

In collaboration with CECity

# The AJRR Orthopaedic Quality Resource Center™

This registry is approved by CMS as a Qualified Clinical Data Registry (QCDR) for Eligible Professionals and GPRO Practices for the 2016 Physician Quality Reporting System (PQRS) program year.

## CUSTOM SPECIALTY MEASURES

### AJRR 1 - Postoperative Complications within 90 Days Following the Procedure

Percentage of patients undergoing an elective primary total hip arthroplasty who did not have a secondary procedure on the operative hip for any of the following reasons: periprosthetic fracture, dislocation, mechanical failure of the implant, irrigation/debridement of deep infection or a debridement of a superficial infection or hematoma within 90 days following the procedure.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Outcome Measure

### AJRR 2 - Health and Functional Improvement

Percentage of patients undergoing a hip arthroplasty who reported functional status based on the Hip dysfunction and Osteoarthritis Outcome Score for Joint Replacement (HOOS, JR) AND either the NIH PROMIS-10 Global instrument OR the VR-12 during the preoperative visit within 3 months prior to the procedure and at the postoperative visit between 180 and 365 days following the procedure.

**National Quality Strategy Domain:** Person and Caregiver-Centered Experience and Outcomes  
**Type:** Outcome Measure

### AJRR 3 - Shared Decision-Making: Trial of Conservative (Non-surgical) Therapy

Percentage of patients undergoing a hip arthroplasty with documented shared decision-making including discussion of conservative (non-surgical) therapy (e.g. NSAIDs, analgesics, weight loss, exercise, injections) prior to the procedure.

**National Quality Strategy Domain:** Communication and Care Coordination  
**Type:** Process Measure

### AJRR 4 - Venous Thromboembolic and Cardiovascular Risk Evaluation

Percentage of patients undergoing a hip arthroplasty who are evaluated for the presence or absence of cardiovascular risk factors within 30 days prior to the procedure (e.g. history of deep venous thrombosis (DVT), pulmonary embolism (PE), myocardial infarction (MI), arrhythmia, and stroke).

**National Quality Strategy Domain:** Patient Safety  
**Type:** Process Measure

## PQRS MEASURES

### PQRS #1 - Diabetes: Hemoglobin A1c Poor Control (NQF 0059)

Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.

**National Quality Strategy Domain:** Effective Clinical Care  
**Type:** Intermediate Outcome Measure

### PQRS #21 - Perioperative Care: Selection of Prophylactic Antibiotic - First OR Second Generation Cephalosporin (NQF 0268)

Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for a first OR second generation cephalosporin prophylactic antibiotic who had an order for a first OR second generation cephalosporin for antimicrobial prophylaxis.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Process Measure

## PQRS MEASURES

### **PQRS #22 - Perioperative Care: Discontinuation of Prophylactic Parenteral Antibiotics (Non-Cardiac Procedures) (NQF 0271)**

Percentage of non-cardiac surgical patients aged 18 years and older undergoing procedures with the indications for prophylactic parenteral antibiotics AND who received a prophylactic parenteral antibiotic, who have an order for discontinuation of prophylactic parenteral antibiotics within 24 hours of surgical end time.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Process Measure

### **PQRS #23 - Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients) (NQF 0239)**

Percentage of surgical patients aged 18 years and older undergoing procedures for which venous thromboembolism (VTE) prophylaxis is indicated in all patients, who had an order for Low Molecular Weight Heparin (LMWH), Low-Dose Unfractionated Heparin (LDUH), adjusted-dose warfarin, fondaparinux or mechanical prophylaxis to be given within 24 hours prior to incision time or within 24 hours after surgery end time.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Process Measure

### **PQRS #24 - Communication with the Physician or Other Clinician Managing On-going Care Post-Fracture for Men and Women Aged 50 Years and Older (NQF 0045)**

Percentage of patients aged 50 years and older treated for a fracture with documentation of communication, between the physician treating the fracture and the physician or other clinician managing the patient's on-going care, that a fracture occurred and that the patient was or should be considered for osteoporosis treatment or testing. This measure is reported by the physician who treats the fracture and who therefore is held accountable for the communication.

**National Quality Strategy Domain:** Communication and Care Coordination  
**Type:** Process Measure

### **PQRS #109 - Osteoarthritis (OA): Function and Pain Assessment**

Percentage of patient visits for patients aged 21 years and older with a diagnosis of osteoarthritis (OA) with assessment for function and pain.

**National Quality Strategy Domain:** Person and Caregiver-Centered Experience and Outcomes  
**Type:** Process Measure

### **PQRS #130 - Documentation of Current Medications in the Medical Record (NQF 0419)**

Percentage of visits for patients aged 18 years and older for which the eligible professional attests to documenting a list of current medications using all immediate resources available on the date of the encounter. This list **must** include ALL known prescriptions, over-the-counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND **must** contain the medications' name, dosage, frequency and route of administration.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Process Measure

### **PQRS #131 - Pain Assessment and Follow-Up (NQF 0420)**

Percentage of visits for patients aged 18 years and older with documentation of a pain assessment using a standardized tool(s) on each visit AND documentation of a follow-up plan when pain is present.

**National Quality Strategy Domain:** Communication and Care Coordination  
**Type:** Process Measure

### **PQRS #217 - Functional Deficit: Change in Risk-Adjusted Functional Status for Patients with Knee Impairments (NQF 0422)**

Percentage of patients aged 18 or older that receive treatment for a functional deficit secondary to a diagnosis that affects the knee in which the change in their Risk-Adjusted Functional Status is measured.

**National Quality Strategy Domain:** Effective Clinical Care  
**Type:** Process Measure

## PQRS MEASURES

### **PQRS #226 - Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (NQF 0028)**

Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months **AND** who received cessation counseling intervention if identified as a tobacco user.

**National Quality Strategy Domain:** Community/Population Health  
**Type:** Process Measure

### **PQRS #350 - Total Knee Replacement: Shared Decision-Making: Trial of Conservative (Non-surgical) Therapy**

Percentage of patients regardless of age or gender undergoing a total knee replacement with documented shared decision-making with discussion of conservative (non-surgical) therapy (e.g. Nonsteroidal anti-inflammatory drugs (NSAIDs), analgesics, weight loss, exercise, injections) prior to the procedure.

**National Quality Strategy Domain:** Communication and Care Coordination  
**Type:** Outcome Measure

### **PQRS #351 - Total Knee Replacement: Venous Thromboembolic and Cardiovascular Risk Evaluation**

Percentage of patients regardless of age or gender undergoing a total knee replacement who are evaluated for the presence or absence of venous thromboembolic and cardiovascular risk factors within 30 days prior to the procedure (e.g. history of Deep Vein Thrombosis (DVT), Pulmonary Embolism (PE), Myocardial Infarction (MI), Arrhythmia and Stroke).

**National Quality Strategy Domain:** Patient Safety  
**Type:** Outcome Measure

### **PQRS #352 - Total Knee Replacement: Preoperative Antibiotic Infusion with Proximal Tourniquet**

Percentage of patients regardless of age or gender undergoing a total knee replacement who had the prophylactic antibiotic completely infused prior to the inflation of the proximal tourniquet.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Outcome Measure

### **PQRS #353 - Total Knee Replacement: Identification of Implanted Prosthesis in Operative Report**

Percentage of patients regardless of age or gender undergoing a total knee replacement whose operative report identifies the prosthetic implant specifications including the prosthetic implant manufacturer, the brand name of the prosthetic implant and the size of each prosthetic implant.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Outcome Measure

### **PQRS #355 - Unplanned Reoperation within the 30 Day Postoperative Period**

Percentage of patients aged 18 years and older who had any unplanned reoperation within the 30 day postoperative period.

**National Quality Strategy Domain:** Patient Safety  
**Type:** Outcome Measure

### **PQRS #356 - Unplanned Hospital Readmission within 30 Days of Principal Procedure**

Percentage of patients aged 18 years and older who had an unplanned hospital readmission within 30 days of principal procedure.

**National Quality Strategy Domain:** Effective Clinical Care  
**Type:** Outcome Measure

### **PQRS #357 - Surgical Site Infection (SSI)**

Percentage of patients aged 18 years and older who had a surgical site infection (SSI).

**National Quality Strategy Domain:** Effective Clinical Care  
**Type:** Outcome Measure

## PQRS MEASURES

### PQRS #358 - Patient-Centered Surgical Risk Assessment and Communication

Percentage of patients who underwent a non-emergency surgery who had their personalized risks of postoperative complications assessed by their surgical team prior to surgery using a clinical data-based, patient-specific risk calculator and who received personal discussion of those risks with the surgeon.

**National Quality Strategy Domain:** Person and Caregiver-Centered Experience and Outcomes  
**Type:** Process Measure

### PQRS #418 - Osteoporosis Management in Women Who Had a Fracture (NQF 0053)

The percentage of women age 50-85 who suffered a fracture and who either had a bone mineral density test or received a prescription for a drug to treat osteoporosis.

**National Quality Strategy Domain:** Effective Clinical Care  
**Type:** Process Measure

## ECQM MEASURES

### CMS56v4 - Functional Status Assessment for Hip Replacement (PQRS #376)

Percentage of patients aged 18 years and older with primary total hip arthroplasty (THA) who completed baseline and follow-up (patient-reported) functional status assessments.

**National Quality Strategy Domain:** Person and Caregiver-Centered Experience and Outcomes  
**Type:** Process Measure

### CMS66v4 - Functional Status Assessment for Knee Replacement (PQRS #375)

Percentage of patients aged 18 years and older with primary total knee arthroplasty (TKA) who completed baseline and follow-up (patient-reported) functional status assessments.

**National Quality Strategy Domain:** Person and Caregiver-Centered Experience and Outcomes  
**Type:** Process Measure

### CMS122v4 - Diabetes: Hemoglobin A1c Poor Control (NQF 0059) (PQRS #001)

Percentage of patients 18-75 years of age with diabetes who had hemoglobin A1c > 9.0% during the measurement period.

**National Quality Strategy Domain:** Effective Clinical Care  
**Type:** Intermediate Outcome Measure

### CMS138v4 - Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (PQRS #226)

Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user.

**National Quality Strategy Domain:** Community/Population Health  
**Type:** Process Measure