

CBE ID

3025

Title

Ambulatory Breast Procedure Surgical Site Infection (SSI) Outcome Measure

Endorsement Status

Endorsed

Is Under Review

No

Next Maintenance Cycle

Fall 2028

Previous Endorsement Cycle

Fall 2022

Initial Endorsement

Thu, 01/26/2017 - 09:56

Steward

Centers for Disease Control and Prevention

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 is for the risk-adjusted Standardized Infection Ratio (SIR) for all Surgical Site Infections (SSI) following breast procedures conducted at ambulatory surgery centers (ASCs) among adult patients (ages 18 - 108 years) and reported to the Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN). The measure compares the reported number of surgical site infections observed at an ASC with a predicted value based on nationally aggregated data. The measure was developed collaboratively by the CDC, the Ambulatory Surgery Center Quality Collaboration (ASC QC), and the Colorado Department of Public Health and Environment. CDC is the measure steward.

1.7 Measure Type

Outcome

1.8 Level of Analysis

Facility

1.14 Numerator

Surgical site infections (SSIs) during the 30-day (superficial SSI) and 90-day (deep and organ/space SSI) postoperative periods following breast procedures in Ambulatory Surgery Centers.

1.15 Denominator

Breast procedures, as specified by the operative codes that comprise the breast procedure category of the NHSN Patient Safety Component Protocol, performed at ambulatory surgery centers.

1.20 Types of Data Sources

Other, Paper Patient Medical Records

6.1.2 Current or Planned Use(s)

Payment Program, Public Health/Disease Surveillance, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

6.1.3 Current Use(s)

Payment Program, Public Health/Disease Surveillance, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Exclusions

Hospital inpatients and hospital outpatient department patients, pediatric patients and very elderly patients, and brain-dead patients whose organs are being removed for donor purposes

Measure Disclaimer

None

Planned Use

Payment Program

Risk Adjustment

Statistical risk model

Target Population

Populations at Risk

The measure developer is different from the measure steward

No

Steward Organization

Centers for Disease Control and Prevention

Steward POC email

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