

DEPARTMENT OF HEALTH CARE ACCESS AND INFORMATION  
CALIFORNIA INPATIENT DATA REPORTING MANUAL, EIGHTH EDITION

TYPE OF ADMISSION

Section 97223

*Effective with discharges on and after January 1, 2017, the patient's type of admission shall be reported using the appropriate code from the list below:*

TYPE OF ADMISSION	
1 Emergency	5 Trauma
2 Urgent	9 Information Not Available
3 Elective	
4 Newborn	

**Code**      **Type of Admission**

**1**      **Emergency**

DISCUSSION

The patient requires immediate medical intervention as the result of severe, life threatening or potentially disabling conditions. Medical intervention means that there is an intent to modify an outcome and/or treat a medical condition.\*

**2**      **Urgent**

DISCUSSION

The patient requires immediate attention for the care and treatment of a physical or mental disorder. Medical attention refers to the immediate care that is given before treatment to address a patient's most critical problems like cardiac distress, respiratory distress, and or bleeding.\*

**3**      **Elective**

DISCUSSION

The patient's condition permits adequate time to schedule the services.\*

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**4                    *Newborn***

**DISCUSSION**

Use of this code requires the use of a newborn related point of origin when reporting Source of Admission.\*

A “newborn” is not defined by the age of the patient. Rather, any person should have Type of Admission “newborn” no more than once in their lifetime, as it pertains to initial care. Note that a first hospital encounter is not necessarily for initial care, as in the case of a child who was born in a birthing center, or at home under the care of a licensed midwife. These children will never have a Type of Admission “newborn,” since their initial care was already provided by the birthing center or midwife. Furthermore, according to NUBC guidelines, if a three week old baby presents from home, this is not necessarily considered initial care and as such the child may not be reported as a “newborn”.\*

If a child is born in another hospital and transferred to your facility on the first day of life, the referring facility will report the child as a “newborn.” At your facility the Point of Origin will be “Transfer from a Hospital (Different Facility)” and the type of admission will be urgent or emergency as appropriate.”

**5                    *Trauma***

**DISCUSSION**

Visit to a trauma center/hospital as licensed or designated by the state or local government authority authorized to do so, or as verified by the American College of Surgeons and involving trauma activation.\*

**9                    *Information not available***

**DISCUSSION FOR MENTAL HEALTH PATIENTS**

If a mental patient’s condition is deemed to be life threatening or potentially disabling, then code 1 – Emergency may be appropriate.\*

**DISCUSSION FOR MOTHERS-TO-BE**

**Women in Labor**

- When a woman presents in labor, the Type of Admission would be dependent on the stage of labor and other circumstances.

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Either 1 – Emergency or 2 – Urgent may be appropriate.\*

Scheduled Cesarean

- If a woman is admitted for a scheduled cesarean, type of admission 3 – Elective would generally be appropriate if the admission is not determined to be emergent or urgent.\*

Unscheduled Cesarean

- The Type of Admission for a woman who is admitted for an unscheduled cesarean would be dependent on the circumstances.  
Either 1 – Emergency or 2- Urgent may be appropriate.\*