

Accidental Puncture or Laceration Rate

Patient Safety Indicators #15

Technical Specifications

Provider-Level Indicator

AHRQ Quality Indicators, Version 4.3, August 2011

Version 4.3a is a maintenance release of Version 4.3. The differences between the two versions are:

- Version 4.3a includes Version 29 of the Limited License edition of the 3M™ APR-DRG Grouper. This grouper corrects an issue found in Version 28 of the Limited License edition of the 3M™ APR-DRG Grouper. The grouper is only used with the Inpatient Quality Indicator (IQI) mortality measures. Version 4.3 includes Version 28 of the Limited License edition of the 3M™ APR-DRG Grouper, which was incorrectly assigning a Risk of Mortality (ROM) subclass for cases dated on or after 10/1/10.
- Version 4.3a allows users to calculate area-level indicators for years 2010 and 2011, correcting an issue previously identified in Version 4.3.

All other aspects of the software, including measure specifications, remain the same. Thus this document (related to Version 4.3) remains unchanged.

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM code denoting accidental cut, puncture, perforation, or laceration during a procedure in any secondary diagnosis field.

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

E8700	SURGICAL OPERATION	E8706	HEART CATHETERIZATION
E8701	INFUSION OR TRANSFUSION	E8707	ADMINISTRATION OF ENEMA
E8702	KIDNEY DIALYSIS OR OTHER PERFUSSION	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		

Denominator

All surgical and medical discharges age 18 years and older defined by specific DRGs or MS-DRGs.

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:

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Accidental Puncture or Laceration Rate
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- with principal diagnosis denoting accidental cut, puncture, perforation, or laceration or secondary diagnosis present on admission
- 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)

ICD-9-CM Spine surgery procedure codes:

0301	REMOVAL OF FOREIGN BODY FROM SPINAL CANAL	8138	REFUSION OF LUMBAR AND LUMBOSACRAL SPINE, POSTERIOR TECHNIQUE
0302	REOPENING OF LAMINECTOMY SITE		
0309	OTHER EXPLORATION AND DECOMPRESSION OF SPINAL CANAL	8139	REFUSION OF SPINE, NOT ELSEWHERE CLASSIFIED
0353	REPAIR OF VERTEBRAL FRACTURE	8162	FUSION OR REFUSION OF 2-3 VERTEBRAE*
036	LYSIS OF ADHESIONS OF SPINAL CORD AND NERVE ROOTS	8163	FUSION OR REFUSION OF 4-8 VERTEBRAE*
8053	REPAIR OF THE ANULUS FIBROSUS WITH GRAFT OR PROSTHESIS (OCT08)	8164	FUSION OR REFUSION OF 9 OR MORE VERTEBRAE*
8054	OTHER AND UNSPECIFIED REPAIR OF THE ANULUS FIBROSUS (OCT08)	8165	VERTEBROPLASTY
8100	SPINAL FUSION, NOT OTHERWISE SPECIFIED	8166	KYPHOPLASTY
8101	ATLAS-AXIS SPINAL FUSION	8451	INSERTION OF INTERBODY SPINAL FUSION DEVICE*
8102	OTHER CERVICAL FUSION, ANTERIOR TECHNIQUE	8452	INSERTION OF RECOMBINANT BONE MORPHOGENETIC PROTEIN*
8103	OTHER CERVICAL FUSION, POSTERIOR TECHNIQUE	8458	IMPLANTATION OF INTERSPINOUS PROCESS DECOMPRESSION DEVICE (ONLY BEFORE OCT 1, 2007)
8104	DORSAL AND DORSOLUMBAR FUSION, ANTERIOR TECHNIQUE	8459	INSERTION OF OTHER SPINAL DEVICES
8105	DORSAL AND DORSOLUMBAR FUSION, POSTERIOR TECHNIQUE	8460	INSERTION OF SPINAL DISC PROSTHESIS, NOT OTHERWISE SPECIFIED
8106	LUMBAR AND LUMBOSACRAL FUSION, ANTERIOR TECHNIQUE	8461	INSERTION OF PARTIAL SPINAL DISC PROSTHESIS, CERVICAL
8107	LUMBAR AND LUMBOSACRAL FUSION, LATERAL TRANSVERSE PROCESS TECHNIQUE	8462	INSERTION OF TOTAL SPINAL DISC PROSTHESIS, CERVICAL
8108	LUMBAR AND LUMBOSACRAL FUSION, POSTERIOR TECHNIQUE	8463	INSERTION OF SPINAL DISC PROSTHESIS, THORACIC
8130	REFUSION OF SPINE, NOT OTHERWISE SPECIFIED	8464	INSERTION OF PARTIAL SPINAL DISC PROSTHESIS, LUMBOSACRAL
8131	REFUSION OF ATLAS-AXIS SPINE	8465	INSERTION OF TOTAL SPINAL DISC PROSTHESIS, LUMBOSACRAL
8132	REFUSION OF OTHER CERVICAL SPINE, ANTERIOR TECHNIQUE	8466	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, CERVICAL
8133	REFUSION OF OTHER CERVICAL SPINE, POSTERIOR TECHNIQUE	8467	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, THORACIC
8134	REFUSION OF DORSAL AND DORSOLUMBAR SPINE, ANTERIOR TECHNIQUE	8468	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, LUMBOSACRAL
8135	REFUSION OF DORSAL AND DORSOLUMBAR SPINE, POSTERIOR TECHNIQUE	8469	REVISION OR REPLACEMENT OF ARTIFICIAL SPINAL DISC PROSTHESIS, NOT OTHERWISE SPECIFIED
8136	REFUSION OF LUMBAR AND LUMBOSACRAL SPINE, ANTERIOR TECHNIQUE	8480	INSERTION OR REPLACEMENT OF INTERSPINOUS PROCESS DEVICE(S)
8137	REFUSION OF LUMBAR AND LUMBOSACRAL SPINE, LATERAL TRANSVERSE PROCESS TECHNIQUE	8481	REVISION OF INTERSPINOUS PROCESS DEVICE(S)

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8482 INSERTION OR REPLACEMENT OF
PEDICLE-BASED DYNAMIC
STABILIZATION DEVICE(S)
8483 REVISION OF PEDICLE-BASED DYNAMIC
STABILIZATION DEVICE(S)
* code has *code also* instructions

8485 REVISION OF FACET REPLACEMENT
DEVICE(S)