

Glossary of Terms

Term	Definition
Analytical Institution Type Code	<p>Minimizes the impact of differences between level-of-care definitions across provinces/territories and facilitates comparative reporting across Canada.</p> <p>Assigned when the Institution Type attributed to an Institution Number is known to differ from the type of care provided.</p> <p>The analytical level of care assigned at CIHI is confirmed with the institutions and the provincial/territorial ministries or departments of health.</p>
Encrypted Health Care Number	<p>Health Care Number (HCN) is replaced with an encrypted HCN, which can be used to link records across fiscal years within the DAD and across CIHI's data holdings. A valid value of 0, 1, 8 or 9 in the HCN field is encrypted to the value of 000000000000, which is the same value applied to invalid HCNs.</p>
Forward Sortation Area (FSA)	<p>The first three digits of a postal code that is the lowest level of aggregation.</p>
Institution Number	<p>A standard code assigned by provinces and territories; used for the unique identification of institutions in the DAD and other CIHI databases.</p>
Institution Type Code	<p>The level of care associated with each Institution Number, as defined by the provincial/territorial ministries/departments of health.</p>
Intervention Pre-Admit Flag	<p>Mandatory data element recorded as Y (Yes) when the following are initiated prior to admission:</p> <ul style="list-style-type: none"> • Certain flagged interventions when they continue into the inpatient stay; • Thrombolytic therapy; and • Induction of labour.
Item Non-Response	<p>Occurs when a record is received with some data missing.</p>
Mini-Postal Code	<p>A two-letter code identifying a Canadian province or territory of residence (e.g. 'QC' for Quebec).</p>
Over-Coverage (Institution Level)	<p>When institutions that are not part of the population of reference are included in the frame.</p>
Over-Coverage (Record Level)	<p>When an institution creates multiple abstracts for the same discharge.</p>
Population of Reference	<p>All separations, excluding stillbirths and cadaveric donors, from acute inpatient care and day surgery institutions in all provinces and territories (except Quebec) between April 1 and March 31. Separations for day surgery for provinces and territories that submit to NACRS are not part of the DAD population of reference.</p>
Potential Extra Abstracts	<p>Abstracts with identical values for the following combination of data elements: Province Code, Institution Code, Health Care Number, Birthdate, Gender, Postal Code, Admission Date/Time, Discharge Date/Time, Most Responsible Diagnosis, Principal Intervention Code and Weight.</p> <p>CIHI is unable to identify true extra abstracts definitively without confirmation by the institutions or the provincial/territorial ministries or departments of health.</p>
Under-Coverage (Institution Level)	<p>When an institution should be part of the population of reference but is not included in the frame.</p>
Unit Non-Response (Institution Level)	<p>Occurs when an institution in the frame does not submit any data files for the entire fiscal year. This rate is calculated by dividing the number of institutions that did not submit any data by the number of institutions in the frame.</p>
Unit Non-Response (Record Level)	<p>Occurs when entire abstracts from an institution in the frame are missing. This rate is calculated by dividing the number of missing abstracts by the number of expected abstracts (that is, the sum of the submitted and missing abstracts).</p>
Valid Submitting Institution Number	<p>Designated by a ministry or department of health in a province/territory for an institution that is required to report data on separations to the DAD.</p>
Wait Time in the ED	<p>The difference, in hours, between the Admission Date/Time and the Date/Time Patient Left ED.</p>