Pressure Ulcer Rate

Pediatric Quality Indicators #2
Technical Specifications
Provider-Level Indicator
AHRQ Quality Indicators, Version 4.3, August 2011

Version 4.3a is a maintenance release of Version 4.3. The differences between the two versions are:
• Version 4.3a includes Version 29 of the Limited License edition of the 3M™ APR-DRG Grouper. This grouper corrects an issue found in Version 28 of the Limited License edition of the 3M™ APR-DRG Grouper. The grouper is only used with the Inpatient Quality Indicator (IQI) mortality measures. Version 4.3 includes Version 28 of the Limited License edition of the 3M™ APR-DRG Grouper, which was incorrectly assigning a Risk of Mortality (ROM) subclass for cases dated on or after 10/1/10.
• Version 4.3a allows users to calculate area-level indicators for years 2010 and 2011, correcting an issue previously identified in Version 4.3.

All other aspects of the software, including measure specifications, remain the same. Thus this document (related to Version 4.3) remains unchanged.

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM code of pressure ulcer in any secondary diagnosis field and ICD-9-CM code of pressure ulcer stage III or IV (or unstagable) in any secondary diagnosis field.

ICD-9-CM Pressure ulcer diagnosis codes:

7070* PRESSURE ULCER
70700 PRESSURE ULCER SITE NOS (OCT04)
70701 PRESSURE ULCER, ELBOW (OCT04)
70702 PRESSURE ULCER, UP BACK (OCT04)
70703 PRESSURE ULCER, LOW BACK (OCT04)
70704 PRESSURE ULCER, HIP (OCT04)
70705 PRESSURE ULCER, BUTTOCK (OCT04)
70706 PRESSURE ULCER, ANKLE (OCT04)
70707 PRESSURE ULCER, HEEL (OCT04)
70709 PRESSURE ULCER, SITE NEC (OCT04)

*No longer valid in FY2005

ICD-9-CM Pressure ulcer stage diagnosis codes*:

70723 PRESSURE ULCER, STAGE III
70724 PRESSURE ULCER, STAGE IV
70725 PRESSURE ULCER, UNSTAGEBL

* Valid for discharges on or after 10/1/2008

Denominator

All surgical and medical discharges under age 18 defined by specific DRGs or MS-DRGs.
See Pediatric Quality Indicators Appendices:
• Appendix A – Operating Room Procedure Codes
• Appendix B – Surgical Discharge DRGs
• Appendix C – Surgical Discharge MS-DRGs
• Appendix D – Medical Discharge DRGs
Appendix E – Medical Discharge MS-DRGs

Exclude cases:
- neonates
- with length of stay of less than 5 days
- with preexisting condition of pressure ulcer (see Numerator) (principal diagnosis or secondary diagnosis present on admission)
- in MDC 9 (Skin, Subcutaneous Tissue, and Breast)
- with an ICD-9-CM procedure code for debridement or pedicle graft before or on the same day as the major operating room procedure (surgical cases only)
- with an ICD-9-CM procedure code of debridement or pedicle graft as the only major operating room procedure (surgical cases only)
- Transfer from a hospital (different facility)
- Transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF)
- Transfer from another health care facility
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing discharge gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See Pediatric Quality Indicators Appendices:
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn
- Appendix J – Admission Codes for Transfers

ICD-9-CM Debridement or pedicle graft procedure codes:

- 8345 OTHER MYECTOMY 8671 CUT & PREP PEDICLE GRAFT
- 8622 EXC WOUND DEBRIDEMENT 8672 PEDICLE GRAFT ADVANCEMENT
- 8628 NONEXCIS DEBRIDEMENT WND 8674 ATTACH PEDICLE GRAFT NEC
- 8670 PEDICLE GRAFT/FLAP NOS 8675 REVISION OF PEDICLE GRAFT

Stratification

PDI 2 stratifies rates by high-risk vs. lower risk groups.

High risk group:

ICD-9-CM Hemiplegia, paraplegia, or quadriplegia diagnosis codes:

- 33371 ATHETOID CEREBRAL PALSY 3430 INFANTILE CEREBRAL PALSY, DIPLAGIC
- 3420 FLACCID HEMIPLEGIA 3431 INFANTILE CEREBRAL PALSY, HEMIPLEGIC
- 34200 FLCCD HMIPLGA UNSPF SIDE 3432 INFANTILE CEREBRAL PALSY, QUADRIPLAGIC
- 34201 FLCCD HMIPLGA DOMNT SIDE
- 34202 FLCCD HMIPLGA NONDMNT SDE
- 3421 SPASTIC HEMIPLEGIA 3433 INFANTILE CEREBRAL PALSY, MONOPLEGIC
- 34210 SPSTC HMIPLGA UNSPF SIDE
- 34211 SPSTC HMIPLGA DOMNT SIDE
- 34212 SPSTC HMIPLGA NONDMNT SDE
- 34280 OT SP HMIPLGA UNSPF SIDE 3434 INFANTILE CEREBRAL PALSY INFANTILE HEMIPLEGIA
- 34281 OT SP HMIPLGA DOMNT SIDE 3438 INFANTILE CEREBRAL PALSY OTHER SPECIFIED INFANTILE CEREBRAL PALSY
- 34282 OT SP HMIPLGA NONDMNT SDE
- 3429 HEMIPLEGIA, UNSPECIFIED 3439 INFANTILE CEREBRAL PALSY, INFANTILE CEREBRAL PALSY, UNSPECIFIED
- 34290 UNSP HMIPLGA UNSPF SIDE
- 34291 UNSP HMIPLGA DOMNT SIDE
- 34292 UNSP HMIPLGA NONDMNT SDE
3440  QUADRIPLEGIA AND QUADRIPARESIS
34400 QUADRIPLEGIA, UNSPECIFID
34401 QUADRPLG C1-C4, COMPLETE
34402 QUADRPLG C1-C4, INCOMPLT
34403 QUADRPLG C5-C7, COMPLETE
34404 QUADRPLG C5-C7, INCOMPLT
34405 OTHER QUADRIPLEGIA
3441  PARAPLEGIA
3442  DIPLEGIA OF UPPER LIMBS
3443  MONoplegia OF LOWER LIMB
34430 MONPLGA LWR LMB UNSP SDE
34431 MONPLGA LWR LMB DMNT SDE
34432 MNPLG LWR LMB NONDNT SD
3444  MONoplegia OF UPPER LIMB
34440 MONPLGA UPR LMB UNSP SDE
34441 MONPLGA UPR LMB DMNT SDE
34442 MNPLG UPR LMB NONDNT SD
34443 MONoplegia OF LOWER LIMB
34444 MONPLGA LWR LMB UNSP SDE
34445 MONPLGA LWR LMB DMNT SDE
34446 MONPLG LWR LMB NONDNT SD
34447 MONoplegia OF UPPER LIMB
34448 MONPLGA UPR LMB UNSP SDE
34449 MONPLGA UPR LMB DMNT SDE
3445  UNSPECIFIED MONoplegia
3446  CAUDA EQUINA SYNDROME
34460 CAUDA EQUINA SYNDROME, WITHOUT MENTION OF NEUROGENIC BLADDER
34461 CAUDA EQUINA SYNDROME, WITH NEUROGENIC BLADDER
3447  OTHER SPECIFIED PARALYTIC SYNDROMES

ICD-9-CM Spina bifida diagnosis codes:
74100 SPINA BIFIDA, W HYDROCEPHALUS UNSPECIFIED REGION
74101 SPINA BIFIDA, W HYDROCEPHALUS CERVICAL REGION
74102 SPINA BIFIDA, W HYDROCEPHALUS DORSAL REGION
74103 SPINA BIFIDA, W HYDROCEPHALUS LUMBAR REGION
74190 SPINA BIFIDA, W/O HYDROCEPHALUS UNSPECIFIED REGION
74191 SPINA BIFIDA, W/O HYDROCEPHALUS CERVICAL REGION
74192 SPINA BIFIDA, W/O HYDROCEPHALUS DORSAL REGION
74193 SPINA BIFIDA, W/O HYDROCEPHALUS LUMBAR REGION
74194 HYPOXIC-ISCHEMIC ENCEPHALOPATHY, UNSPECIFIED
74195 HYPOXIC-ISCHEMIC ENCEPHALOPATHY (OCT09)

ICD-9-CM Anoxic brain damage diagnosis codes:
3481  ANOXIC BRAIN DAMAGE
34811 ANOXIC BRAIN DAMAGE

ICD-9-CM Continuous mechanical ventilation procedure code:
9672  ADD CONTINUOUS MECHANICAL VENTILATION >=96 HRS

Low risk group:

All patients not qualifying as high risk.