

Initiative Supports Standardized Data for Emergency Departments

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As HIM professionals know, variations in the way data are entered in healthcare record systems impede the use of these records for direct patient care and deter their reuse for many other legitimate purposes. Unless standards are introduced, maintained, disseminated, and widely adopted, variations will persist in such basic items of information as the patient's chief complaint, clinical laboratory results, and medications prescribed. The need for accurate data is especially critical in the emergency department (ED) setting, where physicians frequently see patients unknown to them who are acutely ill.

CDC Addresses the Problem

In response to this need, the National Center for Injury Prevention and Control at the Centers for Disease Control and Prevention (CDC) spearheaded the Data Elements for Emergency Department Systems (DEEDS) initiative, a public-private partnership aimed at fostering nationwide standardization of ED patient records and record keeping. The initiative also supports ease and security of data exchange and linkage with other healthcare facilities, public health, and public safety data, and ongoing evaluation and testing of the recommended data elements to guide future revisions. DEEDS is designed to identify, specify, organize, disseminate, and support evaluation of a comprehensive set of data elements for ED patient record systems. The initial product, DEEDS 1.0, is a set of recommended specifications for 156 data elements used in ED record systems, published by the CDC in 1997 and is available in hard copy and at the CDC Web site at www.cdc.gov/ncipc/pub-res/deedspage.htm.

DEEDS 1.0 data elements have been mapped to HL7 version 2.3 in order to aid its implementation in accordance with HL7. Standardization of data element definitions, coding conventions, and other specifications is a prerequisite for optimal record system performance. Adoption of an appropriate set of standards will facilitate faster and better clinical decision making, improved continuity and integrity of care, more timely and comprehensive data for public health surveillance and community risk assessment, and enhanced effectiveness and efficiency of administration, financial management, research, education, training, and quality improvement.

Specifications for individual data elements in DEEDS incorporate national standards for healthcare data, particularly standards applicable to electronic patient records, as much as possible. Adherence to these standards will enable ED record system designers and developers to take maximal advantage of new information technology and high-speed communication networks. Many specifications in DEEDS, such as data element definitions and coding conventions, also are useful to paper-based records, which to a varying extent EDs throughout the United States are likely to use for years to come.

Preparation for DEEDS 2.0

The first version of DEEDS was intended to serve as a starting point. Further work is needed to revise and expand the initial set of recommendations as a result of field use, new developments in health data standards, advances in information technology, and changes in ED data needs. Work on DEEDS 2.0 began in early 2000 and is led by the DEEDS Writing Committee (see "[DEEDS Writing Committee Organizations](#)," below).

During the next 18 months, the DEEDS 2.0 writing committee will:

- review DEEDS 1.0 and identify data elements that need maintenance
- add new data elements to provide comprehensive coverage of the contents of ED patient records
- inventory DEEDS users and uses
- identify and review relevant data standards and guidelines developed by government or private groups

- map DEEDS 2.0 data elements to HL7 Version 3.0
- incorporate input received in response to the forthcoming federal notice of proposed rule making for the ED claims attachment mandated by HIPAA
- define a work process and time line that maximizes voluntary contributions of writing committee members and capitalizes on CDC personnel and resources
- elicit input from a broad spectrum of outside reviewers
- develop a DEEDS 2.0 dissemination plan

By March 2001, a draft of DEEDS 2.0 should be ready for broad distribution and comment. The final version is expected by late 2001. The Writing Committee will provide periodic updates as the work progresses.

DEEDS Writing Committee Organizations

Representatives from the following organizations are on the DEEDS 2.0 Writing Committee:

Agency for Healthcare Research and Quality
American Academy of Pediatrics
American College of Emergency Physicians
American Health Information Management Association
American Hospital Association
Emergency Nurses Association
Health Resources and Services Administration
National Association of EMS Physicians
National Center for Health Statistics, CDC
National Center for Injury Prevention and Control, CDC
National Highway Traffic Safety Administration
Society for Academic Emergency Medicine

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