

V10.2 Special Report: Expanded Set of Perinatal Indicators

APPENDICES

- A. AHRQ Inpatient, Quality and Pediatric Indicators
- B. National Quality Forum Incidence of Episiotomy
- C. NPIC/QAS Indicators
- D. The Joint Commission Perinatal Care Measure PC-04



PSI #18 Obstetric Trauma—Vaginal Delivery with Instrument

Provider-Level Indicator

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM codes for 3rd and 4th degree obstetric trauma in any diagnosis field.

ICD-9-CM Obstetric Trauma diagnosis codes:

66420	DEL W 3 DEG LACERAT-UNSP	66431	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY, FOURTH-DEGREE
66421	DEL W 3 DEG LACERAT-DEL		PERINEAL LACERATION
66424	DEL W 3 DEG LAC-POSTPART		
66430	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY, FOURTH-DEGREE PERINEAL LACERATION	66434	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY, FOURTH-DEGREE PERINEAL LACERATION

Denominator

All vaginal delivery discharges with any procedure code for instrument-assisted delivery.

Vaginal Delivery DRGs:

372	VAGINAL DELIVERY W/ COMPLICATING DIAGNOSES	375	VAGINAL DELIVERY W/ OR PROCEDURE EXCEPT STERILIZATION AND/OR D AND C
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES		
374	VAGINAL DELIVERY W/ STERILIZATION AND/OR D AND C		

Vaginal Delivery MS DRGs:

767	VAGINAL DELIVERY W/ STERILIZATION AND/OR D&C	774	VAGINAL DELIVERY W/ COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W/ OR PROC EXCEPT STERILIZATION AND/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES

ICD-9-CM Instrument-Assisted Delivery procedure codes:

720	LOW FORCEPS OPERATION	724	FORCEPS ROTATION OF FETAL HEAD
721	LOW FORCEPS OPERATION W/ EPISIOTOMY	7251	PARTIAL BREECH EXTRACTION W/ FORCEPS TO AFTERCOMING HEAD
7221	MID FORCEPS OPERATION W/ EPISIOTOMY	7253	TOTAL BREECH EXTRACTION W/ FORCEPS TO AFTERCOMING HEAD
7229	OTHER MID FORCEPS OPERATION	726	FORCEPS APPLICATION TO AFTERCOMING HEAD
7231	HIGH FORCEPS OPERATION W/ EPISIOTOMY	7271	VACUUM EXTRACTION W/ EPISIOTOMY
7239	OTHER HIGH FORCEPS OPERATION	7279	VACUUM EXTRACTION DELIVERY NEC

728 OTHER SPECIFIED INSTRUMENTAL
DELIVERY

729 UNSPECIFIED INSTRUMENTAL
DELIVERY



PSI #19 Obstetric Trauma—Vaginal Delivery without Instrument

Provider-Level Indicator

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM codes for 3rd and 4th degree obstetric trauma in any diagnosis field.

ICD-9-CM Obstetric Trauma diagnosis codes:

66420	DEL W 3 DEG LACERAT-UNSP	66431	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY, FOURTH-DEGREE
66421	DEL W 3 DEG LACERAT-DEL		PERINEAL LACERATION
66424	DEL W 3 DEG LAC-POSTPART		
66430	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY, FOURTH-DEGREE PERINEAL LACERATION	66434	TRAUMA TO PERINEUM AND VULVA DURING DELIVERY, FOURTH-DEGREE PERINEAL LACERATION

Denominator

All vaginal delivery discharge patients.

Vaginal Delivery DRGs:

372	VAGINAL DELIVERY W/ COMPLICATING DIAGNOSES	375	VAGINAL DELIVERY W/ OR PROCEDURE EXCEPT STERILIZATION AND/OR D AND C
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES		
374	VAGINAL DELIVERY W/ STERILIZATION AND/OR D AND C		

Vaginal Delivery MS DRGs:

767	VAGINAL DELIVERY W/ STERILIZATION AND/OR D&C	774	VAGINAL DELIVERY W/ COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W/ OR PROC EXCEPT STERILIZATION AND/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES

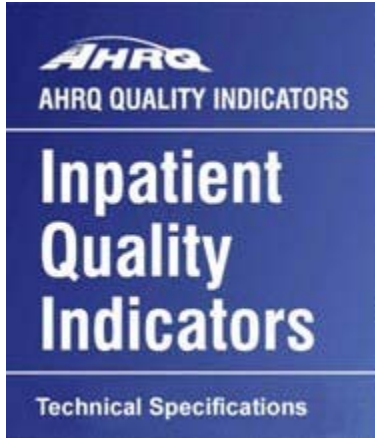
Exclude cases:

- with instrument-assisted delivery.

ICD-9-CM Instrument-Assisted Delivery procedure codes:

720	LOW FORCEPS OPERATION	7231	HIGH FORCEPS OPERATION W/ EPISIOTOMY
721	LOW FORCEPS OPERATION W/ EPISIOTOMY	7239	OTHER HIGH FORCEPS OPERATION
7221	MID FORCEPS OPERATION W/ EPISIOTOMY	724	FORCEPS ROTATION OF FETAL HEAD
7229	OTHER MID FORCEPS OPERATION	7251	PARTIAL BREECH EXTRACTION W/ FORCEPS TO AFTERCOMING HEAD

7253	TOTAL BREECH EXTRACTION W/ FORCEPS TO AFTERCOMING HEAD	7279	VACUUM EXTRACTION DELIVERY NEC
726	FORCEPS APPLICATION TO AFTERCOMING HEAD	728	OTHER SPECIFIED INSTRUMENTAL DELIVERY
7271	VACUUM EXTRACTION W/ EPISIOTOMY	729	UNSPECIFIED INSTRUMENTAL DELIVERY



IQI #21 Cesarean Delivery Rate

Provider-Level Indicator

Procedure Utilization Indicator

Numerator

Number of Cesarean deliveries, identified by DRG, MS-DRG, or by ICD-9-CM procedure codes if they are reported without a hysterotomy procedure, among cases meeting the inclusion and exclusion rules for the denominator.

Cesarean delivery DRGs:

370	CESAREAN SECTION W CC	371	CESAREAN SECTION W/O CC
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Cesarean delivery MS-DRGs:

765	CESAREAN SECTION W CC/MCC	766	CESAREAN SECTION W/O CC/MCC
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ICD-9-CM Cesarean delivery procedure codes:

740	CLASSICAL C-SECTION	744	CESAREAN SECTION NEC
741	LOW CERVICAL C-SECTION	7499	CESAREAN SECTION NOS
742	EXTRAPERITONEAL C-SECT		

Exclude:

ICD-9-CM hysterotomy procedure code:

7491	HYSTEROTOMY TO TERMIN PG
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Denominator

All deliveries.

Delivery DRGs:

370	CESAREAN SECTION W CC	374	VAGINAL DELIVERY W STERILIZATION &/OR D&C
371	CESAREAN SECTION W/O CC	375	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C
372	VAGINAL DELIVERY W COMPLICATING DIAGNOSES		
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES		

Delivery MS-DRGs:

765	CESAREAN SECTION W CC/MCC	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
766	CESAREAN SECTION W/O CC/MCC		
767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C		

Exclude cases:

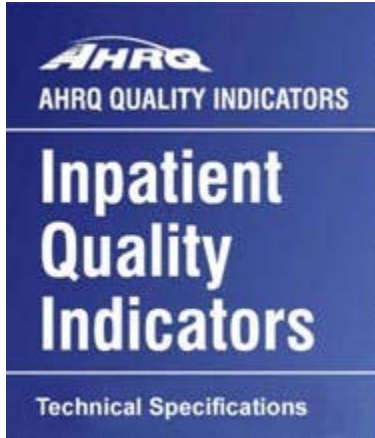
- any diagnosis of abnormal presentation, preterm, fetal death, multiple gestation diagnosis codes
- breech procedure codes

ICD-9-CM abnormal presentation, preterm, fetal death and multiple gestation diagnosis codes:

64420	EARLY ONSET DELIV-UNSPEC	65233	TRANSV/OBLIQ LIE-ANTEPAR
64421	EARLY ONSET DELIVERY-DEL	65240	FACE/BROW PRESENT-UNSPEC
65100	TWIN PREGNANCY-UNSPEC	65241	FACE/BROW PRESENT-DELIV
65101	TWIN PREGNANCY-DELIVERED	65243	FACE/BROW PRES-ANTEPART
65103	TWIN PREGNANCY-ANTEPART	65260	MULT GEST MALPRESEN-UNSP
65110	TRIPLET PREGNANCY-UNSPEC	65261	MULT GEST MALPRES-DELIV
65111	TRIPLET PREGNANCY-DELIV	65263	MULT GES MALPRES-ANTEPAR
65113	TRIPLET PREG-ANTEPARTUM	65640	INTRAUTERINE DEATH-UNSP
65120	QUADRUPLET PREG-UNSPEC	65641	INTRAUTER DEATH-DELIVER
65121	QUADRUPLET PREG-DELIVER	65643	INTRAUTER DEATH-ANTEPART
65123	QUADRUPLET PREG-ANTEPART	66050	LOCKED TWINS-UNSPECIFIED
65130	TWINS W FETAL LOSS-UNSP	66051	LOCKED TWINS-DELIVERED
65131	TWINS W FETAL LOSS-DEL	66053	LOCKED TWINS-ANTEPARTUM
65133	TWINS W FETAL LOSS-ANTE	66230	DELAY DEL 2ND TWIN-UNSP
65140	TRIPLETS W FET LOSS-UNSP	66231	DELAY DEL 2ND TWIN-DELIV
65141	TRIPLETS W FET LOSS-DEL	66233	DELAY DEL 2 TWIN-ANTEPAR
65143	TRIPLETS W FET LOSS-ANTE	66960	BREECH EXTR NOS-UNSPEC
65150	QUADS W FETAL LOSS-UNSP	66961	BREECH EXTR NOS-DELIVER
65151	QUADS W FETAL LOSS-DEL	67810	FETAL CONJOINED TWINS, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE OCT08-
65153	QUADS W FETAL LOSS-ANTE		
65160	MULT GES W FET LOSS-UNSP	67811	FETAL CONJOINED TWINS, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION OCT08-
65161	MULT GES W FET LOSS-DEL		
65163	MULT GES W FET LOSS-ANTE	67813	FETAL CONJOINED TWINS, ANTEPARTUM CONDITION OR COMPLICATIONS OCT08-
65180	MULTI GESTAT NEC-UNSPEC		
65181	MULTI GESTAT NEC-DELIVER	7615	MULT PREGNANCY AFF NB
65183	MULTI GEST NEC-ANTEPART	V271	DELIVER-SINGLE STILLBORN
65190	MULTI GESTAT NOS-UNSPEC	V272	DELIVER-TWINS, BOTH LIVE
65191	MULT GESTATION NOS-DELIV	V273	DEL-TWINS, 1 NB, 1 SB
65193	MULTI GEST NOS-ANTEPART	V274	DELIVER-TWINS, BOTH SB
65220	BREECH PRESENTAT-UNSPEC	V275	DEL-MULT BIRTH, ALL LIVE
65221	BREECH PRESENTAT-DELIVER	V276	DEL-MULT BRTH, SOME LIVE
65223	BREECH PRESENT-ANTEPART	V277	DEL-MULT BIRTH, ALL SB
65230	TRANSV/OBLIQ LIE-UNSPEC		
65231	TRANSVER/OBLIQ LIE-DELIV		

ICD-9-CM breech procedure codes:

7251	PART BRCH EXTRAC W FORCP	7253	TOT BRCH EXTRAC W FORCEP
7252	PART BREECH EXTRACT NEC	7254	TOT BREECH EXTRAC NEC



IQI #22 Vaginal Birth After Cesarean Delivery Rate, Uncomplicated

Provider-Level Indicator
Procedure Utilization Indicator

Numerator

Number of vaginal births in women among cases meeting the inclusion and exclusion rules for the denominator.

Vaginal delivery DRGs:

372	VAGINAL DELIVERY W/ CC	375	VAGINAL DELIVERY W/ OTHER O.R. PROCEDURE
373	VAGINAL DELIVERY W/O CC		
374	VAGINAL DELIVERY W/ STERILIZATION OR D&C		

Vaginal delivery MS-DRGs:

767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES

Denominator

All deliveries with a previous cesarean delivery diagnosis in any diagnosis field.

Delivery DRGs:

370	CESAREAN SECTION W CC	374	VAGINAL DELIVERY W STERILIZATION &/OR D&C
371	CESAREAN SECTION W/O CC		
372	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	375	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES		

Delivery MS-DRGs:

765	CESAREAN SECTION W CC/MCC	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
766	CESAREAN SECTION W/O CC/MCC		
767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C		

ICD-9-CM previous cesarean delivery diagnosis codes:

65420	PREV C-SECT NOS-UNSPEC	65423	PREV C-SECT NOS-ANTEPART
65421	PREV C-SECT NOS-DELIVER		

Exclude cases:

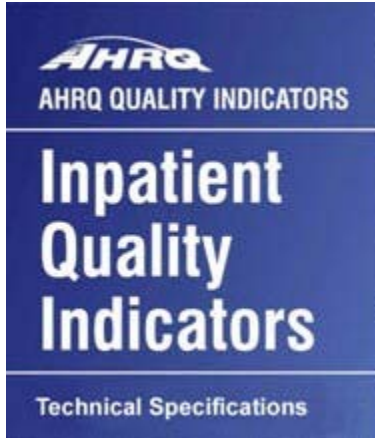
- any diagnosis of abnormal presentation, preterm, fetal death, multiple gestation diagnosis codes
- breech procedure codes

ICD-9-CM abnormal presentation, preterm, fetal death and multiple gestation diagnosis codes:

64420	EARLY ONSET DELIV-UNSPEC	65233	TRANSV/OBLIQ LIE-ANTEPAR
64421	EARLY ONSET DELIVERY-DEL	65240	FACE/BROW PRESENT-UNSPEC
65100	TWIN PREGNANCY-UNSPEC	65241	FACE/BROW PRESENT-DELIV
65101	TWIN PREGNANCY-DELIVERED	65243	FACE/BROW PRES-ANTEPART
65103	TWIN PREGNANCY-ANTEPART	65260	MULT GEST MALPRESEN-UNSP
65110	TRIPLET PREGNANCY-UNSPEC	65261	MULT GEST MALPRES-DELIV
65111	TRIPLET PREGNANCY-DELIV	65263	MULT GES MALPRES-ANTEPAR
65113	TRIPLET PREG-ANTEPARTUM	65640	INTRAUTERINE DEATH-UNSP
65120	QUADRUPLET PREG-UNSPEC	65641	INTRAUTER DEATH-DELIVER
65121	QUADRUPLET PREG-DELIVER	65643	INTRAUTER DEATH-ANTEPART
65123	QUADRUPLET PREG-ANTEPART	66050	LOCKED TWINS-UNSPECIFIED
65130	TWINS W FETAL LOSS-UNSP	66051	LOCKED TWINS-DELIVERED
65131	TWINS W FETAL LOSS-DEL	66053	LOCKED TWINS-ANTEPARTUM
65133	TWINS W FETAL LOSS-ANTE	66230	DELAY DEL 2ND TWIN-UNSP
65140	TRIPLETS W FET LOSS-UNSP	66231	DELAY DEL 2ND TWIN-DELIV
65141	TRIPLETS W FET LOSS-DEL	66233	DELAY DEL 2 TWIN-ANTEPAR
65143	TRIPLETS W FET LOSS-ANTE	66960	BREECH EXTR NOS-UNSPEC
65150	QUADS W FETAL LOSS-UNSP	66961	BREECH EXTR NOS-DELIVER
65151	QUADS W FETAL LOSS-DEL	67810	FETAL CONJOINED TWINS, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE OCT08-
65153	QUADS W FETAL LOSS-ANTE		
65160	MULT GES W FET LOSS-UNSP		
65161	MULT GES W FET LOSS-DEL	67811	FETAL CONJOINED TWINS, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION OCT08-
65163	MULT GES W FET LOSS-ANTE		
65180	MULTI GESTAT NEC-UNSPEC		
65181	MULTI GESTAT NEC-DELIVER	67813	FETAL CONJOINED TWINS, ANTEPARTUM CONDITION OR COMPLICATIONS OCT08-
65183	MULTI GEST NEC-ANTEPART		
65190	MULTI GESTAT NOS-UNSPEC	7615	MULT PREGNANCY AFF NB
65191	MULT GESTATION NOS-DELIV	V271	DELIVER-SINGLE STILLBORN
65193	MULTI GEST NOS-ANTEPART	V272	DELIVER-TWINS, BOTH LIVE
65220	BREECH PRESENTAT-UNSPEC	V273	DEL-TWINS, 1 NB, 1 SB
65221	BREECH PRESENTAT-DELIVER	V274	DELIVER-TWINS, BOTH SB
65223	BREECH PRESENT-ANTEPART	V275	DEL-MULT BIRTH, ALL LIVE
65230	TRANSV/OBLIQ LIE-UNSPEC	V276	DEL-MULT BRTH, SOME LIVE
65231	TRANSVER/OBLIQ LIE-DELIV	V277	DEL-MULT BIRTH, ALL SB

ICD-9-CM breech procedure codes:

7251	PART BRCH EXTRAC W FORCP	7253	TOT BRCH EXTRAC W FORCEP
7252	PART BREECH EXTRACT NEC	7254	TOT BREECH EXTRAC NEC



IQI #33 Primary Cesarean Delivery Rate

Provider-Level Indicator

Procedure Utilization Indicator

Numerator

Number of Cesarean deliveries, identified by DRG, MS-DRG, or by ICD-9-CM procedure codes if they are reported without a hysterotomy procedure, among cases meeting the inclusion and exclusion rules for the denominator.

Cesarean Delivery DRGs:

370 CESAREAN SECTION W CC

371 CESAREAN SECTION W/O CC

Cesarean Delivery MS-DRGs:

765 CESAREAN SECTION W CC/MCC

766 CESAREAN SECTION W/O CC/MCC

ICD-9-CM Cesarean delivery procedure codes:

740 CLASSICAL C-SECTION

744 CESAREAN SECTION NEC

741 LOW CERVICAL C-SECTION

7499 CESAREAN SECTION NOS

742 EXTRAPERITONEAL C-SECT

Exclude:

ICD-9-CM Hysterotomy procedure code:

7491 HYSTEROTOMY TO TERMIN PG

Denominator

All deliveries.

Delivery DRGs:

370 CESAREAN SECTION W CC

374 VAGINAL DELIVERY W STERILIZATION
&/OR D&C

371 CESAREAN SECTION W/O CC

375 VAGINAL DELIVERY W O.R. PROC
EXCEPT STERIL &/OR D&C

372 VAGINAL DELIVERY W COMPLICATING
DIAGNOSES

373 VAGINAL DELIVERY W/O COMPLICATING
DIAGNOSES

Delivery MS-DRGs:

765	CESAREAN SECTION W CC/MCC	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
766	CESAREAN SECTION W/O CC/MCC		
767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C		

Exclude cases:

- any diagnosis of abnormal presentation, preterm, fetal death, multiple gestation diagnosis codes
- any breech procedure codes
- previous Cesarean delivery diagnosis in any diagnosis field

ICD-9-CM Abnormal Presentation, Preterm, Fetal Death and Multiple Gestation diagnosis codes:

64420	EARLY ONSET DELIV-UNSPEC	65233	TRANSV/OBLIQ LIE-ANTEPAR
64421	EARLY ONSET DELIVERY-DEL	65240	FACE/BROW PRESENT-UNSPEC
65100	TWIN PREGNANCY-UNSPEC	65241	FACE/BROW PRESENT-DELIV
65101	TWIN PREGNANCY-DELIVERED	65243	FACE/BROW PRES-ANTEPART
65103	TWIN PREGNANCY-ANTEPART	65260	MULT GEST MALPRESEN-UNSP
65110	TRIPLET PREGNANCY-UNSPEC	65261	MULT GEST MALPRES-DELIV
65111	TRIPLET PREGNANCY-DELIV	65263	MULT GES MALPRES-ANTEPAR
65113	TRIPLET PREG-ANTEPARTUM	65640	INTRAUTERINE DEATH-UNSP
65120	QUADRUPLET PREG-UNSPEC	65641	INTRAUTER DEATH-DELIVER
65121	QUADRUPLET PREG-DELIVER	65643	INTRAUTER DEATH-ANTEPART
65123	QUADRUPLET PREG-ANTEPART	66050	LOCKED TWINS-UNSPECIFIED
65130	TWINS W FETAL LOSS-UNSP	66051	LOCKED TWINS-DELIVERED
65131	TWINS W FETAL LOSS-DEL	66053	LOCKED TWINS-ANTEPARTUM
65133	TWINS W FETAL LOSS-ANTE	66230	DELAY DEL 2ND TWIN-UNSP
65140	TRIPLETS W FET LOSS-UNSP	66231	DELAY DEL 2ND TWIN-DELIV
65141	TRIPLETS W FET LOSS-DEL	66233	DELAY DEL 2 TWIN-ANTEPAR
65143	TRIPLETS W FET LOSS-ANTE	66960	BREECH EXTR NOS-UNSPEC
65150	QUADS W FETAL LOSS-UNSP	66961	BREECH EXTR NOS-DELIVER
65151	QUADS W FETAL LOSS-DEL	67810	FETAL CONJOINED TWINS, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE OCT08-
65153	QUADS W FETAL LOSS-ANTE	67811	FETAL CONJOINED TWINS, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION OCT08-
65160	MULT GES W FET LOSS-UNSP	67813	FETAL CONJOINED TWINS, ANTEPARTUM CONDITION OR COMPLICATIONS OCT08-
65161	MULT GES W FET LOSS-DEL	7615	MULT PREGNANCY AFF NB
65163	MULT GES W FET LOSS-ANTE	V271	DELIVER-SINGLE STILLBORN
65180	MULTI GESTAT NEC-UNSPEC	V272	DELIVER-TWINS, BOTH LIVE
65181	MULTI GESTAT NEC-DELIVER	V273	DEL-TWINS, 1 NB, 1 SB
65183	MULTI GEST NEC-ANTEPART	V274	DELIVER-TWINS, BOTH SB
65190	MULTI GESTAT NOS-UNSPEC	V275	DEL-MULT BIRTH, ALL LIVE
65191	MULT GESTATION NOS-DELIV	V276	DEL-MULT BRTH, SOME LIVE
65193	MULTI GEST NOS-ANTEPART	V277	DEL-MULT BIRTH, ALL SB
65220	BREECH PRESENTAT-UNSPEC		
65221	BREECH PRESENTAT-DELIVER		
65223	BREECH PRESENT-ANTEPART		
65230	TRANSV/OBLIQ LIE-UNSPEC		
65231	TRANSVER/OBLIQ LIE-DELIV		

ICD-9-CM Breech procedure codes:

7251	PART BRCH EXTRAC W FORCP	7253	TOT BRCH EXTRAC W FORCEP
7252	PART BREECH EXTRACT NEC	7254	TOT BREECH EXTRAC NEC

ICD-9-CM Previous Cesarean Delivery diagnosis codes:

65420	PREV C-SECT NOS-UNSPEC	65423	PREV C-SECT NOS-ANTEPART
65421	PREV C-SECT NOS-DELIVER		



IQI #34 Vaginal Birth After Cesarean Delivery Rate, All

Provider-Level Indicator

Procedure Utilization Indicator

Numerator

Number of vaginal births in women among cases meeting the inclusion and exclusion rules for the denominator.

Vaginal Delivery DRGs:

372	VAGINAL DELIVERY W/ CC	375	VAGINAL DELIVERY W/ OTHER O.R. PROCEDURE
373	VAGINAL DELIVERY W/O CC		
374	VAGINAL DELIVERY W/ STERILIZATION OR D&C		

Vaginal Delivery MS-DRGs:

767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES

Denominator

All deliveries with a previous cesarean delivery diagnosis in any diagnosis field.

Delivery DRGs:

370	CESAREAN SECTION W CC	374	VAGINAL DELIVERY W STERILIZATION &/OR D&C
371	CESAREAN SECTION W/O CC		
372	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	375	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES		

Delivery MS-DRGs:

765	CESAREAN SECTION W CC/MCC	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
766	CESAREAN SECTION W/O CC/MCC		
767	VAGINAL DELIVERY W STERILIZATION &/OR D&C	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES
768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C		

ICD-9-CM Previous Cesarean Delivery diagnosis codes:

65420 PREV C-SECT NOS-UNSPEC
65421 PREV C-SECT NOS-DELIVER

65423 PREV C-SECT NOS-ANTEPART



PSI #17 Birth Trauma—Injury to Neonate

Provider-Level Indicator

NOTE: This indicator is calculated by the PDI SAS module because it is based on pediatric discharges.

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM codes for birth trauma in any diagnosis field.

ICD-9-CM Birth Trauma diagnosis codes:

7670	SUBDURAL AND CEREBRAL HEMORRHAGE (DUE TO TRAUMA OR TO INTRAPARTUM ANOXIA OR HYPOXIA)	7674	INJURY TO SPINE AND SPINAL CORD
76711	EPICRANIAL SUBAPONEUROTIC HEMORRHAGE (MASSIVE) OCT03-	7675	FACIAL NERVE INJ-BIRTH
7673	INJURIES TO SKELETON (EXCLUDES CLAVICLE)	7677	OTHER CRANIAL AND PERIPHERAL NERVE INJURIES
		7678	OTHER SPECIFIED BIRTH TRAUMA

Exclude:

- preterm infants with a birth weight less than 2,000 grams.
- infants with any diagnosis code of injury to brachial plexus
- infants with any diagnosis code of osteogenesis imperfecta

ICD-9-CM Preterm Infant with Birth Weight Less Than 2000 grams diagnosis codes:

76500	EXTREME IMMATURETY WTNOS	76511	OTHER PRETERM INFANTS, LESS THAN 500 GRAMS
76501	EXTREME IMMATURETY, LESS THAN 500 GRAMS	76512	OTHER PRETERM INFANTS, 500 – 749 GRAMS
76502	EXTREME IMMATURETY, 500 – 749 GRAMS	76513	OTHER PRETERM INFANTS, 750 – 999 GRAMS
76503	EXTREME IMMATURETY, 750 – 999 GRAMS	76514	OTHER PRETERM INFANTS, 1000 – 1249 GRAMS
76504	EXTREME IMMATURETY, 1000 – 1249 GRAMS	76515	OTHER PRETERM INFANTS, 1250 – 1499 GRAMS
76505	EXTREME IMMATURETY, 1250 – 1499 GRAMS	76516	OTHER PRETERM INFANTS, 1500 – 1749 GRAMS
76506	EXTREME IMMATURETY, 1500 – 1749 GRAMS	76517	OTHER PRETERM INFANTS, 1750 – 1999 GRAMS
76507	EXTREME IMMATURETY, 1750 – 1999 GRAMS		

ICD-9-CM Injury to Brachial Plexus diagnosis code:

7676	BRACH PLEXUS INJ-BIRTH
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ICD-9-CM Osteogenesis Imperfecta diagnosis code:

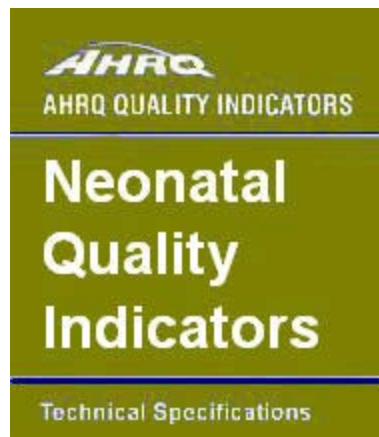
75651 OSTEogenesis IMPERFECTA

Denominator

All newborns

See *Pediatric Quality Indicators Appendices*:

- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn



NQI #1 Iatrogenic Pneumothorax in Neonates

Provider-Level Indicator

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM code for iatrogenic pneumothorax in any secondary diagnosis field.

ICD-9-CM Iatrogenic Pneumothorax diagnosis code:

5121 IATROGENIC PNEUMOTHORAX

Denominator

All surgical and medical discharges of neonates defined by specific DRGs or MS-DRGs.

See *Pediatric Quality Indicators Appendices*:

- Appendix B – Surgical Discharge DRGs
- Appendix C – Surgical Discharge MS-DRGs
- Appendix D – Medical Discharge DRGs
- Appendix E – Medical Discharge MS-DRGs
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn
- Appendix L – Low Birth Weight Categories

Include cases:

- neonates with birth weight less than 2500 grams

Exclude cases:

- neonates with birth weight less than 500 grams (Birth Weight Category 1)
- with ICD-9-CM code for iatrogenic pneumothorax in the principal diagnosis field
- with any diagnosis code of chest trauma or pleural effusion
- with an ICD-9-CM code of thoracic surgery, lung or pleural biopsy diaphragmatic surgery repair , OR cardiac surgery
- normal newborn
- MDC 14 (pregnancy, childbirth, and puerperium)

ICD-9-CM Chest Trauma diagnosis codes:

80700 FRACTURE RIB NOS-CLOSED

80701 FRACTURE ONE RIB-CLOSED

80702	FRACTURE TWO RIBS-CLOSED	86221	BRONCHUS INJURY-CLOSED
80703	FRACTURE THREE RIBS-CLOS	86222	ESOPHAGUS INJURY-CLOSED
80704	FRACTURE FOUR RIBS-CLOSE	86229	INTRATHORACIC INJ NEC-CL
80705	FRACTURE FIVE RIBS-CLOSE	86231	BRONCHUS INJURY-OPEN
80706	FRACTURE SIX RIBS-CLOSED	86232	ESOPHAGUS INJURY-OPEN
80707	FRACTURE SEVEN RIBS-CLOS	86239	INTRATHORACIC INJ NEC-OPEN
80708	FX EIGHT/MORE RIB-CLOSED	8628	INTRATHORACIC INJ NOS-CL
80709	FX MULT RIBS NOS-CLOSED	8629	INTRATHORACIC INJ NOS-OPEN
80710	FRACTURE RIB NOS-OPEN	8750	OPEN WOUND OF CHEST
80711	FRACTURE ONE RIB-OPEN	8751	OPEN WOUND CHEST-COMPL
80712	FRACTURE TWO RIBS-OPEN	8760	OPEN WOUND OF BACK
80713	FRACTURE THREE RIBS-OPEN	8761	OPEN WOUND BACK-COMPL
80714	FRACTURE FOUR RIBS-OPEN	9010	INJURY THORACIC AORTA
80715	FRACTURE FIVE RIBS-OPEN	9011	INJ INNOMIN/SUBCLAV ART
80716	FRACTURE SIX RIBS-OPEN	9012	INJ SUPERIOR VENA CAVA
80717	FRACTURE SEVEN RIBS-OPEN	9013	INJ INNOMIN/SUBCLAV VEIN
80718	FX EIGHT/MORE RIBS-OPEN	90140	INJ PULMONARY VESSEL NOS
80719	FX MULT RIBS NOS-OPEN	90141	INJURY PULMONARY ARTERY
8072	FRACTURE OF STERNUM-CLOS	90142	INJURY PULMONARY VEIN
8073	FRACTURE OF STERNUM-OPEN	90181	INJ INTERCOSTAL ART/VEIN
8074	FLAIL CHEST	90182	INJ INT MAMMARY ART/VEIN
8075	FX LARYNX/TRACHEA-CLOSED	90183	INJ MULT THORACIC VESSEL
8076	FX LARYNX/TRACHEA-OPEN	90189	INJ THORACIC VESSEL NEC
8090	FRACTURE TRUNK BONE-CLOS	9019	INJ THORACIC VESSEL NOS
8091	FRACTURE TRUNK BONE-OPEN	9110	ABRASION TRUNK
8600	TRAUM PNEUMOTHORAX-CLOSE	9111	ABRASION TRUNK-INFECTED
8601	TRAUM PNEUMOTHORAX-OPEN	9118	SUPERFIC INJU TRUNK NEC
8602	TRAUM HEMOTHORAX-CLOSED	9119	SUPERFIC INJU TRUNK NEC-INF
8603	TRAUM HEMOTHORAX-OPEN	9220	CONTUSION OF BREAST
8604	TRAUM PNEUMOHEMOTHOR-CL	9221	CONTUSION OF CHEST WALL
8605	TRAUM PNEUMOHEMOTHOR-OPN	9223	BACK CONTUSION
86100	HEART INJURY NOS-CLOSED	92231	BACK CONTUSION
86101	HEART CONTUSION-CLOSED	92233	INTERSCPLR REG CONTUSION
86102	HEART LACERATION-CLOSED	9228	MULIPLE CONTUSION TRUNK
86103	HEART CHAMBER LACERAT-CL	9229	CONTUSION OF TRUNK
86110	HEART INJURY NOS-OPEN	92611	CRUSHING INJURY BACK
86111	HEART CONTUSION-OPEN	92619	CRUSHING INJ TRUNK NEC
86112	HEART LACERATION-OPEN	9268	MULT CRUSHING INJ TRUNK
86113	HEART CHAMBER LACER-OPN	9269	CRUSHING INJ TRUNK NOS
86120	LUNG INJURY NOS-CLOSED	9290	CRUSH INJ MULT SITE NEC
86121	LUNG CONTUSION-CLOSED	9299	CRUSHING INJURY NOS
86122	LUNG LACERATION-CLOSED	9541	INJ SYMPA NERVE NEC
86130	LUNG INJURY NOS-OPEN	9548	INJURY TRUNK NERVE NEC
86131	LUNG CONTUSION-OPEN	9549	INJURY TRUNK NERVE NOS
86132	LUNG LACERATION-OPEN	95911	INJURY OF CHEST WALL NEC
8620	DIAPHRAGM INJURY-CLOSED	95919	TRUNK INJURY-SITES NEC
8621	DIAPHRAGM INJURY-OPEN	9599	INJURY-SITE NOS

ICD-9-CM Pleural Effusion diagnosis codes:

0101	TUBERCULOUS PLEURISY IN PRIMARY PROGRESSIVE TUBERCULOSIS	01014	TPIPPT, TUBERCLE BACILI NOT FOUND BY MICROSCOPY BUT BY BACTERIAL CULTURE
01010	TUBERCULOUS PLEURISY IN PRIMARY PROGRESSIVE TUBERCULOSIS, UNSPECIFIED	01015	TPIPPT, TUBERCLE BACILI NOT FOUND BY BACTERIOLOGICAL BUT CONFIRMED HISTOLOGICALLY
01011	TPIPPT, BACTERIAL OR HISTOLOGICAL EXAM NOT DONE	01016	TPIPPT, TUBERCLE BACILI NOT FOUND BY BACTERIOLOGICAL OR HISTOLOGICAL BUT CONFIRMED OTHER METHODS
01012	TPIPPT, BACTERIAL OR HISTOLOGICAL EXAM UNKNOWN	0117	TUBRCULOUS PNEUMOTHORAX
01013	TPIPPT, TUBERCLE BACILI FOUND BY MICROSCOPY		

01170	TUBERCULOUS PNEUMOTHORAX, UNSPECIFIED	01203	TP, TUBERCLE BACILI FOUND BY MICROSCOPY
01171	TPNEU, BACTERIAL OR HISTOLOGICAL EXAM NOT DONE	01204	TP, TUBERCLE BACILI NOT FOUND BY MICROSCOPY BUT BY BACTERIAL CULTURE
01172	TPNEU, BACTERIAL OR HISTOLOGICAL EXAM UNKNOWN	01205	TP, TUBERCLE BACILI NOT FOUND BY BACTERIOLOGICAL BUT CONFIRMED HISTOLOGICALLY
01173	TPNEU, TUBERCLE BACILI FOUND BY MICROSCOPY	01206	TP, TUBERCLE BACILI NOT FOUND BY BACTERIOLOGICAL OR HISTOLOGICAL BUT CONFIRMED OTHER METHODS
01174	TPNEU, TUBERCLE BACILI NOT FOUND BY MICROSCOPY BUT BY BACTERIAL CULTURE	1972	SECOND MALIG NEO PLEURA
01175	TPNEU, TUBERCLE BACILI NOT FOUND BY BACTERIOLOGICAL BUT CONFIRMED HISTOLOGICALLY	5111	WITH EFUSION, WITH MENTION OF A BACTERIAL CAUSE OTHER THAN TUBERCULOSIS
01176	TPNEU, TUBERCLE BACILI NOT FOUND BY BACTERIOLOGICAL OR HISTOLOGICAL BUT CONFIRMED OTHER METHODS	5118	OTHER SPECIFIED FORM OF EFFUSION, EXCEPT TUBERCULOUS
0120	TUBERCULOUS PLEURISY	51181	MALIGNANT PLEURAL EFFUSION
01200	TUBERCULOUS PLEURISY, UNSPECIFIED	51189	OTHER SPECIFIED FORMS OF EFFUSION, EXCEPT TUBERCULOSIS
01201	TP, BACTERIAL OR HISTOLOGICAL EXAM NOT DONE	5119	UNSPECIFIED PLEURAL EFFUSION
01202	TP, BACTERIAL OR HISTOLOGICAL EXAM UNKNOWN		

ICD-9-CM Thoracic Surgery procedure codes:

0522	SYMPATHECTOMY CERVICAL	3229	OTHER LOCAL EXCISION OR DESTRUCTION OF LESION OR TISSUE OF LUNG
0523	SYMPATHECTOMY LUMBAR	323	SEGMENTAL RESECTION OF LUNG
0529	OTHER SYMPATHECTOMY AND GANGLIONECTOMY	3230	THORAC SEG LUNG RESECT
0780	THYMECTOMY, NOT OTHERWISE SPECIFIED	3239	OTH SEG LUNG RESECT NOS
0781	OTHER PARTIAL EXCISION OF THYMUS	324	LOBECTOMY OF LUNG
0782	OTHER TOTAL EXCISION OF THYMUS	3241	THORAC LOBECTOMY LUNG
0783	THORACOSCOPIC PARTIAL EXCISION OF THYMUS	3249	OTHER LOBECTOMY OF LUNG
0784	THORACOSCOPIC TOTAL EXCISION OF THYMUS	325	COMPLETE PNEUMONECTOMY
3121	MEDIASTINAL TRACHEOSTOMY	3250	THORACOSPC PNEUMONECTOMY
3145	OPEN BIOPSY OF LARYNX OR TRACHEA	3259	OTHER PNEUMONECTOMY NOS
3173	CLOSURE OF OTHER FISTULA OF TRACHEA	326	RADICAL DISSECTION OF THORACIC STRUCTURES
3179	OTHER REPAIR AND PLASTIC OPERATIONS ON TRACHEA	329	OTHER EXCISION OF LUNG
3199	OTHER OPERATIONS ON TRACHEA	330	INCISION OF BRONCHUS
3209	OTHER LOCAL EXCISION OR DESTRUCTION OF LESION OR TISSUE OF BRONCHUS	331	INCISION OF LUNG
321	OTHER EXCISION OF BRONCHUS	3320	THORACOSCOPC LUNG BIOPSY
3220	THORAC EXC LUNG LESION	3325	OPEN BIOPSY OF BRONCHUS
<u>Local excision or destruction of lesion or tissue of lung</u>		3326	CLOSE [PERCUTANEOUS][NEEDLE] BIOPSY OF LUNG
3221	PLICATION OF EMPHYSEMATIOUS BLEB	3327	CLOSED ENDOSCOPIC BIOPSY OF LUNG
3222	LUNG VOLUME REDUCTION SURGERY	3328	OPEN BIOPSY OF LUNG
3223	OPEN ABLTN LUNG LES/TISS OCT06-	3331	DESTRUCTION OF PHRENIC NERVE FOR COLLAPSE OF LUNG (NO LONGER PERFORMED)
3224	PERC ABLTN LUNG LES/TISS OCT06-	3332	ARTIFICIAL PNEUMOTHORAX FOR COLLAPSE OF LUNG
3225	THOR ABLTN LUNG LES/TISS OCT06-	3334	THORACOPLASTY
3226	ABLTN LUNG TISS NEC/NOS OCT06-	3339	OTHER SURGICAL COLLAPSE OF LUNG
3228	ENDOSCOPIC EXCISION OR DESTRUCTION OF LESION OR TISSUE OF LUNG	<u>Repair and plastic operation on lung and bronchus</u>	
		3341	SUTURE OF LACERATION OF BRONCHUS

3342	CLOSURE OF BRONCHIAL FISTULA	3481	EXCISION OF LESION OR TISSUE OF DIAPHRAGM
3343	CLOSURE OF LACERATION OF LUNG	3482	SUTURE OF LACERATION OF DIAPHRAGM
3348	OTHER REPAIR AND PLASTIC OPERATIONS ON BRONCHUS	3483	CLOSURE OF FISTULA OF DIAPHRAGM
3349	OTHER REPAIR AND PLASTIC OPERATIONS ON LUNG	3484	OTHER REPAIR OF DIAPHRAGM
<hr/>		3485	IMPLANTATION OF DIAPHRAGMATIC PACEMAKER
<u>Lung transplant</u>		3489	OTHER OPERATIONS ON DIAPHRAGM
335	LUNG TRANSPLANTATION	3493	REPAIR OF PLEURA
3350	LUNG TRANSPLANTATION, NOS	3499	OTHER OPERATIONS ON THORAX, OTHER
3351	UNILATERAL LUNG TRANSPLANTATION	<hr/>	
3352	BILATERAL LUNG TRANSPLANTATION	<u>Operations on thoracic duct</u>	
336	COMBINED HEART-LUNG TRANSPLANTATION	4061	CANNULATION OF THORACIC DUCT
3392	LIGATION OF BRONCHUS	4062	FISTULIZATION OF THORACIC DUCT
3393	PUNCTURE OF LUNG	4063	CLOSURE OF FISTULA OF THORACIC DUCT
3398	OTHER OPERATIONS ON BRONCHUS	4064	LIGATION OF THORACIC DUCT
3399	OTHER OPERATIONS ON LUNG	4069	OTHER OPERATIONS ON THORACIC DUCT
3329	OTHER DIAGNOSTIC PROCEDURE ON LUNG AND BRONCHUS	<hr/>	
3333	PNEUMOPERITONEUM FOR COLLAPSE OF LUNG	<u>Esophagotomy</u>	
3401	INCISION OF CHEST WALL	4201	INCISION OF ESOPHAGEAL WEB
3402	EXPLORATORY THORACOTOMY	4209	OTHER INCISION OF ESOPHAGUS
3403	REOPENING OF RECENT THORACOTOMY SITE	4210	ESOPHAGOSTOMY, NOS
3405	CREATION OF PLEUROPERITONEAL SHUNT	4211	CERVICAL ESOPHAGOSTOMY
3409	OTHER INCISION OF PLEURA	4212	EXTERIORIZATION OF ESOPHAGEAL POUCH
341	INCISION OF MEDIASTINUM	4219	OTHER EXTERNAL FISTULIZATION OF ESOPHAGUS
<hr/>		4221	OPERATIVE ESOPHAGOSCOPY BY INCISION
<u>Diagnostic procedures on chest wall, pleura, mediastinum, and diaphragm</u>		4225	OPEN BIOPSY OF ESOPHAGUS
3420	THORACOSCOPIC PLEURAL BX	4231	LOCAL EXCISION OF ESOPHAGEAL DIVERTICULUM
3421	TRANSPLEURAL THORACOSCOPY	4232	LOCAL EXCISION OF OTHER LESION OR TISSUE OF ESOPHAGUS
3422	MEDIASTINOSCOPY	<hr/>	
3423	BIOPSY OF CHEST WALL	<u>Excision of esophagus</u>	
3424	PLEURAL BIOPSY	4239	OTHER DESTRUCTION OF LESION OR TISSUE OF ESOPHAGUS
3425	CLOSED [PERCUTANEOUS][NEEDLE] BIOPSY OF MEDIASTINUM	4240	ESOPHAGECTOMY, NOS
3426	OPEN BIOPSY OF MEDIASTINUM	4241	PARTIAL ESOPHAGECTOMY
3427	BIOPSY OF DIAPHRAGM	4242	TOTAL ESOPHAGECTOMY
3428	OTHER DIAGNOSTIC PROCEDURES ON CHEST WALL, PLEURA, AND DIAPHRAGM	<hr/>	
3429	OTHER DIAGNOSTIC PROCEDURES ON MEDIASTINUM	<u>Intrathoracic anastomosis of exophagus</u>	
343	EXCISION OR DESTRUCTION OF LESION OR TISSUE OF MEDIASTINUM	4251	INTRATHORACIC ESOPHAGUESOPHAGOSTOMY
344	EXCISION OR DESTRUCTION OF LESION OF CHEST WALL	4252	INTRATHORACIC ESOPHAGOGASTROSTOMY
3451	DECORTICATION OF LUNG	4253	INTRATHORACIC ESOPHAGEAL ANASTOMOSIS W/ INTERPOSITION OF SMALL BOWEL
3452	THORACOSCOPIC DECORT LUNG	4254	OTHER INTRATHORACIC ESOPHAGOENTEROSTOMY
3459	OTHER EXCISION OF PLEURA	4255	INTRATHORACIC ESOPHAGEAL ANASTOMOSIS W/ INTERPOSITION OF COLON
<hr/>		4256	OTHER INTRATHORACIC ESOPHAGOCOLOSTOMY
<u>Repair of chest wall</u>		4258	INTRATHORACIC ESOPHAGEAL ANASTOMOSIS W/ OTHER INTERPOSITION
3471	SUTURE OF LACERATION OF CHEST WALL	4259	OTHER INTRATHORACIC ANASTOMOSIS OF ESOPHAGUS
3472	CLOSURE OF THORACOSTOMY		
3473	CLOSURE OF OTHER FISTULA OF THORAX		
3474	REPAIR OF PECTUS DEFORMITY		
3479	OTHER REPAIR OF CHEST WALL		
<hr/>			
<u>Operations on diaphragm</u>			

<u>Antesternal anastomosis</u>		4281	INSERTION OF PERMANENT TUBE INTO ESOPHAGUS
4261	ANTESTERNAL ESOPHAGOESOPHAGOSTOMY	4282	SUTURE OF LACERATION OF ESOPHAGUS
4262	ANTESTERNAL ESOPHAGOGASTROSTOMY	4283	CLOSURE OF ESOPHAGOSTOMY
4263	ANTESTERNAL ESOPHAGEAL ANASTOMOSIS W/ INTERPOSITION OF SMALL BOWEL	4284	REPAIR OF ESOPHAGEAL FISTULA, NEC
4264	OTHER ANTESTERNAL ESOPHAGOENTEROSTOMY	4285	REPAIR OF ESOPHAGEAL STRICTURE
4265	ANTESTERNAL ESOPHAGEAL ANASTOMOSIS W/ INTERPOSITION OF COLON	4286	PRODUCTION OF SUBCUTANEOUS TUNNEL W/O ESOPHAGEAL ANASTOMOSIS
4266	OTHER ANTESTERNAL ESOPHAGOCOLOSTOMY	4287	OTHER GRAFT OF ESOPHAGUS
4268	OTHER ANTESTERNAL ESOPHAGEAL ANASTOMOSIS W/ INTERPOSITION	4289	OTHER REPAIR OF ESOPHAGUS
4269	OTHER ANTESTERNAL ANASTOMOSIS OF ESOPHAGUS	4465	ESOPHAGOGASTROPLASTY
<u>Other repair of esophagus</u>		4466	OTHER PROCEDURES FOR CREATION OF ESOPHAGOGASTRIC SPHINCTERIC COMPETENCE
427	ESOPHAGOMYOTOMY	8104	DORSAL AND DORSO-LUMBAR FUSION, ANTERIOR TECHNIQUE
		8134	REFUSION OF DORSAL AND DORSOLUMBAR SPINE, ANTERIOR TECHNIQUE

ICD-9-CM Lung or Pleural Biopsy procedure codes:

3326	CLOSED [PERCUTANEOUS] [NEEDLE] BIOPSY OF LUNG	3328	OPEN BIOPSY OF LUNG
		3424	PLEURAL BIOPSY

ICD9-CM Diaphragmatic Surgery Repair codes:

537	ABD REPAIR-DIAPHR HERNIA	5380	THOR REP-DIAPH HERN NOS
5371	LAPAROSCOPIC REPAIR OF DIAPHRAGMATIC HERNIA, ABDOMINAL APPROACH OCT08-	5381	DIAPHRAGMATIC PPLICATION
5372	OTHER AND OPEN REPAIR OF DIAPHRAGMATIC HERNIA, ABDOMINAL APPROACH OCT08-	5382	PARASTERN HERNIA REPAIR
5375	REPAIR OF DIAPHRAGMATIC HERNIA, ABDOMINAL APPROACH, NOS OCT08-	5583	LAPAROSCOPIC REPAIR OF DIAPHRAGMATIC HERNIA, WITH THORACIC APPROACH OCT08-
		5584	OTHER AND OPEN REPAIR OF DIAPHRAGMATIC HERNIA, WITH THORACIC APPROACH OCT08-

ICD9-CM Cardiac Procedure codes:

3510	OPEN HEART VALVULOPLASTY WITHOUT REPLACEMENT, UNSPECIFIED VALVE	3522	OTHER REPLACEMENT OF AORTIC VALVE
3511	OPEN HEART VALVULOPLASTY OF AORTIC VALVE WITHOUT REPLACEMENT	3523	REPLACEMENT OF MITRAL VALVE WITH TISSUE GRAFT
3512	OPEN HEART VALVULOPLASTY OF MITRAL VALVE WITHOUT REPLACEMENT	3524	OTHER REPLACEMENT OF MITRAL VALVE
3513	OPEN HEART VALVULOPLASTY OF PULMONARY VALVE WITHOUT REPLACEMENT	3525	REPLACEMENT OF PULMONARY VALVE WITH TISSUE GRAFT
3514	OPEN HEART VALVULOPLASTY OF TRICUSPID VALVE WITHOUT REPLACEMENT	3526	OTHER REPLACEMENT OF PULMONARY VALVE
3520	REPLACEMENT OF UNSPECIFIED HEART VALVE	3527	REPLACEMENT OF TRICUSPID VALVE WITH TISSUE GRAFT
3521	REPLACEMENT OF AORTIC VALVE WITH TISSUE GRAFT	3528	OTHER REPLACEMENT OF TRICUSPID VALVE
		3531	OPERATIONS ON PAPILLARY MUSCLE
		3532	OPERATIONS ON CHORDAE TENDINEAE
		3533	ANNULOPLASTY
		3534	INFUNDIBULECTOMY
		3535	OPERATIONS ON TRABECULAE CARNEAE CORDIS

3539	OPERATIONS ON OTHER STRUCTURES ADJACENT TO VALVES OF HEART	3613	(AORTO)CORONARY BYPASS OF THREE CORONARY ARTERIES
3550	REPAIR OF UNSPECIFIED SEPTAL DEFECT OF HEART WITH PROSTHESIS	3614	(AORTO)CORONARY BYPASS OF FOUR OR MORE CORONARY ARTERIES
3551	REPAIR OF ATRIAL SEPTAL DEFECT WITH PROSTHESIS, OPEN TECHNIQUE	3615	SINGLE INTERNAL MAMMARY-CORONARY ARTERY BYPASS
3553	REPAIR OF VENTRICULAR SEPTAL DEFECT WITH PROSTHESIS, OPEN TECHNIQUE	3616	DOUBLE INTERNAL MAMMARY-CORONARY ARTERY BYPASS
3554	REPAIR OF ENDOCARDIAL CUSHION DEFECT WITH PROSTHESIS	3617	ABDOMINAL -CORONARY ARTERY BYPASS
3560	REPAIR OF UNSPECIFIED SEPTAL DEFECT OF HEART WITH TISSUE GRAFT	3619	OTHER BYPASS ANASTOMOSIS FOR HEART REVASCULARIZATION
3561	REPAIR OF ATRIAL SEPTAL DEFECT WITH TISSUE GRAFT	362	HEART REVASCULARIZATION BY ARTERIAL IMPLANT
3562	REPAIR OF VENTRICULAR SEPTAL DEFECT WITH TISSUE GRAFT	3631	OPEN CHEST TRANSMYOCARDIAL REVASCULARIZATION
3563	REPAIR OF ENDOCARDIAL CUSHION DEFECT WITH TISSUE GRAFT	3632	OTHER TRANSMYOCARDIAL REVASCULARIZATION
3570	OTHER AND UNSPECIFIED REPAIR OF UNSPECIFIED SEPTAL DEFECT OF HEART	3639	OTHER HEART REVASCULARIZATION
3571	OTHER AND UNSPECIFIED REPAIR OF ATRIAL SEPTAL DEFECT	3691	REPAIR OF ANEURYSM OF CORONARY VESSEL
3572	OTHER AND UNSPECIFIED REPAIR OF VENTRICULAR SEPTAL DEFECT	3699	OTHER OPERATIONS ON VESSELS OF HEART
3573	OTHER AND UNSPECIFIED REPAIR OF ENDOCARDIAL CUSHION DEFECT	370	PERICARDIOCENTESIS
3581	TOTAL REPAIR OF TETRALOGY OF FALLOT	3710	INCISION OF HEART, NOT OTHERWISE SPECIFIED
3582	TOTAL REPAIR OF TOTAL ANOMALOUS PULMONARY VENOUS CONNECTION	3711	CARDIOTOMY
3583	TOTAL REPAIR OF TRUNCUS ARTERIOSUS	3712	PERICARDIOTOMY
3584	TOTAL CORRECTION OF TRANSPOSITION OF GREAT VESSELS, NOT ELSEWHERE CLASSIFIED	3731	PERICARDIECTOMY
3591	INTERATRIAL TRANSPOSITION OF VENOUS RETURN	3732	EXCISION OF ANEURYSM OF HEART
3592	CREATION OF CONDUIT BETWEEN RIGHT VENTRICLE AND PULMONARY ARTERY	3733	EXCISION OR DESTRUCTION OF OTHER LESION OR TISSUE OF HEART, OPEN APPROACH
3593	CREATION OF CONDUIT BETWEEN LEFT VENTRICLE AND AORTA	3735	PARTIAL VENTRICULECTOMY
3594	CREATION OF CONDUIT BETWEEN ATRIUM AND PULMONARY ARTERY	3736	EXCISION OR DESTRUCTION OF LEFT ATRIAL APPENDAGE (LAA) OCT08-
3595	REVISION OF CORRECTIVE PROCEDURE ON HEART	3741	IMPLANTATION OF PROSTHETIC CARDIAC SUPPORT DEVICE AROUND THE HEART
3598	OTHER OPERATIONS ON SEPTA OF HEART	3749	OTHER REPAIR OF HEART AND PERICARDIUM
3599	OTHER OPERATIONS ON VALVES OF HEART	3751	HEART TRANSPLANTATION
3603	OPEN CHEST CORONARY ARTERY ANGIOPLASTY	3752	IMPLANTATION OF TOTAL REPLACEMENT HEART SYSTEM
3610	AORTOCORONARY BYPASS FOR HEART REVASCULARIZATION, NOT OTHERWISE SPECIFIED	3753	REPLACEMENT OF REPAIR OF THORACIC UNIT OF TOTAL REPLACEMENT HEART SYSTEM
3611	(AORTO)CORONARY BYPASS OF ONE CORONARY ARTERY	3754	REPLACEMENT OR REPAIR OF OTHER IMPLANTABLE COMPONENT OF TOTAL REPLACEMENT HEART SYSTEM
3612	(AORTO)CORONARY BYPASS OF TWO CORONARY ARTERIES	3755	REMOVAL OF INTERNAL BIVENTRICULAR HEART REPLACEMENT SYSTEM OCT08-
		3760	IMPLANTATION OR INSERTION OF BIVENTRICULAR EXTERNAL HEART ASSIST SYSTEM OCT08-
		3761	IMPLANT OF PULSATION BALLOON
		3762	INSERTION OF NON-IMPLANTABLE HEART ASSIST SYSTEM
		3763	REPAIR OF HEART ASSIST SYSTEM
		3764	REMOVAL OF HEART ASSIST SYSTEM

3765	IMPLANT OF EXTERNAL HEART ASSIST SYSTEM	3865	EXCISION OF LESION OTHER THORACIC VESSEL
3766	INSERTION OF IMPLANTABLE HEART ASSIST SYSTEM	3884	LIGATION , DIVISION OF AORTA
3767	IMPLANTATION OF CARDIOMYOSTIMULATION SYSTEM	3885	LIGATION, DIVISION OF OTHER THORACIC VESSELS
3791	OPEN CHEST CARDIAC MASSAGE	390	SYSTEMIC TO PULMONARY ARTERY SHUNT
3804	INCISION OF VESSEL, AORTA	3921	CAVAL-PULMONARY ARTERY ANASTOMOSIS
3805	INCISION OF VESSEL, OTHER THORACIC	3922	AORTA-SUBCLAVIAN-CAROTID BYPASS
3844	RESECTION OF ABDOMINAL AORTA WITH GRAFT REPLACEMENT	3923	OTHER INTRATHORACIC VASCULAR SHUNT OR BYPASS
3845	RESECTION OF THORACIC VESSEL WITH GRAFT REPLACEMENT		
3864	EXCISION OF LESION OF AORTA		



NQI #2 Neonatal Mortality

Provider-Level Indicator

Numerator

Number of deaths (DISP=20) among cases meeting the inclusion and exclusion rules for the denominator.

Denominator

All newborn and outborn discharges.

See *Pediatric Quality Indicators Appendices*:

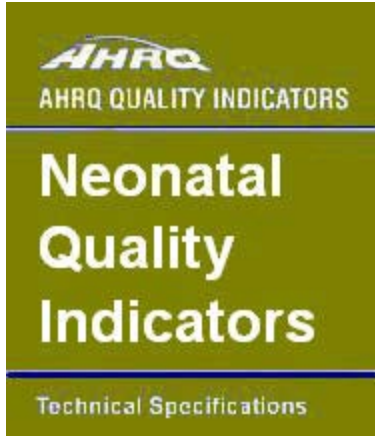
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn
- Appendix L – Low Birth Weight Categories

Exclude cases:

- with any diagnosis of anencephaly, polycystic kidney, trisomy 13, or trisomy 18
- with birth weight less than 500 grams (Birth Weight Category 1)
- with missing discharge disposition (DISP=missing), gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1 =missing)

ICD-9-CM Anencephaly, Polycystic Kidney, Trisomy 13, and Trisomy 18 diagnosis codes

7400	ANENCEPHALUS	75313	POLYCYSTIC RENAL DISEASE
7401	CRANIORACHISCHISIS	7581	TRISOMY 13
7402	INIENCEPHALY	7582	TRISOMY 18



NQI #3 Neonatal Blood Stream Infections

Provider-Level Indicator

Numerator

Discharges with selected infections defined by specific ICD-9-CM codes in any secondary diagnosis field among cases meeting the inclusion and exclusion rules for the denominator.

Any secondary diagnosis ICD-9-CM code for

03810	STAPHYLOCOCC SEPTICEM NOS	03843	PSEUDOMONAS SEPTICEMIA
03811	METH SUSC STAPH AUR SEPT	03844	SERRATIA SEPTICEMIA
03819	STAPHYLOCOCC SEPTICEM NEC	03849	GRAM-NEG SEPTICEMIA NEC
03840	GRAM-NEG SEPTICEMIA NOS	1125	DISSEMINATED CANDIDIASIS
03842	E COLI SEPTICEMIA		

OR

Patients with one or more of the following secondary diagnosis ICD-9-CM codes:

77181	NB SEPTICEMIA [SEPSIS]	7907	BACTEREMIA
77183	BACTEREMIA OF NEWBORN		

AND one of the following secondary diagnosis ICD-9-CM codes:

04104	ENTEROCOCCUS GROUP D	0413	KLEBSIELLA INFECT N
04110	STAPHYLOCOCCUS UNSPCFIED	0414	E. COLI INFECT NOS
04111	MTH SUS STPH AUR ELS/NOS	0417	PSEUDOMONAS INFECT NOS
04119	OTHER STAPHYLOCOCCUS	04185	OTH GRAM NEGATV BACTERIA

Denominator

All newborns and outborns with a birth weight 500 to 1499 g (Birth Weight Categories 2 and 3) OR gestational age between 24 and 30 weeks, except exclusions (see below).

Include also newborns and outborns with a birth weight greater than or equal to 1500 g (Birth Weight Category 4 or 5), if the infant experienced death (DISP=20), major surgery, mechanical ventilation, or transfer to an acute care facility (DISP=2).

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn
- Appendix L – Low Birth Weight Categories

ICD-9-CM Gestation Age diagnosis codes

76522	24 COMPLETED WEEKS OF GESTATION	76525	29-30 COMPLETED WEEKS OF GESTATION
76523	25-26 COMPLETED WEEKS OF GESTATION		
76524	27-28 COMPLETED WEEKS OF GESTATION		

ICD-9-CM Mechanical Ventilation procedure codes

9670	CONTINUOUS MECHANICAL VENTILATION OF UNSPEC DURATION	9672	CONSECUTIVE HRS CONTINUOUS MECHANICAL VENTILATION FOR 96 CONSECUTIVE HOURS OR MORE
9671	CONTINUOUS MECHANICAL VENTILATION FOR LESS THAN 96		

Exclude cases:

- with principal diagnosis of sepsis or infection or secondary diagnosis present on admission
- with birth weight less than 500 grams (Birth Weight Category 1)
- with length of stay less than 2 days

ICD-9-CM Sepsis diagnosis codes

0380	STREPTOCOCCAL SEPTICEMIA	<hr/> Septicemia due to: <hr/>	
0381	STAPHYLOCOCCAL SEPTICEMIA	03840	GRAM-NEGATIVE ORGANISM, UNSPECIFIED
03810	STAPHYLOCOCCAL SEPTICEMIA, UNSPECIFIED	03841	HEMOPHILUS INFLUENZAE
03811	METHICILLIN SUSCEPTIBLE STAPHYLOCOCCUS AUREUS SEPTICEMIA OCT08-	03842	ESCHERICHIA COLI
03812	METHICILLIN RESISTANT STAPHYLOCOCCUS AUREUS SEPTICEMIA OCT08-	03843	PSEUDOMONAS
03819	OTHER STAPHYLOCOCCAL SEPTICEMIA	03844	SERRATIA
0382	PNEUMOCOCCAL SEPTICEMIA (STREPTOCOCCUS PNEUMONIAE SEPTICEMIA)	03849	SEPTICEMIA DUE TO OTHER GRAM-NEGATIVE ORGANISMS
0383	SEPTICEMIA DUE TO ANAEROBES	0388	OTHER SPECIFIED SEPTICEMIAS
78552	SEPTIC SHOCK	0389	UNSPECIFIED SEPTICEMIA
78559*	SHOCK WITHOUT MENTION OF TRAUMA, OTHER	99591	SYSTEMIC INFLAMMATORY RESPONSE SYNDROME DUE TO INFECTIOUS PROCESS W/O ORGAN DYSFUNCTION
9980	POSTOPERATIVE SHOCK	99592	SYSTEMIC INFLAMMATORY RESPONSE SYNDROME DUE TO INFECTIOUS PROCESS W/ ORGAN DYSFUNCTION

*Not valid for discharges effective October 1, 2004

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes

Appendix B: National Quality Forum(NQF) Incidence of Episiotomy

Indicator Rationale

“the use of episiotomy has been shown to increase the incidence in 3rd and 4th degree lacerations and is a provider dependent process measure for which there is marked provider variation. Moreover the use of episiotomy has not been demonstrated to improve patient outcomes. As such, we would view episiotomy rate as a more accurate reflection of quality than the current marker.

... the American College of Obstetricians and Gynecologists(ACOG) stated that there is" insufficient objective evidence-based criteria to recommend episiotomy, and especially routine use of episiotomy, and that clinical judgment remains the best guide for use of this procedure (14).”

One exception may be shoulder dystocia . Per ACOG “ if shoulder dystocia occurs, episiotomy may be useful to facilitate its management.” (14) Given the low incidence of shoulder dystocia, we believe that these cases should be excluded from both the denominator and numerator of our proposed measure.

In summary we, believe that there is wide variance in the performance of episiotomy, that its use has not been demonstrated to improve the outcomes of fetuses, and that it markedly increases the risk of 3rd and 4th degree lacerations and other maternal complications. As this information is readily available, we believe that this represents an opportunity to markedly improve the care of women delivering in the United States. “

(Source: NQF Measure Submission Form Version 2.0, October 2007)

In the spring of 2011, NQF plans to reconvene the perinatal project and review all the currently endorsed measures and add, delete or modify them as well as review new measures offered for endorsement.

Indicator Calculation

Overview of NQF Incidence of Episiotomy Measure		
Numerator Statement	Number of episiotomy procedures	Vaginal deliveries with ICD-9 72.1, 72.21, 72.31 72.71, 73.6 excluding cases with an ICD-9 dx code of shoulder dystocia (ICD 660.41 or 660.42)
Denominator Statement	Number of vaginal deliveries	MS-DRGs for vaginal delivery (767-768 and 774-775) Exclusions: vaginal deliveries complicated by a shoulder dystocia (ICD-9 660.41 or 660.42)

Appendix C: NPIC/QAS Indicators

Maternal Indicators

Third and Fourth Degree Perineal Laceration Rate, Forceps or Vacuum Extraction

This rate reflects cases with a third or fourth degree perineal laceration following a forceps or vacuum extracted delivery. The rate is calculated by identifying all delivered cases with an ICD-9-CM procedure code of 72. (Forceps, Vacuum, and Breech Delivery) in the denominator and all of those cases with the additional ICD-9-CM diagnosis code of 664.2 or 664.3 (3rd or 4th degree laceration) in the numerator. We have also subdivided the rate into those with only a third degree code and those with only a fourth degree code.

Third and Fourth Degree Perineal Laceration Rate, Without Forceps or Vacuum Extraction

This rate reflects cases with third and fourth degree lacerations in cases not having a forceps or vacuum extraction. We have also subdivided the rate into those with only a third degree code and those with only a fourth degree code.

Postpartum Readmission Rate:

This rate reflects the readmission rate of women who delivered at your hospital and were **readmitted to your hospital** within 42 days post discharge for a postpartum condition (APR-DRG 561). (A true readmission rate would include readmits to other facilities as well but is not able to be calculated with a common identifier that crosses facilities.)

Postpartum Hemorrhage Rate:

This rate reflects all women who delivered and were coded with a postpartum hemorrhage diagnosis code of 666.0-666.2 or hemorrhage repair code of 39.98: control of hemorrhage not otherwise specified. The denominator is all delivered women.

Rate of Disruption or Infection of Obstetrical Wound

The rate of delivered patients developing a wound complication. Wound complications are defined as ICD-9-CM codes 674.1, 674.2, and 674.3 -- disruption of cesarean wound, disruption of perineal wound, or other complication of obstetrical surgical wounds. The denominator is all delivered women.

Anesthesia Complication Rate

This rate reflects cases with an anesthesia complication ICD-9-CM diagnosis code of either 668.0 - 668.2: pulmonary, cardiac, or central nervous system anesthesia complications. It **does not** include less serious complications coded with 668.8: other complications of anesthesia or other sedation in labor and delivery, or 669: unspecified complication of anesthesia and other sedation. The denominator is all delivered women.

The Rate of Vaginal Deliveries Coded with Shoulder Dystocia

This rate reflects women who delivered vaginally and had a code of 660.4: obstructed labor due to impacted shoulders. The denominator is all vaginal deliveries.

Rate of Inductions Resulting in a C-section

This rate reflects women who had one of three induction procedure codes: 73.01 Induction of labor by artificial rupture of membranes, 73.1 Other surgical induction of labor, 73.4 Medical induction of labor, excluding medication to augment active labor

and were subsequently delivered by c-section. The denominator is all eligible women with at least one of the induction codes.

Neonatal Indicator

Total Inborn Birth Trauma Rate

This rate displays **all** inborns with **any** of the 11 possible birth trauma codes. Birth trauma is defined as cases with an ICD-9-CM Code of 767.0 or 767.2, 767.3, 767.4, 767.5, 767.6, 767.7, 767.8, 767.9, 767.11, 767.19. An overall birth trauma rate is calculated as any inborn with at least one birth trauma code divided by all inborns.

Linked Mother/Baby Indicators

Rate of Infants \geq 2500 grams with a Coded Birth Trauma Delivered to a Mother with Coded Shoulder Dystocia:

This rate reflects infants \geq 2500 grams with at least one birth trauma code linked to a mother who had a coded complication of shoulder dystocia code of 660.4 (obstructed labor due to impacted shoulders). The numerator is infants \geq 2500 with at least one birth trauma code and the denominator is vaginally delivered women with a shoulder dystocia code.

Maternal Complications/Outcomes Resulting in a Neonatal Special Care Admission:

This analysis reflects six sets of maternal complications/outcomes and the rate at which their infants spend time in a special care area, defined as the presence of charges or days in the neonatal intensive care or neonatal intermediate care units posted on the infant's record. For each calculation the denominator is the count of delivered mothers with the complication/outcome and the numerator is the subset of those inborns that had charges or days of special care.

- A. Hypertension set: Delivered mothers with at least one of the following codes: 642.0 benign essential hypertension complicating pregnancy, childbirth and the puerperium & 642.1 hypertension secondary to renal disease, complicating pregnancy, childbirth and the puerperium & 642.9 unspecified hypertension complicating pregnancy, childbirth or the puerperium linked to an infant with special care charges/days
- B. Diabetes set: Delivered mothers with at least one of the following Diabetes Mellitus codes: 648.0 (Complicating Pregnancy) or 250.xx: Diabetes mellitus (excludes gestational diabetes) linked to infants with special care charges and/or days
- C. Obesity: Delivered mothers with the code for obesity complicating pregnancy, childbirth, or the puerperium: 649.1 linked to an infant with special care charges days
- D. Maternal Thyroid dysfunction: Delivered mothers with the code for thyroid dysfunction: 648.1 linked to an infants with special care days and/charges
- E. Primary C-section \geq 37 weeks GA : Delivered mothers without a prior uterine scar delivered by c-section linked to an infant \geq 37 gestation age with special care charges and/or days. The denominator is all primary c-sections resulting in an infant \geq 37 weeks.
- F. Repeat C-section \geq 37 weeks GA: Delivered mothers with a prior uterine scar delivered by c-section linked to an infant \geq 37 gestation age with special care charges and/or days. The denominator is all repeat c-sections resulting in an infant \geq 37 weeks.

Appendix D: The Joint Commission Perinatal Care Measures

Source: Specifications Manual for Joint Commission National Quality Measures (v2010A)-PC-04; Discharges 04-01-10 (Q210) through 09-30-10(Q310)

www.jointcommission.org

A. PC 04 Health Care-Associated Bloodstream Infections in Newborns

PC-04 Health Care-Associated Bloodstream Infections in Newborns is a significant problem for newborns. Effective preventive measures have been shown to decrease this problem resulting in lower infection rates. To show an improvement with this indicator there should be a decrease in the rate of health care associated bloodstream infections in your facility.

Perinatal Care Measure	Health Care-Associated Bloodstream Infections in Newborns		
Description	Staphylococcal and gram negative septicemias or bacteremias in high risk newborns <u>Data Elements requiring abstraction</u> <i>-Numeric Birthweight*</i> <i>*If your hospital does not provide this data element to NPIC/QAS, manual abstraction will be required</i>		
√ This measure is risk adjusted	Definition	Included Populations	Excluded Populations
Numerator Statement:	Newborns with septicemia or bacteremia	ICD-9-CM Other Diagnosis Codes for newborns with septicemia or bacteremia as defined in Appendix A Table 11.10 and one diagnosis code from Table 11.11	No exclusions
Denominator Statement:	Live-born newborns	ICD-9-CM Other Diagnosis Codes for birthweight between 500 and 1499 grams as defined in Appendix A, Table 11.12, 11.13 or 11.14 OR <i>Birthweight</i> between	ICD-9-CM Principal Diagnosis Codes for newborns with septicemia or

		<p>500 and 1499 grams</p> <p>OR <i>ICD-9-CM Other Diagnosis Codes</i> for birthweight \geq 1500 grams as defined in Appendix A, Table 11.15, 11.16 or 11.17 or Birthweight \geq 1500 grams who experienced one or more of the following:</p> <ol style="list-style-type: none"> 1. Experienced death 2. <i>ICD-9-CM Principal Procedure Code or ICD-9-CM Other Procedure Codes</i> for major surgery as defined in Appendix A, Table 11.18 3. <i>ICD-9-CM Principal Procedure Code or ICD-9-CM Other Procedure Codes</i> for mechanical ventilation as defined in Appendix A, Table 11.19 4. Transferred in from another acute care hospital within 2 days of birth 	<p>bacteremia as defined in Appendix A Table 11.10</p> <p><i>ICD-9-CM Other Diagnosis Codes</i> for birthweight < 500 grams as defined in Appendix A, Table 11.20 or</p> <p>Birthweight < 500 grams</p> <p>Length of Stay < 2 days OR > 120 days</p> <p><i>Enrolled in clinical trials</i></p>
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For TJC Perinatal Care Measure PC-04 Health Care-Associated Bloodstream Infections in Newborns, the table displays your hospital’s expected rate with a 99% confidence interval and your observed (actual) rate compared to your subgroup and database average observed and expected rates.

The expected rate is the rate obtained when the regression model is run against your profile of cases. This regression model uses the coefficients supplied by TJC for Q2 2010. The expected rate answers the question, what would we expect your rate to be, given your profile of cases relative to the other cases in TJC comparison group? (To date, TJC is not responsible for, nor has it reviewed the appropriateness of our applications of the models for any other specific purpose other than ORYX®. NPIC/QAS has met the criteria for inclusion in the accreditation process and has been included on TJC list of acceptable performance measurement systems since 1997. NPIC/QAS has successfully met the technical requirements and is approved to transmit data for the Perinatal Care Measure Set.)

The risk factors used in the regression model for the PC-04 measure are listed below:

76513	PRETERM NEC 750-999G
76512	PRETERM NEC 500-749G
76503	EXTREME IMMATUR 750-999G
76502	EXTREME IMMATUR 500-749G
76493	FET GROWTH RET 750-999G

76492	FET GROWTH RET 500-749G
76423	FETAL MAL 750-999G
76422	FETAL MALNUTR 500-749G
76413	LT-DATE W/MAL 750-999G
76412	LT-DATE W/MAL 500-749G

76403	LT-FOR-DATES 750-999G
76402	LT-FOR-DATES 500-749G
76514	PRETERM NEC 1000-1249G
76504	EXTREME IMMAT 1000-1249G
76494	FET GRWTH RET 1000-1249G
76424	FETAL MAL 1000-1249G
76414	LT-DATE W/MAL 1000-1249G
76404	LT-FOR-DATES 1000-1249G
76518	PRETERM NEC 2000-2499G
76517	PRETERM NEC 1750-1999G
76516	PRETERM NEC 1500-1749G
76515	PRETERM NEC 1250-1499G
76508	EXTREME IMMAT 2000-2499G
76507	EXTREME IMMAT 1750-1999G
76506	EXTREME IMMAT 1500-1749G
76505	EXTREME IMMAT 1250-1499G
76498	FET GRWTH RET 2000-2499G
76497	FET GRWTH RET 1750-1999G
76496	FET GRWTH RET 1500-1749G
76495	FET GRWTH RET 1250-1499G
76428	FETAL MALNUTR 2000-2499G
76427	FETAL MALNUTR 1750-1999G
76426	FETAL MAL 1500-1749G
76425	FETAL MAL 1250-1499G
76418	LT-DATE W/MAL 2000-2499G
76417	LT-DATE W/MAL 1750-1999G
76416	LT-DATE W/MAL 1500-1749G
76415	LT-DATE W/MAL 1250-1499G
76408	LT-FOR-DATES 2000-2499G
76407	LT-FOR-DATES 1750-1999G
76406	LT-FOR-DATES 1500-1749G
76405	LT-FOR-DATES 1250-1499G
5602	Volvulus of intestine
7503	Cong esoph fistula/atres
7504	Esophageal anomaly NEC
7505	Cong pyloric stenosis
7507	Gastric anomaly NEC
7508	Upper GI anomaly NEC
7509	Upper GI anomaly NOS
7510	Meckel's diverticulum
7511	Atresia small intestine
7512	Atresia large intestine
7513	Hirschsprung's disease

7514	Intestinal fixation anom
7515	Intestinal anomaly NEC
75160	Biliary & liver anom NOS
75161	Biliary atresia
75169	Biliary & liver anom NEC
7517	Pancreas anomalies
7518	Anom digestive syst NEC
7519	Anom digestive syst NOS
75670	Congn anoml abd wall NOS
75679	Congn anoml abd wall NEC
7711	Cong cytomegalovirus inf
4240	Mitral valve disorder
4241	Aortic valve disorder
4251	Hypertr obstr cardiomyop
4253	Endocard fibroelastosis
7450	Common truncus
74510	Compl transpos great ves
74511	Double outlet rt ventric
74512	Correct transpos grt ves
74519	Transpos great vess NEC
7452	Tetralogy of fallot
7453	Common ventricle
74560	Endocard cushion def NOS
74561	Ostium primum defect
74569	Endocard cushion def NEC
74601	Cong pulmon valv atresia
74609	Pulmonary valve anom NEC
7461	Cong tricuspid atres/sten
7462	Ebstein's anomaly
7463	Cong aorta valv stenosis
7464	Cong aorta valv insuffic
7465	Congen mitral stenosis
7466	Cong mitral insufficienc
7467	Hypoplas left heart synd
74681	Cong subaortic stenosis
74682	Cor triatriatum
74683	Infundib pulmon stenosis
74684	Obstruct heart anom NEC
74685	Coronary artery anomaly
74710	Coarctation of aorta
74711	Interrupt of aortic arch
74721	Anomalies of aortic arch
74722	Aortic atresia/stenosis
74729	Cong anom of aorta NEC
74740	Great vein anomaly NOS
74741	Tot anom pulm ven connec
74742	Part anom pulm ven conn

74749	Great vein anomaly NEC
7596	Hamartoses NEC
7765	Congenital anemia

7780	Hydrops fetalis no isoim
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Newborns Transferred In

Newborns Transferred Out/Died

Table Number 11.10: Newborn Septicemia or Bacteremia (Ver. 2010A)		
<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
771.81	Septicemia [sepsis] of newborn	NB SEPTICEMIA [SEPSIS]
771.83	Bacteremia of newborn	BACTEREMIA OF NEWBORN

Table Number 11.11: Newborn Bacteremia (Ver. 2010A)		
<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
041.04	Streptococcus Group D (Enterococcus)	ENTEROCOCCUS GROUP D
041.10	Staphylococcus, unspecified	STAPHYLOCOCCUS UNSPCFIED
041.11	Staphylococcus aureus	STAPHYLOCOCCUS AUREUS
041.19	Other Staphylococcus	OTHER STAPHYLOCOCCUS
041.30	Friedländer's bacillus (Klebsiella pneumoniae)	KLEBSIELLA INFECT NOS
041.40	Escherichia coli	E. COLI INFECT NOS
041.70	Pseudomonas	PSEUDOMONAS INFECT NOS

Table Number 11.12: Birth Weight 500-749 Grams (Ver. 2010A)		
<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.02	Light-for-dates without mention of fetal malnutrition - 500-749 grams	LT-FOR-DATES 500-749G
764.12	Light-for-dates with signs of fetal malnutrition - 500-749 grams	LT-DATE W/MAL 500-749G
764.22	Fetal malnutrition without mention of "light-for-dates" - 500-749 grams	FETAL MALNUTR 500-749G
764.92	Fetal growth retardation, unspecified - 500-749 grams	FET GROWTH RET

		500-749G
765.02	Extreme immaturity - 500-749 grams	EXTREME IMMATUR 500-749G
765.12	Other preterm infants - 500-749 grams	PRETERM NEC 500- 749G

Table Number 11.13: Birth Weight 750-999 Grams (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.03	Light-for-dates without mention of fetal malnutrition - 750-999 grams	LT-FOR-DATES 750-999G
764.13	Light-for-dates with signs of fetal malnutrition - 750-999 grams	LT-DATE W/MAL 750-999G
764.23	Fetal malnutrition without mention of "light-for-dates" - 750-999 grams	FETAL MAL 750-999G
764.93	Fetal growth retardation, unspecified - 750-999 grams	FET GROWTH RET 750-999G
765.03	Extreme immaturity - 750-999 grams	EXTREME IMMATUR 750-999G
765.13	Other preterm infants - 750-999 grams	PRETERM NEC 750-999G

Table Number 11.14: Birth Weight 1000-1499 Grams (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.04	Light-for-dates without mention of fetal malnutrition - 1000-1249 grams	LT-FOR-DATES 1000-1249G
764.05	Light-for-dates without mention of fetal malnutrition - 1250-1499 grams	LT-FOR-DATES 1250-1499G
764.14	Light-for-dates with signs of fetal malnutrition - 1000-1249 grams	LT-DATE W/MAL 1000-1249G
764.15	Light-for-dates with signs of fetal malnutrition - 1250-1499 grams	LT-DATE W/MAL 1250-1499G
764.24	Fetal malnutrition without mention of "light-for-dates" - 1000-1249 grams	FETAL MAL 1000-1249G
764.25	Fetal malnutrition without mention of "light-for-dates" - 1250-1499 grams	FETAL MAL 1250-1499G
764.94	Fetal growth retardation, unspecified - 1000-1249 grams	FET GRWTH RET 1000-1249G
764.95	Fetal growth retardation, unspecified - 1250-1499 grams	FET GRWTH RET 1250-1499G
765.04	Extreme immaturity - 1000-1249 grams	EXTREME IMMAT 1000-1249G

765.05	Extreme immaturity - 1250-1499 grams	EXTREME IMMAT 1250-1499G
765.14	Other preterm infants - 1000-1249 grams	PRETERM NEC 1000- 1249G
765.15	Other preterm infants - 1250-1499 grams	PRETERM NEC 1250- 1499G

Table Number 11.15: Birth Weight 1500-1999 Grams (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.06	Light-for-dates without mention of fetal malnutrition - 1500-1749 grams	LT-FOR-DATES 1500- 1749G
764.07	Light-for-dates without mention of fetal malnutrition - 1750-1999 grams	LT-FOR-DATES 1750- 1999G
764.16	Light-for-dates with signs of fetal malnutrition - 1500-1749 grams	LT-DATE W/MAL 1500-1749G
764.17	Light-for-dates with signs of fetal malnutrition - 1750-1999 grams	LT-DATE W/MAL 1750-1999G
764.26	Fetal malnutrition without mention of "light-for-dates" - 1500-1749 grams	FETAL MAL 1500- 1749G
764.27	Fetal malnutrition without mention of "light-for-dates" - 1750-1999 grams	FETAL MALNUTR 1750-1999G
764.96	Fetal growth retardation, unspecified - 1500-1749 grams	FET GRWTH RET 1500-1749G
764.97	Fetal growth retardation, unspecified - 1750-1999 grams	FET GRWTH RET 1750-1999G
765.06	Extreme immaturity - 1500-1749 grams	EXTREME IMMAT 1500-1749G
765.07	Extreme immaturity - 1750-1999 grams	EXTREME IMMAT 1750-1999G
765.16	Other preterm infants - 1500-1749 grams	PRETERM NEC 1500- 1749G
765.17	Other preterm infants - 1750-1999 grams	PRETERM NEC 1750- 1999G

Table Number 11.16: Birth Weight 2000-2499 Grams (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.08	Light-for-dates without mention of fetal malnutrition - 2000-2499 grams	LT-FOR-DATES 2000- 2499G
764.18	Light-for-dates with signs of fetal malnutrition - 2000-2499 grams	LT-DATE W/MAL 2000-2499G
764.28	Fetal malnutrition without mention of "light-for-dates" - 2000-2499 grams	FETAL MALNUTR 2000-2499G

764.98	Fetal growth retardation, unspecified - 2000-2499 grams	FET GRWTH RET 2000-2499G
765.08	Extreme immaturity - 2000-2499 grams	EXTREME IMMAT 2000-2499G
765.18	Other preterm infants - 2000-2499 grams	PRETERM NEC 2000- 2499G

Table Number 11.17: Birth Weight 2500 Grams and over (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.09	Light-for-dates without mention of fetal malnutrition - 2500 grams and over	LT-FOR-DATES 2500+G
764.19	Light-for-dates with signs of fetal malnutrition - 2500 grams and over	LT-DATE W/MAL 2500+G
764.29	Fetal malnutrition without mention of "light-for-dates" - 2500 grams and over	FETAL MALNUTR 2500+G
764.99	Fetal growth retardation, unspecified - 2500 grams and over	FET GRWTH RET 2500+G
765.09	Extreme immaturity - 2500 grams and over	EXTREME IMMAT 2500+G
765.19	Other preterm infants - 2500 grams and over	PRETERM NEC 2500+G

Table Number 11.18: Major Surgery (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
	Please refer to The Joint Commission Specifications Manual	

Table Number 11.19: Mechanical Ventilation (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
93.90	Non-invasive mechanical ventilation	NON-INVASIVE MECH VENT
96.70	Continuous invasive mechanical ventilation of unspecified duration	CON INV MEC VEN-UNSP DUR
96.71	Continuous invasive mechanical ventilation for less than 96 consecutive hours	CONT INV MEC VEN <96 HRS
96.72	Continuous invasive mechanical ventilation for 96 consecutive hours or more	CONT INV MEC VEN 96+ HRS

Table Number 11.20: Birth Weight Less Than 500 Grams (Ver. 2010A)

<u>Code</u>	<u>ICD-9-CM Description</u>	<u>Shortened Description</u>
764.01	Light-for-dates without mention of fetal malnutrition - less than 500 grams	LIGHT-FOR-DATES <500G
764.11	Light-for-dates with signs of fetal malnutrition - less than 500 grams	LT-FOR-DATE W/MAL <500G
764.21	Fetal malnutrition without mention of "light-for-dates" - less than 500 grams	FETAL MALNUTRITION <500G
764.91	Fetal growth retardation, unspecified - less than 500 grams	FET GROWTH RETARD <500G
765.01	Extreme immaturity - less than 500 grams	EXTREME IMMATUR <500G
765.11	Other preterm infants - less than 500 grams	PRETERM NEC <500G