**eMERGE 3 Consistent Care Definition**

Step 1 (Required): For eMERGE 3 algorithms that require a consistent care definition, use the following criteria for cases and controls:

1. For subjects 40 years old or less, include those who have at least 2 visits over any 5 year time span with visits occurring more than 365 days apart
2. For subjects older than 40 years of age, include those who have at least 2 visits over any 2 year time span with visits occurring more than 365 days apart

Visits are defined as those having an icd9, icd10 or CPT code.

Step 2 (Optional): Not all sites have well-curated coded data for clinic site, so including clinics in the consistent care definition is optional. To include clinics in the consistent care definition, use the following rules:

1) The subject has received care in a primary care or internal medicine clinic

 Or

1. The subject is registered as part of a patient centered medical home in the EHR

Step 3 (Optional): In addition sites, can add clinics using the following rule

1. The subject has received care in a subspecialty clinic that provides primary care or longitudinal care (using criteria provided by Vanderbilt)

When using the eMERGE 3 Consistent Care Definition, it is important to document that it has been used and which steps were applied.

 **Algorithm Summary:**

1. Step 1 (Required): eMERGE 3 Consistent Care Definition:

Any 2 codes (icd9, icd10 or CPT) ≥ 365 days apart within

* + - Any 5 year time frame for age ≤ 40
		- Any 2 year time frame for adults > age 40
1. Step 2 (Optional): further restriction by primary care/internal medicine:
	* The subject has received care in a primary care or internal medicine clinic

or has been registered as part of a patient centered medical home in the EHR

1. Step 3 (Optional): further restriction by subspecialty clinic:
	* The subject has received care in a subspecialty clinic that provides primary care or longitudinal care