

NQF ENDORSED VOLUNTARY CONSENSUS STANDARDS FOR HOSPITAL CARE

Measure Information Form
Collected For:
The Joint Commission Only
CMS Voluntary Only

Measure Set: Stroke (STK)

Set Measure ID #: STK-3

Performance Measure Name: Anticoagulation Therapy for Atrial Fibrillation/Flutter

Description: Ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge.

Rationale: Nonvalvular atrial fibrillation (NVAF) is a common arrhythmia and an important risk factor for stroke. It is one of several conditions and lifestyle factors that have been identified as risk factors for stroke. It has been estimated that over 2 million adults in the United States have NVAF. While the median age of patients with atrial fibrillation is 75 years, the incidence increases with advancing age. For example, The Framingham Heart Study noted a dramatic increase in stroke risk associated with atrial fibrillation with advancing age, from 1.5% for those 50 to 59 years of age to 23.5% for those 80 to 89 years of age. Furthermore, a prior stroke or transient ischemic attack (TIA) are among a limited number of predictors of high stroke risk within the population of patients with atrial fibrillation. Therefore, much emphasis has been placed on identifying methods for preventing recurrent ischemic stroke as well as preventing first stroke. Prevention strategies focus on the modifiable risk factors such as hypertension, smoking, and atrial fibrillation. Analysis of five placebo-controlled clinical trials investigating the efficacy of warfarin in the primary prevention of thromboembolic stroke, found the relative risk of thromboembolic stroke was reduced by 68% for atrial fibrillation patients treated with warfarin. The administration of anticoagulation therapy, unless there are contraindications, is an established effective strategy in preventing recurrent stroke in high stroke risk-atrial fibrillation patients with TIA or prior stroke.

Type of Measure: Process

Improvement Noted As: An increase in rate

Numerator Statement: Ischemic stroke patients prescribed anticoagulation therapy at hospital discharge.

Included Populations: Not applicable

Excluded Populations: None

Data Elements:

Anticoagulation Therapy Prescribed at Discharge

Denominator Statement: Ischemic stroke patients with documented atrial fibrillation/flutter.

Included Populations:

- Discharges with an *ICD-9-CM Principal Diagnosis Code* for ischemic stroke as defined in Appendix A, Table 8.1
- Patients with documented *Atrial Fibrillation/Flutter*

Excluded Populations:

- Patients less than 18 years of age
- Patients who have a Length of Stay greater than 120 days
- Patients with *Comfort Measures Only* documented
- Patients enrolled in clinical trials
- Patients admitted for *Elective Carotid Intervention*
- Patients discharged to another hospital
- Patients who left against medical advice
- Patients who expired
- Patients discharged to home for hospice care
- Patients discharged to a health care facility for hospice care
- Patients with a documented *Reason For Not Prescribing Anticoagulation Therapy*

Data Elements:

- *Admission Date*
- *Atrial Fibrillation/Flutter*
- *Birthdate*
- *Clinical Trial*
- *Comfort Measures Only*
- *Discharge Date*
- *Discharge Disposition*
- *Elective Carotid Intervention*
- *ICD-9-CM Principal Diagnosis Code*
- *Reason For Not Prescribing Anticoagulation Therapy at Discharge*

Risk Adjustment: No

Data Collection Approach: Retrospective data sources for required data elements include administrative data and medical record documents. Some hospitals may prefer to gather data concurrently by identifying patients in the population of interest. This approach provides opportunities for improvement at the point of care/service. However, complete documentation includes the principal or other ICD-9-CM diagnosis and procedure codes, which require retrospective data entry.

Data Accuracy: Variation may exist in the assignment of ICD-9-CM codes; therefore, coding practices may require evaluation to ensure consistency.

Measure Analysis Suggestions: None

Sampling: Yes, please refer to the measure set specific sampling requirements and for additional information see the Population and Sampling Specifications section.

Data Reported As: Aggregate rate generated from count data reported as a proportion

Selected References:

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Council: Cosponsored by the Atherosclerotic Peripheral Vascular Disease Interdisciplinary Working Group; Cardiovascular Nursing Council; Clinical Cardiology Council; Nutrition, Physical Activity, and Metabolism Council; and the Quality of Care and Outcomes Research Interdisciplinary Working Group: The American Academy of Neurology Affirms the Value of This Guideline." [In eng]. *Stroke* 37, no. 6 (Jun 2006): 1583-633.

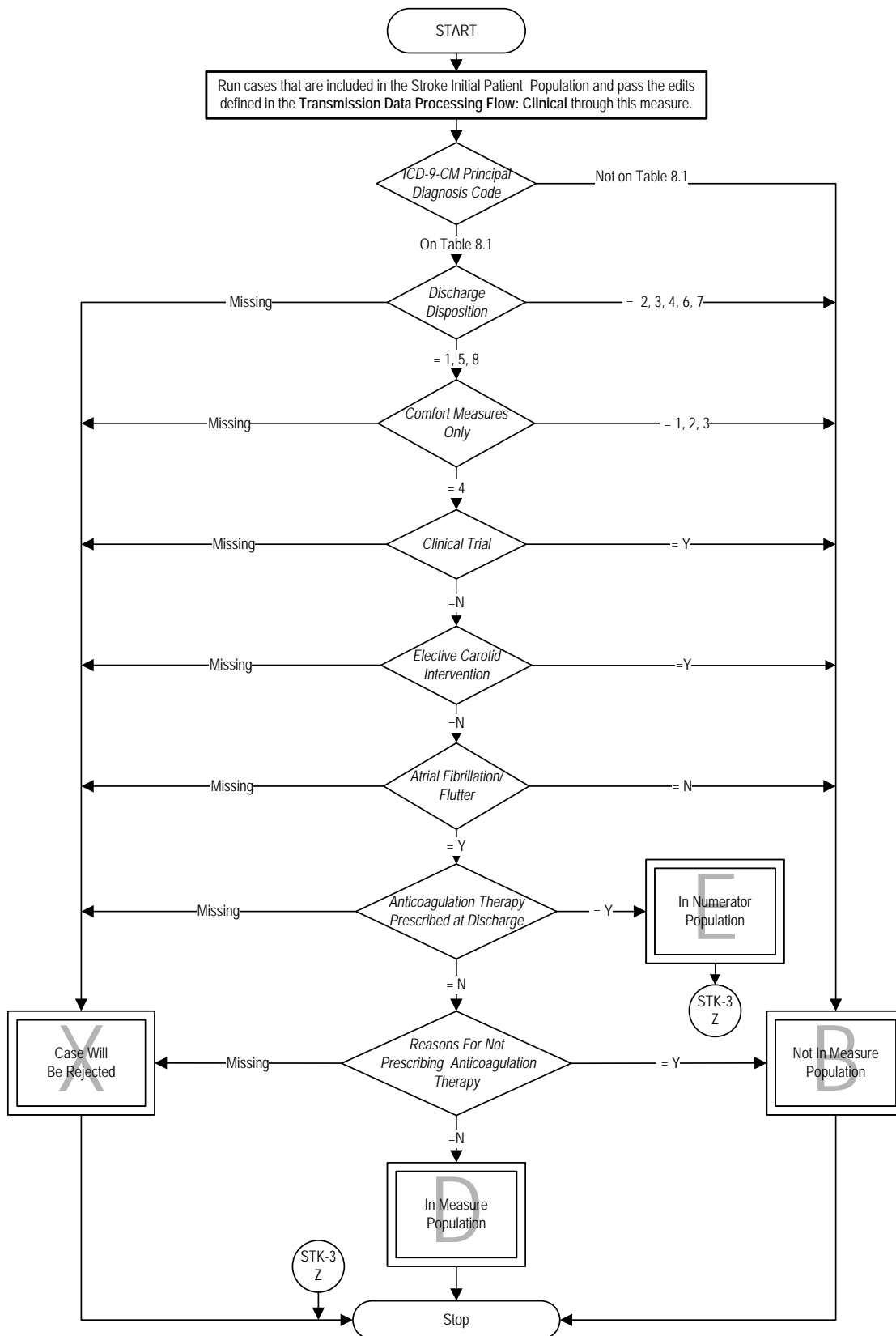
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STK-3: Anticoagulation Therapy for Atrial Fibrillation/Flutter

Numerator: Ischemic stroke patients prescribed anticoagulation therapy at hospital discharge.

Denominator: Ischemic stroke patients with documented atrial fibrillation/flutter.



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1. Start processing. Run cases that are included in the Stroke (STK) Initial Patient Population and pass the edits defined in the Transmission Data Processing Flow: Clinical through this measure.
2. Check ICD-9-CM Principal Diagnosis Code
 - a. If the ICD-9-CM Principal Diagnosis Code is not on Table 8.1, the case will proceed to a Measure Category Assignment of B and will not be in the Measure Population. Stop processing.
 - b. If the ICD-9-CM Principal Diagnosis Code is on Table 8.1, continue processing and proceed to Discharge Disposition.
3. Check Discharge Disposition
 - a. If Discharge Disposition equals 2, 3, 4, 6 or 7, the case will proceed to a Measure Category Assignment of B and will not be in the Measure Population. Stop processing.
 - b. If Discharge Disposition equals 1, 5 or 8, continue processing and proceed to Comfort Measures Only.
4. Check Comfort Measures Only
 - a. If Comfort Measures Only is missing, the case will proceed to a Measure Category Assignment of X and will be rejected. Stop processing.
 - b. If Comfort Measures Only equals 1, 2, or 3, the case will proceed to a Measure Category Assignment of B and will not be in the Measure Population. Stop processing.
 - c. If Comfort Measures Only equals 4, continue processing and proceed to Clinical Trial.
5. Check Clinical Trial
 - a. If Clinical Trial is missing, the case will proceed to a Measure Category Assignment of X and will be rejected. Stop processing.
 - b. If Clinical Trial equals Yes, the case will proceed to a Measure Category Assignment of B and will not be in the Measure Population. Stop processing.
 - c. If Clinical Trial equals No, continue processing and proceed to Elective Carotid Intervention.

6. Check Elective Carotid Intervention
 - a. If Elective Carotid Intervention is missing, the case will proceed to a Measure Category Assignment of X and will be rejected. Stop processing.
 - b. If Elective Carotid Intervention equals Yes, the case will proceed to a Measure Category Assignment of B and will not be in the Measure Population. Stop processing.
 - c. If Elective Carotid Intervention equals No, continue processing and proceed to Atrial Fibrillation/Flutter.

7. Check Atrial Fibrillation/Flutter.
 - a. If Atrial Fibrillation/Flutter is missing, the case will proceed to a Measure Category Assignment of X and will be rejected. Stop processing.
 - b. If Atrial Fibrillation/Flutter equals No, the case will proceed to a Measure Category Assignment of B and will not be in the Measure Population. Stop processing.
 - c. If Atrial Fibrillation/Flutter equals Yes, continue processing and check Anticoagulation Therapy Prescribed at Discharge.

8. Check Anticoagulation Therapy Prescribed at Discharge.
 - a. If Anticoagulation Therapy Prescribed at Discharge is missing, the case will proceed to a Measure Category Assignment of X and will be rejected. Stop processing.
 - b. If Anticoagulation Therapy Prescribed at Discharge equals Yes, the case will proceed to a Measure Category Assignment of E and will be in the Numerator Population. Stop processing.
 - c. If Anticoagulation Therapy Prescribed at Discharge equals No, continue processing and check Reason for Not Prescribing Anticoagulation Therapy at Discharge.

9. Check Reason for Not Prescribing Anticoagulation Therapy at Discharge.
 - a. If Reason for Not Prescribing Anticoagulation Therapy at Discharge is missing, the case will proceed to a Measure Category Assignment of X and will be rejected. Stop processing.
 - b. If Reason for Not Prescribing Anticoagulation Therapy at Discharge equals Yes, the case will proceed to a Measure Category Assignment of B and will not be in the measure population. Stop processing.
 - c. If Reason for Not Prescribing Anticoagulation Therapy at Discharge equals No, the case will proceed to a Measure Category Assignment of D and will be in the Measure Population. Stop processing.