



## **Inpatient Quality Indicator 29 (IQI 29) Laminectomy or Spinal Fusion Rate**

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**Area-Level Indicator**

**Type of Score: Rate**

**Prepared by:**

Agency for Healthcare Research and Quality

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[www.qualityindicators.ahrq.gov](http://www.qualityindicators.ahrq.gov)

### **DESCRIPTION**

Laminectomies or spinal fusion discharges per 100,000 population, ages 18 years and older. Excludes obstetric discharges.

*[NOTE: The software provides the rate per population. However, common practice reports the measure as per 100,000 population. The user must multiply the rate obtained from the software by 100,000 to report discharges per 100,000 population.]*

**NUMERATOR**

Discharges for patients ages 18 years and older, with any-listed ICD-9-CM or ICD-10-PCS procedure codes for laminectomy or spinal fusion

*Laminectomy or spinal fusion procedure codes: (PRLAMIP)*

0302	REOPEN LAMINECTOMY SITE	8130	SPINAL REFUSION NOS
0309	SPINAL CANAL EXPLOR NEC	8131	REFUSION OF ATLAS-AXIS
8050	EXC/DEST INTVRT DISC NOS	8132	REFUSION OF OTH CERV ANT
8051	EXCISION INTERVERT DISC	8133	REFUS OF OTH CERV POST
8059	OTH EXC/DEST INTVRT DISC	8134	REFUSION OF DORSAL ANT
8100	SPINAL FUSION NOS	8135	REFUSION OF DORSAL POST
8101	ATLAS-AXIS FUSION	8136	REFUSION OF LUMBAR ANT
8102	OTH CERV FUSION, ANTER	8137	REFUSION OF LUMBAR LAT
8103	OTH CERV FUSION, POSTER	8138	REFUSION OF LUMBAR POST
8104	DORSAL FUSION, ANTERIOR	8139	REFUSION OF SPINE NEC
8105	DORSAL FUSION, POSTERIOR	8161	360 SPINAL FUSION
8106	LUMBAR FUSION, ANTERIOR	8162	FUS/REFUS 2-3 VERTEBRAE
8107	LUMBAR FUSION, LATERAL	8163	FUS/REFUS 4-8 VERTEBRAE
8108	LUMBAR FUSION, POSTERIOR	8164	FUS/REFUS 9 VERTEBRAE
8109	REFUSION OF SPINE	8451	INS SPINAL FUSION DEVICE

## **NUMERATOR EXCLUSIONS**

Exclude cases:

- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

## **DENOMINATOR**

Population ages 18 years and older in metropolitan area<sup>1</sup> or county. Discharges in the numerator are assigned to the denominator based on the metropolitan area or county of the patient residence, not the metropolitan area or county of the hospital where the discharge occurred.

<sup>1</sup>The term “metropolitan area” (MA) was adopted by the U.S. Census in 1990 and referred collectively to metropolitan statistical areas (MSAs), consolidated metropolitan statistical areas (CMSAs), and primary metropolitan statistical areas (PMSAs). In addition, “area” could refer to either 1) FIPS county, 2) modified FIPS county, 3) 1999 OMB Metropolitan Statistical Area, or 4) 2003 OMB Metropolitan Statistical Area. Micropolitan Statistical Areas are not used in the QI software.