

**ATTACHMENT C:**

**MDS TERM MATCHES  
AND REVIEWER FEEDBACK**

**Part 2 of 2**

**Section G4A (RANGE OF MOTION)**

<b>(A) RANGE OF MOTION</b>	
0.	No limitation
1.	Limitation on one side
2.	Limitation on both sides

NO MATCHES ATTEMPTED

**Section G4A.0 (No limitation)**

0.	No limitation
----	---------------

NO MATCHES ATTEMPTED

**Section G4A.1 (Limitation on one side)**

1.	Limitation on one side
----	------------------------

NO MATCHES ATTEMPTED

**Section G4A.2 (Limitation on both sides)**

2.	Limitation on both sides
----	--------------------------

NO MATCHES ATTEMPTED

**Section G4B (VOLUNTARY MOVEMENT)**

<b>(B) VOLUNTARY MOVEMENT</b>	
0.	No loss
1.	Partial loss
2.	Full loss

(A) (B)

NO MATCHES ATTEMPTED

**Section G4B.0 (No loss)**

0.	No loss
----	---------

NO MATCHES ATTEMPTED

**Section G4B.1 (Partial loss)**

1.	Partial loss
----	--------------

NO MATCHES ATTEMPTED

Section G4B.2 (Full loss)

2. Full loss

NO MATCHES ATTEMPTED

Section G4a. (Neck)

a. Neck

NO MATCHES ATTEMPTED

Section G4aA (Neck w/ code for RANGE OF MOTION)

a. Neck

NO MATCHES ATTEMPTED

Section G4aA.0 (Neck w/ code for RANGE OF MOTION = 0)

a. Neck

NO MATCHES ATTEMPTED

Section G4aA.1 (Neck w/ code for RANGE OF MOTION = 1)

a. Neck

NO MATCHES ATTEMPTED

Section G4aA.2 (Neck w/ code for RANGE OF MOTION = 2)

a. Neck

NO MATCHES ATTEMPTED

Section G4aB (Neck w/ code for VOLUNTARY MOVEMENT)

a. Neck

NO MATCHES ATTEMPTED

Section G4aB.0 (Neck w/ code for VOLUNTARY MOVEMENT = 0)

a. Neck

NO MATCHES ATTEMPTED

Section G4aB.1 (Neck w/ code for VOLUNTARY MOVEMENT = 1)

a. Neck		1
---------	--	---

NO MATCHES ATTEMPTED

Section G4aB.2 (Neck w/ code for VOLUNTARY MOVEMENT = 2)

a. Neck		2
---------	--	---

NO MATCHES ATTEMPTED

Section G4b. (Arm – including shoulder or elbow)

b. Arm—including shoulder or elbow		
------------------------------------	--	--

NO MATCHES ATTEMPTED

Section G4bA (Arm – including shoulder or elbow w/ code for RANGE OF MOTION)

b. Arm—including shoulder or elbow	
------------------------------------	--

NO MATCHES ATTEMPTED

Section G4bA.0 (Arm – including shoulder or elbow w/ code for RANGE OF MOTION = 0)

b. Arm—including shoulder or elbow	0	
------------------------------------	---	--

NO MATCHES ATTEMPTED

Section G4bA.1 (Arm – including shoulder or elbow w/ code for RANGE OF MOTION = 1)

b. Arm—including shoulder or elbow	1	
------------------------------------	---	--

NO MATCHES ATTEMPTED

Section G4bA.2 (Arm – including shoulder or elbow w/ code for RANGE OF MOTION = 2)

b. Arm—including shoulder or elbow	2	
------------------------------------	---	--

NO MATCHES ATTEMPTED

Section G4bB (Arm – including shoulder or elbow w/ code for VOLUNTARY MOVEMENT)

b. Arm—including shoulder or elbow

--	--

NO MATCHES ATTEMPTED

Section G4bB.0 (Arm – including shoulder or elbow w/ code for VOLUNTARY MOVEMENT = 0)

b. Arm—including shoulder or elbow

	0
--	---

NO MATCHES ATTEMPTED

Section G4bB.1 (Arm – including shoulder or elbow w/ code for VOLUNTARY MOVEMENT = 1)

b. Arm—including shoulder or elbow

	1
--	---

NO MATCHES ATTEMPTED

Section G4bB.2 (Arm – including shoulder or elbow w/ code for VOLUNTARY MOVEMENT = 2)

b. Arm—including shoulder or elbow

	2
--	---

NO MATCHES ATTEMPTED

Section G4c. (Hand – Including wrist or fingers)

c. Hand—including wrist or fingers

--	--

NO MATCHES ATTEMPTED

Section G4cA (Hand – including wrist or fingers w/ code for RANGE OF MOTION)

c. Hand—including wrist or fingers

--

NO MATCHES ATTEMPTED

Section G4cA.0 (Hand – including wrist or fingers w/ code for RANGE OF MOTION = 0)

c. Hand—including wrist or fingers

0	
---	--

NO MATCHES ATTEMPTED

Section G4cA.1 (Hand – including wrist or fingers w/ code for RANGE OF MOTION = 1)

c. Hand—including wrist or fingers

1	
---	--

NO MATCHES ATTEMPTED

Section G4cA.1 (Hand – including wrist or fingers w/ code for RANGE OF MOTION = 1)

c. Hand—Including wrist or fingers

2	
---	--

NO MATCHES ATTEMPTED

Section G4cB (Hand – including wrist or fingers w/ code for VOLUNTARY MOVEMENT)

c. Hand—Including wrist or fingers

--	--

NO MATCHES ATTEMPTED

Section G4cB.0 (Hand – including wrist or fingers w/ code for VOLUNTARY MOVEMENT = 0)

c. Hand—Including wrist or fingers

0	
---	--

NO MATCHES ATTEMPTED

Section G4cB.1 (Hand – including wrist or fingers w/ code for VOLUNTARY MOVEMENT = 1)

c. Hand—Including wrist or fingers

1	
---	--

NO MATCHES ATTEMPTED

Section G4cB.2 (Hand – including wrist or fingers w/ code for VOLUNTARY MOVEMENT = 2)

c. Hand—Including wrist or fingers

2	
---	--

NO MATCHES ATTEMPTED

Section G4d. (Leg – including hip or knee)

d. Leg—Including hip or knee

--	--

NO MATCHES ATTEMPTED

Section G4dA (Leg – including hip or knee w/ code for RANGE OF MOTION)

d. Leg—Including hip or knee

--

NO MATCHES ATTEMPTED

Section G4dA.0 (Leg – including hip or knee w/ code for RANGE OF MOTION = 0)

d. Leg—Including hip or knee

--	--

NO MATCHES ATTEMPTED

Section G4dA.1 (Leg – including hip or knee w/ code for RANGE OF MOTION = 1)

d. Leg—Including hip or knee

1	
---	--

NO MATCHES ATTEMPTED

Section G4dA.2 (Leg – including hip or knee w/ code for RANGE OF MOTION = 2)

d. Leg—Including hip or knee

2	
---	--

NO MATCHES ATTEMPTED

Section G4dB (Leg – including hip or knee w/ code for VOLUNTARY MOVEMENT)

d. Leg—Including hip or knee

--	--

NO MATCHES ATTEMPTED

Section G4dB.0 (Leg – including hip or knee w/ code for VOLUNTARY MOVEMENT = 0)

d. Leg—Including hip or knee

	0
--	---

NO MATCHES ATTEMPTED

Section G4dB.1 (Leg – including hip or knee w/ code for VOLUNTARY MOVEMENT = 1)

d. Leg—Including hip or knee

	1
--	---

NO MATCHES ATTEMPTED

Section G4dB.2 (Leg – including hip or knee w/ code for VOLUNTARY MOVEMENT = 2)

d. Leg—Including hip or knee

	2
--	---

NO MATCHES ATTEMPTED

Section G4e. (Foot – including ankle or toes)

e. Foot—Including ankle or toes

--	--

NO MATCHES ATTEMPTED

Section G4eA (Foot – including ankle or toes w/ code for RANGE OF MOTION)

e. Foot—including ankle or toes 

--

NO MATCHES ATTEMPTED

Section G4eA.0 (Foot – including ankle or toes w/ code for RANGE OF MOTION = 0)

e. Foot—including ankle or toes 

0	
---	--

NO MATCHES ATTEMPTED

Section G4eA.1 (Foot – including ankle or toes w/ code for RANGE OF MOTION = 1)

e. Foot—including ankle or toes 

1	
---	--

NO MATCHES ATTEMPTED

Section G4eA.2 (Foot – including ankle or toes w/ code for RANGE OF MOTION = 2)

e. Foot—including ankle or toes 

2	
---	--

NO MATCHES ATTEMPTED

Section G4eB (Foot – including ankle or toes w/ code for VOLUNTARY MOVEMENT)

e. Foot—including ankle or toes 

--	--

NO MATCHES ATTEMPTED

Section G4eB.0 (Foot – including ankle or toes w/ code for VOLUNTARY MOVEMENT = 0)

e. Foot—including ankle or toes 

	0
--	---

NO MATCHES ATTEMPTED

Section G4eB.1 (Foot – including ankle or toes w/ code for VOLUNTARY MOVEMENT = 1)

e. Foot—including ankle or toes 

	1
--	---

NO MATCHES ATTEMPTED

Section G4eB.2 (Foot – including ankle or toes w/ code for VOLUNTARY MOVEMENT = 2)

e. Foot—including ankle or toes 

	2
--	---



NO MATCHES ATTEMPTED

Section G4f (Other limitation or loss)

f. Other limitation or loss		
-----------------------------	--	--

NO MATCHES ATTEMPTED

Section G4fA (Other limitation or loss w/ code for RANGE OF MOTION)

f. Other limitation or loss	
-----------------------------	--

NO MATCHES ATTEMPTED

Section G4fA.0 (Other limitation or loss w/ code for RANGE OF MOTION = 0)

f. Other limitation or loss	0	
-----------------------------	---	--

NO MATCHES ATTEMPTED

Section G4fA.1 (Other limitation or loss w/ code for RANGE OF MOTION = 1)

f. Other limitation or loss	1	
-----------------------------	---	--

NO MATCHES ATTEMPTED

Section G4fA.2 (Other limitation or loss w/ code for RANGE OF MOTION = 2)

f. Other limitation or loss	2	
-----------------------------	---	--

NO MATCHES ATTEMPTED

Section G4fB (Other limitation or loss w/ code for VOLUNTARY MOVEMENT)

f. Other limitation or loss		
-----------------------------	--	--

NO MATCHES ATTEMPTED

Section G4fB.0 (Other limitation or loss w/ code for VOLUNTARY MOVEMENT = 0)

f. Other limitation or loss		0
-----------------------------	--	---

NO MATCHES ATTEMPTED

Section G4fB.1 (Other limitation or loss w/ code for VOLUNTARY MOVEMENT = 1)

f. Other limitation or loss		
-----------------------------	--	--

NO MATCHES ATTEMPTED

Section G4fB.2 (Other limitation or loss w/ code for VOLUNTARY MOVEMENT = 2)

f. Other limitation or loss		2
-----------------------------	--	---

NO MATCHES ATTEMPTED

Section G5 (MODES OF LOCOMOTION)

5.	MODES OF LOCOMOTION	(Check all that apply during last 7 days)				
		Cane/walker/crutch	a.		Wheelchair primary mode of locomotion	d.
		Wheeled self	b.			
		Other person wheeled	c.		NONE OF ABOVE	e.

NO MATCHES ATTEMPTED

Section G5a. (Cane/walker/crutch)

Cane/walker/crutch	a.
--------------------	----

NO MATCHES ATTEMPTED

Section G5b. (Wheeled self)

Wheeled self	b.
--------------	----

NO MATCHES ATTEMPTED

Section G5c. (Other person wheeled)

Other person wheeled	c.
----------------------	----

NO MATCHES ATTEMPTED

Section G5d. (Wheelchair primary mode of locomotion)

Wheelchair primary mode of locomotion	d.
---------------------------------------	----

NO MATCHES ATTEMPTED

Section G5e. (NONE OF ABOVE)

NONE OF ABOVE	e.
---------------	----

NO MATCHES ATTEMPTED

### Section G6 (MODES OF TRANSFER)

6.	MODES OF TRANSFER	(Check all that apply during last 7 days)		
	Bedfast all or most of time	a.	Lifted mechanically	d.
	Bed rails used for bed mobility or transfer	b.	Transfer aid (e.g., slide board, trapeze, cane, walker, brace)	e.
	Lifted manually	c.	NONE OF ABOVE	f.

NO MATCHES ATTEMPTED

### Section G6a. (Bedfast all or most of time)

Bedfast all or most of time	a.
-----------------------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Bed-ridden (finding)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. (rshephard 2005/07/11 17:06)</p> <p>This is an instruction -- shouldn't be in list. (dmalitz 2005/06/02 18:07)</p>

### Section G6b. (Bed rails used for bed mobility or transfer)

Bed rails used for bed mobility or transfer	b.
---	----

NO MATCHES ATTEMPTED

### Section G6c. (Lifted manually)

Lifted manually	c.
-----------------	----

NO MATCHES ATTEMPTED

### Section G6d. (Lifted mechanically)

Lifted mechanically	d.
---------------------	----

NO MATCHES ATTEMPTED

**Section G6e. (Transfer aid (e.g., slide board, trapeze, cane, walker, brace)**

Transfer aid (e.g., slide board, trapeze, cane, walker, brace)	<div>e.</div>
--	---------------

NO MATCHES ATTEMPTED

**Section G6f. (NONE OF ABOVE)**

NONE OF ABOVE	<div>f.</div>
---------------	---------------

NO MATCHES ATTEMPTED

**Section G7 (TASK SEGMENTATION)**

7.	TASK SEGMENTATION	Some or all of ADL activities were broken into subtasks during last 7 days so that resident could perform them 0. No 1. Yes	
----	-------------------	---	--

NO MATCHES ATTEMPTED

**Section G7.0 (No)**

0. No
-------

NO MATCHES ATTEMPTED

**Section G7.1 (Yes)**

1. Yes
--------

NO MATCHES ATTEMPTED

**Section G8 (ADL FUNCTIONAL REHABILITATION POTENTIAL)**

8.	ADL FUNCTIONAL REHABILITATION POTENTIAL	Resident believes he/she is capable of increased independence in at least some ADLs	a.
		Direct care staff believe resident is capable of increased independence in at least some ADLs	b.
		Resident able to perform tasks/activity but is very slow	c.
		Difference in ADL Self-Performance or ADL Support, comparing mornings to evenings	d.
		NONE OF ABOVE	e.

NO MATCHES ATTEMPTED

**Section G8a. (Resident believes he/she is capable of increased independence...)**

Resident believes he/she is capable of increased independence in at least some ADLs	a.
---	----

NO MATCHES ATTEMPTED

**Section G8b. (Direct care staff believe resident is capable of increased independence...)**

Direct care staff believe resident is capable of increased independence in at least some ADLs	b.
---	----

NO MATCHES ATTEMPTED

**Section G8c. (Resident able to perform tasks/activities but is very slow)**

Resident able to perform tasks/activity but is very slow	c.
--	----

NO MATCHES ATTEMPTED

**Section G8d. (Difference in ADL Self-Performance or ADL Support...)**

Difference in ADL Self-Performance or ADL Support, comparing mornings to evenings	d.
---	----

NO MATCHES ATTEMPTED

**Section G8e. (NONE OF ABOVE)**

NONE OF ABOVE	e.
---------------	----

NO MATCHES ATTEMPTED

**Section G9 (CHANGE IN ADL FUNCTION)**

9.	CHANGE IN ADL FUNCTION	Resident's ADL self-performance status has changed as compared to status of <b>90 days ago</b> (or since last assessment if less than 90 days) 0. No change                      1. Improved                      2. Deteriorated	<div></div>
----	------------------------	--	-------------

NO MATCHES ATTEMPTED

**Section H (CONTINENCE IN LAST 14 DAYS)**

## SECTION H. CONTINENCE IN LAST 14 DAYS

<b>1. CONTINENCE SELF-CONTROL CATEGORIES</b> <i>(Code for resident's PERFORMANCE OVER ALL SHIFTS)</i>					
0. <i>CONTINENT</i> —Complete control <i>(includes use of indwelling urinary catheter or ostomy device that does not leak urine or stool)</i>					
1. <i>USUALLY CONTINENT</i> —BLADDER, incontinent episodes once a week or less; BOWEL, less than weekly					
2. <i>OCCASIONALLY INCONTINENT</i> —BLADDER, 2 or more times a week but not daily; BOWEL, once a week					
3. <i>FREQUENTLY INCONTINENT</i> —BLADDER, tended to be incontinent daily, but some control present (e.g., on day shift); BOWEL, 2-3 times a week					
4. <i>INCONTINENT</i> —Had inadequate control BLADDER, multiple daily episodes; BOWEL, all (or almost all) of the time					
a.	BOWEL CONTINENCE	Control of bowel movement, with appliance or bowel continence programs, if employed			
b.	BLADDER CONTINENCE	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed			
2.	BOWEL ELIMINATION PATTERN	Bowel elimination pattern regular—at least one movement every three days	a.	Diarrhea	c.
				Fecal impaction	d.
		Constipation	b.	NONE OF ABOVE	e.
3.	APPLIANCES AND PROGRAMS	Any scheduled toileting plan	a.	Did not use toilet room/ commode/urinal	f.
		Bladder retraining program	b.	Pads/briefs used	g.
		External (condom) catheter	c.	Enemas/irrigation	h.
		Indwelling catheter	d.	Ostomy present	i.
		Intermittent catheter	e.	NONE OF ABOVE	j.
4.	CHANGE IN URINARY CONTINENCE	Resident's urinary continence has changed as compared to status of 90 days ago (or since last assessment if less than 90 days)			
		0. No change      1. Improved      2. Deteriorated			

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Improvement of status (qualifier value) No status change (qualifier value)	SNOMED CT SNOMED CT	I think these three responses should be "urinary incont-no change", "urinary incont-improved" and "urinary incont-deteriorated". I'm guessing that there's no snomed match for these three concepts. <b>(dmalitz 2005/07/11 20:41)</b>
Broader Match Term	Broader Match Term Namespace	-----
Bladder continence assessment (regime/therapy) Finding of elimination pattern (finding)	SNOMED CT SNOMED CT	

Section H1 (CONTINENCE SELF-CONTROL CATEGORIES)

1. CONTINENCE SELF-CONTROL CATEGORIES (Code for resident's PERFORMANCE OVER ALL SHIFTS)
0. CONTINENT—Complete control [includes use of indwelling urinary catheter or ostomy device that does not leak urine or stool]
1. USUALLY CONTINENT—BLADDER, incontinent episodes once a week or less; BOWEL, less than weekly
2. OCCASIONALLY INCONTINENT—BLADDER, 2 or more times a week but not daily; BOWEL, once a week
3. FREQUENTLY INCONTINENT—BLADDER, tended to be incontinent daily, but some control present (e.g., on day shift); BOWEL, 2-3 times a week
4. INCONTINENT—Had inadequate control BLADDER, multiple daily episodes; BOWEL, all (or almost all) of the time

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Finding related to ability to perform personal hygiene activity (finding)	SNOMED CT	The proposed broader semantic match, Finding related to ability to perform personal hygiene activity (finding), relates to the hygiene tasks involved with toileting, such as use of a receptacle or ability to adjust clothing or clean self. (See subconcepts). The MDS concept, however, relates to bowel and bladder control, which is a different issue. The SNOMED concept Maintaining continence (observable entity) appears to be a good semantic match - a synonym is bowel and bladder control, which is the focus of the MDS concept. (rshephard 2005/07/05 20:15)
Partial Match Term	Partial Match Term Namespace	-----
Maintaining continence (observable entity)	SNOMED CT	

Section H1.0 (CONTINENT)

0. CONTINENT—Complete control [includes use of indwelling urinary catheter or ostomy device that does not leak urine or stool]
--

NO MATCHES ATTEMPTED

Section H1.1 (USUALLY CONTINENT)

1. USUALLY CONTINENT—BLADDER, incontinent episodes once a week or less; BOWEL, less than weekly
--

NO MATCHES ATTEMPTED

Section H1.2 (OCCASIONALLY INCONTINENT)

2. OCCASIONALLY INCONTINENT—BLADDER, 2 or more times a week but not daily; BOWEL, once a week

NO MATCHES ATTEMPTED

Section H1.3 (FREQUENTLY INCONTINENT)

3. FREQUENTLY INCONTINENT—BLADDER, tended to be incontinent daily, but some control present (e.g., on day shift); BOWEL, 2-3 times a week

NO MATCHES ATTEMPTED

Section H1.4 (INCONTINENT)

4. INCONTINENT—Had inadequate control BLADDER, multiple daily episodes; BOWEL, all (or almost all) of the time

NO MATCHES ATTEMPTED

Section H1a. (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

a.	BOWEL CONTI-NENCE	Control of bowel movement, with appliance or bowel continence programs, if employed	
----	-------------------	---	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Bowels: fully continent (finding) Bowels: occasional accident (finding) Finding of bowel continence (finding) Incontinence of feces (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>Since the meaning of "continent" and the other response alternatives changes for the two items they apply to (H2a and H2b), you probably need to nest the response alternatives within the items in your database. Thus, you would have "continent", "freq incont", etc. under H2a and then again under H2b. (dmalitz 2005/07/11 20:38)</p> <p>"Incontinence of feces" seems to be a reasonable match. However, the terminology (reference to feces rather than bowel) may lead to confusion among users. How would a user find this term if they did a search on "bowel"? (dmalitz 2005/07/08 11:59)</p> <p>This is another example of MDS response options (e.g., frequently, occasionally, usually) that don't have a good snomed translation. (dmalitz 2005/07/08 11:55)</p> <p>I think that Continent is not a partial match - maybe a</p>



		<p>broader match - because the MDS concept Usually continent has significant qualifiers. A complicating factor is that the definitions for bowel and bladder are combined. They should be separated into a scale for bladder incontinence and a scale for bowel incontinence - we could do better with matching. <b>(rshephard 2005/07/07 12:11)</b></p> <p>One of the complicating factors is that bowel and bladder scales are combined in the MDS concept. They should be divided into two separate scales - then we could do better with matching. <b>(rshephard 2005/07/07 12:06)</b></p> <p>I agree that Incontinence is a best match, since it can be used for both H1a and H1b. <b>(rshephard 2005/07/07 12:04)</b></p> <p>The best semantic match is NO SNOMED BEST MATCH. Even stringing these partial matches together does not get us where we need to go. One of the complicating factors is that the definitions for bowel and bladder are combined. They should be separated into a scale for bladder incontinence and a scale for bowel incontinence. <b>(rshephard 2005/07/07 11:55)</b></p> <p>I agree that Continent might be a best match, since it can be used as a response to either H1a, Bowel continence, or H1b, Bladder continence. <b>(rshephard 2005/07/07 11:50)</b></p> <p>Bowels: occasional accident (finding) is a broader match, but not a best match, because it does not include the qualifier less than weekly. That qualifier does not seem to exist in snomed, therefore there is no best match. Regarding the snomed concept Gastrointestinal tract structure (body structure), I don't think this is useful for the concept of bowel continence, since the structure of the GI tract rarely is the issue. <b>(rshephard 2005/07/06 11:33)</b></p> <p>If Once a week (qualifier value) could be combined with Incontinent of feces (finding) or Bowels: occasional accident (finding), that would be a best match. <b>(rshephard 2005/07/06 11:18)</b></p> <p>Bowels: occasional accident (finding) is the closest match available, but it still is not close enough to be a best match, since the MDS concept is very specific to</p>
--	--	---

		<p>incontinence once per week. "Occasional" isn't defined. Regarding the snomed concept Gastrointestinal tract structure (body structure), I don't think this is useful for the concept of bowel continence, since the structure of the GI tract rarely is the issue. <b>(rshephard 2005/07/06 11:03)</b></p> <p>Incontinence of feces (finding) may be the best semantic match. On the other hand, it might be a broader match, since it doesn't address the degree of incontinence, which is the context of the MDS concept. I do not understand the usefulness of this particular anatomy match in the context of this MDS concept. Please note that the MDS manual definitions for H1 (0 through 4) combine the definitions for bladder and bowel continence. I recommend that they be separated for our purposes. <b>(rshephard 2005/07/05 20:51)</b></p> <p>I think the SNOMED concept Gastrointestinal tract structure (body structure) is too much of a stretch, since structural problems are a very rare cause of bowel incontinence. The snomed concept High frequency is too broad to be useful - the MDS concept is specific to 2-3 times per week - I can't conceptualize how that correlates with "high frequency." Incontinent may be a broader match rather than a partial match. Please note that the MDS manual definitions for H1 (0 through 4) combine the definitions for bladder and bowel continence. I recommend that they be separated for our purposes. <b>(rshephard 2005/07/05 20:44)</b></p> <p>I think it is too much of a stretch to consider the SNOMED concept Gastrointestinal tract structure (body structure) to be a partial match. Please note that the MDS manual definitions for H1 (0 through 4) combine the definitions for bladder and bowel continence. I recommend that they be separated for our purposes. For example, under "Properties" for the concept that is the topic here, I recommend that only the definition for complete control of the bowel be included. <b>(rshephard 2005/07/05 20:27)</b></p> <p>The MDS concept Bowel Continence relates to the function of bowel control - I think it is too much of a stretch to consider the SNOMED concept Gastrointestinal tract structure (body structure) to be a partial semantic match. <b>(rshephard 2005/07/05 20:20)</b></p>
--	--	---

Broader Match Term	Broader Match Term Namespace	-----
Finding related to ability to perform personal hygiene activity (finding) Finding of bowel continence (finding) Finding of pattern of urination (finding) Incontinence of feces (finding)	SNOMED CT  SNOMED CT SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Bladder: fully continent (finding) Bladder: occasional accident (finding) Bowels: fully continent (finding) Bowels: occasional accident (finding) Continent (qualifier value) Continent of urine (finding) Continuous (qualifier value) Daily (qualifier value) Frequency per week (qualifier value) Frequent (qualifier value) Gastrointestinal tract structure (body structure) High frequency (qualifier value) Incontinence (finding) Incontinence of feces (finding) Incontinent (qualifier value) NO_SNOMED_BEST_MATCH Once a week (qualifier value) Total urinary incontinence (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT MDS SNOMED CT SNOMED CT	

### [Section H1a.0 \(BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 0\)](#)

a.	<b>BOWEL CONTI-NENCE</b>	Control of bowel movement, with appliance or bowel continence programs, if employed	0
----	--------------------------	---	---

See Section H1a. (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

### [Section H1a.1 \(BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 1\)](#)

a.	<b>BOWEL CONTI-NENCE</b>	Control of bowel movement, with appliance or bowel continence programs, if employed	1
----	--------------------------	---	---

See Section H1a. (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

### [Section H1a.2 \(BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 2\)](#)

a.	<b>BOWEL CONTI-NENCE</b>	Control of bowel movement, with appliance or bowel continence programs, if employed	2
----	--------------------------	---	---

See Section H1a. (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

**Section H1a.3 (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 3)**

a.	<b>BOWEL CONTINENCE</b>	Control of bowel movement, with appliance or bowel continence programs, if employed	3
----	-------------------------	---	---

See Section H1a. (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

**Section H1a.4 (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 4)**

a.	<b>BOWEL CONTINENCE</b>	Control of bowel movement, with appliance or bowel continence programs, if employed	4
----	-------------------------	---	---

See Section H1a. (BOWEL CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

**Section H1b. (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)**

b.	<b>BLADDER CONTINENCE</b>	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed	
----	---------------------------	--	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Continent of urine (finding) Control of micturition normal (finding) Bladder continence assessment (regime/therapy) Urinary incontinence (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>Since the meaning of "continent" and the other response alternatives changes for the two items they apply to (H2a and H2b), you probably need to nest the response alternatives within the items in your database. Thus, you would have "continent", "freq incont", etc. under H2a and then again under H2b. <b>(dmalitz 2005/07/11 20:38)</b></p> <p>"Urinary incontinence (finding)" seems like a good match. But again, there may be confusion between the terms "urinary" and "bladder". <b>(dmalitz 2005/07/08 12:10)</b></p> <p>This is another example of MDS response options (e.g., frequently, occasionally, usually) that don't have a good snomed translation. <b>(dmalitz 2005/07/08 12:08)</b></p> <p>"Continent of urine (finding)" appears to be a good match. But as with the bowel continence item, the match may be confusing since the term refers to urine rather than to the organ (bladder) that's involved. How</p>

		<p>would a user find this term? <b>(dmalitz 2005/07/08 12:04)</b></p> <p>Sorry, my previous comment ("label, not item" was incorrect. What does the "regime/therapy" modifier mean at the end of the "bladder continence assessment" term? We need a finding for this MDS item. <b>(dmalitz 2005/07/08 12:02)</b></p> <p>Label, not item. <b>(dmalitz 2005/07/08 11:59)</b></p> <p>I think that Continent is not a partial match - maybe a broader match - because the MDS concept Usually continent has significant qualifiers. A complicating factor is that the definitions for bowel and bladder are combined. They should be separated into a scale for bladder incontinence and a scale for bowel incontinence - we could do better with matching. <b>(rshephard 2005/07/07 12:11)</b></p> <p>One of the complicating factors is that bowel and bladder scales are combined in the MDS concept. They should be divided into two separate scales - then we could do better with matching. <b>(rshephard 2005/07/07 12:06)</b></p> <p>Abnormal bladder continence (finding) is not a partial match, since this MDS concept relates to complete continence/normal bladder control with no incontinence. I do not think that the snomed concept Urinary bladder structure (body structure) is useful here, since structure is not the focus of this item. <b>(rshephard 2005/07/06 11:51)</b></p> <p>Bladder continence assessment (regime/therapy) would not be the best label for this MDS item it is not the assessment that is the focus, it is the bladder control. Finding of bladder control is a best match. (Continence of Urine is not a match, since the subconcept is Bladder - fully continent). I don't think that Urinary bladder structure (body structure)is useful here, since this really isn't the issue that is being assessed. <b>(rshephard 2005/07/06 11:46)</b></p> <p>The best semantic match is NO SNOMED BEST MATCH. Even stringing these partial matches together does not get us where we need to go. One of the complicating factors is that the definitions for bowel and bladder are combined. They should be separated</p>
--	--	--

		<p>into a scale for bladder incontinence and a scale for bowel incontinence. <b>(rshephard 2005/07/07 11:55)</b></p> <p>The snomed concept Bladder continence assessment (regime/therapy) is not really a partial match - the MDS concept is looking at function and not at assessment. (It is an assessment of function.) The snomed concept Urinary bladder structure (body structure) doesn't seem to be useful here, since structure is not the focus of this item. <b>(rshephard 2005/07/06 12:51)</b></p> <p>The snomed concept Urinary bladder structure (body structure) doesn't seem to be useful here, since function and not structure is not the focus of this item. <b>(rshephard 2005/07/06 12:46)</b></p> <p>Urinary bladder structure is not the focus of this MDS concept - it is function that is the focus. <b>(rshephard 2005/07/06 12:44)</b></p> <p>Urinary bladder structure (body structure) isn't useful here, since structure is not the focus of this item. Urinary incontinence seems to be a broader match, since it isn't specific to the frequency of incontinence. <b>(rshephard 2005/07/06 12:43)</b></p>
<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	-----
Finding of bowel continence (finding) Finding of pattern of urination (finding) Bladder continence assessment (regime/therapy)	SNOMED CT SNOMED CT SNOMED CT	
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Abnormal bladder continence (finding) Bladder: fully continent (finding) Bladder: occasional accident (finding) Continent (qualifier value) Continent of urine (finding) Continuous (qualifier value) Daily (qualifier value) Frequency of incontinence (observable entity) Frequency per week (qualifier value) Frequent (qualifier value) High frequency (qualifier value) Incontinence (finding) Incontinence of feces (finding) Incontinent (qualifier value) Low frequency (qualifier value) NO_SNOMED_BEST_MATCH Once a week (qualifier value) Total urinary incontinence (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT MDS SNOMED CT SNOMED CT	

Urinary bladder structure (body structure)	SNOMED CT	
Urinary incontinence (finding)	SNOMED CT	

### **Section H1b.0 (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 0)**

<b>b.</b>	<b>BLADDER CONTI-NENCE</b>	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed	<b>0</b>
-----------	----------------------------	--	----------

See Section H1b. (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

### **Section H1b.1 (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 1)**

<b>b.</b>	<b>BLADDER CONTI-NENCE</b>	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed	<b>1</b>
-----------	----------------------------	--	----------

See Section H1b. (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

### **Section H1b.2 (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 2)**

<b>b.</b>	<b>BLADDER CONTI-NENCE</b>	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed	<b>2</b>
-----------	----------------------------	--	----------

See Section H1b. (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

### **Section H1b.3 (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 3)**

<b>b.</b>	<b>BLADDER CONTI-NENCE</b>	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed	<b>3</b>
-----------	----------------------------	--	----------

See Section H1b. (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

### **Section H1b.4 (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES = 4)**

<b>b.</b>	<b>BLADDER CONTI-NENCE</b>	Control of urinary bladder function (if dribbles, volume insufficient to soak through underpants), with appliances (e.g., foley) or continence programs, if employed	<b>4</b>
-----------	----------------------------	--	----------

See Section H1b. (BLADDER CONTINENCE w/ code for CONTINENCE SELF-CONTROL CATEGORIES)

## Section H2 (BOWEL ELIMINATION PATTERN)

2.	BOWEL ELIMINATION PATTERN	Bowel elimination pattern regular—at least one movement every three days	a.	Diarrhea	c.
		Constipation	b.	Fecal impaction	d.
				NONE OF ABOVE	e.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Frequency of bowel action (observable entity)	SNOMED CT	

### Section H2a. (Bowel elimination pattern regular – at least one movement every three days)

Bowel elimination pattern regular—at least one movement every three days	a.
--	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Frequent defecation (finding) If pain present, check all sites that apply in last 7 days Not constipated (finding)	SNOMED CT MDS SNOMED CT	Note: I didn't see a "none of the above" response option in your list. <b>(dmalitz 2005/07/08 12:23)</b>  As discussed on the phone, neither alternative matches well. <b>(dmalitz 2005/07/08 12:13)</b>  Frequent defecation (finding) seems to imply more bowel movements that would be considered to be normal, so I don't think it is a best match. In the context of the definitions for the MDS concepts within H2, I interpret Not constipated to also include diarrhea, so it would not be a best match, either. Normal bowel habits is not defined in snomed, but it seems that it might be a best match, as long as there is an RAI manual to define "normal." <b>(rshephard 2005/07/06 13:26)</b>

### Section H2b. (Constipation)

Constipation	b.
--------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Alteration in bowel elimination: constipation (finding) If pain present, check all sites that apply in last 7 days	SNOMED CT MDS	If we use the disorder hierarchy, we can use "Constipation (disorder)", "Diarrheal disorder (disorder)", and "Fecal impaction (disorder)" for the three corresponding MDS items. There doesn't seem to be a match for the normal pattern, though. <b>(dmalitz 2005/07/08 12:20)</b>  A synonym for the snomed concept Alteration in bowel



		elimination: constipation is Intermittent constipation pattern - I don't know what that means, but by my interpretation, I don't think it matches the MDS intent. Constipation is 2 or fewer bowel movements per week or strains more than one out of four times when having a bowel movement. SNOMED has partial matches, such as Constipation (disorder) and all of its subconcepts, but no best match. <b>(rshephard 2005/07/06 13:39)</b>
--	--	---

## Section H2c. (Diarrhea)

Diarrhea	C.
----------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Alteration in bowel elimination: diarrhea (finding) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	<p>If we use the disorder hierarchy, we can use "Constipation (disorder)", "Diarrheal disorder (disorder)", and "Fecal impaction (disorder)" for the three corresponding MDS items. There doesn't seem to be a match for the normal pattern, though. <b>(dmalitz 2005/07/08 12:21)</b></p> <p>The snomed concept Alteration in bowel elimination: diarrhea (finding) does not have any synonyms or subconcepts listed, so it's difficult to know if it's a match. The words are the same between the MDS and snomed, but the MDS definition of diarrhea is specific to FREQUENT and WATERY stools, so it probably isn't a best match - it's probably a broader match. The snomed concept Diarrhea (finding) includes passage of watery stools as a subconcept, but also include severe diarrhea, protracted diarrhea, and neonatal diarrhea, so that looks like a broader match. <b>(rshephard 2005/07/06 15:27)</b></p> <p>The snomed concept Alteration in bowel elimination: diarrhea (finding) does not have any synonyms or subconcepts listed. The words are the same between the MDS and snomed, but the MDS definition of diarrhea is specific to FREQUENT <b>(rshephard 2005/07/06 15:02)</b></p>

## Section H2d. (Fecal impaction)

Fecal impaction

d.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Fecal impaction (disorder) Fecal impaction (morphologic abnormality) If pain present,check all sites that apply inlast 7 days	SNOMED CT SNOMED CT MDS	If we use the disorder hierarchy, we can use "Constipation (disorder)", \n"Diarrheal disorder (disorder)", and \n"Fecal impaction (disorder)" for the three corresponding MDS items. There doesn't seem to be a match for the normal pattern, though.\n(dmalitz 2005/07/08 12:21)
Partial Match Term	Partial Match Term Namespace	-----
Fecal impaction of colon (disorder) Impaction of colon (disorder)	SNOMED CT SNOMED CT	

## Section H2e. (NONE OF ABOVE)

NONE OF ABOVE

e.

NO MATCHES FOUND

## Section H3 (APPLIANCES AND PROGRAMS)

3. APPLIANCES AND PROGRAMS	Any scheduled toileting plan	a.	Did not use toilet room/ commode/urinal	f.
	Bladder retraining program	b.	Pads/briefs used	g.
	External (condom) catheter	c.	Enemas/irrigation	h.
	Indwelling catheter	d.	Ostomy present	i.
	Intermittent catheter	e.	NONE OF ABOVE	j.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Appliance (physical object) Urinary bladder training AND/OR rehabilitation procedure (regime/therapy)	SNOMED CT  SNOMED CT	Label, not item. (dmalitz 2005/07/08 12:22)  This MDS concept - Appliances and Programs - is a label that doesn't require a response. It is the items a-j that are listed under that label that require a response and therefore a definition. I would say that Appliance (physical object) is a broader match, since the subconcepts include a couple of the H3 items, but they also include many additional items not pertinent to this item. Biomedical device (physical object) includes a few more than Appliance (physical object) includes, but it also has many that do not apply. (rshephard 2005/07/06 15:55)

### Section H3a. (Any scheduled toileting plan)

Any scheduled toileting plan

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	I'll defer to Rena on this one. (dmalitz 2005/06/02 17:48)  Toileting regimes includes incontinence care, which is not a part of the MDS concept. (rshephard 2005/05/28 14:36)
Partial Match Term	Partial Match Term Namespace	-----
Planned voiding (regime/therapy) Prompted voiding (regime/therapy) Scheduled (qualifier value) Toilet (procedure) Toileting regimes (regime/therapy) Urinary habit training (regime/therapy)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section H3b. (Bladder retraining program)

Bladder retraining program

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Bladder retraining (regime/therapy) Planned voiding (regime/therapy) Urinary habit training (regime/therapy) If pain present,check all sites that apply inlast 7 days	SNOMED CT SNOMED CT SNOMED CT  MDS	Regarding "help! the manual says..." These are 2 different concepts for H3a and H3b. For bladder retraining, residents are encouraged to void on a schedule to retrain an unstable bladder to hold the urine until it's time to void. With a toileting plan, staff is "trained" to the incontinent resident's voiding schedule to get the resident toileted in time to avoid incontinence. (rshephard 2005/06/14 10:58)  I'll defer to Rena on this one. (dmalitz 2005/06/02 17:48)  Planned voiding, habit training, and prompted voiding are scheduled toileting plans. Bladder retraining is a different concept - this is actual retraining of the bladder. (rshephard 2005/05/28 14:39)
Partial Match Term	Partial Match Term Namespace	-----
Prompted voiding (regime/therapy)	SNOMED CT	

### Section H3c. (External (condom) catheter)

External (condom) catheter

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Urinary incontinence appliance (physical object)	SNOMED CT	Again, I'll defer to Rena! <b>(dmalitz 2005/07/08 12:24)</b>  I believe that Incontinence sheath is a condom catheter and is a best match. <b>(rshephard 2005/07/06 16:01)</b>

### Section H3d. (Indwelling catheter)

Indwelling catheter

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Urinary catheter, device (physical object)	SNOMED CT	I'll defer to Rena. <b>(dmalitz 2005/07/08 12:25)</b>  Urethral catheter, device (physical object) and Suprapubic catheter (physical object) combined would be a best match. <b>(rshephard 2005/07/06 16:09)</b>  Under Properties here it says: Item_guide_OASIS_Dec_02 A urinary collection appliance worn over the penis. This is an incorrect definition for Indwelling catheter AND OASIS does not apply here. <b>(rshephard 2005/07/06 16:05)</b>  Urinary catheter, device (physical object) is a very close match, but the reason I am not agreeing that it is a best match is because one of the subconcepts is urethral catheter, while the MDS concept refers only to urethral and supra-pubic catheters. <b>(rshephard 2005/07/06 16:04)</b>

### Section H3e. (Intermittent catheter)

Intermittent catheter

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Intermittent urethral catheterization (procedure)	SNOMED CT	I'll defer to Rena. <b>(dmalitz 2005/07/08 12:26)</b>  Agreed - it is a procedure. However, the only subconcept is intermittent clean self-catheterization, which is only a partial match to the MDS concept. Is it assumed that the concept includes a subconcept for the procedure performed by staff? <b>(rshephard 2005/07/06 16:14)</b>

### Section H3f. (Did not use toilet room/commode/urinal)

Did not use toilet room/  
commode/urinal

f.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Does not use toilet (finding)	SNOMED CT	"Does not use toilet" misses the reference to bedpan use, so is a partial match. <b>(dmalitz 2005/07/08 12:28)</b>

### Section H3g. (Pads/briefs used)

Pads/briefs used

g.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Diaper, device (physical object)	SNOMED CT	Diaper is partial match, but misses use of pads, for example, which can be worn or on bed or chair (see manual). <b>(dmalitz 2005/07/08 12:30)</b>

### Section H3h. (Enemas/irrigation)

Enemas/irrigation

h.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Giving patient an enema (procedure) Irrigation (procedure)	SNOMED CT SNOMED CT	Irrigation covers too many procedures, although not ostomy irrigation that's in MDS definition. Snomed doesn't seem to match the MDS item exactly. <b>(dmalitz 2005/07/08 14:34)</b>  Irrigation of bowel (procedure) and Giving patient an enema (procedure) would be a best match. <b>(rshephard 2005/07/06 16:25)</b>

### Section H3i. (Ostomy present)

Ostomy present

i.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Ostomy appliance, device (physical object)	SNOMED CT	

### Section H3j. (NONE OF ABOVE)

NONE OF ABOVE

j.

NO MATCHES ATTEMPTED

#### Section H4 (CHANGE IN URINARY CONTINENCE)

4.	CHANGE IN URINARY CONTINENCE	Resident's urinary continence has changed as compared to status of 90 days ago (or since last assessment if less than 90 days)	
		0. No change                      1. Improved                      2. Deteriorated	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Deterioration of status (qualifier value) Improvement of status (qualifier value) No status change (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	I think these three responses should be "urinary incont-no change", "urinary incont-improved" and "urinary incont-deteriorated". I'm guessing that there's no snomed match for these three concepts. (dmalitz 2005/07/11 20:41)  Is there a reason to have to tie "deteriorated" to urinary continence? (rshephard 2005/07/06 17:56)
Broader Match Term	Broader Match Term Namespace	-----
Bladder continence assessment (regime/therapy)	SNOMED CT	

#### Section H4.0 (No change)

0. No change

See Section H4 (CHANGE IN URINARY CONTINENCE)

#### Section H4.1 (Improved)

1. Improved

See Section H4 (CHANGE IN URINARY CONTINENCE)

#### Section H4.2 (Deteriorated)

2. Deteriorated

See Section H4 (CHANGE IN URINARY CONTINENCE)

#### Section I (DISEASE DIAGNOSES)

##### SECTION I. DISEASE DIAGNOSES

Check only those diseases that have a relationship to current ADL status, cognitive status, mood and behavior status, medical treatments, nursing monitoring, or risk of death. (Do not list inactive diagnoses)			
1.	DISEASES	(If none apply, CHECK the NONE OF ABOVE box)	
	ENDOCRINE/METABOLIC/ NUTRITIONAL	Hemiplegia/Hemiparesis Multiple sclerosis	v. w.

	Diabetes mellitus	a.	Paraplegia	x.
	Hyperthyroidism	b.	Parkinson's disease	y.
	Hypothyroidism	c.	Quadriplegia	z.
	<b>HEART/CIRCULATION</b>		Seizure disorder	aa.
	Arteriosclerotic heart disease (ASHD)	d.	Transient ischemic attack (TIA)	bb.
	Cardiac dysrhythmias	e.	Traumatic brain injury	cc.
	Congestive heart failure	f.	<b>PSYCHIATRIC/MOOD</b>	
	Deep vein thrombosis	g.	Anxiety disorder	dd.
	Hypertension	h.	Depression	ee.
	Hypotension	i.	Manic depression (bipolar disease)	ff.
	Peripheral vascular disease	j.	Schizophrenia	gg.
	Other cardiovascular disease	k.	<b>PULMONARY</b>	
	<b>MUSCULOSKELETAL</b>		Asthma	hh.
	Arthritis	l.	Emphysema/COPD	ii.
	Hip fracture	m.	<b>SENSORY</b>	
	Missing limb (e.g., amputation)	n.	Cataracts	jj.
	Osteoporosis	o.	Diabetic retinopathy	kk.
	Pathological bone fracture	p.	Glaucoma	ll.
	<b>NEUROLOGICAL</b>		Macular degeneration	mm.
	Alzheimer's disease	q.	<b>OTHER</b>	
	Aphasia	r.	Allergies	nn.
	Cerebral palsy	s.	Anemia	oo.
	Cerebrovascular accident (stroke)	t.	Cancer	pp.
	Dementia other than Alzheimer's disease	u.	Renal failure	qq.
			NONE OF ABOVE	rr.
2.	<b>INFECTIONS</b> (If none apply, CHECK the NONE OF ABOVE box)			
	Antibiotic resistant infection (e.g., Methicillin resistant staph)	a.	Septicemia	g.
	Clostridium difficile (c. diff.)	b.	Sexually transmitted diseases	h.
	Conjunctivitis	c.	Tuberculosis	i.
	HIV infection	d.	Urinary tract infection in last 30 days	j.
	Pneumonia	e.	Viral hepatitis	k.
	Respiratory infection	f.	Wound infection	l.
			NONE OF ABOVE	m.
3.	<b>OTHER CURRENT OR MORE DETAILED DIAGNOSES AND ICD-9 CODES</b>	a.		
		b.		
		c.		
		d.		
		e.		

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Disease (disorder)	SNOMED CT	I'm not sure how Macular degeneration (senile) of retina, unspecified [362.50] [ICD-9-CM] ended up here, but this is not where it goes. This MDS concept

		is a catch-all label to describe in general terms what is in the section, but it also has some significant limiting parameters, such as the requirement for a physician diagnosis and the instruction to code only diseases or infections which have a relationship to current status. So, Disease (disorder) [SNOMED CT] may be a best match, but it does not take into account those limiting factors. (rshephard 2005/08/10 11:53)
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Macular degeneration (senile) of retina, unspecified [362.50]	ICD-9-CM	

## Section I1 (DISEASES)

Check only those diseases that have a relationship to current ADL status, cognitive status, mood and behavior status, medical treatments, nursing monitoring, or risk of death. (Do not list inactive diagnoses)				
1.	DISEASES	(If none apply, CHECK the NONE OF ABOVE box)		
	ENDOCRINE/METABOLIC/ NUTRITIONAL		Hemiplegia/Hemiparesis	v.
			Multiple sclerosis	w.
	Diabetes mellitus	a.	Paraplegia	x.
	Hyperthyroidism	b.	Parkinson's disease	y.
	Hypothyroidism	c.	Quadriplegia	z.
	HEART/CIRCULATION		Seizure disorder	aa.
	Arteriosclerotic heart disease (ASHD)	d.	Transient ischemic attack (TIA)	bb.
	Cardiac dysrhythmias	e.	Traumatic brain injury	cc.
	Congestive heart failure	f.	PSYCHIATRIC/MOOD	
	Deep vein thrombosis	g.	Anxiety disorder	dd.
	Hypertension	h.	Depression	ee.
	Hypotension	i.	Manic depression (bipolar disease)	ff.
	Peripheral vascular disease	j.	Schizophrenia	gg.
	Other cardiovascular disease	k.	PULMONARY	
	MUSCULOSKELETAL		Asthma	hh.
	Arthritis	l.	Emphysema/COPD	ii.
	Hip fracture	m.	SENSORY	
	Missing limb (e.g., amputation)	n.	Cataracts	jj.
	Osteoporosis	o.	Diabetic retinopathy	kk.
	Pathological bone fracture	p.	Glaucoma	ll.
	NEUROLOGICAL		Macular degeneration	mm.
	Alzheimer's disease	q.	OTHER	
	Aphasia	r.	Allergies	nn.
	Cerebral palsy	s.	Anemia	oo.
	Cerebrovascular accident (stroke)	t.	Cancer	pp.
			Renal failure	qq.
	Dementia other than Alzheimer's disease	u.	NONE OF ABOVE	rr.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
------------------------	----------------------------------	-------------------------------------



Disease (disorder)	SNOMED CT	This MDS concept is a catch-all label to describe in general terms what is in the section, but it also has some significant limiting parameters, such as the requirement for a physician diagnosis and the instruction to code only diseases or infections which have a relationship to current status. So, Disease (disorder) [SNOMED CT] may be a best match, but it does not take into account those limiting factors. I agree that DISEASES AND INJURIES [001-999.99] [ICD-9-CM] is too broad to be of use. <b>(rshephard 2005/08/10 11:58)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
DISEASES AND INJURIES [001-999.99]	ICD-9-CM	

### Section I1a. (*Diabetes mellitus*)

ENDOCRINE/METABOLIC/ NUTRITIONAL	
Diabetes mellitus	a.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Diabetes mellitus (disorder) Diabetes mellitus [250]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>  Yea! An easy one! <b>(rshephard 2005/05/28 14:40)</b>

### Section I1b. (*Hyperthyroidism*)

Hyperthyroidism	b.
-----------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Hyperthyroidism (disorder) Thyrotoxicosis with or without goiter [242]	SNOMED CT ICD-9-CM	My understanding is that hyperthyroidism and thyrotoxicosis are not synonyms. Thyrotoxicosis occurs after hyperthyroidism with it's overproduction of thyroxine occurs over a sustained period of time. <b>(rshephard 2005/08/10 12:22)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1c. (Hypothyroidism)

Hypothyroidism

c.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Hypothyroidism (disorder) Unspecified hypothyroidism [244.9]	SNOMED CT ICD-9-CM	Disregard my previous comment...I didn't see 244.9. <b>(dmalitz 2005/08/11 12:02)</b>  Is there no ICD9 match for this? <b>(dmalitz 2005/08/11 12:01)</b>

### Section I1d. (Arteriosclerotic heart disease (ASHD))

Arteriosclerotic heart disease  
(ASHD)

d.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Coronary arteriosclerosis (disorder) Coronary atherosclerosis [414.0]	SNOMED CT ICD-9-CM	Atherosclerosis is a type of arteriosclerosis involving cholesterol deposits and triglycerides (Taber's) and therefore is not synonymous with arteriosclerosis and not a best match. It is a partial match. Coronary arteriosclerosis is a best match, except that the limitations of the requirement for a physician diagnosis and that they have relationship to current status are not addressed. <b>(rshephard 2005/08/10 14:05)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1e. (Cardiac dysrhythmias)

Cardiac dysrhythmias

e.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Cardiac dysrhythmias [427] Conduction disorder of the heart (disorder)	ICD-9-CM SNOMED CT	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

## Section I1f. (Congestive heart failure)

Congestive heart failure

f.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Congestive heart failure (disorder) Congestive heart failure, unspecified [428.0]	SNOMED CT ICD-9-CM	<p>Here's a general question. 428.9 is "heart failure, unspecified". Is a coder supposed to select 428.9 only if the heart failure is clearly not congestive? In other words, if we do not include 428.9 in our mapping, could we be missing cases of congestive heart failure. We should think about this issue not only with regard to how ICD9 is SUPPOSED to be used, but how it's ACTUALLY used. (<b>dmalitz 2005/08/11 12:10</b>)</p> <p>I agree this should be omitted from the review list. (<b>dmalitz 2005/06/02 17:49</b>)</p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. (<b>rshephard 2005/05/28 14:42</b>)</p>

## Section I1g. (Deep vein thrombosis)

Deep vein thrombosis

g.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Deep venous thrombosis (disorder) Venous embolism and thrombosis of deep vessels of lower extremity [453.4]	SNOMED CT ICD-9-CM	<p>Thrombosis and embolism are two different things. This ICD-9 code Venous embolism and thrombosis of deep vessels of lower extremity [453.4] [ICD-9-CM] combines the two. It is not a best match. It is a broader match. (<b>rshephard 2005/08/10 14:15</b>)</p> <p>I agree this should be omitted from the review list. (<b>dmalitz 2005/06/02 17:49</b>)</p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. (<b>rshephard 2005/05/28 14:42</b>)</p>

### Section I1h. (Hypertension)

Hypertension

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Hypertension [997.91] Hypertensive disorder, systemic arterial (disorder)	ICD-9-CM SNOMED CT	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1i. (Hypotension)

Hypotension

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Hypotension [458] Low blood pressure (disorder)	ICD-9-CM SNOMED CT	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1j. (Peripheral vascular disease)

Peripheral vascular disease

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Other peripheral vascular disease [443] Peripheral vascular disease (disorder) Peripheral vascular disease, unspecified [443.9]	ICD-9-CM SNOMED CT ICD-9-CM	Lower limb ischemia (disorder) is a partial match. Venous insufficiency of the leg (disorder) would be a partial match. Diabetic peripheral angiopathy (disorder) would be a partial match. All three together might be a best match - although the limitations of the requirement for a physician diagnosis and that they have relationship to current status are not addressed. The ICD-9 codes also do not specify lower extremities. <b>(rshephard 2005/08/10 14:37)</b>  Since the SNOMED concept includes upper extremities, it actually isn't a best match. <b>(rshephard 2005/08/10 14:21)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an

		item that drives or requires a response. (rshephard 2005/05/28 14:42)
--	--	---

### Section I1k. (Other cardiovascular disease)

Other cardiovascular disease k.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Cardiovascular disease, unspecified [429.2]	ICD-9-CM	<p>Cardiovascular disease, unspecified [429.2] [ICD-9-CM] doesn't work as a best match because the "unspecified" cardiovascular diagnoses are the ones not otherwise encompassed by ICD-9, whereas I1k includes anything not encompassed in I1d-j. These are different sets of diagnoses. (rshephard 2005/08/11 17:37)</p> <p>Disorder of cardiovascular system (disorder) [SNOMED CT] is too broad to be of use, since I1k includes cardiovascular disease not encompassed in I1d-j. (rshephard 2005/08/11 17:35)</p> <p>I agree this should be omitted from the review list. (dmalitz 2005/06/02 17:49)</p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. (rshephard 2005/05/28 14:42)</p> <p>Since this item refers to CV diseases other than the ones listed I1d-j on the MDS, I agree that this is a gap. (rshephard 2005/05/14 20:51)</p>
Broader Match Term	Broader Match Term Namespace	-----
Disorder of cardiovascular system (disorder)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Heart disease (disorder)	SNOMED CT	

### Section I1l. (Arthritis)

MUSCULOSKELETAL [REDACTED]  
 Arthritis l.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Arthritis (disorder) Personal history of arthritis [V13.4]	SNOMED CT ICD-9-CM	Arthritis (disorder) [SNOMED CT] is too broad - the MDS concept includes only DJD, OA, and RA. I hesitate to use Personal history of arthritis [V13.4] [ICD-9-CM] even as a partial match, since "personal

		<p>history" seems to imply that the problem could have existed in the remote past whereas the MDS item requires that the item be coded in Section I only if it pertains to the resident's current status.  ARTHROPATHIES AND RELATED DISORDERS [710-719.99] [ICD-9-CM] is also too broad.  <b>(rshephard 2005/08/11 17:49)</b></p> <p>I agree this should be omitted from the review list.  <b>(dmalitz 2005/06/02 17:49)</b></p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p>
<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	-----
ARTHROPATHIES AND RELATED DISORDERS [710-719.99] Unspecified inflammatory polyarthropathy [714.9] Unspecified polyarthropathy or polyarthritis, site unspecified [716.50]	ICD-9-CM ICD-9-CM ICD-9-CM	
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Osteoarthritis (disorder) Rheumatoid arthritis (disorder)	SNOMED CT SNOMED CT	

### Section I1m. (*Hip fracture*)

Hip fracture

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Fracture of neck of femur [820] Fracture of proximal end of femur (disorder)	ICD-9-CM SNOMED CT	<p>The neck of the femur is one location that a hip fracture may occur, but Fracture of neck of femur [820] [ICD-9-CM] does not take into account fractures of the trochanter and subcapital fractures. It would be a partial match. <b>(rshephard 2005/08/11 18:16)</b></p> <p>I agree this should be omitted from the review list.  <b>(dmalitz 2005/06/02 17:49)</b></p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Fracture of unspecified intracapsular section of neck of femur, closed [820.00]	ICD-9-CM	

### Section I1n. (Missing limb (e.g., amputation))

Missing limb (e.g., amputation)

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Amputation, not otherwise specified [84.91]	ICD-9-CM	<p>I don't think Amputation, not otherwise specified [84.91] [ICD-9-CM] works at all, because, looking at the list of amputations that are "specified" in other ICD-9 codes, many of those would be included in the MDS concept I1n and would not be included in ICD-9-CM 84.91. In answer to the Apelon Q: The MDS intent does not limit the cause of the missing limb - it includes "loss of any upper or lower extremity." (<b>rshephard 2005/08/11 18:28</b>)</p> <p>Any matches must exclude amputation of digits (see MDS manual). (<b>dmalitz 2005/08/11 14:50</b>)</p> <p>I agree this should be omitted from the review list. (<b>dmalitz 2005/06/02 17:49</b>)</p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. (<b>rshephard 2005/05/28 14:42</b>)</p>
Partial Match Term	Partial Match Term Namespace	-----
Amputation of upper limb [84.0] Limb structure (body structure) Old amputee NOS (disorder) Status post amputation of lower limb, unspecified level [V49.70] Traumatic amputation (disorder) Traumatic amputation of limb (disorder)	ICD-9-CM SNOMED CT SNOMED CT  ICD-9-CM SNOMED CT SNOMED CT	

### Section I1o. (Osteoporosis)

Osteoporosis

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Osteoporosis (disorder) Osteoporosis [733.0]	SNOMED CT ICD-9-CM	<p>I agree this should be omitted from the review list. (<b>dmalitz 2005/06/02 17:49</b>)</p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. (<b>rshephard 2005/05/28 14:42</b>)</p>

### Section I1p. (Pathological bone fracture)

Pathological bone fracture

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Pathologic fracture [733.1] Pathological fracture (disorder)	ICD-9-CM SNOMED CT	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )

### Section I1q. (Alzheimer's disease)

NEUROLOGICAL   
Alzheimer's disease

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Alzheimer's disease (disorder) Alzheimer's disease [331.0]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )

### Section I1r. (Aphasia)

Aphasia

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Aphasia (finding) Aphasia [784.3]	SNOMED CT ICD-9-CM	Per group review, aphasia finding seems like a good match, but MDS requires a diagnosis by a physician. ( <b>jevans 2005/06/16 11:25</b> )  I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  I think the finding term looks like a best match. Not sure what the "on examination..." term means. ( <b>dmalitz 2005/06/02 17:51</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )
Broader Match Term	Broader Match Term Namespace	-----
Speech and language deficits as late effect of cerebrovascular disease [438.1]	ICD-9-CM	
Partial Match Term	Partial Match Term Namespace	-----



Aphasia as late effect of cerebrovascular disease [438.11] On examination - aphasia (context-dependent category) Speech and language deficit, unspecified, as late effect of cerebrovascular disease [438.10]	ICD-9-CM SNOMED CT  ICD-9-CM	
---	---------------------------------------	--

### Section I1s. (Cerebral palsy)

Cerebral palsy	s.
----------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Cerebral palsy (disorder) Infantile cerebral palsy [343]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1t. (Cerebrovascular accident (stroke))

Cerebrovascular accident (stroke)	t.
-----------------------------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Cerebrovascular accident (disorder) Unspecified intracranial hemorrhage [432.9]	SNOMED CT ICD-9-CM	Unspecified intracranial hemorrhage [432.9] [ICD-9-CM] is one cause of CVA - it is a partial match, not a best match. <b>(rshephard 2005/08/11 19:03)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
Partial Match Term	Partial Match Term Namespace	-----
Cerebral artery occlusion, unspecified, without mention of cerebral infarction [434.90]	ICD-9-CM	

### Section I1u. (Dementia other than Alzheimer's disease)

Dementia other than Alzheimer's disease	u.
---	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Dementia (disorder)	SNOMED CT	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>

		This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Chronic brain syndrome (disorder) Dementias [290] Huntington's chorea (disorder) Jakob-Creutzfeldt disease (disorder) Multi-infarct dementia (disorder) Other frontotemporal dementia [331.19]	SNOMED CT ICD-9-CM SNOMED CT SNOMED CT SNOMED CT ICD-9-CM	

### Section I1v. (Hemiplegia/Hemiparesis)

Hemiplegia/Hemiparesis

v.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Hemiplegia (disorder) Hemiplegia and hemiparesis [342]	SNOMED CT ICD-9-CM	<p>Regarding Hemiplegia and hemiparesis [342] [ICD-9-CM]: The following makes me think this is not a match: "Note: This category is to be used when hemiplegia (complete) (incomplete) is reported without further specification, or is stated to be old or long-standing but of unspecified cause. The category is also for use in multiple coding to identify these types of hemiplegia resulting from any cause. \nSOS Excludes: congenital (343.1); infantile NOS (343.4); hemiplegia due to late effect of cerebrovascular accident (438.20-438.22)." \n <b>(rshephard 2005/08/11 19:09)</b></p> <p>According to Tabers Cyclopedic Medical Dictionary, hemiplegia and hemiparesis are synonyms, so that would probably be the reason the MDS combines them. In SNOMED, hemiparesis is a subconcept of hemiplegia. As it turns out, then, there is no best match. <b>(rshephard 2005/06/14 11:39)</b></p> <p>Two best matches. <b>(dmalitz 2005/06/02 17:52)</b> I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b></p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Hemiparesis (disorder)	SNOMED CT	

### Section I1w. (Multiple sclerosis)

Multiple sclerosis

☐w.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
MS Multiple sclerosis (disorder) Multiple sclerosis [340]	MDS SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )

### Section I1x. (Paraplegia)

Paraplegia

☐x.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Paraplegia (disorder) Paraplegia [344.1]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )

### Section I1y. (Parkinson's disease)

Parkinson's disease

☐y.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Parkinson's disease (disorder) Parkinson's disease [332]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )  Could the superconcept for this term be used instead: Parkinsonism (disorder) Code: DA-21010 Id: 32798 ( <b>dmalitz 2005/05/12 16:46</b> )

### Section I1z. (Quadriplegia)

Quadriplegia

☐z.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Quadriplegia (disorder) Quadriplegia, unspecified [344.00]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )

		This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
--	--	--

### Section I1aa. (Seizure disorder)

Seizure disorder

aa.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Epilepsy [345] Seizure disorder (disorder)	ICD-9-CM SNOMED CT	Epilepsy is one cause of a seizure disorder - it is not a best match; it is a partial match. <b>(rshephard 2005/08/11 18:41)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
Broader Match Term	Broader Match Term Namespace	-----
DISEASES OF THE NERVOUS SYSTEM AND SENSE ORGANS [320-389.99]	ICD-9-CM	
Partial Match Term	Partial Match Term Namespace	-----
Epilepsy, unspecified [345.9] Generalized convulsive epilepsy [345.1]	ICD-9-CM ICD-9-CM	

### Section I1bb. (Transient ischemic attack (TIA))

Transient ischemic attack (TIA)

bb.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Transient cerebral ischemia [435] Transient ischemic attack (disorder)	ICD-9-CM SNOMED CT	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1cc. (Traumatic brain injury)

Traumatic brain injury

cc.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
FRACTURE OF SKULL [800-804.99] Intracranial injury of other and unspecified nature [854] INTRACRANIAL INJURY, EXCLUDING THOSE WITH SKULL FRACTURE [850-	ICD-9-CM ICD-9-CM	Concussion and fracture of skull are two types of injuries - they are partial matches, not best matches. The

854.99] Other and unspecified intracranial hemorrhage following injury [853] Subarachnoid, subdural, and extradural hemorrhage, following injury [852] Traumatic brain injury (disorder) Concussion [850]	ICD-9-CM ICD-9-CM ICD-9-CM SNOMED CT ICD-9-CM	exclusion in INTRACRANIAL INJURY, EXCLUDING THOSE WITH SKULL FRACTURE [850-854.99] [ICD-9-CM] makes it not a best match. These two: Intracranial injury of other and unspecified nature [854] [ICD-9-CM] and Other and unspecified intracranial hemorrhage following injury [853] [ICD-9-CM] exclude all of the "specified" definitions for brain injuries in ICD and therefore are partial matches, not best matches. Subarachnoid, subdural, and extradural hemorrhage, following injury [852] [ICD-9-CM] does not encompass all possible type of TBI and therefore is a partial match, not a best match. (rshephard 2005/08/11 18:48)  I agree this should be omitted from the review list. (dmalitz 2005/06/02 17:49)  This is an instruction on the form as opposed to an item that drives or requires a response. (rshephard 2005/05/28 14:42)
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Closed fracture of vault of skull without mention of intracranial injury [800.0] Intracranial injury of other and unspecified nature [854]	ICD-9-CM ICD-9-CM	

## Section I1dd. (Anxiety disorder)

PSYCHIATRIC/MOOD

Anxiety disorder

dd.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Anxiety disorder (disorder) Anxiety states [300.0]	SNOMED CT ICD-9-CM	Since Anxiety states [300.0] [ICD-9-CM] Excludes: anxiety in: {acute stress reaction (308.0); transient adjustment reaction (309.24)}; neurasthenia (300.5); psychophysiological disorders (306.0-306.9); separation anxiety (309.21), it is not a best match, it is a partial match. It might be a best match if all of the anxiety-related ICD codes could be used. (rshephard 2005/08/11 19:40)  I agree this should be omitted from the review list. (dmalitz 2005/06/02 17:49)

		This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
--	--	--

### Section I1ee. (Depression)

Depression ee.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Depressive disorder (disorder) Depressive disorder, not elsewhere classified [311]	SNOMED CT ICD-9-CM	<p>test <b>(bconnolly 2005/10/28 15:03)</b></p> <p>I think we should review this again <b>(bconnolly 2005/10/28 15:01)</b></p> <p>Depressive disorder, not elsewhere classified [311] [ICD-9-CM] Excludes all of the following and therefore is only a partial match: acute reaction to major stress with depressive symptoms (308.0); affective personality disorder (301.10-301.13); affective psychoses (296.0-296.9); brief depressive reaction (309.0); depressive states associated with stressful events (309.0-309.1); disturbance of emotions specific to childhood and adolescence, with misery and unhappiness (313.1); mixed adjustment reaction with depressive symptoms (309.4); neurotic depression (300.4); prolonged depressive adjustment reaction (309.1); psychogenic depressive psychosis (298.0). It seems that a best match in ICD would have to include all depression-related codes. <b>(rshephard 2005/08/11 19:43)</b></p> <p>I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b></p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p> <p>Agreed - the MDS is asking for diagnosis here, not symptoms. <b>(rshephard 2005/05/15 12:34)</b></p>

### Section I1ff. (Manic depression (bipolar disease))

Manic depression (bipolar disease) ff.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Bipolar disorder (disorder)	SNOMED CT	Bipolar disorder, unspecified [296.80] [ICD-9-CM] and

Bipolar disorder, unspecified [296.80] Other and unspecified bipolar disorders [296.8]	ICD-9-CM ICD-9-CM	Other and unspecified bipolar disorders [296.8] [ICD-9-CM] exclude all of the specified bipolar codes - they need to be included. These are partial matches, not best matches. Episodic mood disorders [296] [ICD-9-CM] seems like a best match to me.\n ( <b>rshephard 2005/08/11 19:47</b> )  I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )
<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	-----
Episodic mood disorders [296]	ICD-9-CM	

### [Section I1gg. \(Schizophrenia\)](#)

Schizophrenia gg.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Schizophrenia (disorder) Schizophrenic disorders [295]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. ( <b>dmalitz 2005/06/02 17:49</b> )  This is an instruction on the form as opposed to an item that drives or requires a response. ( <b>rshephard 2005/05/28 14:42</b> )
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Unspecified schizophrenia [295.9]	ICD-9-CM	

### [Section I1hh. \(Asthma\)](#)

PULMONARY  
Asthma   hh.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Asthma (disorder) Asthma [493]	SNOMED CT ICD-9-CM	

### [Section I1ii. \(Emphysema/COPD\)](#)

Emphysema/COPD ii.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Chronic obstructive lung disease (disorder) Emphysema [492]	SNOMED CT ICD-9-CM	

Broader Match Term	Broader Match Term Namespace	-----
CHRONIC OBSTRUCTIVE PULMONARY DISEASE AND ALLIED CONDITIONS [490-496.99] Disorder of lung (disorder)	ICD-9-CM SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Pulmonary emphysema (disorder)	SNOMED CT	

### Section I1jj. (Cataracts)

SENSORY

Cataracts

jj.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Cataract (disorder) Cataract [366]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>  Section I of the MDS refers specifically to physician documented diagnoses. Therefore, an observation of a cataract would not be sufficient for coding this item, and "Cataract finding" in SNOMED would not be a match. <b>(rshephard 2005/05/15 12:49)</b>
Partial Match Term	Partial Match Term Namespace	-----
Cataract finding (finding)	SNOMED CT	

### Section I1kk. (Diabetic retinopathy)

Diabetic retinopathy

kk.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Diabetic retinopathy (disorder) Diabetic retinopathy [362.0]	SNOMED CT ICD-9-CM	I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
Partial Match Term	Partial Match Term Namespace	-----
Diabetic retinopathy (disorder)	SNOMED CT	

### Section I1ll. (Glaucoma)

Glaucoma

ll.



Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Glaucoma (disorder) Glaucoma [365]	SNOMED CT ICD-9-CM	Glaucoma [365] [ICD-9-CM] Excludes: blind hypertensive eye [absolute glaucoma] (360.42); congenital glaucoma (743.20-743.22) and therefore is not a best match. <b>(rshephard 2005/08/11 19:55)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

### Section I1mm. (Macular degeneration)

Macular degeneration

mm.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Macular degeneration (disorder) Macular degeneration (senile) of retina, unspecified [362.50]	SNOMED CT ICD-9-CM	The "unspecified" ICD excludes the "specified" codes which should be included. <b>(rshephard 2005/08/11 19:58)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
Broader Match Term	Broader Match Term Namespace	-----
Degeneration of macula and posterior pole of retina [362.5]	ICD-9-CM	

### Section I1nn. (Allergies)

OTHER

Allergies

nn.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Allergy (disorder) Allergy, unspecified, not elsewhere classified [995.3]	SNOMED CT ICD-9-CM	Re: Allergy, unspecified, not elsewhere classified [995.3] [ICD-9-CM] - the MDS concept includes allergies that ARE specified in ICD, so the unspecified ones are a partial match, not a best match. <b>(rshephard 2005/08/11 19:20)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>

		Is there more allergy capture somewhere in MDS? E.g. to distinguish food vs. drug, vs. latex? (?)  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Allergic arthritis [716.2] Allergic gastroenteritis and colitis [558.3] Allergic purpura [287.0] Allergic rhinitis [477] Allergy to eggs [V15.03] Allergy to insects [V15.06] Personal history of allergy, other than to medicinal agents, presenting hazards to health [V15.0]	ICD-9-CM ICD-9-CM ICD-9-CM ICD-9-CM ICD-9-CM ICD-9-CM ICD-9-CM	

## Section I1oo. (Anemia)

Anemia

oo.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Anemia (disorder) Other and unspecified anemias [285]	SNOMED CT ICD-9-CM	Other and unspecified anemias [285] [ICD-9-CM] is a partial match - there are many "specified" anemias that must be included also. <b>(rshephard 2005/08/11 19:23)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b>

## Section I1pp. (Cancer)

Cancer

pp.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES [190-199.99] Malignant neoplastic disease (disorder) Neoplastic disease (disorder)	ICD-9-CM SNOMED CT SNOMED CT	MALIGNANT NEOPLASM OF OTHER AND UNSPECIFIED SITES [190-199.99] [ICD-9-CM] is not a best match because the "specified" neoplasms must be included also. <b>(rshephard 2005/08/11 19:25)</b>  I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b>  This is an instruction on the form as opposed to an

		<p>item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p> <p>Non-malignant tumors should not be included. See Malignant neoplasm, primary (morphologic abnormality) (Code: M-80003 Id: 86049 Namespace: SNOMED CT) as a match (see synonym). <b>(rshephard 2005/05/15 12:18)</b></p> <p>The first subconcept for Neoplastic disease is "Benign neoplastic disease (disorder)". Does this mean that non-malignant growths are included? Are these cancers? If not, "Neoplastic disease" won't work. <b>(dmalitz 2005/05/12 17:22)</b></p>
--	--	--

### Section I1qq. (Renal failure)

Renal failure

qq.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Renal failure syndrome (disorder) Renal failure, unspecified [586]	SNOMED CT ICD-9-CM	<p>I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b></p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p> <p>Regarding the need for a physician diagnosis: The rules for coding the MDS will not change, although the words on the MDS (or words underlying the words on the MDS) would change. <b>(rshephard 2005/05/15 12:21)</b></p> <p>The MDS manual specifically (and repeatedly!) states that all of the Section I1 items must be based upon physician's diagnoses. How would we insure that a SNOMED term reflected a formal diagnosis rather than a less formal observation? <b>(dmalitz 2005/05/12 17:04)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
Acute renal failure [584] Chronic renal failure [585]	ICD-9-CM ICD-9-CM	

### Section I1rr. (NONE OF ABOVE)

NONE OF ABOVE

rr.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
-----------------	---------------------------	--------------------------

Other ill-defined conditions [799.89] Personal history of unspecified disease [V13.9]	ICD-9-CM ICD-9-CM	<p>This None of the Above item refers to all of !1 and is not a child of "Other." Other ill-defined conditions [799.89] [ICD-9-CM] and Personal history of unspecified disease [V13.9] [ICD-9-CM] are not synonymous with "none of above." <b>(rshephard 2005/08/11 19:28)</b></p> <p>I agree this should be omitted from the review list. <b>(dmalitz 2005/06/02 17:49)</b></p> <p>This is an instruction on the form as opposed to an item that drives or requires a response. <b>(rshephard 2005/05/28 14:42)</b></p>
--	----------------------	--

## Section I2 (INFECTIONS)

2.	INFECTIONS	(If none apply, CHECK the NONE OF ABOVE box)		
	Antibiotic resistant infection (e.g., Methicillin resistant staph)	a.	Septicemia	g.
	Clostridium difficile (c. diff.)	b.	Sexually transmitted diseases	h.
	Conjunctivitis	c.	Tuberculosis	i.
	HIV infection	d.	Urinary tract infection in last 30 days	j.
	Pneumonia	e.	Viral hepatitis	k.
	Respiratory infection	f.	Wound infection	l.
			NONE OF ABOVE	m.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Infectious disease (disorder)	SNOMED CT	
Broader Match Term	Broader Match Term Namespace	-----
Other and unspecified infectious and parasitic diseases [136]	ICD-9-CM	

## Section I2a. (Antibiotic resistant infection (e.g., Methicillin resistant staph))

Antibiotic resistant infection (e.g., Methicillin resistant staph)	a.
--	----

NO MATCHES FOUND

## Section I2b. (Clostridium difficile (c. diff.))

Clostridium difficile (c. diff.)	b.
----------------------------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Clostridium difficile infection (disorder) If pain present, check all sites that apply in last 7 days	SNOMED CT MDS	Manual specifies "Diarrheal infection." <b>(rshephard 2005/08/11)</b>

Intestinal infection due to clostridium difficile [008.45] Other anaerobe infection in conditions classified elsewhere and of unspecified site [041.84]	ICD-9-CM  ICD-9-CM	20:20)
--	--------------------------	--------

### Section I2c. (Conjunctivitis)

Conjunctivitis	c.
----------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Conjunctivitis (disorder) Conjunctivitis, unspecified [372.30] If pain present,check all sites that apply inlast 7 days	SNOMED CT ICD-9-CM MDS	

### Section I2d. (HIV infection)

HIV infection	d.
---------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
HUMAN IMMUNODEFICIENCY VIRUS [HIV] INFECTION [042-042.99] Human immunodeficiency virus infection (disorder) If pain present,check all sites that apply inlast 7 days	ICD-9-CM SNOMED CT MDS	

### Section I2e. (Pneumonia)

Pneumonia	e.
-----------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Pneumonia (disorder) Pneumonia, organism unspecified [486]	MDS  SNOMED CT ICD-9-CM	

### Section I2f. (Respiratory infection)

Respiratory infection	f.
-----------------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
ACUTE RESPIRATORY INFECTIONS [460-466.99] If pain present,check all sites that apply inlast 7 days Respiratory tract infection (disorder)	ICD-9-CM MDS SNOMED CT	The subconcepts of ACUTE RESPIRATORY INFECTIONS [460-466.99] [ICD-9-CM] are all UPPER respiratory. I don't think this is a best match. I could not find one pertaining to upper and lower respiratory infections. (rshephard 2005/08/11 20:18)

## Section I2g. (Septicemia)

Septicemia

g.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Bacterial septicemia (disorder) Unspecified septicemia [038.9] If pain present,check all sites that apply inlast 7 days	SNOMED CT ICD-9-CM MDS	Sepsis can occur from other types of organisms as well as bacteria, such as fungi, parasites, etc. However, since the MDS is specific to bacterial septicemia, that is the best match. Can we find out if there was a reason for collecting information only on bacterial septicemia on the MDS 2.0? <b>(rshephard 2005/06/14 11:44)</b>  Septicemia is a superconcept to bacterial septicemia, so I'd favor the broader term. Is there a reason to distinguish bacterial septicemia? <b>(dmalitz 2005/06/02 17:55)</b>
Broader Match Term	Broader Match Term Namespace	-----
Septicemia (disorder)	SNOMED CT	

## Section I2h. (Sexually transmitted diseases)

Sexually transmitted diseases

h.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Sexually transmitted infectious disease (disorder) SYPHILIS AND OTHER VENEREAL DISEASES [090-099.99]	MDS SNOMED CT  ICD-9-CM	

## Section I2i. (Tuberculosis)

Tuberculosis

i.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Tuberculosis (disorder) TUBERCULOSIS [010-018.99] If pain present,check all sites that apply inlast 7 days	SNOMED CT ICD-9-CM MDS	TUBERCULOSIS [010-018.99] [ICD-9-CM] does not capture residents who have converted to + PPD and are being treated but who have not developed TB. <b>(rshephard 2005/08/11 20:09)</b>
Partial Match Term	Partial Match Term Namespace	-----
Mantoux: positive (finding)	SNOMED CT	

## Section I2j. (Urinary tract infection in last 30 days)

Urinary tract infection in last 30 days

j.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Urinary tract infection, site not specified [599.0] Urinary tract infectious disease (disorder)	ICD-9-CM SNOMED CT	Ignoring the 30-day look back period, the first 2 concepts are best matches. The 3rd and 4th concepts do not seem to be useful in the context of this MDS item. (rshephard 2005/08/11 20:07)
Partial Match Term	Partial Match Term Namespace	-----
In the past (qualifier value) month (qualifier value)	SNOMED CT SNOMED CT	

### Section I2k. (Viral hepatitis)

Viral hepatitis

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Viral hepatitis (disorder) Viral hepatitis [070]	MDS SNOMED CT ICD-9-CM	

### Section I2l. (Wound infection)

Wound infection

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Local infection of wound (disorder) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	INFECTIONS OF SKIN AND SUBCUTANEOUS TISSUE [680-686.99] [ICD-9-CM] is a partial match, not a best match. Other local infections of skin and subcutaneous tissue [686] [ICD-9-CM] is a partial match, not a best match. (rshephard 2005/08/11 20:04)
Broader Match Term	Broader Match Term Namespace	-----
INFECTIONS OF SKIN AND SUBCUTANEOUS TISSUE [680-686.99] Localized infection (disorder) Other local infections of skin and subcutaneous tissue [686]	ICD-9-CM SNOMED CT ICD-9-CM	
Partial Match Term	Partial Match Term Namespace	-----
Postoperative wound infection (disorder) Posttraumatic wound infection (disorder) Post-traumatic wound infection (disorder) Posttraumatic wound infection not elsewhere classified [958.3]	SNOMED CT SNOMED CT SNOMED CT ICD-9-CM	

### Section I2m. (NONE OF ABOVE)

NONE OF ABOVE

NO MATCHES FOUND

Section I3 (OTHER CURRENT OR MORE DETAILED DIAGNOSES AND ICD-9 CODES)

3.	OTHER CURRENT OR MORE DETAILED DIAGNOSES AND ICD-9 CODES	a.								
		b.								
		c.								
		d.								
		e.								

NO MATCHES ATTEMPTED

Section J (HEALTH CONDITIONS)

SECTION J. HEALTH CONDITIONS

1.	PROBLEM CONDITIONS	(Check all problems present in last 7 days unless other time frame is indicated)								
		INDICATORS OF FLUID STATUS		Dizziness/Vertigo						f.
				Edema						g.
		Weight gain or loss of 3 or more pounds within a 7 day period		Fever						h.
				Hallucinations						i.
		Inability to lie flat due to shortness of breath		Internal bleeding						j.
		Dehydrated; output exceeds input		Recurrent lung aspirations in last 90 days						k.
				Shortness of breath						l.
		Insufficient fluid; did NOT consume all/almost all liquids provided during last 3 days		Syncope (fainting)						m.
				Unsteady gait						n.
	OTHER			Vomiting						o.
				NONE OF ABOVE						p.
	Delusions									



2.	PAIN SYMPTOMS	(Code the highest level of pain present in the last 7 days)	
		a. FREQUENCY with which resident complains or shows evidence of pain	b. INTENSITY of pain
		0. No pain (skip to J4)	1. Mild pain
		1. Pain less than daily	2. Moderate pain
		2. Pain daily	3. Times when pain is horrible or excruciating
3.	PAIN SITE	(If pain present, check all sites that apply in last 7 days)	
		Back pain	Incisional pain
		Bone pain	Joint pain (other than hip)
		Chest pain while doing usual activities	Soft tissue pain (e.g., lesion, muscle)
		Headache	Stomach pain
		Hip pain	Other
4.	ACCIDENTS	(Check all that apply)	
		Fell in past 30 days	Hip fracture in last 180 days
		Fell in past 31-180 days	Other fracture in last 180 days
			NONE OF ABOVE
5.	STABILITY OF CONDITIONS	Conditions/diseases make resident's cognitive, ADL, mood or behavior patterns unstable—(fluctuating, precarious, or deteriorating)	
		Resident experiencing an acute episode or a flare-up of a recurrent or chronic problem	
		End-stage disease, 6 or fewer months to live	
		NONE OF ABOVE	

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Clinical history and observation findings (finding)	SNOMED CT	

### Section J1 (PROBLEM CONDITIONS)

1.	PROBLEM CONDITIONS	(Check all problems present in last 7 days unless other time frame is indicated)	
		INDICATORS OF FLUID STATUS	Dizziness/Vertigo
			Edema
			Fever
		Weight gain or loss of 3 or more pounds within a 7 day period	Hallucinations
		Inability to lie flat due to shortness of breath	Internal bleeding
		Dehydrated; output exceeds input	Recurrent lung aspirations in last 90 days
		Insufficient fluid; did NOT consume all/almost all liquids provided during last 3 days	Shortness of breath
		OTHER	Syncope (fainting)
		Delusions	Unsteady gait
			Vomiting
			NONE OF ABOVE

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Health problem screening (procedure)	SNOMED CT	

Other (qualifier value)	SNOMED CT	
Physical health problems (finding)	SNOMED CT	

### Section J1a. (Weight gain or loss of 3 or more pounds within a 7 day period)

#### INDICATORS OF FLUID STATUS

Weight gain or loss of 3 or more pounds within a 7 day period

a.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Weight change finding (finding)	SNOMED CT	<p>This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)</p> <p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)</p>
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section J1b. (Inability to lie flat due to shortness of breath)

Inability to lie flat due to shortness of breath

b.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Assessment of past history (regime/therapy) Disease (disorder) Due to (attribute) Dyspnea (finding) In the past (qualifier value) Unable to lie down (finding) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)</p> <p>This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)</p>

### Section J1c. (Dehydrated; output exceeds input)

Dehydrated; output exceeds input

c.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Dehydration (disorder)	SNOMED CT	<p>This is an instruction, not an item or response. <b>(dmalitz 2005/06/06 15:49)</b></p> <p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. <b>(rshephard 2005/06/06 12:32)</b></p> <p>I think you'd need to use both of the selected terms to capture the meaning of the item. <b>(dmalitz 2005/06/02 17:57)</b></p> <p>Dehydration and Fluid volume deficit (finding) would come close to representing the entire concept if combined. Hydration status (observable entity) is a broader match. <b>(rshephard 2005/05/29 14:04)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy) At risk for deficient fluid volume (finding) Disease (disorder) Fluid volume deficit (finding) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

**Section J1d. (Insufficient fluid; did not consume all/almost all liquids provided during last 3 days)**

Insufficient fluid; did NOT  
consume all/almost all liquids  
provided during last 3 days

d.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Finding of insufficient fluid intake (finding)	SNOMED CT	<p>This is an instruction, not an item or response. <b>(dmalitz 2005/06/06 15:49)</b></p> <p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. <b>(rshephard 2005/06/06 12:32)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	

Not taking fluids (finding) Reduced fluid intake (finding) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	
---	-------------------------------------	--

### [Section J1e. \(Delusions\)](#)

OTHER	
Delusions	e.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Delusions (finding)	SNOMED CT	This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)  Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### [Section J1f. \(Dizziness/Vertigo\)](#)

Dizziness/Vertigo	f.
-------------------	----

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Assessment of past history (regime/therapy) Disease (disorder) Dizziness (finding) Dizziness and giddiness (finding) In the past (qualifier value) Vertigo (finding) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)  Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)

### [Section J1g. \(Edema\)](#)

Edema	g.
-------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Edema (finding)	SNOMED CT	This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)

		Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. <b>(rshephard 2005/06/06 12:32)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section J1h. (Fever)

Fever

.. . . .

h.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Fever (finding)	SNOMED CT	This is an instruction, not an item or response. <b>(dmalitz 2005/06/06 15:49)</b>  Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. <b>(rshephard 2005/06/06 12:32)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section J1i. (Hallucinations)

Hallucinations

i.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Hallucinations (finding)	SNOMED CT	This is an instruction, not an item or response. <b>(dmalitz 2005/06/06 15:49)</b>  Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. <b>(rshephard 2005/06/06 12:32)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----

Assessment of past history (regime/therapy)	SNOMED CT	
Disease (disorder)	SNOMED CT	
In the past (qualifier value)	SNOMED CT	
week (qualifier value)	SNOMED CT	

### Section J1j. (Internal bleeding)

Internal bleeding

j.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Bleeding (finding)	SNOMED CT	<p>This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)</p> <p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)</p> <p>If these are the only potential matches, then I vote for "no match". (dmalitz 2005/06/02 18:01)</p> <p>Internal (qualifier value) is a partial match. (rshephard 2005/05/29 14:18)</p>
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy)	SNOMED CT	
Disease (disorder)	SNOMED CT	
Gastrointestinal hemorrhage (disorder)	SNOMED CT	
In the past (qualifier value)	SNOMED CT	
week (qualifier value)	SNOMED CT	

### Section J1k. (Recurrent lung aspirations in last 90 days)

Recurrent lung aspirations in  
last 90 days

k.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Aspiration into respiratory tract (finding)	SNOMED CT	<p>This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)</p> <p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)</p>
Assessment of past history (regime/therapy)	SNOMED CT	
Disease (disorder)	SNOMED CT	
In the past (qualifier value)	SNOMED CT	
Pulmonary aspiration (finding)	SNOMED CT	
Recurrent (qualifier value)	SNOMED CT	
week (qualifier value)	SNOMED CT	

### Section J1l. (Shortness of breath)

Shortness of breath

l.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Dyspnea (finding)	SNOMED CT	This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)  Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section J1m. (Syncope (fainting))

Syncope (fainting)

m.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Syncope (disorder)	SNOMED CT	This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)  Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)
Partial Match Term	Partial Match Term Namespace	-----
Assessment of past history (regime/therapy) Disease (disorder) In the past (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section J1n. (Unsteady gait)

Unsteady gait

n.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Unsteady gait (finding)	SNOMED CT	This is an instruction, not an item or response.

Unsteady when walking (finding)	SNOMED CT	(dmalitz 2005/06/06 15:49)
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Assessment of past history (regime/therapy)	SNOMED CT	
Disease (disorder)	SNOMED CT	
In the past (qualifier value)	SNOMED CT	
Unsteady when walking (finding)	SNOMED CT	
Unsteady when walking (finding)	SNOMED CT	
week (qualifier value)	SNOMED CT	

### Section J1o. (Vomiting)

Vomiting

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Finding of vomiting (finding)	SNOMED CT	<p>This is an instruction, not an item or response. (dmalitz 2005/06/06 15:49)</p> <p>Assessment of past history (regimen/therapy) doesn't seem to apply here at all in the context of the subconcepts listed for it. I don't think Disease (disorder) applies, because J1 is looking at signs and symptoms and not specific diseases/disorders. (rshephard 2005/06/06 12:32)</p> <p>I agree that the finding term has the best fit. (dmalitz 2005/06/02 18:02)</p> <p>I think it is the finding of vomiting that is the best match for the MDS concept, since this is an observation by the nurse and not a diagnosis. (rshephard 2005/05/29 14:23)</p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Assessment of past history (regime/therapy)	SNOMED CT	
Disease (disorder)	SNOMED CT	
In the past (qualifier value)	SNOMED CT	
Persistent vomiting (disorder)	SNOMED CT	
Persistent vomiting [536.2]	ICD-9-CM	
Persistent vomiting NOS (disorder)	SNOMED CT	
Regurgitation (finding)	SNOMED CT	
week (qualifier value)	SNOMED CT	

### Section J1p. (NONE OF ABOVE)

NONE OF ABOVE

**NO MATCHES FOUND**



## Section J2 (*PAIN SYMPTOMS*)

2.	<b>PAIN SYMPTOMS</b>	(Code the <i>highest level of pain present in the last 7 days</i> )	
		a. FREQUENCY with which resident complains or shows evidence of pain	b. INTENSITY of pain
		0. No pain ( <i>skip to J4</i> )	1. Mild pain
		1. Pain less than daily	2. Moderate pain
		2. Pain daily	3. Times when pain is horrible or excruciating

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Pain (finding)	SNOMED CT	Label, not item. (dmalitz 2005/07/21 14:22)

## Section J2a. (*FREQUENCY with which resident complains or shows evidence of pain*)

a. FREQUENCY with which resident complains or shows evidence of pain	
0. No pain ( <i>skip to J4</i> )	
1. Pain less than daily	
2. Pain daily	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
No pain (context-dependent category)	SNOMED CT	Pain finding + frequency interval might get at the MDS item, but I didn't see the required intervals in the "frequency interval" term that was selected. (dmalitz 2005/07/21 14:25)  I don't think that Frequency interval (qualifier value) works here, because the "frequency" implied in the MDS concept is not a specific interval like the ones listed as subconcepts of the SNOMED concept. (rshephard 2005/07/19 23:04)
Broader Match Term	Broader Match Term Namespace	-----
Finding of pattern of pain (finding)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Daily (qualifier value)	SNOMED CT	
Frequency interval (qualifier value)	SNOMED CT	
Pain (finding)	SNOMED CT	

## Section J2a.0 (*No pain*)

0. No pain (*skip to J4*)

See Section J2a. (FREQUENCY with which resident complains or shows evidence of pain)

Section J2a.1 (Pain less than daily)

1. Pain less than daily

See Section J2a. (FREQUENCY with which resident complains or shows evidence of pain)

Section J2a.2 (Pain daily)

2. Pain daily

See Section J2a. (FREQUENCY with which resident complains or shows evidence of pain)

Section J2b. (INTENSITY of pain)

b. INTENSITY of pain

1. Mild pain

2. Moderate pain

3. Times when pain is horrible or excruciating

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Mild pain (finding) Moderate pain (finding) Pain intensity (observable entity)	SNOMED CT SNOMED CT SNOMED CT	Combining the horrible and excruciating terms works, except for the "present" modifier, since it can be pain in the last 7 days (not necessarily now). (dmalitz 2005/07/21 14:43)  The "pain intensity" term has a subconcept that refers to an unspecified pain scale. How would this be used? How do indicate the pain scale that's being used and the particular score you are transmitting? (dmalitz 2005/07/21 14:28)
Partial Match Term	Partial Match Term Namespace	-----
Excruciating pain (finding) Excruciating present pain (finding) Horrible present pain (finding) Severe pain (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

Section J2b.1 (Mild pain)

1. Mild pain

See Section J2b. (INTENSITY of pain)

Section J2b.2 (Moderate pain)

2. Moderate pain

See Section J2b. (INTENSITY of pain)

Section J2b.3 (Times when pain is horrible or excruciating)

3. Times when pain is horrible or excruciating

See Section J2b. (INTENSITY of pain)

Section J3 (PAIN SITE)

3.	PAIN SITE	(If pain present, check all sites that apply in last 7 days)			
	Back pain	a.	Incisional pain	f.	
	Bone pain	b.	Joint pain (other than hip)	g.	
	Chest pain while doing usual activities	c.	Soft tissue pain (e.g., lesion, muscle)	h.	
	Headache	d.	Stomach pain	i.	
	Hip pain	e.	Other	j.	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Pain finding at anatomical site (finding)	SNOMED CT	The MDS items all refer to anatomical sites, but they're not exhaustive. Also, this is not a data item -- it's a label. (dmalitz 2005/07/21 14:29)  Pain finding at anatomical site (finding)has many subconcepts that do not apply. (rshephard 2005/07/19 23:12)

Section J3a. (Back pain)

Back pain	a.
-----------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Back pain (finding)	SNOMED CT	Instruction, not item. (dmalitz 2005/07/21 14:41)  Combining these terms seems to work. (dmalitz 2005/07/21 14:30)
Partial Match Term	Partial Match Term Namespace	-----
Back region (body structure) Pain (finding)	SNOMED CT SNOMED CT	

### Section J3b. (Bone pain)

Bone pain

b.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Bone structure (body structure) Entire chest wall (body structure) Pain (finding)	SNOMED CT SNOMED CT SNOMED CT	I agree that Bone pain would be a best match. <b>(rshephard 2005/07/28 11:16)</b>  Instruction, not item. <b>(dmalitz 2005/07/21 14:41)</b>  Wouldn't "Bone pain (finding)" be the best match? <b>(dmalitz 2005/07/21 14:31)</b>  Bone structure (body structure) refers to the actual structure of the bone and does not apply here. Entire chest wall (body structure) does not apply to bone pain. <b>(rshephard 2005/07/19 23:16)</b>

### Section J3c. (Chest pain while doing usual activities)

Chest pain while doing usual activities

c.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Chest pain (finding) Chest pain at rest (finding) Entire chest wall (body structure) Everyday tasks (observable entity) Pain (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	Re: Chest pain (finding) - this is an interesting question, because the MDS concept, based on the manual definition, seems to describe cardiac pain. I am inclined to define it that way, because I think I understand the intent. However, the manual definition does not specifically state that this refers to cardiac pain, so...? <b>(rshephard 2005/07/28 11:20)</b>  Instruction, not item. <b>(dmalitz 2005/07/21 14:41)</b>  How about "Chest pain (finding)"? This leaves out the "while doing usual activities" qualifier, but it's close. <b>(dmalitz 2005/07/21 14:33)</b>

### Section J3d. (Headache)

Headache

d.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Head structure (body structure) Pain (finding)	SNOMED CT SNOMED CT	Headache (finding) looks good for a best match. <b>(rshephard 2005/07/28 11:22)</b>  Instruction, not item. <b>(dmalitz 2005/07/21 14:41)</b>

		<p>How about "Headache (finding)"? <b>(dmalitz 2005/07/21 14:34)</b></p> <p>Headache doesn't really pertain to the SNOMED concept Head structure (body structure). Headache is neurological, not orthopedic. <b>(rshephard 2005/07/19 23:20)</b></p>
--	--	--

### Section J3e. (Hip pain)

Hip pain	e.
----------	----

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Pain finding at anatomical site (finding)	SNOMED CT	<p>Hip pain (finding) is a best match. <b>(rshephard 2005/07/28 11:24)</b></p> <p>Instruction, not item. <b>(dmalitz 2005/07/21 14:41)</b></p> <p>How about "Hip pain (finding)"? <b>(dmalitz 2005/07/21 14:35)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
Hip region structure (body structure) Pain (finding)	SNOMED CT SNOMED CT	

### Section J3f. (Incisional pain)

Incisional pain	f.
-----------------	----

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Wound pain (finding)	SNOMED CT	<p>Instruction, not item. <b>(dmalitz 2005/07/21 14:41)</b></p> <p>None of the suggested concepts seems to work. <b>(dmalitz 2005/07/21 14:36)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
Pain (finding) Site of incision (attribute)	SNOMED CT SNOMED CT	

### Section J3g. (Joint pain (other than hip))

Joint pain (other than hip)	g.
-----------------------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Joint pain (finding)	SNOMED CT	<p>Instruction, not item. <b>(dmalitz 2005/07/21 14:41)</b></p> <p>As noted, excluding hip pain is a problem. <b>(dmalitz</b></p>

		2005/07/21 14:37)
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Pain (finding)	SNOMED CT	

### [Section J3h. \(Soft tissue pain \(e.g., lesion, muscle\)\)](#)

Soft tissue pain (e.g., lesion, muscle)

h.

<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Pain finding at anatomical site (finding)	SNOMED CT	Instruction, not item. (dmalitz 2005/07/21 14:41)
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Muscle pain (finding)	SNOMED CT	
Pain (finding)	SNOMED CT	
Soft tissue (body structure)	SNOMED CT	

### [Section J3i. \(Stomach pain\)](#)

Stomach pain

i.

<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Pain (finding)	SNOMED CT	
Stomach structure (body structure)	SNOMED CT	
Visceral pain (finding)	SNOMED CT	

### [Section J3j. \(Other\)](#)

Other

j.

NO MATCHES FOUND

### [Section J4 \(ACCIDENTS\)](#)

<b>4. ACCIDENTS</b>	<i>(Check all that apply)</i>		
	Fell in past 30 days	a.	Hip fracture in last 180 days
	Fell in past 31-180 days	b.	Other fracture in last 180 days
			NONE OF ABOVE

NO MATCHES ATTEMPTED

### [Section J4a. \(Fell in past 30 days\)](#)

Fell in past 30 days

a.

NO MATCHES ATTEMPTED

**Section J4b. (Fell in past 31-180 days)**

Fell in past 31-180 days	b.
--------------------------	----

NO MATCHES ATTEMPTED

**Section J4c. (Hip fracture in last 180 days)**

Hip fracture in last 180 days	c.
-------------------------------	----

NO MATCHES ATTEMPTED

**Section J4d. (Other fracture in last 180 days)**

Other fracture in last 180 days	d.
---------------------------------	----

NO MATCHES ATTEMPTED

**Section J4e. (NONE OF ABOVE)**

NONE OF ABOVE	e.
---------------	----

NO MATCHES ATTEMPTED

**Section J5 (STABILITY OF CONDITIONS)**

5.	STABILITY OF CONDITIONS	Conditions/diseases make resident's cognitive, ADL, mood or behavior patterns unstable—(fluctuating, precarious, or deteriorating)	a.
		Resident experiencing an acute episode or a flare-up of a recurrent or chronic problem	b.
		End-stage disease, 6 or fewer months to live	c.
		NONE OF ABOVE	d.

NO MATCHES ATTEMPTED

**Section J5a. (Conditions/diseases make resident's cognitive, ADL, mood or behavior...)**

Conditions/diseases make resident's cognitive, ADL, mood or behavior patterns unstable—(fluctuating, precarious, or deteriorating)	a.
--	----

NO MATCHES ATTEMPTED

**Section J5b. (Resident experiencing an acute episode or a flare-up...)**

Resident experiencing an acute episode or a flare-up of a recurrent or chronic problem	b.
--	----

NO MATCHES ATTEMPTED

**Section J5c. (End-stage disease, 6 or fewer months to live)**

End-stage disease, 6 or fewer months to live	c.
--	----

NO MATCHES ATTEMPTED

**Section J5d. (NONE OF ABOVE)**

NONE OF ABOVE	d.
---------------	----

NO MATCHES ATTEMPTED

**Section K (ORAL/NUTRITIONAL STATUS)**

**SECTION K. ORAL/NUTRITIONAL STATUS**

1.	ORAL PROBLEMS	Chewing problem	a.
		Swallowing problem	b.
		Mouth pain	c.
		NONE OF ABOVE	d.



2.	HEIGHT AND WEIGHT	Record (a.) height in inches and (b.) weight in pounds. Base weight on most recent measure in last 30 days; measure weight consistently in accord with standard facility practice—e.g., in a.m. after voiding, before meal, with shoes off, and in nightclothes			
		a. HT (In.)	<input type="text"/>	b. WT (lb.)	<input type="text"/>
3.	WEIGHT CHANGE	a. Weight loss—5 % or more in last 30 days; or 10 % or more in last 180 days 0. No                      1. Yes			
		b. Weight gain—5 % or more in last 30 days; or 10 % or more in last 180 days 0. No                      1. Yes			
4.	NUTRITIONAL PROBLEMS	Complains about the taste of many foods	a.	Leaves 25% or more of food uneaten at most meals	c.
		Regular or repetitive complaints of hunger	b.	NONE OF ABOVE	d.
5.	NUTRITIONAL APPROACHES	(Check all that apply in last 7 days)			
		Parenteral/IV	a.	Dietary supplement between meals	f.
		Feeding tube	b.	Plate guard, stabilized built-up utensil, etc.	g.
		Mechanically altered diet	c.	On a planned weight change program	h.
		Syringe (oral feeding)	d.	NONE OF ABOVE	i.
		Therapeutic diet	e.		
6.	PARENTERAL OR ENTERAL INTAKE	(Skip to Section L if neither 5a nor 5b is checked)			
		a. Code the proportion of total calories the resident received through parenteral or tube feedings in the last 7 days			
		0. None	3. 51% to 75%		
		1. 1% to 25%	4. 76% to 100%		
		2. 26% to 50%			
		b. Code the average fluid intake per day by IV or tube in last 7 days			
		0. None	3. 1001 to 1500 cc/day		
		1. 1 to 500 cc/day	4. 1501 to 2000 cc/day		
		2. 501 to 1000 cc/day	5. 2001 or more cc/day		

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Nutritional finding (finding)	SNOMED CT	
Nutritional status (observable entity)	SNOMED CT	

### Section K1 (ORAL PROBLEMS)

1.	ORAL PROBLEMS	Chewing problem	a.
		Swallowing problem	b.
		Mouth pain	c.
		NONE OF ABOVE	d.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Oral cavity problem (finding)	SNOMED CT	

Section K1a. (Chewing problem)

Chewing problem

a.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Masticatory dysfunction (finding) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	
Partial Match Term	Partial Match Term Namespace	-----
Unable to chew (finding)	SNOMED CT	

Section K1b. (Swallowing problem)

Swallowing problem

b.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Swallowing problem (finding)	MDS SNOMED CT	

Section K1c. (Mouth pain)

Mouth pain

c.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Painful mouth (finding) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	
Partial Match Term	Partial Match Term Namespace	-----
Mouth region structure (body structure)	SNOMED CT	

Section K1d. (NONE OF ABOVE)

NONE OF ABOVE

d.

NO MATCHES FOUND

Section K2 (HEIGHT AND WEIGHT)

2.	HEIGHT AND WEIGHT	Record (a.) height in inches and (b.) weight in pounds. Base weight on most recent measure in last 30 days; measure weight consistently in accord with standard facility practice—e.g., in a.m. after voiding, before meal, with shoes off, and in nightclothes
		a. HT (in.) <div></div> <div></div> b. WT (lb.) <div></div> <div></div> <div></div>

NO MATCHES ATTEMPTED

Section K2a. (HT (in.))

a. HT (in.)

NO MATCHES ATTEMPTED

Section K2b. (WT (lb.))

b. WT (lb.)

NO MATCHES ATTEMPTED

Section K3 (WEIGHT CHANGE)

3.	WEIGHT CHANGE	a. Weight loss—5 % or more in last 30 days; or 10 % or more in last 180 days	
		0. No	1. Yes
		b. Weight gain—5 % or more in last 30 days; or 10 % or more in last 180 days	
		0. No	1. Yes

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Weight change finding (finding)	SNOMED CT	

Section K3a. (Weight loss)

a. Weight loss—5 % or more in last 30 days; or 10 % or more in last 180 days

0. No

1. Yes

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Abnormal weight loss (finding) Excessive weight loss (finding) Weight decreasing (finding) Weight loss finding (finding) Weight loss from baseline weight (observable entity) No (qualifier value) Yes (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>The concept of weight loss is captured by the terms I voted for, but I'm not sure how we'll specify the 5% or 10% criteria in the MDS item. (dmalitz 2005/06/02 18:06)</p> <p>Abnormal and excessive weight loss are partial matches, not best matches, because all significant weight losses are captured by this label on the MDS, not just abnormal or excessive ones. "Percentage" weight loss is not captured in this label on the MDS - it is outlined in the manual instructions and presented on the form as instructions for K5a and K5b not a part of the label. (rshephard 2005/05/29 14:32)</p> <p>There is no review option on the screen, but it seems</p>

		that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. <b>(rshephard 2005/05/15 15:10)</b>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Percentage weight loss (observable entity)	SNOMED CT	
Weight loss (amount) (observable entity)	SNOMED CT	

### [Section K3a.0 \(No\)](#)

0. No

See Section K3a. (Weight loss)

### [Section K3a.1 \(Yes\)](#)

1. Yes

See Section K3a. (Weight loss)

### [Section K3b. \(Weight gain\)](#)

<b>b. Weight gain—5 % or more in last 30 days; or 10 % or more in last 180 days</b>	
0. No	1. Yes

NO MATCHES ATTEMPTED

### [Section K3b.0 \(No\)](#)

0. No

See Section K3a. (Weight loss)

### [Section K3b.1 \(Yes\)](#)

1. Yes

See Section K3a. (Weight loss)

### [Section K4 \(NUTRITIONAL PROBLEMS\)](#)

<b>4.</b>	<b>NUTRI-TIONAL PROBLEMS</b>	Complains about the taste of many foods	a.	Leaves 25% or more of food uneaten at most meals	c.
		Regular or repetitive complaints of hunger	b.	NONE OF ABOVE	d.

NO MATCHES ATTEMPTED

Section K4a. (Complains about the taste of many foods)

Complains about the taste of many foods	a.
---	----

NO MATCHES ATTEMPTED

Section K4b. (Regular or repetitive complaints of hunger)

Regular or repetitive complaints of hunger	b.
--	----

NO MATCHES ATTEMPTED

Section K4c. (Leaves 25% or more of food uneaten at most meals)

Leaves 25% or more of food uneaten at most meals	c.
--	----

NO MATCHES ATTEMPTED

Section K4d. (NONE OF ABOVE)

NONE OF ABOVE	d.
---------------	----

NO MATCHES ATTEMPTED

Section K5 (NUTRITIONAL APPROACHES)

5.	NUTRI-TIONAL APPROACH-ES	(Check all that apply in last 7 days)			
		Parenteral/IV	a.	Dietary supplement between meals	f.
		Feeding tube	b.		
		Mechanically altered diet	c.	Plate guard, stabilized built-up utensil, etc.	g.
		Syringe (oral feeding)	d.	On a planned weight change program	h.
		Therapeutic diet	e.		
				NONE OF ABOVE	i.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Feeding and dietary regimes (regime/therapy)	SNOMED CT	

Section K5a. (Parenteral/IV)

Parenteral/IV

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Intravenous feeding of patient (regime/therapy)	SNOMED CT	This is the lookback period. Not applicable to this part of the work. (rshephard 2005/07/11 17:06)  This is an instruction -- shouldn't be in list. (dmalitz 2005/06/02 18:07)

### Section K5b. (Feeding tube)

Feeding tube

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Tube feeding of patient (regime/therapy)	SNOMED CT	This is the lookback period. Not applicable to this part of the work. (rshephard 2005/07/11 17:06)  This is an instruction -- shouldn't be in list. (dmalitz 2005/06/02 18:07)
Partial Match Term	Partial Match Term Namespace	-----
Nasogastric feeding (regime/therapy) Orogastric feeding (regime/therapy)	SNOMED CT SNOMED CT	

### Section K5c. (Mechanically altered diet)

Mechanically altered diet

NO MATCHES FOUND

### Section K5d. (Syringe (oral feeding))

Syringe (oral feeding)

NO MATCHES FOUND

### Section K5e. (Therapeutic diet)

Therapeutic diet

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Therapeutic diets (finding)	SNOMED CT	This is the lookback period. Not applicable to this part of the work. (rshephard 2005/07/11 17:06)  This is an instruction -- shouldn't be in list. (dmalitz 2005/06/02 18:07)

**Section K5f. (Dietary supplement between meals)**

Dietary supplement between meals

f.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Between meals (qualifier value) Caloric intake, function (observable entity) Dietary supplements - other (product) Parenteral fluid input (observable entity)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	This is the lookback period. Not applicable to this part of the work. (rshephard 2005/07/11 17:06)  This is an instruction -- shouldn't be in list. (dmalitz 2005/06/02 18:07)

**Section K5g. (Plate guard, stabilized built-up utensil, etc.)**

Plate guard, stabilized built-up utensil, etc.

g.

NO MATCHES FOUND

**Section K5h. (On a planned weight change program)**

On a planned weight change program

h.

NO MATCHES FOUND

**Section K5i. (NONE OF ABOVE)**

NONE OF ABOVE

i.

NO MATCHES FOUND

**Section K6 (PARENTERAL OR ENTERAL INTAKE)**

6. PARENTERAL OR ENTERAL INTAKE	(Skip to Section L if neither 5a nor 5b is checked)		
	a. Code the proportion of <b>total calories</b> the resident received through parenteral or tube feedings in the <b>last 7 days</b>		
	0. None	3. 51% to 75%	
	1. 1% to 25%	4. 76% to 100%	
	b. Code the average <b>fluid intake</b> per day by IV or tube in <b>last 7 days</b>		
	0. None	3. 1001 to 1500 cc/day	
	1. 1 to 500 cc/day	4. 1501 to 2000 cc/day	
	2. 501 to 1000 cc/day	5. 2001 or more cc/day	

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
--------------------	------------------------------	--------------------------

Enteral feeding (regime/therapy)	SNOMED CT	
Parenteral fluid input (observable entity)	SNOMED CT	
Parenteral nutrient (finding)	SNOMED CT	

### Section K6a. (Code the proportion of total calories the resident received...)

- a. Code the proportion of **total calories** the resident received through parenteral or tube feedings in the **last 7 days**
- |               |                |
|---------------|----------------|
| 0. None       | 3. 51% to 75%  |
| 1. 1% to 25%  | 4. 76% to 100% |
| 2. 26% to 50% |                |


Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
None (qualifier value)	SNOMED CT	<p>How do we use the SNOMED percent qualifier to indicate the appropriate percent ranges? <b>(dmalitz 2005/06/02 18:11)</b></p> <p>Dietary calorie intake (observable entity) is a broader match. <b>(rshephard 2005/05/29 15:01)</b></p> <p>% of total (qualifier value) is partial match. <b>(rshephard 2005/05/29 14:50)</b></p> <p>% daily total food energy intake (qualifier value) is a broader match, not a partial match, since only parenteral and tube feeding are included in the MDS concept but the SNOMED concept includes all food energy intake. <b>(rshephard 2005/05/29 14:44)</b></p>
Broader Match Term	Broader Match Term Namespace	-----
Dietary calorie intake [139806001]	SNOMED CT Inactive	
Partial Match Term	Partial Match Term Namespace	-----
% daily total food energy intake (qualifier value)	SNOMED CT	
% of total (qualifier value)	SNOMED CT	
One (qualifier value)	SNOMED CT	
Percent (property) (qualifier value)	SNOMED CT	
Total (qualifier value)	SNOMED CT	

### Section K6a.0 (None)

- | 0. None

See Section K6a. (Code the proportion of total calories the resident received...)

### Section K6a.1 (1% to 25%)

- | 1. 1% to 25%

See Section K6a. (Code the proportion of total calories the resident received...)



Section K6a.2 (26% to 50%)

2. 26% to 50%

See Section K6a. (Code the proportion of total calories the resident received...)

Section K6a.3 (51% to 75%)

3. 51% to 75%

See Section K6a. (Code the proportion of total calories the resident received...)

Section K6a.4 (76% to 100%)

4. 76% to 100%

See Section K6a. (Code the proportion of total calories the resident received...)

Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

b. Code the average fluid intake per day by IV or tube in last 7 days		
0. None	3. 1001 to 1500 cc/day	
1. 1 to 500 cc/day	4. 1501 to 2000 cc/day	
2. 501 to 1000 cc/day	5. 2001 or more cc/day	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
None (qualifier value)	SNOMED CT	How would we express these numeric values in SNOMED? (dmalitz 2005/06/06 15:54)  More (qualifier value) is a partial match. (rshephard 2005/05/29 16:30)  SNOMED doesn't seem to have the combined concept covered by the item. (dmalitz 2005/06/06 15:53)  Tube is not considered oral. For MDS purposes, oral intake is separate from tube intake, even if tube in NG. Enteral fluid input (observable entity) is a partial match. Fluid intake in broader, not partial, match. (rshephard 2005/05/29 15:14)
Partial Match Term	Partial Match Term Namespace	-----
Daily (qualifier value) Enteral fluid input (observable entity) Finding of measures of oral fluid intake (finding) Fluid intake (observable entity) Fluid monitoring (regime/therapy) Identifying goals (procedure)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

Measure of fluid intake (observable entity)	SNOMED CT	
---	-----------	--

Daily (qualifier value)	SNOMED CT	
mL (qualifier value)	SNOMED CT	
More (qualifier value)	SNOMED CT	
One (qualifier value)	SNOMED CT	
Parenteral fluid input (observable entity)	SNOMED CT	
Volume (property) (qualifier value)	SNOMED CT	

**Section K6b.0 (*None*)**

| 0. None

See Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

**Section K6b.1 (*1 to 500 cc/day*)**

| 1. 1 to 500 cc/day

See Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

**Section K6b.2 (*501 to 1000 cc/day*)**

| 2. 501 to 1000 cc/day

See Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

**Section K6b.3 (*1001 to 1500 cc/day*)**

| 3. 1001 to 1500 cc/day

See Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

**Section K6b.4 (*1501 to 2000 cc/day*)**

| 4. 1501 to 2000 cc/day

See Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

**Section K6b.5 (*2001 or more cc/day*)**

| 5. 2001 or more cc/day

See Section K6b. (Code the average fluid intake per day by tube or IV in last 7 days)

## Section L (ORAL/DENTAL STATUS)

### SECTION L. ORAL/DENTAL STATUS

1.	ORAL STATUS AND DISEASE PREVENTION	Debris (soft, easily movable substances) present in mouth prior to going to bed at night	a.
		Has dentures or removable bridge	b.
		Some/all natural teeth lost—does not have or does not use dentures (or partial plates)	c.
		Broken, loose, or carious teeth	d.
		Inflamed gums (gingiva); swollen or bleeding gums; oral abscesses; ulcers or rashes	e.
		Daily cleaning of teeth/dentures or daily mouth care—by resident or staff	f.
		NONE OF ABOVE	g.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Oral cavity finding (finding)	SNOMED CT	

## Section L1 (ORAL STATUS AND DISEASE PREVENTION)

1.	ORAL STATUS AND DISEASE PREVENTION	Debris (soft, easily movable substances) present in mouth prior to going to bed at night	a.
		Has dentures or removable bridge	b.
		Some/all natural teeth lost—does not have or does not use dentures (or partial plates)	c.
		Broken, loose, or carious teeth	d.
		Inflamed gums (gingiva); swollen or bleeding gums; oral abscesses; ulcers or rashes	e.
		Daily cleaning of teeth/dentures or daily mouth care—by resident or staff	f.
		NONE OF ABOVE	g.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Oral cavity finding (finding)	SNOMED CT	

## Section L1a. (Debris (soft, easily movable substances) present in mouth prior to going to bed at night)

Debris (soft, easily movable substances) present in mouth prior to going to bed at night	a.
--	----

NO MATCHES FOUND

## Section L1b. (Has dentures or removable bridge)

Has dentures or removable bridge	b.
----------------------------------	----

NO MATCHES FOUND

**Section L1c. (Some/all natural teeth lost...)**

Some/all natural teeth lost—does not have or does not use dentures (or partial plates)

c.

NO MATCHES FOUND

**Section L1d. (Broken, loose, or carious teeth)**

Broken, loose, or carious teeth

d.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	
Broader Match Term	Broader Match Term Namespace	-----
Disorder of teeth AND/OR supporting structures (disorder)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Fracture of tooth (disorder) Injury of teeth (disorder) Loosening of tooth (disorder) Mobile tooth (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

**Section L1e. (Inflamed gums (gingiva); swollen or bleeding gums; oral abscesses; ulcers, or rashes)**

Inflamed gums (gingiva); swollen or bleeding gums; oral abcesses; ulcers or rashes

e.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	
Broader Match Term	Broader Match Term Namespace	-----
Disorder of oral soft tissues (disorder)	SNOMED CT	

**Section L1f. (Daily cleaning of teeth/dentures or daily mouth care – by resident or staff)**

Daily cleaning of teeth/dentures or daily mouth care—by resident or staff

f.

NO MATCHES FOUND

**Section L1g. (NONE OF ABOVE)**

NONE OF ABOVE

g.

# NO MATCHES FOUND

## Section M (SKIN CONDITION)

### SECTION M. SKIN CONDITION

1.	ULCERS (Due to any cause)	(Record the number of ulcers at each ulcer stage—regardless of cause. If none present at a stage, record "0" (zero). Code all that apply during last 7 days. Code 9 = 9 or more.) [Requires full body exam.]	Number at Stage
	a. Stage 1. A persistent area of skin redness (without a break in the skin) that does not disappear when pressure is relieved.		
	b. Stage 2. A partial thickness loss of skin layers that presents clinically as an abrasion, blister, or shallow crater.		
	c. Stage 3. A full thickness of skin is lost, exposing the subcutaneous tissues - presents as a deep crater with or without undermining adjacent tissue.		
	d. Stage 4. A full thickness of skin and subcutaneous tissue is lost, exposing muscle or bone.		
2.	TYPE OF ULCER	(For each type of ulcer, code for the highest stage in the last 7 days using scale in item M1—i.e., 0=none; stages 1, 2, 3, 4)	
	a. Pressure ulcer—any lesion caused by pressure resulting in damage of underlying tissue		
	b. Stasis ulcer—open lesion caused by poor circulation in the lower extremities		
3.	HISTORY OF RESOLVED ULCERS	Resident had an ulcer that was resolved or cured in LAST 90 DAYS 0. No                      1. Yes	
4.	OTHER SKIN PROBLEMS OR LESIONS PRESENT	(Check all that apply during last 7 days) Abrasions, bruises Burns (second or third degree) Open lesions other than ulcers, rashes, cuts (e.g., cancer lesions) Rashes—e.g., intertrigo, eczema, drug rash, heat rash, herpes zoster Skin desensitized to pain or pressure Skin tears or cuts (other than surgery) Surgical wounds NONE OF ABOVE	a. b. c. d. e. f. g. h.
5.	SKIN TREATMENTS	(Check all that apply during last 7 days) Pressure relieving device(s) for chair Pressure relieving device(s) for bed Turning/repositioning program Nutrition or hydration intervention to manage skin problems Ulcer care Surgical wound care Application of dressings (with or without topical medications) other than to feet Application of ointments/medications (other than to feet) Other preventative or protective skin care (other than to feet) NONE OF ABOVE	a. b. c. d. e. f. g. h. i. j.

6.	FOOT PROBLEMS AND CARE	(Check all that apply during last 7 days) Resident has one or more foot problems—e.g., corns, callouses, bunions, hammer toes, overlapping toes, pain, structural problems Infection of the foot—e.g., cellulitis, purulent drainage Open lesions on the foot Nails/calluses trimmed during last 90 days Received preventative or protective foot care (e.g., used special shoes, inserts, pads, toe separators) Application of dressings (with or without topical medications) NONE OF ABOVE	 a. b. c. d. e. f. g.
----	------------------------	--	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Integumentary system finding (finding)	SNOMED CT	Label, not item. (dmalitz 2005/07/21 15:56)  Integumentary system finding (finding) is a broader match - it includes many things that are not covered in Section M. Since this MDS concept is a label, it probably isn't critical to match it to SNOMED. However, skin assessment (regime/therapy) is probably a best match. (rshephard 2005/07/11 16:30)

### Section M1 (ULCERS (Due to any cause))

1.	ULCERS (Due to any cause)	(Record the number of ulcers at each ulcer stage—regardless of cause. If none present at a stage, record "0" (zero). Code all that apply during last 7 days. Code 9 = 9 or more.) [Requires full body exam.]	Number at Stage
	a. Stage 1. A persistent area of skin redness (without a break in the skin) that does not disappear when pressure is relieved.		
	b. Stage 2. A partial thickness loss of skin layers that presents clinically as an abrasion, blister, or shallow crater.		
	c. Stage 3. A full thickness of skin is lost, exposing the subcutaneous tissues - presents as a deep crater with or without undermining adjacent tissue.		
	d. Stage 4. A full thickness of skin and subcutaneous tissue is lost, exposing muscle or bone.		

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Number of ulcers (observable entity)	SNOMED CT	Label, not item. (dmalitz 2005/07/21 15:57)
Partial Match Term	Partial Match Term Namespace	-----
Skin ulcer (disorder)	SNOMED CT	

### Section M1a. (Stage 1)

a. Stage 1. A persistent area of skin redness (without a break in the skin) that does not disappear when pressure is relieved.	
--	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
--------------------	------------------------------	--------------------------

Number of ulcers (observable entity) Pressure ulcer Stage 1 care (regime/therapy) Pressure ulcer Stage 1 care assessment (regime/therapy) Stage 1 (qualifier value)	SNOMED CT SNOMED CT  SNOMED CT SNOMED CT	<p>Question: is there any advantage to utilizing the qualifier values (Stage 1, Stage 2, Stage 3, Stage 4) only, leaving the definition to the manual? Since the qualifier values would still be tied to a manual definition that is unique to the MDS, would we be gaining anything? <b>(rshephard 2005/07/12 18:29)</b></p> <p>Re: Pressure ulcer Stage 1 care (regime/therapy) Apelon_ comment_Q Does this match the intent of MDS? No, it does not. M1a encompasses more than just pressure ulcers it includes some other types of ulcers also. In addition, M1a refers to the presence of the ulcers only it does not encompass the care of the ulcers. <b>(rshephard 2005/05/29 16:46)</b></p> <p>SNOMED doesn't seem to capture the types of ulcers included in item. <b>(dmalitz 2005/06/06 16:01)</b></p> <p>This is an instruction on the form as opposed to an actual MDS item. <b>(rshephard 2005/05/29 16:48)</b></p>
--	--	--

### Section M1b. (Stage 2)

**b.** Stage 2. A partial thickness loss of skin layers that presents clinically as an abrasion, blister, or shallow crater.



Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Decubitus ulcer (disorder) Number of ulcers (observable entity) Pressure ulcer Stage 2 care assessment (regime/therapy) Stage 2 (qualifier value)	SNOMED CT SNOMED CT  SNOMED CT SNOMED CT	<p>Question: is there any advantage to utilizing the qualifier values (stage 1, Stage 2, Stage 3, Stage 4) only, leaving the definition to the manual? Since the qualifier values would still be tied to a manual definition that is unique to the MDS, would we be gaining anything? <b>(rshephard 2005/07/12 18:34)</b></p> <p>The definition of an ulcer for staging purposes on the MDS includes pressure ulcers and ulcers that develop because of circulatory problems (definition updated 6/05) in M1. The staging rules are similar to the clinical standard of practice as determined by AHCPR and NPUAP. However, they have been adapted to MDS needs and therefore only the definitions found on page 3-159 of the RAI User's Manual should be consulted for M1 (and M2). <b>(rshephard 2005/07/11 16:59)</b></p> <p>SNOMED doesn't seem to capture the types of ulcers included in item. <b>(dmalitz 2005/06/06 16:02)</b></p>



		<p>This MDS concept refers to the stage only and not to the ulcer. The description of the stage of the ulcer appears in the instructions in the manual and on the form. <b>(rshephard 2005/05/29 16:51)</b></p> <p>This is an instruction on the form as opposed to an actual MDS item. <b>(rshephard 2005/05/29 16:48)</b></p>
--	--	---

### Section M1c. (Stage 3)

**c.** Stage 3. A full thickness of skin is lost, exposing the subcutaneous tissues - presents as a deep crater with or without undermining adjacent tissue.



Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Decubitus ulcer (disorder) Number of ulcers (observable entity) Pressure ulcer Stage 3 care assessment (regime/therapy) Stage 3 (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>SNOMED doesn't seem to capture the types of ulcers included in item. <b>(dmalitz 2005/06/06 16:02)</b></p> <p>This MDS concept refers to the stage only and not to the ulcer. The description of the stage of the ulcer appears in the instructions in the manual and on the form. Also, M1 encompasses more than just pressure ulcers it includes some other types of ulcers also. <b>(rshephard 2005/05/29 16:54)</b></p> <p>This is an instruction on the form as opposed to an actual MDS item. <b>(rshephard 2005/05/29 16:48)</b></p>

### Section M1d. (Stage 4)

**d.** Stage 4. A full thickness of skin and subcutaneous tissue is lost, exposing muscle or bone.



Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Decubitus ulcer (disorder) Number of ulcers (observable entity) Pressure ulcer Stage 4 care assessment (regime/therapy) Stage 4 (qualifier value)	SNOMED CT SNOMED CT  SNOMED CT SNOMED CT	<p>Question: is there any advantage to utilizing the qualifier values (stage 1, Stage 2, Stage 3, Stage 4) only, leaving the definition to the manual? Since the qualifier values would still be tied to a manual definition that is unique to the MDS, would we be gaining anything? <b>(rshephard 2005/07/12 18:35)</b></p> <p>SNOMED doesn't seem to capture the types of ulcers included in item. <b>(dmalitz 2005/06/06 16:02)</b></p> <p>This MDS concept refers to the stage only and not to the ulcer. The description of the stage of the ulcer</p>

		<p>appears in the instructions in the manual and on the form. Also, M1 encompasses more than just pressure ulcers it includes some other types of ulcers also. <b>(rshephard 2005/05/29 16:55)</b></p> <p>This is an instruction on the form as opposed to an actual MDS item. <b>(rshephard 2005/05/29 16:48)</b></p>
--	--	--

## Section M2 (TYPE OF ULCER)

2.	TYPE OF ULCER	<p>(For each type of ulcer, code for the highest stage in the last 7 days using scale in item M1—i.e., 0=none; stages 1, 2, 3, 4)</p> <p>a. Pressure ulcer—any lesion caused by pressure resulting in damage of underlying tissue</p> <p>b. Stasis ulcer—open lesion caused by poor circulation in the lower extremities</p>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
----	---------------	--	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Skin ulcer (disorder)	SNOMED CT	<p>Label, not item. <b>(dmalitz 2005/07/21 15:59)</b></p> <p>This MDS concept is a label on the form and not specific to an item question or response. <b>(rshephard 2005/07/12 18:37)</b></p>

## Section M2a. (Pressure ulcer)

a. Pressure ulcer—any lesion caused by pressure resulting in damage of underlying tissue	<input type="checkbox"/>
--	--------------------------

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Decubitus ulcer (disorder) Decubitus ulcer (finding) Decubitus ulcer [707.0] Pressure sore (disorder)	SNOMED CT SNOMED CT ICD-9-CM SNOMED CT	<p>Question: Can this item be divided into Q&amp;A: The question would be "Pressure ulcer" - which has a match in SNOMED. The answer would be a numeric response (which has a match in SNOMED) based on the instructions in the manual (re: highest stage). Do we gain anything from this? <b>(rshephard 2005/07/12 18:42)</b></p> <p>Instruction -- remove from review list. <b>(dmalitz 2005/06/06 16:06)</b></p> <p>The SNOMED terms are obviously related, but the MDS item asks for the highest stage observed. I'm not sure how we'd express this in SNOMED. <b>(dmalitz 2005/06/06 16:06)</b></p>

Partial Match Term	Partial Match Term Namespace	-----
Pressure sore assessment (regime/therapy) Stage 1 (qualifier value) Stage 3 (qualifier value) Stage 3 or 4 pressure ulcers acquired after admission to a healthcare facility (event) Stage 4 (qualifier value)	SNOMED CT SNOMED CT SNOMED CT  SNOMED CT SNOMED CT	

### Section M2b. (Stasis ulcer)

**b.** Stasis ulcer—open lesion caused by poor circulation in the lower extremities

☐

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Pressure sore assessment (regime/therapy) Stage 1 (qualifier value) Stage 3 (qualifier value) Stage 3 or 4 pressure ulcers acquired after admission to a healthcare facility (event) Stage 4 (qualifier value) Stasis ulcer (disorder) Varicose veins of lower extremities with ulcer [454.0]	SNOMED CT SNOMED CT SNOMED CT  SNOMED CT SNOMED CT SNOMED CT ICD-9-CM	We would somehow have to provide instructions that the response is to be the maximum stage over last 7 days. <b>(dmalitz 2005/07/21 16:01)</b>  Question: Can this item be divided into Q&A: The question would be "Stasis ulcer" - which has a match in SNOMED. The answer would be a numeric response (which has a match in SNOMED) based on the instructions in the manual (re: highest stage). Do we gain anything from this? <b>(rshephard 2005/07/12 18:47)</b>  Instruction -- remove from review list. <b>(dmalitz 2005/06/06 16:06)</b>

### Section M3 (HISTORY OF RESOLVED ULCERS)

<b>3. HISTORY OF RESOLVED ULCERS</b>	Resident had an ulcer that was resolved or cured in <b>LAST 90 DAYS</b>	<input type="checkbox"/>
	0. No                      1. Yes	<input type="checkbox"/>

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
No (qualifier value) Yes (qualifier value)	SNOMED CT SNOMED CT	The SNOMED concept Healed ulcer is a match for the MDS concept, except that the MDS concept very narrowly includes only the same types of ulcers that are included in M1. <b>(rshephard 2005/07/12 18:55)</b>  There is no review option on the screen, but it seems that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. <b>(rshephard 2005/05/15 15:10)</b>

Broader Match Term	Broader Match Term Namespace	-----
History of - skin disorder (context-dependent category)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Healed ulcer (morphologic abnormality)	SNOMED CT	

### Section M3.0 (No)

0. No

See Section M3 (HISTORY OF RESOLVED ULCERS)

### Section M3.1 (Yes)

1. Yes

See Section M3 (HISTORY OF RESOLVED ULCERS)

### Section M4 (OTHER SKIN PROBLEMS OR LESIONS PRESENT)

4.	OTHER SKIN PROBLEMS OR LESIONS PRESENT	(Check all that apply during last 7 days)	
		Abrasions, bruises	a.
		Burns (second or third degree)	b.
		Open lesions other than ulcers, rashes, cuts (e.g., cancer lesions)	c.
		Rashes—e.g., intertrigo, eczema, drug rash, heat rash, herpes zoster	d.
		Skin desensitized to pain or pressure	e.
		Skin tears or cuts (other than surgery)	f.
		Surgical wounds	g.
		NONE OF ABOVE	h.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Skin lesion (disorder) Skin problem (finding)	SNOMED CT SNOMED CT	M4h (none of the above) seems to have been omitted from the review list. <b>(dmalitz 2005/07/21 16:39)</b>  Label, not item. <b>(dmalitz 2005/07/21 16:08)</b>  The SNOMED qualifier value Other combined with Skin Problem (finding) is almost a best match - except since "other" isn't defined, it would by definition include the pressure and circulatory ulcers that are excluded from M4 on the MDS. In any case, this MDS concept is a label, so maybe it's not so important to match it. <b>(rshephard 2005/07/12 19:10)</b>

### Section M4a. (Abrasions, bruises)

Abrasions, bruises

a.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Abrasion (disorder) Superficial bruising (disorder)	SNOMED CT SNOMED CT	<p>Bruise (finding) would be a better partial match. However, the definition for this MDS item also includes "localized areas of swelling, tenderness and discoloration," so even combining Abrasion (disorder) and Bruise (finding) doesn't get us to a best match. <b>(rshephard 2005/07/12 19:13)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>

### Section M4b. (Burns (second or third degree))

Burns (second or third degree)

b.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Second degree burn (disorder) Third degree burn (disorder)	SNOMED CT SNOMED CT	<p>If Thermal burn is the superconcept to "Third degree burn" and "Second degree burn," then it is not a match, because Thermal burn itself is only one type of burn that would fit under the MDS concept Burns (M4b). Burn injury (morphologic abnormality) would seem to be a better match. It includes 2nd and 3rd degree burns as subconcepts (as well as various causes of burns, which is implied in the MDS concept - something had to cause the 2nd and 3rd degree burns). BUT - it also includes 1st degree burns, so its only a broader match, not a best match. <b>(rshephard 2005/07/13 20:12)</b></p> <p>Second degree burn combined with Third degree burn would be a best match. <b>(rshephard 2005/07/12 19:16)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>Two best matches for this item. <b>(dmalitz 2005/06/06 16:07)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>Burn (disorder) is a broader match. <b>(rshephard 2005/05/29 17:05)</b></p>

### Section M4c. (*Open lesions other than ulcers, rashes, cuts (e.g., cancer lesions)*)

Open lesions other than ulcers, rashes, cuts (e.g., cancer lesions)

c.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Finding of lesion (finding) Oral mucous membrane lesion due to late syphilis (disorder)	SNOMED CT  SNOMED CT	<p>This MDS item is the catch-all for skin problems and lesions that are not coded elsewhere in Section M. No best match. <b>(rshephard 2005/07/12 19:18)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>I'm not sure exactly all the types of lesions that are included in the MDS item, but since it includes an assortment it will be difficult to match. <b>(dmalitz 2005/06/06 16:09)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>The 3rd reviewable concept is not a match because according to current coding rules, syphilis lesion would not be included here. (That will change on 6/15.) <b>(rshephard 2005/05/29 17:09)</b></p>

### Section M4d. (*Rashes*)

Rashes—e.g., intertrigo, eczema, drug rash, heat rash, herpes zoster

d.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Eruption of skin (disorder)	SNOMED CT	<p>I agree - synonym is Rash. Since the MDS item includes all kinds of rashes, this is a best match. <b>(rshephard 2005/07/12 19:20)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>

### Section M4e. (*Skin desensitized to pain or pressure*)

Skin desensitized to pain or pressure

e.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Reduced sensation of skin (finding)	SNOMED CT	Reduced sensation of skin (finding) seems to imply

		<p>that some sensation remains. The MDS concept states that the resident is UNABLE TO PERCEIVE sensations of pain or pressure. Tactile hypesthesia (finding) is also lessened sensation - not absence of sensation. No sensitivity to pain (finding) and Absent pin prick discrimination (finding) combined could be a best match. Absence of sensation (finding) probably is a best match. <b>(rshephard 2005/07/12 19:42)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Tactile hypesthesia (finding)	SNOMED CT	

#### Section M4f. (Skin tears or cuts (other than surgery))

Skin tears or cuts (other than surgery)

f.

<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Accidental wound (finding) Broken skin (disorder) Accidental wound (finding) Broken skin (disorder)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>This MDS concept is very specific to TRAUMATIC breaks in the skin that have PENETRATED TO SUBCUTANEOUS TISSUE. As a result, none of the broader or partial matches seem to be very useful. <b>(rshephard 2005/07/13 16:04)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Cut - accidental (disorder) Integumentary system structure (body structure)	SNOMED CT SNOMED CT	

#### Section M4g. (Surgical wounds)

Surgical wounds

g.

<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Non-healing surgical wound (finding) Surgical wound (morphologic abnormality) Surgical wound, recent (morphologic abnormality)	SNOMED CT SNOMED CT SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>Surgical wound is not a best match because it includes healed wounds. Site of incision (attribute) may be a</p>

		broader match. <b>(rshephard 2005/06/03 20:56)</b>  This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b>
--	--	---

**Section M4h. (NONE OF ABOVE)**

NONE OF ABOVE	h.
---------------	----

**NO MATCHES FOUND**

**Section M5 (SKIN TREATMENTS)**

5.	SKIN TREATMENTS	(Check all that apply during last 7 days)	
		Pressure relieving device(s) for chair	a.
		Pressure relieving device(s) for bed	b.
		Turning/repositioning program	c.
		Nutrition or hydration intervention to manage skin problems	d.
		Ulcer care	e.
		Surgical wound care	f.
		Application of dressings (with or without topical medications) other than to feet	g.
		Application of ointments/medications (other than to feet)	h.
		Other preventative or protective skin care (other than to feet)	i.
		NONE OF ABOVE	j.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Skin care (regime/therapy)	SNOMED CT	M5h (none of the above) has been omitted from the review list. <b>(dmalitz 2005/07/21 16:48)</b>  Label, not item. <b>(dmalitz 2005/07/21 16:25)</b>  From the subconcepts, I'm not sure that Skin Care (regime/therapy) is broad enough to include the pressure-relieving devices and nutrition or hydration interventions as well as the ulcer care, etc. And, unfortunately, 3 of the items in Section M5 are specific to all skin except the feet, so I don't think a match is possible. On the other hand, this MDS concept is a label, so maybe it's not so important to match it so precisely. <b>(rshephard 2005/07/13 16:43)</b>
Broader Match Term	Broader Match Term Namespace	-----
Skin care (regime/therapy)	SNOMED CT	

**Section M5a. (Pressure relieving device(s) for chair)**

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



Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Pressure relief equipment (physical object)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>Pressure - physical agent (physical force) is a partial match. Pressure point protection (procedure) and Wheelchair seating (physical object) may be broader matches. <b>(rshephard 2005/05/30 13:54)</b></p>
Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Pressure - physical agent (physical force) Pressure point protection (procedure) Wheelchair seating (physical object)	SNOMED CT SNOMED CT SNOMED CT	

### Section M5b. (Pressure relieving device(s) for bed)

Pressure relieving device(s) for bed

b.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Pressure relief equipment (physical object)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>The MDS concept actually includes pressure relieving and pressure reducing devices. As of June 15, also includes pressure redistributing devices (which encompasses both pressure-relieving and pressure-reducing devices). Bed (physical object) and Pressure relief equipment (physical object) combined would capture the label currently on the MDS but would not be a semantic match for the entire concept (the label plus the manual definition). <b>(rshephard 2005/05/30 14:03)</b></p> <p>May need to add a matching SNOMED concept since this is an important intervention in preventing pressure ulcers--A CMS priority <b>(bgodbout 2005/05/12 16:02)</b></p>

### Section M5c. (Turning/repositioning program)

Turning/repositioning program

c.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Pressure point protection by inspection and turning of patient (procedure)	SNOMED CT	<p>Might get good match by using logical OR between "repositioning" and "turning" concepts. <b>(dmalitz 2005/07/21 16:44)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>Pressure point protection by inspection and turning of patient (procedure) is a partial match. Combining it with Care regimes (regime/therapy) would, I think, capture the total MDS concept, because, according to the manual instructions, it must be a specific approach that is organized, planned, documented, monitored, and evaluated. In other words, it's not enough that the facility has a policy that all residents are turned every 2 hours. To be coded in M5c, it has to be a resident-specific plan. <b>(rshephard 2005/05/30 14:51)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
Positioning - therapy (regime/therapy)	SNOMED CT	
Pressure point protection by inspection and turning of patient (procedure)	SNOMED CT	
Repositioning (procedure)	SNOMED CT	
Turning patient in bed (procedure)	SNOMED CT	

### Section M5d. (Nutrition or hydration intervention to manage skin problems)

Nutrition or hydration intervention to manage skin problems

d.

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Disorder of skin (disorder)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>Item is a compound concept: nutrition or hydration specifically aimed at skin problems. None of potential matches captures this. <b>(dmalitz 2005/06/06 16:14)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>
Hydration balance regulation management (procedure)		
Nutrition management (regime/therapy)	SNOMED CT	
Rehydration therapy (procedure)	SNOMED CT	
	SNOMED CT	

## Section M5e. (Ulcer care)

Ulcer care

e.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Pressure sore care (regime/therapy)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. (<b>rshephard 2005/07/11 17:06</b>)</p> <p>This is an instruction -- shouldn't be in list. (<b>dmalitz 2005/06/02 18:07</b>)</p> <p>Re: Apelon_comment_Q REVIEWERS: is pressure ulcer implied here, or is this any possible type of pressure ulcer? M5c always has included more than just pressure ulcers. The June 15, 2005, update clarifies that ulcer care for M5c includes any intervention for treating skin problems coded in M1, M2, and M4c. That includes most skin problems, but it leaves out skin ulcers coded in M6 (foot problems and care). Because of the specificity of the MDS concept when the manual definition is taken into consideration, it will be very difficult to match in SNOMED if the manual definition is to be encompassed in the SNOMED concept rather than just the concept that is label on the form. (<b>rshephard 2005/05/30 15:15</b>)</p>
Partial Match Term	Partial Match Term Namespace	-----
Skin ulcer (disorder)	SNOMED CT	

## Section M5f. (Surgical wound care)

Surgical wound care

f.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Post-surgical wound care (procedure)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. (<b>rshephard 2005/07/11 17:06</b>)</p> <p>"Post-surgical wound care" sounds like a good match. But the term has only a single subconcept so it's hard to judge what this term might include. (<b>dmalitz 2005/06/16 10:50</b>)</p> <p>Are there no potential matches? (<b>dmalitz 2005/06/06 16:18</b>)</p> <p>This is an instruction -- shouldn't be in list. (<b>dmalitz 2005/06/02 18:07</b>)</p>
Partial Match Term	Partial Match Term Namespace	-----

Dressing of wound (procedure)	SNOMED CT	
Irrigation of wound (procedure)	SNOMED CT	
Removal of suture (procedure)	SNOMED CT	
Skin cleansing procedure (regime/therapy)	SNOMED CT	
Soaking off dressing (procedure)	SNOMED CT	

### **Section M5g. (Application of dressings (with or without topical medications) other than to feet)**

Application of dressings (with or without topical medications) other than to feet

g.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
-----	-----	This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b>
		This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b>

### **Section M5h. (Application of ointments/medications (other than to feet))**

Application of ointments/medications (other than to feet)

h.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Skin care: topical treatments (regime/therapy)	SNOMED CT	This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b>
		This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b>

### **Section M5i. (Other preventative or protective skin care (other than to feet))**

Other preventative or protective skin care (other than to feet)

i.

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Skin care (regime/therapy)	SNOMED CT	Skin care (regime/therapy) [SNOMED CT] is not a best match also because the MDS concept includes preventative care only. It does not include treatment of skin problems, which the SNOMED concept does include. I'm not sure what Skin breakdown control management (procedure) is, but it doesn't sound like a regime/therapy that would be skin care. <b>(rshephard 2005/07/13 18:20)</b>
		This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b>
		This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b>

Partial Match Term	Partial Match Term Namespace	-----
Skin breakdown control management (procedure)	SNOMED CT	

### Section M5j. (NONE OF ABOVE)

NONE OF ABOVE	j.
---------------	----

NO MATCHES FOUND

### Section M6 (FOOT PROBLEMS AND CARE)

6.	FOOT PROBLEMS AND CARE	(Check all that apply during last 7 days)	
		Resident has one or more foot problems—e.g., corns, callouses, bunions, hammer toes, overlapping toes, pain, structural problems	a.
		Infection of the foot—e.g., cellulitis, purulent drainage	b.
		Open lesions on the foot	c.
		Nails/calluses trimmed during last 90 days	d.
		Received preventative or protective foot care (e.g., used special shoes, inserts, pads, toe separators)	e.
		Application of dressings (with or without topical medications)	f.
		NONE OF ABOVE	g.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Foot structure (body structure)	SNOMED CT	Label, not item. Also, M6h (none of the above) has been omitted from review list. (dmalitz 2005/07/21 16:49)  This is a label, so maybe a semantic match isn't necessary..? (rshephard 2005/07/13 19:25)  I don't think Foot structure (body structure) really helps here. Foot problem (finding) has no definition in SNOMED and neither does Foot care (regime/therapy), but I think each concept is probably too broad for a best match even if they are combined. (rshephard 2005/07/13 19:24)
Partial Match Term	Partial Match Term Namespace	-----
Foot problem (finding)	SNOMED CT	

### Section M6a. (Resident has one or more foot problems...)

Resident has one or more foot problems—e.g., corns, callouses, bunions, hammer toes, overlapping toes, pain, structural problems	a.
--	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Foot problem (finding) Disorder of foot (disorder)	SNOMED CT SNOMED CT	I don't know how you'd decide whether to match with "disorder of foot" or "foot problem". The disorder term has lots of children -- I don't know whether all of these

		<p>would be included in the MDS definition. The "foot problem" term, in contrast, has no children and is completely unspecified. <b>(dmalitz 2005/07/21 16:53)</b></p> <p>The MDS concept seems to include the universe of foot problems, but that really isn't clear, in which case Disorder of the foot (disorder) and Foot problem (finding) would be best matches. <b>(rshephard 2005/07/13 19:29)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Foot structure (body structure) Hammer toe (disorder)	SNOMED CT SNOMED CT	

### Section M6b. (*Infection of the foot*)

Infection of the foot—e.g., cellulitis, purulent drainage

b.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Infection of foot (disorder)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>"Infection of foot" seems like a best match to me. <b>(dmalitz 2005/06/06 16:21)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>
<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	-----
Unspecified local infection of skin and subcutaneous tissue [686.9]	ICD-9-CM	
<b>Partial Match Term</b>	<b>Partial Match Namespace</b>	-----
Cellulitis (disorder) Foot structure (body structure) Purulent discharge (morphologic abnormality)	SNOMED CT SNOMED CT SNOMED CT	

### Section M6c. (*Open lesions on the foot*)

Open lesions on the foot

c.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Open wound of foot (disorder)	SNOMED CT	<p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p>

		<p>Re: is "soft tissue lesion of foot region" a best match? I think this refers to lesions that are not open as well as to open lesions. The MDS item is specific to open lesions of the foot. Soft tissue lesion of the foot probably is a broader match. <b>(rshephard 2005/06/14 11:51)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>It seems as if Open wound of foot (disorder) refers to injuries to the foot. If that is the case, it would be a partial rather than a best match, since M6c encompasses all type of lesions on the foot that are open. <b>(rshephard 2005/05/30 15:55)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Namespace</b>	-----
Foot structure (body structure) Soft tissue lesion of foot region (disorder)	SNOMED CT SNOMED CT	

### Section M6d. (Nails/calluses trimmed during last 90 days)

Nails/calluses trimmed during last 90 days

d.

<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Foot structure (body structure)	SNOMED CT	<p>Foot structure (body structure) is much too broad to be helpful here. Nail bed of toe (body structure) is not really applicable - it is the nail itself that applies. <b>(rshephard 2005/07/13 19:37)</b></p> <p>Cutting toe nails (procedure) combined with Reduction of Callus (procedure) would be a best match EXCEPT that the MDS instructions are specific to who does the procedure. This item is designed to capture professional staff time, not nursing assistant time. <b>(rshephard 2005/07/13 19:36)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Namespace</b>	-----
Nail bed of toe (body structure)	SNOMED CT	

### Section M6e. (Received preventative or protective foot care...)

Received preventative or protective foot care (e.g., used special shoes, inserts, pads, toe separators)

e.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Foot care (regime/therapy)	SNOMED CT	Preventative procedure (procedure) [synonym is Preventative treatment] combined with Foot care (regime/therapy) may be a best match (however

		<p>clumsy), though in the absence of SNOMED definitions, it isn't completely clear. <b>(rshephard 2005/07/13 19:52)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p>
<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	-----
Foot care management (procedure)	SNOMED CT	
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Foot structure (body structure)	SNOMED CT	

### Section M6f. (*Application of dressings (with or without topical medications)*)

Application of dressings (with or without topical medications)

f.

<b>Best Match Term</b>	<b>Best Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Application of dressing (procedure)	SNOMED CT	<p>Application of dressing (procedure) and Foot structure (body structure) combined would be a best match. <b>(rshephard 2005/07/13 19:56)</b></p> <p>This is the lookback period. Not applicable to this part of the work. <b>(rshephard 2005/07/11 17:06)</b></p> <p>I think this match would have to be foot-specific to be considered a best match. <b>(dmalitz 2005/06/06 16:23)</b></p> <p>This is an instruction -- shouldn't be in list. <b>(dmalitz 2005/06/02 18:07)</b></p> <p>This is a best match if we are capturing the item label only. If we are trying to capture the full intent of the item, then it would be a broader match, since the concept is application of dressings to the feet. <b>(rshephard 2005/05/30 15:59)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Foot structure (body structure)	SNOMED CT	
Region of foot (body structure)	SNOMED CT	

### Section M6g. (*NONE OF ABOVE*)

NONE OF ABOVE

g.

**NO MATCHES FOUND**



Section N (ACTIVITY PURSUIT PATTERNS)

SECTION N. ACTIVITY PURSUIT PATTERNS

1.	TIME AWAKE	(Check appropriate time periods over last 7 days) Resident awake all or most of time (i.e., naps no more than one hour per time period) in the: Morning <input type="checkbox"/> Evening <input type="checkbox"/> Afternoon <input type="checkbox"/> NONE OF ABOVE <input type="checkbox"/>	
(If resident is comatose, skip to Section O)			
2.	AVERAGE TIME INVOLVED IN ACTIVITIES	(When awake and not receiving treatments or ADL care) 0. Most—more than 2/3 of time      2. Little—less than 1/3 of time 1. Some—from 1/3 to 2/3 of time      3. None	
3.	PREFERRED ACTIVITY SETTINGS	(Check all settings in which activities are preferred) Own room <input type="checkbox"/> Outside facility <input type="checkbox"/> Day/activity room <input type="checkbox"/> Inside NH/off unit <input type="checkbox"/> NONE OF ABOVE <input type="checkbox"/>	
4.	GENERAL ACTIVITY PREFERENCES (adapted to resident's current abilities)	(Check all PREFERENCES whether or not activity is currently available to resident) Trips/shopping <input type="checkbox"/> Cards/other games <input type="checkbox"/> Walking/wheeling outdoors <input type="checkbox"/> Crafts/arts <input type="checkbox"/> Watching TV <input type="checkbox"/> Exercise/sports <input type="checkbox"/> Gardening or plants <input type="checkbox"/> Music <input type="checkbox"/> Talking or conversing <input type="checkbox"/> Reading/writing <input type="checkbox"/> Helping others <input type="checkbox"/> Spiritual/religious activities <input type="checkbox"/> NONE OF ABOVE <input type="checkbox"/>	
5.	PREFERS CHANGE IN DAILY ROUTINE	Code for resident preferences in daily routines 0. No change      1. Slight change      2. Major change a. Type of activities in which resident is currently involved b. Extent of resident involvement in activities	

NO MATCHES ATTEMPTED

Section N1 (TIME AWAKE)

1.	TIME AWAKE	(Check appropriate time periods over last 7 days) Resident awake all or most of time (i.e., naps no more than one hour per time period) in the: Morning <input type="checkbox"/> Evening <input type="checkbox"/> Afternoon <input type="checkbox"/> NONE OF ABOVE <input type="checkbox"/>	
(If resident is comatose, skip to Section O)			

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Awake (finding)	SNOMED CT	
Consciousness related finding (finding)	SNOMED CT	
Mental alertness (observable entity)	SNOMED CT	
Morning (qualifier value)	SNOMED CT	
Wakefulness finding (finding)	SNOMED CT	

### Section N1a. (Morning)

Morning

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Morning (qualifier value)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Awake (finding) Consciousness related finding (finding) Mental alertness (observable entity) Temporal periods of day (qualifier value) Wakefulness finding (finding) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section N1b. (Afternoon)

Afternoon

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
During afternoon (qualifier value)	SNOMED CT	Instruction, not item. <b>(dmalitz 2005/06/06 16:26)</b>  No match here that captures entire concept (being generally awake and the time of day). <b>(dmalitz 2005/06/06 16:25)</b>  During afternoon (qualifier value) [SNOMED CT] is best match, unless we are trying to capture the definition in addition to the label. In that case, would need to match "from noon to 5 p.m." <b>(rshephard 2005/05/31 19:56)</b>  RE: Apelon_comment_Q "schema change? This type of ""response"" may really be instructional material that does not merit matching". I agree - and I think we need to discuss this issue and come to some agreement about exactly what we should be matching. <b>(rshephard 2005/05/31 19:53)</b>
Partial Match Term	Partial Match Term Namespace	-----
Awake (finding) Temporal periods of day (qualifier value) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	

### Section N1c. (Evening)

Evening

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Evening (qualifier value)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Awake (finding) Consciousness related finding (finding) Evening (qualifier value) Mental alertness (observable entity) Temporal periods of day (qualifier value) Wakefulness finding (finding) week (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### [Section N1d. \(NONE OF ABOVE\)](#)

NONE OF ABOVE	d.
---------------	----

NO MATCHES FOUND

### [Section N2 \(AVERAGE TIME INVOLVED IN ACTIVITIES\)](#)

2.	AVERAGE TIME INVOLVED IN ACTIVITIES	(When awake and not receiving treatments or ADL care)	
		0. Most—more than 2/3 of time 1. Some—from 1/3 to 2/3 of time	2. Little—less than 1/3 of time 3. None

NO MATCHES ATTEMPTED

### [Section N2.0 \(Most – more than 2/3 of time\)](#)

0. Most—more than 2/3 of time
-------------------------------

NO MATCHES ATTEMPTED

### [Section N2.1 \(Some – from 1/3 to 2/3 of time\)](#)

1. Some—from 1/3 to 2/3 of time
---------------------------------

NO MATCHES ATTEMPTED

### [Section N2.2 \(Little – less than 1/3 of time\)](#)

2. Little—less than 1/3 of time
---------------------------------

NO MATCHES ATTEMPTED

### [Section N2.3 \(None\)](#)

3. None

NO MATCHES ATTEMPTED

Section N3 (*PREFERRED ACTIVITY SETTINGS*)

3.	PREFERRED ACTIVITY SETTINGS	(Check all settings in which activities are preferred)			
		Own room	a.	Outside facility	
		Day/activity room	b.		d.
		Inside NH/off unit	c.		NONE OF ABOVE

NO MATCHES ATTEMPTED

Section N3a. (*Own room*)

Own room	a.
----------	----

NO MATCHES ATTEMPTED

Section N3b. (*Day/activity room*)

Day/activity room	b.
-------------------	----

NO MATCHES ATTEMPTED

Section N3c. (*Inside NH/off unit*)

Inside NH/off unit	c.
--------------------	----

NO MATCHES ATTEMPTED

Section N3d. (*Outside facility*)

Outside facility	d.
------------------	----

NO MATCHES ATTEMPTED

Section N3e. (*NONE OF ABOVE*)

NONE OF ABOVE	e.
---------------	----

NO MATCHES ATTEMPTED

Section N4 (GENERAL ACTIVITY PREFERENCES)

4.	GENERAL ACTIVITY PREFER- ENCES (adapted to resident's current abilities)	(Check all PREFERENCES whether or not activity is currently available to resident)			
		Cards/other games	a.	Trips/shopping	g.
		Crafts/arts	b.	Walking/wheeling outdoors	h.
		Exercise/sports	c.	Watching TV	i.
		Music	d.	Gardening or plants	j.
		Reading/writing	e.	Talking or conversing	k.
		Spiritual/religious activities	f.	Helping others	l.
				NONE OF ABOVE	m.

NO MATCHES ATTEMPTED

Section N4a. (Cards/other games)

Cards/other games	a.
-------------------	----

NO MATCHES ATTEMPTED

Section N4b. (Crafts/arts)

Crafts/arts	b.
-------------	----

NO MATCHES ATTEMPTED

Section N4c. (Exercise/sports)

Exercise/sports	c.
-----------------	----

NO MATCHES ATTEMPTED

Section N4d. (Music)

Music	d.
-------	----

NO MATCHES ATTEMPTED

Section N4e. (Reading/writing)

Reading/writing	e.
-----------------	----

NO MATCHES ATTEMPTED

**Section N4f. (Spiritual/religious activities)**

Spiritual/religious activities	f.
--------------------------------	----

NO MATCHES ATTEMPTED

**Section N4g. (Trips/shopping)**

Trips/shopping	g.
----------------	----

NO MATCHES ATTEMPTED

**Section N4h. (Walking/wheeling outdoors)**

Walking/wheeling outdoors	h.
---------------------------	----

NO MATCHES ATTEMPTED

**Section N4i. (Watching TV)**

Watching TV	i.
-------------	----

NO MATCHES ATTEMPTED

**Section N4j. (Gardening or plants)**

Gardening or plants	j.
---------------------	----

NO MATCHES ATTEMPTED

**Section N4k. (Talking or conversing)**

Talking or conversing	k.
-----------------------	----

NO MATCHES ATTEMPTED

**Section N4l. (Helping others)**

Helping others	l.
----------------	----

NO MATCHES ATTEMPTED

**Section N4m. (NONE OF ABOVE)**

NONE OF ABOVE

m.

NO MATCHES ATTEMPTED

**Section N5 (PREFERS CHANGE IN DAILY ROUTINE)**

5.	PREFERS CHANGE IN DAILY ROUTINE	Code for resident preferences in daily routines	
		0. No change	1. Slight change
		2. Major change	
	a.	Type of activities in which resident is currently involved	
	b.	Extent of resident involvement in activities	

NO MATCHES ATTEMPTED

**Section N5.0 (No change)**

0. No change

NO MATCHES ATTEMPTED

**Section N5.1 (Slight change)**

1. Slight change

NO MATCHES ATTEMPTED

**Section N5.2 (Major change)**

2. Major change

NO MATCHES ATTEMPTED

**Section N5a. (Type of activities in which resident is currently involved w/ code for resident preferences in daily routines)**

a. Type of activities in which resident is currently involved

NO MATCHES ATTEMPTED

**Section N5a.0 (Type of activities in which resident is currently involved w/ code for resident preferences in daily routines = 0)**

a. Type of activities in which resident is currently involved

0

NO MATCHES ATTEMPTED

**Section N5a.1 (Type of activities in which resident is currently involved w/ code for resident preferences in daily routines = 1)**

a. Type of activities in which resident is currently involved

1

NO MATCHES ATTEMPTED

Section N5a.2 (Type of activities in which resident is currently involved w/ code for resident preferences in daily routines = 2)

a. Type of activities in which resident is currently involved	2
---	---

NO MATCHES ATTEMPTED

Section N5b. (Extent of resident involvement in activities w/ code for resident preferences in daily routines)

b. Extent of resident involvement in activities	
---	--

NO MATCHES ATTEMPTED

Section N5b.0 (Extent of resident involvement in activities w/ code for resident preferences in daily routines = 0)

b. Extent of resident involvement in activities	0
---	---

NO MATCHES ATTEMPTED

Section N5b.1 (Extent of resident involvement in activities w/ code for resident preferences in daily routines = 1)

b. Extent of resident involvement in activities	1
---	---

NO MATCHES ATTEMPTED

Section N5b.2 (Extent of resident involvement in activities w/ code for resident preferences in daily routines = 2)

b. Extent of resident involvement in activities	2
---	---

NO MATCHES ATTEMPTED

Section O (MEDICATIONS)

SECTION O. MEDICATIONS

1.	NUMBER OF MEDICATIONS	(Record the number of different medications used in the last 7 days; enter "0" if none used)		
2.	NEW MEDICATIONS	(Resident currently receiving medications that were initiated during the last 90 days) 0. No                      1. Yes		
3.	INJECTIONS	(Record the number of DAYS injections of any type received during the last 7 days; enter "0" if none used)		
4.	DAYS RECEIVED THE FOLLOWING MEDICATION	(Record the number of DAYS during last 7 days; enter "0" if not used. Note—enter "1" for long-acting meds used less than weekly)		
	a. Antipsychotic		d. Hypnotic	
	b. Antianxiety		e. Diuretic	
	c. Antidepressant			



Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Administration of prescribed medications and solutions (procedure)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Pharmaceutical / biologic product (product)	SNOMED CT	

### Section O1 (NUMBER OF MEDICATIONS)

1.	NUMBER OF MEDICATIONS	(Record the number of different medications used in the last 7 days, enter "0" if none used)		
----	-----------------------	--	--	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Change of medication (procedure)	SNOMED CT	
New medication added (finding)	SNOMED CT	
New medication commenced (finding)	SNOMED CT	
Number (attribute)	SNOMED CT	

### Section O2 (NEW MEDICATIONS)

2.	NEW MEDICATIONS	(Resident currently receiving medications that were initiated during the last 90 days) 0. No                      1. Yes	
----	-----------------	---	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
New medication added (finding)	SNOMED CT	There is no review option on the screen, but it seems that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. (rshephard 2005/05/15 15:10)
No (qualifier value)	SNOMED CT	
Yes (qualifier value)	SNOMED CT	

### Section O2.0 (No)

0. No

See Section O2 (NEW MEDICATIONS)

### Section O2.1 (Yes)

1. Yes

See Section O2 (NEW MEDICATIONS)

### Section O3 (INJECTIONS)

3.	INJECTIONS	(Record the number of <b>DAYS</b> injections of any type received during the last 7 days; enter "0" if none used)	
----	------------	---	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Injection (procedure)	SNOMED CT	<p>I think that the number of days should be a part of the concept "injections", since the question actually is: How many days the resident receive injections? (rshephard 2005/06/08 18:26)</p> <p>Injection is a best match if taken as the stand-alone concept that is the label on the form - that is, if "Record the number of Days injections of any type..." is a separate concept. If the MDS concept we're matching is "Days of Injections," then there is no best match. (rshephard 2005/06/08 18:23)</p> <p>Instruction, not item. (dmalitz 2005/06/06 16:39)</p> <p>The potential matches capture the "injection" concept, but not how the item is coded (number of days with injections). (dmalitz 2005/06/06 16:28)</p>
Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value)	SNOMED CT	

#### Section O4 (DAYS RECEIVED THE FOLLOWING MEDICATION)

4.	DAYS RECEIVED THE FOLLOWING MEDICATION	(Record the number of <b>DAYS</b> during last 7 days; enter "0" if not used. Note—enter "1" for long-acting meds used less than weekly)	
	a. Antipsychotic		d. Hypnotic
	b. Antianxiety		e. Diuretic
	c. Antidepressant		

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
History of - regular medication (context-dependent category)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value)	SNOMED CT	

#### Section O4a. (Antipsychotic)

a. Antipsychotic	
------------------	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
[CN700] ANTIPSYCHOTICS Anti-psychotic agent (product)	NDF-RT SNOMED CT	

Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value) Hypnotic agent (substance)	SNOMED CT SNOMED CT	

#### Section O4b. (*Antianxiety*)

b. Antianxiety

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Anxiolytic (product) NO_NDFRT_BEST_MATCH	SNOMED CT MDS	
Broader Match Term	Broader Match Term Namespace	-----
[CN000] CENTRAL NERVOUS SYSTEM MEDICATIONS	NDF-RT	
Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value) Hypnotic agent (substance)	SNOMED CT SNOMED CT	

#### Section O4c. (*Antidepressant*)

c. Antidepressant

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
[CN600] ANTIDEPRESSANTS Antidepressant (product)	NDF-RT SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Antidepressant (substance) days/week (qualifier value) Hypnotic agent (substance)	SNOMED CT SNOMED CT SNOMED CT	

#### Section O4d. (*Hypnotic*)

d. Hypnotic

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Hypnotics (product) NO_NDFRT_BEST_MATCH	SNOMED CT MDS	
Partial Match Term	Partial Match Term Namespace	-----
[CN300] SEDATIVES/HYPNOTICS days/week (qualifier value) Hypnotic agent (substance)	NDF-RT SNOMED CT SNOMED CT	

#### Section O4e. (*DIURETIC*)

e. Diuretic

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
[CV700] DIURETICS Diuretic (product)	NDF-RT SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value) Hypnotic agent (substance)	SNOMED CT SNOMED CT	

## **Section P (SPECIAL TREATMENTS AND PROCEDURES)**

### **SECTION P. SPECIAL TREATMENTS AND PROCEDURES**

1.	SPECIAL TREATMENTS, PROCEDURES, AND PROGRAMS	a. SPECIAL CARE—Check treatments or programs received during the last 14 days			
		TREATMENTS			
		Chemotherapy	a.	Ventilator or respirator	l.
		Dialysis	b.	PROGRAMS	
		IV medication	c.	Alcohol/drug treatment program	m.
		Intake/output	d.	Alzheimer's/dementia special care unit	n.
		Monitoring acute medical condition	e.	Hospice care	o.
		Ostomy care	f.	Pediatric unit	p.
		Oxygen therapy	g.	Respite care	q.
		Radiation	h.	Training in skills required to return to the community (e.g., taking medications, house work, shopping, transportation, ADLs)	r.
		Suctioning	i.		
		Tracheostomy care	j.	NONE OF ABOVE	s.
		Transfusions	k.		
b. THERAPIES - Record the number of days and total minutes each of the following therapies was administered (for at least 15 minutes a day) in the last 7 calendar days (Enter 0 if none or less than 15 min. daily) [Note—count only post admission therapies]					
(A) = # of days administered for 15 minutes or more				DAYS	MIN
(B) = total # of minutes provided in last 7 days				(A)	(B)
a. Speech - language pathology and audiology services					
b. Occupational therapy					
c. Physical therapy					
d. Respiratory therapy					
e. Psychological therapy (by any licensed mental health professional)					

2.	INTERVENTION PROGRAMS FOR MOOD, BEHAVIOR, COGNITIVE LOSS	(Check all interventions or strategies used in last 7 days—no matter where received)	
		Special behavior symptom evaluation program	a.
		Evaluation by a licensed mental health specialist in last 90 days	b.
		Group therapy	c.
		Resident-specific deliberate changes in the environment to address mood/behavior patterns—e.g., providing bureau in which to rummage	d.
		Reorientation—e.g., cueing	e.
		NONE OF ABOVE	f.
3.	NURSING REHABILITATION/ RESTORATIVE CARE	Record the NUMBER OF DAYS each of the following rehabilitation or restorative techniques or practices was provided to the resident for more than or equal to 15 minutes per day in the last 7 days (Enter 0 if none or less than 15 min. daily.)	
		a. Range of motion (passive)	f. Walking
		b. Range of motion (active)	g. Dressing or grooming
		c. Splint or brace assistance	h. Eating or swallowing
		TRAINING AND SKILL PRACTICE IN:	i. Amputation/prosthesis care
		d. Bed mobility	j. Communication
		e. Transfer	k. Other
4.	DEVICES AND RESTRAINTS	(Use the following codes for last 7 days:) 0. Not used 1. Used less than daily 2. Used daily	
		Bed rails	
		a. — Full bed rails on all open sides of bed	
		b. — Other types of side rails used (e.g., half rail, one side)	
		c. Trunk restraint	
		d. Limb restraint	
		e. Chair prevents rising	
5.	HOSPITAL STAY(S)	Record number of times resident was admitted to hospital with an overnight stay in last 90 days (or since last assessment if less than 90 days). (Enter 0 if no hospital admissions)	
6.	EMERGENCY ROOM (ER) VISIT(S)	Record number of times resident visited ER without an overnight stay in last 90 days (or since last assessment if less than 90 days). (Enter 0 if no ER visits)	
7.	PHYSICIAN VISITS	In the LAST 14 DAYS (or since admission if less than 14 days in facility) how many days has the physician (or authorized assistant or practitioner) examined the resident? (Enter 0 if none)	
8.	PHYSICIAN ORDERS	In the LAST 14 DAYS (or since admission if less than 14 days in facility) how many days has the physician (or authorized assistant or practitioner) changed the resident's orders? Do not include order renewals without change. (Enter 0 if none)	
9.	ABNORMAL LAB VALUES	Has the resident had any abnormal lab values during the last 90 days (or since admission)?	
		0. No                      1. Yes	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Palliative procedure (procedure)	SNOMED CT	

## [Section P1 \(SPECIAL TREATMENTS, PROCEDURES, AND PROGRAMS\)](#)

1.	SPECIAL TREATMENTS, PROCEDURES, AND PROGRAMS	a. SPECIAL CARE—Check treatments or programs received during the last 14 days																																															
		<table border="1"> <tr> <td>TREATMENTS</td> <td></td> <td>Ventilator or respirator</td> <td></td> </tr> <tr> <td>Chemotherapy</td> <td>a.</td> <td>PROGRAMS</td> <td></td> </tr> <tr> <td>Dialysis</td> <td>b.</td> <td>Alcohol/drug treatment program</td> <td></td> </tr> <tr> <td>IV medication</td> <td>c.</td> <td></td> <td>m.</td> </tr> <tr> <td>Intake/output</td> <td>d.</td> <td>Alzheimer's/dementia special care unit</td> <td>n.</td> </tr> <tr> <td>Monitoring acute medical condition</td> <td>e.</td> <td>Hospice care</td> <td>o.</td> </tr> <tr> <td>Ostomy care</td> <td>f.</td> <td>Pediatric unit</td> <td>p.</td> </tr> <tr> <td>Oxygen therapy</td> <td>g.</td> <td>Respite care</td> <td>q.</td> </tr> <tr> <td>Radiation</td> <td>h.</td> <td>Training in skills required to return to the community (e.g., taking medications, house work, shopping, transportation, ADLs)</td> <td></td> </tr> <tr> <td>Suctioning</td> <td>i.</td> <td></td> <td>r.</td> </tr> <tr> <td>Tracheostomy care</td> <td>j.</td> <td></td> <td></td> </tr> <tr> <td>Transfusions</td> <td>k.</td> <td>NONE OF ABOVE</td> <td>s.</td> </tr> </table>	TREATMENTS		Ventilator or respirator		Chemotherapy	a.	PROGRAMS		Dialysis	b.	Alcohol/drug treatment program		IV medication	c.		m.	Intake/output	d.	Alzheimer's/dementia special care unit	n.	Monitoring acute medical condition	e.	Hospice care	o.	Ostomy care	f.	Pediatric unit	p.	Oxygen therapy	g.	Respite care	q.	Radiation	h.	Training in skills required to return to the community (e.g., taking medications, house work, shopping, transportation, ADLs)		Suctioning	i.		r.	Tracheostomy care	j.			Transfusions	k.	NONE OF ABOVE
TREATMENTS		Ventilator or respirator																																															
Chemotherapy	a.	PROGRAMS																																															
Dialysis	b.	Alcohol/drug treatment program																																															
IV medication	c.		m.																																														
Intake/output	d.	Alzheimer's/dementia special care unit	n.																																														
Monitoring acute medical condition	e.	Hospice care	o.																																														
Ostomy care	f.	Pediatric unit	p.																																														
Oxygen therapy	g.	Respite care	q.																																														
Radiation	h.	Training in skills required to return to the community (e.g., taking medications, house work, shopping, transportation, ADLs)																																															
Suctioning	i.		r.																																														
Tracheostomy care	j.																																																
Transfusions	k.	NONE OF ABOVE	s.																																														
b. THERAPIES - Record the number of days and total minutes each of the following therapies was administered (for at least 15 minutes a day) in the last 7 calendar days (Enter 0 if none or less than 15 min. daily) [Note—count only post admission therapies]																																																	
(A) = # of days administered for 15 minutes or more			DAYS	MIN																																													
(B) = total # of minutes provided in last 7 days			(A)	(B)																																													
a. Speech - language pathology and audiology services																																																	
b. Occupational therapy																																																	
c. Physical therapy																																																	
d. Respiratory therapy																																																	
e. Psychological therapy (by any licensed mental health professional)																																																	

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Regimes and therapies (regime/therapy)	SNOMED CT	

### [Section P1a. \(SPECIAL CARE\)](#)

<b>a. SPECIAL CARE</b> —Check treatments or programs received during the last 14 days		
<b>TREATMENTS</b>		
Chemotherapy	a.	Ventilator or respirator
Dialysis	b.	<b>PROGRAMS</b>
IV medication	c.	Alcohol/drug treatment program
Intake/output	d.	Alzheimer's/dementia special care unit
Monitoring acute medical condition	e.	Hospice care
Ostomy care	f.	Pediatric unit
Oxygen therapy	g.	Respite care
Radiation	h.	Training in skills required to return to the community (e.g., taking medications, house work, shopping, transportation, ADLs)
Suctioning	i.	
Tracheostomy care	j.	
Transfusions	k.	NONE OF ABOVE

NO MATCHES FOUND

### Section P1a.a (Chemotherapy)

<b>TREATMENTS</b>	
Chemotherapy	a.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Chemotherapy (procedure) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	

### Section P1a.b (Dialysis)

Dialysis	b.
----------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Renal dialysis (procedure)	MDS SNOMED CT	

### Section P1a.c (IV medication)

IV medication	c.
---------------	----

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Medication administration: intravenous (procedure)	SNOMED CT	This is the best match if we are not trying to

If pain present,check all sites that apply inlast 7 days	MDS	encompass the manual instructions in the concept. If we are, the details of the manual definition are extensive enough that there is no best match. (rshephard 2005/05/31 20:03)
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Injection of contrast media for radiography by catheter (procedure) Injection of spinal epidural space (procedure) Intraspinal analgesic administration (procedure) Intrathecal administration of treatment (procedure) Introduction of therapeutic substance into vein (procedure) Medication administration: intrathecal (procedure)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT  SNOMED CT SNOMED CT	

### [Section P1a.d \(Intake/output\)](#)

Intake/output

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Measuring intake and output (procedure)	MDS SNOMED CT	

### [Section P1a.e \(Monitoring acute medical condition\)](#)

Monitoring acute medical condition

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Medical examination for suspected condition (procedure)	SNOMED CT	

### [Section P1a.f \(Ostomy care\)](#)

Ostomy care

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Enterostomy management and care (regime/therapy) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Ostomy care management (procedure)	SNOMED CT	

### [Section P1a.g \(Oxygen therapy\)](#)



Oxygen therapy

g.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Oxygen therapy (procedure)	MDS SNOMED CT	

### [Section P1a.h \(Radiation\)](#)

Radiation

h.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Radiation oncology AND/OR radiotherapy (procedure)	MDS SNOMED CT	

### [Section P1a.i \(Suctioning\)](#)

Suctioning

i.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	I'll defer to Rena on this one! (dmalitz 2005/06/06 16:45)
Partial Match Term	Partial Match Term Namespace	-----
Airway suction technique (procedure) Nasopharyngeal suction (procedure) Nasotracheal aspiration (procedure)	SNOMED CT SNOMED CT SNOMED CT	

### [Section P1a.j \(Tracheostomy care\)](#)

Tracheostomy care

j.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Tracheostomy care (regime/therapy)	MDS SNOMED CT	

### [Section P1a.k \(Transfusions\)](#)

Transfusions

k.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Transfusion (procedure)	MDS SNOMED CT	This would not be a best match if we are encompassing the manual definition and the label on the form. (rshephard 2005/05/31 20:11)

### [Section P1a.l \(Ventilator or respirator\)](#)

Ventilator or respirator

l.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Artificial respiration (procedure) Ventilator equipment (physical object) If pain present,check all sites that apply inlast 7 days	SNOMED CT SNOMED CT MDS	This seems to be equipment, not the procedure. <b>(dmalitz 2005/06/06 16:48)</b>  The manual instructions describe "any type of electrically or pneumatically powered closed system mechanical ventilatory support devices." However, item P1l refers directly to the heading "Special Care treatments." The intent of the item is to capture treatments. Maybe Assisted ventilation therapy, pressure or volume preset, initiation and management as a match. <b>(rshephard 2005/06/03 20:43)</b>
Partial Match Term	Partial Match Term Namespace	-----
Weaning from mechanically assisted ventilation (procedure)	SNOMED CT	

### Section P1a.m (Alcohol/drug treatment program)

#### PROGRAMS

Alcohol/drug treatment  
program

m.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Substance use therapy (regime/therapy) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	
Partial Match Term	Partial Match Term Namespace	-----
Alcohol rehabilitation and detoxification (regime/therapy) Drug rehabilitation and detoxification (regime/therapy) History of (contextual qualifier) (qualifier value) Mental health addiction programmes (procedure)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section P1a.n (Alzheimer's/dementia special care unit)

Alzheimer's/dementia special  
care unit

n.

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	

Broader Match Term	Broader Match Term Namespace	-----
Special care unit (environment)	SNOMED CT	

### [Section P1a.o \(\*Hospice care\*\)](#)

Hospice care

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Hospice care (regime/therapy) If pain present,check all sites that apply inlast 7 days Special care unit (environment)	SNOMED CT MDS SNOMED CT	

### [Section P1a.p \(\*Pediatric unit\*\)](#)

Pediatric unit

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Pediatric department (environment)	MDS SNOMED CT	

### [Section P1a.q \(\*Respite care\*\)](#)

Respite care

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days Respite care - specialty (qualifier value) Respite care of patient (regime/therapy)	MDS SNOMED CT SNOMED CT	

### [Section P1a.r \(\*Training in skills required to return to the community...\*\)](#)

Training in skills required to  
return to the community (e.g.,  
taking medications, house  
work, shopping, transportation,  
ADLs)

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Community living skills training (regime/therapy) If pain present,check all sites that apply inlast 7 days	SNOMED CT MDS	

### [Section P1a.s \(\*NONE OF ABOVE\*\)](#)

NONE OF ABOVE

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
If pain present,check all sites that apply inlast 7 days	MDS	

## Section P1b. (THERAPIES)

b.THERAPIES - Record the number of days and total minutes each of the following therapies was administered (for at least 15 minutes a day) in the last 7 calendar days (Enter 0 if none or less than 15 min. daily) [Note—count only post admission therapies] (A) = # of days administered for 15 minutes or more (B) = total # of minutes provided in last 7 days		DAYS		MIN		
		(A)	(B)			
a. Speech - language pathology and audiology services						
b. Occupational therapy						
c. Physical therapy						
d. Respiratory therapy						
e. Psychological therapy (by any licensed mental health professional)						

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Therapy (regime/therapy)	SNOMED CT	

## Section P1bA (# of days administered for 15 minutes or more)

(A) = # of days administered for 15 minutes or more

NO MATCHES FOUND

## Section P1bB (total # of minutes provided in last 7 days)

(B) = total # of minutes provided in last 7 days

NO MATCHES FOUND

## Section P1ba. (Speech – language pathology and audiology services)

a. Speech - language pathology and audiology services					
---	--	--	--	--	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Speech therapy (regime/therapy)	SNOMED CT	

## P1baA. (Speech – language pathology or audiology services w/ # of days administered for 15 minutes or more)

a. Speech - language pathology and audiology services	
---	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
days/week (qualifier value)	SNOMED CT	This concept is a part of the concepts P1baA, P1bbA, etc. (rshephard 2005/06/08 19:42)
Occupational therapy (regime/therapy)	SNOMED CT	
Occupational therapy service (qualifier value)	SNOMED CT	
Speech therapy (regime/therapy)	SNOMED CT	
		SNOMED concept does not include number of days of

		<p>ST and does not recognize the limitation that it must be administered for 15 minutes or more. <b>(rshephard 2005/06/08 19:32)</b></p> <p>P1baA is number of days administered for 15 minutes or more, not provided in the last 15 days. <b>(rshephard 2005/06/08 19:23)</b></p> <p>Also, it would be impossible to capture within a snomed concept all of the Medicare requirements for coding speech therapy, such as since admission only, reasonable and necessary, exclusion of maintenance therapy, etc. I think that these are instructions that will continue to have to be included in a manual that goes along with the MDS. <b>(rshephard 2005/06/08 19:15)</b></p> <p>Occupational therapy should not be included in the concept, since this one is specific to Speech therapy. Since SNOMED concepts do not include number of days + speech therapy, no best match is the best match. <b>(rshephard 2005/06/08 19:10)</b></p> <p>Label, not item. <b>(dmalitz 2005/06/06 16:55)</b></p> <p>"Speech therapy" captures the content of the item, but not the specific way it is coded. Nor does it capture the important concept of medical necessity. <b>(dmalitz 2005/06/06 16:52)</b></p>
--	--	--

**Section P1baB. (Speech – language pathology or audiology services w/ total # of minutes provided in last 7 days)**

a. Speech - language pathology and audiology services

--	--	--	--	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Care provision regimes (regime/therapy) mins/week (qualifier value) Speech therapy (regime/therapy) Total (qualifier value)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>This concept actually is captured in the concepts P1ba(A), P1a(B), etc. <b>(rshephard 2005/06/08 19:21)</b></p> <p>Since SNOMED concepts do not include number of minutes + speech therapy, no best match is the best match. Also, it would be impossible to capture within a snomed concept all of the Medicare requirements for coding speech therapy, such as since admission only, reasonable and necessary, exclusion of maintenance therapy, etc. I think that these are instructions that will continue to have to be included in a manual that goes along with the MDS. <b>(rshephard 2005/06/08 19:17)</b></p> <p>"Speech therapy" captures the content of the item, but</p>

		not the specific way it is coded. Nor does it capture the important concept of medical necessity. <b>(dmalitz 2005/06/06 16:52)</b>
		This is a label, not an item. <b>(dmalitz 2005/06/06 16:52)</b>

### Section P1bb. (Occupational therapy)

b. Occupational therapy

--	--	--	--	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Occupational therapy (regime/therapy)	SNOMED CT	This concept actually is captured in the concepts P1ba(A), P1a(B), etc. <b>(rshephard 2005/06/08 19:21)</b>
		This is a label, not an item. <b>(dmalitz 2005/06/06 16:52)</b>
Partial Match Term	Partial Match Term Namespace	-----
Care provision regimes (regime/therapy)	SNOMED CT	
mins/week (qualifier value)	SNOMED CT	
Total (qualifier value)	SNOMED CT	

### Section P1bbA. (Occupational therapy w/ # of days administered for 15 minutes or more)

b. Occupational therapy

--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
days/week (qualifier value)	SNOMED CT	
Occupational therapy (regime/therapy)	SNOMED CT	
Occupational therapy management (procedure)	SNOMED CT	
Occupational therapy service (qualifier value)	SNOMED CT	
Seen by occupational therapy - service (finding)	SNOMED CT	

### Section P1bbB. (Occupational therapy w/ total # of minutes provided in last 7 days)

b. Occupational therapy

--	--	--	--	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Care provision regimes (regime/therapy)	SNOMED CT	SNOMED concept does not include number of minutes of OT. Also, the parameters for coding according to Medicare requirements are not captured in SNOMED concepts. <b>(rshephard 2005/06/08 19:34)</b>
mins/week (qualifier value)	SNOMED CT	This concept actually is captured in the concepts P1ba(A), P1a(B), etc. <b>(rshephard 2005/06/08 19:21)</b>
Total (qualifier value)	SNOMED CT	"Occupational therapy" captures the content of the

		<p>item, but not the specific way it is coded. Nor does it capture the important concept of medical necessity. (dmalitz 2005/06/06 16:54)</p> <p>This is a label, not an item. (dmalitz 2005/06/06 16:52)</p>
--	--	---

### Section P1bc. (Physical therapy)

c. Physical therapy

--	--	--	--	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Physical therapy procedure (regime/therapy)	SNOMED CT	<p>This concept actually is captured in the concepts P1ba(A), P1a(B), etc. (rshephard 2005/06/08 19:21)</p> <p>This is a label, not an item. (dmalitz 2005/06/06 16:52)</p>
Partial Match Term	Partial Match Term Namespace	-----
Care provision regimes (regime/therapy) mins/week (qualifier value) Total (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	

### Section P1bcA. (Physical therapy w/ # of days administered for 15 minutes or more)

c. Physical therapy

--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
days/week (qualifier value) Physical therapy management (procedure) Physical therapy procedure (regime/therapy)	SNOMED CT SNOMED CT SNOMED CT	<p>This concept is a part of the concepts P1baA, P1bbA, etc. (rshephard 2005/06/08 19:42)</p> <p>SNOMED concept does not include number of days of PT and does not recognize the limitation that it must be administered for 15 minutes or more. Also does not include Medicare parameters for coding on MDS. Physical therapy management seems to be management of PT service and not of an individual resident. (rshephard 2005/06/08 19:36)</p> <p>Label, not item. (dmalitz 2005/06/06 16:55)</p> <p>"Physical therapy" captures the content of the item, but not the specific way it is coded. Nor does it capture the important concept of medical necessity. (dmalitz 2005/06/06 16:54)</p>

### Section P1bcB. (Physical therapy w/ total # of minutes provided in last 7 days)

c. Physical therapy

--	--	--	--	--

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Care provision regimes (regime/therapy) mins/week (qualifier value) Total (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	<p>Same comment as OT and ST. The SNOMED concept does not include number of days or the Medicare parameters for coding. (<b>rshephard 2005/06/08 19:44</b>)</p> <p>This concept actually is captured in the concepts P1ba(A), P1a(B), etc. (<b>rshephard 2005/06/08 19:21</b>)</p> <p>"Physical therapy" captures the content of the item, but not the specific way it is coded. Nor does it capture the important concept of medical necessity. (<b>dmalitz 2005/06/06 16:54</b>)</p> <p>This is a label, not an item. (<b>dmalitz 2005/06/06 16:52</b>)</p>

### Section P1bd. (*Respiratory therapy*)

d. Respiratory therapy	<div><div></div><div></div><div></div><div></div><div></div></div>
------------------------	--

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Respiratory therapy (procedure)	SNOMED CT	<p>This concept actually is captured in the concepts P1ba(A), P1a(B), etc. (<b>rshephard 2005/06/08 19:21</b>)</p> <p>This is a label, not an item. (<b>dmalitz 2005/06/06 16:52</b>)</p>
Partial Match Term	Partial Match Term Namespace	-----
Care provision regimes (regime/therapy) mins/week (qualifier value) Total (qualifier value)	SNOMED CT SNOMED CT SNOMED CT	

### Section P1bdA. (*Respiratory therapy w/ # of days administered for 15 minutes or more*)

d. Respiratory therapy	<div><div></div></div>
------------------------	------------------------

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
days/week (qualifier value) Respiratory therapy (procedure)	SNOMED CT SNOMED CT	<p>The SNOMED concept Respiratory Therapy is a match as far as the treatments go, but it does not capture the time element - number of days or the definition of a day (15 minutes or more). (<b>rshephard 2005/06/10 11:17</b>)</p> <p>This concept is a part of the concepts P1baA, P1bbA, etc. (<b>rshephard 2005/06/08 19:42</b>)</p> <p>"Respiratory therapy" captures the content of the item, but not the specific way it is coded. Nor does it capture</p>



		the important concept of medical necessity. (dmalitz 2005/06/06 16:55)
		Label, not item. (dmalitz 2005/06/06 16:55)

Section P1bdB.
(Respiratory therapy w/ total # of minutes provided in last 7 days)

d. Respiratory therapy					
------------------------	--	--	--	--	--

See Section P1bd. (Respiratory therapy)

Section P1be.
(Psychological therapy (by any licensed mental health professional))

e. Psychological therapy (by any licensed mental health professional)					
---	--	--	--	--	--

NO MATCHES FOUND

Section P1beA.
(Psychological therapy (by any licensed mental health professional) w/ # of days administered for 15 minutes or more)

e. Psychological therapy (by any licensed mental health professional)	
---	--

NO MATCHES FOUND

Section P1beB.
(Psychological therapy (by any licensed mental health professional) w/ total # of minutes provided in last 7 days)

e. Psychological therapy (by any licensed mental health professional)					
---	--	--	--	--	--

NO MATCHES FOUND

Section P2
(INTERVENTION PROGRAMS FOR MOOD, BEHAVIOR, COGNITIVE LOSS)

2.	INTERVENTION PROGRAMS FOR MOOD, BEHAVIOR, COGNITIVE LOSS	(Check all interventions or strategies used in last 7 days—no matter where received) Special behavior symptom evaluation program Evaluation by a licensed mental health specialist in last 90 days Group therapy Resident-specific deliberate changes in the environment to address mood/behavior patterns—e.g., providing bureau in which to rummage Reorientation—e.g., cueing NONE OF ABOVE	a. b. c. d. e. f.
----	--	--	----------------------------------

NO MATCHES ATTEMPTED

**Section P2a. (Special behavior symptom evaluation program)**

Special behavior symptom evaluation program	a.
---	----

NO MATCHES ATTEMPTED

**Section P2b. (Evaluation by a licensed mental health specialist in last 90 days)**

Evaluation by a licensed mental health specialist in last 90 days	b.
---	----

NO MATCHES ATTEMPTED

**Section P2c. (Group therapy)**

Group therapy	c.
---------------	----

NO MATCHES ATTEMPTED

**Section P2d. (Resident-specific deliberate changes in the environment...)**

Resident-specific deliberate changes in the environment to address mood/behavior patterns—e.g., providing bureau in which to rummage	d.
--	----

NO MATCHES ATTEMPTED

**Section P2e. (Reorientation – e.g., cueing)**

Reorientation—e.g., cueing	e.
----------------------------	----

NO MATCHES ATTEMPTED

**Section P2f. (NONE OF ABOVE)**

NONE OF ABOVE	f.
---------------	----

NO MATCHES ATTEMPTED

**Section P3 (NURSING REHABILITATION/RESTORATIVE CARE)**

3.	NURSING REHABILITA- TION/ RESTOR- ATIVE CARE	Record the <b>NUMBER OF DAYS</b> each of the following rehabilitation or restorative techniques or practices was <i>provided to the resident</i> for more than or equal to 15 minutes per day in the last 7 days (Enter 0 if none or less than 15 min. daily.)			
		a. Range of motion (passive)	<input type="text"/>	f. Walking	<input type="text"/>
		b. Range of motion (active)	<input type="text"/>	g. Dressing or grooming	<input type="text"/>
		c. Splint or brace assistance	<input type="text"/>	h. Eating or swallowing	<input type="text"/>
		TRAINING AND SKILL PRACTICE IN:	<input type="text"/>	i. Amputation/prosthesis care	<input type="text"/>
		d. Bed mobility	<input type="text"/>	j. Communication	<input type="text"/>
		e. Transfer	<input type="text"/>	k. Other	<input type="text"/>

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Nursing procedure (procedure)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
Rehabilitation therapy (regime/therapy)	SNOMED CT	

### Section P3a. (Range of motion (passive))

a. Range of motion (passive)

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Movement therapy (regime/therapy) Range of motion exercise (regime/therapy)	SNOMED CT SNOMED CT	<p>Movement therapy refers to active joint movement - no passive - and it is not possible to determine if the other subconcepts include passive exercise. I think it's not a match. <b>(rshephard 2005/06/15 19:53)</b></p> <p>Range of passive joint movement (observable entity): Regarding the Apelon question, on the MDS it is the regime/therapy or procedure that is being documented, not observation of or findings related to the joints. Range of motion exercise (regime/therapy) is a broader match, since we are not considering the lookback period. <b>(rshephard 2005/06/10 11:36)</b></p> <p>The first term seems to be an observation, not rehab. The second term doesn't specify passive ROM. The guidelines in the manual are very specific -- will be hard to match. <b>(dmalitz 2005/06/06 16:59)</b></p> <p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b></p>
Partial Match Term	Partial Match Term Namespace	-----

days/week (qualifier value)	SNOMED CT	
Rehabilitation therapy (regime/therapy)	SNOMED CT	

### Section P3b. (Range of motion (active))

b. Range of motion (active) ☐

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Active joint movements (regime/therapy)	SNOMED CT	Need to distinguish active from passive. <b>(dmalitz 2005/05/31 14:27)</b>  This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b>
Broader Match Term	Broader Match Term Namespace	-----
Movement therapy (regime/therapy)	SNOMED CT	
Range of motion exercise (regime/therapy)	SNOMED CT	
Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value)	SNOMED CT	
Rehabilitation therapy (regime/therapy)	SNOMED CT	

### Section P3c. (Splint or brace assistance)

c. Splint or brace assistance ☐

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Checking of splint (procedure) Procedures relating to splintage and immobilization (procedure) Splinting procedures (procedure)	SNOMED CT  SNOMED CT SNOMED CT	MDS manual says that item includes both teaching how to apply, manipulate, etc. splint or brace OR time spent by staff doing the same. So the matches need to cover both teaching and doing and apply to splints and braces. <b>(dmalitz 2005/05/31 14:35)</b>  This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b>  Teaching of skills (regime/therapy) Code: P0-A022D Id: 223468 and Splint removal (procedure) Code: PA-13214 Id: 84261 are partial matches. Checking of splint and splinting procedures are partial not broader matches. <b>(rshephard 2005/05/27 19:03)</b>

Partial Match Term	Partial Match Term Namespace	-----
Adjusting of splint (procedure)	SNOMED CT	
Application of splint (procedure)	SNOMED CT	
Assisting - action (qualifier value)	SNOMED CT	
Brace removal (procedure)	SNOMED CT	
days/week (qualifier value)	SNOMED CT	
Provision of brace (procedure)	SNOMED CT	
Rehabilitation therapy (regime/therapy)	SNOMED CT	
Splint removal (procedure)	SNOMED CT	
Splint, device (physical object)	SNOMED CT	
Teaching of skills (regime/therapy)	SNOMED CT	

### Section P3d. (Bed Mobility)

TRAINING AND SKILL  
PRACTICE IN:

d. Bed mobility



Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Joint mobility exercises (regime/therapy)	SNOMED CT	<p>This item isn't just bed mobility, but training to IMPROVE or MAINTAIN bed mobility. I don't think any of the listed terms captures this. <b>(dmalitz 2005/05/31 14:37)</b></p> <p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b></p> <p>Ability to move in bed (observable entity) Code: F-00527 Id: 301680 is a best match. I think that some of the reviewable concepts are too much of a stretch to be able to go there. <b>(rshephard 2005/05/27 19:15)</b></p>
Mobility deficit education (regime/therapy)	SNOMED CT	
Mobility deficit therapy (regime/therapy)	SNOMED CT	
Mobility/transfers surveillance (regime/therapy)	SNOMED CT	
Mobility/transfers teaching, guidance, and counseling (regime/therapy)	SNOMED CT	

Partial Match Term	Partial Match Term Namespace	-----
Ability to move in bed (observable entity)	SNOMED CT	
days/week (qualifier value)	SNOMED CT	
Direction changing (regime/therapy)	SNOMED CT	
Rehabilitation therapy (regime/therapy)	SNOMED CT	
Transfer training (regime/therapy)	SNOMED CT	
Weight transfer practice (regime/therapy)	SNOMED CT	

### Section P3e. (Transfer)

e. Transfer



Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Transfer training (regime/therapy)	SNOMED CT	<p>I agree that the two together get pretty close to the MDS item. <b>(dmalitz 2005/06/22 17:28)</b></p> <p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b></p> <p>Transfer: After giving some thought to these restorative skills, I think that for each of the P3 skills, the MDS concept does not include the concepts of training and skill practice - those concepts are contained in the heading "training and skill practice in" on the form. For the listing of skills, only the skill itself should be in the concept and not the training and practice. It is the manual instructions that go on to explain the definition of training or practice for each of the skills. In that case, Ability to transfer (observable entity) would be the best match. <b>(rshephard 2005/05/28 13:17)</b></p> <p>Transfer training is a partial match. Combined with Transfer practice (regime/therapy) Code: P7-9033D Id: 290048 we'd have a best match. <b>(rshephard 2005/05/27 19:19)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
days/week (qualifier value) Rehabilitation therapy (regime/therapy) Transfer practice (regime/therapy)	SNOMED CT SNOMED CT SNOMED CT	

### Section P3f. (Walking)

f. Walking

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Ambulation and gait training (regime/therapy)	SNOMED CT	<p>I agree with Rena's comments. Note however that for all of these P3 items, we're coming close (or not so close!) at capturing the meaning of the item, but we are not capturing the response (number of days in last 7 with at least 15 minutes of training). How do we capture this? <b>(dmalitz 2005/05/31 14:41)</b></p> <p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of</p>

		<p>order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b></p> <p>Walking: After giving some thought to these restorative skills, I think that for each of the P3 skills, the MDS concept does not include the concepts of training and skill practice - those concepts are contained in the heading "training and skill practice in" on the form. For the listing of skills, only the skill itself should be in the concept and not the training and practice. It is the manual instructions that go on to explain the definition of training or practice for each of the skills. In that case, Walking (observable entity) would be the best match. <b>(rshephard 2005/05/28 13:20)</b></p> <p>Ambulation and gait training combined with walking practice would be a best match. <b>(rshephard 2005/05/27 19:23)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
days/week (qualifier value) Rehabilitation therapy (regime/therapy) Walking practice (regime/therapy) Walking with patient - mobilization (regime/therapy)	SNOMED CT SNOMED CT SNOMED CT  SNOMED CT	

### [Section P3g. \(Dressing or grooming\)](#)

g. Dressing or grooming

<b>Broader Match Term</b>	<b>Broader Match Term Namespace</b>	<b>Reviewer Feedback &amp; Name</b>
Training in activities of daily living (regime/therapy)	SNOMED CT	<p>After giving some thought to these restorative skills, I think that for each of the P3 skills, the MDS concept does not include the concepts of training and skill practice - those concepts are contained in the heading "training and skill practice in" on the form. For the listing of skills, only the skill itself should be in the concept and not the training and practice. It is the manual instructions that go on to explain the definition of training or practice for each of the skills. In that case, Dressing (observable entity) and Grooming activities, function (observable entity) combined would be a best match. <b>(rshephard 2005/05/28 13:25)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
Dressing practice (regime/therapy)	SNOMED CT	

### Section P3h. (Eating or swallowing)

h. Eating or swallowing

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
days/week (qualifier value) Eating practice (regime/therapy) Facilitating initiation of swallowing exercises (regime/therapy) Rehabilitation therapy (regime/therapy) Swallowing defect amelioration (regime/therapy) Swallowing exercises (regime/therapy)	SNOMED CT SNOMED CT  SNOMED CT SNOMED CT SNOMED CT SNOMED CT	<p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b></p> <p>After giving some thought to these restorative skills, I think that for each of the P3 skills, the MDS concept does not include the concepts of training and skill practice - those concepts are contained in the heading "training and skill practice in" on the form. For the listing of skills, only the skill itself should be in the concept and not the training and practice. It is the manual instructions that go on to explain the definition of training or practice for each of the skills. In that case, Eating (observable entity) and Deglutition (observable entity) combined would be the best match. <b>(rshephard 2005/05/28 13:48)</b></p>

### Section P3i. (Amputation/prosthesis care)

i. Amputation/prosthesis care

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Training in use of prosthetic device (regime/therapy)	SNOMED CT	<p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). <b>(dmalitz 2005/05/31 14:25)</b></p> <p>Amputation education (regime/therapy) Code: PA-60020 Id: 54483 and Teaching how to fit prosthesis (regime/therapy) Code: P0-A022C Id: 223467 are partial matches. I think that Training in use of prosthetic device (regime/therapy) is a partial match, not a broader match. <b>(rshephard 2005/05/27 19:42)</b></p>



Partial Match Term	Partial Match Term Namespace	-----
Amputation care (regime/therapy)	SNOMED CT	
days/week (qualifier value)	SNOMED CT	
Hearing aid care education (regime/therapy)	SNOMED CT	
Leg prosthesis use training (regime/therapy)	SNOMED CT	
Maxillofacial prosthesis or appliance care instruction (regime/therapy)	SNOMED CT	
Pneumatic post-amputation mobility aid training (regime/therapy)	SNOMED CT	
Rehabilitation therapy (regime/therapy)	SNOMED CT	
Training in use of an artificial urinary sphincter (regime/therapy)	SNOMED CT	
Upper limb prosthetic training (regime/therapy)	SNOMED CT	

### Section P3j. (Communication)

j. Communication

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Speech therapy (regime/therapy)	SNOMED CT	<p>This is neither an item nor a response nor a label, but an instruction. Why are we seeking linkage for this? Also, this entry doesn't have a P1b label, and it's out of order in the assignment list. Finally, within the MDS domain it's not linked with the P1b items that it belongs with (P1baA, P1baB, etc.). (<b>dmalitz 2005/05/31 14:25</b>)</p> <p>RE: Communication - After giving some thought to these restorative skills, I think that Communication skills (observable entity) is the best match. For each of the P3 skills, it seems to me that the MDS concept Communication, for example, does not include the concepts of training and skill practice - those concepts are contained in the heading "training and skill practice in" on the form. For the listing of skills, only the skill itself should be in the concept and not the training and practice. Therefore, the SNOMED concept Communication skills would cover it. Ability to perform functions related to communication (observable entity) would be a broader match. (<b>rshephard 2005/05/28 13:07</b>)</p>
Partial Match Term	Partial Match Term Namespace	-----
Communication skills training (regime/therapy)	SNOMED CT	
Communication teaching, guidance, and counseling (regime/therapy)	SNOMED CT	
days/week (qualifier value)	SNOMED CT	
Rehabilitation therapy (regime/therapy)	SNOMED CT	
Verbal communication interventions (regime/therapy)	SNOMED CT	

Section P3k. (Other)

k. Other	
----------	--

NO MATCHES FOUND

Section P4 (DEVICES AND RESTRAINTS)

4.	DEVICES AND RESTRAINTS	(Use the following codes for last 7 days:)	
		0. Not used	
		1. Used less than daily	
		2. Used daily	
		Bed rails	
		a. — Full bed rails on all open sides of bed	
		b. — Other types of side rails used (e.g., half rail, one side)	
		c. Trunk restraint	
		d. Limb restraint	
		e. Chair prevents rising	

NO MATCHES ATTEMPTED

Section P4.0 (Not used)

0. Not used	
-------------	--

NO MATCHES ATTEMPTED

Section P4.1 (Used less than daily)

1. Used less than daily	
-------------------------	--

NO MATCHES ATTEMPTED

Section P4.2 (Used daily)

2. Used daily	
---------------	--

NO MATCHES ATTEMPTED

Section P4a. (Bed rails – full bed rails on all open sides of bed)

Bed rails	
a. — Full bed rails on all open sides of bed	

NO MATCHES ATTEMPTED

Section P4a.0 (Bed rails – full bed rails on all open sides of bed w/ code for usage in the last 7 days = 0)

Bed rails	
a. — Full bed rails on all open sides of bed	0

NO MATCHES ATTEMPTED

Section P4a.1 (Bed rails – full bed rails on all open sides of bed w/ code for usage in the last 7 days = 1)

Bed rails	
a. — Full bed rails on all open sides of bed	1

NO MATCHES ATTEMPTED

Section P4a.2 (Bed rails – full bed rails on all open sides of bed w/ code for usage in the last 7 days = 2)

Bed rails	
a. — Full bed rails on all open sides of bed	2

NO MATCHES ATTEMPTED

Section P4b. (Bed rails – Other types of side rails used (e.g., half rail, one side))

b. — Other types of side rails used (e.g., half rail, one side)	
---	--

NO MATCHES ATTEMPTED

Section P4b.0 (Bed rails – Other types of side rails used (e.g., half rail, one side w/ code for usage in the last 7 days = 1)

b. — Other types of side rails used (e.g., half rail, one side)	0
---	---

NO MATCHES ATTEMPTED

Section P4b.1 (Bed rails – Other types of side rails used (e.g., half rail, one side w/ code for usage in the last 7 days = 1)

b. — Other types of side rails used (e.g., half rail, one side)	1
---	---

NO MATCHES ATTEMPTED

Section P4b.2 (Bed rails – Other types of side rails used (e.g., half rail, one side w/ code for usage in the last 7 days = 2)

b. — Other types of side rails used (e.g., half rail, one side)	2
---	---

NO MATCHES ATTEMPTED

Section P4c. (Trunk restraint)

c. Trunk restraint

NO MATCHES ATTEMPTED

Section P4c.0 (Trunk restraint w/ code for usage in the last 7 days = 0)

c. Trunk restraint

NO MATCHES ATTEMPTED

Section P4c.1 (Trunk restraint w/ code for usage in the last 7 days = 1)

c. Trunk restraint

NO MATCHES ATTEMPTED

Section P4c.2 (Trunk restraint w/ code for usage in the last 7 days = 2)

c. Trunk restraint

NO MATCHES ATTEMPTED

Section P4d. (Limb restraint)

d. Limb restraint

NO MATCHES ATTEMPTED

Section P4d.0 (Limb restraint w/ code for usage in the last 7 days = 0)

d. Limb restraint

NO MATCHES ATTEMPTED

Section P4d.1 (Limb restraint w/ code for usage in the last 7 days = 1)

d. Limb restraint

NO MATCHES ATTEMPTED

Section P4d.2 (Limb restraint w/ code for usage in the last 7 days = 2)

d. Limb restraint

NO MATCHES ATTEMPTED

**Section P4e. (Chair prevents rising)**

e. Chair prevents rising	
--------------------------	--

NO MATCHES ATTEMPTED

**Section P4e.0 (Chair prevents rising w/ code for usage in the last 7 days = 0)**

e. Chair prevents rising	0
--------------------------	---

NO MATCHES ATTEMPTED

**Section P4e.1 (Chair prevents rising w/ code for usage in the last 7 days = 1)**

e. Chair prevents rising	1
--------------------------	---

NO MATCHES ATTEMPTED

**Section P4e.2 (Chair prevents rising w/ code for usage in the last 7 days = 2)**

e. Chair prevents rising	2
--------------------------	---

NO MATCHES ATTEMPTED

**Section P5 (HOSPITAL STAY(S))**

5.	<b>HOSPITAL STAY(S)</b>	Record number of times resident was admitted to hospital with an overnight stay <b>in last 90 days</b> (or since last assessment if less than 90 days). (Enter 0 if no hospital admissions)		
----	-------------------------	---	--	--

NO MATCHES ATTEMPTED

**Section P6 (EMERGENCY ROOM (ER) VISIT(S))**

6.	<b>EMERGENCY ROOM (ER) VISIT(S)</b>	Record number of times resident visited ER without an overnight stay <b>in last 90 days</b> (or since last assessment if less than 90 days). (Enter 0 if no ER visits)		
----	-------------------------------------	--	--	--

NO MATCHES ATTEMPTED

**Section P7 (PHYSICIAN VISITS)**

7.	<b>PHYSICIAN VISITS</b>	In the <b>LAST 14 DAYS</b> (or since admission if less than 14 days in facility) how many days has the physician (or authorized assistant or practitioner) examined the resident? (Enter 0 if none)		
----	-------------------------	---	--	--

Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Seen by health professional (finding)	SNOMED CT	<p>This is another example of confusion of labels, items, instructions, and responses. This is an instruction. <b>(dmalitz 2005/05/31 14:50)</b></p> <p>I don't understand how our MDS/SNOMED crosswalk will be useful unless we can match the MDS concept of "physician" on this item to all of the types of providers that are listed in the manual. <b>(dmalitz 2005/05/31 14:49)</b></p> <p>This concept has too many concepts within it to begin to find a match in SNOMED. <b>(rshephard 2005/05/28 14:12)</b></p> <p>Seen by physician (finding) is best match. I do not consider that a best match for the MDS concept "Physician Visits" must be a SNOMED concept that includes NPs, CNSs, and PAs. As the MDS is currently, the label on the form says "physician" visits, and it is the manual instructions that define "physician" for the particular MDS item. My understanding is that manual instructions will continue to be required and that all aspects of the instructions would not need to be captured in the concepts on the form. If that is incorrect, please let me know. <b>(rshephard 2005/05/28 14:09)</b></p>
Partial Match Term	Partial Match Term Namespace	-----
General examination of patient (procedure) Physician visit with evaluation AND/OR management service (procedure) Seen by general practitioner (finding) Seen by nurse practitioner (finding) Seen by physician (finding)	SNOMED CT SNOMED CT SNOMED CT SNOMED CT SNOMED CT	

### Section P8 (PHYSICIAN ORDERS)

8.	PHYSICIAN ORDERS	In the <b>LAST 14 DAYS</b> (or since admission if less than 14 days in facility) how many days has the physician (or authorized assistant or practitioner) changed the resident's orders? <i>Do not include order renewals without change. (Enter 0 if none)</i>	<div><div></div><div></div></div>
----	------------------	--	-----------------------------------

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
Medical regimen orders management (procedure)	SNOMED CT	"Management" seems too neutral to cover changes in

		<p>orders. Also, need to somehow capture all of the provider types (MD, DO, dentist, etc.) listed in the manual. <b>(dmalitz 2005/05/31 14:53)</b></p> <p>This is another example of confusion of labels, items, instructions, and responses. This is an instruction. <b>(dmalitz 2005/05/31 14:50)</b></p> <p>This concept has too many concepts within it to begin to find a match in SNOMED. <b>(rshephard 2005/05/28 14:12)</b></p>
<b>Partial Match Term</b>	<b>Partial Match Term Namespace</b>	-----
General examination of patient (procedure)	SNOMED CT	

Section P9 (ABNORMAL LAB VALUES)

9.	ABNORMAL LAB VALUES	Has the resident had any abnormal lab values during the last 90 days (or since admission)?	
		0. No                      1. Yes	

NO MATCHES ATTEMPTED

Section P9.0 (No)

0. No
-------

NO MATCHES ATTEMPTED

Section P9.1 (Yes)

1. Yes
--------

NO MATCHES ATTEMPTED

Section Q (DISCHARGE POTENTIAL AND OVERALL STATUS)

**SECTION Q. DISCHARGE POTENTIAL AND OVERALL STATUS**

1.	DISCHARGE POTENTIAL	a. Resident expresses/indicates preference to return to the community	
		0. No                      1. Yes	
		b. Resident has a support person who is positive towards discharge	
		0. No                      1. Yes	
2.	OVERALL CHANGE IN CARE NEEDS	c. Stay projected to be of a short duration— discharge projected within 90 days (do not include expected discharge due to death)	
		0. No                      2. Within 31-90 days	
		1. Within 30 days                      3. Discharge status uncertain	
		Resident's overall self sufficiency has changed significantly as compared to status of 90 days ago (or since last assessment if less than 90 days)	
		0. No change    1. Improved—receives fewer supports, needs less restrictive level of care    2. Deteriorated—receives more support	

NO MATCHES ATTEMPTED

Section Q1 (DISCHARGE POTENTIAL)

1.	DISCHARGE POTENTIAL	a. Resident expresses/indicates preference to return to the community	
		0. No                      1. Yes	
		b. Resident has a support person who is positive towards discharge	
		0. No                      1. Yes	
		c. Stay projected to be of a short duration— discharge projected within 90 days (do not include expected discharge due to death)	
		0. No                      2. Within 31-90 days	
		1. Within 30 days                      3. Discharge status uncertain	

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Evaluation procedure (procedure)	SNOMED CT	
Readiness for discharge (observable entity)	SNOMED CT	

Section Q1a. (Resident expresses/indicates preference to return to the community)

a. Resident expresses/indicates preference to return to the community	
0. No                      1. Yes	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
No (qualifier value)	SNOMED CT	There is no review option on the screen, but it seems that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. (rshephard 2005/05/15 15:10)
Yes (qualifier value)	SNOMED CT	

Section Q1a.0 (No)

0. No
-------



See Section Q1a. (Resident expresses/indicates preference to return to the community)

Section Q1a.1 (Yes)

1. Yes

See Section Q1a. (Resident expresses/indicates preference to return to the community)

Section Q1b. (Resident has a support person who is positive towards discharge)

b. Resident has a support person who is positive towards discharge		<input type="checkbox"/>
0. No	1. Yes	<input type="checkbox"/>

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
No (qualifier value) Yes (qualifier value)	SNOMED CT SNOMED CT	There is no review option on the screen, but it seems that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. (rshephard 2005/05/15 15:10)

Section Q1b.0 (No)

0. No

See Section Q1b. (Resident has a support person who is positive towards discharge)

Section Q1b.1 (Yes)

1. Yes

See Section Q1b. (Resident has a support person who is positive towards discharge)

Section Q1c. (Stay projected to be of a short duration...)

c. Stay projected to be of a short duration— discharge projected within 90 days (do not include expected discharge due to death)		<input type="checkbox"/>
0. No	2. Within 31-90 days	<input type="checkbox"/>
1. Within 30 days	3. Discharge status uncertain	<input type="checkbox"/>

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
No (qualifier value) Yes (qualifier value)	SNOMED CT SNOMED CT	There is no review option on the screen, but it seems that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. (rshephard 2005/05/15 15:10)
Partial Match Term	Partial Match Term Namespace	-----
day (qualifier value) Discharge status (finding)	SNOMED CT SNOMED CT	

Duration of inpatient stay (observable entity)	SNOMED CT	
Hospital admission, short-term (procedure)	SNOMED CT	
Short duration (qualifier value)	SNOMED CT	
Unknown (qualifier value)	SNOMED CT	

[Section Q1c.0 \(No\)](#)

| 0. No

See Section Q1c. (Stay projected to be of a short duration...)

[Section Q1c.1 \(Within 30 days\)](#)

| 1. Within 30 days

See Section Q1c. (Stay projected to be of a short duration...)

[Section Q1c.2 \(Within 31-90 days\)](#)

| 2. Within 31-90 days

See Section Q1c. (Stay projected to be of a short duration...)

[Section Q1c.3 \(Discharge status uncertain\)](#)

| 3. Discharge status uncertain

See Section Q1c. (Stay projected to be of a short duration...)

[Section Q2 \(OVERALL CHANGE IN CARE NEEDS\)](#)

2.	OVERALL CHANGE IN CARE NEEDS	Resident's overall self sufficiency has changed significantly as compared to status of <b>90 days ago</b> (or since last assessment if less than 90 days) 0. No change    1. Improved—receives fewer supports, needs less restrictive level of care    2. Deteriorated—receives more support	
----	------------------------------------	---	--

NO MATCHES ATTEMPTED

[Section Q1.0 \(No change\)](#)

| 0. No change

NO MATCHES ATTEMPTED

[Section Q1.1 \(Improved – receives fewer supports, needs less restrictive level of care\)](#)

1. Improved—receives fewer supports, needs less restrictive level of care

NO MATCHES ATTEMPTED

Section Q1.2 (Deteriorated – receives more support)

2. Deteriorated—receives more support

NO MATCHES ATTEMPTED

Section R (ASSESSMENT INFORMATION)

SECTION R. ASSESSMENT INFORMATION

1.	PARTICIPATION IN ASSESSMENT	a. Resident:	0. No	1. Yes	
		b. Family:	0. No	1. Yes	2. No family
		c. Significant other:	0. No	1. Yes	2. None
2. SIGNATURE OF PERSON COORDINATING THE ASSESSMENT:					
a. Signature of RN Assessment Coordinator (sign on above line)					
b. Date RN Assessment Coordinator signed as complete					
		<div>Month</div>	<div>Day</div>	<div>Year</div>	

NO MATCHES ATTEMPTED

Section R1 (PARTICIPATION IN ASSESSMENT)

1.	PARTICIPATION IN ASSESSMENT	a. Resident:	0. No	1. Yes	
		b. Family:	0. No	1. Yes	2. No family
		c. Significant other:	0. No	1. Yes	2. None

NO MATCHES ATTEMPTED

Section R1a. (Resident:)

a. Resident:	0. No	1. Yes	
--------------	-------	--------	--

NO MATCHES ATTEMPTED

Section R1a.0 (No)

0. No

NO MATCHES ATTEMPTED

Section R1a.1 (Yes)

1. Yes

NO MATCHES ATTEMPTED

Section R1b. (Family:)

b. Family:	0. No	1. Yes	2. No family	<input type="text"/>
------------	-------	--------	--------------	----------------------

NO MATCHES ATTEMPTED

Section R1b.0 (No)

0. No

NO MATCHES ATTEMPTED

Section R1b.1 (Yes)

1. Yes

NO MATCHES ATTEMPTED

Section R1b.2 (No family)

2. No family

NO MATCHES ATTEMPTED

Section R1c. (Significant other:)

c. Significant other:	0. No	1. Yes	2. None	<input type="text"/>
-----------------------	-------	--------	---------	----------------------

NO MATCHES ATTEMPTED

Section R1c.0 (No)

0. No

NO MATCHES ATTEMPTED

Section R1c.1 (Yes)

1. Yes

NO MATCHES ATTEMPTED

**Section R1c.2 (None)**

2. None

NO MATCHES ATTEMPTED

**Section R2 (SIGNATURE OF PERSON COORDINATING THE ASSESSMENT:)**

<b>2. SIGNATURE OF PERSON COORDINATING THE ASSESSMENT:</b>																			
a. Signature of RN Assessment Coordinator (sign on above line)																			
b. Date RN Assessment Coordinator signed as complete	<table border="1"><tr><td></td><td></td><td>—</td><td></td><td></td><td>—</td><td></td><td></td><td></td><td></td></tr><tr><td colspan="2">Month</td><td colspan="2">Day</td><td colspan="4">Year</td></tr></table>			—			—					Month		Day		Year			
		—			—														
Month		Day		Year															

NO MATCHES ATTEMPTED

**Section R2a. (Signature of RN Assessment Coordinator (sign on above line))**

<b>2. SIGNATURE OF PERSON COORDINATING THE ASSESSMENT:</b>	
a. Signature of RN Assessment Coordinator (sign on above line)	

NO MATCHES ATTEMPTED

**Section R2b. (Date RN Assessment Coordinator signed as complete)**

b. Date RN Assessment Coordinator signed as complete	<table border="1"><tr><td></td><td></td><td>—</td><td></td><td></td><td>—</td><td></td><td></td><td></td><td></td></tr><tr><td colspan="2">Month</td><td colspan="2">Day</td><td colspan="4">Year</td></tr></table>			—			—					Month		Day		Year			
		—			—														
Month		Day		Year															

NO MATCHES ATTEMPTED

**Section T (THERAPY SUPPLEMENT FOR MEDICARE PPS)**

# SECTION T.THERAPY SUPPLEMENT FOR MEDICARE PPS

1.	SPECIAL TREATMENTS AND PROCEDURES	<p>a. RECREATION THERAPY—Enter number of days and total minutes of recreation therapy administered (for at least 15 minutes a day) in the last 7 days (Enter 0 if none)</p> <table border="1"> <thead> <tr> <th colspan="2">DAYS</th> <th colspan="2">MIN</th> </tr> <tr> <th>(A)</th> <th>(B)</th> <th>(C)</th> <th>(D)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table> <p>(A) = # of days administered for 15 minutes or more (B) = total # of minutes provided in last 7 days</p> <p><i>Skip unless this is a Medicare 5 day or Medicare readmission/return assessment.</i></p> <p>b. ORDERED THERAPIES—Has physician ordered any of following therapies to begin in FIRST 14 days of stay—physical therapy, occupational therapy, or speech pathology service? 0. No                      1. Yes</p> <p><i>If not ordered, skip to item 2</i></p> <p>c. Through day 15, provide an estimate of the number of days when at least 1 therapy service can be expected to have been delivered.</p> <p>d. Through day 15, provide an estimate of the number of therapy minutes (across the therapies) that can be expected to be delivered?</p>	DAYS		MIN		(A)	(B)	(C)	(D)				
DAYS		MIN												
(A)	(B)	(C)	(D)											
2.	WALKING WHEN MOST SELF SUFFICIENT	<p><i>Complete item 2 if ADL self-performance score for TRANSFER (G.1.b.A) is 0,1,2, or 3 AND at least one of the following are present:</i></p> <ul style="list-style-type: none"> <li>• Resident received physical therapy involving gait training (P.1.b.c)</li> <li>• Physical therapy was ordered for the resident involving gait training (T.1.b)</li> <li>• Resident received nursing rehabilitation for walking (P.3.f)</li> <li>• Physical therapy involving walking has been discontinued within the past 180 days</li> </ul> <p><i>Skip to item 3 if resident did not walk in last 7 days</i></p> <p><i>(FOR FOLLOWING FIVE ITEMS, BASE CODING ON THE EPISODE WHEN THE RESIDENT WALKED THE FARTHEST WITHOUT SITTING DOWN. INCLUDE WALKING DURING REHABILITATION SESSIONS.)</i></p> <p>a. Furthest distance walked without sitting down during this episode.</p> <table border="0"> <tr> <td>0. 150+ feet</td> <td>3. 10-25 feet</td> </tr> <tr> <td>1. 51-149 feet</td> <td>4. Less than 10 feet</td> </tr> <tr> <td>2. 26-50 feet</td> <td></td> </tr> </table> <p>b. Time walked without sitting down during this episode.</p> <table border="0"> <tr> <td>0. 1-2 minutes</td> <td>3. 11-15 minutes</td> </tr> <tr> <td>1. 3-4 minutes</td> <td>4. 16-30 minutes</td> </tr> <tr> <td>2. 5-10 minutes</td> <td>5. 31+ minutes</td> </tr> </table> <p>c. Self-Performance in walking during this episode.</p>	0. 150+ feet	3. 10-25 feet	1. 51-149 feet	4. Less than 10 feet	2. 26-50 feet		0. 1-2 minutes	3. 11-15 minutes	1. 3-4 minutes	4. 16-30 minutes	2. 5-10 minutes	5. 31+ minutes
0. 150+ feet	3. 10-25 feet													
1. 51-149 feet	4. Less than 10 feet													
2. 26-50 feet														
0. 1-2 minutes	3. 11-15 minutes													
1. 3-4 minutes	4. 16-30 minutes													
2. 5-10 minutes	5. 31+ minutes													

		<p>0. <i>INDEPENDENT</i>—No help or oversight</p> <p>1. <i>SUPERVISION</i>—Oversight, encouragement or cueing provided</p> <p>2. <i>LIMITED ASSISTANCE</i>—Resident highly involved in walking; received physical help in guided maneuvering of limbs or other nonweight bearing assistance</p> <p>3. <i>EXTENSIVE ASSISTANCE</i>—Resident received weight bearing assistance while walking</p> <p>d. Walking support provided associated with this episode (code regardless of resident's self-performance classification).</p> <p>0. No setup or physical help from staff</p> <p>1. Setup help only</p> <p>2. One person physical assist</p> <p>3. Two+ persons physical assist</p> <p>e. Parallel bars used by resident in association with this episode.</p> <p>0. No                      1. Yes</p>	
3.	CASE MIX GROUP	Medicare <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> State <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	

Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Professional / ancillary services management (procedure)	SNOMED CT	

### Section T1 (SPECIAL TREATMENTS AND PROCEDURES)

1.	SPECIAL TREATMENTS AND PROCEDURES	<p>a. RECREATION THERAPY—Enter number of days and total minutes of recreation therapy administered (for at least 15 minutes a day) in the last 7 days (Enter 0 if none)</p> <table border="1"> <tr> <td colspan="2">DAYS</td> <td colspan="2">MIN</td> </tr> <tr> <td>(A)</td> <td>(B)</td> <td></td> <td></td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table> <p>(A) = # of days administered for 15 minutes or more          (B) = total # of minutes provided in last 7 days</p>	DAYS		MIN		(A)	(B)							
		DAYS		MIN											
		(A)	(B)												
		<p><i>Skip unless this is a Medicare 5 day or Medicare readmission/return assessment.</i></p>													
<p>b. ORDERED THERAPIES—Has physician ordered any of following therapies to begin in FIRST 14 days of stay—physical therapy, occupational therapy, or speech pathology service?</p> <p>0. No                      1. Yes</p>															
<p><i>If not ordered, skip to item 2</i></p>															
		<p>c. Through day 15, provide an estimate of the number of days when at least 1 therapy service can be expected to have been delivered.</p> <table border="1"> <tr> <td></td> <td></td> </tr> </table>													
		<p>d. Through day 15, provide an estimate of the number of therapy minutes (across the therapies) that can be expected to be delivered?</p> <table border="1"> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </table>													

NO MATCHES ATTEMPTED

Section T1a. (RECREATION THERAPY)

a. RECREATION THERAPY—Enter number of days and total minutes of recreation therapy administered (for at least 15 minutes a day) in the last 7 days (Enter 0 if none)	DAYS		MIN	
	(A)	(B)		

(A) = # of days administered for 15 minutes or more  
(B) = total # of minutes provided in last 7 days

NO MATCHES ATTEMPTED

Section T1aA. (# of days administered for 15 minutes or more)

(A) = # of days administered for 15 minutes or more


NO MATCHES ATTEMPTED

Section T1aB. (total # of minutes provided in last 7 days)

(B) = total # of minutes provided in last 7 days

NO MATCHES ATTEMPTED

Section T1b. (ORDERED THERAPIES)

Skip unless this is a Medicare 5 day or Medicare readmission/return assessment.	
b. ORDERED THERAPIES—Has physician ordered any of following therapies to begin in FIRST 14 days of stay—physical therapy, occupational therapy, or speech pathology service?	
0. No                      1. Yes	

Best Match Term	Best Match Term Namespace	Reviewer Feedback & Name
No (qualifier value) Yes (qualifier value)	SNOMED CT SNOMED CT	Prescription of therapeutic regimen (procedure) and Therapy (regime/therapy) are partial matches. (rshephard 2005/05/28 14:31)  There is no review option on the screen, but it seems that No (qualifier value) (Code: R-00339 Id: 373067 Namespace: SNOMED CT) would be a best semantic match. (rshephard 2005/05/15 15:10)
Partial Match Term	Partial Match Term Namespace	-----
Professional / ancillary services management (procedure)	SNOMED CT	



## Section T1b.0 (No)

0. No

See Section T1b. (ORDERED THERAPIES)

## Section T1b.1 (Yes)

1. Yes

See Section T1b. (ORDERED THERAPIES)

## Section T1c. (Through day 15, provide an estimate of the number of days when at least 1 therapy service...)

*If not ordered, skip to item 2*

c. Through day 15, provide an estimate of the number of days when at least 1 therapy service can be expected to have been delivered.


Broader Match Term	Broader Match Term Namespace	Reviewer Feedback & Name
Professional / ancillary services assessment (regime/therapy)	SNOMED CT	Label, not item. <b>(dmalitz 2005/06/06 17:01)</b>  This item is very specific -- will be hard to match. <b>(dmalitz 2005/06/06 17:01)</b>  I don't think I agree that the 2nd concept has a broader semantic match, because the MDS concept relates to time whereas the SNOMED concept seems to relate to actual assessment. <b>(rshephard 2005/05/15 14:19)</b>

## Section T1d. (Through day 15, provide an estimate of the number of therapy minutes...)

d. Through day 15, provide an estimate of the number of therapy minutes (across the therapies) that can be expected to be delivered?


Partial Match Term	Partial Match Term Namespace	Reviewer Feedback & Name
Count of entities (property) (qualifier value) Minute (qualifier value) Therapy (regime/therapy)	SNOMED CT SNOMED CT SNOMED CT	Therapy (regime/therapy) is a broader match - it has many subconcepts that do not apply to item T1d. My reading of Minute (qualifier value) is that it is an adjective describing the size of something as opposed to relating to time. <b>(rshephard 2005/06/10 12:01)</b>  Label, not item. <b>(dmalitz 2005/06/06 17:02)</b>  This item is very specific -- will be hard to match.

**Section T2 (WALKING WHEN MOST SELF-SUFFICIENT)**

2.	<b>WALKING WHEN MOST SELF SUFFICIENT</b>	<p>Complete item 2 if ADL self-performance score for TRANSFER (G.1.b.A) is 0, 1, 2, or 3 AND at least one of the following are present:</p> <ul style="list-style-type: none"> <li>Resident received physical therapy involving gait training (P.1.b.c)</li> <li>Physical therapy was ordered for the resident involving gait training (T.1.b)</li> <li>Resident received nursing rehabilitation for walking (P.3.f)</li> <li>Physical therapy involving walking has been discontinued within the past 180 days</li> </ul> <p>Skip to item 3 if resident did not walk in last 7 days</p> <p>(FOR FOLLOWING FIVE ITEMS, BASE CODING ON THE EPISODE WHEN THE RESIDENT WALKED THE FARTHEST WITHOUT SITTING DOWN. INCLUDE WALKING DURING REHABILITATION SESSIONS.)</p>															
		<p>a. Furthest distance walked without sitting down during this episode.</p> <table border="0"> <tr> <td>0. 150+ feet</td> <td>3. 10-25 feet</td> </tr> <tr> <td>1. 51-149 feet</td> <td>4. Less than 10 feet</td> </tr> <tr> <td>2. 26-50 feet</td> <td></td> </tr> </table> <p>b. Time walked without sitting down during this episode.</p> <table border="0"> <tr> <td>0. 1-2 minutes</td> <td>3. 11-15 minutes</td> </tr> <tr> <td>1. 3-4 minutes</td> <td>4. 16-30 minutes</td> </tr> <tr> <td>2. 5-10 minutes</td> <td>5. 31+ minutes</td> </tr> </table> <p>c. Self-Performance in walking during this episode.</p> <p>0. INDEPENDENT—No help or oversight</p> <p>1. SUPERVISION—Oversight, encouragement or cueing provided</p> <p>2. LIMITED ASSISTANCE—Resident highly involved in walking; received physical help in guided maneuvering of limbs or other nonweight bearing assistance</p> <p>3. EXTENSIVE ASSISTANCE—Resident received weight bearing assistance while walking</p> <p>d. Walking support provided associated with this episode (code regardless of resident's self-performance classification).</p> <p>0. No setup or physical help from staff</p> <p>1. Setup help only</p> <p>2. One person physical assist</p> <p>3. Two+ persons physical assist</p> <p>e. Parallel bars used by resident in association with this episode.</p> <table border="0"> <tr> <td>0. No</td> <td>1. Yes</td> </tr> </table>	0. 150+ feet	3. 10-25 feet	1. 51-149 feet	4. Less than 10 feet	2. 26-50 feet		0. 1-2 minutes	3. 11-15 minutes	1. 3-4 minutes	4. 16-30 minutes	2. 5-10 minutes	5. 31+ minutes	0. No	1. Yes	
0. 150+ feet	3. 10-25 feet																
1. 51-149 feet	4. Less than 10 feet																
2. 26-50 feet																	
0. 1-2 minutes	3. 11-15 minutes																
1. 3-4 minutes	4. 16-30 minutes																
2. 5-10 minutes	5. 31+ minutes																
0. No	1. Yes																

NO MATCHES ATTEMPTED

Section T2a. (Furthest distance walked without sitting down during this episode.)

<b>a. Furthest distance walked</b> without sitting down during this episode.		<div><div></div><div></div><div></div></div>
0. 150+ feet	3. 10-25 feet	
1. 51-149 feet	4. Less than 10 feet	
2. 26-50 feet		

NO MATCHES ATTEMPTED

Section T2a.0 (150+ feet)

0. 150+ feet
--------------

NO MATCHES ATTEMPTED

Section T2a.1 (51-149 feet)

1. 51-149 feet
----------------

NO MATCHES ATTEMPTED

Section T2a.2 (26-50 feet)

2. 26-50 feet
---------------

NO MATCHES ATTEMPTED

Section T2a.3 (10-25 feet)

3. 10-25 feet
---------------

NO MATCHES ATTEMPTED

Section T2a.4 (Less than 10 feet)

4. Less than 10 feet
----------------------

NO MATCHES ATTEMPTED

Section T2b. (Time walked without sitting down during this episode.)

<b>b. Time walked</b> without sitting down during this episode.		<div><div></div><div></div><div></div></div>
0. 1-2 minutes	3. 11-15 minutes	
1. 3-4 minutes	4. 16-30 minutes	
2. 5-10 minutes	5. 31+ minutes	

NO MATCHES ATTEMPTED

Section T2b.0 (1-2 minutes)

0. 1-2 minutes

NO MATCHES ATTEMPTED

Section T2b.1 (3-4 minutes)

1. 3-4 minutes

NO MATCHES ATTEMPTED

Section T2b.2 (5-10 minutes)

2. 5-10 minutes

NO MATCHES ATTEMPTED

Section T2b.3 (11-15 minutes)

3. 11-15 minutes

NO MATCHES ATTEMPTED

Section T2b.4 (16-30 minutes)

4. 16-30 minutes

NO MATCHES ATTEMPTED

Section T2b.5 (31+ minutes)

5. 31+ minutes

NO MATCHES ATTEMPTED

Section T2c. (Self-performance in walking during this episode)

c. Self-Performance in walking during this episode.	
0. <i>INDEPENDENT</i> —No help or oversight	
1. <i>SUPERVISION</i> —Oversight, encouragement or cueing provided	
2. <i>LIMITED ASSISTANCE</i> —Resident highly involved in walking; received physical help in guided maneuvering of limbs or other nonweight bearing assistance	

3. *EXTENSIVE ASSISTANCE*—Resident received weight bearing assistance while walking



NO MATCHES ATTEMPTED

Section T2c.0 (*INDEPENDENT*)

0. *INDEPENDENT*—No help or oversight

NO MATCHES ATTEMPTED

Section T2c.1 (*SUPERVISION*)

1. *SUPERVISION*—Oversight, encouragement or cueing provided

NO MATCHES ATTEMPTED

Section T2c.2 (*LIMITED ASSISTANCE*)

2. *LIMITED ASSISTANCE*—Resident highly involved in walking; received physical help in guided maneuvering of limbs or other nonweight bearing assistance

NO MATCHES ATTEMPTED

Section T2c.3 (*EXTENSIVE ASSISTANCE*)

3. *EXTENSIVE ASSISTANCE*—Resident received weight bearing assistance while walking

NO MATCHES ATTEMPTED

Section T2d. (*Walking support provided*)

d. **Walking support provided** associated with this episode (code regardless of resident's self-performance classification).

- 0. No setup or physical help from staff
  - 1. Setup help only
  - 2. One person physical assist
  - 3. Two+ persons physical assist



NO MATCHES ATTEMPTED

Section T2d.0 (*No setup or physical help from staff*)

0. No setup or physical help from staff

NO MATCHES ATTEMPTED

Section T2d.1 (Setup help only)

| 1. Setup help only

NO MATCHES ATTEMPTED

Section T2d.2 (One person physical assist)

| 2. One person physical assist

NO MATCHES ATTEMPTED

Section T2d.3 (Two+ persons physical assist)

| 3. Two+ persons physical assist

NO MATCHES ATTEMPTED

Section T2e. (Parallel bars used by resident in association with this episode.)

e. Parallel bars used by resident in association with this episode.		
0. No	1. Yes	

NO MATCHES ATTEMPTED

Section T2e.0 (No)

| 0. No

NO MATCHES ATTEMPTED

Section T2e.1 (Yes)

| 1. Yes

NO MATCHES ATTEMPTED

Section T3 (CASE MIX GROUP)

3.	CASE MIX GROUP	Medicare						State					
----	----------------	----------	--	--	--	--	--	-------	--	--	--	--	--

NO MATCHES ATTEMPTED

**Section W (SUPPLEMENTAL MDS ITEMS)**

**SECTION W. SUPPLEMENTAL MDS ITEMS**

1.	National Provider ID	Enter for all assessments and tracking forms, if available. <div></div>	
If the ARD of this assessment or the discharge date of this discharge tracking form is between July 1 and September 30, skip to W3.			
2.	Influenza Vaccine	<p>a. Did the resident receive the Influenza vaccine in this facility for this year's Influenza season (October 1 through March 31)?</p> <p>0. No (If No, go to item W2b) 1. Yes (If Yes, go to item W3)</p> <p>b. If Influenza vaccine not received, state reason:</p> <p>1. Not in facility during this year's flu season 2. Received outside of this facility 3. Not eligible 4. Offered and declined 5. Not offered 6. Inability to obtain vaccine</p>	<div></div> <div></div> <div></div> <div></div>
3.	Pneumo- coccal Vaccine	<p>a. Is the resident's PPV status up to date?</p> <p>0. No (If No, go to item W3b) 1. Yes (If Yes, skip item W3b)</p> <p>b. If PPV not received, state reason:</p> <p>1. Not eligible 2. Offered and declined 3. Not offered</p>	<div></div> <div></div> <div></div> <div></div>

NO MATCHES ATTEMPTED

**Section W1 (National Provider ID)**

1.	National Provider ID	Enter for all assessments and tracking forms, if available. <div></div>	
If the ARD of this assessment or the discharge date of this discharge tracking form is between July 1 and September 30, skip to W3.			

NO MATCHES ATTEMPTED

**Section W2 (Influenza Vaccine)**

2.	Influenza Vaccine	<div>a . Did the resident receive the Influenza vaccine in this facility for this year's Influenza season (October 1 through March 31)?  0. No (If No, go to item W2b) 1. Yes (If Yes, go to item W3)  b. If Influenza vaccine not received, state reason: 1. Not in facility during this year's flu season 2. Received outside of this facility 3. Not eligible 4. Offered and declined 5. Not offered 6. Inability to obtain vaccine</div>	<div><div></div><div></div><div></div><div></div></div>
----	-------------------	--	---

NO MATCHES ATTEMPTED

**Section W2a. (Did the resident receive the Influenza vaccine...)**

<div>a . Did the resident receive the Influenza vaccine in this facility for this year's Influenza season (October 1 through March 31)?  0. No (If No, go to item W2b) 1. Yes (If Yes, go to item W3)</div>	<div><div></div><div></div></div>
---	-----------------------------------

NO MATCHES ATTEMPTED

**Section W2a.0 (No)**

0. No (If No, go to item W2b)

NO MATCHES ATTEMPTED

**Section W2a.1 (Yes)**

1. Yes (If Yes, go to item W3)

NO MATCHES ATTEMPTED



**Section W2b. (If Influenza vaccine not received, state reason)**

b. If Influenza vaccine not received, state reason: 1. Not in facility during this year's flu season 2. Received outside of this facility 3. Not eligible 4. Offered and declined 5. Not offered 6. Inability to obtain vaccine	
---	--

**NO MATCHES ATTEMPTED**

**Section W2b.1 (Not in facility during this year's flu season)**

- 1. Not in facility during this year's flu season

**NO MATCHES ATTEMPTED**

**Section W2b.2 (Received outside this facility)**

- 2. Received outside of this facility

**NO MATCHES ATTEMPTED**

**Section W2b.3 (Not eligible)**

- 3. Not eligible

**NO MATCHES ATTEMPTED**

**Section W2b.4 (Offered and declined)**

- 4. Offered and declined

**NO MATCHES ATTEMPTED**

**Section W2b.5 (Not offered)**

- 5. Not offered

**NO MATCHES ATTEMPTED**

Section W2b.6 (Inability to obtain vaccine)

6. Inability to obtain vaccine

NO MATCHES ATTEMPTED

Section W3 (Pneumococcal Vaccine)

3.	Pneumo- coccal Vaccine	<div>a. Is the resident's PPV status up to date?<div>0. No (If No, go to item W3b)</div><div>1. Yes (If Yes, skip item W3b)</div></div> <div>b. If PPV not received, state reason:<div>1. Not eligible</div><div>2. Offered and declined</div><div>3. Not offered</div></div>	<div></div> <div></div> <div></div> <div></div>
----	------------------------------	---	---

NO MATCHES ATTEMPTED

Section W3a. (Is the resident's PPV status up to date?)

<div>a. Is the resident's PPV status up to date?<div>0. No (If No, go to item W3b)</div><div>1. Yes (If Yes, skip item W3b)</div></div>	<div></div> <div></div>
---	-------------------------

NO MATCHES ATTEMPTED

Section W3a.0 (No)

0. No (If No, go to item W3b)

NO MATCHES ATTEMPTED

Section W3a.1 (Yes)

1. Yes (If Yes, skip item W3b)

NO MATCHES ATTEMPTED

**Section W3b. (If PPV not received, state reason)**

b. If PPV not received, state reason: 1. Not eligible 2. Offered and declined 3. Not offered	<div></div> <div></div>
---	-------------------------

**NO MATCHES ATTEMPTED**

**Section W3b.1 (Not eligible)**

- 1. Not eligible

**NO MATCHES ATTEMPTED**

**Section W3b.2 (Offered and declined)**

- 2. Offered and declined

**NO MATCHES ATTEMPTED**

**Section W3b.3 (Not offered)**

- 3. Not offered

**NO MATCHES ATTEMPTED**

# **MAKING THE “MINIMUM DATA SET” COMPLIANT WITH HEALTH INFORMATION TECHNOLOGY STANDARDS**

## **PDF Files Available for This Report**

- Main Report      <http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT.pdf>
- ATTACHMENT A: BIPA, Sec. 545. Development of Patient Assessment Instruments  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-A.pdf>
- ATTACHMENT B: Encoding Nursing Home Resident MDS Observation and  
Assessment Data: Do HL7 Messaging Standards Support its Transmission?  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-B.pdf>
- ATTACHMENT C: Side-by-side depiction of MDSv2 and Content Matching Results  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-C.pdf>
- ATTACHMENT D: Additional Item Matching (emerging MDSv3 items)  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-D.pdf>
- ATTACHMENT E: NLM/UMLS to Maintain Links between LOINC coded Assessment  
Question and Answers and Codeable Vocabularies -- An Alternative  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-E.pdf>
- ATTACHMENT F: The specific vocabulary codes that correspond with each of the  
standardized vocabulary matches identified in Attachments C and D  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-F.pdf>
- This Attachment is also available as an **Excel** file at:  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT-F.xls>

This full report and links are also available in **HTML** format at:  
<http://aspe.hhs.gov/daltcp/reports/2006/MDS-HIT.htm>