

**MDS 3.0 Item Set Change History
for October 2018
Version 1.16.0**

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Legend: X = item set impacted
NA = not applicable; changed item does not impact this item set

Version 1.16.0 Changes

Section C Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
Footer	Incremented version to 1.16.0 Effective 10/01/2018 DRAFT	X	X	X	X	X	X	X	X	X	X	X	X	X	X
C1310A	<p>Modified existing/New Item text:</p> <p>C1310. Signs and Symptoms of Delirium (from CAM©) Code after completing Brief Interview for Mental Status or Staff Assessment, and reviewing medical record</p> <p>A. Acute Onset Mental Status Change Is there evidence of an acute change in mental status from the resident's baseline? 0. No 1. Yes</p>	X	X	X	X	X	NA	X	NA	X	NA	X	X	X	X
C1310B	<p>Modified existing/New Item text:</p> <p>Enter Codes in Boxes</p> <p>B. Inattention - Did the resident have difficulty focusing attention, for example, being easily distractible or having difficulty keeping track of what was being said?</p>	X	X	X	X	X	NA	X	NA	X	NA	X	X	X	X

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C1310C	<p>Modified existing/New Item text:</p> <p>C. Disorganized Thinking - Was the resident's thinking disorganized or incoherent (rambling or irrelevant conversation, unclear or illogical flow of ideas, or unpredictable switching from subject to subject)?</p>	X	X	X	X	X	NA	X	NA	X	NA	X	X	X	X
C1310D	<p>Modified existing/New Item text:</p> <p>D. Altered Level of Consciousness - Did the resident have altered level of consciousness, as indicated by any of the following criteria?</p> <ul style="list-style-type: none"> • vigilant - startled easily to any sound or touch • lethargic - repeatedly dozed off when being asked questions, but responded to voice or touch • stuporous - very difficult to arouse and keep aroused for the interview • comatose - could not be aroused <p>Coding:</p> <p>0. Behavior not present</p> <p>1. Behavior continuously present, does not fluctuate</p> <p>2. Behavior present, fluctuates (comes and goes, changes in severity)</p>	X	X	X	X	X	NA	X	NA	X	NA	X	X	X	X

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Section GG Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
GG0100	New Item: GG0100. Prior Functioning: Everyday Activities. Indicate the resident's usual ability with everyday activities prior to the current illness, exacerbation, or injury	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0100A	New Item: A. Self-Care: Code the resident's need for assistance with bathing, dressing, using the toilet, or eating prior to the current illness, exacerbation, or injury.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0100B	New Item: B. Indoor Mobility (Ambulation): Code the resident's need for assistance with walking from room to room (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation, or injury.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0100C	New Item: C. Stairs: Code the resident's need for assistance with internal or external stairs (with or without a device such as cane, crutch, or walker) prior to the current illness, exacerbation, or injury.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0100D	New Item: D. Functional Cognition: Code the resident's need for assistance with planning regular tasks, such as shopping or remembering to take medication prior to the current illness, exacerbation, or injury.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0110	New Item: GG0110. Prior Device Use. Indicate devices and aids used by the resident prior to the current illness, exacerbation, or injury Check all that apply	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0110A	New Item: A. Manual wheelchair	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0110B	New Item: B. Motorized wheelchair and/or scooter	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0110C	New Item: C. Mechanical lift	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0110D	New Item: D. Walker	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0110E	New Item: E. Orthotics/Prosthetics	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0110Z	New Item: Z. None of the above	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130 Discharge goal coding (Admission)	Modified existing text: Code the resident's usual performance at the start of the SNF PPS stay (admission) for each activity using the 6-point scale. If activity was not attempted at the start of the SNF PPS stay (admission), code the reason. Code the resident's end of SNF PPS stay (discharge) goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code discharge goal(s).	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130 Coding options (Admission)	Modified existing text: From 6-point scale 05. Setup or clean-up assistance - Helper sets up or cleans up ; resident completes activity. Helper assists only prior to or following the activity.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0130 Coding options (Admission)	Modified existing text: From 6-point scale 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130 Coding options (Admission)	Modified existing text: If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130A (Admission)	Modified existing text: A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the resident.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130B (Admission)	Modified existing text: B. Oral hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130C (Admission)	Modified existing text: C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0130E (Admission)	New Item: E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130F (Admission)	New Item: F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130G (Admission)	New Item: G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0130H (Admission)	New Item: H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170 Discharge goal coding (Admission)	Modified existing text: Code the resident's usual performance at the start of the SNF PPS stay (admission) for each activity using the 6-point scale. If activity was not attempted at the start of the SNF PPS stay (admission), code the reason. Code the resident's end of SNF PPS stay (discharge) goal(s) using the 6-point scale. Use of codes 07, 09, 10, or 88 is permissible to code discharge goal(s).	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170 Coding option (Admission)	Modified existing text: From 6-point scale 05. Setup or clean-up assistance - Helper sets up or cleans up ; resident completes activity. Helper assists only prior to or following the activity.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0170 Coding option (Admission)	Modified existing text: From 6-point scale 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170 Coding option (Admission)	Modified existing text: If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170A (Admission)	New Item: A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170C (Admission)	Modified existing text: C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170D (Admission)	Modified existing text: D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0170E (Admission)	Modified existing text: E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170F (Admission)	Modified existing text: F. Toilet transfer: The ability to get on and off a toilet or commode.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170G (Admission)	New Item: G. Car transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170H1 (Admission)	Item Deleted	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170I (Admission)	New Item: I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If admission performance is coded 07, 09, 10, or 88 --> Skip to GG0170M, 1 step (curb)	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170L (Admission)	New Item: L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170M (Admission)	New Item: M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170N (Admission)	New Item: N. 4 steps: The ability to go up and down four steps with or without a rail.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0170O (Admission)	New Item: O. 12 steps: The ability to go up and down 12 steps with or without a rail.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170P (Admission)	New Item: P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170Q1 (Admission)	Modified existing text: Q1. Does the resident use a wheelchair and/or scooter? 0. No -> Skip to H0100, Appliances 1. Yes -> Continue to GG0170R, Wheel 50 feet with two turns	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170R (Admission)	Modified existing text: R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170RR1 (Admission)	Modified existing text: RR1. Indicate the type of wheelchair or scooter used. 1. Manual 2. Motorized	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170S (Admission)	Modified existing text: S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
GG0170 SS1 (Admission)	Modified existing text: SS1. Indicate the type of wheelchair or scooter used. 1. Manual 2. Motorized	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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GG0130 (Discharge)	Modified existing text: Code the resident's usual performance at the end of the SNF PPS stay for each activity using the 6-point scale. If an activity was not attempted at the end of the SNF PPS stay, code the reason.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130 Coding options (Discharge)	Modified existing text: From 6-point scale 05. Setup or clean-up assistance - Helper sets up or cleans up; resident completes activity. Helper assists only prior to or following the activity.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130 Coding options (Discharge)	Modified existing text: From 6-point scale 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130 Coding options (Discharge)	Modified existing text: If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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GG0130A (Discharge)	Modified existing text: A. Eating: The ability to use suitable utensils to bring food and/or liquid to the mouth and swallow food and/or liquid once the meal is placed before the resident.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130B (Discharge)	Modified existing text: B. Oral hygiene: The ability to use suitable items to clean teeth. Dentures (if applicable): The ability to insert and remove dentures into and from the mouth, and manage denture soaking and rinsing with use of equipment.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130C (Discharge)	Modified existing text: C. Toileting hygiene: The ability to maintain perineal hygiene, adjust clothes before and after voiding or having a bowel movement. If managing an ostomy, include wiping the opening but not managing equipment.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130E (Discharge)	New Item: E. Shower/bathe self: The ability to bathe self, including washing, rinsing, and drying self (excludes washing of back and hair). Does not include transferring in/out of tub/shower.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130F (Discharge)	New Item: F. Upper body dressing: The ability to dress and undress above the waist; including fasteners, if applicable.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0130G (Discharge)	New Item: G. Lower body dressing: The ability to dress and undress below the waist, including fasteners; does not include footwear.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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GG0130H (Discharge)	New Item: H. Putting on/taking off footwear: The ability to put on and take off socks and shoes or other footwear that is appropriate for safe mobility; including fasteners, if applicable.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170 (Discharge)	Modified existing text: Code the resident's usual performance at the end of the SNF PPS stay for each activity using the 6-point scale. If an activity was not attempted at the end of the SNF PPS stay, code the reason.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170 Coding option (Discharge)	Modified existing text: From 6-point scale 05. Setup or clean-up assistance - Helper sets up or cleans up ; resident completes activity. Helper assists only prior to or following the activity.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170 Coding option (Discharge)	From 6-point scale 04. Supervision or touching assistance - Helper provides verbal cues and/or touching/steadying and/or contact guard assistance as resident completes activity. Assistance may be provided throughout the activity or intermittently.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170 Coding option (Discharge)	If activity was not attempted, code reason: 07. Resident refused 09. Not applicable - Not attempted and the resident did not perform this activity prior to the current illness, exacerbation, or injury. 10. Not attempted due to environmental limitations (e.g., lack of equipment, weather constraints) 88. Not attempted due to medical condition or safety concerns	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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GG0170A (Discharge)	New Item: A. Roll left and right: The ability to roll from lying on back to left and right side, and return to lying on back on the bed.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170C (Discharge)	Modified existing text: C. Lying to sitting on side of bed: The ability to move from lying on the back to sitting on the side of the bed with feet flat on the floor, and with no back support.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170D (Discharge)	Modified existing text: D. Sit to stand: The ability to come to a standing position from sitting in a chair, wheelchair, or on the side of the bed.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170E (Discharge)	Modified existing text: E. Chair/bed-to-chair transfer: The ability to transfer to and from a bed to a chair (or wheelchair).	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170F (Discharge)	Modified existing text: F. Toilet transfer: The ability to get on and off a toilet or commode.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170G (Discharge)	New Item: G. Car transfer: The ability to transfer in and out of a car or van on the passenger side. Does not include the ability to open/close door or fasten seat belt.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170H3 (Discharge)	Item Deleted	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170I (Discharge)	New Item: I. Walk 10 feet: Once standing, the ability to walk at least 10 feet in a room, corridor, or similar space. If discharge performance is coded 07, 09, 10, or 88 --> Skip to GG0170M, 1 step (curb)	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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GG0170L (Discharge)	New Item: L. Walking 10 feet on uneven surfaces: The ability to walk 10 feet on uneven or sloping surfaces (indoor or outdoor), such as turf or gravel.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170M (Discharge)	New Item: M. 1 step (curb): The ability to go up and down a curb and/or up and down one step.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170N (Discharge)	New Item: N. 4 steps: The ability to go up and down four steps with or without a rail.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170O (Discharge)	New Item: O. 12 steps: The ability to go up and down 12 steps with or without a rail.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170P (Discharge)	New Item: P. Picking up object: The ability to bend/stoop from a standing position to pick up a small object, such as a spoon, from the floor.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170Q3 (Discharge)	Modified existing text: Q3. Does the resident use a wheelchair and/or scooter? 0. No -> Skip to H0100, Appliances 1. Yes -> Continue to GG0170R, Wheel 50 feet with two turns	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170R (Discharge)	Modified existing text: R. Wheel 50 feet with two turns: Once seated in wheelchair/scooter, the ability to wheel at least 50 feet and make two turns.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170RR3 (Discharge)	Modified existing text: RR3. Indicate the type of wheelchair or scooter used. 1. Manual 2. Motorized	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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GG0170S (Discharge)	Modified existing text: S. Wheel 150 feet: Once seated in wheelchair/scooter, the ability to wheel at least 150 feet in a corridor or similar space.	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
GG0170 SS3 (Discharge)	Modified existing text: SS3. Indicate the type of wheelchair or scooter used. 1. Manual 2. Motorized	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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Section I Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD								
I0020 I0020A	<p>New Item:</p> <p>I0020. Indicate the resident's primary medical condition category Indicate the resident's primary medical condition category that best describes the primary reason for admission Complete only if A0310B = 01 01. Stroke 02. Non-Traumatic Brain Dysfunction 03. Traumatic Brain Dysfunction 04. Non-Traumatic Spinal Cord Dysfunction 05. Traumatic Spinal Cord Dysfunction 06. Progressive Neurological Conditions 07. Other Neurological Conditions 08. Amputation 09. Hip and Knee replacement 10. Fractures and Other Multiple Trauma 11. Other Orthopedic Conditions 12. Debility, Cardiorespiratory Conditions 13. Medically Complex Conditions 14. Other Medical Condition If "other medical condition," enter the ICD code in the boxes</p> <p>I0020A.</p> <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table>									X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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Section J Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
J2000	<p>New Item:</p> <p>J2000. Prior Surgery Did the resident have major surgery during the 100 days prior to admission?</p> <p>0. No 1. Yes 8. Unknown</p>	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

Section M Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
Section M Intro Note	<p>Modified existing text:</p> <p>Report based on highest stage of existing ulcers/injuries at their worst; do not "reverse" stage</p>	X	X	X	X	X	X	X	NA	X	NA	X	X	X	X
M0100	<p>Modified existing text:</p> <p>M0100. Determination of Pressure Ulcer/Injury Risk</p>	X	X	NA	X	X	NA	X	NA	X	NA	X	X	X	X
M100A	<p>Modified existing text:</p> <p>A. Resident has a pressure ulcer/injury, a scar over bony prominence, or a non-removable dressing/device</p>	X	X	NA	X	X	NA	X	NA	X	NA	X	X	X	X
M0150	<p>Modified existing text:</p> <p>M0150. Risk of Pressure Ulcers/Injuries</p> <p>Is this resident at risk of developing pressure ulcers/injuries?</p> <p>0. No 1. Yes</p>	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA

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Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
M0210	<p>Modified existing text:</p> <p>M0210. Unhealed Pressure Ulcers/Injuries Does this resident have one or more unhealed pressure ulcers/injuries?</p> <p>0. No → Skip to M1030, Number of Venous and Arterial Ulcers</p> <p>1. Yes → Continue to M0300, Current Number of Unhealed Pressure Ulcers/Injuries at Each Stage</p>	X	X	X	X	X	X	X	NA	X	NA	X	X	X	X
M0300	<p>Modified existing text:</p> <p>M0300. Current Number of Unhealed Pressure Ulcers/Injuries at Each Stage</p>	X	X	X	X	X	X	X	NA	X	NA	X	X	X	X
M0300A	<p>Modified existing text:</p> <p>A. Stage 1: Intact skin with non-blanchable redness of a localized area usually over a bony prominence. Darkly pigmented skin may not have a visible blanching; in dark skin tones only it may appear with persistent blue or purple hues</p> <p>1. Number of Stage 1 pressure injuries</p>	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
M0300B3	Item Deleted	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
M0300D1	<p>Modified existing text:</p> <p>1. Number of Stage 4 pressure ulcers - If 0 → Skip to M0300E, Unstageable - Non-removable dressing/device</p>	X	X	X	X	X	X	X	NA	X	NA	X	X	X	X
M0300E	<p>Modified existing text:</p> <p>E. Unstageable - Non-removable dressing/device: Known but not stageable due to non-removable dressing/device</p> <p>1. Number of unstageable pressure ulcers/injuries due to non-removable dressing/device - If 0 → Skip to M0300F, Unstageable - Slough and/or eschar</p> <p>2. Number of these unstageable pressure ulcers/injuries that were present upon admission/entry or reentry - enter how many were noted at the time of admission/entry or reentry</p>	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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M0300G	<p>Modified existing text:</p> <p>G. Unstageable - Deep tissue injury:</p> <p>1. Number of unstageable pressure injuries presenting as deep tissue injury - If 0 → Skip to M1030, Number of Venous and Arterial Ulcers</p> <p>2. Number of these unstageable pressure injuries that were present upon admission/entry or reentry - enter how many were noted at the time of admission/entry or reentry</p>	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
M0610	Item Deleted	X	X	NA	X	X	NA	X	NA	X	NA	X	X	X	X
M0700	Item Deleted	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
M0800	Item Deleted	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X
M0900	Item Deleted	X	X	NA	X	X	NA	X	NA	X	NA	X	X	X	X
M1200	<p>Modified existing text:</p> <p>M1200. Skin and Ulcer/Injury Treatments</p>	X	NA	X	X	X	NA	X	NA	NA	NA	NA	X	X	NA
M1200E	<p>Modified existing text:</p> <p>E. Pressure ulcer/injury care</p>	X	NA	X	X	X	NA	X	NA	NA	NA	NA	X	X	NA

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Section N Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
N2001	<p>New Item:</p> <p>N2001. Drug Regimen Review Did a complete drug regimen review identify potential clinically significant medication issues?</p> <p>0. No - No issues found during review → Skip to O0100, Special Treatments, Procedures, and Programs 1. Yes - Issues found during review → Continue to N2003, Medication Follow-up 9. NA - Resident is not taking any medications → Skip to O0100, Special Treatments, Procedures, and Programs</p>	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
N2003	<p>New Item:</p> <p>N2003. Medication Follow-up Did the facility contact a physician (or physician-designee) by midnight of the next calendar day and complete prescribed/recommended actions in response to the identified potential clinically significant medication issues?</p> <p>0. No 1. Yes</p>	X	NA	NA	NA	X	NA	X	NA	NA	NA	NA	NA	X	NA
N2005	<p>New Item:</p> <p>N2005. Medication Intervention Did the facility contact and complete physician (or physician-designee) prescribed/recommended actions by midnight of the next calendar day each time potential clinically significant medication issues were identified since the admission?</p> <p>0. No 1. Yes 9. NA - There were no potential clinically significant medication issues identified since admission or resident is not taking any medications</p>	X	X	NA	X	X	X	X	NA	X	NA	X	X	X	X

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Section O Items

Item	Change Description	NC	ND	NO/ SO	NOD	NP	NPE/ SPE	NQ	NS/ SS	NSD	NT/ ST	SD	SOD	SP	SSD
O0100F	Modified existing text: F. Invasive Mechanical Ventilator (ventilator or respirator)	X	NA	X	X	X	NA	X	X	X	NA	NA	X	X	X
O0100G	Modified existing text: G. Non-Invasive Mechanical Ventilator (BiPAP/CPAP)	X	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA	NA