OASIS-C Guidance Manual Errata

Updated December 2012

Section / Page#	Item #	Change
Chapter 3 / Page B-2	M0090	**DELETED** the following 2nd bullet point in Data Sources/Resources: • Patient/caregiver interview for dates of transfer to inpatient facility or death at home
Chapter 3 / Page B-5	M0102	**ADDED** as a new bullet between the existing 3rd and 4th bullets in the Response-Specific Instructions: • Because the SOM requires a visit within 48 hours of resumption of care following hospitalization, mark "N/A" if the physician orders a ROC date that extends beyond 2 calendar days of the inpatient facility discharge.
Chapter 3 / Page C-5	M1012	**DELETED** all current bullets under Response-Specific Instructions and **REPLACED** with the following: • It is no longer necessary to enter Inpatient Procedures as M1012 is not used for quality or payment functions. The item may not be left blank. Any response of NA, UK, or procedure codes represents an acceptable response.
Chapter 3 / Page F-7	M1308	**REVISED** the 2nd bullet under Response-Specific Instructions to read: • For Column 2, report the number of Stage II or higher pressure ulcers that were identified in Column 1 and were present on the most recent SOC/ROC, **even if it was at a different stage.**
Chapter 3 / Page F-14	M1324	**DELETED** the word “granulating” from the first sentence of the last bullet under Response-Specific Instructions. The sentence now reads: Reverse staging of pressure ulcers is NOT an appropriate clinical practice according to the National Pressure Ulcer Advisory Panel (NPUAP).

Section / Page#	Item #	Change
Chapter 3 / Page F-19	M1340	**REVISED** the 2nd bullet on page F-19 under Response-Specific Instructions to read: • A PICC line, either tunneled or non-tunneled, is NOT a surgical wound, as it is peripherally inserted.
Chapter 3 / Page H-2	M1510	**REVISED** the Response-Specific Instructions – **revised** the 1st bullet to read: • Include any actions that were taken **in response to HF symptoms** at least one time at the time of the last OASIS assessment or since that time. **ADDED** a new bullet between the current 4th and 5th bullets: • Response 2 should be selected when the patient exhibits symptoms of heart failure that require immediate attention in an emergency room and is advised to do so. It is not selected when a patient is educated to go to the ER or call 911 based on pre-established parameters. **MOVED** the next to last bullet to the end of the Response-Specific Instructions for consistency.
Chapter 3 / Page I-2	M1610	**ADDED** a new bullet between the current 7th and 8th bullet points under Response-Specific Instructions: • A catheter solely utilized for irrigation of the bladder or installation with an antibiotic is not reported in this item.

Section / Page#	Item #	Change
Chapter 3 / Page J-2	M1710	**REPLACED** the 3rd bullet under Response-Specific Instructions to read: • Response 0 is selected if the patient had no confusion in the last 14 days. Responses 1-4 are selected if the patient has experienced confusion and each response represents a worsening of confusion frequency. Response 1 is selected when the patient's confusion is isolated to a new or a complex situation, e.g. the patient became confused when a new caregiver was introduced or when a procedure was performed the first time. Response 2, 3, & 4 are selected when confusion occurs without the stimulus of a new or complex situation, or when confusion which initially presented with a new or complex situation persists days after the new or complex situation become more routine. Responses 2, 3 & 4 differ from each other based on the time when the confusion occurred. Response 2 is selected if the confusion only occurred when the patient was awakening from a sleep or during the night. Response 3 is selected if the confusion occurs during the day and evening, but is not constant. If confusion was not constant, but occurred more often than just upon awakening or at night, select Response 3.
Chapter 3 / Page J-2	M1710	**REPLACED** the last (4th) bullet under Response-Specific Instructions with the following: • "Nonresponsive" means that the patient is unable to respond or the patient responds in a way that you can't make a clinical judgment about the patient's level of orientation. If the patient is nonresponsive at the time of assessment, report whether the patient experienced any confusion during the past 14 days if this information can be elicited from the caregiver or other source. If the patient is non-responsive at the time of assessment and the information cannot be elicited from the caregiver or other source, select NA – Patient non-responsive.
Chapter 3 / Page J-3	M1720	**REPLACED** the 3rd bullet under Response-Specific Instructions with the following: • "Nonresponsive" means that the patient is unable to respond or the patient responds in a way that you can't make a clinical judgment about the patient's level of anxiety. If the patient is nonresponsive at the time of assessment, report whether the patient experienced any anxiety during the past 14 days if this information can be elicited from the caregiver or other source. If the patient is non-responsive at the time of assessment and the information cannot be elicited from the caregiver or other source, select NA – Patient non-responsive.
Chapter 3 / Page K-14	M1860	**REVISED** the 2nd bullet under Response-Specific Instructions by deleting the last sentence.

Section / Page#	Item #	Change
Chapter 3 / Page L-8	M2020	**REVISED** the 5th bullet under Response-Specific Instructions to read: • Select Response 1 if the patient is independent in oral medication administration if another person must prepare individual doses (e.g., place medications in a medi-planner or other device) and/or if another person in the home must modify the original medication container to enable patient access (e.g., removing childproof lids, marking labels for the visually impaired or illiterate), or if someone in the home must develop a drug diary or chart which the patient relies on to take medications appropriately.
Chapter 3 / Page L-11	M2030	**INSERTED** before the last bullet point under Response-Specific Instructions on page L-11: • PRN injectables, ordered and included on POC, are to be considered when determining the patient's ability to manage injectable medications. If the PRN medication was not needed during the assessment timeframe, use clinical judgment and make an inference regarding the patient's ability by asking them to describe and demonstrate the steps for administration and needle disposal, considering the patient's cognitive and physical status as well as any other barriers.
Chapter 3 / Page O-2	M2300	**DELETED** the 4th bullet from the Data sources / Resources list.
Chapter 3 / Page O-4	M2310	**DELETED** the 4th bullet from the Data Sources / Resources list.
Chapter 3 / Page O-4	M2310	Unnecessary shading has been removed from the Response-Specific Instruction row at the top of the page.

Section / Page#	Item #	Change
Chapter 3 / Page P-2	M2400	**REPLACED** the first 3 bullet points under Response-Specific Instructions to read: • Select "Yes" if the physician-ordered plan of care (POC) includes the specified best practice interventions as specified in each row, at or since the previous OASIS assessment, and there is evidence of implementation in the clinical record. If orders are present and implemented, "Yes" may be selected even if the formal assessment was not conducted, or did not suggest a need for the particular intervention. • Select "No" if the interventions are not on the plan of care OR if the interventions are on the plan of care but the interventions were not implemented by the time the discharge or transfer assessment was completed. For "No" responses, the care provider should document rationale in the clinical record. • Select "NA" if the plans/interventions specified in the row are not appropriate for this patient. See guidance on selecting NA for each row below.
Chapter 5		**REPLACE CHAPTER** Resources / Links – all links were reviewed and updated, if necessary.
Appendix B Page B-5		**Subsection c. Making Corrections To Oasis Data** was revised to read as follows: For questions about OASIS corrections, contact your state OASIS Automation Coordinator.
Appendix C		The following changes were made to OASIS-C Item Uses table in Appendix C: Page C-3: Item M1308 was listed twice; this item was combined for one entry. Page C-5: Item M1900 was out of numerical order and is now correct.