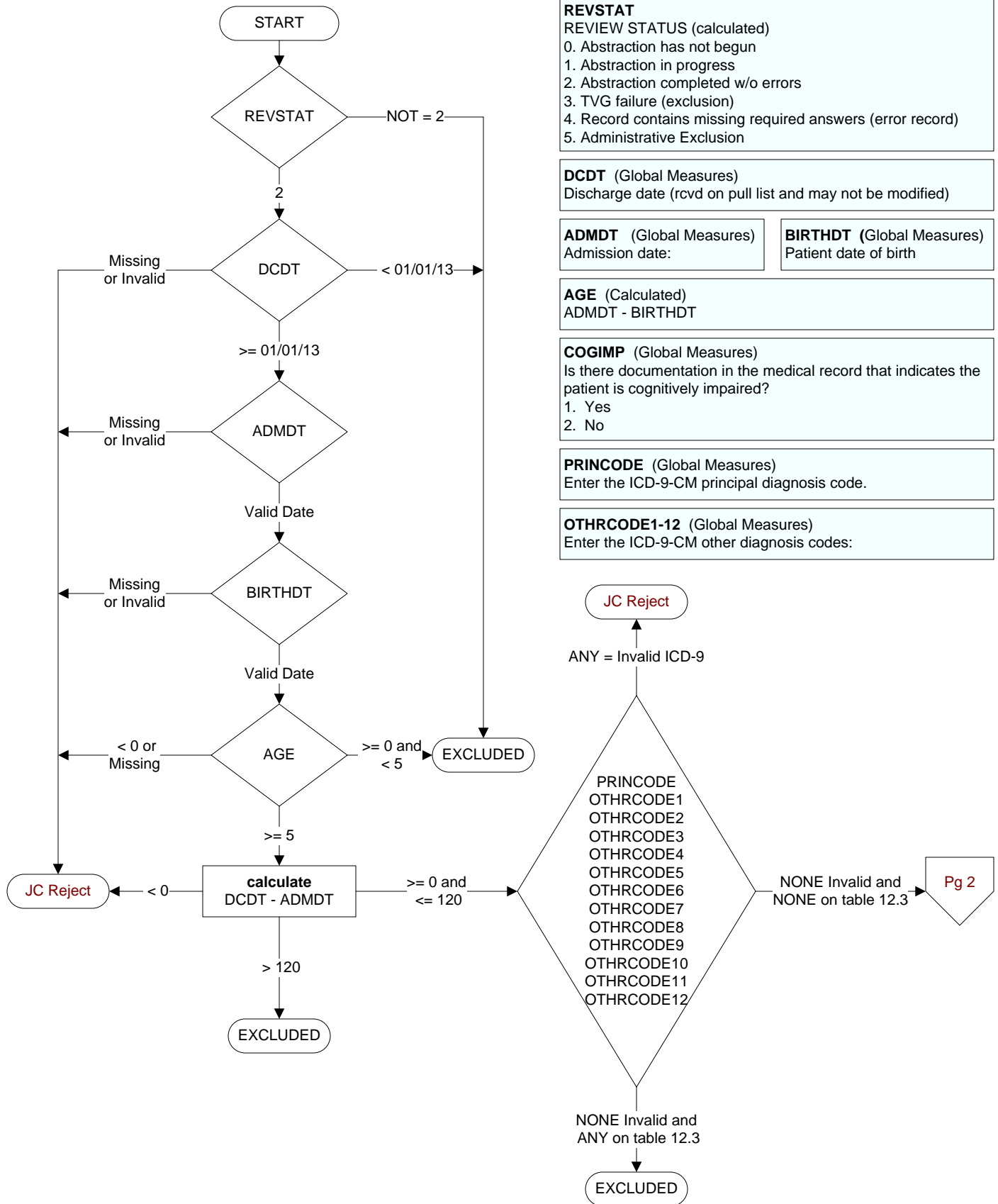
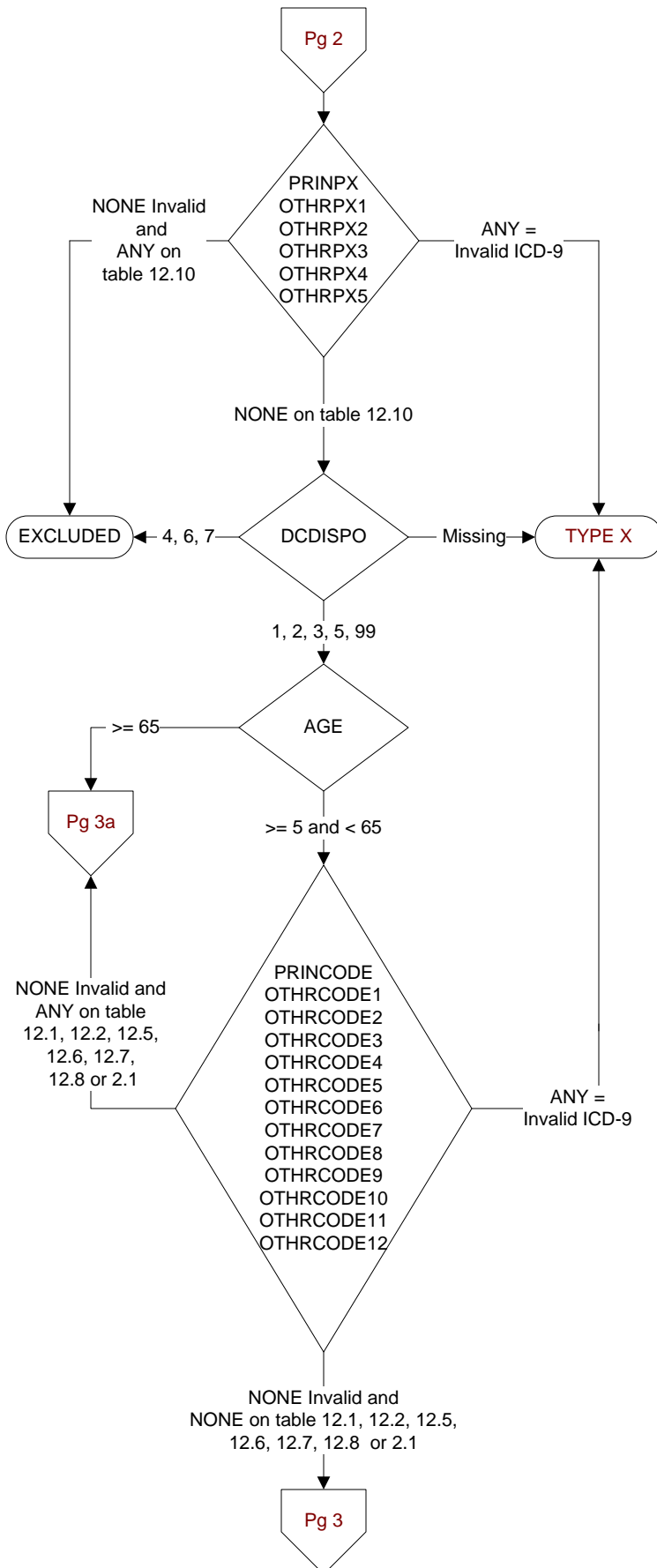


Global 1q14 - IMM1 - Pneumococcal Immunization (PPV23) - Overall Rate (IMM-1a)



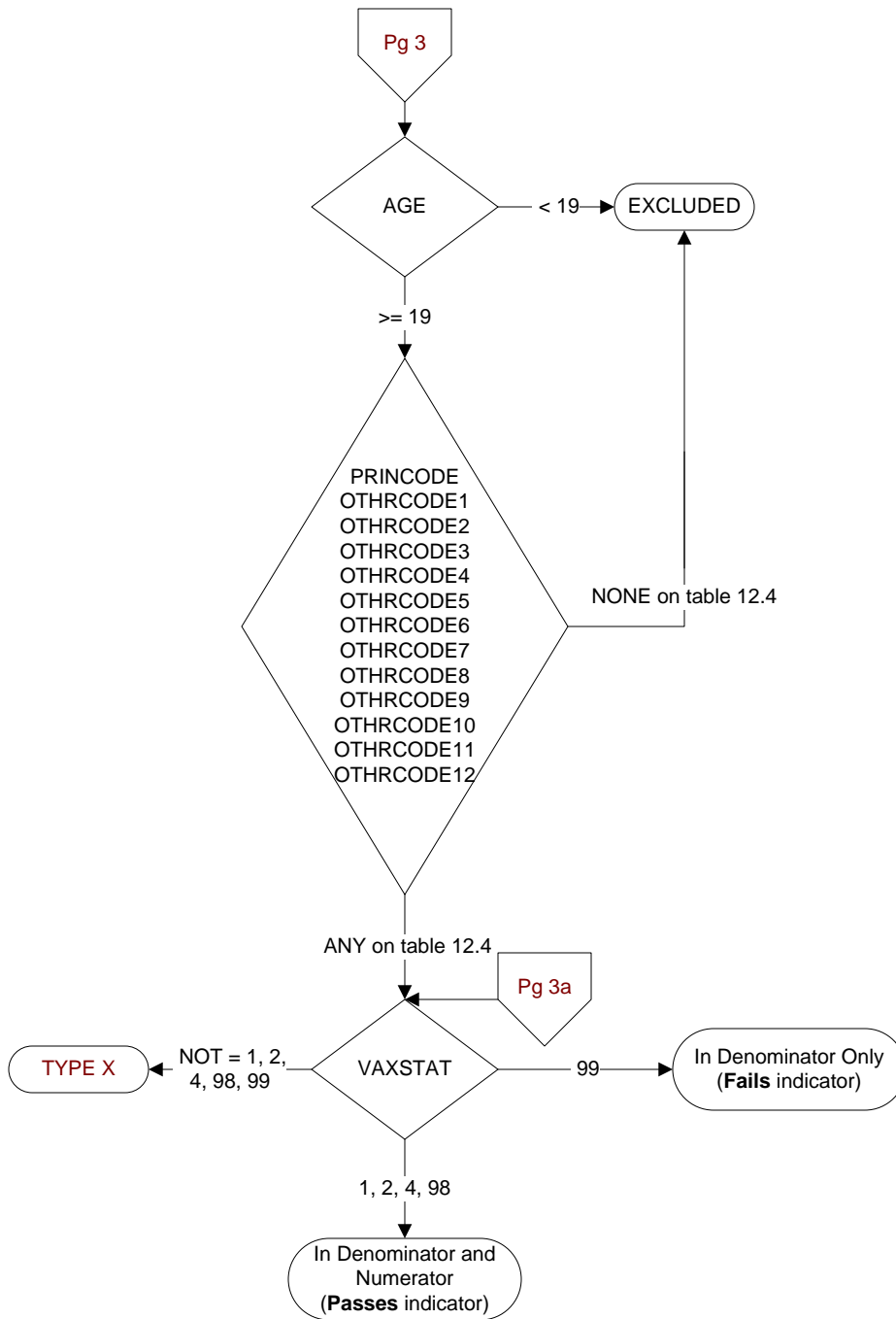


PRINPX (Global Measures)
Enter the ICD-9-CM principal procedure code

OTHRPX1-5 (Global Measures)
Enter the ICD-9-CM other procedure codes

DCDISPO (Global Measures)
What was the patient's discharge disposition on the day of discharge?

1. Home
 - Assisted Living Facilities (ALFs) - includes assisted living care at nursing home/facility
 - Court/Law Enforcement – includes detention facilities, jails, and prison
 - Home – includes board and care, domiciliary, foster or residential care, group or personal care homes, retirement communities, and homeless shelters
 - Home with Home Health Services
 - Outpatient Services including outpatient procedures at another hospital, outpatient Chemical Dependency Programs and Partial Hospitalization
2. Hospice – Home (or other home setting as listed in #1 above)
3. Hospice – Health Care Facility
 - General Inpatient and Respite, Residential and Skilled Facilities, and Other Health Care Facilities
4. Acute Care Facility
 - Acute Short Term General and Critical Access Hospitals
 - Cancer and Children's Hospitals
 - Department of Defense and Veteran's Administration Hospitals
5. Other Health Care Facility
 - Extended or Immediate Care Facility (ECF/ICF)
 - Long Term Acute Care Hospital (LTACH)
 - Nursing Home or Facility including Veteran's Administration Nursing Facility
 - Psychiatric Hospital or Psychiatric Unit of a Hospital
 - Rehabilitation Facility including Inpatient Rehabilitation Facility/Hospital or Rehabilitation Unit of a Hospital
 - Skilled Nursing Facility (SNF), Sub-Acute Care or Swing Bed
 - Transitional Care Unit (TCU)
6. Expired
7. Left Against Medical Advice/AMA
99. Not documented or unable to determine



VAXSTAT (Global Measures)

What is the patient's pneumococcal vaccination status?

1. Pneumococcal vaccination was given during this hospitalization
2. Pneumococcal vaccination was received in the past, not during this hospitalization
4. Documentation of:
 - Allergy/sensitivity to pneumococcal vaccine, OR
 - Is not likely to be effective because of bone marrow transplant within the past 12 months, OR
 - Currently receiving a scheduled course of chemotherapy or radiation therapy, or received a chemotherapy or radiation during this hospitalization or less than 2 weeks prior, OR
 - Received the shingles vaccine (Zostavax) within the last 4 weeks
95. Not applicable
98. Documentation of patient's or caregiver's refusal of pneumococcal vaccine
99. None of the above/not documented/unable to determine from medical record documentation