NATIONAL QUALITY FORUM

NATIONAL VOLUNTARY CONSENSUS STANDARDS FOR EMERGENCY CARE -PHASE I: EMERGENCY DEPARTMENT TRANSFER **NOVEMBER 2007**

Ме	asure Title	Measure Description	IP Owner ¹
1.	Aspirin at Arrival	Emergency Department acute myocardial infarction (AMI) patients or chest pain patients (with <i>Probable Cardiac Chest Pain</i>) without aspirin contraindications who received aspirin within 24 hours before ED arrival or prior to transfer.	Centers for Medicare & Medicaid Services
2.	Median to Fibrinolysis	Median time from emergency department arrival to administration of fibrinolytic therapy in ED patients with ST-segment elevation or left bundle branch block (LBBB) on the electrocardiogram (ECG) performed closest to ED arrival and prior to transfer.	CMS
3.	Fibrinolytic Therapy Received within 30 Minutes of ED Arrival	Emergency Department acute myocardial infarction (AMI) patients receiving fibrinolytic therapy during the ED stay and having a time from ED arrival to fibrinolysis of 30 minutes or less.	CMS
4.	Median Time to ECG	Median time from emergency department arrival to ECG (performed in the ED prior to transfer) for acute myocardial infarction (AMI) or Chest Pain patients (with probable cardiac chest pain).	CMS
5.	Median Transfer to Another Facility for Acute Coronary Intervention	Median time from emergency department arrival to time of transfer to another facility for acute coronary intervention.	CMS
6.	Administrative Communication	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that administrative information was communicated to the receiving hospital within 60 minutes of departure.	University of Minnesota Rural Health Research Center
7.	Patient Information	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that patient identification information was communicated to the receiving hospital within 60 minutes of departure.	UMRHRC
8.	Vital Signs	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that entire vital signs record was communicated to the receiving hospital within 60 minutes of departure.	UMRHRC
9.	Medication Information	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that medication-related information was communicated to the receiving hospital within 60 minutes of departure.	UMRHRC
	Physician Information	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that physician-generated information was communicated to the receiving hospital within 60 minutes of departure.	UMRHRC
	Nursing Information	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that nursing information was communicated to the receiving hospital within 60 minutes of departure.	UMRHRC
12.	Procedures and Tests	Percent of patients transferred to another acute care hospital whose medical record documentation indicated that procedure and test information was communicated to the receiving hospital within 60 minutes of departure.	UMRHRC

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CMS – Centers for Medicare & Medicaid Services (<u>www.cms.gov</u>) UMRHRC – University of Minnesota Rural Health Research Center (<u>www.hpm.umn.edu/rhrc/</u>)