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**CBE ID**

0372

**Title**

Intensive Care Unit Venous Thromboembolism Prophylaxis

**Project**

Patient Safety

**Endorsement Status**

Endorsement Removed

**Is Under Review**

No

**Previous Endorsement Cycle**

Spring 2018

**Removal Date**

Thu, 05/31/2018 - 20:00

**Initial Endorsement**

Wed, 05/14/2008 - 20:00

**Steward**

The Joint Commission

**1.0 New or Maintenance**

Maintenance

**1.1 Measure Structure**

Single Measure

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

No

**1.6 Measure Description**

This measure assesses the number of patients who received venous thromboembolism (VTE) prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or surgery end date for surgeries that start the day of or the day after ICU admission (or transfer). This measure is part of a set of six prevention and treatment measures that address VTE (VTE-1: VTE Prophylaxis, VTE-3: VTE Patients with Anticoagulation Overlap Therapy, VTE-4: VTE Patients Receiving UFH with Dosages/Platelet Count Monitoring by Protocol, VTE-5: VTE Warfarin Therapy Discharge Instructions and VTE-6: Hospital Acquired Potentially-Preventable VTE).

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## 1.7 Measure Type

Process

## 1.8 Level of Analysis

Facility, Other

## 1.9 Care Setting

Inpatient/Hospital

## 1.14 Numerator

Patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given:

- the day of or the day after ICU admission (or transfer)
- the day of or the day after surgery end date for surgeries that start the day of or the day after ICU admission (or transfer)

## 1.15 Denominator

Patients directly admitted or transferred to ICU

## 1.20 Types of Data Sources

Electronic Health Data, Electronic Health Records: Electronic Health Records, Other, Paper Patient Medical Records

## 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

- Patients less than 18 years of age
- Patients who have a hospital length of stay (LOS) less than two days and greater than 120 days
- Patients with Comfort Measures Only documented on day of or day after hospital arrival
- Patients enrolled in clinical trials related to VTE
- Patients with ICU LOS less than one day without VTE prophylaxis administered and documentation for no VTE prophylaxis
- Patients with ICD-9-CM Principal or Other Diagnosis Code of Obstetrics or VTE as defined in Appendix A, Table 7.02, 7.03, or 7.04
- Patients with ICD-9-CM Principal Procedure Code of Surgical Care Improvement Project (SCIP) VTE selected surgeries as defined in Appendix A, Tables 5.17, 5.19, 5.20, 5.21, 5.22, 5.23, 5.24 that start the day of or the day after ICU admission or transfer.

## 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, Individuals with multiple chronic conditions, Populations at Risk

**Steward Organization**

The Joint Commission

**Steward POC email**

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