Vaginal Birth After Cesarean (VBAC) Delivery Rate, Uncomplicated Technical Specifications

Inpatient Quality Indicators #22 (IQI #22)
AHRQ Quality Indicators™, Version 4.5, May 2013
Provider-Level Indicator
Type of Score: Rate

Description

Vaginal births per 1,000 deliveries by patients with previous Cesarean deliveries. Excludes deliveries with complications (abnormal presentation, preterm delivery, fetal death, multiple gestation diagnoses, or breech procedure).

[NOTE: The software provides the rate per previous Cesarean delivery. However, common practice reports the measure as per 1,000 previous Cesarean deliveries. The user must multiply the rate obtained from the software by 1,000 to report the number of vaginal births per 1,000 deliveries by patients with previous Cesarean deliveries.]

Numerator

Number of vaginal deliveries, identified by DRG or MS-DRG code, among cases meeting the inclusion and exclusion rules for the denominator.

Vaginal delivery DRG codes:

- 372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES
- 373 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES
- 374 VAGINAL DELIVERY W STERILIZATION &/OR D&C
- 375 VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C

Vaginal delivery MS-DRG codes:

- 767 VAGINAL DELIVERY W STERILIZATION &/OR D&C
- 768 VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C
- 774 VAGINAL DELIVERY W COMPLICATING DIAGNOSES
- 775 VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES

Denominator

All deliveries, identified by DRG or MS-DRG code, with any-listed ICD-9-CM diagnosis codes for previous Cesarean delivery.

Delivery DRG codes:

- 370 CESAREAN SECTION W CC
- 371 CESAREAN SECTION W/O CC
- 372 VAGINAL DELIVERY W COMPLICATING DIAGNOSES
Vaginal Birth After Cesarean (VBAC) Delivery Rate, Uncomplicated

**Delivery MS-DRG codes:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>765</td>
<td>CESAREAN SECTION W CC/MCC</td>
</tr>
<tr>
<td>766</td>
<td>CESAREAN SECTION W/O CC/MCC</td>
</tr>
<tr>
<td>767</td>
<td>VAGINAL DELIVERY W STERILIZATION &amp;/OR D&amp;C</td>
</tr>
<tr>
<td>768</td>
<td>VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &amp;/OR D&amp;C</td>
</tr>
</tbody>
</table>

**ICD-9-CM Previous Cesarean delivery diagnosis codes:**

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>65420</td>
<td>PREV C-DELIVERY UNSPEC</td>
</tr>
<tr>
<td>65421</td>
<td>PREV C-DELIVERY-DELIVRD</td>
</tr>
<tr>
<td>65423</td>
<td>PREV C-DELIVERY-ANTEPART</td>
</tr>
</tbody>
</table>

Exclude cases:

- with any-listed ICD-9-CM diagnosis codes for abnormal presentation, preterm, fetal death, or multiple gestation
- with any-listed ICD-9-CM procedure codes for breech
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Inpatient Quality Indicators Appendices:*

- Appendix A – Abnormal Presentation, Preterm, Fetal Death and Multiple Gestation Diagnosis Codes
- Appendix B – Breech Procedure Codes