

CBE ID

0697

Title

Risk Adjusted Case Mix Adjusted Elderly Surgery Outcomes Measure

Project

Surgery

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Full Year 2015

Removal Date

Tue, 08/16/2022 - 08:56

Initial Endorsement

Sun, 01/16/2011 - 19:00

Steward

American College of Surgeons

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 is a hospital based, risk adjusted, case mix adjusted elderly surgery aggregate clinical outcomes measure of adults 65 years of age and older.

1.7 Measure Type

Outcome

1.8 Level of Analysis

Facility

1.9 Care Setting

Inpatient/Hospital, Outpatient Services

1.14 Numerator

The outcome of interest is hospital-specific risk-adjusted mortality, a return to the operating room, or any of the following morbidities as defined by American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP): Cardiac Arrest requiring CPR, Myocardial Infarction, Sepsis, Septic Shock, Deep Incisional Surgical Site Infection (SSI), Organ/Space SSI, Wound Disruption, Unplanned Reintubation without prior ventilator dependence, Pneumonia without pre-operative pneumonia, progressive Renal Insufficiency or Acute Renal Failure without pre-operative renal failure or dialysis, or urinary tract infection (UTI) within 30 days of any ACS NSQIP listed (CPT) surgical procedure. The original endorsed measure included venous thromboembolism (VTE) as eligible morbidity events, including deep venous thrombosis requiring therapy and pulmonary embolism.

1.15 Denominator

Patients undergoing any ACS NSQIP listed (CPT) surgical procedure who are 65 years of age or older. (See appendix of roughly 2900 ACS NSQIP eligible CPT codes)

1.20 Types of Data Sources

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

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

Exclusions

Cases must first have ACS NSQIP eligible CPT codes on the submitted list of

Risk Adjustment

Statistical risk model

Target Population

Elderly

Steward Organization

American College of Surgeons

Steward POC email

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