

Datensatz Lebertransplantation

LTX (Spezifikation 2019 V01)

BASIS	
Genau ein Bogen muss ausgefüllt werden	
1-12	Basisdaten Empfänger
1	Institutionskennzeichen <small>http://www.arge-ik.de</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
2	entlassender Standort <small>zweistellig, ggf. mit führender Null</small> <input type="text"/> <input type="text"/>
3	behandelnder Standort (OPS) <small>gemäß auslösendem OPS-Kode, bei mehreren Leistungen bezogen auf die Erstprozedur, zweistellig, ggf. mit führender Null</small> <input type="text"/> <input type="text"/>
4	Betriebsstätten-Nummer <input type="text"/> <input type="text"/>
5	Aufnahmedatum Krankenhaus <small>TT.MM.JJJJ</small> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
6	Fachabteilung <small>§ 301-Vereinbarung: http://www.dkgev.de</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
7	Empfänger ID <small>ET-Nummer</small> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
8	Liegt eine wirksame Einwilligung des Patienten zur weiteren Übermittlung der Daten an das TX-Register vor? <input type="checkbox"/> 0 = nein 1 = ja
9	Geburtsdatum <small>TT.MM.JJJJ</small> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
10	Geschlecht <input type="checkbox"/> 1 = männlich 2 = weiblich 8 = unbestimmt
11	Körpergröße <input type="text"/> <input type="text"/> <input type="text"/> cm
12	Körpergewicht bei Aufnahme <input type="text"/> <input type="text"/> <input type="text"/> kg

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TRANSPLANTATION	
Mindestens ein Bogen muss ausgefüllt werden	
13-32	Transplantation
13	Wievielte Transplantation während dieses Aufenthaltes? <input type="text"/> <input type="text"/>
14	Zentrumsangebot 0 = nein 1 = ja <input type="checkbox"/>
15-23	Empfängerdaten
15	Dringlichkeit der Transplantation gemäß Medical Urgency Code ET-Status 1 = HU (High Urgency) 2 = ACO (Approved Combined Organ) 3 = T (Transplantable) <input type="checkbox"/>
16.1	Bilirubin i. S. in mg/dl Wert der letzten Zertifizierung bei Eurotransplant vor der Transplantation <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> mg/dl
16.2	Bilirubin i. S. in µmol/l Wert der letzten Zertifizierung bei Eurotransplant vor der Transplantation <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> µmol/l
17.1	Kreatininwert i.S. in mg/dl Wert der letzten Zertifizierung bei Eurotransplant vor der Transplantation <input type="text"/> <input type="text"/> , <input type="text"/> mg/dl
17.2	Kreatininwert i.S. in µmol/l Wert der letzten Zertifizierung bei Eurotransplant vor der Transplantation <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> µmol/l
18	INR (International Normalized Ratio) Wert der letzten Zertifizierung bei Eurotransplant vor der Transplantation <input type="text"/> , <input type="text"/> <input type="text"/>
19	Dialyse- oder Hämofiltrationsverfahren mindestens zweimal innerhalb der letzten 7 Tage präoperativ 0 = nein 1 = ja <input type="checkbox"/>
20	exceptional MELD zugewiesen 0 = nein 1 = ja <input type="checkbox"/>
wenn Feld 20 = 1	
21>	exceptional MELD <input type="text"/> <input type="text"/>
22>	Begründung für exceptional MELD 0 = non-standard-exception 1 = standard-exception <input type="checkbox"/>
wenn Feld 22 = 1	
23>>	standard exception Schlüssel 1 <input type="text"/> <input type="text"/>
24-25	Spenderdaten
24	Spendertyp 1 = hirntot 2 = Domino 3 = lebend <input type="checkbox"/>
25	Spenderalter Alter in Jahren <input type="text"/> <input type="text"/> <input type="text"/>
26-32	Operation
26	Indikation zur Lebertransplantation Schlüssel 2 <input type="text"/> <input type="text"/> <input type="text"/>
27	OP-Datum TT.MM.JJJJ <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
28	Operation alle OPS-Kodes des durchgeführten Eingriffs http://www.dimdi.de 1. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 2. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 3. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 4. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 5. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 6. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 7. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 8. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 9. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 10. <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
29	Abbruch der Transplantation 0 = nein 1 = ja <input type="checkbox"/>
30	Spenderorgan 1 = full size 2 = reduced size left lateral 3 = reduced size left 4 = reduced size right 5 = reduced size extended right 6 = true split 7 = left lateral split 8 = extended right split <input type="checkbox"/>
31	kalte Ischämiezeit (Stunden) <input type="text"/> <input type="text"/> Stunden
32	kalte Ischämiezeit (zusätzliche Minuten) <input type="text"/> <input type="text"/> Minuten

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BASIS	
Genau ein Bogen muss ausgefüllt werden	
33-37	Entlassung Empfänger
33	Entlassungsdatum Krankenhaus <small>TT.MM.JJJJ</small> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
34	Entlassungsdiagnose(n) <small>alle Entlassungsdiagnosen, die in inhaltlichem Zusammenhang mit der in diesem Leistungsbereich dokumentierten Leistung stehen</small> <small>ICD-10-GM</small> <small>http://www.dimdi.de</small> 1. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 2. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 3. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 4. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 5. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 6. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 7. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 8. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 9. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> 10. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> * * * 30. <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
35	Entlassungsdiagnose nach ELTR <input type="text"/> <input type="text"/> <input type="text"/> Schlüssel 2
36	Entlassungsgrund <small>§ 301-Vereinbarung: http://www.dkgev.de</small> <input type="text"/> <input type="text"/> Schlüssel 3
wenn Feld 36 = '07'	
37>	Todesursache <input type="text"/> <input type="text"/> <input type="text"/> Schlüssel 4

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Schlüssel 1

- 1 = Hepatozelluläres Karzinom (HCC)
- 2 = Nichtmetastasierendes Hepatoblastom
- 3 = Adulte polyzystische Degeneration der Leber (APDL)
- 4 = Primäre Hyperoxalurie Typ 1 (PH 1)
- 5 = Persistierende Dysfunktion (auch "small for size" Leber) mit Indikation zur Replantation
- 6 = Zystische Fibrose (Mukoviszidose)
- 7 = Familiäre Amyloidotische Polyneuropathie (FAP)
- 8 = Hepatopulmonales Syndrom
- 9 = Portopulmonale Hypertension
- 10 = Harnstoffzyklusdefekte
- 11 = Morbus Osler
- 12 = Hepatisches Hämangioendotheliom
- 13 = Biliäre Sepsis/sekundär sklerosierende Cholangitis (SSC)
- 14 = Primär sklerosierende Cholangitis (PSC)
- 15 = Cholangiokarzinom
- 16 = Neuroendokrine Tumoren
- 17 = Biliäre Atresie

Schlüssel 2

- A1 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Virus A
- A10 = Acute hepatic failure-Post operative
- A11 = Acute hepatic failure-Post traumatic
- A12 = Acute hepatic failure-Others
- A13 = Subacute hepatitis-Virus A
- A14 = Subacute hepatitis-Virus B
- A15 = Subacute hepatitis-Virus C
- A16 = Subacute hepatitis-Virus D
- A17 = Subacute hepatitis-Other known
- A18 = Subacute hepatitis-Other unknown
- A19 = Subacute hepatitis-Paracetamol
- A2 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Virus B
- A20 = Subacute hepatitis-Other drug related
- A21 = Subacute hepatitis-Toxic (non drug)
- A3 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Virus C
- A4 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Virus D
- A5 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Other known
- A6 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Other unknown
- A7 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Paracetamol
- A8 = Acute hepatic failure-Fulm or Subfulm hep-Other drug related
- A9 = Acute hepatic failure-Fulminant or Subfulm hepatitis-Toxic (non drug)
- B1 = Cholestatic disease-Secondary biliary cirrhosis
- B2 = Cholestatic disease-Primary biliary cirrhosis
- B3 = Cholestatic disease-Primary sclerosing cholangitis
- B4 = Cholestatic disease-Others
- C1 = Congenital biliary disease-Caroli disease
- C2 = Congenital biliary disease-Extrahepatic biliary atresia
- C4 = Congenital biliary disease-Congenital biliary fibrosis
- C5 = Congenital biliary disease-Choledochal cyst
- C6 = Congenital biliary disease-Alagille syndrome
- C7 = Congenital biliary disease-Others
- D1 = Cirrhosis-Alcoholic cirrhosis
- D10 = Cirrhosis-Other cirrhosis
- D11 = Cirrhosis-Cryptogenic (unknown) cirrhosis
- D2 = Cirrhosis-Autoimmune Cirrhosis
- D3 = Cirrhosis-Virus B related cirrhosis
- D4 = Cirrhosis-Virus C related cirrhosis

- D5 = Cirrhosis-Virus BD related cirrhosis
- D6 = Cirrhosis-Virus BC related cirrhosis
- D7 = Cirrhosis-Virus BCD related cirrhosis
- D8 = Cirrhosis-Virus related cirrhosis - Other viruses
- D9 = Cirrhosis-Post hepatitis cirrhosis - Drug related
- E1 = Cancers-Hepatocellular carcinoma and cirrhosis
- E10 = Cancers-Secondary liver tumors - Other neuroendocrine
- E11 = Cancers-Secondary liver tumors - Colorectal
- E12 = Cancers-Secondary liver tumors - GI non colorectal
- E13 = Cancers-Secondary liver tumors - Non gastrointestinal
- E14 = Cancers-Other liver malignancies
- E2 = Cancers-Hepatocellular carcinoma and non cirrhotic liver
- E3 = Cancers-Hepatocellular carcinoma - Fibrolamellar
- E4 = Cancers-Biliary tract carcinoma (Klatskin)
- E5 = Cancers-Hepatic cholangiocellular carcinoma
- E6 = Cancers-Hepatoblastoma
- E7 = Cancers-Epitheloid hemangioendothelioma
- E8 = Cancers-Angiosarcoma
- E9 = Cancers-Secondary liver tumors - Carcinoid
- F1 = Metabolic diseases-Wilson disease
- F10 = Metabolic diseases-Other porphyria
- F11 = Metabolic diseases-Crigler-Najjar
- F12 = Metabolic diseases-Cystic fibrosis
- F13 = Metabolic diseases-Byler disease
- F14 = Metabolic diseases-Others
- F2 = Metabolic diseases-Hemochromatosis
- F3 = Metabolic dis-Alpha-1 - Antitrypsin deficiency
- F4 = Metabolic diseases-Glycogen storage disease
- F5 = Metabolic dis-Homozygous Hypercholesterolemia
- F6 = Metabolic diseases-Tyrosinemia
- F7 = Metabolic diseases-Familial amyloidotic polyneuropathy
- F8 = Metabolic diseases-Primary hyperoxaluria
- F9 = Metabolic diseases-Protoporphyrin
- G = Budd Chiari
- H1 = Benign liver tumors or Polycystic dis-Hepatic adenoma
- H2 = Benign liver tumors or Polycystic dis-Adenomatosi
- H3 = Benign liver tumors or Polycystic dis-Hemangioma
- H4 = Benign liver tumors or Polycystic dis-Focal nodular hyperplasia
- H5 = Benign liver tumors or Polycystic dis-Polycystic disease
- H6 = Benign liver tumors or Polycystic dis-Nodular regenerative hyperplasia
- H7 = Benign liver tumors or Polycystic dis-Other benign tumors
- I1 = Parasitic disease-Schistosomia (Bilharzia)
- I2 = Parasitic disease-Alveolar echinococcosis
- I3 = Parasitic disease-Cystic hydatidosis
- I4 = Parasitic disease-Others
- J = Other liver diseases
- K = Not available
- L = Primary Nonfunction

Schlüssel 3

- 01 = Behandlung regulär beendet
- 02 = Behandlung regulär beendet, nachstationäre Behandlung vorgesehen
- 03 = Behandlung aus sonstigen Gründen beendet
- 04 = Behandlung gegen ärztlichen Rat beendet
- 05 = Zuständigkeitswechsel des Kostenträgers
- 06 = Verlegung in ein anderes Krankenhaus
- 07 = Tod

- 08 = Verlegung in ein anderes Krankenhaus im Rahmen einer Zusammenarbeit (§ 14 Abs. 5 Satz 2 BPIV in der am 31.12.2003 geltenden Fassung)
- 09 = Entlassung in eine Rehabilitationseinrichtung
- 10 = Entlassung in eine Pflegeeinrichtung
- 11 = Entlassung in ein Hospiz
- 13 = externe Verlegung zur psychiatrischen Behandlung
- 14 = Behandlung aus sonstigen Gründen beendet, nachstationäre Behandlung vorgesehen
- 15 = Behandlung gegen ärztlichen Rat beendet, nachstationäre Behandlung vorgesehen
- 17 = interne Verlegung mit Wechsel zwischen den Entgeltbereichen der DRG-Fallpauschalen, nach der BPIV oder für besondere Einrichtungen nach § 17b Abs. 1 Satz 15 KHG
- 22 = Fallabschluss (interne Verlegung) bei Wechsel zwischen voll- und teilstationärer Behandlung
- 25 = Entlassung zum Jahresende bei Aufnahme im Vorjahr (für Zwecke der Abrechnung - PEPP, § 4 PEPPV 2013)

Schlüssel 4

- A1 = Intraoperative death (death on table)
- B1 = Infection-Bacterial infection
- B2 = Infection-Viral infection
- B3 = Infection-HIV
- B4 = Infection-Fungal infection
- B5 = Infection-Parasitic infection
- B6 = Infection-Other known infection
- C1 = Liver complications-Acute rejection
- C10 = Liv complic-Recurrence of original dis=Virus C
- C11 = Liv complic-Recurrence of original dis=Virus D
- C12 = Liv complic-Recurrence of original dis=Alcoholic
- C13 = Liv complic-Recurrence of original dis=PBC
- C14 = Liv complic-Recurrence of original dis=PSC
- C15 = Liv complic-Recurrence of original dis=Autoimmune
- C16 = Liv complic-Recurrence of original dis=Budd Chiari
- C17 = Liv complic-Recur of orig dis=Other non tumoral
- C18 = Liver complic-De novo hepatitis B virus
- C19 = Liver complications-De novo hepatitis C virus
- C2 = Liver complications-Chronic rejection
- C20 = Liver complications-De novo hepatitis D virus
- C21 = Liver complic-Massive hemorrhagic necrosis
- C22 = Liver complications-Other viral hepatitis
- C23 = Liver complications-Infection
- C24 = Liver complications-Other
- C3 = Liver complications-Arterial thrombosis
- C4 = Liver complic-Hepatic vein thrombosis
- C5 = Liver complic-Primary N-function (Retx or death <= 7d)
- C6 = Liv complic-Primary dysfunction (Retx or death > 7d)
- C7 = Liver complic-Anastomotic biliary complic
- C8 = Liver complic-Non anastomotic biliary complic
- C9 = Liver complic-Recurrence of original dis=Virus B
- D1 = Gastrointestinal complications-GI haemorrhage
- D2 = Gastrointestinal complications-Pancreatitis
- D3 = Gastrointestinal complic-Visceral perforation
- D4 = Gastrointestinal complications-Other
- E1 = Cardiovascular complications-Myocardial infarction
- E2 = Cardiovascular complications-Other cause
- F1 = Cerebrovascular complications-Intracranial haemorrhage
- F2 = Cerebrovascular complications-Ischemic stroke
- F3 = Cerebrovascular complications-Cerebral oedema
- F4 = Cerebrovascular complications-Cerebral infection
- G1 = Tumor-Recurrence of original tumor
- G2 = Tumor-Recurrence of previously unrelated tumor
- G3 = Tumor-De novo solid organ tumor

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G4 = Tumor-Donor transmitted tumor
G5 = Tumor-Lympho proliferation disease
H1 = Kidney failure
H2 = Urinary tract infection
I1 = Pulmonary complications-Embolism
I2 = Pulmonary complications-Infection
J1 = Social complic-Non compliance immunosup
therapy
J2 = Social complications-Suicide
J3 = Social complications-Trauma (Motor, Vehicle,...)
K1 = Bone marrow depression
L1 = Other cause
M1 = Not available