

Accidental Puncture or Laceration Rate Technical Specifications

Patient Safety Indicators 25 (PSI 25) AHRQ Quality Indicators™, Version 4.5a, July 2014 Area-Level Indicator Type of Score: Rate

Description

Accidental punctures or lacerations during a procedure per 100,000 population, ages 18 years and older. Excludes obstetric discharges and spinal surgery 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 events per 100,000 population.]

Numerator

Surgical and medical discharges, for patients ages 18 years and older, with any-listed ICD-9-CM diagnosis codes for accidental puncture or laceration during a procedure. Surgical and medical discharges are defined by specific DRG or MS-DRG codes.

ICD-9-CM Accidental puncture or laceration during a procedure diagnosis codes:

E8700	ACC CUT/HEM IN SURGERY	E8706	ACC CUT/HEM W HEART CATH
E8701	ACC CUT/HEM IN INFUSION	E8707	ACC CUT/HEM W ENEMA
E8702	ACC CUT/HEM-PERFUSN NEC	E8708	ACC CUT IN MED CARE NEC
E8703	ACC CUT/HEM IN INJECTION	E8709	ACC CUT IN MED CARE NOS
E8704	ACC CUT/HEM W SCOPE EXAM	9982	ACCIDENTAL OP LACERATION
E8705	ACC CUT/HEM W CATHERTIZ		

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:

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

See *Patient Safety Indicator Appendices*:

- Appendix L – Spine Surgery Procedure Codes

Denominator

Population ages 18 years and older in metropolitan area[†] 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.

[†] 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. Metropolitan Statistical Areas are not used in the QI software.