



# 2022 CESQIP QCDR Measure Detail

December 17<sup>th</sup>, 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

**Includes Telehealth?**

No

**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:**

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: 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

**Disclaimer:**

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**NQS Domain:**

Effective Clinical Care

**Measure Type:**

Outcome

**Includes Telehealth?**

No

**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:**

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



**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

**Includes Telehealth?**

No

**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