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| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hop1 | Median Time to Fibrinolysis | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code is not on Table 1.1 * Cases with no ECG performed within one hour prior to ED arrival or in the ED prior to transfer * Cases with no documentation of ST elevation on the ECG done closest to ED arrival * Patients who did not receive fibrinolytic therapy * Cases with any of the following invalid   + Date fibrinolytic therapy was administered   + Time fibrinolytic therapy was administered   + Time of arrival at the OP department or ED of this VAMC * Fibrinolytic therapy was initiated >360 minutes after arrival * Patients with fibrinolytic therapy initiated >30 and <=360 minutes after arrival and there is a clinician documented reason for a delay in initiating fibrinolytic therapy | Score=median time for cases in the denominator with fibrinolytic therapy initiated >=0 and <=30 minutes after hospital arrival and >30and <=360 minutes with no documentation of a reason for a delay in initiating fibrinolytic therapy |

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| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hop2 | FibrinolyticTherapy Received within 30 Minutes of ED Arrival | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code is not on Table 1.1 * Cases with no ECG performed within one hour prior to ED arrival or in the ED prior to transfer * Cases with no documentation of ST elevation on the ECG done closest to ED arrival * Patients who did not receive fibrinolytic therapy * Fibrinolytic therapy was initiated >360 minutes after arrival * Patients with fibrinolytic therapy initiated >30 and <=360 minutes after arrival and there is a clinician documented reason for a delay in initiating fibrinolytic therapy | Cases included in the denominator will pass if:   * The following are valid   + Date fibrinolytic therapy was administered   + Time fibrinolytic therapy was administered   + Time of arrival at the OP department or ED of this VAMC   And   * Fibrinolytic therapy was received within 30 minutes of ED arrival |

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| Mnemonic | Description | Denominator | Numerator |
| hop3a | Median Time to Transfer to Another Facility for Acute Coronary Intervention-Overall Rate | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code is not on Table 1.1 * Cases with no ECG performed within one hour prior to ED arrival or in the ED prior to transfer * Cases with no documentation of ST elevation on the ECG done closest to ED arrival * Patients who received fibrinolytic therapy * Patients who were admitted to observation status prior to transfer * Patients who were transferred from this facility’s ED to another facility for reasons other than acute coronary intervention or reason for transfer is unable to be determined * Cases with the date the patient departed the ED unable to be determined * Cases with the time the patient departed the ED unable to be determined * Cases with the time the patient arrived in the ED or OP department unable to be determined | Score=median time for all records in the denominator for date/time of ED departure minus date/time of ED arrival |

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| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hop3b | Median Time to Transfer to Another Facility for Acute Coronary Intervention-Reporting Measure | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code is not on Table 1.1 * Cases with no ECG performed within one hour prior to ED arrival or in the ED prior to transfer * Cases with no documentation of ST elevation on the ECG done closest to ED arrival * Patients who received fibrinolytic therapy * Patients who were admitted to observation status prior to transfer * Patients who were transferred from this facility’s ED to another facility for reasons other than acute coronary intervention or reason for transfer is unable to be determined * Cases with the date the patient departed the ED unable to be determined * Cases with the time the patient departed the ED unable to be determined * Cases with the time the patient arrived in the ED or OP department unable to be determined * Cases with a reason documented by a physician/APN/PA or pharmacist for a reason for not administering fibrinolytics, the patient has a diagnosis of cardiogenic shock, or fibrinolytic therapy was refused | Score=median time for all records in the denominator for date/time of ED departure minus date/time of ED arrival |

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| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hop3c | Median Time to Transfer to Another Facility for Acute Coronary Intervention-Quality Improvement Measure | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code is not on Table 1.1 * Cases with no ECG performed within one hour prior to ED arrival or in the ED prior to transfer * Cases with no documentation of ST elevation on the ECG done closest to ED arrival * Patients who received fibrinolytic therapy * Patients who were admitted to observation status prior to transfer * Patients who were transferred from this facility’s ED to another facility for reasons other than acute coronary intervention or reason for transfer is unable to be determined * Cases with the date the patient departed the ED unable to be determined * Cases with the time the patient departed the ED unable to be determined * Cases with the time the patient arrived in the ED or OP department unable to be determined * Cases with no documentation of a reason for not administering thrombolytic therapy | Score=median time for all records in the denominator for date/time of ED departure minus date/time of ED arrival |

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| **Mnemonic** | **Description** | **Denominator** | **Numerator** |
| hop4 | Aspirin at Arrival | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code or a secondary diagnosis code is not on Table 1 or 1.1a * The principal diagnosis code or a secondary diagnosis code is on Table 1.1a and there is no clinician documentation that the chest pain was presumed to be cardiac in origin * the patient did not receive aspirin timely and there is a documentation of a reason for not administering aspirin on arrival | Cases included in the denominator will pass if:   * The patient received aspirin within 24 hours prior to ED arrival or aspirin was administered in the ED prior to transfer |
| hop5 | Median Time to ECG | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * The principal diagnosis code is not on Table 1.1 or Table 1.1a and a secondary diagnosis code is not on Table 1.1a * The principal diagnosis code or a secondary diagnosis code is on Table 1.1a and there is no clinician documentation that the chest pain was presumed to be cardiac in origin * Cases with no ECG performed within one hour prior to ED arrival or in the ED prior to transfer * Time of arrival is not a valid time | Score is the median time from date/time of arrival to date/time ECG was performed. |

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| **Mnemonic** | **Description** | **Denominator** | **Numerator** |
| hop18a | Median Time from ED Arrival to ED Departure for Discharged ED Patients-Overall Rate | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was expired, left AMA, or unable to be determined * Arrival date is <01/01/2017 or >12/31/2017 * Time of arrival is not a valid time * Date the patient departed from the ED is not valid * Time the patient departed from the ED is not valid | Score is the median time from ED arrival to ED departure for cases included in the denominator |
| hop18b | Median Time from ED Arrival to ED Departure for Discharged ED Patients-Reporting Measure | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Cases with a code on Table 7.01 * Discharge disposition was expired, left AMA, or unable to be determined * Arrival date is <01/01/2017 or >12/31/2017 * Time of arrival is not a valid time * Date the patient departed from the ED is not valid * Time the patient departed from the ED is not valid | Score is the median time from ED arrival to ED departure for cases included in the denominator |
| hop18c | Median Time from ED Arrival to ED Departure for Discharged ED Patients-Psychiatric/Mental Health | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Cases without a code on Table 7.01 * Discharge disposition was expired, left AMA, or unable to be determined * Arrival date is <01/01/2017 or >12/31/2017 * Time of arrival is not a valid time * Date the patient departed from the ED is not valid * Time the patient departed from the ED is not valid | Score is the median time from ED arrival to ED departure for cases included in the denominator |

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| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hop18d | Median Time from ED Arrival to ED Departure for Discharged ED Patients-Transfer Patients | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Discharge disposition was anything other than general inpatient care or DOD or VHA hospital * Arrival date is <01/01/2017 or >12/31/2017 * Time of arrival is not a valid time * Date the patient departed from the ED is not valid * Time the patient departed from the ED is not valid | Score is the median time from ED arrival to ED departure for cases included in the denominator |
| hop20 | Door to Diagnostic Evaluation by a Qualified Medical Professional | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Arrival date is <01/01/2017 or >12/31/2017 * Discharge disposition was expired or unable to be determined * Date the patient had the first direct personal exchange with the physician/APN/PA or institutionally credentialed provider is not valid * Time the patient had the first direct personal exchange with the physician/APN/PA or institutionally credentialed provider is not valid * Time of arrival is not a valid time | Score is the median time from ED arrival to the patient’s first direct personal exchange with the physician/APN/PA or institutionally credentialed provider for cases included in the denominator |
| hop21 | Median Time to Pain Management for Long Bone Fracture | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Arrival date is <01/01/2017 or >12/31/2017 * Cases without a code on Table 9.0 * Discharge disposition was expired, left AMA, or unable to be determined * Patients who did not receive intranasal or parenteral pain medication during this ED visit * Time of arrival is not a valid time * Date of pain medication administration is not valid * Time of pain medication administration is not valid | Score is the median time to administration of pain medication for patients in the denominator |

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| Mnemonic | **Description** | **Denominator** | **Numerator** |
| hop23 | Head CT/MRI Results for Acute Ischemic or Hemorrhagic Stroke-Patients Who Received Scan within 45 Minutes of Arrival | Includes all cases except:   * Cases without a valid E/M code on Table 1.0 * Arrival date is <01/01/2017 or >12/31/2017 * Cases without a code on Table 8.0 * Discharge disposition was expired, left AMA, or unable to be determined * A CT or MRI scan of the head was not ordered during the ED visit * There is no documentation of last known well * Patients with last known well time more than 120 minutes prior to arrival at the OP or ED of this VAMC | Cases included in the denominator will pass if:   * Time of arrival is a valid time * There is documentation of last know well and   + the date last known well is a valid date and   + the time last known well is a valid time and * Date the head CT or MRI interpretation was completed/ reported is a valid date and * Time the head CT or MRI interpretation was completed/ reported is a valid time and * The head CT or MRI interpretation was completed/ reported within 45 minutes of arrival in the OP department or ED of this VAMC |