

NMDS Clinical Code Table Fields

New Zealand Edit Warning Messages

Messages issued by this editing process are warnings 'W' and fatal errors 'E'. This means that for an event with a message function code of 'A1' these warnings and errors will cause the event to be rejected. The information in the event record may or may not be changed for a warning on review by the sending facility.

Warning records that have not been changed and are deemed to be correct by the facility may be resubmitted to the NMDS with the message function code 'A2'. This will cause the warning messages to be suppressed and the event will be loaded to the NMDS.

Records rejected with a fatal error 'E' indicates there is information in the event record that is incorrect and needs to be changed before the event can be resubmitted to the NMDS.

clinical_code

This column contains ICD-10-AM disease, injury, external cause, supplementary, factors influencing health status, morphology and ACHI procedure codes. Each ICD-10-AM/ACHI code is unique when used in combination with the clinical code type field.

clinical_code_type

This field shows the clinical code type associated with each ICD-10-AM/ACHI code. It indicates which section of the ICD-10-AM/ACHI classification each code belongs to. The values in this field are:

- A = diagnosis (includes diagnosis and special purpose codes)
- B = injury (includes injury, poisoning and complications of surgical/medical care)
- E = external cause of injury (includes injury, poisoning and complications of surgical/medical care)
- O = operation/procedure (includes surgical, medical and other procedures)
- M = morphology (pathology)
- V = supplementary classification/health factors (includes factors influencing health status)

clinical_code_system

This field identifies the edition of the *International Statistical Classification of Diseases and Related Health Problems, Tenth Edition, Australian Modification* (ICD-10-AM) and the *Australian Classification of Health Interventions* (ACHI) to which each code belongs.

Clinical Code System	Clinical System Description	Period Used
06	ICD-9-CM-A/MBS-E	1 July 1995 – 30 June 1999
10	ICD-10-AM/MBS-E First Edition	1 July 1999 – 30 June 2001
11	ICD-10-AM/MBS-E Second Edition	1 July 2001 – 30 June 2004
12	ICD-10-AM/ACHI Third Edition	1 July 2004 – 30 June 2008
13	ICD-10-AM/ACHI Sixth Edition	1 July 2008 – 30 June 2014
14	ICD-10-AM/ACHI Eighth Edition	1 July 2014 – 30 June 2019
15	ICD-10-AM/ACHI Eleventh Edition	1 July 2019 – 30 June 2023
16	ICD-10-AM/ACHI Twelfth Edition	1 July 2023 –

clinical_code_description

The ICD-10-AM/ACHI code title descriptors are as per the classifications. The clinical code descriptions field was set to 100 characters but was increased to 200 characters from 1 July 2014 to accommodate ICD-10-AM/ACHI code descriptors in full (long descriptors).

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death_flag

A flag indicating which ICD-10-AM codes (types A, B, E, V) are likely to be a cause of death.

If the event end type (discharge type) on an event record is 'DD' (died) or 'ED' (died while still in Emergency department acute facility) the record must contain at least one ICD-10-AM code for which the death flag has the value of 'Y'.

gender_flag (sex flag)

A flag indicating which biological sex is appropriate for each ICD-10-AM/ACHI code.

If the gender (sex) flag for an ICD-10-AM/ACHI code is 'B', an event record may be reported with either 'M' (male), 'F' (female) or 'I' (indeterminate). The gender (sex) flag in the clinical code table has followed the principles:

- Male (M) flag aligns with the male reproductive system, including: prostate and seminal vesicle, scrotum and tunica vaginalis, testis, vas deferens, epididymis, spermatic cord, penis and other male reproductive system conditions.
- Female (F) flag aligns with the female reproductive system, including: ovary, fallopian tube, uterus, cervix, vagina, vulva and perineum, antepartum procedures, procedures associated with labour, delivery procedures, procedures assisting delivery, postpartum procedures and other female reproductive system conditions.

low_age

An age below which a disease, injury, external cause or procedure is not expected to be reported.

high_age

An age above which a disease, injury, external cause, or procedure is not expected to be reported.

normal_nz_flag

A flag indicating whether a diagnosis or external cause of injury is likely to occur in New Zealand.

A flag of 'N' indicates the diagnosis or external cause of injury code is unlikely to occur in New Zealand.

external_cause_flag

A flag indicating that an external cause code is required to describe the circumstances of injury.

If the external cause flag for an ICD-10-AM code is set to 'Y', there must be an external cause code present in the event record.

never_assigned_diagnosis_flag

This flag was new in ICD-10-AM Twelfth Edition 1 July 2023 and corresponds with the Australian Coding Standard (ACS) 0049 *Disease codes that must never be assigned*. If an ICD-10-AM code is set to 'Y' the code must never be reported in the event record.

unacceptable_diagnosis_flag

A flag indicating the ICD-10-AM/ACHI codes that should not be reported as the principal diagnosis.

The ICD-10-AM codes align with ACS 0050 *Unacceptable principal diagnosis codes*.

If an ICD-10-AM/ACHI code is an unacceptable principal diagnosis the flag is set to 'Y'.

nonspecific_diagnosis_flag

This flag is set the same as unacceptable_diagnosis_flag and has no validation within NMDS.

operation_flag (date flag – includes external cause)

A flag indicating whether a date is required for an operation/procedure or external cause.

If the operation flag is set to 'Y' then an operation/procedure and/or external cause date does not have to be provided. If the operation flag is set to 'N' an operation/procedure and/or external cause date must be reported.

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collection_type

A grouping flag, used for data analysis.

Collection Type	Collection Type Description
B	Birth (neonate)
C	Cancer
M	Birth (mother)
P	Psychiatric (Mental Health)

dagger_asterisk

A dagger denotes a code describing the aetiology or underlying cause of a disease, and should always be assigned together with the manifestation (asterisk) code. Dagger codes are represented by a '1' in the field.

An asterisk denotes a code describing the manifestation of a disease and should always be assigned together with the appropriate aetiology (dagger) code. Asterisk codes are represented by a '2' in the field.

Prior to ICD-10-AM Eighth Edition the dagger code had to be always sequenced before the asterisk code. However, from ICD-10-AM Eighth Edition 1 July 2014 the rule was revised to allow the asterisk code to be sequenced before the dagger code.

category

A code that groups ICD-10-AM codes together at the third character level. All ICD-10-AM codes except for procedures and morphology have category numbers. A list of category codes and their descriptions is available from National Collections and Reporting on request.

sub_category

A sub-category groups ICD-10-AM codes together at the fourth character level. All ICD-10-AM codes except procedures and morphology have sub-category numbers. A list of sub-category codes and their descriptions is available from National Collections and Reporting on request.

block

The block groups procedure codes together. Procedure codes in the hard copy ACHI coding manuals are organised on an anatomical basis, therefore, are not in numerical order. To facilitate location of a procedure code in ACHI the block system was introduced eg, **[984]** *Laparoscopy*, **[985]** *Laparotomy*. Each procedure code has an associated block eg, 30373-00 **[985]** *Exploratory laparotomy*. A list of block numbers and their descriptions is available from National Collections and Reporting on request.

chapter

These are the chapter headings in the ICD-10-AM classification. ICD-10-AM consists of 22 Chapters, which are mostly organised by body system eg, Chapter 9 *Diseases of the circulatory system* (I00-I99). All ICD-10-AM codes except procedures and morphology have specific chapters. A list of chapters and their descriptions is available from National Collections and Reporting on request.

sub_chapter

The sub-chapter value is an identifier that groups codes as per the sub-chapter headings in the ICD-10-AM classification eg, 093 = I20-I25 *Ischaemic heart diseases*. All ICD-10-AM codes except procedures and morphology have a sub-chapter value.

code_start_date

The code start date is the date from which the ICD-10-AM/ACHI code became active.

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code_end_date

This field has been present, but not populated since the introduction of the ICD-10-AM/ACHI classification system.

eligible_cancer_status

An internal-use value only, identifying records that are relevant to the Cancer Registry. Possible values are 'A' = Always registrable, 'S' = Seldom registrable, 'N' = Never registrable and null.