

Accidental Puncture or Laceration Rate

Patient Safety Indicators #25

Technical Specifications

Area-Level Indicator

AHRQ Quality Indicators, Version 4.3, August 2011

Numerator

Discharges 18 years and older with ICD-9-CM code denoting technical difficulty (e.g., accidental cut, puncture, perforation, or laceration) in any diagnosis field (principal or secondary) of all medical and surgical discharges defined by specific DRGs or MS-DRGs.

ICD-9-CM Accidental puncture or laceration diagnosis codes:

Accidental cut, puncture, perforation, or hemorrhage during medical care:

E8700	SURGICAL OPERATION	E8706	HEART CATHETERIZATION
E8701	INFUSION OR TRANSFUSION	E8707	ADMINISTRATION OF ENEMA
E8702	KIDNEY DIALYSIS OR OTHER PERFUSION	E8708	OTHER SPECIFIED MEDICAL CARE
E8703	INJECTION OR VACCINATION	E8709	UNSPECIFIED MEDICAL CARE
E8704	ENDOSCOPIC EXAMINATION	9982	ACCIDENTAL PUNCTURE OR LACERATION DURING A PROCEDURE
E8705	ASPIRATION OF FLUID OR TISSUE, PUNCTURE, AND CATHETERIZATION		

See *Patient Safety Indicators Appendices*:

- Appendix B – Medical Discharge DRGs
- Appendix C – Medical Discharge MS-DRGs
- Appendix D – Surgical Discharge DRGs
- Appendix E – Surgical Discharge MS-DRGs

Exclude cases:

- MDC 14 (pregnancy, childbirth, and puerperium).
- with ICD-9-CM code for spine surgery
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing), county (PSTCO=missing)

ICD-9-CM Spine surgery procedure codes:

0301	REMOVAL OF FOREIGN BODY FROM SPINAL CANAL	8102	OTHER CERVICAL FUSION, ANTERIOR TECHNIQUE
0302	REOPENING OF LAMINECTOMY SITE	8103	OTHER CERVICAL FUSION, POSTERIOR TECHNIQUE
0309	OTHER EXPLORATION AND DECOMPRESSION OF SPINAL CANAL	8104	DORSAL AND DORSOLUMBAR FUSION, ANTERIOR TECHNIQUE
0353	REPAIR OF VERTEBRAL FRACTURE	8105	DORSAL AND DORSOLUMBAR FUSION, POSTERIOR TECHNIQUE
036	LYSIS OF ADHESIONS OF SPINAL CORD AND NERVE ROOTS	8106	LUMBAR AND LUMBOSACRAL FUSION, ANTERIOR TECHNIQUE
8053	REPAIR OF THE ANULUS FIBROSUS WITH GRAFT OR PROSTHESIS (OCT08)	8107	LUMBAR AND LUMBOSACRAL FUSION, LATERAL TRANSVERSE PROCESS TECHNIQUE
8054	OTHER AND UNSPECIFIED REPAIR OF THE ANULUS FIBROSUS (OCT08)	8108	LUMBAR AND LUMBOSACRAL FUSION, POSTERIOR TECHNIQUE
8100	SPINAL FUSION, NOT OTHERWISE SPECIFIED		
8101	ATLAS-AXIS SPINAL FUSION		

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8130	REFUSION OF SPINE, NOT OTHERWISE SPECIFIED	8460	INSERTION OF SPINAL DISC PROSTHESIS, NOT OTHERWISE SPECIFIED
8131	REFUSION OF ATLAS-AXIS SPINE	8461	INSERTION OF PARTIAL SPINAL DISC PROSTHESIS, CERVICAL
8132	REFUSION OF OTHER CERVICAL SPINE, ANTERIOR TECHNIQUE	8462	INSERTION OF TOTAL SPINAL DISC PROSTHESIS, CERVICAL
8133	REFUSION OF OTHER CERVICAL SPINE, POSTERIOR TECHNIQUE	8463	INSERTION OF SPINAL DISC PROSTHESIS, THORACIC
8134	REFUSION OF DORSAL AND DORSOLUMBAR SPINE, ANTERIOR TECHNIQUE	8464	INSERTION OF PARTIAL SPINAL DISC PROSTHESIS, LUMBOSACRAL
8135	REFUSION OF DORSAL AND DORSOLUMBAR SPINE, POSTERIOR TECHNIQUE	8465	INSERTION OF TOTAL SPINAL DISC PROSTHESIS, LUMBOSACRAL
8136	REFUSION OF LUMBAR AND LUMBOSACRAL SPINE, ANTERIOR TECHNIQUE	8466	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, CERVICAL
8137	REFUSION OF LUMBAR AND LUMBOSACRAL SPINE, LATERAL TRANSVERSE PROCESS TECHNIQUE	8467	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, THORACIC
8138	REFUSION OF LUMBAR AND LUMBOSACRAL SPINE, POSTERIOR TECHNIQUE	8468	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, LUMBOSACRAL
8139	REFUSION OF SPINE, NOT ELSEWHERE CLASSIFIED	8469	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, NOT OTHERWISE SPECIFIED
8162	FUSION OR REFUSION OF 2-3 VERTEBRAE*	8480	INSERTION OR REPLACEMENT OF INTERSPINOUS PROCESS DEVICE(S)
8163	FUSION OR REFUSION OF 4-8 VERTEBRAE*	8481	REVISION OF INTERSPINOUS PROCESS DEVICE(S)
8164	FUSION OR REFUSION OF 9 OR MORE VERTEBRAE*	8482	INSERTION OR REPLACEMENT OF PEDICLE-BASED DYNAMIC STABILIZATION DEVICE(S)
8165	VERTEBROPLASTY	8483	REVISION OF PEDICLE-BASED DYNAMIC STABILIZATION DEVICE(S)
8166	KYPHOPLASTY	8485	REVISION OF FACET REPLACEMENT DEVICE(S)
8451	INSERTION OF INTERBODY SPINAL FUSION DEVICE*		
8452	INSERTION OF RECOMBINANT BONE MORPHOGENETIC PROTEIN*		
8458	IMPLANTATION OF INTERSPINOUS PROCESS DECOMPRESSION DEVICE (ONLY BEFORE OCT 1, 2007)		
8459	INSERTION OF OTHER SPINAL DEVICES		

* code has *code also* instructions

Denominator

Discharges in the numerator are assigned to the denominator based on the Metro Area¹ or county of the patient residence, not the Metro Area or county of the hospital where the discharge occurred.

¹ 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 3) 2003 OMB Metropolitan Statistical Area. Micropolitan Statistical Areas are not used in the QI software.