

REVSTAT

REVIEW STATUS (not abstracted)

- 0. Abstraction has not begun
- 1. Abstraction in progress
- 2. Abstraction completed w/o errors
- 3. TVG failure (exclusion)
- 4. Record contains missing required answers (error record)
- 5. Administrative exclusion from all measures

CATNUM

Sample category

53. Surgical Care

55. Type 10 Surgery Cases

SIADMDT (SCIP)

Date of admission to inpatient care:

BIRTHDT

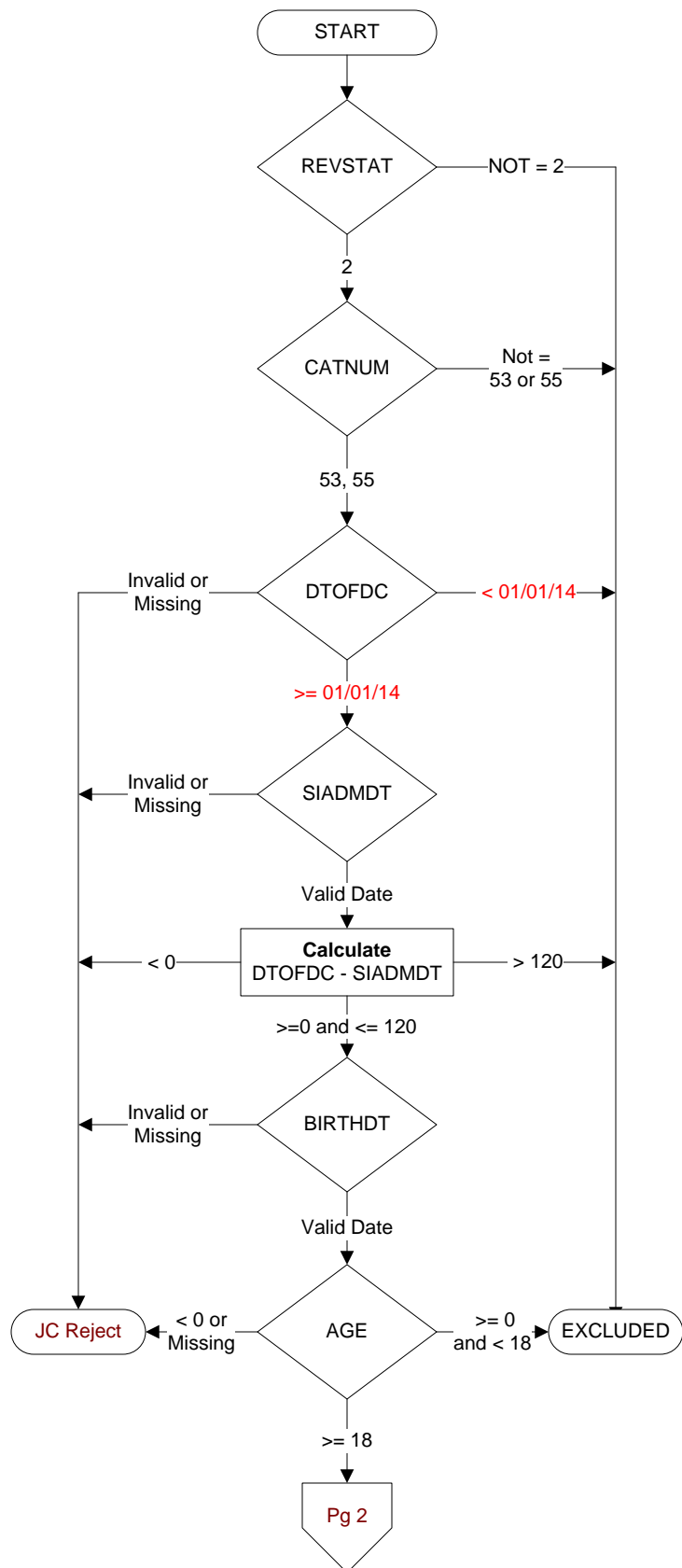
Patient date of birth. Received on pull list.

DTOFDC (SCIP)

Discharge Date

AGE

Calculated field = SIADMDT - BIRTHDT



PRINPX (SCIP)

Enter the ICD-9-CM principal procedure code and date the procedure was performed
(date is stored in PRINPXD)

PRINCODE (SCIP)

Enter the ICD-9-CM principal diagnosis code:

CLNTRIAL (SCIP)

During this hospital stay, was the patient enrolled in a clinical trial in which patients undergoing surgery were being studied?

1. Yes
2. No

ANEBEGDT (SCIP)

Enter the date the anesthesia was started for the principal procedure.

INFECDOC (SCIP)

Did the patient have an infection during this hospitalization prior to the principal procedure?

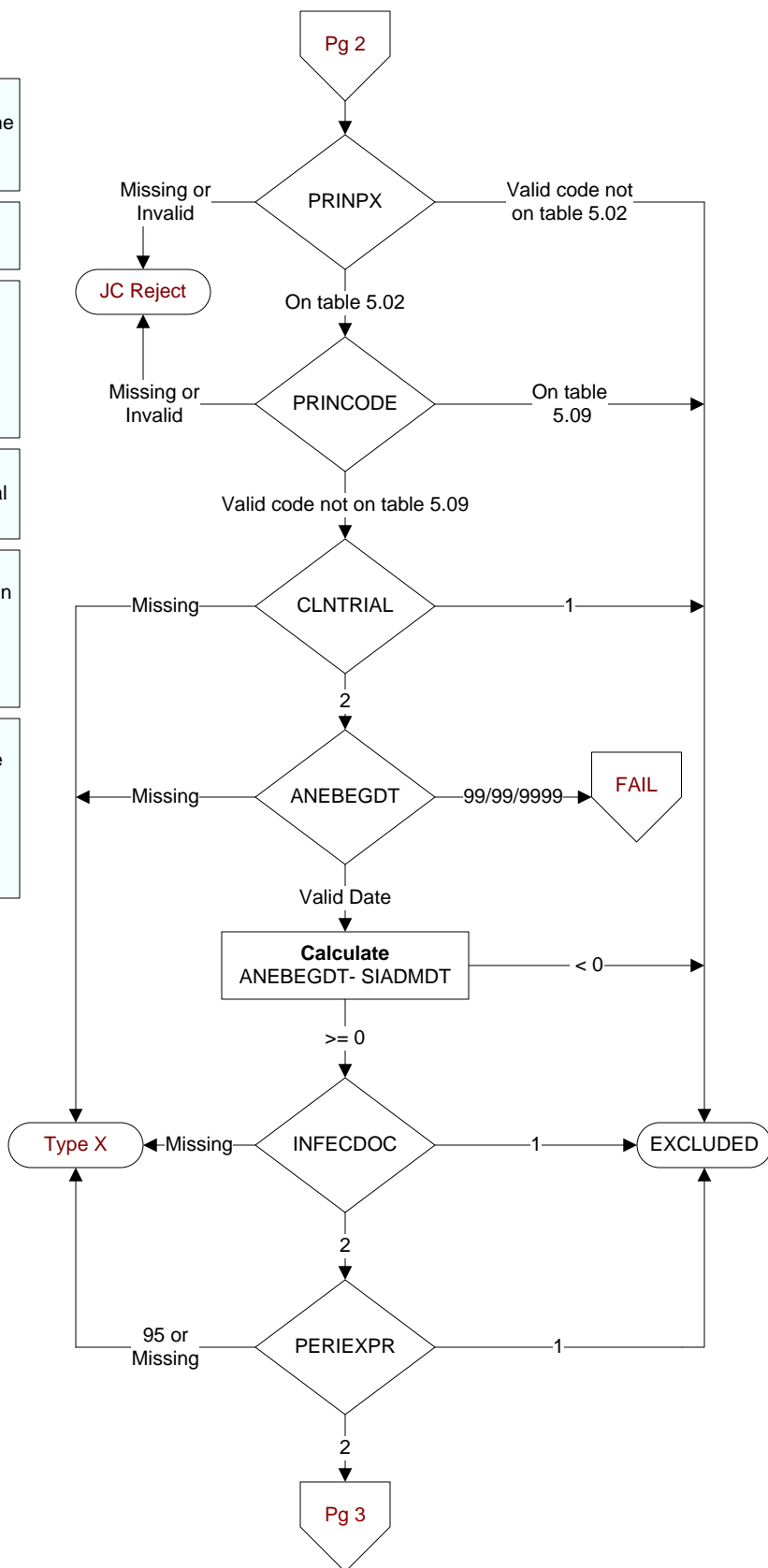
(Requires Physician, APN, or PA documentation)

- 1 = Yes
- 2 = No

PERIEXPR (SCIP)

Is there documentation that the patient expired during the timeframe from surgical incision through discharge from the post anesthesia care/ recovery area?

1. Yes
2. No
95. Not applicable



Pg 3

INCIZEDT (SCIP)

Enter the date the incision was made for the principal procedure.

Were there any other procedures requiring general or spinal/epidural anesthesia that occurred within 3 days (4 days for CABG or Other Cardiac Surgery) prior to or after the principal procedure during this hospital stay?
Indicate all that apply: (SCIP)

- OTHR SURG1.** CABG
OTHR SURG2. Other Cardiac surgery (not CABG)
OTHR SURG3. Hip arthroplasty
OTHR SURG4. Knee arthroplasty
OTHR SURG5. Colon surgery
OTHR SURG6. Hysterectomy
OTHR SURG7. Vascular surgery
OTHR SURG8. Other
OTHR SURG99. No other procedure performed within this timeframe

-1 Yes
0 No

RECVANTI (SCIP)

Did the patient receive an antibiotic via an appropriate route? (PO, NG, PEG, IV, or perfusion)

1. Antibiotic received only within 24 hours prior to arrival or the day prior to arrival and not during hospital stay
2. Antibiotic received within 24 hours prior to arrival or the day prior to arrival and during hospital stay.
3. Antibiotic received only during hospital stay (not prior to arrival)
4. Antibiotic not received or unable to determine from medical record documentation

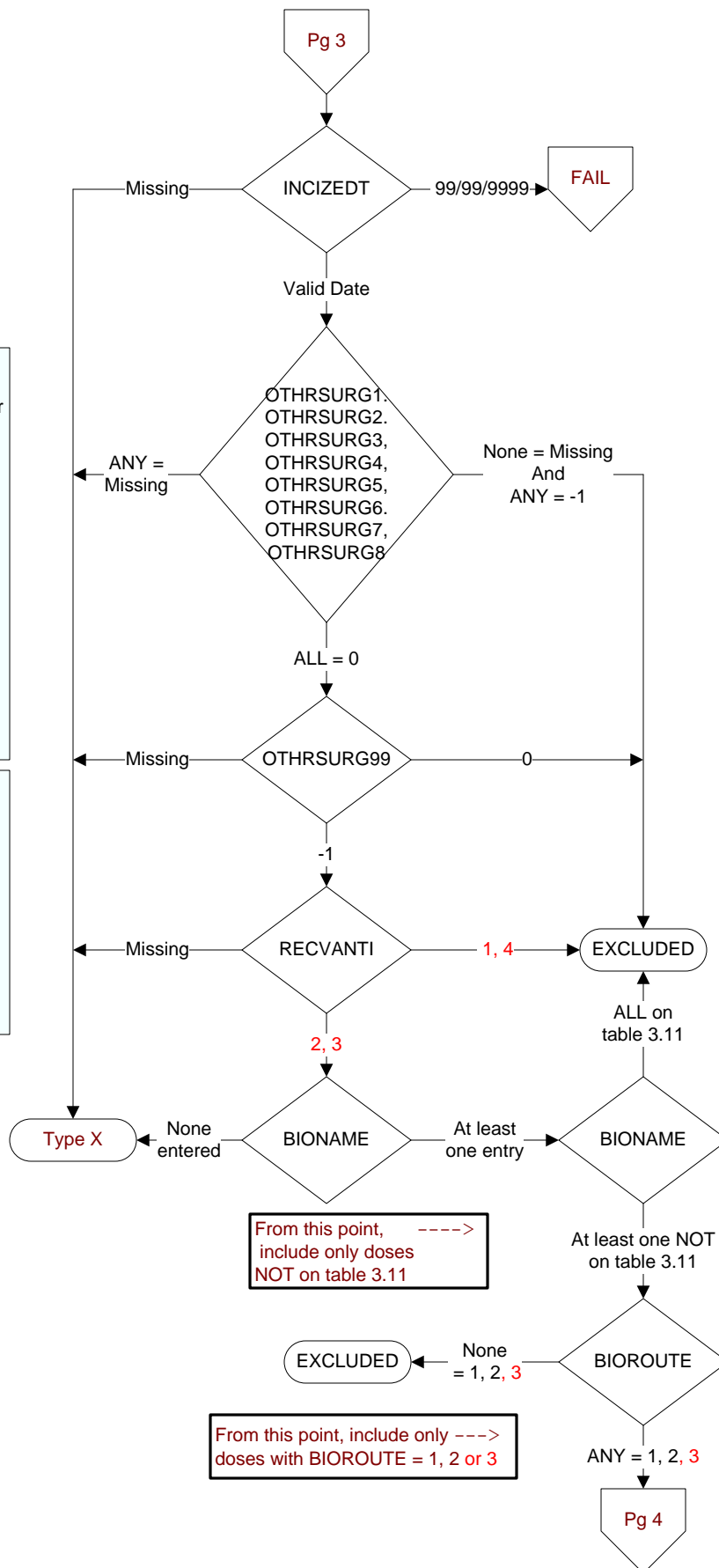
BIONAME (SCIP)

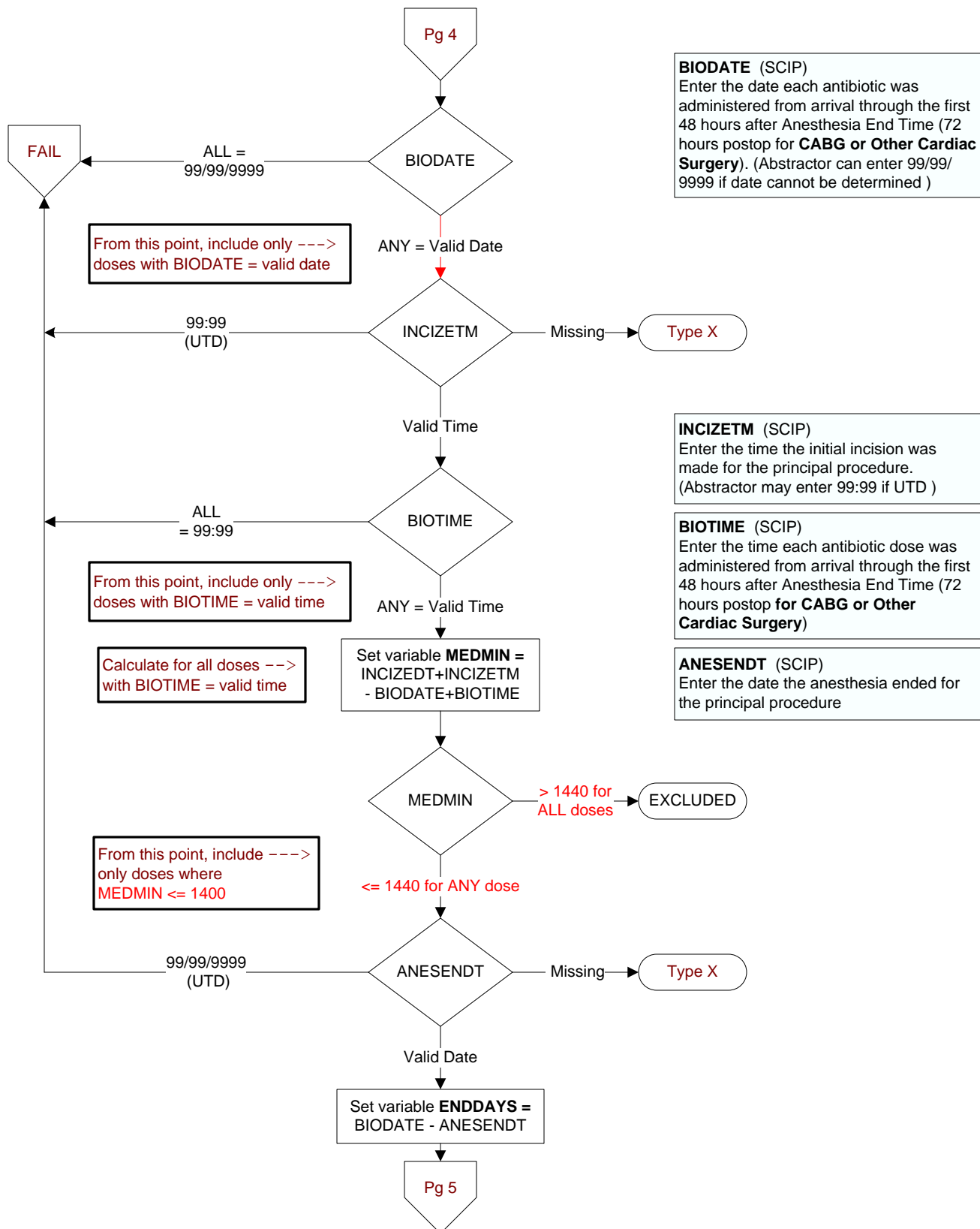
Document the name of each antibiotic dose(s) administered from arrival through the first 48 hours after Anesthesia End Time (72 hours postop for CABG or Other Cardiac Surgery).

BIOROUTE (SCIP)

Enter the route of administration of each antibiotic dose that was administered from arrival through the first 48 hours after Anesthesia End Time (72 hours postop for CABG or Other Cardiac Surgery).

1. PO, NG, PEG tube (Oral)
2. IV (Intravenous, perfusion)
3. IM (Intramuscular)
99. UTD (Unable to determine route)





Pg 5

ANENDTM (SCIP)

Enter the time the anesthesia ended for the principal procedure.

YEXTABX1 (SCIP)

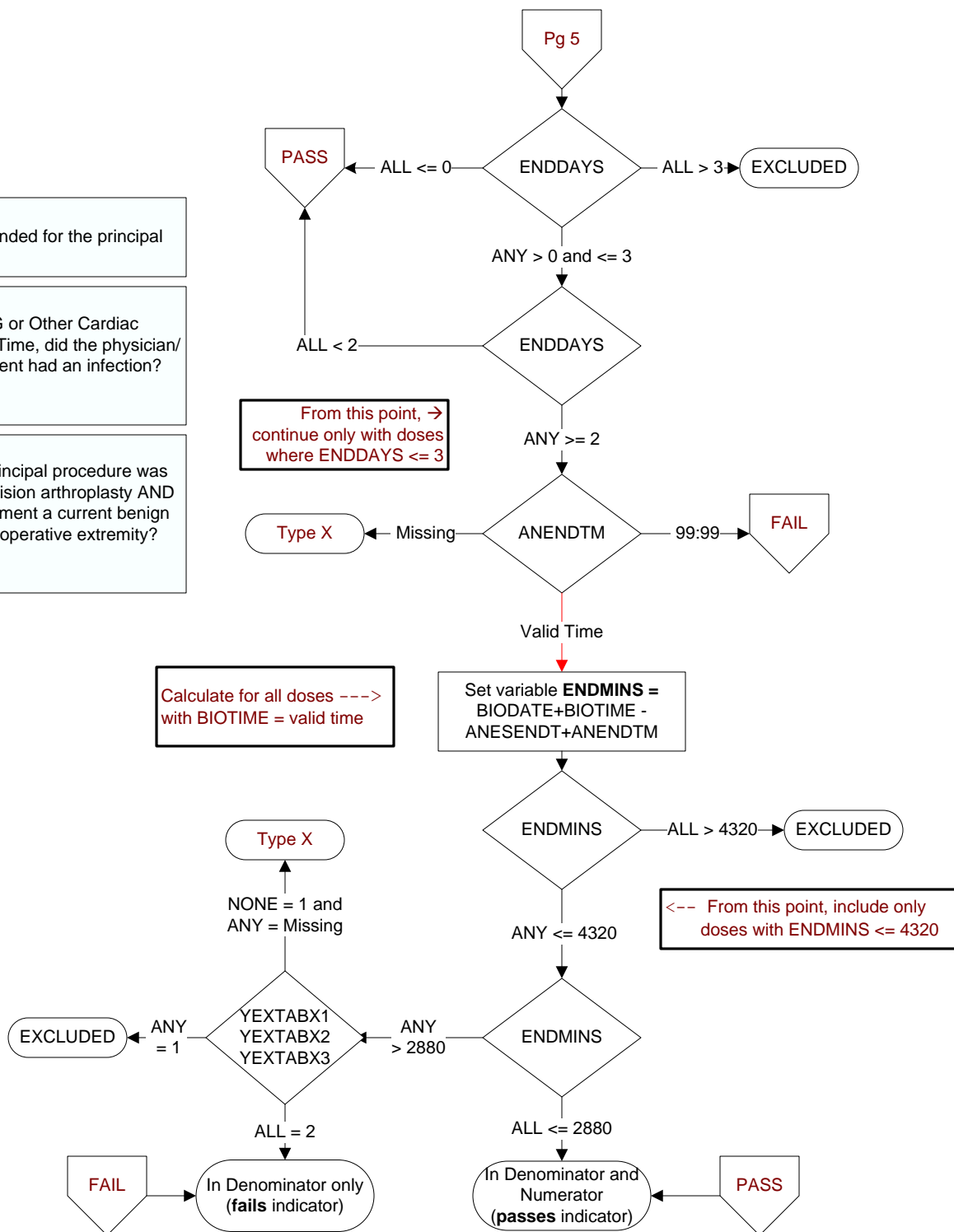
Within 2 days (3 days for CABG or Other Cardiac Surgery) after Anesthesia End Time, did the physician/APN/PA document that the patient had an infection?

1. Yes
2. No

YEXTABX2 (SCIP)

Did the record document the principal procedure was a lower extremity original or revision arthroplasty AND did the physician/APN/PA document a current benign or malignant bone tumor of the operative extremity?

1. Yes
2. No

**YEXTABX3 (SCIP)**

Did the physician/APN/PA document any of the following reasons to extend antibiotics?

- Erythromycin was administered postoperatively for the purpose of increasing gastric motility; OR
- An antibiotic was administered postoperatively for the treatment of hepatic encephalopathy; OR
- An antibiotic was administered postoperatively as prophylaxis of Pneumocystis pneumonia (PCP); or Demeclocycline was administered postoperatively for the treatment of syndrome of inappropriate antidiuretic hormone hypersecretion (SIADH) or hyponatremia

1. Yes
2. No