

Data Element List

A

Abortion

Activity Administered MBq

Activity Administered mCi

Adherence to Treatment

Administration Route

Administration Route Code

Admission Bed Class

Admission Bed Class Code

Admission Date Time

Admission Discipline

Admission Discipline Code

Admission Type

Admission Type Code

Admission Ward

Adverse Drug Reaction Drug Code

Adverse Drug Reaction Drug Name

Adverse Drug Reaction Medication Code

Adverse Drug Reaction Medication Name

Adverse Drug Reaction Type

Adverse Drug Reaction Type

Adverse Drug Reaction Type Code

Adverse Drug Reaction Type Code

Age

Alcohol Use

Allergy

Anatomical Pathology Test Code

Anatomical Pathology Test Name

Anatomical Pathology Test Result

Anatomical Pathology Test Result Code

Antenatal Class

Apgar Score at 1 minute

Apgar Score at 10 minutes

Apgar Score at 5 minutes

Apgar Score Code

ATT Immunization

Autopsy Number

Data Element List

B

Basic Periodontal Examination (BPE)

Basis of Diagnosis

Beneficiary Status

Beneficiary Status Code

Billing Category

Billing Category Code

Birth Attendant

Birth Attendant Code

Birth Head Circumference

Birth Length

Birth Weight

Blood Donor Status

Blood Donor Status Code

Blood Sugar Level

Body Mass Index

Body Release

Brachytherapy Dose Rate Type

Brachytherapy End Date

Brachytherapy Start Date

Brachytherapy Technique

Data Element List

C

Cancer Diagnosis

Cancer-Related Death

Care Provider Discipline

Care Provider Discipline Code

Care Provider Name

Care Provider Registration Number

Care Provider Type

Care Provider Type Code

Caries Free

Caries Free Mouth

Case Category

Case Completion

Cause of Death

Cause of Death Code

Cause of Death_FORENSIC

Cause of Death_WHO

Cause of injury

Cause of Injury Code

Chemotherapy Regime

Chronic Illness Status

Citizenship Status

Citizenship Status Code

Claimant of Dead Body

Classification of Malocclusion - Incisal Relationship

Classification of Malocclusion - Molar Relationship

Cleft Lip and Palate

Clinical Diagnosis

Code Source Of Referral

Code Type of Domestic Violence - OSCC

Collision Type

Collision Type Code

Community Psychiatric Services

Co-morbidity Diagnosis

Co-morbidity Diagnosis Code

Congenital Anomalies According to System

Congenital Anomalies According to System code

Consent Taken

Consultant In-charge – Care Provider Discipline

Consultant In-charge – Name

Consultation In-charge's MMC / MDC registration number

Contact Telephone Number

Contact Telephone Number

Data Element List

Course Number

Current Treatment Modality

Data Element List

D

Data element : Consultant In-charge – Discipline Code

Date of BID

Date Of Birth

Date Of Birth

Date of Body Received

Date of Body Released

Date of Death

Date of Death

Date of Death

Date Of Delivery

Date of Diagnosis

Date of First Treatment/Cycle

Date of Last Blood Donation

Date of Notification (edited from ID 477 in original)

Date of POL61 received

Date of Treatment Prior To This Nuclear Medicine Imaging

Death Certified By

Death Certified By Code

Death Pronounced by

Decayed Deciduous Teeth (d)

Decayed Permanent Teeth (D)

Deciduous Teeth Indicated for Extraction (x)

Dental Anomalies

Dental Procedures

Dental Radiology

Dental Trauma

Denture Needed

Denture Present

Description Of Drug Name

Diagnosis of Complication

Diagnosis of Complication Code

Disability Categories

Disability Status

Disaster Type

Disaster Type Code

Disaster_Forensic

Disaster_Forensic Code

Discharge Date

Discharge Date Time

Discharge Type

Discharge Type Code

Disposition From Emergency Department

Data Element List

Disposition From Emergency Department Code

Disruptive Behaviour

DMFX

Dosage

Dosage Form

Dosage Form Code

Dosage or Quantity

Drug Category

Drug Category Code

Drug Code

Drug Name

Drug Registration Number

Drug Related Complications

Drug Schedule

Drug Schedule Code

Drug Type

Drug Type Code

Duration

Duration of ERBT

Duration of Illness

Duration of Untreated Mental Illness

Duration on Continuous Positive Airway Pressure

Duration on Intermittent Mechanical Ventilation

E

EBRT Technique

Education Level

Education Level Code

EEG

Electron Energy

Email

Email Address

Email Address

Employment Status

End Date

Episode Number

Escort Type

Escort Type Code

External Cause of Death

External Cause of Death Code

External Causes of Injury and Poisoning

External Causes of Injury and Poisoning Code

Data Element List

F

Facility Code

Facility Code

Facility Name

Facility Name

Family History Mental Illness

Family History of Suicide

Fax Number

Fetal Indication for Intervention

Fetal Indication for Intervention Code

Filled Deciduous Teeth (f)

Filled Permanent Teeth (F)

First Contact with Health Service for Presenting Problem

First Identifier (Police Officer)

Fissure Sealant Needed

Fissure Sealant Present

Follow-up Date

Follow-up Frequency

Follow-up Location

Follow-up Treatment

Formulary

Frequency

Frequency

Frequency

Frequency Code

Frequency Code

G

Gender

General Cancer Grouping

Generic Name

Gestation at Booking

Gingivitis

Gravida

H

Health Funding Type

Health Funding Type Code

Height

Height

History of Intentional Self harm/poisoning

History of Other Mental Illness

Hormonal Regime

Household Income Range

Data Element List

I

Identification Document Type

Identification Document Type Code

Imaging Test Code

Imaging Test Name

Imaging Test Order Date

Imaging Test Performed Date

Imaging Test Result

Imaging Test Schedule Date

Immediate Delivery complication

Immediate Delivery complication Code

Immediate Outcome

Immediate Outcome Code

Immobilisation Device

Index of Orthodontic Treatment Need (IOTN)

Indication for PET/CT

Indication for Radioiodine Therapy

Individual Income Range

Injury Activity

Injury Activity Code

Injury Intent

Injury Intent Code

Injury Type

Injury Type Code

Investigation - Radiological Imaging

Investigation - Radiology - Angiogram

Investigation - Radiology - CT-Scan

Investigation - Radiology - Magnetic Resonance Imaging (MRI)

Investigation - Radiology - Mammogram

Investigation - Radiology - Ultrasonogram (USG)

Investigation - Radiology - X-Ray

Investigation - Tumour Marker - Alpha-Fetoprotein (α -FP)

Investigation - Tumour Marker - Beta-2-Microglobulin (B2M)

Investigation - Tumour Marker - CA 125

Investigation - Tumour Marker - CA 15-3

Investigation - Tumour Marker - CA 19-9

Investigation - Tumour Marker - Carcinoembryonic Antigen (CEA)

Investigation - Tumour Marker - Human Chorionic Gonadotropin (HCG)

Investigation - Tumour Marker - Lactate Dehydrogenase (LDH)

Investigation - Tumour Marker - Prostate-Specific Antigen (PSA)

Investigation - Tumour Marker - Thyroglobulin

Investigation - Tumour Markers (All)

Iodine Uptake Blockage Compound/Medication

Data Element List

L

Label Cautionary

Label Instructions & Special Instruction

Laboratory Investigation for Thyroid Disease

Laboratory Test Code

Laboratory Test Name

Laboratory Test Order Date

Laboratory Test Performed Date

Laboratory Test Result

Laboratory Test Schedule Date

Last Fraction Date

Last Menstrual Date

Last Menstrual Period

Living Arrangement

Location Name

Location Name

Location Name

Location Name

Location Name

Data Element List

M

Major Congenital Anomalies

Major Congenital Anomalies Code

Manner of Death

Manufactured Item

Marital Status

Marital Status Code

Maternal Diseases

Maternal Indication for Intervention

Maternal Indication for Intervention Code

Maternal Screening Test

Maternity Leave - Date of Delivery

Measurement of Duration

Measurement of Duration

Medical Alert / Co-existing Condition

Medical Alert / Co-existing Condition Code

Medical Leave – Certificate Number

Medical Leave – Duration

Medical Leave – End Date

Medical Leave – Start Date

Medical Record Number

Medication Code

Medication Name

Medicolegal Specimen

Menopausal Status

Missing Permanent Teeth (M)

MMC / MDC registration number

Mode of Arrival

Mode of Arrival Code

Mode of Delivery

Mode of Delivery

Mode of Delivery Code

Mode of Delivery Code

Morphology

Morphology Code

Multiplicity

Data Element List

N

National Essential Drug List (NEDL)

Nationality

Nationality Code

Newborn Screening Test (Cord blood TSH)

Newborn Screening Test (G6PD)

Next of Kin Name

NHI Contribution Status

NHI Contribution Status Code

Number of Attempts at Intentional Self Harm/Poisoning

Number of Cycles

Number of Day(s) Patient in Intensive Care

Number of Day(s) Patient on Ventilator

Number of Dependants

Number of Past Psychiatric Admissions

O

Occupation

Occupation Class

Occupation Class Code

Occupation Sector

Occupation Sector Code

Oral Hygiene Score

Oral Lesion Sites

Oral Lesion Size

Oral Lesion Stage

Organ Donor Status

Organ Donor Status Code

Organ Donor Type

Organ Type

Organ Type Code

OSCC Patient Type

OSCC Patient Type Code

Other Adverse Reaction / Events

Other Adverse Reaction Code

Other Factors Influencing Health Status and Contact with Health Services

Other Factors Influencing Health Status and Contact with Health Services Code

Data Element List

P

Parity

Past History of Other Cancer(s)

Patient Position

Patient Position Code

Patient Status at Notification

Patient Type

Patient Type Code

Payor Name

Performance Status

Permanent Teeth indicated for Extraction (X)

Person Identification Number – Other

Person Master Index Number

Person Name

Person Name

Person NRIC Number – New

Person NRIC Number – Old

Person Title

Person Title Code

Photon Energy

Place of Death

Place of Death Code

Place of Delivery

Place of delivery code

Place of Injury

Place of Injury code

Planned Hormonal Treatment Duration

Plaque Score

PO Box Number

PO Box Number

POG on Delivery

Police Officer- In charge

Police Report Number

Policy End Date

Policy Holder Name

Policy Holder Name

Policy Number

Policy Start Date

Postcode

Postcode

Postcode

Postcode

Postcode

Data Element List

Post-mortem Examination Date (End)

Post-mortem Examination Date (Start)

Post-mortem examination Time (End)

Post-mortem Examination Time (Start)

Pre-existing Diagnosis

Pre-existing Diagnosis Code

Pregnancy Status

Presenting Complaint List

Presenting Complaint List Code

Pre-Therapy Investigation - Echocardiogram (ECHO)

Pre-Therapy Investigation - Electrocardiogram (ECG)

Pre-Therapy Investigation - Full Blood Count (FBC)

Pre-Therapy Investigation - Liver Function Test (LFT)

Pre-Therapy Investigation - Renal Profile (RP)

Pre-University Entrance Health Assessment

Primary Life Events

Principal Diagnosis

Principal Diagnosis Code

Procedure - Abdominocentesis

Procedure - Bone Marrow Aspiration (BMA)

Procedure - Chemoport Insertion

Procedure - Oncology (All)

Procedure - Pleurocentesis

Procedure - Pleurodesis

Procedure Code

Procedure Name

Procedure Order Date

Procedure Performed – Date

Procedure Schedule Date

Protective Device

Protective Device Code

Pulp Test

Data Element List

R

Race

Race Code

Radiation Type

Radiopharmaceutical

Radiotherapy Dose

Radiotherapy Fractionation

Radiotherapy Type

Refer to Support Services

Referral At Emergency Department Disposition

Referral At Emergency Department Disposition Code

Referral Source – External

Referral Source – External Code

Referral Source – Internal

Referral Source – Internal Code

Referral to Third Party

Region of Interest

Related Medical Illness

Related Medical Illness Code

Relationship

Relationship Code

Religion

Religion Code

Report Date

Report Prepared By – Date

Report Prepared By – Name

Reporting Team

Route of Drug Administration

Data Element List

S

- Screening for High Risk Pregnancy
- Second Identifier (Next of Kin/Others)
- Secondary Life Events
- Self Care
- Sex
- Sex Code
- Simulation Type
- Sleep Study
- Smoking Status
- Social Relationships
- Source of Referral
- Source of referral (by Discipline)
- Staging
- Start Date
- State
- State
- State
- State
- State
- State Code
- State of Current Diagnosis
- Substance Use
- Supportive Therapy Type
- Surat Akuan Bersalin - Certificate Number
- Surface Area

Data Element List

T

Targeted Therapy Category

Targeted Therapy Specific Test

Telephone Number

Therapy Course

Therapy Dose

Time of BID

Time of Birth

Time of Body Received

Time of Body Release

Time of Death

Time of POL 61 Received

Topography Site

Topography Site Code

Topography Sub-sites

Topography Sub-sites Code

Total Number of Antenatal Visit

Town

Town

Town

Town

Town

Town Code

Treatment - Electroconvulsive Therapy

Treatment - Medications

Treatment - Psychotherapy

Treatment Compliance

Treatment Decision Date

Treatment Intent

Treatment Modalities

Treatment Prior to This Nuclear Medicine Imaging

Treatment Required

Treatment Sequence

Treatment Site

Treatment Site - Laterality

Triage Category

Triage Category Code

Triage Classification

Triage Classification Code

Type of Child Abuse

Type of Child Abuse

Type of Domestic Violence - OSCC

Type of Monoclonal Antibody Agent

Data Element List

Type of Previous Treatment Given

Type of Small Molecule Agent

U

Underlying Cause of Death

Underlying Cause of Death Code

Underlying Cause of Death_WHO

Unit of Measure Code

Unit of Measurement

Unit of Measurement

Useful activities

V

Vitamin K Prophylaxis at Birth

W

Waiting Time for Treatment

Weight

Weight on Admission