

# NATIONAL QUALITY FORUM

## Surgical Consensus Standards Endorsement Maintenance 2010 Table of Submitted Measures—Phase II As of January 18, 2012

| Measure ID Number/Title  | Measure Description   | Measure Steward                  |
|--|---|----------------------------------|
| <b>0117</b><br><b>Beta blockade at discharge</b><br><br><i>*Maintenance Measure</i>  | Percent of patients undergoing isolated CABG who were discharged on beta blockers.  | The Society of Thoracic Surgeons |
| <b>0125</b><br><b>Timing of antibiotic prophylaxis for cardiac surgery patients</b><br>(withdrawn by measure developer)<br><br><i>*Maintenance Measure</i> | Percent of patients undergoing cardiac surgery who received prophylactic antibiotics within one hour prior to of surgical incision (two hours if receiving vancomycin). | The Society of Thoracic Surgeons |
| <b>0126</b><br><b>Selection of antibiotic prophylaxis for cardiac surgery patients</b><br><br><i>*Maintenance Measure</i>                                  | Percent of patients undergoing cardiac surgery who received prophylactic antibiotics recommended for the operation.   | The Society of Thoracic Surgeons |
| <b>0127</b><br><b>Pre-operative beta blockade</b><br><br><i>*Maintenance Measure</i>   | Percent of patients undergoing isolated CABG who received beta blockers within 24 hours preceding surgery.  | The Society of Thoracic Surgeons |
| <b>0128</b><br><b>Duration of prophylaxis for cardiac surgery patients</b><br><br><i>*Maintenance Measure</i>  | Percent of patients undergoing cardiac surgery whose prophylactic antibiotics were discontinued within 24 hours after surgery end time.                                 | The Society of Thoracic Surgeons |
| <b>0264</b><br><b>Prophylactic intravenous (IV) antibiotic timing</b><br><br><i>*Maintenance Measure</i>   | Rate of ASC patients who received IV antibiotics ordered for surgical site infection prophylaxis on time.   | ASC Quality Collaboration        |
| <b>0265</b>  | Rate of ASC admissions requiring a hospital transfer or hospital admission  | ASC Quality                      |

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| Measure ID Number/Title  | Measure Description  | Measure Steward                            |
|--|--|--|
| <b>Hospital transfer/admission</b><br><br><i>*Maintenance Measure</i>  | upon discharge from the ASC.   | Collaboration                              |
| <b>0273</b><br><b>Perforated appendix admission rate (PQI 2)</b><br><br><i>*Maintenance Measure</i>  | This measure is used to assess the number of admissions for perforated appendix per 100 admissions for appendicitis within Metro Area or county. See Notes.  | Agency for Healthcare Research and Quality |
| <b>0284</b><br><b>Surgery patients on beta blocker therapy prior to admission who received a beta blocker during the perioperative period</b><br><br><i>*Maintenance Measure</i> | Percentage of patients on beta blocker therapy prior to admission who received a beta blocker during the perioperative period.   | Centers for Medicare & Medicaid Services   |
| <b>0301</b><br><b>Surgery patients with appropriate hair removal</b><br><br><i>*Maintenance Measure</i>  | Percentage of surgery patients with surgical hair site removal with clippers or depilatory or no surgical site hair removal.   | Centers for Medicare & Medicaid Services   |
| <b>0339</b><br><b>RACHS-1 pediatric heart surgery mortality</b><br><br><i>*Maintenance Measure</i>   | Risk-adjusted rate of in-hospital death for pediatric cases undergoing surgery for congenital heart disease, along with ratio of observed to expected in-hospital mortality rates.   | Agency for Healthcare Research and Quality |
| <b>0340</b><br><b>Pediatric heart surgery volume (PDI 7)</b><br><br><i>*Maintenance Measure</i>  | Raw volume compared to annual thresholds (100 procedures).   | Agency for Healthcare Research and Quality |
| <b>0351</b><br><b>Death among surgical inpatients with serious, treatable complications (PSI 4)</b>  | Percent of in-hospital deaths for surgical discharges, age 18 years and older, with a principal procedure within 2 days of admission or elective, with enumerated complications of care listed in failure to rescue (FTR) definition (e.g., pneumonia, DVT/PE, sepsis, shock/cardiac arrest, or GI | Agency for Healthcare Research and Quality |

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|---|--|--|
| <i>*Maintenance Measure</i>   | hemorrhage/acute ulcer).   |  |
| <b>0352</b><br><b>Failure to rescue in-hospital mortality (risk adjusted)</b><br><br><i>*Maintenance Measure</i>                      | Percentage of patients who died with a complication in the hospital.               | The Children's Hospital of Philadelphia    |
| <b>0353</b><br><b>Failure to rescue 30-day mortality (risk adjusted)</b><br><br><i>*Maintenance Measure</i>                           | Percentage of patients who died with a complication within 30 days from admission. | The Children's Hospital of Philadelphia    |
| <b>0357</b><br><b>Abdominal aortic aneurysm volume (AAA) (IQI 4)</b><br><br><i>*Maintenance Measure</i>                               | Raw volume compared to annual thresholds (10 and 32 procedures).                   | Agency for Healthcare Research and Quality |
| <b>0359</b><br><b>Abdominal aortic artery (AAA) repair mortality rate (IQI 11) (risk adjusted)</b><br><br><i>*Maintenance Measure</i> | Number of deaths per 100 AAA repairs (risk adjusted).                              | Agency for Healthcare Research and Quality |
| <b>0364</b><br><b>Incidental appendectomy in the elderly rate (IQI 24) (risk adjusted)</b><br><br><i>*Maintenance Measure</i>         | Number of incidental appendectomies per 100 abdominal surgeries.                   | Agency for Healthcare Research and Quality |
| <b>0365</b><br><b>Pancreatic resection mortality rate (IQI 9) (risk adjusted)</b><br><br><i>*Maintenance Measure</i>                  | Number of deaths per 100 pancreatic resections for cancer (risk adjusted).         | Agency for Healthcare Research and Quality |

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|---|--|--|
| <b>0366</b><br><b>Pancreatic resection volume (IQI 2)</b><br><br><i>*Maintenance Measure</i>  | Raw volume compared to annual thresholds (10 and 11 procedures).   | Agency for Healthcare Research and Quality |
| <b>0367</b><br><b>Post operative wound dehiscence (PDI 11) (risk adjusted)</b><br><br><i>*Maintenance Measure</i>                             | Cases of reclosure of postoperative disruption of abdominal wall per 1,000 cases of abdominopelvic surgery. Excludes obstetric admissions.   | Agency for Healthcare Research and Quality |
| <b>0368</b><br><b>Post operative wound dehiscence (PSI 14) (risk adjusted)</b><br><br><i>*Maintenance Measure</i>                             | Cases of reclosure of postoperative disruption of abdominal wall per 1,000 cases of abdominopelvic surgery. Excludes obstetric admissions.   | Agency for Healthcare Research and Quality |
| <b>0515</b><br><b>Ambulatory surgery patients with appropriate method of hair removal</b><br><br><i>*Maintenance Measure</i>                  | Percentage of ASC admissions with appropriate surgical site hair removal.  | ASC Quality Collaboration                  |
| <b>0527</b><br><b>Prophylactic antibiotic received within 1 hour prior to surgical incision SCIP-Inf-1</b><br><br><i>*Maintenance Measure</i> | Surgical patients with prophylactic antibiotics initiated within one hour prior to surgical incision. Patients who received vancomycin or a fluoroquinolone for prophylactic antibiotics should have the antibiotics initiated within two hours prior to surgical incision. Due to the longer infusion time required for vancomycin or a fluoroquinolone, it is acceptable to start these antibiotics within two hours prior to incision time. | Centers for Medicare & Medicaid Services   |
| <b>0528</b><br><b>Prophylactic antibiotic selection for surgical patients</b><br><br><i>*Maintenance Measure</i>                              | Surgical patients who received prophylactic antibiotics consistent with current guidelines (specific to each type of surgical procedure).  | Centers for Medicare & Medicaid Services   |
| <b>0529</b><br><b>Prophylactic antibiotics</b>  | Surgical patients whose prophylactic antibiotics were discontinued within 24 hours after Anesthesia End Time. The Society of Thoracic Surgeons   | Centers for Medicare & Medicaid Services   |

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|---|--|---|
| <p><b>discontinued within 24 hours after surgery end time</b></p> <p><i>*Maintenance Measure</i></p>  | <p>(STS) Practice Guideline for Antibiotic Prophylaxis in Cardiac Surgery (2006) indicates that there is no reason to extend antibiotics beyond 48 hours for cardiac surgery and very explicitly states that antibiotics should not be extended beyond 48 hours even with tubes and drains in place for cardiac surgery.</p> | <p>Medicaid Services</p>                            |
| <p><b>963</b></p> <p><b>Composite measure of hospital quality for indicators related to the surgical care improvement project (SCIP)</b></p> <p>(withdrawn by measure developer)</p> <p><i>* New Candidate Standard</i></p> | <p>A composite measure of in-hospital process-of-care indicators related to the Surgical Care Improvement Project (SCIP).</p>  | <p>Centers for Medicare &amp; Medicaid Services</p> |
| <p><b>1480</b></p> <p><b>Patient(s) 18 years of age and older on a beta-blocker at admission or within seven days of discharge of an isolated CABG procedure</b></p> <p><i>* New Candidate Standard</i></p>                 | <p>Patient(s) 18 years of age and older hospitalized for an isolated CABG procedure taking a beta-blocker at admission or within seven days of discharge.</p>  | <p>Ingenix</p>                                      |
| <p><b>1519</b></p> <p><b>Statin therapy at discharge after lower extremity bypass (LEB)</b></p> <p><i>* New Candidate Standard</i></p>  | <p>Percentage of patients aged 18 years and older undergoing infrainguinal lower extremity bypass who are prescribed a statin medication at discharge. This measure is proposed for both hospitals and individual providers.</p>   | <p>Society of Vascular Surgery</p>                  |
| <p><b>1523</b></p> <p><b>In-hospital mortality following elective open repair of small AAAs</b></p> <p><i>* New Candidate Standard</i></p>  | <p>Percentage of asymptomatic patients undergoing open repair of small abdominal aortic aneurysms (AAA) who die while in hospital. This measure is proposed for both hospitals and individual providers.</p>   | <p>Society of Vascular Surgery</p>                  |
| <p><b>1531</b></p> <p><b>Follow-up assessment of stroke or death after carotid revascularization</b></p>  | <p>Proportion of patients with carotid revascularization procedures who had follow-up performed for evaluation of death and neurologic assessment with an NIH Stroke Scale (by an examiner who is certified by the</p>   | <p>American College of Cardiology Foundation</p>    |

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|--|--|--|
| <p><i>* New Candidate Standard</i></p>   | <p>American Stroke Association) after the procedure.</p>   |  |
| <p><b>1533</b><br/> <b>Rate of open AAA repair without major complications (discharged to home no later than post-operative day #7)</b><br/>           (withdrawn by measure developer)</p> <p><i>* New Candidate Standard</i></p> | <p>Percent of patients undergoing open repair of AAA who do not experience a major complication, and are discharge to home no later than post-operative #7.</p>  | <p>Society of Vascular Surgery</p>   |
| <p><b>1534</b><br/> <b>In-hospital mortality following elective EVAR of small AAAs</b></p> <p><i>* New Candidate Standard</i></p>  | <p>Percentage of patients undergoing elective endovascular repair of small asymptomatic abdominal aortic aneurysms (AAA) who die while in hospital. This measure is proposed for both hospitals and individual providers.</p>  | <p>Society of Vascular Surgery</p>   |
| <p><b>1535</b><br/> <b>Rate of EVAR without major complications (discharged to home no later than POD #2)</b><br/>           (withdrawn by measure developer)</p> <p><i>* New Candidate Standard</i></p>                           | <p>Percent of patients undergoing endovascular repair of AAA who do not experience a major complication, and are discharged to home no later than post-operative #2.</p>   | <p>Society of Vascular Surgery</p>   |
| <p><b>1536</b><br/> <b>Cataracts: Improvement in patient's visual function within 90 days following cataract surgery</b></p> <p><i>* New Candidate Standard</i></p>  | <p>Percentage of patients aged 18 years and older who had cataract surgery and had improvement in visual function achieved within 90 days following the cataract surgery.</p>  | <p>American Academy of Ophthalmology and Hoskins Center for Quality Eye Care</p> |
| <p><b>1540</b><br/> <b>Postoperative stroke or death in asymptomatic patients undergoing carotid endarterectomy</b></p>  | <p>Percentage of patients age 18 or older without carotid territory neurologic or retinal symptoms within the one year immediately preceding carotid endarterectomy (CEA) who experience stroke or death following surgery while in the hospital. This measure is proposed for both hospitals and individual surgeons.</p> | <p>Society of Vascular Surgery</p>   |

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| <i>* New Candidate Standard</i>   |  |  |
| <b>1543</b><br><b>Postoperative stroke or death in asymptomatic patients undergoing carotid artery stenting (CAS)</b><br><br><i>* New Candidate Standard</i>  | Percentage of patients 18 years of age or older without carotid territory neurologic or retinal symptoms within 120 days immediately proceeding carotid angioplasty and stent (CAS) placement who experience stroke or death during their hospitalization for this procedure. This measure is proposed for both hospitals and individual interventionalists. | Society of Vascular Surgery                              |
| <b>1544</b><br><b>Rate of carotid endarterectomy for asymptomatic patients, without major complications (discharged to home no later than post-operative day #2)</b><br>(withdrawn by measure developer)<br><br><i>* New Candidate Standard</i> | Percent of asymptomatic patients undergoing CEA who do not experience a major complication, and are discharged to home no later than post-operative day #2.  | Society of Vascular Surgery                              |
| <b>1545</b><br><b>Rate of carotid artery stenting for asymptomatic patients without major complications (discharged to home no later than post-operative day #2)</b><br>(withdrawn by measure developer)<br><br><i>* New Candidate Standard</i> | Percent of asymptomatic patients undergoing CAS who do not experience a major complication, and are discharged to home no later than post-operative day #2   | Society of Vascular Surgery                              |
| <b>1548</b><br><b>Surveillance after endovascular abdominal aortic aneurysm repair (EVAR)</b><br><br><i>* New Candidate Standard</i>  | Percentage of patients 18 years of age or older undergoing endovascular abdominal aortic aneurysm repair who have at least one follow-up imaging study after 3 months and within 15 mos of EVAR placement that documents aneurysm sac diameter and endoleak status. This measure is proposed for individual providers.                                       | Society of Vascular Surgery                              |
| <b>1549</b><br><b>Cataracts: Patient satisfaction within 90 days following cataract</b>   | Percentage of patients aged 18 years and older who had cataract surgery and were satisfied with their care within 90 days following the cataract surgery.  | American Academy of Ophthalmology and Hoskins Center for |

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|--|--|--|
| <p><b>surgery</b><br/>(withdrawn by measure developer)</p> <p><i>* New Candidate Standard</i></p>  |  | Quality Eye Care                         |
| <p><b>1550</b><br/><b>Hospital-level risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and total knee arthroplasty (TKA)</b></p> <p><i>* New Candidate Standard</i></p>                 | <p>This measure estimates hospital risk-standardized complication rates (RSCRs) associated with primary elective THA and TKA in patients 65 years and older. The measure uses Medicare claims data to identify complications occurring from the date of index admission to 90 days post date of the index admission.</p>   | Centers for Medicare & Medicaid Services |
| <p><b>1551</b><br/><b>Hospital-level 30-day all-cause risk-standardized readmission rate (RSRR) following elective primary total hip arthroplasty (THA) and total knee arthroplasty (TKA)</b></p> <p><i>* New Candidate Standard</i></p> | <p>This measure estimates hospital 30-day RSRRs following elective primary THA and TKA in patients 65 years and older. The measure uses Medicare claims data to develop a hospital-level RSRR for THA and TKA and will include patients readmitted for any reason within 30 days of discharge date of the index admission. Some patients are admitted within 30 days of the index hospitalization to undergo another elective THA/TKA procedure. These are considered planned readmissions and are NOT counted in the measure as readmissions.</p>   | Centers for Medicare & Medicaid Services |
| <p><b>1741</b><br/><b>Patient experience with surgical care based on the consumer assessment of healthcare providers and systems (CAHPS)® surgical care survey</b></p> <p><i>* New Candidate Standard</i></p>                            | <p>The following 6 composites and 1 single-item measure are generated from the Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Surgical Care Survey. Each measure is used to assess a particular domain of surgical care quality from the patient’s perspective.</p> <p>Measure 1: Information to help you prepare for surgery (2 items)<br/>           Measure 2: How well surgeon communicates with patients before surgery (4 items)<br/>           Measure 3: Surgeon’s attentiveness on day of surgery (2 items)<br/>           Measure 4: Information to help you recover from surgery (4 items)<br/>           Measure 5: How well surgeon communicates with patients after surgery (4 items)<br/>           Measure 6: Helpful, courteous, and respectful staff at surgeon’s office (2 items)</p> | American College of Surgeons             |

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|-------------------------|--|-----------------|
|                         | <p>Measure 7: Rating of surgeon (1 item)</p> <p>The Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Surgical Care Survey is administered to adult patients (age 18 and over) having had a major surgery as defined by CPT codes (90 day globals) within 3 to 6 months prior to the start of the survey.</p> |                 |

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