

Canadian Primary Care Sentinel Surveillance Network
Réseau canadien de surveillance sentinelle en soins primaires

CPCSSN Case Definitions 2024-Q4

Created: 2019-05-01

Last updated: 2025-01-21

Copyright © 2025 by CPCSSN

When referring to this specific document please use the following format for citation purposes:

CPCSSN Team, Case Definitions: Canadian Primary Care Sentinel Surveillance Network (CPCSSN), Version **2024-Q4**. January 21, 2025.

Copyright Notice: Except where otherwise noted, all material contained in this publication, including content, text and graphics are copyright of the Canadian Primary Care Sentinel Surveillance Network (CPCSSN), all rights reserved under Canada's Copyright Act and all applicable regulations. Case definitions contained in this publication may be used to engage in certain activities relating to research, private study, criticism, review, or news reporting, with proper acknowledgement to CPCSSN, including the source of the material, along with the name of the author(s). For use of Case Definitions or this publication for commercial or other purposes not covered by the Fair Dealing provisions of the Copyright Act, contact: copyright@cpcssn.org.

Acknowledgments: [CPCSSN Case Definitions Working Group, CPCSSN Dev Team and other contributors]

Funding for this publication was provided by the Public Health Agency of Canada. The views expressed herein do not necessarily represent the views of the Public Health Agency of Canada.

Purpose

This document is intended to be the simplest unambiguous representation of CPCSSN's current case definitions, consistent with the original documented intent. It defines the criteria, in terms of CPCSSN data, that CPCSSN's case detection algorithms use to classify a patient as having a given condition.

This document is intended for use by:

- researchers needing to understand or use CPCSSN's case definitions,
- those wanting to propose modifications or create new case definitions,
- CPCSSN's developers to implement CPCSSN's case definitions

This document <u>is not intended to</u> include suggested changes or improvements to the case definitions. Proposed changes to existing case definitions or new case definitions should be submitted to CPCSSN's Case Definition Working Group, where they will be reviewed, possibly approved, and prioritised for implementation by CPCSSN's development team.

List of CPCSSN Case Definitions

In the 'Method of Creation' column, the following two terms are used:

- 1. *Expert panel*. The case definition was created by subject-matter experts, typically clinicians. They may or may not have based the definitions on CPCSSN data.
- 2. *Machine learning*. The case definition was created by applying a machine learning algorithm to the CPCSSN data.

Case definitions are divided into two classes:

- 1. *Chronic disease cases*. We classify chronic diseases to be conditions from which patients do not typically recover (e.g., chronic kidney disease, Parkinson's disease) or those for which if recovery occurs, it often takes months to years (e.g., depression, pediatric asthma). These are held in the CPCSSN **ChronicDiseaseTable** and it can contain only one record per patient per condition.
- 2. Acute diseases. These are conditions for which patients do typically recover within days or weeks and may reoccur (e.g., otitis media, common cold). These are held in the CPCSSN **AcuteDiseaseCase** table, and it can contain multiple records per patient per condition (i.e., a patient can have multiple episodes where they have been labelled as having the condition).

All validation metrics (sensitivity, specificity, positive predictive value, and negative predictive value) for all validated case definitions are listed in <u>Appendix A</u>. Legacy case definitions (i.e., old versions from previous years) are listed in <u>Appendix B</u>.

Chronic Disease Cases

Case Definition	Version	Method of Creation	Quarter Last Updated	Page
ADHD	1	Expert panel	2023-Q2	6
Adult Asthma	1	Expert panel	2022-Q4	8
<u>Cardiovascular Disease</u>	1	Expert panel	2022-Q4	9
<u>Cerebrovascular Disease</u>	1	Expert panel	2022-Q4	10
<u>Chronic Heart Failure</u>	1	Expert panel	2022-Q2	11
<u>Cirrhosis</u>	1	Expert panel	2022-Q4	12
CKD	1	Expert panel	2018-Q4	13

COPD	2	Expert panel	2022-Q4	14
Coronary Artery Disease	1	Expert panel	2022-Q4	15
<u>Dementia</u>	1	Expert panel	2018-Q4	16
<u>Depression</u>	2	Expert panel	2022-Q4	17
<u>Diabetic Neuropathy</u>	1	Machine learning	2022-Q4	18
<u>Diabetic Retinopathy</u>	1	Machine learning	2022-Q4	19
<u>Diabetes Mellitus</u>	4	Expert panel	2022-Q4	20
<u>Dyslipidemia</u>	1	Expert panel	2019-Q4	21
Eating Disorders	1	Expert panel	2023-Q4	22
<u>Eczema</u>	1	Expert panel	2024-Q4	23
<u>Epilepsy</u>	1	Expert panel	2018-Q4	24
Herpes Zoster	1	Expert panel	2018-Q2	25
<u>Hypertension</u>	4	Expert panel	2022-Q4	26
Mood Disorders	1	Expert panel	2023-Q4	28
Multiple Sclerosis	1	Expert panel	2022-Q2	29
Non-Valvular Atrial Fibrillation (NVAF)	1	Expert panel	2021-Q4	31
<u>Osteoarthritis</u>	3	Expert panel	2022-Q4	32
<u>Parkinson's Disease</u>	1	Expert panel	2018-Q4	33
Pediatric Asthma	1	Expert panel	2018-Q2	34
Pediatric Diabetes Mellitus	2	Expert panel	2023-Q4	35
PTSD	1	Expert panel	2022-Q2	36
<u>Schizophrenia</u>	1	Expert panel	2023-Q4	38

Interpretation

The following pages contain the logic used to classify each CPCSSN patient's disease status for a host of disease case definitions. For each disease Case Definition, any single **Scenario** is sufficient to warrant classification as a case. Within a **Scenario**, all criteria joined by "AND" must be satisfied to warrant classification as a case. Conditions followed by "EXCEPT" define exceptions to the disease case definitions. That is, these conditions negate other criteria within the **Scenario**, so any other criteria in the **Scenario** alone are insufficient to define a disease case.

The text 'including [all] sub-codes' indicates a wildcard match is to be applied to the listed codes.

The **date of case detection** for a case is defined to be the earliest of the individual (qualifying) criteria dates for the case.

The following pages contain the most current versions of CPCSSN case definitions and are the ones applied to the most recent data set. Older case definition versions are listed in <u>Appendix B</u> (chronic conditions) and <u>Appendix C</u> (acute conditions)

CPCSSN Chronic Case Definitions

ADHD (Attention Deficit Hyperactivity Disorder)

Patient must be ≥4 years old and satisfy one of the following scenarios.

Scenario A

At least one of the following exact ICD-9 codes on **two different days** in any of the **Billing**, **EncounterDiagnosis**, or **Health Condition** tables:

314: HYPERKINETIC SYNDROME OF CHILDHOOD

314.0: ATTENTION DEFICIT DISORDER OF CHILDHOOD

314.01: ATTENTION DEFICIT DISORDER WITH HYPERACTIVITY

314.1: HYPERKINESIS WITH DEVELOPMENTAL DELAY

314.2: HYPERKINETIC CONDUCT DISORDER

314.8: OTHER SPECIFIED MANIFESTATIONS OF HYPERKINETIC SYNDROME

314.9: UNSPECIFIED HYPERKINETIC SYNDROME

Scenario B

At least one of the following exact ICD-9 codes in any of the Billing , EncounterDiagnosis , or Health Condition tables:	AND	At least one of the following ATC codes (including all sub-codes) in the Medication table: C02AC01: CLONIDINE
314: HYPERKINETIC SYNDROME OF CHILDHOOD		C02AC02: GUANFACINE
314.0: ATTENTION DEFICIT DISORDER OF		N02CX02: CLONIDINE
CHILDHOOD		N03AE01: CLONAZEPAM
314.01: ATTENTION DEFICIT DISORDER WITH		N03AF01: CARBAMAZEPINE
HYPERACTIVITY		N03AG01: VALPROIC ACID
314.1: HYPERKINESIS WITH DEVELOPMENTAL		N05AH03: OLANZAPINE
DELAY		N05AN: LITHIUM
314.2: HYPERKINETIC CONDUCT DISORDER		N05AX08: RISPERIDONE
314.8: OTHER SPECIFIED MANIFESTATIONS OF		N05BB01: HYDROXYZINE
HYPERKINETIC SYNDROME		N06AA02: IMIPRAMINE
314.9: UNSPECIFIED HYPERKINETIC SYNDROME		N06AB03: FLUOXETINE
		N06AB05: PAROXETINE
		N06AB06: SERTRALINE
		N06AX05: OXITRIPTAN
		N06AX12: BUPROPION
		N06BA01: AMFETAMINE
		N06BA02: DEXAMFETAMINE
		N06BA04: METHYLPHENIDATE
		N06BA05: PEMOLINE
		N06BA09: ATOMOXETINE
		N06BA11: DEXMETHYLPHENIDATE
		N06BA12: LISDEXAMFETAMINE
		S01EA04: CLONIDINE

Adult Asthma

Patient age must be ≥18 years and satisfy the following scenario.

Scenario A

The following ICD-9 code (including all sub-codes) in the Billing , EncounterDiagnosis , or Health Condition table: 493: ASTHMA	AND NOT	If the Billing table contains at least one of the following ICD-9 codes (including all sub-codes), the asthma diagnosis is not sufficient to define a case: 491: CHRONIC BRONCHITIS
		492: EMPHYSEMA 496: CHRONIC AIRWAY OBSTRUCTION, NOT ELSEWHERE CLASSIFIED

Cardiovascular Disease

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

- 410: ACUTE MYOCARDIAL INFARCTION
- 411: OTHER ACUTE AND SUBACUTE FORMS OF ISCHEMIC HEART DISEASE
- 412: OLD MYOCARDIAL INFARCTION
- **413: ANGINA PECTORIS**
- 414: OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE
- 430: SUBARACHNOID HEMORRHAGE
- 431: INTRACEREBRAL HEMORRHAGE
- 432: OTHER AND UNSPECIFIED INTRACRANIAL HEMORRHAGE
- 433: OCCLUSION AND STENOSIS OF PRECEREBRAL ARTERIES
- 434: OCCLUSION OF CEREBRAL ARTERIES
- 435: TRANSIENT CEREBRAL ISCHEMIA
- 436: ACUTE, BUT ILL-DEFINED, CEREBROVASCULAR DISEASE
- 437: OTHER AND ILL-DEFINED CEREBROVASCULAR DISEASE
- 438: LATE EFFECTS OF CEREBROVASCULAR DISEASE
- 440: ATHEROSCLEROSIS
- 443: OTHER PERIPHERAL VASCULAR DISEASE

Cerebrovascular Disease

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

430: SUBARACHNOID HEMORRHAGE

431: INTRACEREBRAL HEMORRHAGE

432: OTHER AND UNSPECIFIED INTRACRANIAL HEMORRHAGE

433: OCCLUSION AND STENOSIS OF PRECEREBRAL ARTERIES

434: OCCLUSION OF CEREBRAL ARTERIES

435: TRANSIENT CEREBRAL ISCHEMIA

436: ACUTE, BUT ILL-DEFINED, CEREBROVASCULAR DISEASE

437: OTHER AND ILL-DEFINED CEREBROVASCULAR DISEASE

438: LATE EFFECTS OF CEREBROVASCULAR DISEASE

Chronic Heart Failure

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

425: CARDIOMYOPATHY 428: HEART FAILURE

Scenario B

One or more occurrences of an ATC code (including all sub-codes) from **all three of the following groups** in the **Medication** table:

Group 1: Diuretics

C03BA11: INDAPAMIDE C03CA01: FUROSEMIDE C03DA01: SPIRONOLACTONE C03DA04: EPLERENONE

AND

Group 2: Beta-Blockers

CO7AB: BETA BLOCKING AGENTS, SELECTIVE CO7AG: ALPHA AND BETA BLOCKING AGENTS

AND

<u>Group 3:</u> ACE inhibitors, ARB and Combinations with Beta Blockers or Renin-Angiotensin blockers

CO9: AGENTS ACTING ON THE RENIN-ANGIOTENSIN SYSTEM

Cirrhosis

Scenario A

Any of the following exact ICD-9 codes in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

571: CHRONIC LIVER DISEASE AND CIRRHOSIS

571.2: ALCOHOLIC CIRRHOSIS OF LIVER

571.5: CIRRHOSIS OF LIVER WITHOUT MENTION OF ALCOHOL

789.59: OTHER ASCITES

CKD (Chronic Kidney Disease)

Scenario A

Two Plasma Creatinine Clearance (eGFR) tests (LOINC = 12195-4) in the Lab table having results < 60 ml/min/1.73 m2 separated by between 3 months and 18 months, inclusive.

COPD (Congestive Obstructive Pulmonary Disorder)

Patient age at onset must be \geq 35 years and must satisfy at least one of the following scenarios.

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

491.2: OBSTRUCTIVE CHRONIC BRONCHITIS

492: EMPHYSEMA

496: CHRONIC AIRWAY OBSTRUCTION, NOT ELSEWHERE

CLASSIFIED

Scenario B

Any of the following ATC codes (including all sub-codes) in the Medication table:		If the HealthCondition table contains the following ICD-9 code (including all sub-codes), the medications are insufficient for defining a disease case:
R03BB: ANTICHOLINERGICS		
R03AK04: SALBUTAMOL AND SODIUM	AND	
CROMOGLICATE	NOT	493: ASTHMA
R03AL: ADRENERGICS IN COMBINATION WITH		
ANTICHOLINERGICS INCLUDING TRIPLE		
COMBINATIONS WITH CORTICOSTEROIDS		

Coronary Artery Disease

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

410: ACUTE MYOCARDIAL INFARCTION

411: OTHER ACUTE AND SUBACUTE FORMS OF ISCHEMIC HEART DISEASE

412: OLD MYOCARDIAL INFARCTION

413: ANGINA PECTORIS

414: OTHER FORMS OF CHRONIC ISCHEMIC HEART DISEASE

Dementia

Scenario A

Any of the following ICD-9 codes (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

290: DEMENTIAS

294.1: DEMENTIA IN CONDITIONS CLASSIFIED ELSEWHERE 294.8: OTHER PERSISTENT MENTAL DISORDERS DUE TO

CONDITIONS CLASSIFIED ELSEWHERE 331: OTHER CEREBRAL DEGENERATIONS

excluding sub-codes:

290.8: OTHER SPECIFIED SENILE PSYCHOTIC CONDITIONS

290.9: UNSPECIFIED SENILE PSYCHOTIC CONDITION

331.3: COMMUNICATING HYDROCEPHALUS

331.4: OBSTRUCTIVE HYDROCEPHALUS

331.5: IDIOPATHIC NORMAL PRESSURE HYDROCEPHALUS (INPH)

331.81: REYE'S SYNDROME

Scenario B

Any of the following ATC codes (including all sub-codes) in the **Medication** table:

N06DA: ANTICHOLINESTERASES

N06DX01: MEMANTINE

Depression

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

296: EPISODIC MOOD DISORDERS

311: DEPRESSIVE DISORDER, NOT ELSEWHERE CLASSIFIED

Scenario B

Any of the following ATC codes (including all sub-codes) in the Medication table:		If the HealthCondition table contains the following ICD-9 code (including all sub-codes), the medications are insufficient for defining a disease case:
NO6AB: SELECTIVE SEROTONIN REUPTAKE		
INHIBITORS	AND	
N06AF04: TRANYLCYPROMINE	NOT	300: ANXIETY DISORDER
N06AG02: MOCLOBEMIDE		
N06AX11: MIRTAZAPINE		
N06CA01: AMITRIPTYLINE AND PSYCHOLEPTICS		

Diabetic Neuropathy

For all scenarios, patients must have Diabetes Mellitus as defined by the CPCSSN case finding algorithm.

Scenario A

One or more occurrences of the following exact ICD-9 code in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

357.2: POLYNEUROPATHY IN DIABETES

OR

two or more occurrences of the following ICD-9 code (including all sub-codes) across any of the **Billing**, **EncounterDiagnosis**, or **Health Condition** tables:

250.6: DIABETES WITH NEUROLOGICAL MANIFESTATIONS

Scenario B

One or more occurrences of any of the following terms in the **DiagnosisText_orig** field of the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

'neuropathy' OR 'neuropathie'

Uncertain and negated terms (e.g., 'neuropathy?', 'no neuropathy') are ignored.

Diabetic Retinopathy

For all scenarios, patients must have Diabetes Mellitus as defined by the CPCSSN case finding algorithm.

Scenario A

One or more occurrences of the following exact ICD-9 code in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

362.0: DIABETIC RETINOPATHY

Scenario B

One or more occurrences of any of the following terms in the **DiagnosisText_orig** field of the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

'retinopathy'
OR
'retinopathie'
OR
'rétinopathie'

Uncertain and negated terms (e.g., 'retinopathy?', 'no retinopathy') are ignored.

Diabetes Mellitus

Scenario A

The following ICD-9 code (including all sub-codes) in the **EncounterDiagnosis** or **Health Condition** table

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤2 years apart:

250: DIABETES MELLITUS

Scenario B

Any **Hemoglobin A1c (HbA1c)** test (LOINC = 17856-6) in the **Lab** table with a result \geq 6.5

OR

at least two **Fasting Blood Glucose (FBG)** tests (LOINC = 14771-0) in the **Lab** table having results strictly > 7 that are recorded on different dates that are ≤1 year apart.

Dyslipidemia

Scenario A

The following ICD-9 code (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

272: DISORDERS OF LIPOID METABOLISM

Scenario B

Any of the following ATC codes (including all sub-codes) in the Medication table:		If the DiseaseCase table contains the following disease, the medications are insufficient for defining a disease case:
C10: LIPID MODIFYING AGENTS		
	AND	Diabetes Mellitus
excluding any of the following ATC codes (and all sub-codes) in the Medication table:	NOT	
C10AC: BILE ACID SEQUESTRANTS		

Scenario 3

Any Cholesterol in LDL (LDLc) test (LOINC = 22748-8) in the Lab table with a result \geq 3.5 mmol/L

OR

Any Cholesterol Total/Cholesterol in HDL Ratio (TCh/HDL) test (LOINC = 9830-1) in the Lab table with a result ≥ 4.3 mmol/L

Eating Disorders

Scenario A

The following ICD-9 code (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

307.1: ANOREXIA NERVOSA

307.5: OTHER AND UNSPECIFIED DISORDERS OF EATING

307.50: EATING DISORDER, UNSPECIFIED

307.51: BULIMIA NERVOSA

783.0: ANOREXIA

Scenario B

One or more occurrences of any of the following terms in the **DiagnosisText_orig** field of the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

'anorex*'
OR
'boulim*'
OR
'bulim*'
OR
'eating dis*'

Here, the * indicates one or more letters.

Uncertain and negated terms (e.g., 'anorexia?', 'no eating disorder') are ignored.

Eczema

Scenario A

The following ICD-9 exact codes in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

691: ATOPIC DERMATITIS AND RELATED CONDITIONS

691.8: OTHER ATOPIC DERMATITIS AND RELATED CONDITIONS

692: CONTACT DERMATITIS AND OTHER ECZEMA

692.9: CONTACT DERMATITIS AND OTHER ECZEMA, UNSPECIFIED CAUSE

Epilepsy

Scenario A

The following ICD-9 code (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

345: EPILEPSY AND RECURRENT SEIZURES

excluding the specific sub-codes:

345.2: PETIT MAL STATUS, EPILEPTIC 345.3: GRAND MAL STATUS, EPILEPTIC

Scenario B

Any of the following ICD-9 codes (including all sub-codes) in the Billing , Encounter Diagnosis ,		Any of the following ATC codes (including sub-codes) in the Medication table:
or Health Condition table:		
		N03A: ANTIEPILEPTICS
345.2: PETIT MAL STATUS, EPILEPTIC	AND	N05BA06: LORAZEPAM
345.3: GRAND MAL STATUS, EPILEPTIC		N05BA09: CLOBAZAM
780 3. CONVILLSIONS		

excluding sub-codes:

N03AE01: CLONAZEPAM N03AX12: GABAPENTIN

Herpes Zoster

Scenario A

The following ICD-9 code (including all sub-codes) in the **Billing, Encounter Diagnosis,** or **Health Condition** table:

053: HERPES ZOSTER

Hypertension

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **EncounterDiagnosis** or **Health Condition** table

at least two (identical or different) of the following ICD-9 codes (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤2 years apart:

401: ESSENTIAL HYPERTENSION 402: HYPERTENSIVE HEART DISEASE

403: HYPERTENSIVE CHRONIC KIDNEY DISEASE

404: HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE

405: SECONDARY HYPERTENSION

Scenario B

Any of the following ATC codes (including all sub-codes) in the **Medication** table:

If the **HealthCondition** table contains any of the following ICD-9 codes (including all sub-codes), the medications are insufficient for defining a disease case:

AND

NOT

CO2: ANTIHYPERTENSIVES

C03AA03: HYDROCHLOROTHIAZIDE

C03BA04: CHLORTALIDONE C03BA11: INDAPAMIDE C03DB01: AMILORIDE C03DB02: TRIAMTERENE

C03EA01: HYDROCHLOROTHIAZIDE AND

POTASSIUM-SPARING AGENTS

C07AA06: TIMOLOL C07AB03: ATENOLOL C07AB04: ACEBUTOLOL C07AG02: CARVEDILOL

C07CB03: ATENOLOL AND OTHER DIURETICS

C08CA01: AMLODIPINE
C08CA02: FELODIPINE
C08DA01: VERAPAMIL
C09AA01: CAPTOPRIL
C09AA02: ENALAPRIL
C09AA03: LISINOPRIL
C09AA07: BENAZEPRIL
C09AA08: CILAZAPRIL
C09AA09: FOSINOPRIL
C09AA10: TRANDOLAPRIL

C09BA02: ENALAPRIL AND DIURETICS C09BA03: LISINOPRIL AND DIURETICS

C09CA02: EPROSARTAN C09CA03: VALSARTAN C09CA04: IRBESARTAN C09CA07: TELMISARTAN

C09DA01: LOSARTAN AND DIURETICS C09DA02: EPROSARTAN AND DIURETICS C09DA04: IRBESARTAN AND DIURETICS

C09XA02: ALISKIREN

250: DIABETES MELLITUS

333.1: ESSENTIAL AND OTHER SPECIFIED FORMS OF

TREMOR 346: MIGRAINE

410: ACUTE MYOCARDIAL INFARCTION 412: OLD MYOCARDIAL INFARCTION

413: ANGINA PECTORIS

427: CARDIAC DYSRHYTHMIAS

428: HEART FAILURE

456.0: ESOPHAGEAL VARICES WITH BLEEDING

456.1: ESOPHAGEAL VARICES WITHOUT MENTION OF

BLEEDING

572.3: PORTAL HYPERTENSION

592: CALCULUS OF KIDNEY AND URETER

Mood Disorders

Scenario A

At least **two** (identical or different) of the following ICD-9 codes (including all sub-codes) in the **Billing** or **EncounterDiagnosis** table that are recorded on different dates:

296: EPISODIC MOOD DISORDERS

300: ANXIETY, DISSOCIATIVE AND SOMATOFORM DISORDERS 311: DEPRESSIVE DISORDER, NOT ELSEWHERE CLASSIFIED

OR

one or more occurrences of the following ICD-9 code (including all sub-codes) in the **Health Condition** table:

296: EPISODIC MOOD DISORDERS

300: ANXIETY, DISSOCIATIVE AND SOMATOFORM DISORDERS 311: DEPRESSIVE DISORDER, NOT ELSEWHERE CLASSIFIED

Multiple Sclerosis

Patient age must be ≥18 years and must satisfy at least one of the following scenarios.

Scenario A

At least **two** (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** or **EncounterDiagnosis** table that are recorded on different dates that are ≤2 years apart:

340: MULTIPLE SCLEROSIS

OR

one or more occurrences of the following ICD-9 code (including all sub-codes) in the **Health Condition** table:

340: MULTIPLE SCLEROSIS

Scenario B

One or more (identical or different) of the following ATC codes in the **Medication** table:

L03AB07: INTERFERON BETA-1A L03AB08: INTERFERON BETA-1B L03AB13: PEGINTERFERON BETA-1A L03AX13: GLATIRAMER ACETATE

L04AA23: NATALIZUMAB L04AA27: FINGOLIMOD L04AA31: TERIFLUNOMIDE L04AA36: OCRELIZUMAB L04AA38: OZANIMOD L04AA42: SIPONIMOD L04AA50: PONESIMOD L04AA52: OFATUMUMAB

L04AC01: DACLIZUMAB

L04AX09: DIROXIMEL FUMARATE N07XX09: DIMETHYL FUMARATE

Scenario C

One or more of the following ATC code in the Medication table: L04AA34: ALEMTUZUMAB		If the Billing , EncounterDiagnosis , or HealthCondition table contains any of the following ICD-9 codes (including all sub-codes), the medications are insufficient for defining a disease case:
	AND	
	NOT	204: LYMPHOID LEUKEMIA
		205: MYELOID LEUKEMIA
		206: MONOCYTIC LEUKEMIA
		207: OTHER SPECIFIED LEUKEMIA
		208: LEUKEMIA OF UNSPECIFIED CELL TYPE
		209: NEUROENDOCRINE TUMORS

Non-Valvular Atrial Fibrillation (NVAF)

Scenario A

Any of the following <u>exact</u> ICD-9 codes in		If any of the Billing, EncounterDiagnosis, or HealthCondition
the Billing, EncounterDiagnosis, or		tables contains any of the following exact ICD-9 codes, the
HealthCondition table:		ICD-9 codes in the first column are insufficient for defining a
		disease case:
427.3: ATRIAL FIBRILLATION AND		394: DISEASES OF MITRAL VALVE
FLUTTER	AND	394.0: MITRAL STENOSIS
427.31: ATRIAL FIBRILLATION	NOT	394.1: RHEUMATIC MITRAL INSUFFICIENCY
427.32: ATRIAL FLUTTER		394.2: MITRAL STENOSIS WITH INSUFFICIENCY
		394.9: OTHER AND UNSPECIFIED MITRAL VALVE DISEASES
		395: DISEASES OF AORTIC VALVE
		395.0: RHEUMATIC AORTIC STENOSIS
		395.1: RHEUMATIC AORTIC INSUFFICIENCY
		395.2: RHEUMATIC AORTIC STENOSIS WITH INSUFFICIENCY
		395.9: OTHER AND UNSPECIFIED RHEUMATIC AORTIC
		DISEASES
		396: DISEASES OF MITRAL AND AORTIC VALVES
		396.0: MITRAL VALVE STENOSIS AND AORTIC VALVE STENOSIS
		396.1: MITRAL VALVE STENOSIS AND AORTIC VALVE
		INSUFFICIENCY
		396.2: MITRAL VALVE INSUFFICIENCY AND AORTIC VALVE STENOSIS
		396.3: MITRAL VALVE INSUFFICIENCY AND AORTIC VALVE INSUFFICIENCY
		396.8: MULTIPLE INVOLVEMENT OF MITRAL AND AORTIC
		VALVES
		396.9: MITRAL AND AORTIC VALVE DISEASES, UNSPECIFIED
		424: OTHER DISEASES OF ENDOCARDIUM
		424.0: MITRAL VALVE DISORDERS
		424.1: AORTIC VALVE DISORDERS
		424.2: TRICUSPID VALVE DISORDERS, SPECIFIED AS
		NONRHEUMATIC
		424.3: PULMONARY VALVE DISORDERS
		424.9: ENDOCARDITIS, VALVE UNSPECIFIED
		424.90: ENDOCARDITIS, VALVE UNSPECIFIED, UNSPECIFIED CAUSE
		424.91: ENDOCARDITIS IN DISEASES CLASSIFIED ELSEWHERE
		424.99: OTHER ENDOCARDITIS, VALVE UNSPECIFIED
		V43.3: HEART VALVE REPLACED BY OTHER MEANS
		THE STATE OF THE S

Osteoarthritis

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing, EncounterDiagnosis**, or **Health Condition** table:

715: OSTEOARTHROSIS AND ALLIED DISORDERS 721: SPONDYLOSIS AND ALLIED DISORDERS

Parkinson's Disease

Scenario A

The following ICD-9 code (including all sub-codes) in the **Billing, Encounter Diagnosis**, or **Health Condition** table:

332: PARKINSON'S DISEASE

Pediatric Asthma

Patient age must be between 1 and 17 years, inclusive and must satisfy at least one of the following scenarios.

Scenario A

The following ICD-9 code (including all sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

493: ASTHMA

Scenario B

At least two (identical or different) of the following ATC codes in the **Medication** table:

H02AB02: DEXAMETHASONE H02AB06: PREDNISOLONE H02AB07: PREDNISONE R03AC02: SALBUTAMOL R03AC03: TERBUTALINE R03AC04: FENOTEROL R03AC12: SALMETEROL R03AC13: FORMOTEROL

R03AC18: INDACATEROL

R03AK06: SALMETEROL AND FLUTICASONE R03AK07: FORMOTEROL AND BUDESONIDE R03AK08: FORMOTEROL AND BECLOMETASONE R03AK09: FORMOTEROL AND MOMETASONE

R03BA01: BECLOMETHASONE R03BA02: BUDESONIDE R03BA05: FLUTICASONE

R03BA06: TRIAMCINOLONE R03BA07: MOMETASONE

R03BA08: CICLESONIDE

R03BB01: IPRATROPIUM BROMIDE

R03DC01: ZAFIRLUKAST R03DC03: MONTELUKAST

Pediatric Diabetes Mellitus

Patient age at onset must be <18 years and must satisfy at least one of the following scenarios.

Scenario A

The following ICD-9 code (including all sub-codes) in the **Health Condition** table

OR

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** or **EncounterDiagnosis** table that are recorded on different dates that are ≤ 2 years apart:

250: DIABETES MELLITUS

Scenario B

The following ATC code (including all sub-codes) in the **Medication** table:

A10: DRUGS USED IN DIABETES

Scenario C

Two or more **Hemoglobin A1c (HbA1c)** test (LOINC = 17856-6) in the **Lab** table with a result \geq 6.5 that are \leq 1 year apart.

PTSD (Post-Traumatic Stress Disorder)

Scenario A

The following ICD-9 code (including all sub-codes) in the **Billing, Encounter Diagnosis**, or **Health Condition** table:

309.81: POSTTRAUMATIC STRESS DISORDER

Scenario B

Any of the following ICD-9 codes in the the **DiagnosisText_orig** for the **same record** matches the Billing, EncounterDiagnosis, or following case-insensitive and regex patterns (the dot "indicates **HealthCondition** table: matches any one character): 290: DEMENTIAS 'ptsd' 291: ALCOHOL-INDUCED MENTAL **DISORDERS** AND OR 292: DRUG-INDUCED MENTAL DISORDERS 293: TRANSIENT MENTAL DISORDERS DUE 'post.traumatic stress' TO CONDITIONS CLASSIFIED ELSEWHERE 294: PERSISTENT MENTAL DISORDERS DUE OR TO CONDITIONS CLASSIFIED ELSEWHERE 295: SCHIZOPHRENIC DISORDERS 'stress post.traumatique' 296: EPISODIC MOOD DISORDERS 297: DELUSIONAL DISORDERS 298: OTHER NONORGANIC PSYCHOSES 299: PERVASIVE DEVELOPMENTAL **DISORDERS** 300: ANXIETY, DISSOCIATIVE AND SOMATOFORM DISORDERS 301: PERSONALITY DISORDERS 302: SEXUAL AND GENDER IDENTITY **DISORDERS** 303: ALCOHOL DEPENDENCE SYNDROME 304: DRUG DEPENDENCE 305: NONDEPENDENT ABUSE OF DRUGS 306: PHYSIOLOGICAL MALFUNCTION ARISING FROM MENTAL FACTORS 307: SPECIAL SYMPTOMS OR SYNDROMES, NOT ELSEWHERE CLASSIFIED 308: ACUTE REACTION TO STRESS 309: ADJUSTMENT REACTION 310: SPECIFIC NONPSYCHOTIC MENTAL DISORDERS DUE TO BRAIN DAMAGE 311: DEPRESSIVE DISORDER NEC 312: DISTURBANCE OF CONDUCT, NOT **ELSEWHERE CLASSIFIED** 313: DISTURBANCE OF EMOTIONS SPECIFIC TO CHILDHOOD AND **ADOLESCENCE** 314: HYPERKINETIC SYNDROME OF CHILDHOOD 315: SPECIFIC DELAYS IN DEVELOPMENT 316: PSYCHIC FACTOR W OTH DIS

Schizophrenia

Scenario A

The following ICD-9 code (including all sub-codes) in the **Health Condition** table

OF

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** or **EncounterDiagnosis** table that are recorded on different dates:

295: SCHIZOPHRENIC DISORDERS

Appendix A - Validation Results and References

Chronic Disease Cases

Case Definition	Version	Method of Creation	Sensitivity % (95% CI)	Specificity % (95% CI)	PPV % (95% CI)	NPV % (95% CI)	Page
ADHD ¹²	1	Expert panel	70.8 (48.9-87.4)	99.5 (98.9-99.8)	70.8 (52.6-84.2)	99.5 (99.0-99.7)	6
Adult Asthma ^{13‡}	1	Expert panel	80.6 (69.5-88.9)	96.4 (94.7-97.7)	70.7 (59.7-80.3)	97.9 (96.5-98.8)	8
Cardiovascular Disease ¹⁰	1	Expert panel	76.9 (70.4-82.5)	97.2 (96.3-97.9)	75.4 (69.8-80.2)	97.4 (96.7-98.0)	9
Cerebrovascular Disease ¹⁰	1	Expert panel	77.6 (65.8-86.9)	98.6 (97.9-99.0)	65.0 (55.7-73.3)	99.2 (98.8-99.5)	10
Chronic Heart Failure ^{7‡}	1	Expert panel	99.3 (98.4-99.8)	98.8 (98.2-99.2)	96.1 (94.6-97.3)	99.8 (99.5-99.9)	11
<u>Cirrhosis</u> ¹¹	1	Expert panel	84.6 (83.1-86.0)	99.3 (99.1-99.4)	94.8 (93.9-95.7)	97.5 (97.3-97.7)	12
CKD*	1	Expert panel	-	-	-	-	13
COPD ^{1#}	2	Expert panel	82.1 (76.0-88.2)	97.3 (96.5-98.0)	72.1 (65.4-78.8)	98.4 (97.9-99.0)	14
Coronary Artery Disease ¹⁰	1	Expert panel	91.6 (84.6-96.1)	98.3 (97.6-98.8)	74.8 (67.8-80.7)	99.5 (99.1-99.7)	15
<u>Dementia</u> ¹	1	Expert panel	96.8 (93.3-100.0)	98.1 (97.5-98.7)	72.8 (65.0-80.6)	99.8 (99.6-100.0)	16
<u>Depression</u> ^{1#}	2	Expert panel	81.1 (77.2-85.0)	94.8 (93.7-95.9)	79.6 (75.7-83.6)	95.2 (94.1-96.3)	17
Diabetic Neuropathy [^]	1	Machine learning	79.6 (71.8-85.7)	97.3 (96.5-98.0)	70.5 (62.1-77.7)	98.4 (97.7-98.8)	18
Diabetic Retinopathy [^]	1	Machine learning	92.1 (86.0-95.8)	98.4 (97.8-98.9)	80.2 (72.4-86.1)	99.5 (99.0-99.7)	19
<u>Diabetes Mellitus</u> ^{1**}	4	Expert panel	95.6 (93.4-97.9)	97.1 (96.3-97.9)	87.0 (83.5-90.5)	87.0 (83.5-90.5)	20
<u>Dyslipidemia</u> †	1	Expert panel	94.8 (87.2-98.6)	100.0 (-)	100.0 (-)	97.3 (93.3-99.3)	21
Eating Disorders [‡]	1	Expert panel	80.8 (76.7-84.4)	99.5 (99.2-99.8)	96.6 (94.2-98.1)	96.8 (96.2-97.4)	22
Eczema ¹⁴	1	Expert panel	86.1 (77.8-92.2)	93.8 (90.5-96.2)	82.1 (74.5-87.7)	95.4 (92.7-97.1)	23
Epilepsy ¹	1	Expert panel	1 1		99.9 (99.7-100.0)	24	
Herpes Zoster ^{2,3}	1	Expert panel	100.0 (97.8-100.0)	73.77 (65.0- 81.3)	83.9 (79.5-87.5)	100	25

1***			0.4.0	00.5	00.0	06.0		
<u>Hypertension</u> ^{1***}	4	Expert panel	84.9	93.5	92.9	86.0	26	
			(82.6-87.1)	(92.0-95.1)	(91.2-94.6)	(83.9-88.2)		
Mood Disorders [‡]	1	Expert panel	80.7	88.7	59.9	95.7	28	
			(76.6-84.3)	(87.3-90.1)	(56.8-63.0)	(94.8-96.4)	20	
Multiple Sclerosis ^{8‡}	1	Expert panel	93.3	99.6	97.7	98.9	29	
			(89.2-96.2)	(99.2-99.9)	(94.6-99.0)	(98.1-99.2)	23	
Non-Valvular Atrial	1	Expert panel	78.1	99.5	80.7	99.4	31	
Fibrillation (NVAF) ^{4‡}			(66.0-87.5)	(99.1-99.7)	(70.0-88.1)	(99.0-99.6)	31	
Osteoarthritis ^{1#}	3	Expert panel	77.8	94.9	87.7	90.2	32	
			(74.5-81.1)	(93.8-96.1)	(84.9-90.5)	(88.7-91.8)	32	
Parkinson's Disease ¹	1	Expert panel	98.8	99.0	82.0	99.9	33	
			(96.4-100.0)	(98.6-99.5)	(74.5-89.5)	(99.8-100.0)	33	
Pediatric Asthma ^{5\$}	1	Expert panel	87.4	98.6	91.2	97.9	34	
			(80.6-92.2)	(97.5–99.2)	(84.9–95.2)	(96.7–98.7)	54	
Pediatric Diabetes	2	Expert panel	94.9	100.0	100.0	100.0	35	
Mellitus ⁶			(88.4-98.3)	(-)	(-)	(-)	35	
PTSD ^{9‡}	1	Expert panel	95.3	98.4	98.4	95.2	36	
			(90.0-98.3)	(94.3-99.8)	(93.9-99.6)	(90.2-97.8)	30	
<u>Schizophrenia</u> [‡]	1	Expert panel	93.3	100	100	99.97	38	
			(77.9-99.2)	(99.5-100)	(87.7-100)	(99.0-100)	36	

^{*} Definition is based solely on laboratory results, thus reference standard validation cannot be completed.

- 1. Williamson T, Green ME, Birtwhistle R, et al. Validating the 8 CPCSSN case definitions for chronic disease surveillance in a primary care database of electronic health records. *Ann Fam Med.* 2014;12(4):367-372. doi:10.1370/afm.1644
- 2. Queenan JA, Farahani P, Ehsani-Moghadam B, Birtwhistle RV. The Prevalence and Risk for Herpes Zoster Infection in Adult Patients With Diabetes Mellitus in the Canadian Primary Care Sentinel Surveillance Network. *Can J Diabetes*. 2018;42(5). doi:10.1016/j.jcjd.2017.10.060
- 3. Klompas M, Kulldorff M, Vilk Y, Bialek SR, Harpaz R. Herpes zoster and postherpetic neuralgia surveillance using structured electronic data. *Mayo Clin Proc.* 2011;86(12):1146-1153. doi:10.4065/mcp.2011.0305
- 4. Queenan JA, Ehsani-Moghaddam B, Wilton SB, Dorian P, Cox JL, Skanes A, Barber D, Sandhu RK. Detecting Patients With Nonvalvular Atrial Fibrillation and Atrial Flutter in the Canadian Primary Care Sentinel

^{**} Updated HbA1C cut-off from greater than equal to 7.0 to greater than equal to 6.5, as per clinical guidelines, and the EncounterDiagnosis table has been included for case detection by ICD-9 code. No revalidation completed.

^{***} Updated version of <u>Hypertension (Version 1)</u> by removal of a rarely used drug (Metolazone) and inclusion of the EncounterDiagnosis table for case detection by ICD-9 code. Validation metrics are expected to be similar to Hypertension (Version 1).

[†] Unpublished results.

[‡] Quoted metrics are from an unpublished validation on a sample of the CPCSSN National Data Set.

[^] Publication in progress (as of 2023-08-22).

[#] Validation metrics are for the original case definitions, published in reference 1. The updated case definitions shown in this document now include the EncounterDiagnosis table for identification of cases by ICD-9. The validation metrics are not expected to be much altered by this change.

^{\$} Validation completed on a sample of data from a single network.

[^] Updated <u>Pediatric Diabetes Mellitus (Version 1)</u> created by inclusion of the EncounterDiagnosis table for case detection by ICD-9 code. Validation metrics are expected to be similar to Pediatric Diabetes Mellitus (Version 1).

- Surveillance Network: First Steps. CJC Open. 2021;3(3):367-371. doi:10.1016/j.cjco.2020.10.012
- 5. Cave AJ, Davey C, Ahmadi E, Drummond N, Fuentes S, Kazemi-Bajestani SMR, Sharpe H, and Taylor M. Development of a validated algorithm for the diagnosis of paediatric asthma in electronic medical records. NPJ Primary Care Respiratory Medicine. 2016; 26:16085. doi: 10.1038/npjpcrm.2016.85
- 6. Kosowan L, Wicklow B, Queenan J, Yeung R, Amed S, Singer A. Enhancing Health Surveillance: Validation of a Novel Electronic Medical Record-Based Pediatric Type 1 and Type 2 Diabetes Mellitus Case Definition. *Can J Diabetes*. Published online February 2019. doi:10.1016/J.JCJD.2019.02.005
- 7. Vijh R, Wong S, Grandy M, Peterson S, Ezzat A, Gibb AG, Hawkins NM. Identifying health failure in patients with chronic obstructive lung disease through the Canadian Primary Care Sentinel Surveillance Network in British Columbia: a case derivation study. *CMAJ Open*. 2021; 9(2):E376-E383. doi: 10.9778/cmajo.20200183
- 8. Marrie RA, Kosowan L, Taylor C, Singer A. Identifying people with multiple sclerosis in the Canadian Primary Care Sentinel Surveillance Network. *Multiple Sclerosis Journal Experimental, Translational and Clinical*. 2019; 1-9. doi: 10.1177/2055217319894360
- 9. Zafari H, Kosowan L, Zulkernine F, Singer A. Diagnosing post-traumatic stress disorder using electronic medical record data. *Health Information Journal*. 2021;27(4). https://doi.org/10.1177/14604582211053259
- 10. Thomas R, Kosowan L, Rabey M, Bell A, Connelly KA, Hawkins NM, Casey CG, Singer A., "Validation of a case definition to identify patients diagnosed with cardiovascular disease in Canadian primary care practices." *Canadian Journal of Cardiology*. (under review 2023-08-22)
- 11. Faisal N, Kosowan L, Zafari H, Zulkernine F, Lix L, Mahar A, Singh H, Renner E, Singer A., "Development and validation of a case definition to estimate the prevalence and incidence of cirrhosis in pan-Canadian primary care database." *American Journal of Epidemiology*. (under review 2023-08-22)
- Morkem R, Handelman K, Queenan JA, Birtwhistle R, Barber D., "Validation of an EMR algorithm to measure the prevalence of ADHD in the Canadian Primary Care Sentinel Surveillance Network (CPCSSN)." BMC Medical Informatics and Decision Making, (2020) 20:166. https://doi.org/10.1186/s12911-020-01182-2
- 13. Moloney, M., Morra, A., Morkem, R., Queenan, J., Gupta, S., To, T., Digby G., Barber D., Lougheed, M.D., "Validation of adult asthma case definitions for primary care sentinel surveillance." *Allergy, Asthma & Clinical Immunology*, 19(95) (2023). https://doi.org/10.1186/s13223-023-00854-8.
- 14. Stirton, H., Kosowan, L., Abrams, E.M. *et al.* Validation of a primary care electronic medical records case definition for eczema: retrospective cross-sectional study. *Allergy Asthma Clin Immunol* 19, 46 (2023). https://doi.org/10.1186/s13223-023-00785-4.

Appendix B - Legacy Chronic Case Definitions

The following pages contain all previously implemented CPCSSN case definitions, and include the date ranges for which they were in use.

COPD (Version 1): 2012-Q2 to 2022-Q2

Note: For all scenarios, patient age at onset must be ≥ 35 years.

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing** or **Health Condition** table:

491.2: OBSTRUCTIVE CHRONIC BRONCHITIS

492: EMPHYSEMA

496: CHRONIC AIRWAY OBSTRUCTION, NOT ELSEWHERE

CLASSIFIED

Scenario B

Any of the following ATC codes (including all sub-codes) in the Medication table:		If the HealthCondition table contains the following ICD-9 code (including all sub-codes), the medications are insufficient for defining a disease case:
R03BB: ANTICHOLINERGICS R03AK04: SALBUTAMOL AND SODIUM CROMOGLICATE R03AL: ADRENERGICS IN COMBINATION WITH ANTICHOLINERGICS INCLUDING TRIPLE COMBINATIONS WITH CORTICOSTEROIDS	EXCEPT	493: ASTHMA

Depression (Version 1): 2018-Q2 to 2022-Q2

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing**, **EncounterDiagnosis**, or **Health Condition** table:

296: EPISODIC MOOD DISORDERS

311: DEPRESSIVE DISORDER, NOT ELSEWHERE CLASSIFIED

Scenario B

Any of the following ATC codes (including all sub-codes) in the Medication table:		If the HealthCondition table contains the following ICD-9 code (including all sub-codes), the medications are insufficient for defining a disease case:
N06AB: SELECTIVE SEROTONIN REUPTAKE INHIBITORS N06AF04: TRANYLCYPROMINE N06AG02: MOCLOBEMIDE N06AX11: MIRTAZAPINE N06CA01: AMITRIPTYLINE AND PSYCHOLEPTICS	EXCEPT	300: ANXIETY DISORDER

Diabetes Mellitus (Version 1): 2012-Q2 to 2022-Q2

Scenario A

The following ICD-9 code (including all sub-codes) in the **Health Condition** table

OF

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤2 years apart:

250: DIABETES MELLITUS

Scenario B

The follow	ing ATC code (including all
sub-codes)	in the Medication table:

A10: DRUGS USED IN DIABETES

If the **HealthCondition** table contains any of the following ICD-9 codes (including all sub-codes), the medications are insufficient for defining a disease case:

EXCEPT

249: SECONDARY DIABETES MELLITUS

256.4: POLYCYSTIC OVARIES

648.8: ABNORMAL GLUCOSE TOLERANCE OF MOTHER, COMPLICATING PREGNANCY, CHILDBIRTH, OR THE

PUERPERIUM

775.1: NEONATAL DIABETES MELLITUS 790.29: OTHER ABNORMAL GLUCOSE

Scenario C

Any **Hemoglobin A1c (HbA1c)** test (LOINC = 17856-6) in the **Lab** table with a result \geq 7

OR

at least two **Fasting Blood Glucose (FBG)** tests (LOINC = 14771-0) in the **Lab** table having results strictly > 7 that are recorded on different dates that are ≤1 year apart.

Diabetes Mellitus (Version 2): 2018-Q2 to 2022-Q2

Scenario A

The following ICD-9 code (including all sub-codes) in the **Health Condition** table

OF

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Encounter Diagnosis** table that are recorded on different dates that are ≤2 years apart:

250: DIABETES MELLITUS

Diabetes Mellitus (Version 3): 2020-Q2 to 2022-Q2

Scenario A

The following ICD-9 code (including all sub-codes) in the **Health Condition** table

OF

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤2 years apart:

250: DIABETES MELLITUS

Scenario B

The follow	ing ATC code (including all
sub-codes)	in the Medication table:

A10: DRUGS USED IN DIABETES

If the **HealthCondition** table contains any of the following ICD-9 codes (including all sub-codes), the medications are insufficient for defining a disease case:

EXCEPT

249: SECONDARY DIABETES MELLITUS

256.4: POLYCYSTIC OVARIES

648.8: ABNORMAL GLUCOSE TOLERANCE OF MOTHER, COMPLICATING PREGNANCY, CHILDBIRTH, OR THE

PUERPERIUM

775.1: NEONATAL DIABETES MELLITUS 790.29: OTHER ABNORMAL GLUCOSE

Scenario C

Any **Hemoglobin A1c (HbA1c)** test (LOINC = 17856-6) in the **Lab** table with a result ≥ 6.5

OR

at least two **Fasting Blood Glucose (FBG)** tests (LOINC = 14771-0) in the **Lab** table having results strictly > 7 that are recorded on different dates that are ≤1 year apart.

Hypertension (Version 1): 2012-Q2 to 2022-Q2

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Health Condition** table

OR

at least two (identical or different) of the following ICD-9 codes (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤2 years apart:

401: ESSENTIAL HYPERTENSION 402: HYPERTENSIVE HEART DISEASE

403: HYPERTENSIVE CHRONIC KIDNEY DISEASE

404: HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE

405: SECONDARY HYPERTENSION

Scenario B

Any of the following ATC codes (including all sub-codes) in the Medication table:

CO2: ANTIHYPERTENSIVES

C03AA03: HYDROCHLOROTHIAZIDE

C03BA04: CHLORTALIDONE C03BA08: METOLAZONE C03BA11: INDAPAMIDE C03DB01: AMILORIDE C03DB02: TRIAMTERENE

C03EA01: HYDROCHLOROTHIAZIDE AND

POTASSIUM-SPARING AGENTS

C07AA06: TIMOLOL C07AB03: ATENOLOL C07AB04: ACEBUTOLOL C07AG02: CARVEDILOL

C07CB03: ATENOLOL AND OTHER DIURETICS

C08CA01: AMLODIPINE C08CA02: FELODIPINE C08DA01: VERAPAMIL C09AA01: CAPTOPRIL C09AA02: ENALAPRIL C09AA03: LISINOPRIL C09AA07: BENAZEPRIL C09AA08: CILAZAPRIL C09AA09: FOSINOPRIL C09AA10: TRANDOLAPRIL

C09BA02: ENALAPRIL AND DIURETICS C09BA03: LISINOPRIL AND DIURETICS

C09CA02: EPROSARTAN C09CA03: VALSARTAN C09CA04: IRBESARTAN C09CA07: TELMISARTAN

C09DA01: LOSARTAN AND DIURETICS C09DA02: EPROSARTAN AND DIURETICS CO9DA04: IRBESARTAN AND DIURETICS

C09XA02: ALISKIREN

If the **HealthCondition** table contains any of the following ICD-9 codes (including all sub-codes), the medications are insufficient for defining a disease case:

250: DIABETES MELLITUS

333.1: ESSENTIAL AND OTHER SPECIFIED FORMS OF

TREMOR 346: MIGRAINE

EXCEPT

410: ACUTE MYOCARDIAL INFARCTION

412: OLD MYOCARDIAL INFARCTION

427: CARDIAC DYSRHYTHMIAS

428: HEART FAILURE

413: ANGINA PECTORIS

456.0: ESOPHAGEAL VARICES WITH BLEEDING

456.1: ESOPHAGEAL VARICES WITHOUT MENTION OF

BLEEDING

572.3: PORTAL HYPERTENSION

592: CALCULUS OF KIDNEY AND URETER

Hypertension (Version 2): 2018-Q4 to 2022-Q2

Scenario A

The following ICD-9 code (including all sub-codes) in the **Encounter Diagnosis** or **Health Condition** table:

401: ESSENTIAL HYPERTENSION

Scenario B

The following ATC code in the **Medication** table:

C08CA01: AMLODIPINE

Hypertension (Version 3): 2021-Q4 to 2022-Q2

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Health Condition** table

OF

at least two (identical or different) of the following ICD-9 codes (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤2 years apart:

401: ESSENTIAL HYPERTENSION 402: HYPERTENSIVE HEART DISEASE

403: HYPERTENSIVE CHRONIC KIDNEY DISEASE

404: HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE

405: SECONDARY HYPERTENSION

Osteoarthritis (Version 1): 2010-Q1 to 2022-Q2

Scenario A

Any of the following ICD-9 codes (including all sub-codes) in the **Billing** or **Health Condition** table:

715: OSTEOARTHROSIS AND ALLIED DISORDERS 721: SPONDYLOSIS AND ALLIED DISORDERS

Osteoarthritis (Version 2): 2018-Q4 to 2022-Q2

Scenario A

The following ICD-9 code (including all sub-codes) in the **Encounter Diagnosis** or **Health Condition** table:

715: OSTEOARTHROSIS AND ALLIED DISORDERS

Pediatric Diabetes Mellitus (Version 1): 2019-Q4 to 2023-Q2

Patient age at onset must be <18 years and must satisfy at least one of the following scenarios.

Scenario A

The following ICD-9 code (including all sub-codes) in the **Health Condition** table

 \cap R

at least two (identical or different) of the following ICD-9 code (including all sub-codes) in the **Billing** table that are recorded on different dates that are ≤ 2 years apart:

250: DIABETES MELLITUS

Scenario B

The following ATC code (including all sub-codes) in the **Medication** table:

A10: DRUGS USED IN DIABETES

Scenario C

Two or more **Hemoglobin A1c (HbA1c)** test (LOINC = 17856-6) in the **Lab** table with a result ≥ 6.5 within any one year span.

Appendix C: Legacy CPCSSN Acute Case Definitions

These have been temporarily withdrawn so that CPCSSN can conduct another validation study.

Each of the following acute case definitions are episodic - they are present only for a limited duration. The episode duration depends on the number of indicators of the condition and how spaced they are in time. All episodes have a duration of at least 30 days from the first indicator of the condition, but may be longer.

If each indicator of the condition is more than 30 days apart, each represents a separate episode of length 30 days. For example, if a patient has indicators on the dates

- 2020-01-01, and
- 2020-12-01,

they would have two episodes of the condition,

- First: CaseStartDate = 2020-01-01 and CaseEndDate = 2020-01-31, and
- Second: CaseStartDate = 2020-12-01 and CaseEndDate = 2020-12-31.

If there are two or more indicators of the condition within 30 days, the episode end date is 30 days after the last indicator date. For example, assume we have three indicators of the condition on the dates

- 2020-01-01,
- 2020-01-29, and
- 2020-02-17.

Since each is less than 30 days apart, we would have one episode of the condition with CaseStartDate = 2020-01-01 and CaseEndDate = 2020-03-18. That is, the CaseEndDate is 30 days after 2020-02-17, and the episode is 77 days long.

Otitis Media

Episode duration calculated as per the discussion in the <u>CPCSSN Acute Case</u> <u>Definition introduction</u>.

Patient age must be between 6 months and 17 years, inclusive, and must satisfy the following scenario.

Scenario A

Any of the following ICD-9 codes (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

381: NONSUPPURATIVE OTITIS MEDIA AND EUSTACHIAN TUBE DISORDERS

382: SUPPURATIVE AND UNSPECIFIED OTITIS MEDIA

excluding the specific sub-codes:

381.6: OBSTRUCTION OF EUSTACHIAN TUBE

381.7: PATULOUS EUSTACHIAN TUBE

381.8: OTHER DISORDERS OF EUSTACHIAN TUBE 381.9: UNSPECIFIED EUSTACHIAN TUBE DISORDER

Uncomplicated Pharyngitis

Episode duration calculated as per the discussion in the <u>CPCSSN Acute Case</u> <u>Definition introduction</u>.

Scenario A

Any of the following ICD-9 codes (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

034: STREPTOCOCCAL SORE THROAT AND SCARLET FEVER

462: ACUTE PHARYNGITIS 463: ACUTE TONSILLITIS

464: ACUTE LARYNGITIS AND TRACHEITIS

Uncomplicated Sinusitis

Episode duration calculated as per the discussion in the <u>CPCSSN Acute Case</u> <u>Definition introduction</u>.

Scenario A

The following ICD-9 code (including all sub-codes) in the Billing , EncounterDiagnosis , or Health Condition table: 461: ACUTE SINUSITIS	EXCEPT	If the Billing, EncounterDiagnosis, or HealthCondition table contains the following ICD-9 code (including all sub-codes) on or before the date of the earliest instance of the ICD-9 code 461 (and all sub-codes), the diagnosis is not sufficient to define a case: 473: CHRONIC SINUSITIS
--	--------	--

Upper Respiratory Tract Infection (URTI)

Episode duration calculated as per the discussion in the <u>CPCSSN Acute Case</u> <u>Definition introduction</u>.

Scenario A

Any of the following ICD-9 codes (including sub-codes) in the **Billing**, **Encounter Diagnosis**, or **Health Condition** table:

460: ACUTE NASOPHARYNGITIS [COMMON COLD]

465: ACUTE UPPER RESPIRATORY INFECTIONS OF MULTIPLE OR UNSPECIFIED SITES