

**Measure #426: Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU) – National Quality Strategy Domain: Communication and Care Coordination**

**2017 OPTIONS FOR INDIVIDUAL MEASURES:**

**REGISTRY ONLY**

**MEASURE TYPE:**

Process

**DESCRIPTION:**

Percentage of patients, regardless of age, who are under the care of an anesthesia practitioner and are admitted to a PACU in which a post-anesthetic formal transfer of care protocol or checklist which includes the key transfer of care elements is utilized

**INSTRUCTIONS:**

This measure is to be reported **each time** a procedure including surgical, therapeutic or diagnostic is performed under anesthesia during the **performance period** and patients are admitted to a PACU. There is no diagnosis associated with this measure. It is anticipated that eligible clinicians who provide the listed anesthesia services as specified in the denominator coding will submit this measure.

**Measure Reporting:**

The listed denominator criteria is used to identify the intended patient population. The numerator options included in this specification are used to submit the quality actions allowed by the measure. The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

**DENOMINATOR:**

All patients, regardless of age, who are cared for by an anesthesia practitioner

***DENOMINATOR NOTE:** In order to meet the denominator criteria of the measure, a patient would need to be directly transferred from the anesthetizing location to PACU or other non-ICU location after the procedure where a transfer of care occurs. A patient that does not transfer directly to these locations is not included within the denominator.*

**Denominator Criteria (Eligible Cases):**

All patients, regardless of age

**AND**

**Patient procedure during the performance period (CPT):** 00100, 00102, 00103, 00104, 00120, 00124, 00126, 00140, 00142, 00144, 00145, 00147, 00148, 00160, 00162, 00164, 00170, 00172, 00174, 00176, 00190, 00192, 00210, 00211, 00212, 00214, 00215, 00216, 00218, 00220, 00222, 00300, 00320, 00322, 00326, 00350, 00352, 00400, 00402, 00404, 00406, 00410, 00450, 00454, 00470, 00472, 00474, 00500, 00520, 00522, 00524, 00528, 00529, 00530, 00532, 00534, 00537, 00539, 00540, 00541, 00542, 00546, 00548, 00550, 00560, 00566, 00600, 00604, 00620, 00625, 00626, 00630, 00632, 00635, 00640, 00670, 00700, 00702, 00730, 00740, 00750, 00752, 00754, 00756, 00770, 00790, 00792, 00794, 00796, 00797, 00800, 00802, 00810, 00820, 00830, 00832, 00834, 00836, 00840, 00842, 00844, 00846, 00848, 00851, 00860, 00862, 00864, 00865, 00866, 00868, 00870, 00872, 00873, 00880, 00882, 00902, 00904, 00906, 00908, 00910, 00912, 00914, 00916, 00918, 00920, 00921, 00922, 00924, 00926, 00928, 00930, 00932, 00934, 00936, 00938, 00940, 00942, 00944, 00948, 00950, 00952, 01112, 01120, 01130, 01140, 01150, 01160, 01170, 01173, 01180, 01190, 01200, 01202, 01210, 01212, 01214, 01215, 01220, 01230, 01232, 01234, 01250, 01260, 01270, 01272, 01274, 01320, 01340, 01360, 01380, 01382, 01390, 01392, 01400, 01402, 01404, 01420, 01430, 01432, 01440, 01442, 01444, 01462, 01464, 01470, 01472, 01474, 01480, 01482, 01484, 01486, 01490, 01500, 01502, 01520, 01522, 01610, 01620, 01622, 01630, 01634, 01636, 01638, 01650, 01652, 01654, 01656, 01670, 01680, 01682, 01710, 01712, 01714, 01716, 01730, 01732, 01740,

01742, 01744, 01756, 01758, 01760, 01770, 01772, 01780, 01782, 01810, 01820, 01829, 01830, 01832, 01840, 01842, 01844, 01850, 01852, 01860, 01922, 01924, 01925, 01926, 01930, 01931, 01932, 01933, 01935, 01936, 01951, 01952, 01958, 01960, 01961, 01962, 01963, 01965, 01966

**AND**

**Patient transferred directly from anesthetizing location to PACU: G9656**

**NUMERATOR:**

Patients transferred directly from the procedure room to post-anesthesia care unit (PACU) for post-procedure care for whom a checklist or protocol which includes the key transfer of care elements is utilized

**Definitions:**

**Checklist or Protocol** - The key handoff elements that must be included in the transition of care include:

1. Identification of patient
2. Identification of responsible practitioner (PACU nurse or advanced practitioner)
3. Discussion of pertinent medical history
4. Discussion of the surgical/procedure course (procedure, reason for surgery, procedure performed)
5. Intraoperative anesthetic management and issues/concerns.
6. Expectations/Plans for the early post-procedure period.
7. Opportunity for questions and acknowledgement of understanding of report from the receiving PACU team

**Identification of patient** – In the instance the identity of the patient is unable to be confirmed, identification provided by the clinical facility would suffice toward meeting performance of the measure

**Numerator Options:**

***Performance Met:***

A transfer of care protocol or handoff tool/checklist that includes the required key handoff elements is used (G9655)

**OR**

***Performance Not Met:***

A transfer of care protocol or handoff tool/checklist that includes the required key handoff elements is not used (G9658)

**RATIONALE:**

Hand-offs are a vulnerable moment for patient safety, but required in any 24/7 healthcare system. Anesthesia providers routinely transfer patients from the operating room (OR) to the PACU, and are responsible for transmitting knowledge about patient history, a summary of intra-operative events, and future plans for hemodynamic and pain management to the new care team. Evidence demonstrates that this process can be facilitated by use of a standardized checklist to ensure completion of all key components of the transfer, and is seen as an emerging best practice in anesthesia care.

The Agency for Healthcare Research and Quality found that current signout mechanisms are generally ad-hoc, varying from hospital to hospital and unit to unit." ([Link to PS Net Handoffs and Signouts Article](#) [accessed June 30, 2015]). According to data published by the Joint Commission, communication errors were indicated in 59% of reported sentinel events in 2012 and in 54% of operative/post-operative complications between 2004 and 2012. A 2006 survey among residents at Massachusetts General Hospital found that 59% of respondents reported one or more patients experiencing harm as a result of ineffective patient handoff practices during their most recent clinical rotation.

**CLINICAL RECOMMENDATION STATEMENTS:**

The National Quality Forum, in its Preferred Practices and Performance Measures for Measuring and Reporting Care Coordination report, recommends:

Preferred Practice 23: Healthcare providers and healthcare organizations should implement protocols and policies for a standardized approach to all transitions of care. Policies and procedures related to transitions and the critical aspects should be included in the standardized approach.

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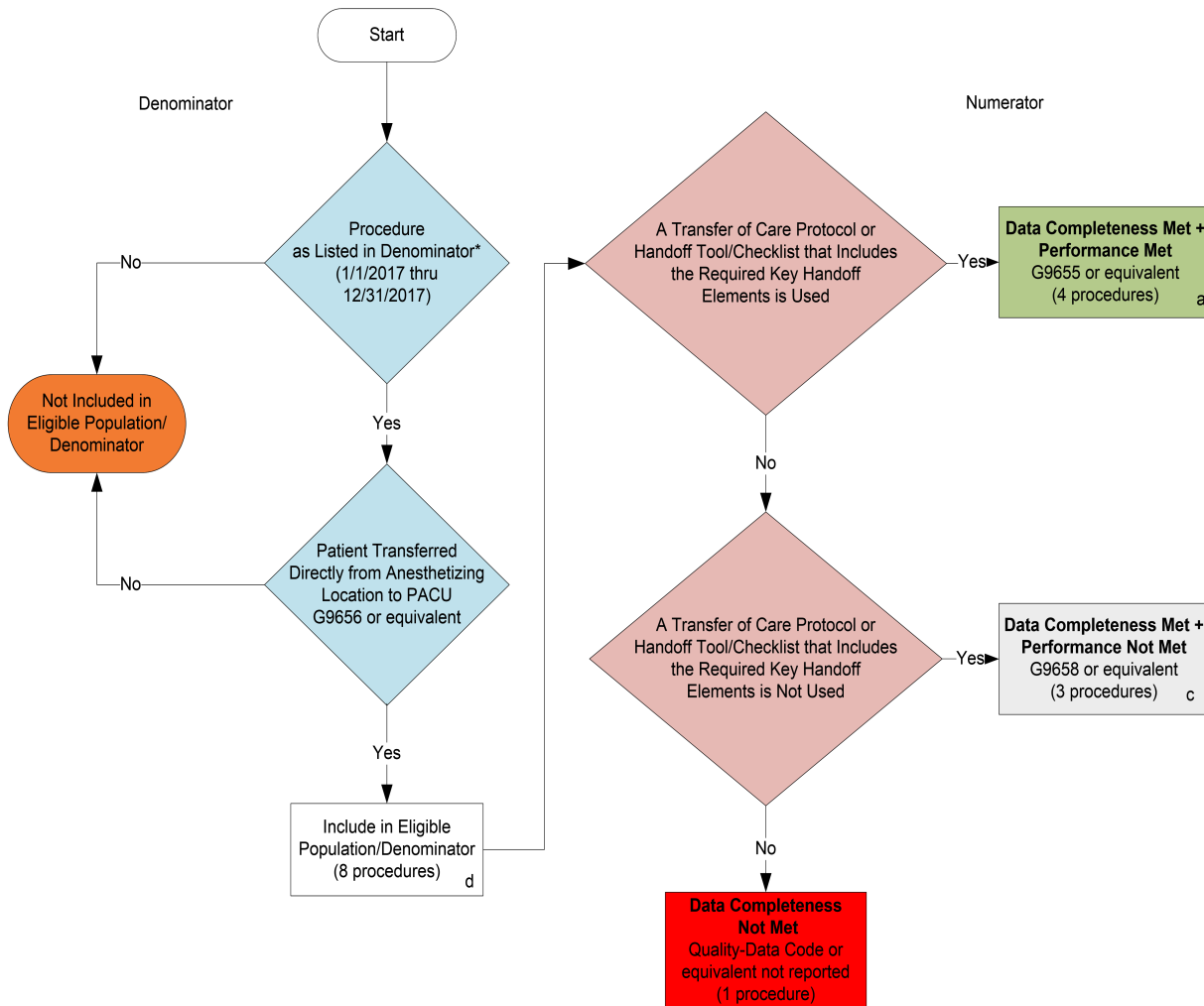
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**2017 Registry Individual Measure Flow  
#426: Post-Anesthetic Transfer of Care Measure:  
Procedure Room to a Post Anesthesia Care Unit (PACU)**



**SAMPLE CALCULATIONS:**

**Data Completeness=**

$$\frac{\text{Performance Met (a=4 procedures)} + \text{Performance Not Met (c=3 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedure}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Data Completeness Numerator (7 procedures)}} = \frac{4 \text{ procedures}}{6 \text{ procedures}} = 66.66\%$$

\*See the posted Measure Specification for specific coding and instructions to report this measure.

NOTE: Reporting Frequency: Procedure

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The measure diagrams were developed by CMS as a supplemental resource to be used in conjunction with the measure specifications. They should not be used alone or as a substitution for the measure specification.

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## 2017 Registry Individual Measure Flow

### #426: Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU)

Please refer to the specific section of the Measure Specification to identify the denominator and numerator information for use in reporting this Individual Measure.

1. Start with Denominator
2. Check Procedure Performed:
  - a. If Procedure as Listed in the Denominator equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Procedure as Listed in the Denominator equals Yes, proceed to Patient Transferred Directly from Anesthetizing Location to PACU.
3. Check Patient Transferred Directly from Anesthetizing Location to PACU :
  - a. If Patient Transferred Directly from Anesthetizing Location to PACU equals No, do not include in Eligible Patient Population. Stop Processing.
  - b. If Patient Transferred Directly from Anesthetizing Location to PACU equals Yes, proceed to Transfer of Care During an Anesthetic or to the Intensive Care Unit.
4. Check Transfer of Care During an Anesthetic or to the Intensive Care Unit:
  - a. If Transfer of Care During an Anesthetic or to the Intensive Care Unit equals No, include in Eligible population.
  - b. If Procedure as Listed in the Denominator equals Yes, do not include in Eligible Patient Population. Stop Processing
5. Denominator Population:
  - a. Denominator population is all Eligible Patients in the denominator. Denominator is represented as Denominator in the Sample Calculation listed at the end of this document. Letter d equals 8 procedures in the sample calculation.
6. Start Numerator
7. Check A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Used:
  - a. If A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Used equals Yes, include in Data Completeness Met and Performance Met.
  - b. Data Completeness Met and Performance Met is represented in the Data Completeness Rate and Performance Rate in the Sample Calculation listed at the end of this document. Letter a equals 4 procedures in Sample Calculation.
  - c. If A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Used equals No, proceed to A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Not Used.

8. Check A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Not Used:
  - a. If A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Not Used equals Yes, include in Data Completeness Met and Performance Not Met.
  - b. Data Completeness Met and Performance Not Met is represented in the Data Completeness in the Sample Calculation listed at the end of this document. Letter c equals 3 procedures in the Sample Calculation.
  - c. If A Transfer of Care Protocol or Handoff Tool/Checklist that Includes the Required Key Handoff Elements is Not Used equals No, proceed to Data Completeness Not Met.
9. Check Data Completeness Not Met:
  - a. If Data Completeness Not Met equals No, Quality Data Code or equivalent not reported. 1 procedure has been subtracted from the data completeness numerator in the sample calculation.

**SAMPLE CALCULATIONS:**

**Data Completeness=**

$$\frac{\text{Performance Met (a=4 procedures)} + \text{Performance Not Met (c=3 procedures)}}{\text{Eligible Population / Denominator (d=8 procedures)}} = \frac{7 \text{ procedures}}{8 \text{ procedure}} = 87.50\%$$

**Performance Rate=**

$$\frac{\text{Performance Met (a=4 procedures)}}{\text{Data Completeness Numerator (7 procedures)}} = \frac{4 \text{ procedures}}{6 \text{ procedures}} = 66.66\%$$