

NATIONAL QUALITY FORUM

National Voluntary Consensus Standards for Ambulatory Care- Additional Outpatient Measures 2010

SAMPLE BALLOT

MEASURE-BY-MEASURE

Measure ACP-035-10 **Patient(s) with an emergency medicine visit for syncope that had an ECG.**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-036-10 **Patient(s) with an emergency medicine visit for non-traumatic chest pain that had an ECG.**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-032-10 **Patient(s) two years of age and older with acute otitis externa who were NOT prescribed systemic antimicrobial therapy**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-009-10 **Acute otitis externa: topical therapy**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-011-10 **Acute otitis externa: Systemic antimicrobial therapy—avoidance of inappropriate use**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-012-10 **Otitis media with effusion: antihistamines or decongestants—avoidance of inappropriate use**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

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NOT FOR VOTING

Measure ACP-013-10 **Otitis media with effusion: systemic corticosteroids—avoidance of inappropriate use**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-015-10 **Otitis media with effusion: systemic antimicrobials—avoidance of inappropriate use**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-002-10 **Ultrasound determination of pregnancy location for pregnant patients with abdominal pain**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-003-10 **Rhogam for Rh negative pregnant women at risk of fetal blood exposure**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-016-10 **Endoscopy/ polyp surveillance: appropriate follow-up interval for normal colonoscopy in average risk patients**

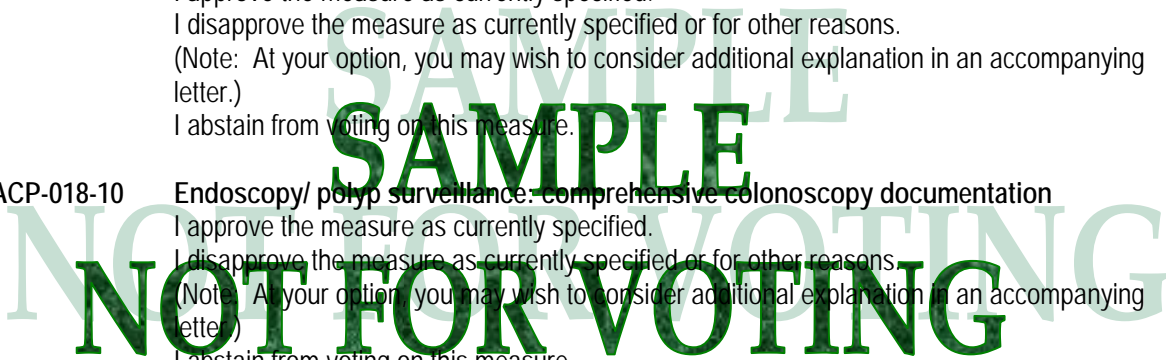
I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-017-10 **Endoscopy/ polyp surveillance: colonoscopy interval for patients with a history of adenomatous polyps—avoidance of inappropriate use**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.

Measure ACP-018-10 **Endoscopy/ polyp surveillance: comprehensive colonoscopy documentation**

I approve the measure as currently specified.
I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
I abstain from voting on this measure.



Measure ACP-019-10 **Troponin results for emergency department acute myocardial infarction (AMI) patients or chest pain patients (with probable cardiac chest pain) received within 60 minutes of arrival.**

- _____ I approve the measure as currently specified.
- _____ I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
- _____ I abstain from voting on this measure.

Measure ACP-021-10 **Head CT scan results for Acute Ischemic Stroke or Hemorrhagic Stroke patients who received Head CT or MRI scan Interpretation Within 45 minutes of ED arrival.**

- _____ I approve the measure as currently specified.
- _____ I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
- _____ I abstain from voting on this measure.

Measure ACP-023-10 **Median time to pain management for long bone fracture**

- _____ I approve the measure as currently specified.
- _____ I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
- _____ I abstain from voting on this measure.

Measure ACP-043-10 **Ultrasound guidance for internal jugular central venous catheter placement**

- _____ I approve the measure as currently specified.
- _____ I disapprove the measure as currently specified or for other reasons.
(Note: At your option, you may wish to consider additional explanation in an accompanying letter.)
- _____ I abstain from voting on this measure.

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