Data Submission Specifications for the MDS 3.0 (V1.14.1)
Detailed Data Specifications Report
Section: G

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110A1	Bed mobility: self-performance	Asmt		Code	1	646-646

Item Subsets

Active: NC,NQ,NP,NS,NSD,NO,NOD,ND,SP,SS,SSD,SO,SOD,SD
Inactive: NT,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110A2	Bed mobility: support provided	Asmt		Code	1	647-647

Item Subsets

Active: NC,NQ,NP,NS,NSD,NO,NOD,SP,SS,SSD,SO,SOD
Inactive: ND,NT,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110B1	Transfer: self-performance	Asmt		Code	1	648-648

Item Subsets
Active: NC,NQ,NP,NS,NSD,NO,NOD,ND,SP,SS,SSD,SO,SOD,SD
Inactive: NT,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110B2	Transfer: support provided	Asmt		Code	1	649-649

Item Subsets

Active: NC,NQ,NP,NS,NSD,NO,NOD,SP,SS,SSD,SO,SOD
Inactive: ND,NT,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110C1	Walk in room: self-performance	Asmt		Code	1	650-650

Item Subsets

Active: NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive: NS,NO,NT,SS,SO,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110C2	Walk in room: support provided	Asmt		Code	1	651-651

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Data Submission Specifications for the MDS 3.0 (V1.14.1)
Detailed Data Specifications Report
Section: G

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110D1	Walk in corridor: self-performance	Asmt		Code	1	652-652

Item Subsets

Active: NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive: NS,NO,NT,SS,SO,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110D2	Walk in corridor: support provided	Asmt		Code	1	653-653

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110E1	Locomotion on unit: self-performance	Asmt		Code	1	654-654

Item Subsets
Active: NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive: NS,NO,NT,SS,SO,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110E2	Locomotion on unit: support provided	Asmt		Code	1	655-655

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110F1	Locomotion off unit: self-performance	Asmt		Code	1	656-656

Item Subsets

Active: NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive: NS,NO,NT,SS,SO,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110F2	Locomotion off unit: support provided	Asmt		Code	1	657-657

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110G1	Dressing: self-performance	Asmt		Code	1	658-658

Item Subsets

Active:	NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive:	NS,NO,NT,SS,SO,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110G2	Dressing: support provided	Asmt		Code	1	659-659

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110H1	Eating: self-performance	Asmt		Code	1	660-660

Item Subsets

Active:	NC,NQ,NP,NS,NSD,NO,NOD,ND,SP,SS,SSD,SO,SOD,SD
Inactive:	NT,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110H2	Eating: support provided	Asmt		Code	1	661-661

Item Subsets

Active:	NC,NQ,NP,NS,NSD,NO,NOD,SP,SS,SSD,SO,SOD
Inactive:	ND,NT,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110I1	Toilet use: self-performance	Asmt		Code	1	662-662

Item Subsets

Active:	NC,NQ,NP,NS,NSD,NO,NOD,ND,SP,SS,SSD,SO,SOD,SD
Inactive:	NT,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110I2	Toilet use: support provided	Asmt		Code	1	663-663

Item Subsets

Active:	NC,NQ,NP,NS,NSD,NO,NOD,SP,SS,SSD,SO,SOD
Inactive:	ND,NT,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110J1	Personal hygiene: self-performance	Asmt		Code	1	664-664

Item Subsets

Active: NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive: NS,NO,NT,SS,SO,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help or staff oversight at any time
1		Supervision - oversight, encouragement or cueing
2		Limited assistance - resident highly involved in activity; staff provide guided maneuvering of limbs or other non-weight-bearing assistance
3		Extensive assistance - resident involved in activity, staff provide weight-bearing support
4		Total dependence - full staff performance every time during entire 7-day period
7		Activity occurred only once or twice - activity did occur but only once or twice
8		Activity did not occur - activity did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0110J2	Personal hygiene: support provided	Asmt		Code	1	665-665

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3764	Consistency	Fatal	The following rules apply to each pair of items in Column 1 and Column 2, from G0110A1 through G0110J2: a) If either item in the pair is equal to [8], then both items in the pair must equal [8]. b) If an item in Column 1 is equal to [2,3,4], then the corresponding item in Column 2 must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0120A	Bathing: self-performance	Asmt		Code	1	666-666

Item Subsets

Active: NC,NQ,NP,NSD,NOD,ND,SP,SSD,SOD,SD
Inactive: NS,NO,NT,SS,SO,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Independent - no help provided
1		Supervision - oversight help only
2		Physical help limited to transfer only
3		Physical help in part of bathing activity
4		Total dependence
8		Activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3774	Consistency	Fatal	a) If either G0120A or G0120B is equal to [8], then both items must equal [8]. b) If G0120A=[2,3,4], then G0120B must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0120B	Bathing: support provided	Asmt		Code	1	667-667

Item Subsets

Active: NC,NQ,NP,SP

Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX

State optional:

Item Values

Value	LOINC Code	Value Text
0		No setup or physical help from staff
1		Setup help only
2		One person physical assist
3		Two+ persons physical assist
8		ADL activity itself did not occur or family and/or non-facility staff provided care 100% of the time for that activity over the entire 7-day period
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3774	Consistency	Fatal	a) If either G0120A or G0120B is equal to [8], then both items must equal [8]. b) If G0120A=[2,3,4], then G0120B must equal [2,3].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0300A	Balance: moving from seated to standing position	Asmt		Code	1	668-668

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Steady at all times
1		Not steady, but able to stabilize without staff assistance
2		Not steady, only able to stabilize with staff assistance
8		Activity did not occur
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0300B	Balance: walking (with assistive device if used)	Asmt		Code	1	669-669

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Steady at all times
1		Not steady, but able to stabilize without staff assistance
2		Not steady, only able to stabilize with staff assistance
8		Activity did not occur
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0300C	Balance: turning around while walking	Asmt		Code	1	670-670

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Steady at all times
1		Not steady, but able to stabilize without staff assistance
2		Not steady, only able to stabilize with staff assistance
8		Activity did not occur
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0300D	Balance: moving on and off toilet	Asmt		Code	1	671-671

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Steady at all times
1		Not steady, but able to stabilize without staff assistance
2		Not steady, only able to stabilize with staff assistance
8		Activity did not occur
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0300E	Balance: surface-to-surface transfer	Asmt		Code	1	672-672

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Steady at all times
1		Not steady, but able to stabilize without staff assistance
2		Not steady, only able to stabilize with staff assistance
8		Activity did not occur
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0400A	ROM limitation: upper extremity	Asmt		Code	1	673-673

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No impairment
1		Impairment on one side
2		Impairment on both sides
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0400B	ROM limitation: lower extremity	Asmt		Code	1	674-674

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No impairment
1		Impairment on one side
2		Impairment on both sides
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0600A	Mobility devices: cane/crutch	Asmt		Checklist	1	675-675

Item Subsets

Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3505	None of above	Fatal	If G0600A through G0600D and G0600Z are all active, then the following rules apply: a) If G0600Z=[0], then at least one item from G0600A through G0600D must equal [1]. b) If G0600Z=[1], then all items from G0600A through G0600D must equal [0]. c) If G0600Z=[-], then at least one item from G0600A through G0600D must equal [-] and all remaining items must equal [0,-].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0600B	Mobility devices: walker	Asmt		Checklist	1	676-676

Item Subsets
Active: NC,NQ,NP,SP
Inactive: NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3505	None of above	Fatal	If G0600A through G0600D and G0600Z are all active, then the following rules apply: a) If G0600Z=[0], then at least one item from G0600A through G0600D must equal [1]. b) If G0600Z=[1], then all items from G0600A through G0600D must equal [0]. c) If G0600Z=[-], then at least one item from G0600A through G0600D must equal [-] and all remaining items must equal [0,-].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0600C	Mobility devices: wheelchair (manual or electric)	Asmt		Checklist	1	677-677

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3505	None of above	Fatal	If G0600A through G0600D and G0600Z are all active, then the following rules apply: a) If G0600Z=[0], then at least one item from G0600A through G0600D must equal [1]. b) If G0600Z=[1], then all items from G0600A through G0600D must equal [0]. c) If G0600Z=[-], then at least one item from G0600A through G0600D must equal [-] and all remaining items must equal [0,-].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0600D	Mobility devices: limb prosthesis	Asmt		Checklist	1	678-678

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3505	None of above	Fatal	If G0600A through G0600D and G0600Z are all active, then the following rules apply: a) If G0600Z=[0], then at least one item from G0600A through G0600D must equal [1]. b) If G0600Z=[1], then all items from G0600A through G0600D must equal [0]. c) If G0600Z=[-], then at least one item from G0600A through G0600D must equal [-] and all remaining items must equal [0,-].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0600Z	Mobility devices: none of the above	Asmt		Checklist	1	679-679

Item Subsets

Active:	NC,NQ,NP,SP
Inactive:	NS,NSD,NO,NOD,ND,NT,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		Not checked (No)
1		Checked (Yes)
-		Not assessed/no information

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3505	None of above	Fatal	If G0600A through G0600D and G0600Z are all active, then the following rules apply: a) If G0600Z=[0], then at least one item from G0600A through G0600D must equal [1]. b) If G0600Z=[1], then all items from G0600A through G0600D must equal [0]. c) If G0600Z=[-], then at least one item from G0600A through G0600D must equal [-] and all remaining items must equal [0,-].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0900A	Resident believes capable of increased independ	Asmt		Code	1	680-680

Item Subsets

Active: NC
Inactive: NQ,NP,NS,NSD,NO,NOD,ND,NT,SP,SS,SSD,SO,SOD,SD,ST,XX
State optional:

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
9		Unable to determine
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3535	Skip pattern	Fatal	a) If A0310A=[02,03,04,05,06,99], then all active items from G0900A through G0900B must equal [^]. b) If A0310A=[01], then all active items from G0900A through G0900B must not equal [^].

Item ID	Item Label	Item Group	LOINC Code	Item Type	Max Length	Fixed Format Start-End Bytes
G0900B	Staff believes res capable of increased independ	Asmt		Code	1	681-681

Item Subsets

Active:	NC
Inactive:	NQ,NP,NS,NSD,NO,NOD,ND,NT,SP,SS,SSD,SO,SOD,SD,ST,XX
State optional:	

Item Values

Value	LOINC Code	Value Text
0		No
1		Yes
-		Not assessed/no information
^		Blank (skip pattern)

Item Edits

Edit ID	Edit Type	Severity	Edit Text
-3676	Format	Fatal	Values of Code and Checklist Items: Only the coded values listed in the "Item Values" table of the Detailed Data Specifications Report may be submitted for this item.
-3535	Skip pattern	Fatal	a) If A0310A=[02,03,04,05,06,99], then all active items from G0900A through G0900B must equal [^]. b) If A0310A=[01], then all active items from G0900A through G0900B must not equal [^].