# **Equipment Database**

This document is to be used in conjunction with the Equipment database for the 2014 Registration and Inventory of Medical Equipment. All equipment types are in the same database.

The database contains 9 tables and the relationships are indicated in the pdf document titled 'eqrel'.

This data is in-process working data for the internal use of the Planning Branch and it may be changed or revised over time. The Planning Branch provides no assurance or representations as to its accuracy and any user of the data assumes the risk of errors or inaccuracy.

Field Name	Data Type	Definition	
IngCPTCodeID	AutoNumber	Unique identifier of CPT Codes	
strCPTCode	Text	Identifies the CPT Code	
strCPTDesc	Text	Description of the CPT Code	
ysnUsed	Yes/No	Is this CPT Code used on the form?	
IngEquipmentTypeID	Number	Identifies the type of equipment that uses that CPT code; see tblEquipmentTypes	
sngESTV	Number	ESTV	

#### Table 1: tblCPTCodes

#### Table 2: tblCPTProcedures

Field Name	Data Type	Definition	
IngCPTProcedureID	AutoNumber	Unique identifier of the CPT Procedures	
IngCPTCodeID	Number	Identifies the CPT Code used; see tbICPTCodes	
IngSiteDataID	Number	Identifies the site where the equipment is located; see tblSiteData	
IngNumProcedures	Number	Number of procedures performed for a given CPT Code	

#### Table 3: tblEquipment

Field Name	Data Type	Definition
IngEquipmentID	AutoNumber	Primary key
IngProviderID	Number	Identifies the provider of the equipment; see tblProviders
IngEquipmentTypeID	Number	Identifies the type of equipment; see tblEquipmentTypes
strManufacturer	Text	Manufacturer of the equipment
strModelNumber	Text	Model number of the equipment
strSerialNumber	Text	Serial number of the equipment
strCONProjectID	Text	Certificate of Need Project ID
strCertificateHolder	Text	Certificate Holder, as listed on Certificate of Need
dtmPurchaseDate	Date/Time	Date of purchase
curPurchasePrice	Currency	Purchase price
ysnStereotacticRadiosurgery	Yes/No	Configured for stereotactic radiosurgery
IngNumPatients	Number	Number of unduplicated patients
strOwner	Text	If leased or rented, name of owner of equipment
IngOpenClosed	Number	Is the equipment open or closed? 1: Open 2: Closed
IngFixedMobile	Number	Is the equipment fixed or mobile? 1: Fixed 2: Mobile
IngDuplEntry	Number	Is this a duplicate entry? 0 = No 1 = Yes

#### Table 4: tblEquipmentTypes

Field Name	Data Type	Definition
IngEquipmentTypeID	AutoNumber	Primary key
strEquipmentType	Text	Identifies the type of equipment

### Table 5: tblLocations

Field Name	Data Types	Definition
IngLocationID	AutoNumber	Unique identifier of the counties and service areas
strLocation	Text	Identifies the location

#### Table 6: tblPatientOrigins

Field Name	Data Type	Definition	
IngPatientOriginID	AutoNumber	Primary key	
IngLocationID	Number	Identifies the county of the patients; see tblLocations	
IngSiteDataID	Number	Identifies the site where the equipment is located; see tblSiteData	
IngNumPatients	Number	Number of unduplicated patients	

#### Table 7: tblProviders

Field name	Data Type	Definition	
IngProviderID	AutoNumber	Unique identifier of equipment	
strLegalEntity	Text	Full legal name of corporation, partnership, individual, or other legal entity that acquired the equipment by purchase, donation, lease, transfer or comparable arrangement	
strDBA	Text	Doing Business As	
strStreetAddress	Text	Address of the Corporation	
strAddCity	Text	City of the Corporation	
strAddIST	Text	State of the Corporation	
strAddZip	Text	Zipcode of the Corporation	
strTelephone	Text	Telephone number of the Corporation	
strCEOName	Text	Name of the CEO	
strCEOTitle	Text	Title of the CEO	
strCEOAddStreet	Text	Address of the CEO	
strCEOAddCity	Text	City of the CEO	
strCEOAddSiteST	Text	State of the CEO	
strCEOAddSiteZip	Text	Zipcode of the CEO	
strCEOTelephone	Text	Telephone number of the CEO	
strCEOFax	Text	Fax number of the CEO	
strCEOEmail	Text	Email address of the CEO	
strPrepName	Text	Information compiled or prepared by	
strPrepTelephone	Text	Telephone number of the preparer	
strPrepEmail	Text	Email Address of the preparer	
dtmReportingStartDate	Date/Time	Reporting start date	
dtmReportingEndDate	Date/Time	Reporting end date	
strNotes	Text	Notes on a provider	

Field Name	Data Type	Definition	
IngPaymentSourceID	AutoNumber	Unique identifier of the reimbursement/payment source	
IngProviderID	Number	Identifies the provider; see tblProviders	
IngSiteDataID	Number	Identifies the site and the data; see tblSiteData	
IngSelfPay	Number	Number of procedures where primary payer source was Self Pay	
IngMedicare	Number	Number of procedures where primary payer source was Medicare	
IngMedicaid	Number	Number of procedures where primary payer source was Medicaid	
IngCommercialInsurance	Number	Number of procedures where primary payer source was Commercial Insurance	
IngManagedCare	Number	Number of procedures where primary payer source was Managed Care	
IngUnreimbursedCare	Number	Number of procedures where primary payer source was Unreimbursed Care	
strOtherSource	Text	Specify other for primary payer source	
IngOther	Number	Number of procedures where primary payer source was Other	

## Table 8: tblReimbursementSources

### Table 9: tblSiteData

Field Name	Data Type	Definition
IngSiteDataID	AutoNumber	Unique identifier of site data
IngEquipmentID	Number	Identifies the equipment of the site data; see tblEquipment
strSiteName	Text	Name of entity where service is provided
strSiteAddress	Text	Addess of the entity
strSiteCity	Text	City of the entity
strSiteST	Text	State of the entity
strZipCode	Text	Zipcode of the entity
IngLocationID	Number	County where the site is located; see tblLocations
IngNumProcs	Number	Total number of procedures
ysnSunday	Yes/No	Equipment is at this site on Sundays?
sngSundayHours	Number	Number of hours on Sundays
ysnMonday	Yes/No	Equipment is at the site on Mondays?
sngMondayHours	Number	Number of hours on Mondays
ysnTuesday	Yes/No	Equipment is at the site on Tuesdays?
sngTuesdayHours	Number	Number of hours on Tuesdays
ysnWednesday	Yes/No	Equipment is at the site on Wednesdays?
sngWednesdayHours	Number	Number of hours on Wednesdays
ysnThursday	Yes/No	Equipment is at the site on Thursdays?
sngThursdayHours	Number	Number of hours on Thursdays

Field Name	Data Type	Definition
ysnFriday	Yes/No	Equipment is at the site on Fridays?
sngFridayHours	Number	Number of hours on Friday days
ysnSaturday	Yes/No	Equipment is at the site on Saturdays?
sngSaturdayHours	Number	Number of hours on Saturdays
IngTotalHoursOperation	Number	Total number of hours in operation
IngDaysPerYear	Number	Total number of days per year at Site
IngDaysPerWeek	Number	Number of 8-hour days per week the mobile unit is onsite
IngInpatientWith	Number	Number of inpatient procedures with contrast or sedation
IngInpatientWithOut	Number	Number of inpatient procedures without contrast or sedation
IngInpatientTotal	Number	Number of inpatient procedures
IngOutpatientWith	Number	Number of outpatient procedures with contrast or sedation
IngOutpatientWithOut	Number	Number of outpatient procedures without contrast or sedation
IngOutpatientTotal	Number	Number of outpatient procedures
IngHospital	Number	1: Site is a hospital 2: Site is not a hospital
IngFixedScanners	Number	Number of fixed scanners at the site
IngServiceArea	Number	Area generally served in the state; see tblLocations
IngHSA	Number	Which health service area is the site located? I, II, III, IV, V, VI
sngNotOperational	Number	Is the equipment not currently operating?
Notes	Text	Misc information
IngProcFixedDCC14Under	Number	Number of fixed procedures on patients age 14 and younger
IngProcFixedDCC15	Number	Number of fixed procedures on patients age 15 and older
IngProcFixedICC14Under	Number	Number of mobile procedures on patients age 14 and younger
IngProcFixedICC15	Number	Number of mobile procedures on patients age 15 and older
IngProcMobile	Number	Number of mobile procedures
IngProcDedicatedEP	Number	Number of procedures on dedicated EP equipment
DuplicateSite	Number	0 = No; 1 = Yes; this data is different than duplicate entry

Page 5