



Quality measures developed and tested by the ASC Quality Collaboration (ASC QC).

## All-Cause Hospital Transfer/Admission

<b>Description</b>	This measure is used to assess the percentage of ASC admissions (patients) that are transferred or admitted to a hospital upon discharge from the ASC
<b>Numerator/Denominator</b>	Numerator: Ambulatory Surgery Center (ASC) admissions requiring a hospital transfer or hospital admission upon discharge from the ASC Denominator: All ASC admissions
<b>Inclusions/Exclusions</b>	Numerator Inclusions: ASC admissions requiring a hospital transfer or hospital admission upon discharge from the ASC Numerator Exclusions: None Denominator Inclusions: All ASC admissions Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Hospital transfer/admission:</b> any transfer/admission from an ASC directly to an acute care hospital including hospital emergency room <b>Discharge:</b> occurs when the patient leaves the confines of the ASC

## All-Cause Emergency Department Visit Within One Day of Discharge

<b>Description</b>	This measure is used to assess the percentage of ASC admissions (patients) that have an emergency department visit within one day of discharge from the ASC.
<b>Numerator/Denominator</b>	Numerator: All ASC admissions who had an emergency department visit within one day of discharge from the ASC. Denominator: All ASC admissions
<b>Inclusions/Exclusions</b>	Numerator Exclusions: ASC admissions who were transferred/admitted directly to an acute care hospital, including a hospital emergency room, upon discharge from the ASC (report using Hospital Transfer/Admission measure); ASC admissions who had an unplanned hospital admission within one day of being discharged from the ASC (report using All-Cause Unplanned Hospital Admission Within One Day of Discharge measure) Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Discharge:</b> occurs when the patient leaves the confines of the ASC <b>Emergency department visit:</b> any visit to the emergency department of an acute care hospital that does not result in admission (including an observation stay) to the hospital <b>Within one day:</b> within one day, where the day of discharge is day 0
<b>Implementation Requirement</b>	To ensure comparable results, this measure must be implemented using the ASC QC Post-Discharge Surveillance Guidelines, which can be found in the Implementation Guide.

## All-Cause Unplanned Hospital Admission Within One Day of Discharge

<b>Description</b>	This measure is used to assess the percentage of ASC admissions (patients) that have an unplanned hospital admission, including an observation stay, within one day of discharge from the ASC.
<b>Numerator/Denominator</b>	Numerator: All ASC admissions who had an unplanned hospital admission within one day of discharge from the ASC. Denominator: All ASC admissions
<b>Inclusions/Exclusions</b>	Numerator Exclusions: ASC admissions who were transferred/admitted directly to an acute care hospital, including a hospital emergency room, upon discharge from the ASC (report using 'Hospital Transfer/Admission' measure); ASC admissions who had a visit to the emergency department of an acute care hospital within one day of discharge that did not result in an admission to the hospital (report using All-Cause Emergency Department Visit Within One Day of Discharge measure); ASC admissions who had a previously planned hospital admission within one day of discharge from the ASC. Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Discharge:</b> occurs when the patient leaves the confines of the ASC <b>Unplanned hospital admission:</b> any admission to an acute care hospital, including an observation stay, which was not already scheduled at the time of the patient's admission to the ASC. <b>Within one day:</b> within one day, where the day of discharge is day 0
<b>Implementation Requirement</b>	To ensure comparable results, this measure must be implemented using the ASC QC Post-Discharge Surveillance Guidelines, which can be found in the Implementation Guide.



## Appropriate Surgical Site Hair Removal

<b>Description</b>	This measure is used to assess the percentage of admissions (patients) that have appropriate surgical site hair removal
<b>Numerator/Denominator</b>	Numerator: ASC admissions with surgical site hair removal with a razor or clippers from the scrotal area, or with clippers or depilatory cream from all other surgical sites Denominator: All ASC admissions with surgical site hair removal
<b>Inclusions/Exclusions</b>	Numerator Inclusions: ASC admissions with surgical site hair removal with a razor or clippers from the scrotal area, or with clippers or depilatory cream from all other surgical sites Numerator Exclusions: None Denominator Inclusions: All ASC admissions with surgical site hair removal Denominator Exclusions: ASC admissions who perform their own hair removal
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility

## Normothermia Outcome

<b>Description</b>	This measure is used to assess the percentage of patients having surgical procedures under general or neuraxial anesthesia of 60 minutes or more in duration are normothermic within 15 minutes of arrival in PACU
<b>Numerator/Denominator</b>	Numerator: Surgery patients with a body temperature equal to or greater than 96.8 Fahrenheit/36 Celsius recorded within fifteen minutes of Arrival in PACU Denominator: All patients, regardless of age, undergoing surgical procedures under general or neuraxial anesthesia of greater than or equal to 60 minutes duration
<b>Inclusions/Exclusions</b>	Numerator Exclusions: None Denominator Exclusions: Patients who did not have general or neuraxial anesthesia; patients whose length of anesthesia was less than 60 minutes; patients with physician/APN/PA documentation of intentional hypothermia for the procedure performed <b>Anesthesia duration:</b> the difference, in minutes, between the time associated with the start of anesthesia for the principal procedure and the time associated with the end of anesthesia for the principal procedure <b>Arrival in PACU:</b> Time of patient arrival in PACU
<b>Data Element Definitions</b>	<b>General anesthesia:</b> drug-induced loss of consciousness during which the patient is not arousable, even by painful stimulation <b>Intentional hypothermia:</b> A deliberate, documented effort to lower the patient's body temperature in the perioperative period <b>Neuraxial anesthesia:</b> Epidural or spinal anesthesia <b>Temperature:</b> A measure in either Fahrenheit or Celsius of the warmth of a patient's body. Axillary, bladder, core, esophageal, oral, rectal, skin surface, temporal artery, or tympanic temperature measurements may be used.

## Patient Burn

<b>Description</b>	This measure is used to assess the number of admissions (patients) that experience a burn prior to discharge
<b>Numerator/Denominator</b>	Numerator: Ambulatory Surgery Center (ASC) admissions experiencing a burn prior to discharge Denominator: All ASC admissions
<b>Inclusions/Exclusions</b>	Numerator Inclusions: ASC admissions experiencing a burn prior to discharge Numerator Exclusions: None Denominator Inclusions: All ASC admissions Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Burn:</b> Unintended tissue injury caused by any of the six recognized mechanisms: scalds, contact, fire, chemical, electrical or radiation, (e.g. warming devices, prep solutions, electrosurgical unit or laser)

## Patient Fall in the ASC

<b>Description</b>	This measure is used to assess the number of admissions (patients) that experience a fall within the ASC
<b>Numerator/Denominator</b>	Numerator: Ambulatory Surgery Center (ASC) admissions experiencing a fall within the confines of the ASC Denominator: All ASC admissions
<b>Inclusions/Exclusions</b>	Numerator Inclusion: ASC admissions experiencing a fall within the confines of the ASC Numerator Exclusion: ASC admissions experiencing a fall outside the ASC Denominator Inclusion: All ASC admissions Denominator Exclusion: ASC admissions experiencing a fall outside the ASC
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Fall:</b> a sudden, uncontrolled, unintentional, downward displacement of the body to the ground or other object, excluding falls resulting from violent blows or other purposeful actions. (National Center for Patient Safety)



## Prophylactic IV Antibiotic Timing

<b>Description</b>	This measure is used to assess whether antibiotics given for prevention of surgical site infection were administered on time
<b>Numerator/Denominator</b>	Numerator: Number of Ambulatory Surgery Center (ASC) admissions with an order for a prophylactic IV antibiotic for prevention of surgical site infection, who received the prophylactic antibiotic on time Denominator: All ASC admissions with a preoperative order for a prophylactic IV antibiotic for prevention of surgical site infection
<b>Inclusions/Exclusions</b>	Numerator Exclusions: None Denominator Exclusions: ASC admissions with a preoperative order for a prophylactic IV antibiotic for prevention of infections other than surgical site infections (e.g. bacterial endocarditis); ASC admissions with a preoperative order for a prophylactic antibiotic not administered by the intravenous route
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Antibiotic administered on time:</b> Antibiotic infusion is initiated within one hour prior to the time of the initial surgical incision or the beginning of the procedure (e.g., introduction of endoscope, insertion of needle, inflation of tourniquet) or two hours prior if vancomycin or fluoroquinolones are administered. Timing starts at the time antibiotic infusion is initiated. <b>Prophylactic antibiotic:</b> an antibiotic prescribed with the intent of reducing the probability of an infection related to an invasive procedure. For purposes of this measure, the following antibiotics are considered prophylaxis for surgical site infections: Ampicillin/sulbactam, Aztreonam, Cefazolin, Cefmetazole, Cefotetan, Cefoxitin, Cefuroxime, Ciprofloxacin, Clindamycin, Ertapenem, Erythromycin, Gatifloxacin, Gentamicin, Levofloxacin, Metronidazole, Moxifloxacin, Neomycin and Vancomycin

## Toxic Anterior Segment Syndrome (TASS)

<b>Description</b>	This measure is used to assess the number of anterior segment surgery patients diagnosed with TASS within 2 days of surgery
<b>Numerator/Denominator</b>	Numerator: All anterior segment surgeries after which the patient is diagnosed with TASS within 2 days of surgery Denominator: All anterior segment surgeries
<b>Inclusions/Exclusions</b>	Numerator Exclusions: None Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Anterior segment surgery:</b> for purposes of this measure, CPT codes 65400-65756, 65760-66986, and 66999 <b>Toxic Anterior Segment Syndrome (TASS):</b> an acute, sterile post-operative anterior segment inflammation that develops following anterior segment surgery <b>Within 2 days of surgery:</b> within 2 days of surgery, where the day of surgery is day 0

## Unplanned Anterior Vitrectomy

<b>Description</b>	This measure is used to assess the percentage of cataract surgeries that have an unplanned anterior vitrectomy
<b>Numerator/Denominator</b>	Numerator: All cataract surgeries that had an unplanned anterior vitrectomy Denominator: All cataract surgeries
<b>Inclusions/Exclusions</b>	Numerator Exclusions: None Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Cataract surgery:</b> for purposes of this measure, CPT code 66982 (Cataract surgery, complex), CPT code 66983 (Cataract surgery w/IOL, 1 stage) and CPT code 66984 (Cataract surgery w/IOL, 1 stage) <b>Unplanned anterior vitrectomy:</b> an anterior vitrectomy that was not scheduled at the time of the patient's admission to the ASC

## Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant

<b>Description</b>	This measure is used to assess the number of ASC admissions (patients) that experience a wrong site, side, patient, procedure or implant
<b>Numerator/Denominator</b>	Numerator: All Ambulatory Surgery Center (ASC) admissions experiencing a wrong site, wrong side, wrong patient, wrong procedure or wrong implant Denominator: All ASC admissions
<b>Inclusions/Exclusions</b>	Numerator Inclusions: All ASC admissions experiencing a wrong site, wrong side, wrong patient, wrong procedure or wrong implant Numerator Exclusions: None Denominator Inclusions: All ASC admissions Denominator Exclusions: None
<b>Data Element Definitions</b>	<b>Admission:</b> completion of registration upon entry into the facility <b>Wrong:</b> not in accordance with intended site, side, patient, procedure or implant