

## FCDS IDEA Disease Index File Layout

### Tab separated file layout for uploads via FCDS IDEA

Field#	Item Name	Maximum Field Length
1.	FCDS Facility Number	4
2.	Patient Last Name	40
3.	Patient First Name	40
4.	Patient Middle Name	40
5.	Patient Date of Birth	8
6.	Patient Social Security Number	9
7.	Patient Sex	1
8.	Patient Race	2
9.	Discharge Date	8
10.	ICD-9 Code or ICD-10 Code	<b>5 or 6 ***</b>
11.	Patient ID / Medical Record #	12

#### File structure notes:

- Files must be in ASCII, with one CR/LF sequence at end of each record.
- Fields are separated by 1 tab character, beginning after field 1 and no tab after field 11. Since there are 11 fields, each record must have exactly 10 separating tabs. Files with extra/missing tabs - in any record - will be rejected.
- No embedded CR/LF, TABS other than as field separators, or other control characters in text fields.
- No quotes "" around fields, just data.
- Dates are in YYYYMMDD format – do not add “/” or “-“. Dates will be validated (don't submit 99999999 or 20030229)..
- No "Header" records with variable names, just data.
- All fields except Middle Name are required. Do not use blanks for missing information. Required fields that are missing/unknown, such as Sex, have codes for missing.
- Field lengths are the maximum allowed length for that field. Don't add extra trailing spaces to field.
- Files may be compressed before upload using the DOS/Windows ZIP compression standard. PKZIP or WINZIP are examples of programs that produce the correct compressed format.
- \*\*\* The ICD Code is validated based on Discharge Date. Dates after 9/30/2015 require ICD-10 Codes with maximum length 6. Earlier Discharge Dates require ICD-9 Codes with maximum length 5.

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Field#	Item Name	Maximum Field Length
1	FCDS Facility Number	4

This is a required data item containing the FCDS Facility number for your facility. Contact FCDS if you do not know your FCDS Facility number.

Field#	Item Name	Maximum Field Length
2	Patient Last Name	40

This is a required data item containing the patient's last name.

Field#	Item Name	Maximum Field Length
3	Patient First Name	40

This is a required data item containing the patient's first name.

Field#	Item Name	Maximum Field Length
4	Patient Middle Name	40

This is an optional data item containing the patient's middle name.

Field#	Item Name	Maximum Field Length
5	Patient Date of Birth	8

This is a required data item containing the patient's date of birth in YYYYMMDD format. The date will be validated so 9s or other invalid dates will cause the file upload to be rejected.

Field#	Item Name	Maximum Field Length
6	Patient Social Security Number	9

This is a required data item containing the patient's Social Security Number. Enter 999999999 in this field if the SSN is unknown or missing.

Field#	Item Name	Maximum Field Length
7	Patient Sex	1

This is a required data item containing the patient's sex. Use the following codes: 1=Male, 2=Female, 3=Other, 9=Unknown/not stated

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Field#	Item Name	Maximum Field Length
8	Patient Race	2

This is a required data item containing the patient's race. Use the following codes:

Code	Definition
1	White
2	Black
3	American Indian, Aleutian, Eskimo
4	Chinese
5	Japanese
6	Filipino
7	Hawaiian
8	Korean
9	Asian Indian, Pakistani
10	Vietnamese
11	Laotian
12	Hmong
13	Kampuchean (Cambodian)
14	Thai
15	Asian Indian or Pakistani, NOS
16	Asian Indian
17	Pakistani
20	Micronesian, NOS
21	Chamorroan
22	Guamanian, NOS
25	Polynesian, NOS
26	Tahitian
27	Samoan
28	Tongan
30	Melanesian, NOS
31	Fiji Islander
32	New Guinean
88	No Further Race Documented
96	Other Asian including Asian, NOS and Oriental ,NOS
97	Pacific Islander, NOS
98	Other
99	Unknown

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Field#	Item Name	Maximum Field Length
9	Discharge Date	8

This is a required data item containing the patient's date of discharge in YYYYMMDD format. The date will be validated so 9s or other invalid dates will cause the file upload to be rejected.

Field#	Item Name	Maximum Field Length
10	ICD-9 or ICD-10 Code	5 or 6

This is a required data item containing the **5 maximum digit ICD-9 code without decimals or maximum 6 digit ICD-10 code without decimals** and will be validated against the FCDS Case finding list found on the FCDS website (fcds.med.miami.edu) under Downloads->Data Acquisition Manual.

*The ICD Code is validated based on Discharge Date. Dates after 9/30/2015 require ICD-10 Codes with maximum length 6. Earlier Discharge Dates require ICD-9 Codes with maximum length 5.*

Field#	Item Name	Maximum Field Length
11	Patient ID or Medical Record Number	11

This is a required data item containing your facility's patient id number or medical record number that will uniquely identify a patient in your records.