



Government of **Western Australia**
Department of **Health**

Elective Services Wait List Data Collection

Data Extract Provision Requirements

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1. Patient Administration System Extract Submission Schedule

Pursuant to the *Elective Services Wait List Data Collection Data Reporting Requirements Policy*:

- Health Service Providers (excluding Health Support Services) and Contracted Health Entities must ensure that data is available in the Patient Administration Systems (PASs) for the relevant reporting period as per the scheduled set below.
- Health Support Services and Contracted Health Entities must provide the Elective Services Wait List Data Collection (ESWLDC) with snapshot data extracts taken at regular intervals from the PASs as per the schedule set below.

Weekly "Admissions, Removals, and On List" Extracts

PAS	Snapshot as at	Provided to ESWLDC	Reporting Period
webPAS	Sunday, midnight	Monday < 7am	<ul style="list-style-type: none"> • Admissions and removals that occurred Monday to Sunday of that week. • Cases on list as at midnight Sunday.
TOPAS	Sunday, midnight	Monday < 7am	
JHC - Meditech	Sunday, midnight	Monday < 10am Tuesday when Monday p/hol	
PHC - Meditech	Sunday, midnight	Monday < 10am Tuesday when Monday p/hol	
SJOG Midland - webPAS	Sunday, midnight	Monday < 7am	

The weekly extracts are used for regular weekly reporting, calculation of the OBM KPI, and ad hoc requests.

Weekly extracts are used for monthly reporting of Joondalup Health Campus (JHC), Peel Health Campus (PHC), & St John of God (SJOG) Midland activity.

JHC, PHC, SJOG Midland report public activity only.

Monthly "Admissions, Removals, and On List" Extracts

PAS	Snapshot as at	Provided to ESWLDC	Reporting Period
webPAS	Last day of the month, midnight	First day of the month, < 4am	<ul style="list-style-type: none"> • Admissions and removals that occurred within the calendar month. • Cases on list as at midnight of the last day of the month.
TOPAS	Last day of the month, midnight	First day of the month, < 4am	

The monthly extracts are used for regular monthly, quarterly, and annual reporting, national data submissions, and ad hoc requests.

Weekly "Deferred, Rescheduled, and Cancelled Post Admission" Extracts

PAS	Snapshot as at	Provided to ESWLDC	Reporting Period
webPAS	Sunday, midnight	Monday < 7am	<ul style="list-style-type: none"> • Cases that were deferred, rescheduled, or cancelled post admission Monday to Sunday of that week.
TOPAS	Sunday, midnight	Monday < 7am	

The Deferred, Rescheduled, and Cancelled Post Admission extracts are used for ad hoc requests

2. ESWL Data Set Specifications

Pursuant to the *Elective Services Wait List Data Collection Data Reporting Requirements Policy* Health Service Providers and Contracted Health Entities are to record the ESWL data on the PAS in an accurate and timely manner so that the data is available and can be accessed for inclusion into the ESWLDC in accordance with the agreed documented data set specifications.

The extracts are to be provided as per the ESWL Data Set Specifications detailed in this section which are specified by PAS and type of extract (refer to relevant sub-sections 2.1 to 2.7). The extract provision for webPAS and TOPAS sites are facilitated by Health Support Services.

2.1 webPAS File Specification (On List, Admissions, Removals)

This section is applicable to Health Service Providers utilising webPAS.

Variable Name	Format	Start Position	End Position	Validations/ Comments
Event Type (left justified)	x(4)	1	4	
Morbidity Record Type	x(1)	5	5	Leave blank
Account Number	x(20)	6	25	
Wait List Type	9(2)	26	27	
Wait List Category	9(1)	28	28	
Listing Date for care	9(8)	29	36	
Establishment Number	9(4)	37	40	
Client Identifier	x(10)	41	50	
Patient Surname	x(30)	51	80	
Patient First Forename	x(30)	81	110	
Patient Forename 2	x(30)	111	140	
Patient Address	x(50)	141	190	
Patient Postcode	9(6)	191	196	
Patient Suburb	x(30)	197	226	
Patient State	9(1)	227	227	
Patient Date of Birth	9(8)	228	235	
Gender	9(1)	236	236	
Intended Length of Stay	9(1)	237	237	
Insurance Status	9(1)	238	238	
Payment Classification	9(1)	239	239	
Client Listing Status	9(1)	240	240	
Urgency Category	9(1)	241	241	
Urgency Reassignment Date	9(8)	242	249	
Clinician Responsible for Care	x(13)	250	262	
Specialty Code (numeric)	9(3)	263	265	
Principal Procedure	x(10)	266	275	ACHI code 10 th Edition

Variable Name	Format	Start Position	End Position	Validations/ Comments
Additional Procedures <i>5 Fields</i>	x(10)	276	325	ACHI code 10 th Edition
Principal Diagnosis	x(10)	326	335	ICD-10-AM 10 th Edition
Additional Diagnosis <i>2 Fields</i>	x(20)	336	355	ICD-10-AM 10 th Edition
Premature Booking Reason	x(2)	356	357	
Premature Booking Authorisation	x(2)	358	359	
Premature Implementation Date	x(8)	360	367	
Premature Booking Days on List	9(4)	368	371	
Anaesthetic Assessment	X(2)	372	373	
Surgeon Options	X(2)	374	375	
Body Mass Index	99.9	376	379	
Time Not Ready	9(4)	380	383	
Filler (blank)	X(2)	384	385	Leave blank
Indicator Procedure	9(2)	386	387	
Booking Date	9(8)	388	395	
Admission/Removal Date	9(8)	396	403	Applicable to records with an Event Type of ADM and REM only
Admission/Removal Time	9(4)	404	407	Applicable to records with an Event Type of ADM and REM only
Filler (blank)	9(5)	408	412	Leave Blank
Census Date	9(8)	413	420	
Referring Clinician Surname	x(30)	421	450	
Referring Clinician First forename	x(30)	451	480	
Referring Clinician Address	x(35)	481	515	
Clinician Surname	x(30)	516	545	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Clinician Forename	x(50)	546	595	
Referring Clinician Contact Phone	x(18)	596	613	
Filler (blank)	x(5)	614	618	Leave blank
Specialty Code (character)	x(4)	619	622	
Patient Contact Phone	x(18)	623	640	
Department of Veterans' Affairs File Number	x(12)	641	652	
Department of Veterans' Affairs Card Colour	x(1)	653	653	
Patient Death of Date	x(8)	654	661	
Patient Death Type	x(1)	662	662	
Next of Kin Name and Address (if minor)	x(175)	663	837	
Filler (blank)	x(2)	838	839	Leave blank
Event Deferrals Count	x(3)	840	842	
Count of Cancelled Admissions reverting to wait list for event	x(3)	843	845	
Count of Cancelled Admissions not reverting to wait list	x(3)	846	848	
Urgency Reassignment Time	x(4)	849	852	
Days Waited	x(6)	853	858	
Urgency Category 1	x(4)	859	862	
Urgency Category 2	x(4)	863	866	
Urgency Category 3	x(4)	867	870	
Patient Mailing Address 1	x(36)	871	906	
Patient Mailing Address 2	x(31)	907	937	
Patient Mailing Address Suburb	x(51)	938	988	
Patient Mailing Address Postcode	x(4)	989	992	
Filler (blank)	x(2)	993	994	Leave blank
Ward Code	x(5)	995	999	
Ward/Bed Type	x(3)	1000	1002	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Pre-Admit Date	x(8)	1003	1010	
Tertiary Care Required	x(1)	1011	1011	
Indigenous status	x(1)	1012	1012	
Filler (blank)	x(2)	1013	1014	Leave blank
Referral Source	x(3)	1015	1017	
Reason for removal	X(3)	1018	1020	
Tertiary Care Reason	x(3)	1021	1023	
Administration Date	9(8)	1024	1031	
Over Boundary Date	x(8)	1032	1039	
Visit Number	x(20)	1040	1059	

2.2 TOPAS File Specification (On List, Admissions, Removals)

This section is applicable to Health Service Providers utilising TOPAS.

Variable Name	Format	Start Position	End Position	Validations/ Comments
Event Type (left justified)	x(4)	1	4	
Morbidity Record Type	x(1)	5	5	
Account Number	x(20)	6	25	
Wait List Type	9(2)	26	27	
Wait List Category	9(1)	28	28	
Listing Date for care	9(8)	29	36	
Establishment Number	9(4)	37	40	
Client Identifier	x(10)	41	50	
Patient Surname	x(30)	51	80	
Patient First Forename	x(30)	81	110	
Patient Forename 2	x(30)	111	140	
Patient Address	x(50)	141	190	
Patient Postcode	9(6)	191	196	
Patient Suburb	x(30)	197	226	
Patient State	9(1)	227	227	
Patient Date of Birth	9(8)	228	235	
Gender	9(1)	236	236	
Intended Length of Stay	9(1)	237	237	
Insurance Status	9(1)	238	238	
Payment Classification	9(1)	239	239	
Client Listing Status	9(1)	240	240	
Urgency Category	9(1)	241	241	
Urgency Reassignment Date	9(8)	242	249	
Clinician Responsible for Care	x(13)	250	262	
Specialty Code (numeric)	9(3)	263	265	
Principal Procedure	x(10)	266	275	ACHI code 10 th Edition
Additional Procedures <i>5 Fields</i>	x(10)	276	325	ACHI code 10 th Edition
Principal Diagnosis	x(10)	326	335	ICD-10-AM 10 th Edition
Additional Diagnosis <i>2 Fields</i>	x(20)	336	355	ICD-10-AM 10 th Edition
Premature Booking Reason	x(2)	356	357	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Premature Booking Authorisation	x(2)	358	359	
Premature Implementation Date	x(8)	360	367	
Premature Booking Days on List	9(4)	368	371	
Anaesthetic Assessment	X(2)	372	373	
Surgeon Options	X(2)	374	375	
Body Mass Index	99.9	376	379	
Time Not Ready	9(4)	380	383	
Filler (blank)	X(2)	384	385	Leave blank
Indicator Procedure	9(2)	386	387	
Booking Date	9(8)	388	395	
Admission/Removal Date	9(8)	396	403	Applicable to records with an Event Type of ADM and REM only
Admission/Removal Time	9(4)	404	407	Applicable to records with an Event Type of ADM and REM only
Commonwealth Reason for Removal	9(2)	408	409	AIHW METeOR 684830
(blank)	9(3)	410	412	Leave Blank
Census Date	9(8)	413	420	
Referring Clinician				
Referring Clinician Surname	x(30)	421	450	
Referring Clinician First forename	x(30)	451	480	
Referring Clinician Address	x(35)	481	515	
Clinician Surname	x(30)	516	545	
Clinician Forename	x(50)	546	595	
Referring Clinician Contact Phone	x(18)	596	613	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Professional Code	x(5)	614	618	
Specialty Code (character)	x(4)	619	622	
Patient Contact Phone	x(18)	623	640	
Department of Veterans' Affairs File Number	x(12)	641	652	
Department of Veterans' Affairs Card Colour	x(1)	653	653	
Patient Death of Date	x(8)	654	661	
Patient Death Type	x(1)	662	662	
Next of Kin Name and Address (if minor)	x(175)	663	837	
Referral Source	x(2)	838	839	
Event Deferrals Count	x(3)	840	842	
Count of Cancelled Admissions reverting to wait list for event	x(3)	843	845	
Count of Cancelled Admissions not reverting to wait list	x(3)	846	848	
Urgency Reassignment Time	x(4)	849	852	
Days Waited	x(6)	853	858	
Urgency Category 1	x(4)	859	862	
Urgency Category 2	x(4)	863	866	
Urgency Category 3	x(4)	867	870	
Patient Mailing Address 1	x(36)	871	906	
Patient Mailing Address 2	x(31)	907	937	
Patient Mailing Address Suburb	x(51)	938	988	
Patient Mailing Address Postcode	x(4)	989	992	
Reason for Removal	x(2)	993	994	
Ward Code	x(5)	995	999	
Ward/Bed Type	x(3)	1000	1002	
Tertiary Care Required	x(1)	1011	1011	
Indigenous status	x(1)	1012	1012	

2.3 SJOG Midland webPAS File Specification (On List, Admissions, Removals)

This section is applicable to Contracted Health Entities (SJOG Midland).

Variable Name	Format	Start Position	End Position	Validations/ Comments
Event Type (left justified)	x(4)	1	4	
Filler (blank)	x(1)	5	5	Leave blank
Account Number	x(20)	6	25	
Wait List Type	9(2)	26	27	
Wait List Category	9(1)	28	28	
Listing Date for care	9(8)	29	36	
Establishment Number	9(4)	37	40	
Client Identifier	x(10)	41	50	
Patient Surname	x(30)	51	80	
Patient First Forename	x(30)	81	110	
Patient Forename 2	x(30)	111	140	
Patient Address	x(50)	141	190	
Patient Postcode	9(6)	191	196	
Patient Suburb	x(30)	197	226	
Patient State	9(1)	227	227	
Patient Date of Birth	9(8)	228	235	
Gender	9(1)	236	236	
Intended Length of Stay	9(1)	237	237	
Insurance Status	9(1)	238	238	
Payment Classification	9(1)	239	239	
Client Listing Status	9(1)	240	240	
Urgency Category	9(1)	241	241	
Urgency Reassignment Date	9(8)	242	249	
Clinician Responsible for Care	x(13)	250	262	
Specialty Code (numeric)	9(3)	263	265	
Principal Procedure	x(10)	266	275	ACHI code 10 th Edition
Additional Procedures <i>5 Fields</i>	x(10)	276	325	ACHI code 10 th Edition
Principal Diagnosis	x(10)	326	335	ICD-10-AM 10 th Edition
Additional Diagnosis <i>2 Fields</i>	x(20)	336	355	ICD-10-AM 10 th Edition
Premature Booking Reason	x(2)	356	357	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Premature Booking Authorisation	x(2)	358	359	
Premature Implementation Date	x(8)	360	367	
Premature Booking Days on List	9(4)	368	371	
Anaesthetic Assessment	X(2)	372	373	
Surgeon Options	X(2)	374	375	
Body Mass Index	99.9	376	379	
Time Not Ready	9(4)	380	383	
Filler (blank)	X(2)	384	385	Leave blank
Indicator Procedure	9(2)	386	387	
Booking Date	9(8)	388	395	
Admission/Removal Date	9(8)	396	403	Applicable to records with an Event Type of ADM and REM only
Admission/Removal Time	9(4)	404	407	Applicable to records with an Event Type of ADM and REM only
Reason for Removal	9(2)	408	409	
Filler (blank)	9(3)	410	412	Leave Blank
Census Date	9(8)	413	420	
Referring Clinician				
Referring Clinician Surname	x(30)	421	450	
Referring Clinician First forename	x(30)	451	480	
Referring Clinician Address	x(35)	481	515	
Clinician Surname	x(30)	516	545	
Clinician Forename	x(50)	546	595	
Referring Clinician Contact Phone	x(18)	596	613	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Filler (blank)	x(5)	614	618	Leave blank
Specialty Code (character)	x(4)	619	622	
Patient Contact Phone	x(18)	623	640	
Department of Veterans' Affairs File Number	x(12)	641	652	
Department of Veterans' Affairs Card Colour	x(1)	653	653	
Patient Death of Date	x(8)	654	661	
Patient Death Type	x(1)	662	662	
Next of Kin Name and Address (if minor)	x(175)	663	837	
Referral Source	x(2)	838	839	
Event Deferrals Count	x(3)	840	842	
Count of Cancelled Admissions reverting to wait list for event	x(3)	843	845	
Count of Cancelled Admissions not reverting to wait list	x(3)	846	848	
Urgency Reassignment Time	x(4)	849	852	
Days Waited	x(6)	853	858	
Urgency Category 1	x(4)	859	862	
Urgency Category 2	x(4)	863	866	
Urgency Category 3	x(4)	867	870	
Patient Mailing Address 1	x(36)	871	906	
Patient Mailing Address 2	x(31)	907	937	
Patient Mailing Address Suburb	x(51)	938	988	
Patient Mailing Address Postcode	x(4)	989	992	
Filler (blank)	x(2)	993	994	Leave blank
Ward Code	x(5)	995	999	
Ward/Bed Type	x(3)	1000	1002	
Pre-Admit Date	x(8)	1003	1010	
Tertiary Care Required	x(1)	1011	1011	Not Applicable

Variable Name	Format	Start Position	End Position	Validations/ Comments
Indigenous status	x(1)	1012	1012	
(blank)	x(2)	1013	1020	
Tertiary Care Reason	x(3)	1021	1023	Not Applicable
Administration Date	9(8)	1024	1031	

2.4 Peel Health Campus File Specification (On List, Admissions, Removals)

This section is applicable to Contracted Health Entities (Peel Health Campus).

Variable Name	Format	Start Position	End Position	Validations/ Comments
Event Type (left justified)	x(4)	1	4	
Filler (blank)	x(1)	5	5	Leave blank
Account Number	x(20)	6	25	
Wait List Type	9(2)	26	27	
Wait List Category	9(1)	28	28	
Listing Date for care	9(8)	29	36	
Establishment Number	9(4)	37	40	
Client Identifier	x(10)	41	50	
Patient Surname	x(30)	51	80	
Patient First Forename	x(30)	81	110	
Patient Forename 2	x(30)	111	140	
Patient Address	x(50)	141	190	
Patient Postcode	9(6)	191	196	
Patient Suburb	x(30)	197	226	
Patient State	9(1)	227	227	
Patient Date of Birth	9(8)	228	235	
Gender	9(1)	236	236	
Intended Length of Stay	9(1)	237	237	
Insurance Status	9(1)	238	238	
Payment Classification	9(1)	239	239	
Client Listing Status	9(1)	240	240	
Urgency Category	9(1)	241	241	
Urgency Reassignment Date	9(8)	242	249	
Clinician Responsible for Care	x(13)	250	262	
Specialty Code (numeric)	9(3)	263	265	
Principal Procedure	x(10)	266	275	ACHI code 10 th Edition
Additional Procedures <i>5 Fields</i>	x(10)	276	325	ACHI code 10 th Edition 5 separate fields for Additional Procedures.
Principal Diagnosis	x(10)	326	335	ICD-10-AM 10 th Edition

Variable Name	Format	Start Position	End Position	Validations/ Comments
Additional Diagnosis <i>2 Fields</i>	x(20)	336	355	ICD-10-AM 10 th Edition 2 separate fields for Additional Diagnosis.
Premature Booking Reason	x(2)	356	357	
Premature Booking Authorisation	x(2)	358	359	
Premature Implementation Date	x(8)	360	367	
Premature Booking Days on List	9(4)	368	371	
Anaesthetic Assessment	X(2)	372	373	
Surgeon Options	X(2)	374	375	
Body Mass Index	99.9	376	379	
Time Not Ready	9(4)	380	383	
Filler (blank)	X(2)	384	387	Leave blank
Booking Date	9(8)	388	395	
Admission/Removal Date	9(8)	396	403	Applicable to records with an Event Type of ADM and REM only
Admission/Removal Time	9(4)	404	407	Applicable to records with an Event Type of ADM and REM only
Reason for Removal	9(2)	408	409	
Filler (blank)	9(3)	410	412	Leave Blank
Census Date	9(8)	413	420	
Referring Clinician Surname	x(30)	421	450	
Referring Clinician First forename	x(30)	451	480	
Referring Clinician Address	x(35)	481	515	
Clinician Surname	x(30)	516	545	
Clinician Forename	x(50)	546	595	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Referring Clinician Contact Phone	x(18)	596	613	
Filler (blank)	x(5)	614	618	Leave blank
Specialty Code (character)	x(4)	619	622	
Patient Contact Phone	x(18)	623	640	
Department of Veterans' Affairs File Number	x(12)	641	652	
Department of Veterans' Affairs Card Colour	x(1)	653	653	
Patient Death of Date	x(8)	654	661	
Patient Death Type	x(1)	662	662	
Next of Kin Name and Address (if minor)	x(175)	663	837	
Filler (Blank)	x(2)	838	839	Leave blank
Event Deferrals Count	x(3)	840	842	
Count of Cancelled Admissions reverting to wait list for event	x(3)	843	845	
Count of Cancelled Admissions not reverting to wait list	x(3)	846	848	
Urgency Reassignment Time	x(4)	849	852	
Days Waited	x(6)	853	858	
Urgency Category 1	x(4)	859	862	
Urgency Category 2	x(4)	863	866	
Urgency Category 3	x(4)	867	870	

Variable Name	Format	Start Position	End Position	Validations/ Comments
Patient Mailing Address 1	x(36)	871	906	
Patient Mailing Address 2	x(31)	907	937	
Patient Mailing Address Suburb	x(51)	938	988	
Patient Mailing Address Postcode	x(4)	989	992	
Filler (blank)	x(2)	993	994	Leave blank
Ward Code	x(5)	995	999	
Ward/Bed Type	x(3)	1000	1002	
Pre-Admit Date	x(8)	1003	1010	
Filler (Blank)	x(1)	1011	1011	Leave blank
Indigenous status	x(1)	1012	1012	
Filler (blank)	x(2)	1013	1014	Leave blank
Referral Source	x(3)	1015	1017	
Filler (blank)	x(3)	1018	1020	Leave blank
Tertiary Care Reason	x(3)	1021	1023	
Administration Date	9(8)	1024	1031	

2.5 Joondalup Health Campus File Specification (On List, Admissions, Removals)

This section is applicable to Contracted Health Entities (Joondalup Health Campus).

Variable Name	Format	Field Length	Validations/ Comments
Establishment Number	Num	3	
Client Identifier	Alpha	10	
Account Number	Longint	10	
Patient Surname	Alpha	30	
Patient First Forename	Alpha	23	
Patient Address	Alpha	50	
Patient Suburb	Alpha	30	
Patient Postcode	Alpha	4	
Patient State	Integer	3	
Patient Date of Birth	Date	8	
Gender	Integer	1	
Listing Date for care	Date	8	
Clinician	Longint	13	
Specialty Code (numeric)	Integer	3	
Urgency Category	Integer	1	
Principal Procedure	Integer	8	ACHI code 10 th Edition
Principal Procedure Description	Alpha	64	
Specialty Code (code)	Alpha	4	
Clinician Surname and Forename	Alpha	60	
Patient Status	Alpha	8	Values represent patients status of: Admitted, Discharged, Deferred, Removed, Scheduled or Unscheduled
Days Waited	Num	12	
Claim Type	Integer	3	Equivalent to HMDS Payment Classification
Admission	Date	8	Applicable to records with an Event Type of ADM only

Variable Name	Format	Field Length	Validations/ Comments
Discharge Date	Date	8	Applicable to records with an Event Type of ADM only
Removal Date	Date	8	Applicable to records with an Event Type of REM only
Reason for Removal	Integer	2	Applicable to records with an Event Type of REM only
Event Type	Alpha	3	
Client Listing Status	Integer	1	
Booking Date	Date	8	
Indigenous Status	Integer	1	

2.6 webPAS File Specification (Deferrals, Reschedules or Post Admission Cancellations)

This section is applicable to Health Service Providers utilising webPAS.

Variable Name	Format	Start Position	End Position	Validations/ Comments
Event Type (left justified)	x(4)	1	4	DEF, RES,PAC
Filler (blank)	x(2)	5	5	Leave blank
PAC Revert to Wait List Indicator	x(1)	7	7	
Account Number	x(20)	8	27	
Wait List Category	9(1)	28	28	
Listing Date for care	9(8)	29	36	
Establishment Number	9(4)	37	40	
Client Identifier	x(10)	41	50	
Patient Surname	x(30)	51	80	
Patient First Forename	x(30)	81	110	
Patient Forename 2	x(30)	111	140	
Patient Address	x(50)	141	190	
Patient Postcode	9(6)	191	196	
Patient Suburb	x(30)	197	226	
Patient Date of Birth	9(8)	227	234	
Gender	9(1)	235	235	
Intended Length of Stay	9(1)	236	236	
Insurance Status	9(1)	237	237	
Payment Classification	9(1)	238	239	
Client Listing Status	9(1)	240	240	
Urgency Category	9(1)	241	241	
Clinician Responsible for Care	x(13)	242	254	
Specialty Code (numeric)	9(3)	255	257	
Principal Procedure	x(10)	258	267	ACHI code 10 th Edition
Principal Diagnosis	x(10)	268	277	ICD-10-AM 10 th Edition
Previous Scheduled Admission Date	9(8)	278	285	
New Scheduled Admission Date	9(8)	286	293	
Admission Date	9(8)	294	301	Applicable to records with an Event Type of PAC only
Admission Time	9(4)	302	305	Applicable to records with an Event Type of PAC only

Variable Name	Format	Start Position	End Position	Validations/ Comments
Actual Date of Event	9(8)	306	313	This is the actual Date the cancellation occurred
Actual Time of Event	9(4)	314	317	
Time Not Ready for Care	9(3)	318	320	
Census Date	9(8)	321	328	
Referral Source	x(2)	329	330	
Event Days On List	x(6)	331	336	Calculation will be different for PACs that do not get reverted to the wait list i.e. if event type = 'PAC' and revert to wait list indicator = 'N' then event days on list will be admission date – listing date - unavailable days.
Event Days in Urgency Category 1	x(4)	337	340	
Event Days in Urgency Category 2	x(4)	341	344	
Event Days in Urgency Category 3	x(4)	345	348	
Reversal Record	X(1)	349	349	
AIHW reportable / non reportable	X(1)	350	350	
Medical Authorisation approved	X(1)	351	351	
Reason for Cancellation Code	X(3)	352	354	
Reason for Cancellation Description	X(20)	355	374	
Bed Type	X(3)	375	377	
Wait List Type	9(2)	378	379	

2.7 TOPAS File Specification (Deferrals, Reschedules or Post Admission Cancellations)

This section is applicable to Health Service Providers utilising TOPAS.

Variable Name	Format	Start Position	End Position	Validation/ Comments
Event Type (left justified)	x(4)	1	4	DEF, RES,PAC
Reason for Cancellation Code	x(2)	5	5	
PAC Revert to Wait List Indicator	x(1)	7	7	
Account Number	x(20)	8	27	
Wait List Category	9(1)	28	28	
Listing Date for care	9(8)	29	36	
Establishment Number	9(4)	37	40	
Client Identifier	x(10)	41	50	
Patient Surname	x(30)	51	80	
Patient First Forename	x(30)	81	110	
Patient Forename 2	x(30)	111	140	
Patient Address	x(50)	141	190	
Patient Postcode	9(6)	191	196	
Patient Suburb	x(30)	197	226	
Patient Date of Birth	9(8)	227	234	
Gender	9(1)	235	235	
Intended Length of Stay	9(1)	236	236	
Insurance Status	9(1)	237	237	
Payment Classification	9(1)	238	239	
Client Listing Status	9(1)	240	240	
Urgency Category	9(1)	241	241	
Clinician Responsible for Care	x(6)	242	247	
Specialty Code (numeric)	9(4)	248	251	
Principal Procedure	x(10)	252	271	ACHI code 10 th Edition
Filler (blank)	x(10)	272	277	
Previous Scheduled Admission Date	9(8)	272	279	
New Scheduled Admission Date	9(8)	280	287	
Admission Date	9(8)	288	295	Applicable to records with an Event Type of PAC only
Admission Time	9(4)	296	299	Applicable to records with an Event Type of PAC only

Variable Name	Format	Start Position	End Position	Validation/ Comments
Actual Date of Event	9(8)	300	307	This is the actual Date the cancellation occurred
Actual Time of Event	9(4)	308	311	
Time Not Ready for Care	9(3)	312	314	
Census Date	9(8)	315	322	
Referral Source	x(2)	323	324	
Event Days On List	x(6)	325	330	Calculation will be different for PACs that do not get reverted to the wait list i.e. if event type = 'PAC' and revert to wait list indicator = 'N' then event days on list will be admission date – listing date - unavailable days.
Event Days in Urgency Category 1	x(4)	331	334	
Event Days in Urgency Category 2	x(4)	335	338	
Event Days in Urgency Category 3	x(4)	339	342	
Reversal Record	X(1)	343	343	

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on request for a person with a disability.**

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