

# CDM – Charge Detail Master - OMOP

**First published:** 01/02/2024

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Data source

Human

Emergency care discharge records

Hospital outpatient visit records

## Administrative details

### Administrative details

#### PURI

<https://redirect.ema.europa.eu/resource/1111127>

#### Data source ID

1111127

#### Data source acronym

CDM

#### Data holder

[IQVIA](#)

#### Data source type

Emergency care discharge records

Hospital outpatient visit records

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### **Main financial support**

Funding by own institution

Funding from industry or contract research

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### **Care setting**

Hospital inpatient care

Hospital outpatient care

Other

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### **Data source qualification**

If the data source has successfully undergone a formal qualification process (e.g., from the EMA, ISO or other certifications), this should be described.

No

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### **Data source website**

<https://www.iqvia.com/solutions/real-world-evidence/real-world-data-and-insights>

## Contact details

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## Data source regions and languages

**Data source countries**

United States

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**Data source languages**

English

## Data source establishment

**Data source established**

01/01/2007

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**Data source time span**

**First collection:** 01/01/2007

The date when data started to be collected or extracted.

## Publications

### Data source publications

[Use of repurposed and adjuvant drugs in hospital patients with covid-19: multinational network cohort study. BMJ 2021; 373 :n1038](#)

## Data elements collected

The data source contains the following information

**Disease information**

Does the data source collect information with a focus on a specific disease? This might be a patient registry or other similar initiatives.

No

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### **Rare diseases**

Are rare diseases captured? In the European Union a rare disease is one that affects no more than 5 people in 10,000.

No

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### **Pregnancy and/or neonates**

Does the data source collect information on pregnant women and/or neonatal subpopulation (under 28 days of age)?

Yes

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### **Hospital admission and/or discharge**

Yes

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### **ICU admission**

Is information on intensive care unit admission available?

No

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### **Cause of death**

Captured

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### **Prescriptions of medicines**

Captured

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### **Prescriptions vocabulary**

other

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## **Prescriptions vocabulary, other**

Doesn't distinguish prescription

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## **Dispensing of medicines**

Captured

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## **Dispensing vocabulary**

RxNorm

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## **Advanced therapy medicinal products (ATMP)**

Is information on advanced therapy medicinal products included? A medicinal product for human use that is either a gene therapy medicinal product, a somatic cell therapy product or a tissue engineered products as defined in Regulation (EC) No 1394/2007 [Reg (EC) No 1394/2007 Art 1(1)].

No

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## **Contraception**

Is information on the use of any type of contraception (oral, injectable, devices etc.) available?

No

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## **Indication for use**

Does the data source capture information on the therapeutic indication for the use of medicinal products?

Captured

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## **Indication vocabulary**

SNOMED

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## **Medical devices**

Is information on medicinal devices (e.g., pens, syringes, inhalers) available?

No

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## Administration of vaccines

No

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## Procedures

Does the data source capture information on procedures (e.g., diagnostic tests, therapeutic, surgical interventions)?

Captured

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## Procedures vocabulary

Other

SNOMED

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## Procedures vocabulary, other

CPT4

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## Healthcare provider

Is information on the person providing healthcare (e.g., physician, pharmacist, specialist) available?

The healthcare provider refers to individual health professionals or a health facility organisation licensed to provide health care diagnosis and treatment services including medication, surgery and medical devices.

No

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## Clinical measurements

Is information on clinical measurements (e.g., BMI, blood pressure, height) available?

No

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## Genetic data

Are data related to genotyping, genome sequencing available?

Not Captured

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## Biomarker data

Does the data source capture biomarker information? The term “biomarker” refers to a broad subcategory of medical signs ( objective indications of medical state observed from outside the patient), which can be measured accurately and reproducibly. For example, haematological assays, infectious disease markers or metabolomic biomarkers.

Captured

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### **Biomarker data vocabulary**

Other

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### **Biomarker vocabulary, other**

SNOMED, HCPCS, CPT4

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### **Patient-reported outcomes**

Is information on patient-reported outcomes (e.g., quality of life) available?

No

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### **Patient-generated data**

Is patient-generated information (e.g., from wearable devices) available?

Yes

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### **Units of healthcare utilisation**

Are units of healthcare utilisation (e.g., number of visits to GP per year, number of hospital days) available or can they be derived? Units of healthcare utilisation refer to the quantification of the use of services for the purpose of preventing or curing health problems.

Yes

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### **Unique identifier for persons**

Are patients uniquely identified in the data source?

Yes

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### **Diagnostic codes**

Captured

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## Medicinal product information

Captured

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## Medicinal product information collected

Active ingredient(s)

Brand name

Route of administration

Strength

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## Medicinal product vocabulary

Other

RxNorm

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## If 'other,' what vocabulary is used?

CVX

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## Quality of life measurements

Captured

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## Quality of life measurements vocabulary

Not coded (Free text)

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## Lifestyle factors

Not Captured

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## Sociodemographic information

Captured

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## Sociodemographic information collected

Gender

Quantitative descriptors

Population Qualitative Data

## **Population age groups**

Paediatric Population (< 18 years)

Children (2 to < 12 years)

Adolescents (12 to < 18 years)

Adults (18 to < 46 years)

Adults (46 to < 65 years)

Elderly ( $\geq$  65 years)

Adults (65 to < 75 years)

Adults (75 to < 85 years)

Adults (85 years and over)

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**Description of the population covered by the data source in the catchment area whose data are not collected (e.g., people who are registered only for private care)**

General population

## Family linkage

**Family linkage available in the data source permanently or can be created on an ad hoc basis**

Ad hoc

## Population

**Population size**

113167528

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**Active population size**

15398274

Population by age group

Age group	Population size	Active population size
Paediatric Population (< 18 years)	24265903	2723446
Children (2 to < 12 years)	10805863	1260584
Adolescents (12 to < 18 years)	6203062	746191
Adults (18 to < 46 years)	38964208	4605372
Adults (46 to < 65 years)	27308608	3999009
Elderly (≥ 65 years)	22628809	4070447
Adults (65 to < 75 years)	15044346	2399560
Adults (75 to < 85 years)	7584463	1670887
Adults (85 years and over)	0	0

Median observation time

**Median time (years) between first and last available records for unique individuals captured in the data source**

103.00

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## **Median time (years) between first and last available records for unique active individuals (alive and currently registered) capt**

692.00

## **Data flows and management**

### **Access and validation**

#### **Governance details**

Documents or webpages that describe the overall governance of the data source and processes and procedures for data capture and management, data quality check and validation results (governing data access or utilisation for research purposes).

<https://www.pharmacoepi.org/resources/policies/guidelines-08027/>

#### **Biospecimen access**

Are biospecimens available in the data source (e.g., tissue samples)?

No

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#### **Access to subject details**

Can individual patients/practitioners/practices included in the data source be contacted?

No

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#### **Description of data collection**

Anonymized patient level data collected from resource management software within short-term acute-care and non-federal hospitals

### **Event triggering registration**

## **Event triggering registration of a person in the data source**

Practice registration

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## **Event triggering de-registration of a person in the data source**

Death

Emigration

Loss to follow up

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## **Event triggering creation of a record in the data source**

Hospital discharge, Hospital stay, physician encounter

# Data source linkage

## **Linkage**

Is the data source described created by the linkage of other data sources (prelinked data source) and/or can the data source be linked to other data source on an ad-hoc basis?

No

# Data management specifications that apply for the data source

## **Data source refresh**

Every 6 months

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## **Informed consent for use of data for research**

Not Required

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## **Possibility of data validation**

Can validity of the data in the data source be verified (e.g., access to original medical charts)?

No

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### **Data source preservation**

Are records preserved in the data source indefinitely?

Yes

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### **Approval for publication**

Is an approval needed for publishing the results of a study using the data source?

No

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### **Data source last refresh**

01/12/2022

## **Common Data Model (CDM) mapping**

### **CDM mapping**

Has the data source been converted (ETL-ed) to a common data model?

Yes

### **CDM Mappings**

#### **CDM name**

OMOP

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#### **CDM website**

<https://www.ohdsi.org/Data-standardization/>

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**Data source ETL frequency**

4,00 months

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**Data source ETL status**

Completed