



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:

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 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:

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