CESQIP QCDR
2018 Non-MIPS
Measure Detail

January 3rd, 2018
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**Title:**

POST-OPERATIVE HYPOCALCEMIA AFTER THYROIDECTOMY SURGERY

**Number/Code:**

CESQIP1

**Measure Developer:**

CESQIP

**Description:**

The number or percent of patients with low calcium levels or negligible parathyroid hormone values reported at 30 days or more post-operatively.

**Inverse Measure:**

Yes

**Disclaimer:**

These performance measures are not standards and do not establish a standard of medical care.

**NQS Domain:**

Effective Clinical Care

**Measure Type:**

Outcome

**Denominator:**

All cases of thyroid surgery.
Denominator Exclusions:
None

Numerator:
Cases with low lab values and/or need for replacement designated by "Clinical Concern for Hypoparathyroidism = Yes" present at 30 day post op or any longitudinal period following. Concern for hypoparathyroidism based on excess calcium and/or vitamin D supplementation that is increased in intensity or duration over routine prophylactic supplementation; low calcium and/or PTH levels. Low defined as below lower end of normal value.

Numerator Exclusions:
N/A

Denominator Exceptions:
None
Title:

RELATED READMISSION FOR THYROID OR PARATHYROID RELATED PROBLEMS

Number/Code:

CESQIP2

Measure Developer:

CESQIP

Description:

Track all surgery related readmissions within 30 days after index surgery where reason for readmission is any of the following:

1. Hypocalcemia
2. Hematoma
3. Seroma
4. Wound infection
5. Rash
6. Dehydration
7. Lymphatic or thoracic duct leak
8. Suspected recurrent laryngeal nerve neuropraxia or voice hoarseness
9. Dysphagia
10. Pain
11. Tracheal injury or perforation
12. Esophageal injury or perforation
13. Lower extremity complication (Phlebitis)
14. Deep venous thrombosis
15. Pulmonary embolism (including respiratory distress)
16. Pulmonary (asthma, URI, pneumonia)
17. Gastrointestinal (diarrhea, constipation, SBO)
18. Nausea and/or vomiting
19. Genitourinary (UTI, urinary retention)
20. Myocardial Event (Atrial fib, CHF, MI, CVA)
21. Psychiatric/Neurological (anxiety, syncope, dizziness)

Inverse Measure:

Yes
Disclaimer:
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NQS Domain:
Effective Clinical Care

Measure Type:
Outcome

Denominator:
All cases of thyroid OR parathyroid surgery.

Denominator Exclusions:
None

Numerator:
Patients where readmission within 30 days of index surgery is yes AND reason is a thyroid OR parathyroid related problem

Numerator Exclusions:
N/A

Denominator Exceptions:
None
Title:

PRE-OPERATIVE ULTRASOUND EXAM OF PATIENTS WITH THYROID CANCER

Number/Code:

CESQIP3

Measure Developer:

CESQIP

Description:

Documentation of use and efficacy of complete pre-operative cervical ultrasound exam in cancer patients.

Inverse Measure:

No

Disclaimer:

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NQS Domain:

Effective Clinical Care

Measure Type:

Process

Denominator:

All patients with diagnosis of thyroid cancer seen preoperative.

Denominator Exclusions:

None
Numerator:
Patients with documented cervical ultrasound exams completed preoperative.

Numerator Exclusions:
N/A

Denominator Exceptions:
Patients whose clinical course demands expedited operative intervention.
Title:
PERSISTENT HYPERCALCEMIA

Number/Code:
CESQIP4

Measure Developer:
CESQIP

Description:
Patients with persistent elevated calcium after surgery.

Inverse Measure:
Yes

Disclaimer:
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NQS Domain:
Effective Clinical Care

Measure Type:
Outcome

Denominator:
All cases of parathyroidectomy surgery for primary hyperparathyroidism as defined by preoperative disease characteristics diagnosis = Sporadic Primary Hyperparathyroidism.
Denominator Exclusions:

Hypercalcemia due to diagnoses other than hyperparathyroidism.

Numerator:

Patients with elevated calcium values (and unaltered pth values) designated by Clinical Concern for Persistent/Recurrent Hyperparathyroidism = Yes documented by 30 day post op.

Numerator Exclusions:

N/A

Denominator Exceptions:

None
Title:

RELATED READMISSION FOR ADRENAL RELATED PROBLEMS

Number/Code:

CESQIP5

Measure Developer:

CESQIP

Description:

Track all surgery related readmissions within 30 days after index surgery where reason for readmission is any of the following:

1. Hematoma  
2. Adrenal Insufficiency  
3. Hypertension  
4. Pain  
5. Wound Infection  
6. Pneumonia  
7. Dehydration  
8. Respiratory Distress

Inverse Measure:

Yes

Disclaimer:

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NQS Domain:

Effective Clinical Care

Measure Type:

Outcome
Denominator:
All cases of adrenalectomy surgery.

Denominator Exclusions:
None

Numerator:
Patients where readmission within 30 days of index surgery is yes AND reason is an adrenal related problem.

Numerator Exclusions:
N/A

Denominator Exceptions:
None
Title:

VOCAL CORD DYSFUNCTION FOLLOWING THYROIDECTOMY

Number/Code:

CESQIP7

Measure Developer:

CESQIP

Description:

Vocal cord dysfunction following thyroidectomy

Inverse Measure:

Yes

Disclaimer:

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NQS Domain:

Effective Clinical Care

Measure Type:

Outcome

Denominator:

Cases of thyroid surgery that did not have preoperative vocal cord dysfunction

Denominator Exclusions:

Thyroid cases where the patient had preoperative vocal cord dysfunction
Numerator:
Cases with vocal cord dysfunction following thyroidectomy at 30 days post op that did not have preoperative vocal cord dysfunction

Numerator Exclusions:
N/A

Denominator Exceptions:
None
Title:
HEMATOMA REQUIRING EVACUATION FOLLOWING THYROIDECTOMY

Number/Code:
CESQIP8

Measure Developer:
CESQIP

Description:
Hematoma requiring evacuation following thyroidectomy

Inverse Measure:
Yes

Disclaimer:
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NQS Domain:
Effective Clinical Care

Measure Type:
Outcome

Denominator:
All cases of thyroid surgery

Denominator Exclusions:
None

**Numerator:**
Cases with hematoma requiring evacuation as an intervention 30 days or less post operative

**Numerator Exclusions:**
N/A

**Denominator Exceptions:**
None