2021 CESQIP QCDR
Measure Detail

January 5th, 2021
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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

Meaningful Measure Area:

Preventable Healthcare Harm

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

Number of performance rates required for measures:
1st Performance Rate

Risk-Adjusted:
Yes

High Priority:
Yes

High Priority Type:
Outcome
Proportional Measure:
Yes

Continuous Variable:
No

Ratio Measure:
No

Care Setting(s):
Ambulatory Care: Clinician Office/Clinic
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

Meaningful Measure Area:
Appropriate Use of Healthcare

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.

Number of performance rates required for measures:
1st Performance Rate

Risk-Adjusted:
No

High Priority:
No

High Priority Type:
N/A

Proportional Measure:
Yes

Continuous Variable:
No

**Ratio Measure:**
No

**Care Setting(s):**
Ambulatory Care: Clinician Office/Clinic
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

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NQS Domain:

Effective Clinical Care

Measure Type:

Outcome
Meaningful Measure Area:
Admissions and Readmissions to Hospitals

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

Number of performance rates required for measures:
1st Performance Rate

Risk-Adjusted:
Yes

High Priority:
Yes

High Priority Type:
Outcome

Proportional Measure:
Yes

Continuous Variable:
No

Ratio Measure:
No

Care Setting(s):
Ambulatory Care: Hospital
Title:

QPTH >50% REDUCTION AT END OF PROCEDURE

Number/Code:

CESQIP9

Measure Developer:

CESQIP

Description:

The percentage of patients where intra-operative PTH decreased by at least 50% from baseline

Inverse Measure:

No

Disclaimer:

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NQS Domain:

Effective Clinical Care

Measure Type:

Outcome

Meaningful Measure Area:

Preventable Healthcare Harm

Denominator:

All cases of parathyroid surgery where intraoperative PTH was utilized
Denominator Exclusions:
Cases where intraoperative PTH was not measured

Numerator:
The number of parathyroid cases where the intraoperative PTH declined by at least 50% from baseline

Numerator Exclusions:
None

Denominator Exceptions:
None

Number of performance rates required for measures:
1<sup>st</sup> Performance Rate

Risk-Adjusted:
Yes

High Priority:
Yes

High Priority Type:
Outcome

Proportional Measure:
Yes

Continuous Variable:
No
Ratio Measure:
No

Care Setting(s):
Ambulatory Care: Hospital