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# Standards for Emergency Department

## Systems Data Elements

### Version (1)

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Health Informatics and Smart health Department

Health Regulation Sector (2023)

## INTRODUCTION

Health Regulation Sector (HRS) forms an integral part of Dubai Health Authority (DHA) and is mandated by DHA Law No. (14) Of the year (2021) amending some clauses of law No. (6) Of 2018 pertaining to the Dubai Health Authority (DHA), to undertake several functions including but not limited to:

- Developing regulation, policy, standards, guidelines to improve quality and patient safety and promote the growth and development of the health sector.
- Licensure and inspection of Healthcare Facilities as well as healthcare professionals and ensuring compliance to best practice.
- Governing the use of narcotics, controlled and semi-controlled medications.
- Strengthening health tourism and assuring ongoing growth.
- Assuring management of health informatics, e-health and promoting innovation.

The Standards for Emergency Department Systems Data Elements aims to fulfil the following overarching DHA Strategic Priorities (2022-2026):

- Pioneering Human-centered health system to promote trust, safety, quality and care for patients and their families.

- Leading global efforts to combat epidemics and infectious diseases and prepare for disasters.
- Become a global digital health hub.
- Foster healthcare education, research and innovation.

## ACKNOWLEDGMENT

The Health Informatics and Smart Health Department (HISHD) developed this Standard in collaboration with Subject Matter Experts and would like to acknowledge and thank these health professionals for their dedication toward improving quality and safety of healthcare services in the Emirate of Dubai.

### Health Regulation Sector

### Dubai Health Authority

## TABLE OF CONTENTS

<b>ACKNOWLEDGMENT</b> .....	4
<b>EXECUTIVE SUMMARY</b> .....	7
<b>DEFINITIONS</b> .....	9
<b>ABBREVIATIONS</b> .....	11
<b>1. BACKGROUND</b> .....	13
<b>2. SCOPE</b> .....	13
<b>3. PURPOSE</b> .....	13
<b>4. APPLICABILITY</b> .....	14
<b>5. STANDARD ONE: DATA CODING AND TERMINOLOGY IN EMERGENCY DEPARTMENT (ED) SYSTEMS</b> .....	14
<b>6. STANDARD TWO: DEMOGRAPHIC DATA SET IN ED</b> .....	15
<b>7. STANDARD THREE: HEALTH FACILITY AND PRACTITIONER IDENTIFICATION DATA</b> .....	16
<b>8. STANDARD FOUR: ARRIVAL AND FIRST ASSESSMENT DATA IN ED</b> .....	18
<b>9. STANDARD FIVE: IMMUNIZATION STATUS DATA IN ED</b> .....	20
<b>10. STANDARD SIX: MEDICAL HISTORY IN ED</b> .....	22
<b>11. STANDARD SEVEN: ILLNESS/INJURY DATA SET IN ED</b> .....	25
<b>12. STANDARD EIGHT: OBSTETRICS &amp; GYNAECOLOGY DATA IN ED</b> .....	27
<b>13. STANDARD NINE: PHYSICAL EXAMINATION DATA IN ED</b> .....	29
<b>14. STANDARD TEN: RADIOLOGY DATA IN ED</b> .....	37
<b>15. STANDARD ELEVEN: LABORATORY DATA IN ED</b> .....	40

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16.	<b>STANDARD TWELVE: PROCEDURES AND RESULTS DATA IN ED.....</b>	41
17.	<b>STANDARD THIRTEEN: ED MEDICATION DATA.....</b>	43
18.	<b>STANDARD FOURTEEN: ED DISPOSITION AND DIAGNOSIS DATA.....</b>	44

## EXECUTIVE SUMMARY

The purpose of this document is to assure the use of proper and standardized medical codes and terminology in the Electronic Medical record (EMR) within the emergency department (ED) in Health care facilities in the Emirate of Dubai. The standards have been developed to align with the evolving health information quality needs and international best practice. This standard includes the coding requirements for integrating with Nabidh HIE.

This document should be read in conjunction with the other health information governance

Documents released by DHA:

- [Standards for Clinical Data Coding and Terminology](#)
- [Health Data Quality Policy](#)
- [Health Data Classification Policy](#)
- [Policy for Health Information Assets Management](#)
- [Policy for Health Data Protection and Confidentiality](#)
- [Subject of Care Rights](#)
- [Consent and Access Control](#)
- [Incident Management and Breach Notification policy](#)
- [Data Management and Quality Policy \(Primary and Secondary Use\)](#)

- [Health Information Audit Policy](#)
- [Identity Management Policy](#)
- [Authentication and Authorization policy](#)
- [Information Security standard](#)
- [Interoperability and Data Exchange Standards](#)
- [Technical and Operational Standards](#)
- [Artificial Intelligence Policy](#)



## DEFINITIONS

**Cel:** The degree Celsius

**Current Procedural Terminology code set (CPT-4):** describes medical, surgical, and diagnostic (radiology imaging and lab) services and is designed to communicate uniform information about medical services and procedures among physicians, coders, patients, accreditation organizations, and payers for administrative, financial, and analytical purposes.

**Emergency Department:** Facilities in a hospital devoted to providing emergency medical care for all.

**Face, Legs, Activity, Cry, Consolability (FLACC) Behavioral Pain Scale:** FLACC is a behavioral pain assessment scale used for nonverbal or preverbal patients who are unable to self-report their level of pain. Pain is assessed through observation of 5 categories including face, legs, activity, cry, and consolability.

**Faces Pain Scale:** The Faces Pain Scale is a self-report measure used to assess the intensity of children's pain.

**Health Information Exchange (HIE):** is the electronic transmission of health data and information among health care facilities according to national standards. Electronic health information exchange (HIE) allows doctors, nurses, pharmacists, other health care providers and

patients to appropriately access and securely share a patient's vital medical information electronically—improving the speed, quality, safety and cost of patient care.

**International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM):** is a system used by physicians and other healthcare providers to classify and code all diagnoses, symptoms and procedures recorded in conjunction with hospital care. It provides a level of detail that is necessary for diagnostic specificity and morbidity classification by Healthcare Provider Systems.

**The Logical Observation Identifiers Names and Codes for Laboratorians (LOINC):** is a common language (set of identifiers, names, and codes) for identifying health measurements, observations, and documents.

**NABIDH:** A health information exchange platform by the Dubai Health Authority that connects public and private Healthcare Facilities in Dubai to securely exchange trusted health information.

## ABBREVIATIONS

<b>CT Scan</b>	:	Computed Tomography Scan
<b>CPT-4</b>	:	Current Procedural Terminology
<b>DCAS</b>	:	Dubai Corporation for Ambulance Services
<b>DID</b>	:	Death in Department
<b>DOA</b>	:	Death on Arrival
<b>DEEDS</b>	:	Data Elements for Emergency Department Systems
<b>DHA</b>	:	Dubai Health Authority
<b>ED</b>	:	Emergency Department
<b>EID</b>	:	Emirates Identity Document
<b>EKG</b>	:	ElectroCardioGram
<b>EMS</b>	:	Emergency Medical Services system
<b>FLACC</b>	:	Face, Legs, Activity, Cry, Consolability Behavioral Pain Scale
<b>GCC</b>	:	Gulf Cooperation Council
<b>HIE</b>	:	Health Information Exchange
<b>HISHD</b>	:	Health Informatics and Smart health Department
<b>HRS</b>	:	Health Regulation Sector

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<b>ICD-10-CM</b>	:	International Classification of Diseases, Tenth Revision, Clinical Modification
<b>LMP</b>	:	Last Mensural Period
<b>LOINC</b>	:	The Logical Observation Identifiers Names and Codes for Laboratorians
<b>MRI</b>	:	Magnetic Resonance Imaging.
<b>UID</b>	:	Unified Identity

## 1. BACKGROUND

Health Regulation Sector (HRS) forms an integral part of Dubai Health Authority (DHA) and is mandated by DHA Law No. (6) Of 2018, to undertake several functions including, but not limited to Developing regulation, policy, standards, guidelines to improve quality and subject of care safety and promote the growth and development of the health sector in the emirate of Dubai.

The Standards for Emergency Department Systems Data Elements aims to fulfil health information requirements for Healthcare Facilities in emergency cases through NABIDH Health Information Exchange (HIE); in order to position Dubai as a global medical destination by introducing a value-based, comprehensive, integrated and high-quality service delivery system.

## 2. SCOPE

- 2.1. All DHA licensed Healthcare Facilities having Emergency Department (ED) and ambulance services, and/or providing urgent care services.

## 3. PURPOSE

- 3.1. To ensure provision of standardized data elements for ED Systems in health sector in the Emirate of Dubai.
- 3.2. To ensure the efficient flow and exchange of health information in emergency cases through NABIDH.

- 3.3. To provide necessary EDs data coding standards in order to enhance the care being given to Data Subjects/Patients in DHA licensed Healthcare Facilities and ambulance services in the Emirate of Dubai.

#### 4. APPLICABILITY

- 4.1. Dubai Health Authority (DHA) licensed healthcare professionals.
- 4.2. Dubai Corporation for Ambulance Services (DCAS) licenced paramedics.
- 4.3. Dubai Health Authority licenced facilities.
- 4.4. Ambulance service providers.

#### 5. STANDARD ONE: DATA CODING AND TERMINOLOGY IN EMERGENCY DEPARTMENT

##### (ED) SYSTEMS

- 5.1. All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required ED clinical coding datasets released by DHA. This includes International Classification of Diseases (ICD)-10 or The Logical Observation Identifiers Names and Codes for Laboratorians (LOINC) CODE for Data Elements for Emergency Department Systems (DEEDS); whichever is more comprehensive.

- 5.2. All Healthcare Facilities with ED and/or providing urgent care services should develop and use the following standardized nomenclatures and code sets to describe clinical problems, diagnosis, procedures, and medications in emergency cases.

## 6. STANDARD TWO: DEMOGRAPHIC DATA SET IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/Patient demographic data mandates. Demographic data must cover all personal data related to the Data Subject/Patient, including but not limited to:

- 6.1. Full name as spelled in the passport [Mandatory]
- 6.2. Emirates Identity Document (EID) Number or File Number or Unified Identity (UID) Number [Mandatory]
- 6.3. Date of Birth [Mandatory]
- 6.4. Gender [Mandatory]
- 6.5. Nationality [Mandatory]
- 6.6. Marital Status
- 6.7. Telephone Number [Mandatory]

- 6.8. Email address
- 6.9. Emirate: The Emirate from which the visa/residency is issued from. For UAE Nationals, select the Emirate that issued the passport. For Gulf Cooperation Council (GCC) Nationals and Diplomats, select the Emirate of residence [Mandatory].
- 6.10. Address Residential: [Mandatory]
- 6.11. Occupation [Mandatory]
- 6.12. Current Employment.
- 6.13. Emergency Contact Name [Mandatory]
- 6.14. Emergency Contact Address
- 6.15. Emergency Contact Telephone Number
- 6.16. Emergency Contact Relationship.

## 7. STANDARD THREE: HEALTH FACILITY AND PRACTITIONER IDENTIFICATION DATA

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required facility and practitioner identification data. These include but are not limited to the below:

- 7.1. ED Facility ID [Sharyan ID]



- 7.2. Primary Practitioner Name [Name of physician or other practitioner who provides patient's overall longitudinal care]
- 7.3. Primary Practitioner ID number
- 7.4. Primary Practitioner Type [Specialty or subspecialty]
- 7.5. Primary Practitioner Organization [Health care organization that provides patient's overall longitudinal care]
- 7.6. ED Practitioner ID number
- 7.7. ED Practitioner Type [specialist or consultant]
- 7.8. ED Practitioner Current Role [role in patient's care during this ED visit]
- 7.9. ED Consultant Practitioner ID number
- 7.10. ED Consultant Practitioner Type [specialty or subspecialty]
- 7.11. Date/Time ED consult request initiated [Date and time when ED physician or other appropriate requester first attempts to contact ED consultant or consulting service].
- 7.12. Date/Time ED consult starts [Date and time when ED consultant's services begin].

## 8. STANDARD FOUR: ARRIVAL AND FIRST ASSESSMENT DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient arrival and first assessment data. These include but are not limited to the below:

- 8.1. Arrival Date/Time documented
- 8.2. Mode of Transport to ED
- 8.3. Emergency Medical Services (EMS) unit identifier that transported ED Patient [Identifier for EMS unit/ambulance that transported patient to ED].
- 8.4. EMS agency that transported ED Patient [Identifier for EMS agency that transported patient to ED].
- 8.5. Source of Referral to ED: Individual or group who decided patient should seek care at this ED:
  - 8.5.1. Self-referral
  - 8.5.2. EMS transport decision
  - 8.5.3. Practitioner or health care facility referral
  - 8.5.4. Internal facility referral or transfer
  - 8.5.5. Law enforcement referral

- 8.5.6. Acute care hospital transfer
- 8.5.7. Other health care facility transfer
- 8.5.8. Other
- 8.5.9. Unknown
- 8.6. Chief complaint and Reason for visit [Patient's reason for seeking care or attention, expressed in terms as close as possible to those used by patient or responsible informant].
- 8.7. Initial visit for chief complaint
- 8.8. Acuity assessment [Function] at First encounter
- 8.9. Responsiveness assessment at First encounter
- 8.10. Date/Time of First ED Responsiveness Assessment
- 8.11. Individuals accompanying patient to ED
- 8.12. Prehospital care
- 8.13. Time placed into treatment area
- 8.14. Patient location
- 8.15. Glasgow Eye Opening Component Assessment at First encounter
- 8.16. Glasgow Verbal Component Assessment at First encounter
- 8.17. Glasgow Motor Component Assessment at First encounter

- 8.18. Glasgow coma score total at First encounter
- 8.19. Systolic blood pressures at First encounter mm[Hg]
- 8.20. Diastolic blood pressures at First encounter mm[Hg]
- 8.21. Heart rate at First encounter {beats}/min
- 8.22. Respiratory rate at First encounter {breaths}/min
- 8.23. Body temperature at First encounter
- 8.24. Last Mensural Period (LMP) for women in child bearing age.
- 8.25. Date of Last Tetanus Immunization
- 8.26. Medication Allergy Reported.

## 9. STANDARD FIVE: IMMUNIZATION STATUS DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient immunization status data **as applicable**. These include but are not limited to the below:

- 9.1. Coronavirus 2019 (COVID-19) immunization status
- 9.2. Hepatitis A virus immunization status
- 9.3. Clostridium tetani immunization status and date of last vaccine

- 9.4. Rabies virus immunization status
- 9.5. Influenza virus immunization status
- 9.6. Bordetella pertussis immunization status
- 9.7. Measles virus status
- 9.8. Haemophilus influenza B immunization status
- 9.9. Human papilloma virus immunization status
- 9.10. Rotavirus immunization status
- 9.11. Neisseria meningitidis immunization status
- 9.12. Streptococcus pneumonia polyvalent immunization status
- 9.13. Streptococcus pneumonia conjugated immunization status
- 9.14. Corynebacterium diphtheria immunization status
- 9.15. Polio virus immunization status
- 9.16. Varicella zoster virus status
- 9.17. Hepatitis B virus status
- 9.18. Hepatitis C virus status
- 9.19. Human Immunodeficiency Virus (HIV) status
- 9.20. Rubella virus status
- 9.21. Cytomegalovirus status.

## 10. STANDARD SIX: MEDICAL HISTORY IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient medical history dataset **as applicable**. These include but are not limited to the below:

### 10.1. Social history

#### 10.1.1. Tobacco use:

- a. History of Tobacco use [Narrative]
- b. Cigarettes smoked current (pack per day) – Reported {Number}/d
- c. Cigarettes smoked total (pack per year) - Reported {Number}/y

#### 10.1.2. Alcohol use

- a. History of Alcohol use [Narrative]
- b. Alcoholic drinks per drinking day – Reported {Number}/d
- c. Alcoholic drinks per week - Reported {Number}/wk.
- d. Alcohol binge episodes per month – Reported

#### 10.1.3. History of Other nonmedical drug use [Narrative]

- a. Type of substance abused
- b. Social history [Narrative]

- c. Highest level of education
  - d. Physical Activity
  - e. Stress
  - f. Social isolation and connection
  - g. Exposure to violence
- 10.2. History of Sexual behavior [Narrative]
- 10.3. History of Travel [Narrative]
- 10.4. History of other social factors [Narrative]
- 10.5. History of Family member diseases [Narrative]
- 10.6. History of Major illnesses and injuries [Narrative]
- 10.7. History of Adverse drug reaction [Narrative]
- 10.8. History of allergies, [Narrative]
- 10.9. Review of systems [Narrative] - Reported
- 10.10. Constitutional symptoms [Narrative]
- 10.11. History of Nervous system disorders [Narrative]
- 10.12. History of Musculoskeletal system disorders [Narrative]
- 10.13. History of Psychiatric disorders [Narrative]
- 10.14. History of Endocrine system disorders [Narrative]

- 10.15. History of Hematologic system disorders [Narrative]
- 10.16. History of Allergenic and Immunologic disorders [Narrative]
- 10.17. History of Blood transfusion [Narrative]
- 10.18. History of Neoplastic disease [Narrative]
- 10.19. History of Infectious disease [Narrative]
- 10.20. History of Integumentary system disorders [Narrative]
- 10.21. History of Breasts disorders [Narrative]
- 10.22. History of Eyes disorders [Narrative]
- 10.23. History of Ears and Nose and Sinuses and Mouth and Throat disorders [Narrative]
- 10.24. History of Cardiovascular system disorders [Narrative]
- 10.25. History of Oral cavity disorders [Narrative]
- 10.26. History of Respiratory system disorders [Narrative]
- 10.27. History of Gastrointestinal system disorders [Narrative]
- 10.28. History of Genitourinary systems disorders [Narrative]
- 10.29. History of Occupational exposure.
- 10.30. History of Surgical procedures [Narrative]
- 10.31. History of Hospitalization [Narrative]
- 10.32. History of Childhood diseases [Narrative]



- 10.33. History of Outpatient visits [Narrative]
- 10.34. History of medical device use
- 10.35. History of Growth + Development {Paediatrics} [Narrative]
- 10.36. History of Past illness [Narrative]
- 10.37. General health - Reported
- 10.38. History of Cognitive function [Narrative]
- 10.39. History of medication use [Narrative]
- 10.40. Limitations in obtaining history.

## 11. STANDARD SEVEN: ILLNESS/INJURY DATA SET IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient illness or injury data set **as applicable**. These include but are not limited to the below:

- 11.1. Chief complaint [Narrative] - Reported
- 11.2. Reason for visit [Narrative]
- 11.3. Illness/injury onset date and time
- 11.4. Illness/injury incident description

- 11.5. Coded Cause of Injury Illness/injury
- 11.6. Illness/injury location [Type of place where patient's injury occurred].
- 11.7. Safety equipment used [Use or non-use of equipment designed to prevent injury during vehicle crash or other injury-producing event that precipitated patient's ED visit].
- 11.8. Information source
- 11.9. Problem prior evaluation
- 11.10. Problem diagnostic considerations
- 11.11. Problem context
- 11.12. Problem frequency
- 11.13. Problem exacerbating factors
- 11.14. Problem associated signs and symptoms
- 11.15. Problem list - Reported
- 11.16. Problem quality or description
- 11.17. Problem response to therapy
- 11.18. Pain initiating event [Narrative] - Reported
- 11.19. Pain alleviating factors - Reported
- 11.20. Pain quality

- 11.21. Pain primary location - Reported
- 11.22. Pain radiation
- 11.23. Pain temporal pattern - Reported
- 11.24. Speed of pain onset – Reported
- 11.25. Symptom duration during occurrences or episodes
- 11.26. Pain duration – Reported min; h; d
- 11.27. Time last ate solid food
- 11.28. Time last drank liquid
- 11.29. Feeding and dietary status [Narrative] -Reported
- 11.30. Functional status assessment note.

## 12. STANDARD EIGHT: OBSTETRICS & GYNAECOLOGY DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient obstetrics and gynecology data set **as applicable**. These include but are not limited to the below:

- 12.1. Menstrual history - Reported

- 12.2. Menstrual status - Reported
- 12.3. Birth control method - Reported
- 12.4. Last menstrual period start date {date}
- 12.5. Pregnancy related history [Narrative]
- 12.6. Delivery date estimated
- 12.7. Pregnancies {Number}
- 12.8. Parity {Number}
- 12.9. History of urinary tract disorders [Narrative]
- 12.10. Number of fetuses
- 12.11. Fetal [Narrative] Movement
- 12.12. Viability of current pregnancy [Narrative]
- 12.13. Last Mensural Period (LMP) - Reported
- 12.14. Date symptoms of pregnancy first noted
- 12.15. Onset of painful contractions
- 12.16. Time contractions became regular
- 12.17. Time membranes ruptured
- 12.18. history of per vaginum bleeding
- 12.19. history of per vaginum discharge

12.20. Ongoing In vitro fertilization /assisted pregnancy.

### 13. STANDARD NINE: PHYSICAL EXAMINATION DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/Patient physical examination data set **as applicable**. These include but are not limited to the below:

- 13.1. Physical findings [Narrative]
- 13.2. 1 minute Apgar Score {Newborns}
- 13.3. 5 minute Apgar Score {Newborns}
- 13.4. 10 minute Apgar Score {Newborns}
- 13.5. Physical findings of General status [Narrative]
- 13.6. Acuity assessment [Narrative]
- 13.7. Pain severity [Narrative]
- 13.8. Pain severity [Score] Visual analog score
- 13.9. Pain severity Wong-Baker FACES pain rating scale {Paediatrics}
- 13.10. Pain severity total Face, Legs, Activity, Cry, Consolability Behavioral Pain Scale (FLACC) [Score]

- 13.11. Pain severity verbal numeric scale score
- 13.12. Pain assessment panel
- 13.13. Chronic pain assessment [Narrative]
- 13.14. Capillary refill [Time]s
- 13.15. Oxygen saturation in Arterial blood by Pulseoximetry %
- 13.16. Inhaled oxygen flow rate L/min
- 13.17. Fetal Heart rate {beats}/min
- 13.18. QRS complex Ventricles by EKG
- 13.19. Blood pressure systolic and diastolic
- 13.20. Mean blood pressure mm[Hg]
- 13.21. Diastolic blood pressure mm[Hg]
- 13.22. Systolic blood pressure mm[Hg]
- 13.23. Heart rate rhythm palpation
- 13.24. Heart rate {beats}/min;{counts/min}
- 13.25. Respiratory rate {breaths}/min;{counts/min}
- 13.26. Body temperature Cel
- 13.27. Body weight Measured {kg}
- 13.28. Body height {cm; m}

- 13.29. Body Mass Index
- 13.30. Glasgow coma score total
- 13.31. Glasgow coma score eye opening
- 13.32. Glasgow coma score verbal
- 13.33. Glasgow coma score motor
- 13.34. Glasgow coma score special circumstances
- 13.35. Physical exam by body areas
- 13.36. Physical findings of Head [Narrative]
- 13.37. Physical findings of Face
- 13.38. Physical findings of Lip
- 13.39. Physical findings of Scalp
- 13.40. Physical findings of Neck [Narrative]
- 13.41. Jugular vein distention --head raised 30 degrees
- 13.42. Physical findings of Chest [Narrative]
- 13.43. Physical findings of Chest wall [Narrative]
- 13.44. Physical findings of Breasts [Narrative]
- 13.45. Physical findings of Axilla [Narrative]
- 13.46. Physical findings of Heart [Narrative]

- 13.47. Physical findings of Thorax and Lungs [Narrative]
- 13.48. Physical findings of Abdomen [Narrative]
- 13.49. Physical findings of Groin [Narrative]
- 13.50. Physical findings of Pelvis [Narrative]
- 13.51. Physical findings of Genitalia [Narrative]
- 13.52. Physical findings of Male genitalia [Narrative]
- 13.53. Physical findings of Prostate
- 13.54. Physical findings of Female genitalia [Narrative]
- 13.55. Physical findings of Vagina
- 13.56. Physical findings of Uterus
- 13.57. Physical findings of Cervix
- 13.58. Physical findings of Buttocks [Narrative]
- 13.59. Physical findings of Rectum [Narrative]
- 13.60. Physical findings of Back [Narrative]
- 13.61. Physical findings of Spine
- 13.62. Physical findings of Paravertebral muscles
- 13.63. Physical findings of Hand [Narrative]
- 13.64. Physical findings of Digits



- 13.65. Physical findings of Nail bed [Narrative]
- 13.66. Physical findings of Wrist [Narrative]
- 13.67. Physical findings of Forearm [Narrative]
- 13.68. Physical findings of Elbow [Narrative]
- 13.69. Physical findings of Upper arm [Narrative]
- 13.70. Physical findings of Shoulder [Narrative]
- 13.71. Physical findings of Foot [Narrative]
- 13.72. Physical findings of Toes
- 13.73. Physical findings of Ankle [Narrative]
- 13.74. Physical findings of Calf [Narrative]
- 13.75. Physical findings of Knee [Narrative]
- 13.76. Physical findings of Thigh [Narrative]
- 13.77. Physical findings of Hip [Narrative]
- 13.78. Physical findings of Eye [Narrative]
- 13.79. Intraocular pressure of Eye mm{Hg}
- 13.80. Physical findings of Conjunctiva
- 13.81. Physical findings of Cornea
- 13.82. Physical findings of Extraocular muscles

- 13.83. Physical findings of Eye lid
- 13.84. Physical findings of Iris
- 13.85. Physical findings of Lacrimal apparatus
- 13.86. Physical findings of Optic lens
- 13.87. Physical findings of Pupil
- 13.88. Physical findings of Retina
- 13.89. Physical findings of Sclera
- 13.90. Visual acuity study
- 13.91. Physical findings of Ears and Nose and Mouth and Throat [Narrative]
- 13.92. Physical findings of Ear [Narrative]
- 13.93. Physical findings of Tympanic membrane
- 13.94. Physical findings of Auditory canal
- 13.95. Physical findings of Nose [Narrative]
- 13.96. Physical findings of Palate
- 13.97. Physical findings of Mouth
- 13.98. Physical findings of Teeth and gum
- 13.99. Physical findings of Tongue
- 13.100. Physical findings of Throat [Narrative]

- 13.101. Physical findings of Larynx
- 13.102. Physical findings of Tonsil
- 13.103. Physical findings of Mouth and Throat and Teeth [Narrative]
- 13.104. Physical findings of Cardiovascular system [Narrative]
- 13.105. Physical findings of Vessels [Narrative]
- 13.106. Pulse strength on exam [Narrative]
- 13.107. Physical findings of Respiratory system [Narrative]
- 13.108. Physical findings of Gastrointestinal system [Narrative]
- 13.109. Physical findings of Genitourinary tract [Narrative]
- 13.110. Physical findings of Musculoskeletal system [Narrative]
- 13.111. Physical findings of Muscle tone
- 13.112. Physical findings of Skin [Narrative]
- 13.113. Physical findings of Nervous system [Narrative]
- 13.114. Mental status [Narrative]
- 13.115. Physical findings of Primitive reflexes [Narrative]
- 13.116. Physical findings of Brain stem reflexes [Narrative]
- 13.117. Physical findings sensation
- 13.118. Physical findings of Motor function

- 13.119. Physical findings of Strength [Narrative]
- 13.120. Physical findings of Neurologic balance and Coordination [Narrative]
- 13.121. Physical findings of Gait
- 13.122. Physical findings of Neurologic deep tendon reflexes [Narrative]
- 13.123. Deep tendon reflex of Achilles
- 13.124. Deep tendon reflex of Biceps
- 13.125. Deep tendon reflex of Brachioradialis
- 13.126. Deep tendon reflex of Patellar
- 13.127. Deep tendon reflex of Triceps
- 13.128. Physical findings of Nerves-cranial
- 13.129. Babinski reflex
- 13.130. Psychiatric findings [Narrative]
- 13.131. Physical findings of Hematologic and Lymphatic and Immunologic System  
[Narrative]
- 13.132. Physical findings of Lymph node
- 13.133. Physical findings of Endocrine system
- 13.134. Physical findings of Joint
- 13.135. Physical findings of Extremities.

#### 14. STANDARD TEN: RADIOLOGY DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient radiology data set **as applicable**. These include but are not limited to the below:

- 14.1. Radiology studies (set)
- 14.2. Diagnostic imaging study
- 14.3. X-ray unspecified site study
- 14.4. X-ray head study
- 14.5. X-ray spine unspecified study
- 14.6. X-ray spine cervical study
- 14.7. X-ray spine thoracic study
- 14.8. X-ray spine lumbar study
- 14.9. X-ray hip study
- 14.10. X-ray pelvis study
- 14.11. X-ray femur study
- 14.12. X-ray knee study
- 14.13. X-ray tibia and fibula study

- 14.14. X-ray ankle study
- 14.15. X-ray foot study
- 14.16. X-ray shoulder study
- 14.17. X-ray humerus study
- 14.18. X-ray radius and ulna study
- 14.19. X-ray elbow study
- 14.20. X-ray wrist study
- 14.21. X-ray hand study
- 14.22. Computed Tomography (CT) Scan (Plain and/or Contrast Study) Unspecified body region
- 14.23. Standard CT for whole-body trauma scanning( CT head and cervical spine without contrast, CT chest, abdomen, and pelvis with contrast)
- 14.24. CT Head (Plain and/or Contrast Study)
- 14.25. CT spine (Plain and/or Contrast Study)
- 14.26. CT spine cervical (Plain and/or Contrast Study)
- 14.27. CT spine thoracic (Plain and/or Contrast Study)
- 14.28. CT spine lumbar (Plain and/or Contrast Study)
- 14.29. CT Chest (Plain and/or Contrast Study)

- 14.30. CT Abdomen (Plain and/or Contrast Study)
- 14.31. CT pelvis (Plain and/or Contrast Study)
- 14.32. CT extremity (Plain and/or Contrast Study)
- 14.33. CT kidney, ureter and bladder (Plain and/or Contrast Study)
- 14.34. Magnetic Resonance Imaging (MRI) Scan unspecified body region
- 14.35. MRI spine study
- 14.36. MRI Brain
- 14.37. MRI spine cervical study
- 14.38. MRI spine thoracic study
- 14.39. MRI spine lumbar study
- 14.40. MRI chest study
- 14.41. MRI abdomen study
- 14.42. MRI pelvis and hips study
- 14.43. MRI foot study
- 14.44. MRI forearm study
- 14.45. MRI joint study
- 14.46. MRI hand study
- 14.47. Nuclear medicine pulmonary ventilation–perfusion (VQ) scan study

- 14.48. Nuclear medicine thyroid scan study
- 14.49. PT Unspecified body region
- 14.50. CT guidance for aspiration of unspecified site study
- 14.51. CT guidance for biopsy of unspecified site study
- 14.52. Ultrasound unspecified body region
- 14.53. Ultrasound of head study
- 14.54. Ultrasound of neck study
- 14.55. Ultrasound of abdomen study
- 14.56. Ultrasound of liver study
- 14.57. Ultrasound of pelvis study.

## 15. STANDARD ELEVEN: LABORATORY DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient laboratory data set **as applicable**. These include but are not limited to the below:

- 15.1. Relevant diagnostic tests/laboratory data [Narrative]
- 15.2. Laboratory studies (set)



- 15.3. Blood gas studies (set)
- 15.4. Chemistry studies (set)
- 15.5. Hematology studies (set)
- 15.6. Coagulation studies (set)
- 15.7. Toxicology studies (set)
- 15.8. Microbiology studies (set)
- 15.9. Serology and blood bank studies (set)
- 15.10. Urinalysis studies (set)
- 15.11. Calculated and derived values (set)
- 15.12. Cardiac biomarkers (set)
- 15.13. Pulmonary studies (set).

## 16. STANDARD TWELVE: PROCEDURES AND RESULTS DATA IN ED

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/ Patient procedures and results data set **as applicable**. These include but are not limited to the below:

- 16.1. ED Procedure Indication

- 16.2. ED Procedure
- 16.3. Date/Time ED Procedure Ordered
- 16.4. Date/Time ED Procedure Starts
- 16.5. Date/Time ED Procedure Ends
- 16.6. ED Procedure Practitioner ID
- 16.7. ED Procedure Practitioner Type
- 16.8. Date/Time ED Diagnostic Procedure Result Reported
- 16.9. ED Diagnostic Procedure Result Type
- 16.10. Diagnostic Procedure Result
- 16.11. Surgical operation note indications [Interpretation] [Narrative]
- 16.12. ED procedure result observation [Interpretation]
- 16.13. EKG impression [Narrative]
- 16.14. Cardiology monitoring
- 16.15. Continuous ST segment monitoring (set)
- 16.16. Cardiac rhythm monitoring (set)
- 16.17. Invasive hemodynamic monitoring (set)
- 16.18. Mixed venous oxygen saturation monitoring(set)
- 16.19. Interpretation and review of laboratory results

- 16.20. Annotation comment [Interpretation][Narrative]
- 16.21. Care process or plan
- 16.22. Inpatient Practitioner
- 16.23. Payment Diagnosis [identifier]
- 16.24. ED service level
- 16.25. Patient problem outcome [Narrative]
- 16.26. ED outcome.

## 17. STANDARD THIRTEEN: ED MEDICATION DATA

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/Patient ED medication data set **as applicable**. These include but are not limited to the below:

- 17.1. ED Medication administered [Narrative]
- 17.2. Date/Time ED Medication Ordered
- 17.3. ED Medication Ordering Practitioner ID
- 17.4. ED Medication Ordering Practitioner Type
- 17.5. ED Medication Dose

- 17.6. ED Medication Dose Units
- 17.7. ED Medication Schedule
- 17.8. ED Medication Route
- 17.9. Date/Time ED Medication Starts
- 17.10. Date/Time ED Medication Stops
- 17.11. ED Medication Administering Practitioner ID
- 17.12. ED Medication Administering Practitioner Type
- 17.13. Medication Prescribed
- 17.14. Medication Dispensed [Narrative]
- 17.15. Medication Discharge [Narrative]
- 17.16. Amount of ED discharge medication to be dispensed.

## 18. STANDARD FOURTEEN: ED DISPOSITION AND DIAGNOSIS DATA

All Healthcare Facilities with EDs and ambulance services, and/or facilities providing urgent care services in the Emirate of Dubai should adhere to the required Data Subject/Patient ED disposition and diagnosis data set **as applicable**. These include but are not limited to the below:

- 18.1. Date/Time of Recorded ED Disposition
- 18.2. ED Disposition [Patient's anticipated location or status following ED visit].
- 18.3. Inpatient Practitioner ID
- 18.4. Inpatient Practitioner Type
- 18.5. Facility Receiving ED Patient
- 18.6. Date/Time Patient Departs ED
- 18.7. ED Follow-Up Care Assistance [Follow-up care needs of ED patient at discharge].
- 18.8. Referral at ED Disposition
- 18.9. ED Referral Practitioner Name
- 18.10. ED Referral Practitioner ID
- 18.11. ED Referral Practitioner Type
- 18.12. ED Referral Organization
- 18.13. ED Discharge Medication Order Type [Indicator of whether medication is prescribed, renewed, changed, or discontinued at ED discharge].
- 18.14. ED Discharge Medication Ordering Practitioner ID
- 18.15. ED Discharge Medication Ordering Practitioner Type
- 18.16. ED Discharge Medication
- 18.17. ED Discharge Medication Dose Units

- 18.18. ED Discharge Medication Schedule
- 18.19. ED Discharge Medication Route
- 18.20. Amount of ED Discharge Medication to be Dispensed
- 18.21. Number of ED Discharge Medication Refills
- 18.22. ED Disposition Diagnosis Description [Practitioner's description of condition or problem for which services were provided during patient's ED visit, recorded at time of disposition].
- 18.23. ED Disposition Diagnosis Code
- 18.24. ED Disposition Diagnosis Practitioner ID
- 18.25. ED Disposition Diagnosis Practitioner Type
- 18.26. ED Service Level [Extent of services provided by ED physician, nurse, or other practitioner during patient's ED visit].
- 18.27. ED Service Level Practitioner ID
- 18.28. ED Service Level Practitioner Type
- 18.29. Patient Problem Assessed in ED Outcome Observation
- 18.30. ED Outcome Observation
- 18.31. Date/Time of ED Outcome Observation
- 18.32. ED Outcome Observation Practitioner ID

- 18.33. ED Outcome Observation Practitioner Type
- 18.34. ED Patient Satisfaction Report
- 18.35. ED disposition and diagnosis data Set DEEDS
- 18.36. ED discharge disposition
- 18.37. Provider assuming care for patient upon ED disposition [Identifier].
- 18.38. Time of death
- 18.39. Cause of death.
- 18.40. Type of death: Death on Arrival (DOA) or Death in Department (DID).

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