Variable Mapping Tips
Epic sites

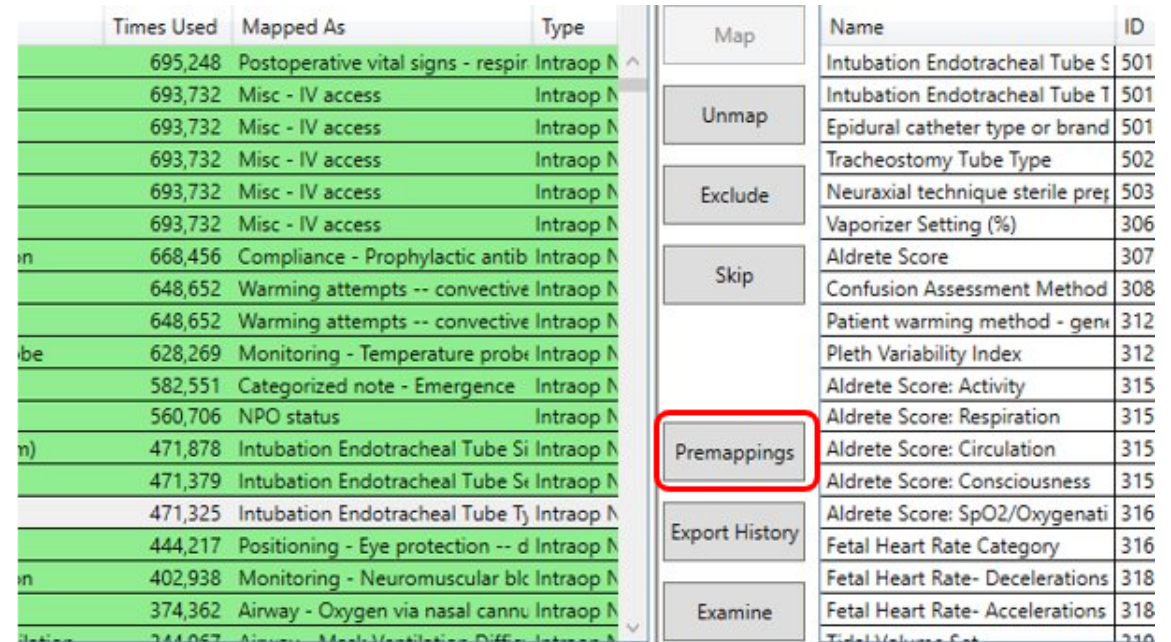*See the Getting Started – Import Manager Variable Mapping presentation first

Pre-Mapping

- For new **Epic** sites, a select amount of variables will map automatically prior to beginning manual mapping.

- Your site technical team will be asked to run a script to complete the pre-mapping.

- Once the script is run, pre-mapped variables will show as 'green' in the variable mapping utility.

ID	Org	Name	Times Used	Mapped As	Type
FLO-4010000(	OHSU	Airway Resp Rate	9,472	Respiratory Rate Actual from Et(	Physiolog
FLO-4010000(	OHSU	ETCO2	9,405	End Tidal CO2 (mmHg)	Physiolog
FLO-4010000(	OHSU	SpO2	9,335	SpO2 %	Physiolog
FLO-4010000(	OHSU	Pulse - Plethysmograph	9,333	Physical Exam - Pulse Rate	Preop
FLO-4010000(	OHSU	Pmean/PAW	9,262	Mean Inspiratory Pressure	Physiolog
FLO-4010000(	OHSU	max Pos Airway P	9,229	Unknown Concept	Meta
FLO-40100001	OHSU	ETO2	9,216	Oxygen Exp %	Physiolog
FLO-40100001	OHSU	FIO2	9,216	Oxygen Insp %	Physiolog
FLO-4010000(	OHSU	Heart Rate	9,047	Unknown Concept	Meta
FLO-4010000(	OHSU	PeeP	8,910	Unknown Concept	Meta
FLO-1120016:	OHSU	O2 FR Avance (Total Liters	8,263	Flows Oxygen (L/Min)	Physiolog
FLO-4010000(	OHSU	Circuit O2	8,048	Unknown Concept	Meta
FLO-4010000(	OHSU	Vent Mode	8,048	Ventilator Mode	Physiolog
FLO-4010000(	OHSU	RR freq/Min	7,541	Ventilator Respiratory Rate Actu	Physiolog
FLO-40100015	OHSU	MV (L/min)	7,519	Minute ventilation	Physiolog
FLO-4010000(	OHSU	Vte	7,496	Tidal Volume actual	Physiolog
FLO-4010000(	OHSU	ST-II	7,357	ST Lead II	Physiolog
FLO-4010000(	OHSU	Vt	6,946	Tidal Volume Set	Physiolog

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Reviewing Pre-Mapped Variables

- Click on the 'Pre-mappings' button at the bottom middle of the Variable Mapping tool to either accept or reject recommended mappings.

- Choose the 'Pre-Mappings Only' Display Mode to review those variables that have already been pre-mapped

- Once per year, MPOG will review the common Epic AIMS IDs and update the pre-mapping for these variables.

Variable Type Mapping Guide- **EPIC Sites Only**

Variable Type	Description	Notes
LEV-* variables	Timed Event Notes	Most reliable when looking for timing of events (i.e. intubation/extubation)
EAP/HLX-* variables	Procedure Note Documentation	Provides the details associated with a procedure: size, number of attempts etc. Observed time is not always populated. If no time associated with EAP/HLX note, map related LEV note as well.

Variable Type Mapping Guide - **EPIC Sites Only**

Variable Type	Description	Notes
FLO-* variables	Data from flowsheet	Data from flowsheet. LDA documentation corresponding to placement, removal etc. Usually duplicate doc
CT-* variables	Case Tracking Variables	Exclude these if multiple variables show for event times. *If you do not have an LEV variable for a certain concept you will need to include the CT variable.
AT-* variables	Attestations	Exclude or leave unmapped

Variable Mapping Tips

- For key anesthesia events such as ETT/LMA placement, extubation, arterial/central line placement, regional and neuraxial block notes: Prioritize LEV/HLX/EAP variables for mapping

  - Exclude FLO variables associated with these concepts *if* both an HLX/EAP and LEV variable exists.

- If duplicate variables exist for critical times such as anesthesia start/end, surgery start/end, In room times, etc.:

  - Consider excluding CT variables (typically nursing documentation). If there are only nursing (CT) variables, keep them and map (Phase I, Phase II in/out times, etc.).

  - Bottom line: Anesthesia documentation is preferred but adopt nursing documentation if anesthesia documentation is not available for critical times/events.

Additional Notes

- When a procedure variable has multiple uses (lines, CT, etc.) map to 50665 Procedures - Other unlisted procedure.

- Map Non-Invasive Blood Pressure location to 3266 Noninvasive blood pressure cuff location

- Map patient position to 3096 'Positioning'

- PONV assessment: If the values listed under 'Examine' are y/n, map to 90010 PONV Assessment. If the values are text, i.e. vomiting, diarrhea, etc., map to 50227 GI symptoms

- Cardiopulmonary Bypass Start should be mapped to 50410 - Cardiopulmonary bypass initiated (full/partial/left-heart)and Cardiopulmonary Bypass End should be mapped to 50409 - Cardiopulmonary bypass (full/partial/left-heart) terminated. The concepts that have 'Perfusion Start' and 'Perfusion End' are used when documented by a Perfusionist

- OB Frequency of Contractions should be mapped to 3181 Frequency of Contractions

- OB Duration of Contractions should be mapped to 3188 Duration of Contractions

Additional Notes continued

- Surgical Admission Type – Inpatient (500): should be used for a patient that was admitted prior to the procedure (i.e. inpatient who went to OR)

- Surgical Admission Type – Admit (502): should be used for patients that were admitted after the procedure (i.e. c-sections)

- Variables with the prefix HLX-EPIC#RS are usually Review of Systems, and should be mapped as available. This will show up in the H&P section of Case Viewer.

- Variables with the prefix HLX-EPIC#HPI are usually H&P documentation and should be mapped as available. This will show up in the H&P section of Case Viewer.

- Check that Anesthesia start/end, Patient in room/out of room, in PACU/out of PACU, uterine incision, etc. are all mapped to LEV concept when available and CT concept is excluded/unmapped (unless no LEV concept available then map CT concept)