

## Hospital Quality Measures : Nationwide Operational Definitions

### HEART FAILURE

Measure	Definition		Exclusions
	Numerator Statement	Population	
<b>Left Ventricular Assessment</b>	Heart Failure Patients with documentation in the hospital record that LVF was assessed before arrival, during hospitalization, or is planned for after discharge	Heart Failure Patients	Pts < 18 years of age Pts transferred to another acute care hospital Pts who expire Pts who left against medical advice Pts discharged to hospice Pts with reasons documented by a physician, ARNP, or PA for not assessing LVF
<b>ACEI for LVSD</b>	Heart Failure Patients who are prescribed an ACEI at hospital discharge	Heart Failure Patients with LVSD and without ACEI contraindications	Pts < 18 years of age Pts transferred to another acute care hospital Pts who expire Pts who left against medical advice Pts discharged to hospice Pts with charted documentation of participation in a clinical trial testing alternatives to ACEIs as first line therapy Pts with one or more of the following ACEI contraindications/reasons for not prescribing ACEI documented in the medical record: ACEI allergy, Moderate or severe aortic stenosis, Other reasons documented by a physician, ARNP, or PA for not prescribing ACEI at discharge
<b>Adult smoking cessation advice/counseling</b>	Heart Failure patients who receive smoking cessation advice or counseling during the hospital stay	Heart Failure Patients with a history of smoking cigarettes anytime during the year prior to hospital arrival	Pts < 18 years of age Pts transferred to another acute care hospital Pts who expire Pts who left against medical advice Pts discharged to hospice
<b>Discharge Instructions</b>	Heart failure patients with documentation that they or their caregivers were given written discharge instructions or other educational material addressing all of the following: 1. activity level 2. diet 3. discharge medications 4. follow-up appointment 5. weight monitoring 6. what to do if symptoms worsen	Heart Failure Patients	Patients less than 18 years of age Pts transferred to another acute care hospital Pts who expire Pts who left against medical advice Pts discharged to hospice

## Hospital Quality Measures : Nationwide Operational Definitions

### PNEUMONIA

Measure	Definition		Exclusions
	Numerator Statement	Population	
<b>Pneumococcal Vaccination</b>	Patients with pneumonia, age 65 and older, who were screened for pneumococcal vaccine status and were vaccinated prior to discharge, if indicated	Inpatients 65 years of age and older with a primary diagnosis of pneumonia or a primary diagnosis of septicemia or respiratory failure with a secondary diagnosis of pneumonia	Pts received in transfer from another acute care or critical access hospital including another ED Pts who left against medical advice Pts discharged to a federal hospital Pts who have no working diagnosis of pneumonia at the time of admission Pts receiving Comfort Care Only Pts < 65 years of age Pts who expired Pts who were discharged to hospice care Pts who were transferred to another short term general hospital for inpatient care
<b>Blood Cultures prior to Antibiotics</b>	Number of pneumonia inpatients whose blood cultures are collected before the first dose of antibiotic (IV, IM, PO, or NG) is administered in the hospital ( <i>note pts who did not receive an order for blood cultures are not included!</i> )	Inpatients 18 years and older with a primary diagnosis of pneumonia or a primary diagnosis of septicemia or respiratory failure with a secondary diagnosis of pneumonia	Pts received in transfer from another acute care or critical access hospital including another ED Pts who have no working diagnosis of pneumonia at the time of admission Pts receiving Comfort Care Only Pts < 18 years of age Pts having no blood cultures obtained
<b>Adult Smoking Cessation advice/counseling</b>	Adult pneumonia patients who receive smoking cessation advice or counseling during hospital stay.	Adult pneumonia patients with a history of smoking cigarettes anytime during the year prior to arrival. Patients had a primary diagnosis of pneumonia or a primary diagnosis of septicemia or respiratory failure with a secondary diagnosis of pneumonia	Pts received in transfer from another acute care or critical access hospital including another ED Pts who left against medical advice Pts discharged to a federal hospital Pts who have no working diagnosis of pneumonia at the time of admission Pts receiving Comfort Care Only Pts < 18 years of age Pts who expired Pts who were discharged to hospice care
<b>Oxygenation Assessment</b>	Patients who receive oxygenation assessment with arterial blood gas (ABG) or pulse oximetry within 24 hours of hospital arrival	Inpatients 18 years and older with a primary diagnosis of pneumonia or a primary diagnosis of septicemia or respiratory failure with a secondary diagnosis of pneumonia	Pts received in transfer from another acute care or critical access hospital including another ED Pts who have no working diagnosis of pneumonia at the time of admission Pts receiving Comfort Care Only Pts < 18 years of age
<b>Antibiotic Timing</b>	Mean time from arrival at the hospital to the administration of the first dose of antibiotic at the hospital.	Patients discharged with: ICD-9-CM Principal Diagnosis Code of pneumonia OR ICD-9-CM Principal Diagnosis Code of septicemia or respiratory failure (acute or chronic) AND ICD-9-CM OtherDiagnosis Code of pneumonia	Patients received in transfer from another acute care or critical access hospital, including another emergency department Patients who had no working diagnosis of pneumonia at the time of admission Patients receiving Comfort Measures Only Patients who do not receive antibiotics during hospitalization or within 36 hours (2160 minutes) after arrival to the hospital Patients who have received antibiotics within 24 hours prior to hospital arrival Patients less than 18 years of age

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<b>Antibiotic received within 8 hours of arrival</b>	Pneumonia patients who receive their first dose of antibiotics within 8 hours after arrival at the hospital.	ICD-9-CM Principal Diagnosis Code of pneumonia OR ICD-9-CM Principal Diagnosis Code of septicemia or respiratory failure (acute or chronic) AND ICD-9-CM OtherDiagnosis Code of pneumonia	Patients received in transfer from another acute care or critical access hospital, including another emergency department Patients who had no working diagnosis of pneumonia at the time of admission Patients receiving Comfort Measures Only Patients who do not receive antibiotics during hospitalization or within 36 hours (2160 minutes) from the time of hospital arrival Patients who have received antibiotics within 24 hours prior to hospital arrival Patients less than 18 years of age
<b>Antibiotic received within 4 hours of arrival</b>	Pneumonia patients who receive their first dose of antibiotics within 4 hours after arrival at the hospital.	ICD-9-CM Principal Diagnosis Code of pneumonia OR ICD-9-CM Principal Diagnosis Code of septicemia or respiratory failure (acute or chronic) AND ICD-9-CM OtherDiagnosis Code of pneumonia	Patients received in transfer from another acute care or critical access hospital, including another emergency department Patients who had no working diagnosis of pneumonia at the time of admission Patients receiving Comfort Measures Only Patients who do not receive antibiotics during hospitalization or within 36 hours (2160 minutes) from the time of hospital arrival Patients who have received antibiotics within 24 hours prior to hospital arrival Patients less than 18 years of age
<b>Antibiotic Selection for patietns in ICU</b>	Immunocompetent ICU patients with Community-Acquired Pneumonia who receive an initial antibiotic regimen during the first 24 hours that is consistent with current guidelines.	Patients discharged with: ICD-9-CM Principal Diagnosis Code of pneumonia OR ICD-9-CM Principal Diagnosis Code of septicemia or respiratory failure (acute or chronic) AND ICD-9-CM Other Diagnosis Code of pneumonia	Patients less than 18 years of age Patients received in transfer from another acute care or critical access hospital, including another emergency department Patients who have no Working Diagnosis of pneumonia at the time of admission Patients receiving Comfort Measures Only
<b>Antibiotic selction for patient in non-ICU</b>	Immunocompetent non-Intensive Care Unit (ICU) patients with Community-Acquired Pneumonia who receive an initial antibiotic regimen during the first 24 hours that is consistent with current guidelines.	Patients discharged with: ICD-9-CM Principal Diagnosis Code of pneumonia OR ICD-9-CM Principal Diagnosis Code of septicemia or respiratory failure (acute or chronic) AND ICD-9-CM Other Diagnosis Code of pneumonia	Patients less than 18 years of age Patients received in transfer from another acute care or critical access hospital, including another emergency department Patients who have no Working Diagnosis of pneumonia at the time of admission Patients receiving Comfort Measures Only

## Hospital Quality Measures : Nationwide Operational Definitions

### ACUTE MYOCARDIAL INFARCTION

Measure	Definition		Exclusions
	Numerator Statement	Population	
<b>Aspirin on Arrival</b>	AMI patients who received aspirin within 24 hours before or after hospital arrival.	AMI patients without aspirin contraindications who had a principal discharge diagnosis of AMI	<p>Pts received in transfer from another acute care or critical access hospital including another ED</p> <p>Pts who left against medical advice on day of arrival</p> <p>Pts discharged on the day of arrival</p> <p>Pts &lt; 18 years of age</p> <p>Pts who expired on day of arrival</p> <p>Pts who were transferred to another acute care hospital on day of arrival</p> <p>Pts with one or more of the following aspirin contraindications/reasons for not prescribing aspirin documented in the medical record: Active bleeding on arrival or within 24 hours after arrival; aspirin allergy; warfarin/coumadin as pre-arrival medication; or other reason documented by physician, nurse practitioner, or physician assistant for not giving aspirin within 24 hours before or after hospital arrival</p>
<b>Beta Blockers on Arrival</b>	AMI patients who received a beta blocker within 24 hours after hospital arrival.	AMI patients without beta blocker contraindications who had a principal discharge diagnosis of AMI	<p>Pts received in transfer from another acute care or critical access hospital including another ED</p> <p>Pts who left against medical advice on day of arrival</p> <p>Pts discharged on the day of arrival</p> <p>Pts &lt; 18 years of age</p> <p>Pts who expired on day of arrival</p> <p>Pts who were transferred to another acute care hospital on day of arrival</p> <p>Pts with one or more of the following beta blocker contraindications/reasons for not prescribing beta blockers documented in the medical record: Beta Blocker Allergy; Bradycardia on arrival or within 24 hours after arrival while not on a beta blocker; Heart failure on arrival or within 24 hours after arrival; second or third degree heart block on ECG on arrival or within 24 hours after arrival and does not have a pacemaker; shock on arrival or within 24 hours after arrival; systolic blood pressure less than 90 mm Hg on arrival or within 24 hours after arrival; or other reason documented by physician, nurse practitioner, or physician assistant for not giving beta blocker within 24 hours before or after hospital arrival</p>
<b>Adult Smoking Cessation Advice/Counseling</b>	AMI patients who received smoking cessation advice or counseling during the hospital stay	AMI patients with a history of smoking cigarettes anytime during the year prior to hospital arrival.	<p>Pts who left against medical advice</p> <p>Pts discharged to hospice</p> <p>Pts &lt; 18 years of age</p> <p>Pts who expired</p> <p>Pts who were transferred to another acute care hospital</p>
<b>Aspirin prescribed at Discharge</b>	AMI patients who are prescribed aspirin at hospital discharge	AMI patients without aspirin contraindications who had a principal discharge diagnosis of AMI	<p>Pts who left against medical advice</p> <p>Pts &lt; 18 years of age</p> <p>Pts who expired</p> <p>Pts discharged to hospice</p> <p>Pts who were transferred to another acute care hospital</p> <p>Pts with one or more of the following aspirin contraindications/reasons for not prescribing aspirin documented in the medical record: Active bleeding on arrival or during hospital stay; aspirin allergy; warfarin/coumadin prescribed at discharge; or other reason documented by physician, nurse practitioner, or physician assistant for not giving aspirin at discharge</p>

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### ACUTE MYOCARDIAL INFARCTION

Measure	Definition		Exclusions
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<b>Beta Blockers prescribed at Discharge</b> <i>Attending Physician</i>	AMI patients who are prescribed a beta blocker at hospital discharge.	AMI patients without beta blocker contraindications who had a principal discharge diagnosis of AMI	Pts who left against medical advice Pts < 18 years of age Pts who expired Pts discharged to hospice Pts who were transferred to another acute care hospital Pts with one or more of the following beta blocker contraindications/reasons for not prescribing beta blockers documented in the medical record: Beta Blocker Allergy; Bradycardia on day of discharge or day prior to discharge while not on a beta blocker; second or third degree heart block on ECG on arrival or during hospital stay and does not have a pacemaker; systolic blood pressure less than 90 mm Hg on day of discharge or day prior to discharge while not on a beta blocker; or other reason documented by physician, nurse practitioner, or physician assistant for not prescribing beta blocker at discharge
<b>ACEI prescribed at Discharge for LVSD</b>	AMI patients who are prescribed an ACEI at hospital discharge	AMI patients with charted documentation of LVEF less than 40% or a narrative description of LVF consistent with moderate or severe systolic dysfunction without ACEI contraindications	Pts who left against medical advice Pts < 18 years of age Pts who expired Pts discharged to hospice Pts who were transferred to another acute care hospital Pts with one or more of the following ACEI contraindications/reasons for not prescribing ACEI documented in the medical record: ACEI allergy; moderate or severe aortic stenosis; or other reason documented by physician, nurse practitioner, or physician assistant for not prescribing ACEI at discharge
<b>Adult Smoking cessation advice/counseling</b>	Acute myocardial infarction (AMI) patients with a history of smoking cigarettes, who are given smoking cessation advice or counseling during hospital stay.	For the purposes of this measure, a smoker is defined as someone who has smoked cigarettes anytime during the year prior to hospital arrival.	Pts who left against medical advice Pts < 18 years of age Pts who expired Pts discharged to hospice
<b>Time to PCI</b>	Mean time from arrival to percutaneous coronary intervention (PCI) in patients with ST segment elevation or left bundle branch block (LBBB) on the electrocardiogram (ECG) performed closest to hospital arrival time.	Discharges with: • An ICD-9-CM Principal Diagnosis Code for AMI, AND • PCI (ICD-9-CM Principal and Other Procedure Codes for PCI, AND • ST segment elevation or LBBB on the ECG performed closest to hospital arrival, AND • PCI performed within 24 hours after hospital arrival	Patients less than 18 years of age Patients received in transfer from another acute care hospital, including another emergency department Patients administered thrombolytic agents

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## ACUTE MYOCARDIAL INFARCTION

Measure	Definition		Exclusions
	Numerator Statement	Population	
<b>Time to Thrombolysis</b>	Mean time from arrival to administration of thrombolytic agent in patients with ST segment elevation or left bundle branch block (LBBB) on the electrocardiogram (ECG) performed closest to hospital arrival time.	Discharges with: <ul style="list-style-type: none"> <li>• An ICD-9-CM Principal Diagnosis Code for AMI AND</li> <li>• ST segment elevation or LBBB on the ECG performed closest to hospital arrival AND</li> <li>• Thrombolytic therapy within 6 hours after hospital arrival</li> </ul>	Patients less than 18 years of age Patients received in transfer from another acute care hospital, including another emergency department
<b>Inpatient mortality</b>	Inpatient mortality of AMI patients	Discharges with an ICD-9-CM Principal Diagnosis Code for AMI 410.01 AMI ANTEROLATERAL, INITIAL 410.11 AMI ANTERIOR WALL, INITIAL 410.21 AMI INFEROLATERAL, INITIAL 410.31 AMI INFEROPOST, INITIAL 410.41 AMI INFERIOR WALL, INITIAL 410.51 AMI LATERAL NEC, INITIAL 410.61 TRUE POST INFARCT, INITIAL 410.71 SUBENDO INFARCT, INITIAL 410.81 AMI NEC, INITIAL 410.91 AMI NOS, INITIAL	Patients less than 18 years of age Patients transferred to another acute care hospital or federal hospital Patients received in transfer from another acute care hospital Patients discharged to hospice <u>Note:</u> The measure population does not include deaths that occurred in the emergency department.
<b>PCI within 120 minutes of arrival</b> (this measure to replace time to PCI Q1 - 2005)	Acute myocardial infarction (AMI) patients receiving percutaneous coronary intervention (PCI) during the hospital stay with a time from hospital arrival to PCI of 120 minutes or less.	AMI patients with ST elevation or LBBB on ECG who received PCI Included Populations: Discharges with: <ul style="list-style-type: none"> <li>• An ICD-9-CM Principal Diagnosis Code AND</li> <li>• PCI (ICD-9-CM Principal and Other Procedure Codes for PCI) AND</li> <li>• ST segment elevation or LBBB on the ECG performed closest to hospital arrival AND</li> <li>• PCI performed within 24 hours after hospital arrival</li> </ul>	Patients less than 18 years of age Patients received in transfer from another acute care hospital, including another emergency department Patients administered thrombolytic agents
<b>Thrombolytic within 30 minutes of arrival</b> (This measure to replace time to thrombolysis Q1 2005.	Acute myocardial infarction (AMI) patients receiving thrombolytic therapy during the hospital stay and having a time from hospital arrival to thrombolysis of 30 minutes or less.	AMI patients with ST elevation or LBBB on ECG who received thrombolytic therapy Discharges with: <ul style="list-style-type: none"> <li>• An ICD-9-CM Principal Diagnosis Code for AMI as defined in Appendix A, Table 1.1 AND</li> <li>• ST segment elevation or LBBB on the ECG performed closest to hospital arrival AND</li> <li>• Thrombolytic therapy within 6 hours after hospital arrival</li> </ul>	<ul style="list-style-type: none"> <li>• Patients less than 18 years of age</li> <li>• Patients received in transfer from another acute care hospital, including another emergency department</li> </ul>