

## **CBE ID**

0240

## **Title**

Stroke and Stroke Rehabilitation: Venous Thromboembolism (VTE) Prophylaxis for Ischemic Stroke or Intracranial Hemorrhage

## **Project**

Neurology

## **Endorsement Status**

Endorsement Removed

## **Is Under Review**

No

## **Previous Endorsement Cycle**

Full Year 2015

## **Removal Date**

Mon, 10/26/2015 - 20:00

## **Initial Endorsement**

Mon, 04/30/2007 - 20:00

## **Steward**

American Academy of Neurology

## **1.0 New or Maintenance**

Maintenance

## **1.1 Measure Structure**

Single Measure

## **1.3 Electronic Clinical Quality Measure (eCQM)**

No

## **1.6 Measure Description**

Percentage of patients aged 18 years and older with a diagnosis of ischemic stroke or intracranial hemorrhage who were administered venous thromboembolism (VTE) prophylaxis the day of or the day after hospital admission

## **1.7 Measure Type**

Process

## **1.8 Level of Analysis**

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Clinician: Group/Practice, Clinician: Individual

## 1.9 Care Setting

Inpatient/Hospital

### 1.14 Numerator

Patients who were administrated Deep Vein Thrombosis (DVT) prophylaxis by the end of hospital day two

### 1.15 Denominator

All patients aged 18 years and older with a diagnosis of ischemic stroke or intracranial hemorrhage

## 1.20 Types of Data Sources

Claims Data, Electronic Health Records: Electronic Health Records, Other, Registry data

### 6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

## Exclusions

The PCPI distinguishes between measure exceptions and measure exclusions. Exclusions arise when patients who are included in the initial patient or eligible population for a measure do not meet the denominator criteria specific to the intervention required by the numerator. Exclusions are absolute and apply to all patients and therefore are not part of clinical judgment within a measure. For this measure, exclusions include patients that expired during the inpatient stay. Exclusions, including applicable value sets, are included in the measure specifications.

Exceptions are used to remove patients from the denominator of a performance measure when a patient does not receive a therapy or service AND that therapy or service would not be appropriate due to specific reasons; otherwise, the patient would meet the denominator criteria. Exceptions are not absolute, and the application of exceptions is based on clinical judgment, individual patient characteristics, or patient preferences. The PCPI exception methodology uses three categories of exception reasons for which a patient may be removed from the denominator of an individual measure. These measure exception categories are not uniformly relevant across all measures; for each measure, there must be a clear rationale to permit an exception for a medical, patient, or system reason. Examples are provided in the measure exception language of instances that may constitute an exception and are intended to serve as a guide to clinicians. For this measure, exceptions include medical reason(s) or patient reason(s) for the patient not receiving venous thromboembolism (VTE) prophylaxis the day of or the day after hospital admission. Where examples of exceptions are included in the measure language, value sets for these examples are developed and are included in the eSpecifications. Although this methodology does not require the external reporting of more detailed exception data, the PCPI recommends that physicians document the specific reasons for exception in patients' medical records for purposes of optimal patient management and audit-readiness. The PCPI also advocates the systematic review and analysis of each physician's exceptions data to identify practice patterns

and opportunities for quality improvement.

### **Measure Disclaimer**

See copyright statement above.

### **Planned Use**

Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

### **Risk Adjustment**

No risk adjustment or risk stratification

### **Target Population**

Elderly

### **Steward Organization**

American Academy of Neurology

### **Steward POC email**

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