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## Inventory of Rural Health Research Related Databases

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Database name:	<b>Discharge Abstract Database</b>
Abstract:	This database collects data on hospital discharges. These data are also used to evaluate patient expected length of stay and resource consumption. In addition to inpatient hospitalizations, some jurisdictions / facilities provide information on same day surgery discharges.
Maintained by:	CIHI
Availability:	Data disclosure is determined by CIHI's Privacy and Confidentiality Policy (see <a href="http://www.cihi.ca">www.cihi.ca</a> ). If privacy and confidentiality criteria are met, data can be released at the sub-provincial level. Costs are dependent upon the level data required, plus programming and processing fees.
Start Date:	1963 1979/80 – Present form
Release Date:	Approximately 5 months after reference period for general release
Frequency of collection:	On-going
Data Collection:	CIHI receives data directly from participating hospitals.
Sample size:	About 4.3 million records per annum
Geographic coverage:	Coverage has been increasing over time. Currently, about 85% of hospital inpatient discharges in Canada are included, consisting of all hospitals in every province and territory except Quebec and parts of Manitoba (Manitoba only submits 40% of their data) for both acute/inpatient data. It also contains Day Surgery Data for all provinces except Quebec, Alberta and parts of Manitoba. If comprehensive geographic coverage is required, the Hospital Morbidity Database may be used instead for national reporting.
Lowest geographic level collected:	Postal Code of patient. Collection and completeness of postal codes varies (e.g. Quebec reports only the Forward Sortation Area – the first 3 digits of the postal code)
Lowest geographic level of release:	Forward Sortation Area or Enumeration Area depending on request
Existing rural variable:	No
Rural definitions that can be constructed from this database include (building block):	
✓ Census “rural areas”	(Enumeration Area)
✓ Rural and Small Town definition	(Census Subdivision)
✓ Metropolitan area and census agglomeration Influenced Zones	(Census Subdivision)
✓ OECD “rural communities definition	(Census Consolidated Subdivision)
✓ OECD “predominantly rural regions” definition	(Census Division)
✓ Ehrensaft’s “Beale codes”	(Census Division)

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Data Elements:

Selected data elements include:

- most responsible physician/diagnosis
- principal procedure
- patient gender, date of birth, postal code
- institution/hospital number.
- admission/discharge, (e.g. admission category, length of stay).

Notes:

The advantages of the Discharge Abstract Database include its timeliness, value-added data elements (e.g. Case Mix Groups and Resource Intensity Weights), and coverage of same day surgery for selected jurisdictions/facilities.

Data are reported based on the region of the patient's residence, not region of hospitalization. Consequently, these figures reflect the hospitalization experience of residents of the region wherever they are treated as opposed to the comprehensive activity of the region's hospitals. It represents how frequently residents of a given area received hospital care rather than the volume of services provided by hospitals.

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