

Emergency Department Principal Diagnosis Selection Guide

Definition of the Emergency Department Principal Diagnosis

The diagnosis established at the conclusion of the patients attendance in an Emergency Department (ED) to be mainly responsible for occasioning the attendance following consideration of clinical assessment.

Choosing the correct Emergency Department Principal Diagnosis



Injuries

Search for the type of injury and specify the anatomical location.



Poisoning

Select the substance or animal producing the venom.



Attempted suicide, with injury

Select the injury or poisoning.



Multiple diseases or injuries

Select the most responsible for occasioning the attendance, other diseases or injuries can be entered in other fields.



Observation of condition with no diagnosis

Select the presenting symptom.



Attempted suicide, without injury

Select the underlying mental or behavioural disorder, otherwise select 'suicidal ideation'.



Attempted self-harm

Select 'attempted self-injury'.



No established diagnosis at conclusion

Select the presenting symptom.

Concepts not collected as the Emergency Department Principal Diagnosis



Causes of injury

For ED Principal Diagnosis, instead select the injury.



Comorbidities

For ED Principal Diagnosis, instead select the disease.



Procedures or investigations

For ED Principal Diagnosis, instead select the disease or injury that requires the procedure.



Social determinants

For ED Principal Diagnosis, instead select the reason for presentation.

Reasons for collecting the principal diagnosis

The correct ED Principal Diagnosis helps to identify the reasons people access the Australian health care system through EDs for the purposes of research, education, service planning, and administration. This information is also utilised to facilitate payment of health services, determine utilisation patterns and evaluate the appropriateness of health care costs.

Patient presents with	Following clinical assessment	Principal diagnosis	National reporting standard
Ascites	Ascites due to advanced alcoholic liver disease	Advanced alcoholic liver disease	Alcoholic liver disease
Abdominal pain	No established diagnosis, after assessment	Abdominal pain	Pain in abdomen, acute
Abdominal pain	Assessments reveal gallstones	Gallstones	Cholelithiasis without cholecystitis
Accidental overdose of opioids	Morphine used for overdose	Morphine overdose	Poisoning or exposure to codeine, morphine, or other opioids
Attempted suicide with opioid overdose	No established diagnosis, morphine used for overdose	Morphine overdose	Poisoning or exposure to codeine, morphine, or other opioids
Attempted suicide with no injury	No established diagnosis	Suicidal ideation	Suicidal ideation
Attempted suicide with no injury	Assessment reveals recurrent major depression	Major depression	Depressive episode, recurrent
Fall from slipping in kitchen with suspected head injury	No established diagnosis	Head injury	Injury, unspecified or suspected of head
Request for procedure, fractured wrist requiring application of plaster	Wrist fracture	Wrist fracture	Fracture of wrist and hand

National reporting standard

The ED Short List is a set of terms used for reporting ED Principal Diagnosis to national activity datasets. Other terms may be used in your local ED information system.

Tips for using fields in Emergency Department information systems

- Additional diagnoses are not able to be captured in all systems. Where possible it is encouraged to be collected in the appropriate fields. Selection of the principal diagnosis should not be affected by whether additional diagnoses are able to be collected.
- Searching functionality varies by system. Please seek advice from your hospital administrator for how to best search the ED Principal Diagnosis field.

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