

## Document Links:

[VTE Instrument](#)

**CATNUM** (rcvd on pull list)  
Sample category number  
66 – Principal VTE sub-population  
67 – Secondary VTE sub-population

**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  
5. Administrative exclusion from all measures

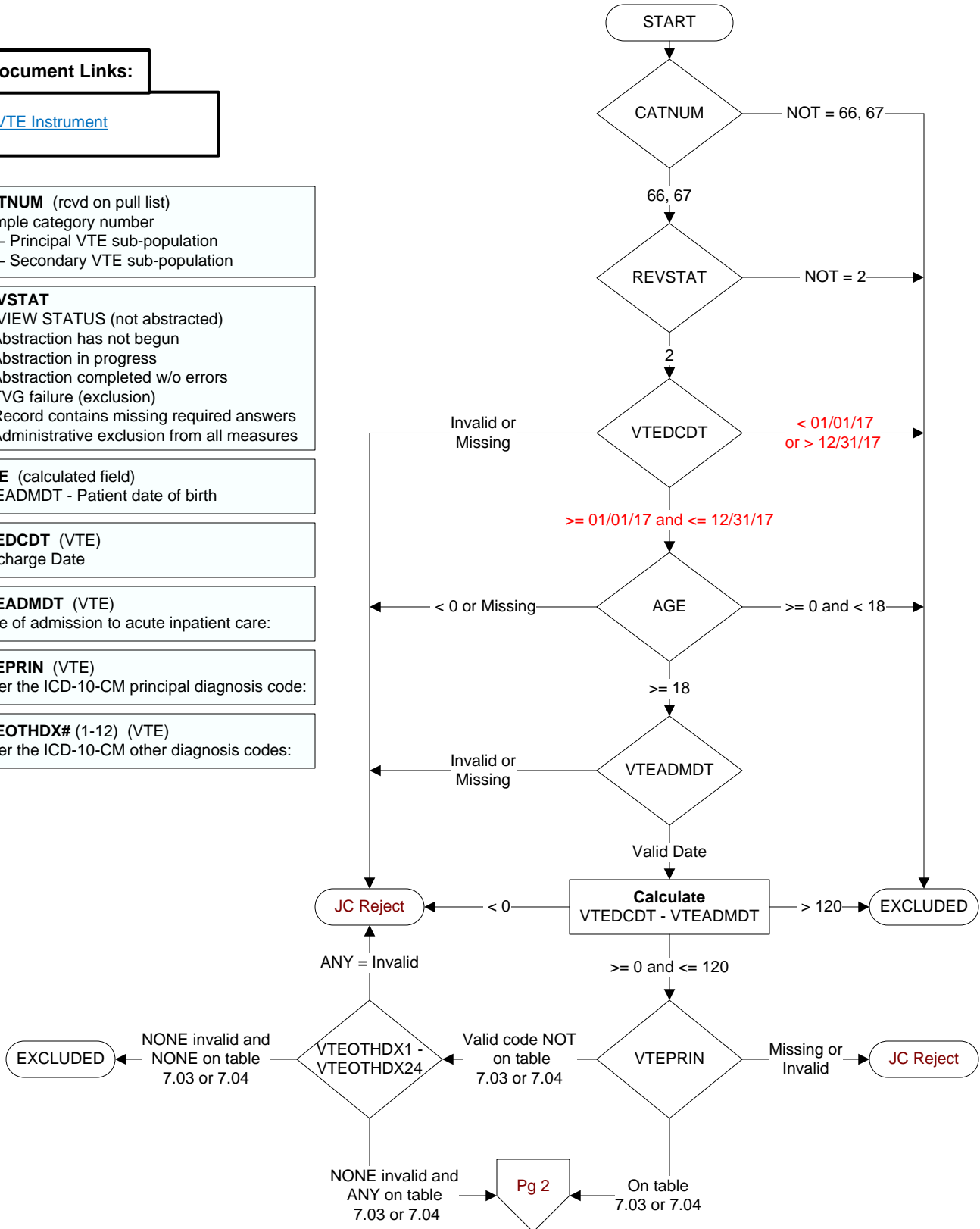
**AGE** (calculated field)  
VTEADMDT - Patient date of birth

**VTEDCDT** (VTE)  
Discharge Date

**VTEADMDT** (VTE)  
Date of admission to acute inpatient care:

**VTEPRIN** (VTE)  
Enter the ICD-10-CM principal diagnosis code:

**VTEOHDX#** (1-12) (VTE)  
Enter the ICD-10-CM other diagnosis codes:



**CLNTRIAL (VTE)**

During this hospital stay, was the patient enrolled in a clinical trial in which patients with venous thromboembolism (VTE) were being studied?

1. Yes
2. No

**VTETEST (VTE)**

Is there documentation that a diagnostic test for VTE was performed within four days prior to arrival or anytime during the hospitalization?

**VTE Diagnostic testing includes the following (ALL Inclusive):**

- Compression Ultrasound/Vascular Ultrasound/Duplex ultrasound (DUS)/ Venous Doppler of lower extremities
- Computed tomography (CT) Angiogram/Pulmonary Angiogram of Chest
- Computed tomography (CT) of thorax (chest), abdomen/pelvis, or lower extremity leg veins with IV contrast
- Magnetic resonance imaging (MRI or MRV) of the thorax(chest), abdomen/pelvis, or lower extremity leg veins
- Nuclear Medicine Pulmonary Scan/ventilation/perfusion (V/Q) lung scan
- Pulmonary arteriography/angiography/angiogram
- Venography/Venogram of pelvic, femoral or other lower extremity veins using IV contrast material

1. Yes
2. No

**POSVTE (VTE)**

Is there physician/APN/PA documentation that the VTE Diagnostic Test confirmed a diagnosis of VTE in one of the defined locations within four calendar days prior to arrival, or anytime during hospitalization?

**VTE Confirmed in Defined Locations:**

- **Pulmonary Emboli (PE)**
- **Deep Vein Thrombosis (DVT) located in common femoral vein; Common Iliac; External iliac vein; Femoral/superficial femoral vein; inferior vena cava (IVC); Internal iliac, popliteal vein; Profunda/deep femoral vein.**

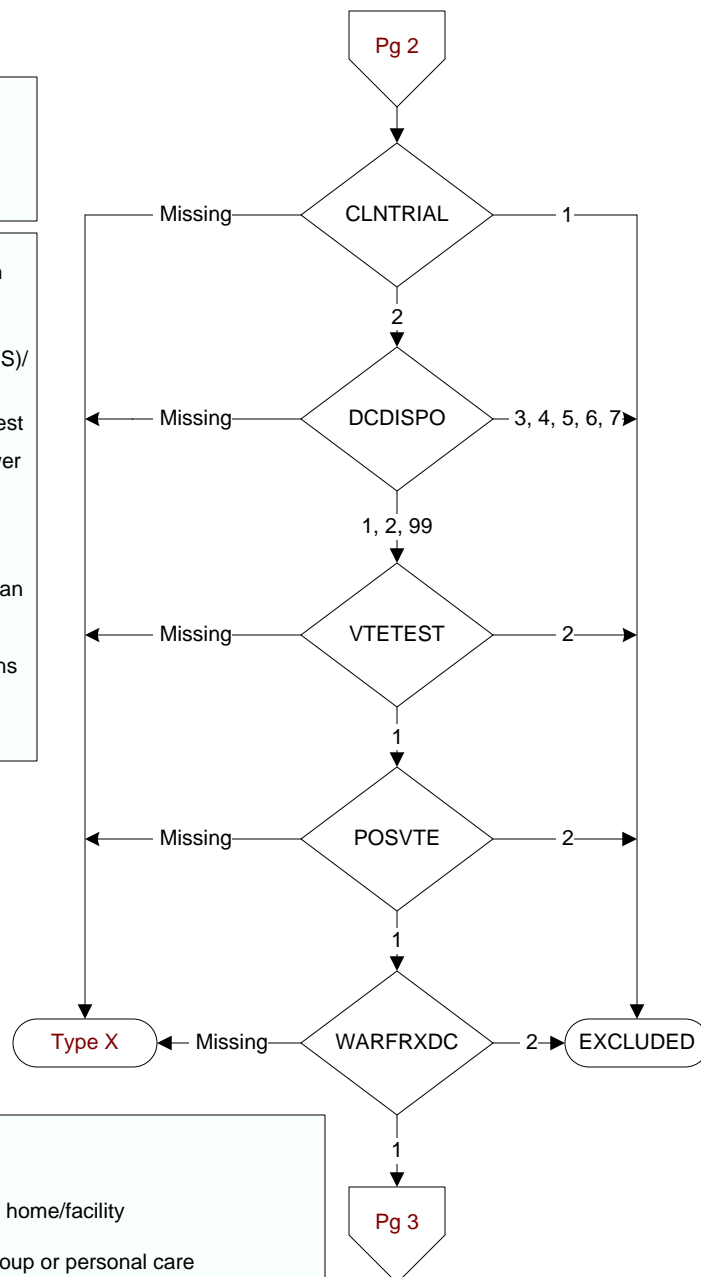
1. Yes
2. No or unable to determine from medical record documentation

**DCDISPO (VTE)**

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 facilities 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)
  - Veteran's Home
6. Expired
7. Left Against Medical Advice/AMA
99. Not documented or unable to determine

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**WARFRXDC (VTE)**

Is there documentation that warfarin was prescribed at discharge?

1. Yes
2. No

**PTEDCOM (VTE)**

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address **compliance issues related to warfarin therapy** prescribed after discharge?

**Must include BOTH of the following:**

- The importance of taking warfarin as instructed; and
- The importance of monitoring warfarin with scheduled PT/INR blood draws.

1. Yes
2. No

**PTEDIET (VTE)**

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address **dietary advice related to warfarin therapy** prescribed after discharge?

**Must include BOTH of the following:**

- A "consistent amount" of foods with Vitamin K rather than avoidance should be advised; and
- Avoid major changes in dietary habits, or notify health professional before changing habits.

1. Yes
2. No

**PTEDFOLO (VTE)**

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address **follow-up monitoring related to warfarin therapy** prescribed after discharge?

1. Yes
2. No

**PTEDADR (VTE)**

Did the WRITTEN discharge instructions or other educational material given to the patient/caregiver address **potential for adverse drug reactions and interactions related to warfarin therapy** prescribed after discharge?

**Must include ALL of the following:**

- Diet and medications can affect the PT/INR level;
- Do not take or discontinue any medication or over-the-counter medication except on the advice of the physician or pharmacist; and
- Warfarin increases the risk of bleeding.

1. Yes
2. No

