifications Report**  
**Section: H**

***Changes for Version***

<b>Type</b>	<b>ID</b>	<b>Description</b>
Format	-3060	[V3.01.0]-Removed mappings to the goal items for GG0130 and GG0170, M0110_EPISODE_TIMING and M2200_THER_NEED_NA, since those items were deleted. Added mapping to new item O0350.

# Data Submission Specifications for the OASIS Item Set (V3.01.0)

## Detailed Data Specifications Report

### Section: H

Item ID: M1630\_OSTOMY

Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
Ostomy for bowel elimination	Asmt		Code	2	872-873

#### Item Subsets

Active: 01,03  
Inactive: 04,05,06,07,08,09,XX

#### Item Values

Value	LOINC Code	Value Text
00		Patient does not have an ostomy for bowel elimination.
01		Patient's ostomy was not related to an inpatient stay and did not necessitate change in medical or treatment
02		The ostomy was related to an inpatient stay or did necessitate change in medical or treatment regimen.

#### Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3060	Format	Fatal	VALUES OF CODE AND CHECKLIST ITEMS Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-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].
-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].

#### Changes for Version

Type	ID	Description
Format	-3060	[V3.01.0]-Removed mappings to the goal items for GG0130 and GG0170, M0110_EPISODE_TIMING and M2200_THER_NEED_NA, since those items were deleted. Added mapping to new item O0350.