



Pediatric Quality Indicators (PDI) Log of Coding Updates and Revisions Through Version 2023

Prepared for:

Agency for Healthcare Research and Quality
U.S. Department of Health and Human Services
5600 Fishers Lane
Rockville, MD 20857
<https://qualityindicators.ahrq.gov>

Contract No. HHS A290201800003G

August 2023

Table of Contents

| | |
|---|------------|
| Log of Coding Updates and Revisions | 1 |
| Appendices | 122 |
| Appendix A. Cardiac Procedure Codes as of February 2009 | 123 |
| Appendix B. ICD-9-CM Codes for Corresponding CCS Categories as of September 2010..... | 124 |
| Appendix C. Miscellaneous Hemorrhage or Hematoma-related Procedure Codes as of December 2012..... | 127 |

Log of Coding Updates and Revisions

The following table summarizes the revisions made to the Pediatric Quality Indicators (PDI) software, software documentation and the technical specification documents in the 2023 version and previous versions since the original release of QI change log documents in April 2002. It also reflects changes to indicator specifications based on updates to ICD-10-CM/PCS codes through Fiscal Year 2023 (effective October 1, 2022) and incorporates coding updates that were implemented in both the SAS and WinQI versions of the PDI software.

The table lists the version and revision number, the date the revision was made, the component(s) affected by the change and a short summary of the changes that were made. The nature of the change is categorized as:

1. **Fiscal Year (FY) Coding** – occurs because of changes to the most recent fiscal year codes dictated by the Centers for Disease Control and Prevention (CDC) National Center for Health Statistics (NCHS) and Centers for Medicare & Medicaid Services (CMS).
2. **Specification/Calculation** – may impact the measure result that is something other than the most recent fiscal year coding change.
3. **Software/Documentation** – alteration to the software code to calculate the measure as specified, or to the documentation to clarify the measure intent or functionality.

For convenience and ease of use, the changes are listed in reverse chronological order with the most recent changes appearing first in the table. Please note that changes prior to version 4.4 are not classified according to the currently defined types of changes.

All changes noted below have been incorporated into the software programming code, software documentation and the PDI technical specifications. With this software update, the PDI software now accounts for ICD-9-CM, ICD-10 CM/PCS, and DRG/MS-DRG codes valid from October 1, 1994 through September 30, 2023.

The transition from ICD-9-CM to ICD-10 CM/PCS represents substantial differences across the two code sets. Specifications have been carefully reviewed to achieve as much consistency as possible; however, differences are expected to exist between the ICD-9-CM v6.0, the last version of the AHRQ QI measures, and the ICD-10-CM releases – such as, v2020 and later. A detailed explanation of the process of conversion is detailed in https://qualityindicators.ahrq.gov/Downloads/Resources/Publications/2013/C.14.10.D001_REVISED.pdf

Note: the change log entries for v6.0 (ICD-10) reflect the changes from v5.0 alpha version of ICD-10 software and not the changes from v5.0 ICD-9-CM version.

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-------------------------------|---|
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI All | Software/ Documentation | <p>Description: Added fiscal year (FY) 2023 functionality</p> <p>Rationale: The AHRQ PDI software v2023 reflects coding changes based on fiscal year 2023 coding updates to the International Classification of Diseases, Tenth Revision, Clinical Modification/Procedure Coding System (ICD-10-CM/PCS).</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI All | Software/ Documentation | <p>Description: Replace use of Major Diagnostic Category (MDC) 14 Pregnancy, Childbirth & the Puerperium and MDC 15 Newborns & Other Neonates with Conditions Originating in Perinatal Period with new diagnosis code sets MDC14PRINDX and MDC15PRINDX respectively.</p> <p>Rationale: Non-missing MDCs are needed for the calculation of observed and risk-adjusted rates. Thus, users are required to supply MDCs calculated by the Medicare Severity Diagnosis Related Groups (MS-DRGs) Classifications and Software. However, running the MS-DRG Software is challenging for some users and is preventing them from adopting the most recent AHRQ QI software version. This issue is partially addressed by replacing MDC 14 and MDC 15 with code lists which allows users to generate output without requiring these MDCs in their data.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI All | Software/ Documentation | <p>Description: If MDC is provided, discharges with missing MDC are no longer deleted, rather they are excluded from hospital-level PDI</p> <p>Rationale: Non-missing MDCs are needed for the calculation of observed and risk-adjusted rates. Excluding discharges from hospital-level PDI rather than deleting discharges allows discharges with missing MDC to be evaluated for area-level PDI.</p> |
| v2023 | August 2023 | PDI 01 | Specification/ Calculation | <p>Description: Removed MDC category (GPPD01) of patients with either MDC 2 (eye), MDC 3 (ear, nose, mouth, and throat), MDC 9 (skin, subcutaneous tissue, and breast),</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-----------------------|---|
| (ICD-10) for SAS QI & WinQI | | | | MDC 19 (mental diseases and disorders), MDC 22 (burns), or MDC 23 (factors influencing health status) Rationale: PDI 01 defined risk variable GPPD01 by aggregating MDCs. However, this risk variable was not significant in feature selection. Thus, GPPD01 stratification is no longer used and removed from the software. |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01 | Fiscal Year Coding | Description: Updated definitions of minor and major diagnostic procedures and minor and major therapeutic procedures to Procedure Class (PRCLASS) v2023.1 Rationale: Annual coding updates for PRCLASS. PRCLASS is defined by the HCUP Procedure Class Tool (https://www.hcup-us.ahrq.gov/toolssoftware/procedureicd10/procedure_icd10.jsp). |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01 | Fiscal Year Coding | Description: Spine surgery procedure codes (SPINEP) 2 codes added Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 05 | Fiscal Year Coding | Description: Potentially trans-pleural cardiac procedures (CARDSIP) 2 codes added Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 05 | Fiscal Year Coding | Description: Chest trauma diagnosis codes (CTRAUMD) 4 codes added Rationale: Annual coding updates |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-------------------------------|--|
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 05 | Specification/ Calculation | <p>Description: Non-traumatic pneumothorax diagnosis codes (IATPTXD) 9 codes added</p> <p>Rationale: New code list used to exclude non-traumatic pneumothorax diagnoses.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 05 | Specification/ Calculation | <p>Description: Replaced denominator exclusion of iatrogenic pneumothorax diagnosis codes (IATROID) with exclusion of non-traumatic pneumothorax diagnosis codes (IATPTXD)</p> <p>Rationale: In prior versions, patients admitted with a principal diagnosis of spontaneous pneumothorax were included in the measure. These are typically patients with underlying chronic lung disease, such as asthma, COPD, bronchiectasis, or cystic fibrosis, who rupture a bleb or injure a small airway while coughing.</p> <p>In the setting of a spontaneous pneumothorax requiring inpatient care, it is impossible to interpret a secondary diagnosis of iatrogenic pneumothorax not present on admission. This latter diagnosis may simply reflect some residual pneumothorax after discontinuation of a thoracostomy tube or other interventions to treat the spontaneous pneumothorax.</p> <p>IATPTXD now includes codes for both iatrogenic pneumothorax and spontaneous pneumothorax or air leak.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 05 | Specification/ Calculation | <p>Description: Thoracic surgery procedure codes (THORAIP) 47 codes added</p> <p>Rationale: Added brachial plexus and subclavian vessel release procedures to the THORAIP denominator exclusion since these procedures generally involve rib resection, which should be excluded from the denominator.</p> |
| v2023 | August 2023 | PDI 08 | Fiscal Year Coding | <p>Description: Coagulation disorders diagnosis codes (COAGDID) 10 codes added</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|--|--|
| (ICD-10) for SAS QI & WinQI | | | | Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 08 | Fiscal Year Coding | Description: Control of hemorrhage and evacuation of hematoma procedures (HEMOTH2P) 18 codes added, 15 codes removed Rationale: Removed certain procedure codes for release of the spinal cord or peripheral nerves from HEMOTH2P, as these procedures are not plausibly related to a postoperative hemorrhage or hematoma |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 09 | Specification/ Calculation | Description: Degenerative neurologic disorder diagnosis codes (DGNEUID) 19 codes added, 7 codes removed Rationale: New codes were introduced in fiscal year 2023 to specify dementia severity for all key types of dementia. Based on the clinical concept, and prior analyses, the denominator exclusion for PDI 09 has been narrowed to severe dementia. |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 09 | Fiscal Year Coding | Description: Lung transplant procedure codes (LUNGTRANSP) 2 codes added Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 09 | Fiscal Year Coding Specification/ Calculation | Description: Neuromuscular disorders diagnosis codes (NEUROMD) 16 codes added Rationale: 10 codes were added as annual coding updates. The other 6 Quadriplegia codes were added because Quadriplegia was identified as a condition that is associated with respiratory complications after surgery. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-------------------------------|---|
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 09 | Fiscal Year Coding | <p>Description: Updated Laryngeal, pharyngeal, nose, mouth and pharynx surgery procedure codes (NUCRANP) 28 codes removed</p> <p>Rationale: Airway drainage procedures (via natural or artificial opening) and procedures to remove or revise tracheostomy devices were identified as procedures that may be performed to treat or prevent acute respiratory failure. These procedures should not serve as denominator exclusions for PSI 11 because they do not justify prolonged endotracheal intubation or mechanical ventilation.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10 | Specification/ Calculation | <p>Description: Revised the assignment of MS-DRGs to DRG*C (surgical class) categories for PDI 10 risk-adjustment</p> <p>Rationale: PDI 10 (Postoperative Sepsis Rate) has a denominator exclusion for surgical class 4 (i.e., dirty operative site) and incorporates risk-adjustment based on other surgical classes, defined as clean (class 1), clean-contaminated (class 2), potentially contaminated (class 3), or unspecified (class 9). This classification is based on surgical Medicare Severity Diagnosis Related Groups (MS-DRGs) and must therefore be viewed as approximate. In the absence of detailed clinical information about the surgical site, AHRQ reviewed the current architecture of MS-DRGs and the empirically observed incidence of PDI 10 for clusters of MS-DRGs. This review led to reassignment of several MS-DRGs to different surgical classes (e.g., all hernia repairs were assigned to class 1), which improved the performance of the risk-adjustment model.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10 | Fiscal Year Coding | <p>Description: MS-DRG codes for surgical class 1 (DRG1C) 6 codes added, 5 codes removed</p> <p>Rationale: Annual coding updates</p> |
| v2023 | August 2023 | PDI 10 | Fiscal Year Coding | <p>Description: MS-DRG codes for surgical class 2 (DRG2C) 3 codes added, 8 codes removed</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-------------------------------|--|
| (ICD-10) for SAS QI & WinQI | | | | Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10 | Fiscal Year Coding | Description: MS-DRG codes for surgical class 3 (DRG3C) 2 codes added, 1 code removed Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10 | Fiscal Year Coding | Description: MS-DRG codes for surgical class 9 (DRG9C) 1 code added Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10 | Fiscal Year Coding | Description: Infection diagnosis codes (INFECID) 3 codes added Rationale: In some cases, patients with chronic pyelonephritis associated with urinary tract obstruction or vesicoureteral reflux may be coded with N11 diagnoses that represent bacterial infections present on admission. These infections pose a risk of postoperative sepsis to justify exclusion from the denominator of PDI 10. |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 12 | Fiscal Year Coding | Description: Hemophilia diagnosis codes (HEMOPHD) 2 codes added Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 15 | Specification/ Calculation | Description: Diabetes with short-term complications diagnosis codes (ACDIASD) 5 codes added |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|--|-------------------------------|--|
| | | | | <p>Rationale: Updated code list to include hospital admissions for E13 type 1.5 diabetes, also known as MODY (Maturity Onset Diabetes of the Young) and LADA (Latent Autoimmune Diabetes in Adults)</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Software/ Documentation | <p>Description: Updated software default option to include COVID-19 discharges</p> <p>Rationale: Starting with v2023, the QI risk adjustment models were developed using discharge data that included diagnosis codes for COVID-19. As such, the QI software no longer defaults to excluding COVID-19 discharges. Instead, the software defaults to the inclusion of all discharges. To temporarily provide users with flexibility, the QI software retains the option to exclude discharges with COVID-19, but the user will not receive risk-adjusted rates or composites in the output. The algorithm that defines COVID-19 only considers COVID-19 present-on-admission to remain consistent with the definition and intent of other risk factors considered in QI risk adjustment models.</p> |
| V2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Software/ Documentation | <p>Description: Updated risk-adjustment models and re-estimated covariates, coefficients, signal variance and reference arrays using three-year reference population</p> <p>Rationale: Models are re-estimated with each software version to leverage the latest data available at the time of development. The v2023 risk adjustment models account for the quarterly effect of COVID-19. Combining three years of data to make the reference population allows for robust risk-adjustment models and accurate estimation of risk-scores in pre-pandemic (2019) and time-varying acute pandemic(2020-2021) periods. Hospital data input into QI software from 2022 and later are treated as if occurring in the last quarter of 2021 for risk adjustment.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Specification/ Calculation | <p>Description: Updated the Clinical Classifications Software Refined (CCSR) for ICD-10-CM Diagnoses (https://www.hcup-us.ahrq.gov/toolssoftware/ccsr/dxcsr.jsp) to improve efficiency and reflect fiscal year 2023 coding and categories used in risk-adjustment</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|--|-----------------------|--|
| | | | | <p>Rationale: Annual updates based on fiscal year coding, clinical review, user feedback, and empirical analysis of significant risk-factors. In analysis of the reference population, if there are not enough denominator discharges in a CCSR category, then the category is not a feature in risk-adjustment. As a result, CCSR categories vary in each software version due to changes in the underlying reference population.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Fiscal Year Coding | <p>Description: Updated AHRQ’s Elixhauser Comorbidity Software Refined for ICD-10-CM Diagnoses to v2023.1</p> <p>Rationale: Select Elixhauser Comorbidity Software Refined comorbidities (https://www.hcup-us.ahrq.gov/toolssoftware/comorbidityicd10/comorbidity_icd10.jsp) are included in certain PDI risk-adjustment models.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Fiscal Year Coding | <p>Description: Added Present on Admission (POA) Exempt ICD-10-CM diagnosis codes, Version 40 (POAXMPT_V40FMT). New codes are defined by CMS at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Coding</p> <p>Rationale: Annual coding updates</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10, PDI 12, PDI 18 | Fiscal Year Coding | <p>Description: Intermediate-risk immunocompromised state diagnosis codes (IMMUITD) 2 codes added</p> <p>Rationale: Annual coding updates</p> |
| v2023 | August 2023 | PDI 10, PDI 12, PDI 18 | Fiscal Year Coding | <p>Description: High-risk immunocompromised state diagnosis codes (IMMUNHD) 1 code added</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|--|-------------------------------|---|
| (ICD-10) for SAS QI & WinQI | | | | Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 10, PDI 12, PDI 18 | Fiscal Year Coding | Description: High-risk immunocompromised state procedure codes (TRANSPP) 4 codes added Rationale: Annual coding updates |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 14, PDI 15, PDI 16, PDI 18, PDI 90, PDI 91, PDI 92 | Software/ Documentation | Description: Added software option to allow users to specify the risk adjustment model year Rationale: The software allows users to adjust for the effect of COVID-19 by including time periods (year and quarter) in the risk-adjustment models. Users have the option to calculate risk-adjusted results using model coefficients estimated with 2020 data (pandemic period) or 2019 data (non-pandemic period). |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 14, PDI 15, PDI 16, PDI 18, PDI 90, PDI 91, PDI 92 | Specification/ Calculation | Description: Replaced use of generic county poverty deciles code list (POVCAT) with year-specific code lists County Poverty Deciles - Based on 2020 Census Data (POVCAT20F) and County Poverty Deciles - Based on 2019 Census Data (POVCAT19F) Rationale: Version 2023 selects poverty deciles that best reflect user data for the calculation of risk-adjusted outcomes |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 14, PDI 15, PDI 16, PDI 18, PDI 90, PDI 91, PDI 92 | Software/ Documentation | Description: Updated software population estimates based on intercensal and postcensal estimates of county-level population by single-year age group, sex, race, and Hispanic origin covering the years 2000 through 2022 received from the Census Bureau (http://www.census.gov/popest/). Rationale: Annual updates |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|--|--|--|
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | PDI 14, PDI 15, PDI 16, PDI 18, PDI 90, PDI 91, PDI 92 | Software/ Documentation | <p>Description: Streamlined parameter files for area-level estimates</p> <p>Rationale: Previously, the software used to calculate area-level indicators used text parameter files while the software used to calculate hospital-level indicators used CSV files. As a move to unify the software and gain efficiencies, v2023 aligns the parameter estimate files between two software, i.e., using CSV files.</p> |
| v2023 (ICD-10) for SAS QI & WinQI | August 2023 | NQI 03, PDI 08, PDI 09, PDI 10 | Fiscal Year Coding | <p>Description: Operating room procedure codes (ORPROC) 305 codes added, 350 codes removed</p> <p>Rationale: Annual coding updates and revisions to address inconsistencies in the handling of percutaneous procedures typically performed with imaging guidance, or at the bedside.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI All | Software/ Documentation | <p>Description: Added fiscal year (FY) 2022 functionality</p> <p>Rationale: The AHRQ PDI software v2022 reflects coding changes based on fiscal year 2022 coding updates to the International Classification of Diseases, Tenth Revision, Clinical Modification/Procedure Coding System (ICD-10-CM/PCS).</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI All | Software/ Documentation and Specification/ Calculation | <p>Description: Removed major diagnostic category (MDC) imputation based on mapping from MS-DRGs to MDCs (MDCF2T)</p> <p>Rationale for the change: The MDC imputation (i.e. MDCNEW logic) allowed for a MDC based on a diagnosis related group (DRG) to be created when MDC is not present in the input data file. However, this imputation was error-prone when the correct Center for Medicare & Medicaid Services (CMS) Medicare Severity Diagnosis Related Groups (MS-DRG) classification software is not applied in the input data. Thus, MDC is now treated as a required data element. Users MUST PROVIDE the MDC generated by the CMS MS-DRG grouper software, without</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|----------------------------|--|
| | | | | imputing or mapping from MS-DRGs. All records should have an MDC between 01 and 25. |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI All | Software/ Documentation | <p>Description: MS-DRG to MDC mapping (MDCF2T) 790 codes removed</p> <p>Rationale for change: With the removal of the MDC imputation logic in v2022, a MS-DRG to MDC mapping is no longer required.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI All | Software/ Documentation | <p>Description: Added MDC_PROVIDED option in the CONTROL program</p> <p>Rationale for the change: Users are required to provide MDC on their input data. If MDC is missing (MDC_PROVIDED = 0), the software only calculates numerators, denominators, and observed rates. Expected rates, risk-adjusted rates, smoothed rates, and composites are suppressed when MDC is not provided. If MDC_PROVIDED = 1 and MDC is always missing on the input data, the software will prevent users from calculating the indicators.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI All | Software/ Documentation | <p>Description: Added global exclusion for missing MDC</p> <p>Rationale for the change: MDC is used in the specifications of select indicators. Therefore, data must include valid MDCs or accurate calculation.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI All | Software/ Documentation | <p>Description: Updated AHRQ's Elixhauser Comorbidity Software Refined for ICD-10-CM Diagnoses Tool used in the PDI module</p> <p>Rationale for the change: Select Elixhauser Comorbidity Software Refined comorbidities (https://www.hcup-us.ahrq.gov/toolssoftware/comorbidityicd10/comorbidity_icd10.jsp) are included in certain risk-adjustment models.</p> |
| v2022 | July 2022 | PDI 01 | Fiscal Year Coding | <p>Description: Spine surgery procedure codes (SPINEP) 20 codes added</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|-------------------------------|--|
| (ICD-10) for SAS QI & WinQI | | | | Rationale for change: Annual coding updates |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 05 | Specification/ Calculation | Description: Potentially trans-pleural cardiac procedures (CARDSIP) 355 codes added Rationale for change: Users identified additional procedures that are potentially performed via the trans-pleural route and are therefore expected to cause small pneumothoraxes. |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 08 | Specification/ Calculation | Description: Updated denominator exclusion where the treatment of postoperative hemorrhage or hematoma occurs before the first operating room procedure to no longer require any secondary ICD-10-CM diagnosis code for postoperative hemorrhage or hematoma Rationale for change: PDI 08 excludes discharges in which the treatment of postoperative hemorrhage or hematoma (HEMOTH2P) occurs before the first operating room procedure (ORPROC). Thus, any secondary ICD-10-CM diagnosis code for postoperative hemorrhage or hematoma (POHMRI2D) is not required in the exclusion logic. |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 08 | Fiscal Year Coding | Description: Control of hemorrhage and evacuation of hematoma procedures (HEMOTH2P) 12 codes added Rationale for change: Annual coding updates. |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 09 | Specification/ Calculation | Description: Updated numerator criteria to use the last reported date of the prolonged mechanical ventilation or intubation procedure rather than the first Rationale for change: In prior versions, the software used the first reported date of the prolonged mechanical ventilation or intubation procedures (PR9672P, PR9671P, PR9604P) to capture some PDI 09 numerator events. The intent of PDI 09 is to capture |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|-------------------------------|--|
| | | | | numerator events where prolonged mechanical ventilation or intubation procedures occur on the same day or certain days after the first operating room procedure (ORPROC). However, because there may be multiple procedures in the same discharge, capturing the last occurrence date of the procedure better aligns the measure with its clinical intent. |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 09 | Specification/ Calculation | <p>Description: Require neuromuscular and degenerative neurological disorders be present on admission for denominator exclusion</p> <p>Rationale for change: In prior versions, discharges were excluded with any listed ICD-10-CM diagnosis code for neuromuscular disorder (NEUROMD), or with any listed ICD-10-CM diagnosis code for degenerative neurological disorder (DGNEUID) from the denominator. The intent is for these conditions to exclude a discharge only if the conditions are comorbid (i.e., present on admission). However, there was no "present on admission" (POA) qualification for the denominator exclusions in prior versions. Thus, the present on admission requirement better aligns the measure with its clinical intent.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 09 | Fiscal Year Coding | <p>Description: Laryngeal, pharyngeal, nose, mouth and pharynx surgery procedure codes (NUCRANP) 2 codes added</p> <p>Rationale for change: Annual coding updates</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 10 | Fiscal Year Coding | <p>Description: MS-DRG to Modified DRG (DRGF2T) 2 code result values changed</p> <p>Rationale for change: Annual coding updates.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 10 | Specification/ Calculation | <p>Description: Updated category (HPPD10) for risk levels based on high-risk and intermediate-risk immune compromising conditions</p> <p>Rationale for change:</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|-------------------------------|---|
| | | | | HPPD10 includes high-risk and intermediate-risk immune compromising conditions as a significant risk factor in the PDI 10 model. |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 10 | Specification/ Calculation | <p>Description: High-risk immunocompromised state diagnosis codes (IMMUNHD) 1 code added</p> <p>Rationale for change: Annual coding updates.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 10 | Fiscal Year Coding | <p>Description: Infection diagnosis codes (INFECID) 5 codes added</p> <p>Rationale for change: Annual coding updates</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 10 | Specification/ Calculation | <p>Description: Intermediate-risk immunocompromised state diagnosis codes (IMMUITD) 7 codes added</p> <p>Rationale for change: Annual coding updates</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 12 | Fiscal Year Coding | <p>Description: Cancer diagnosis codes without leukemia/lymphoma (CANITD) 2 codes added</p> <p>Rationale for change: Annual coding updates</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 01 | Specification/ Calculation | <p>Description: Updated mapping from ICD-10-PCS to Procedure Class (PRCLASS) v2022.2</p> <p>Rationale for change: PRCLASS is defined by the HCUP Procedure Class Tool (https://www.hcup-us.ahrq.gov/toolssoftware/procedureicd10/procedure_icd10.jsp). PRCLASS is used to define hospital level risk-adjustment variables</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|---|
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Specification/ Calculation | <p>Description: Updated the Clinical Classifications Software Refined (CCSR) for ICD-10-CM Diagnoses (https://www.hcup-us.ahrq.gov/toolssoftware/ccsr/dxccsr.jsp) to improve efficiency and reflect fiscal year 2022 coding and categories used in risk-adjustment</p> <p>Rationale for change: Annual updates based on fiscal year coding, clinical review, user feedback, and empirical analysis of significant risk-factors. In analysis of the reference population, if there are not enough denominator discharges in a CCSR category, then the category is not a feature in risk-adjustment. As a result, CCSR categories vary in each software version due to changes in the underlying reference population.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Fiscal Year Coding | <p>Description: Added POA Exempt ICD-10-CM diagnosis codes, Version 39 (POAXMPT_V39FMT). New codes are defined by CMS at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Coding</p> <p>Rationale for the change: Annual coding updates.</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | NQI 03, PDI 08, PDI 09, PDI 10 | Fiscal Year Coding | <p>Description: Operating room procedure codes (ORPROC) 1538 codes added 31 codes removed</p> <p>Rationale for change: Annual coding updates</p> |
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 14, PDI 15, PDI 16, PDI 18, PDI 90, PDI 91, PDI 92 | Fiscal Year Coding | <p>Description: Updated County Poverty Deciles - Based on Census Data mapping (POVCAT) and coefficients using 2019 U.S. Census Small Area Income and Poverty Estimates</p> <p>Rationale for change: Annual coding updates.</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|---|
| v2022 (ICD-10) for SAS QI & WinQI | July 2022 | PDI 14, PDI 15, PDI 16, PDI 18, PDI 90, PDI 91, PDI 92 | Software/ Documentation | <p>Description: Updated software population estimates based on intercensal and postcensal estimates of county-level population by single-year age group, sex, race, and Hispanic origin covering the years 2000 through 2021 received from the Census Bureau (http://www.census.gov/popest/).</p> <p>Rationale for change: Annual coding updates.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI All | Software/ Documentation | <p>Description: Capped smoothed rates to 1 if values exceed 1</p> <p>Rationale for change: Observed rates cannot exceed 1 (the value where the numerator is equal to the denominator). Since risk adjusted and smoothed rates should be reflective of actual rates, they also should not exceed 1. The upper limit of 1 is imposed in cases where, under normal circumstances, the risk adjustment or smoothing function results in a rate that slightly exceeds 1.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Specification/ Calculation | <p>Description: Updated the Clinical Classifications Software Refined (CCSR) for ICD-10-CM Diagnoses Tool to reflect fiscal year 2021 coding and updated categories used in risk-adjustment</p> <p>Rationale for change: Based on a clinical review of the diagnoses included in several of the CCSR categories, such as Factors Influencing Health Status (FAC), were too heterogeneous to be clinically interpretable as risk factors or included a significant amount of Z codes, which are not coded consistently across hospitals.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Specification/ Calculation | <p>Description: Added an option for users to specify the length and data type of the hospital identifier (HOSPID) found on the input discharge data. The default is numeric length 5.</p> <p>Rationale for change: Allowing users to specify the attributes of the hospital identifier provides flexibility for users to calculate hospital-level risk-adjusted rates when run on a limited set of discharge records</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|---|
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 09, PDI 10, PDI 12, NQI 03 | Software/ Documentation | <p>Description: Removed risk-adjustment variable for Adverse Neonatal Conditions (ODC904) from the output of the PDI_ALL_MEASURES.sas program</p> <p>Rationale for change: Given that this variable is now fully captured by AHRQ’s Clinical Classifications Software Refined (CCSR) for ICD-10-CM Diagnoses Tool (https://www.hcup-us.ahrq.gov/toolssoftware/ccsr/ccs_refined.jsp), there is no need to construct/rename to a separate variable.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Software/ Documentation | <p>Description: Implemented an option in the CONTROL program to address discharges with an ICD-10-CM diagnosis for COVID-19 and their use in measure calculation. Users have the option to:</p> <ol style="list-style-type: none"> 1) Exclude COVID discharges from the numerator and denominator 2) Take no action with respect to COVID discharges 3) Include only COVID discharges in the numerator and denominator. <p>The recommended and default choice is to exclude COVID-19 discharges. For options 2 and 3 above, the software suppressed expected rates, risk-adjusted rates, smoothed rates, and composites for hospital indicators.</p> <p>Rationale for change: Because the 2018 HCUP reference population pre-dates the public health emergency, it does not provide an accurate representation of COVID-19 discharges that is required for risk-adjustment. Therefore, users can only calculate expected, risk-adjusted, smoothed rates, or composites when they select the default option to exclude COVID-19 discharges.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Specification/ Calculation | <p>Description: Included AHRQ’s Elixhauser Comorbidity Software Refined for ICD-10-CM Diagnoses Tool as a core component of the PDI module</p> <p>Rationale for change: Select Elixhauser Comorbidity Software Refined comorbidities (https://www.hcup-us.ahrq.gov/toolssoftware/comorbidityicd10/comorbidity_icd10.jsp) are included in certain risk-adjustment models.</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|---|
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Software/ Documentation | <p>Description: For hospital-level measures, the expected value, EHAT, is now capped at a value of 0.99</p> <p>Rationale for change: The probability of an event is naturally bounded by 0 and 1 and is unlikely to be exactly 1; therefore, to avoid a negative value when calculating variance, an upper bound for EHAT at 0.99 was implemented.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, NQI 03 | Software/ Documentation | <p>Description: Expected rates, risk-adjusted rates, smoothed rates, and composites are suppressed in certain strata for hospital level indicators.</p> <p>Rationale for change: AHRQ SAS QI software users continue to have the option to produce stratified rates. Because age, gender, age in days, and birth weight are used in risk adjustment models, it is inappropriate to produce risk-adjusted rates for any stratum that includes these variables.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 08, PDI 09 | Specification/ Calculation | <p>Description: For users that set PRDAY = 0 in the CONTROL program, the PDI module suppresses expected rates, risk-adjusted rates, smoothed rates, and composites for measures that use PRDAYn information.</p> <p>Rationale for change: PRDAY information is required for some indicators in PDI module measure specifications. Users should set the PRDAY macro variable to '0' in the PDI CONTROL program when PRDAYn is missing or incomplete on the input data.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 08 | Specification/ Calculation | <p>Description: Changed measure name from PDI 08 Perioperative Hemorrhage or Hematoma Rate to PDI 08 Postoperative Hemorrhage or Hematoma Rate</p> <p>Rationale for change: ICD-10-CM codes no longer allow preoperative or intraoperative hemorrhage or hematoma.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 09 | Specification/ Calculation | <p>Description: Removed the denominator exclusion for MDC 5 diseases/disorders of the circulatory system</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|---|
| | | | | <p>Rationale for change: Denominator exclusions should exclude cases that are false positives, cases with doubtful preventability, or other cases with face validity concerns. To refocus the QIs on quality improvement, several exclusions that do not meet these criteria are removed from denominator. This variation in risk is handled through risk adjustment.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 09 | Specification/ Calculation | <p>Description: Remove logic where discharges with missing PRDAY information were, by default, assigned as PDI 09 numerator events given other denominator criterion were satisfied</p> <p>Rationale for change: The logic overestimated the events for this measure.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12 | Software/ Documentation | <p>Description: Categorize discharges as surgical discharges using fiscal year dependent code sets SURGI2R or SURGI2R_PREV</p> <p>Rationale for change: Since Medicare Severity Diagnosis Related Groups (MS-DRGs) are fiscal year dependent, this functionality allows certain MS-DRGs to be categorized as surgical DRGs for fiscal years 2020 and prior.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 12 | Fiscal Year Coding | <p>Description: Cancer diagnosis codes without leukemia/lymphoma (CANITD) 31 codes added</p> <p>Rationale for change: Annual coding updates.</p> |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 05 | Fiscal Year Coding | <p>Description: Potentially trans-pleural cardiac procedures (CARDSIP) 63 codes added, 7 codes removed</p> <p>Rationale for change: Annual coding updates.</p> |
| v2021 | July 2021 | PDI 08 | Fiscal Year Coding | <p>Description: Coagulation disorders diagnosis codes (COAGDID)</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|--|
| (ICD-10) for SAS QI & WinQI | | | | Added 2 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, PDI 14, PDI 15, PDI 16, PDI 18, NQI 03 | Specification/ Calculation | Description: New setname for COVID diagnosis codes for use from Q2 2020 on (COVIDD) used to identify cases for optional exclusion of all hospital indicators. The CONTROL program flag COVID_19 defines the optional exclusion. Rationale for change: Added setname to capture newly released diagnosis codes for documenting cases of COVID-19. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12, PDI 14, PDI 15, PDI 16, PDI 18, NQI 03 | Specification/ Calculation | Description: New setname for COVID diagnosis codes for use during Q1 2020 (COVIDQ120D) used to identify cases for optional exclusion of all hospital indicators. The CONTROL program flag COVID_19 defines the optional exclusion. Rationale for change: Added setname to capture newly released diagnosis codes for documenting cases of COVID-19. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10 | Fiscal Year Coding | Description: MS-DRG codes for surgical class 1 (DRG1C) Added 5 codes, Removed 6 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10 | Fiscal Year Coding | Description: MS-DRG codes for surgical class 2 (DRG2C) Added 5 codes, Removed 1 code Rationale for change: Annual coding updates. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|---------------------------|-----------------------|--|
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10 | Fiscal Year Coding | Description: MS-DRG codes for surgical class 3 (DRG3C) Added 2 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10 | Fiscal Year Coding | Description: MS-DRG codes for surgical class 9 (DRG9C) Added 1 code Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10 | Fiscal Year Coding | Description: MS-DRG to Modified DRG (DRGF2T) Added 12 codes, Changed 11 code result values Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 08 | Fiscal Year Coding | Description: Control of hemorrhage and evacuation of hematoma procedures (HEMOTH2P) Added 8 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10, PDI 12, PDI 18 | Fiscal Year Coding | Description: Cirrhosis diagnosis codes (HEPFA2D) Removed 1 code Rationale for change: Annual coding updates. |
| v2021 | July 2021 | PDI 10, PDI 12, PDI 18 | Fiscal Year Coding | Description: Intermediate-risk immunocompromised state diagnosis codes (IMMUITD) |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|---------------------------|--|---|
| (ICD-10) for SAS QI & WinQI | | | | Added 12 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 10, PDI 12, PDI 18 | Fiscal Year Coding and Specification/ Calculation | Description: High-risk immunocompromised state diagnosis codes (IMMUNHD) Added 59 codes, Removed 28 codes Rationale for change: Annual coding updates and measure refinements to address patient remission status. |
| v2021 (ICD- 10) for SAS QI & WinQI | July 2021 | PDI 10 | Fiscal Year Coding | Description: Infection diagnosis codes (INFECID) Added 145 codes Rationale for change: Annual coding updates. |
| v2021 (ICD- 10) for SAS QI & WinQI | July 2021 | PDI 09 | Specification/ Calculation | Description: Lung cancer procedure codes (LUNGCIP) Added 44 codes Rationale for change: Add procedure codes for resections and excisions involving the bronchi, diaphragm, rib cage, or chest wall to the LUNCIP denominator exclusion. These procedures may result in prolonged intubations or reintubations |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 09 | Specification/ Calculation | Description: Lung transplant procedure codes (LUNGTRANSP) Added 3 codes Rationale for change: Add heart transplant codes to the LUNGTRANSP denominator exclusion. These procedures may result in prolonged intubations or reintubations. |
| v2021 | July 2021 | PDI 01, PDI 09 | Fiscal Year | Description: |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|--|--|
| (ICD-10) for SAS QI & WinQI | | | Coding | MS-DRG TO MDC (MDCF2T) Added 12 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 12 | Fiscal Year Coding | Description: Medical discharge MS-DRGs (MEDIC2R) Added 4 codes, Changed 10 code result values Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 09 | Fiscal Year Coding | Description: Neuromuscular disorders diagnosis codes (NEUROMD) Added 5 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 08, PDI 09, PDI 10, NQI 03 | Specification/ Calculation Fiscal Year Coding | Description: Operating room procedure codes (ORPROC) Added 2901 codes Rationale for change: Coding updates based on clinical review, in addition to updates due to fiscal year coding changes and code retirements. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, NQI 03 | Fiscal Year Coding | Description: Added POA exempt codes for update to V38 (POAXMPT_V38FMT). New codes are defined by CMS at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Coding Rationale for change: Annual coding updates. |
| v2021 | July 2021 | PDI All | Fiscal Year Coding | Description: Updated County Poverty Deciles - Based on Census Data (POVCAT) mapping |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|--|-------------------------------|--|
| (ICD-10) for SAS QI & WinQI | | | | and coefficients using 2018 U.S. Census Small Area Income and Poverty Estimates Changed/Updated 1475 code labels Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI All | Specification/ Calculation | Description: Updated mapping from ICD-10-PCS to Procedure Class (PRCLASS) v2021.1 Rationale for change: PRCLASS is defined by the HCUP Procedure Class Tool (https://www.hcup-us.ahrq.gov/toolssoftware/procedureicd10/procedure_icd10.jsp). PRCLASS is used to define hospital level risk-adjustment variables |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 09 | Specification/ Calculation | Description: Esophageal surgery procedure codes (PRESOPP) Added 6 codes Rationale for change: Added codes to address esophageal replacement which may result in prolonged intubations or reintubations. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01 | Fiscal Year Coding | Description: Spine surgery procedure codes (SPINEP) Added 2 codes Rationale for change: Annual coding updates. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, PDI 12 | Fiscal Year Coding | Description: Surgical discharge MS-DRGs (SURGI2R) Added 11 codes, removed 3 codes Rationale for change: Annual coding updates. |
| v2021 | July 2021 | PDI 01, PDI 05, PDI 08, PDI 09, PDI 10, | Specification/ Calculation | Description: New setname for Fiscal Year Dependent Surgical MS-DRGs for prior to FY2021 |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|--|---|
| (ICD-10) for SAS QI & WinQI | | PDI 12 | | codes (SURGI2R_PREV) Rationale for change: The Centers for Medicare & Medicaid Services (CMS) identified MS-DRGs 014, 016, and 017 as Medical instead of Surgical in FY 2021. This change is reflected in AHRQ's v2021 software (Appendix E: SURGI2R; Appendix C: MEDIC2R). For discharges prior to October 1, 2020, the QI software automatically uses both SURGI2R and SURGI2R_PREV (Appendix E) to identify records in these three MS-DRGs as Surgical instead of Medical, ensuring consistency with CMS' contemporaneous classification. |
| v2021 (ICD-10) for SAS QI & WinQI | July 2021 | PDI 05 | Fiscal Year Coding Specification/ Calculation | Description: Thoracic surgery procedure codes (THORAIP) Added 924 codes, removed 308 codes Rationale for change: Annual coding updates, and coding enhancements to address exclusion criteria and remove overlap with setname CARDSIP. |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI All | Specification/ Calculation | Description: Delete records where DRG is assigned the value 999 Rationale for change: DRG 999 is assigned to records that are considered ungroupable based on information provided on the discharge record. |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI All | Specification/ Calculation | Description: Add an option to specify whether observed to expected (O-E) ratio smoothing is calibrated to the reference population or the user's data. The default and recommended option is to the reference population. Rationale for change: Allows large health care systems or states to calibrate expected QI rates within the system. |
| v2020 (ICD-10) for SAS QI & | July 2020 | PDI All | Fiscal Year Coding | Description: Updated MS-DRG to MDC mapping (MDCF2T). |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|---------------------------------------|-------------------------------|--|
| WinQI | | | | Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI All | Specification/ Calculation | Description: Included AHRQ’s Clinical Classifications Software Refined (CCSR) for ICD-10-CM Diagnoses Tool as a core component of the PDI module Rationale for the change The CCSR (https://www.hcup-us.ahrq.gov/toolssoftware/ccsr/ccs_refined.jsp) is used for the calculation of variables used in risk-adjustment and provides consistency in the programming approach across modules |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 01, 05, 08, 09, 10, 12, NQI 03 | Fiscal Year Coding | Description: Added POA exempt codes for the fiscal year 2020 update to V37 (POAXMPT_V37FMT). New codes are defined by CMS at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/Coding Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 14, 15, 16, 18, 90, 91, 92 | Fiscal Year Coding | Description: Updated County Poverty Deciles (POVCAT) mapping Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 01, 05, 08, 09, 10, 12, NQI 03 | Specification/ Calculation | Description: Removed the small number of numerator exclusions described as “otherwise qualifying for the numerator/denominator criteria” in previous versions of the software. Rationale for change: POA dependent exclusions were switched from numerator to strictly denominator exclusions. Associated variables remain in the program in case they are needed for future for POA exclusions. |
| v2020 (ICD-10) for | July 2020 | PDI 01, 05, 08, 10, 12, NQI 03 | Specification/ Calculation | Description: New alternative transfer variable |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------------------------------|-------------------------------|---|
| SAS QI & WinQI | | | | Rationale for the change Variable added to include alternative transfer variable as input to risk-adjustment |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 01, 05, 09, 10, 12, NQI 03 | Specification/ Calculation | Description: Added diagnosis codes Z9911, Z9912, J95850 and J95859 for Ventilator Dependence (ODC_VEN) Rationale for change: Ventilator Dependence diagnosis are used to in the calculation of variables used in risk-adjustment |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 01, 05, 08, 09, 10, 12 | Fiscal Year Coding | Description: Updated MS-DRGs to Modified DRG mapping (DRGF2T) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 01, 05, 08, 09, 10, 12 | Fiscal Year Coding | Description: Added DRGs 319 and 320 to Surgical DRGs (SURGI2R) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 01, 10 | Specification/ Calculation | Description: Added mapping from ICD-10-PCS to Procedure Class (PRCLASS) Rationale for change: PRCLASS is defined by the HCUP Procedure Class Tool (https://www.hcup-us.ahrq.gov/toolssoftware/procedureicd10/procedure_icd10.jsp). PRCLASS is used to define hospital level risk-adjustment variables new in v2020 |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 08, 09, 10 NQI 03 | Fiscal Year Coding | Description: Updated Operating Room procedure codes (ORPROC) Rationale for change: Annual coding update |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-------------|------------------|-------------------------------|--|
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10, 12, 18 | Fiscal Year Coding | Description: Updated High-risk Immunocompromised State procedure codes (TRANSP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10, 12, 18 | Fiscal Year Coding | Description: Added codes D8130, D8131, D8132 and D8139 to High-Risk Immunocompromised State diagnosis codes (IMMUNHD) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 02 | Specification/ Calculation | Description: Removed Anoxic Brain Damage diagnosis codes (ANOXBD), Severe Burn diagnosis codes (BURNDX), Continuous Mechanical Ventilation procedure codes (CMVENP), Pressure Ulcer Stage diagnosis codes (DECUBVD), Exfoliative Skin Disorder Diagnosis codes (EXFOLIATXD), Hemiplegia, Paraplegia, or Quadriplegia diagnosis codes (HEMIPID), and Spina Bifida or Anoxic Brain Damage diagnosis codes (SPINABD) Rationale for change: PDI 02 was retired in v2019, these codes are no longer relevant |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 03 | Software/ Documentation | Description: Removed Retained Surgical Item or Unretrieved Device Fragment diagnosis codes (FOREIID) Rationale for change: PDI 03 was retired in v2019, these codes are no longer relevant |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 05 | Fiscal Year Coding | Description: Added codes J860 and J869 to Pleural Effusion diagnosis codes (PLEURAD) and removed A150 Rationale for change: Annual coding update |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|-------------------------------|---|
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 05 | Fiscal Year Coding | Description: Updated Cardiac procedure codes (CARDSIP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 05 | Fiscal Year Coding | Description: Updated Thoracic Surgery procedure codes (THORAIP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 08 | Fiscal Year Coding | Description: Added codes 5A15A2F, 5A15A2G and 5A15A2H to Extracorporeal Membrane Oxygenation (ECMO) procedure codes (ECMOP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 08 | Fiscal Year Coding | Description: Updated Control of Perioperative Hemorrhage and Evacuation of Hematoma procedure codes (HEMOTH2P) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 09 | Fiscal Year Coding | Description: Added codes Z9911 and Z9912 to Acute Respiratory Failure diagnosis codes (ACURF3D) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 09 | Specification/ Calculation | Description: New setname added, Tracheostomy Status diagnosis (TRACHID) Rationale for change: |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|-------------------------------|---|
| | | | | Added patients with a history of tracheostomy to the list of excluded neurologic diagnoses. Currently, most coders do not code two related codes together under the "Excludes1" rule (see page 11 of http://www.cdc.gov/nchs/data/icd/10cmguidelines_2017_final.pdf) such as chronic and acute respiratory failure. In the case of PDI 09, coders are instructed not to code chronic and respiratory failure separately which is needed to indicate if patients are admitted with chronic respiratory failure POA but then later develop acute respiratory failure post operatively. However, an exception to this rule is when the two conditions are unrelated (as in the example above) which would permit coders to code these conditions separately. These coding guidelines are relatively new and may take a while for them to be widely used by coders in the field. As a result, adding a code for dependence on ventilator status to identify (and exclude) patients who need ongoing ventilator support to manage their chronic respiratory failure. However, this approach has a major drawback in that it is POA exempt and cannot differentiate between patients who are admitted on ventilator support or those who require ventilator-support after surgery and were discharged in this same state. |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 09 | Fiscal Year Coding | Description: Updated Esophageal Resection procedure codes (PRESOPP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 09 | Fiscal Year Coding | Description: Added codes to Laryngeal, Pharyngeal, Nose, Mouth and Pharynx surgery procedure codes (NUCRANP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 09 | Specification/ Calculation | Description: New setname for Malignant Hyperthermia Due to Anesthesia, initial encounter (MALHYPD) added as a denominator exclusion Rationale for change: Prolonged intubation is part of the treatment for malignant hyperthermia due to anesthesia |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-------------|------------------|-----------------------------|--|
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 09 | Fiscal Year Coding | Description: Updated Lung cancer procedure codes (LUNGCIP) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10 | Fiscal Year Coding | Description: Added MDRGs 0536, 0541, 0542, 0543, 0610 to Surgical Class 1 (DRG1C) and removed MDRGs 0599 and 0899 Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10 | Fiscal Year Coding | Description: Added MDRG codes 1413, 1414 and 8897 to and removed codes 1405 and 8899 from Surgical Class 2 (DRG2C) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10 | Fiscal Year Coding | Description: Added MDRG 1899 to Surgical Class 4 (DRG4C) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10 | Fiscal Year Coding | Description: Added MDRG 8899 to Surgical Class 9 (DRG9C) Rationale for change: Annual coding update |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10 | Fiscal Year Coding | Description: Added code T8144XA to Sepsis diagnosis codes (SEPTI2D) Rationale for change: Annual coding update |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-----------|-----------|-------------------------------|---|
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 10 | Fiscal Year Coding | <p>Description: Updated Infection diagnosis codes (INFECID)</p> <p>Rationale for change: Annual coding update</p> |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 11 | Software/ Documentation | <p>Description: Removed Abdominopelvic Surgery, Open Approach, procedure codes (ABDOMIPOPEN), Abdominopelvic Surgery, Other Approach, procedure codes (ABDOMIPOTHER), Disruption of Internal Operation (Surgical) Wound diagnosis codes (ABWALLCD), Reclosure of Postoperative Disruption of the Abdominal Wall procedure codes (RECLOIP), Gastroschisis or Umbilical Hernia Repair in Newborns (Omphalacele Repair) procedure codes (REPGAST) and Umbilical Hernia diagnosis codes (UMBHERND)</p> <p>Rationale for change: PDI 11 was retired in v2019, these codes are no longer relevant</p> |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 13 | Software/ Documentation | <p>Description: Removed Transfusion Reaction diagnosis codes (TRANFID)</p> <p>Rationale for change: PDI 13 was retired in v2019, these codes are no longer relevant</p> |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PDI 17 | Software/ Documentation | <p>Description: Removed Appendicitis diagnosis codes (ACSAP2D) and Perforations or Abscesses of Appendix diagnosis codes (ACSAPPD)</p> <p>Rationale for change: PDI 17 was retired in v2019, these codes are no longer relevant</p> |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | NQI 02 | Specification/ Calculation | <p>Description: Removed Anencephaly, Polycystic Kidney, Trisomy 13, and Trisomy 18 diagnosis codes (NEOMTDX)</p> <p>Rationale for change:</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-------------------------------|---|
| | | | | NQI 02 was removed in v2019, these codes are no longer relevant |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | NQI 03 | Fiscal Year Coding | <p>Description: Added codes B9621, B9622 and B9623 to Staphylococcal or Gram-Negative Bacterial Infection diagnosis codes (BSI3DX)</p> <p>Rationale for change: Annual coding update</p> |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | NQI 03 | Fiscal Year Coding | <p>Description: Added code T8144XA to Sepsis or Bacteremia diagnosis codes (BSI4DX)</p> <p>Rationale for change: Annual coding update</p> |
| v2020 (ICD-10) for SAS QI & WinQI | July 2020 | PQI 09 | Specification/ Calculation | <p>Description: Removed Birth Weight Less than 2,500 Grams diagnosis codes (ACSLBWD)</p> <p>Rationale for change: PQI 09 was retired from the PDI module in v2019, these codes are no longer relevant</p> |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | NQI 01 | Specification/ Calculation | <p>Description: Indicator removed from software and documentation.</p> <p>Rationale for the change: Indicator retired in v2019.</p> |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | NQI 02 | Specification/ Calculation | <p>Description: Measure NQI 02, Neonatal Mortality rate, is being suppressed in SAS and WinQI.</p> <p>Rationale for the change: Measure is being suppressed due in part to discrepancies in how states define a live birth. CA and several other states, for example, do not have the qualifying language distinguishing a heartbeat from transient cardiac contractions, and distinguishing respirations from fleeting respiratory efforts or gasps. In some cases, induced terminations of pregnancy are misclassified as live births because there were “transient cardiac contractions” and “fleeting respiratory efforts or gasps.” In addition, NQI 02 does not offer a true neonatal mortality rate, because</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-------------------------------|-------------------------------|--|
| | | | | there is no linkage of records for patients who are transferred from one hospital to another, or from a hospital to another setting of care. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | NQI 03 | Fiscal Year Coding | Description: Updated list of operating room procedure codes (ORPROC). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 01, 05, 08, 09, 10, 12 | Fiscal Year Coding | Description: Updated list of surgical DRGs and descriptions (SURGI2R). In addition, removed ICD-9-CM/PCS specific MS-DRGs. Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 01, 05, 08, 09, 10, 12 | Fiscal Year Coding | Description: MDCF2T changed to remap select MS-DRGs for MDC 14. Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 01, 05, 12 | Fiscal Year Coding | Description: Updated list of medical DRGs and descriptions. Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 02 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 03 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|----------------|-------------------------------|---|
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 05 | Fiscal Year Coding | Description: Updated cardiac surgery procedure lists (CARDSIP). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 05 | Fiscal Year Coding | Description: Updated thoracic surgery procedure codes (THORAIP). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 06 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 07 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 08 | Fiscal Year Coding | Description: Updated codes for control of perioperative hemorrhage and evacuation of hematoma procedures (HEMOTH2P), Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 08, 09, 10 | Fiscal Year Coding | Description: Updated list of operating room procedure codes (ORPROC). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 | August | PDI 09 | Fiscal Year | Description: |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|-------------------------------|--|
| (ICD-10) for SAS QI & WinQI | 2019 | | Coding | Updated neuromuscular disorders diagnosis codes (NEUROMD). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 10 | Fiscal Year Coding | Description: Updated list of infection diagnoses and operating room procedure codes (INFECID). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 11 | Fiscal Year Coding | Description: Added codes T85.71XA to the infection diagnosis codes (INFECID). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 11 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 12 | Fiscal Year Coding | Description: Updated codes for cancer diagnosis codes (CANITD). Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 13 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) | August 2019 | PDI 17 | Specification/Cal culation | Description: Indicator removed from software and documentation. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|-----------|--------------------------------------|---|
| for SAS QI & WinQI | | | | Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI 19 | Specification/Cal culation | Description: Indicator removed from software and documentation. Rationale for the change: Indicator retired in v2019. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI | Specification/ Calculation | Description: Removed formats no longer used by software: ACCOPDD, ACDIALD, ACDIAUD, ACLEA2D, ACSBA2D, ACSBACD, ACSCARP, ACSHY2D, ACSHYPD, ACSLEAD, ACSLEAP, CRENLFD, DIALY2P, HYPERID, IMMUNID, IMMUNIP, M1AREA, M2AREA, M3AREA, MRTCHFD and PHYSIDB. Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI | Software/ Documentation change | Description: Removed PDI_PROV_RISKADJ, PDI_PROV_COMPOSITE, PDI Regvars, PDI composite arrays, PDI signal variance arrays, and RACHS programs. Rationale for the change: Hospital-level PDIs are no longer risk-adjusted, and the composite is also retired. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI | Specification/ Calculation | Description: Added POA exempt codes for FY 2019 and modified corresponding macros. Rationale for the change: Measure maintenance and annual coding updates. |
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI | Specification/ Calculation | Description: Updated AGE_SEX risk-adjustment coefficients and removed all other coefficient combinations. Rationale for the change: The hospital-level QI software only produces risk-adjusted rates with age and sex data starting with v2019 |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|----------------|----------------|--------------------------------|--|
| v2019 (ICD-10) for SAS QI & WinQI | August 2019 | PDI All | Fiscal Year Coding | Description: Added MS-DRG codes for MDC 14. Rationale for the change: Measure maintenance and annual coding updates. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Fiscal Year Coding | Description: Added ICD10-PCS codes to the existing denominator exclusion for cardiac procedure (CARDSIP). Rationale for the change: Annual coding update. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Fiscal Year Coding | Description: Added ICD10-PCS codes to the existing denominator exclusion for Thoracic surgery (THORAIP). Rationale for the change: Annual coding update. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Specification/ Calculation | Description: Removed ICD10-PCS codes from the existing denominator exclusion for Thoracic surgery (THORAIP). Rationale for the change: Esophageal procedures unlikely to cause non-preventable pneumothorax (i.e., perforation of the esophagus is a preventable complication). |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Specification/ Calculations | Description: Removed ICD10-PCS codes from the existing denominator exclusion for Thoracic surgery (THORAIP) Rationale for the change: Insertions of devices by this approach into the tracheobronchial tree are very low risk, not included in this specification. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Specification/ Calculations | Description: Removed ICD10-PCS code Introduction of Other Gas into Peritoneal Cavity, Percutaneous Approach (3E0M3SF) from the existing denominator exclusion for Thoracic surgery (THORAIP). Rationale for the change: Unlikely to result in non-preventable pneumothorax. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|------------|----------------|--------------------------------|--|
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Specification/ Calculations | <p>Description: Moved all ICD10-PCS codes from the existing denominator exclusion for Lung or pleural biopsy (LUNGBIP) to Thoracic surgery (THORAIP).</p> <p>Rationale for the change: Codes moved from LUNGBIP to THORAIP due to redundancy.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 01, PDI 05 | Specification/ Calculations | <p>Description: Moved all ICD10-PCS codes from the existing denominator exclusion for Diaphragmatic surgery repair (DIAPHRP) to Thoracic surgery (THORAIP).</p> <p>Rationale for the change: Codes moved from DIAPHRP to THORAIP due to redundancy.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 02 | Specification/ Calculations | <p>Description: Measure NQI 02, Neonatal Mortality rate, is being suppressed in SAS and WinQI.</p> <p>Rationale for the change: Measure is being suppressed due in part to discrepancies in how states define a live birth. CA and several other states, for example, do not have the qualifying language distinguishing a heartbeat from transient cardiac contractions, and distinguishing respirations from fleeting respiratory efforts or gasps. In some cases, induced terminations of pregnancy are misclassified as live births because there were “transient cardiac contractions” and “fleeting respiratory efforts or gasps.” In addition, NQI 02 does not offer a true neonatal mortality rate, because there is no linkage of records for patients who are transferred from one hospital to another, or from a hospital to another setting of care.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 03, PDI 09 | Fiscal Year Coding | <p>Description: Added ICD10-PCS codes to the existing denominator inclusion for OR Procedures (ORPROC).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | NQI 03, PDI 09 | Specification/ Calculations | <p>Description: Removed ICD10-PCS codes from the existing denominator inclusion for OR Procedures (ORPROC).</p> <p>Rationale for the change: Clinical Specification: No longer OR procedure per CMS.</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|------------|-----------|--------------------------------|--|
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 01 | Fiscal Year Coding | <p>Description: Added ICD10-PCS codes to the existing denominator exclusion for Spine surgery (SPINEP).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 01 | Specification/ Calculations | <p>Description: Removed ICD10-PCS codes Extirpation of Matter from Epidural Space, Open Approach (00C30ZZ), Extirpation of Matter from Epidural Space, Percutaneous Approach (00C33ZZ) and Extirpation of Matter from Epidural Space, Percutaneous Endoscopic Approach (00C34ZZ) from the existing denominator exclusion for Spine surgery (SPINEP).</p> <p>Rationale for the change: Revised description (now specifies 'intracranial') no longer applies to spine.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 02 | Fiscal Year Coding | <p>Description: Added ICD10-CM codes for Hypoxic ischemic encephalopathy [HIE], unspecified, P9160, Moderate hypoxic ischemic encephalopathy [HIE], P9162, Severe hypoxic ischemic encephalopathy [HIE], P9163, to existing denominator for inclusion for Hypoxic ischemic encephalopathy [HIE], unspecified (ANOXBD); tech correction moved from HEMIPID.</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 08 | Fiscal Year Coding | <p>Description: Added ICD10-PCS codes to the existing denominator inclusion for post-operative hemorrhage or Miscellaneous hemorrhage hematoma-related procedure (HEMOTH2P).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 08 | Specification/ Calculations | <p>Description: Removed ICD-10 PCS codes Drainage of Pericardial Cavity, Percutaneous Approach, Diagnostic (0W9D3ZX) and Drainage of Pericardial Cavity, Percutaneous Endoscopic Approach, Diagnostic (0W9D4ZX) from the existing denominator inclusion for post-operative hemorrhage or Miscellaneous hemorrhage hematoma-related procedure (HEMOTH2P).</p> <p>Rationale for the change:</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|------------|-----------|--------------------------------|---|
| | | | | Diagnostic procedures unrelated to hemorrhage/hematoma. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 08 | Specification/ Calculations | <p>Description: Removed ICD-10 PCS codes 0VBF0ZZ,0VBF3ZZ,0VBF4ZZ,0VBG0ZZ,0VBG3ZZ,0VBG4ZZ,0VBH0ZZ,0VBH3ZZ,0VBH4ZZ from the existing denominator inclusion for post-operative hemorrhage or Miscellaneous hemorrhage hematoma-related procedure (HEMOTH2P).</p> <p>Rationale for the change: Excision of closely related structures (e.g., prostate, scrotum, testes, epididymis) not included in specification.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 08 | Specification/ Calculations | <p>Description: Removed ICD-10 PCS codes Destruction of Right Inner Ear, Open Approach (095D0ZZ) and Destruction of Left Inner Ear, Open Approach (095E0ZZ) from the existing denominator inclusion for post-operative hemorrhage or Miscellaneous hemorrhage hematoma-related procedure (HEMOTH2P).</p> <p>Rationale for the change: Inner ear unlikely location for postoperative hemorrhage requiring destruction.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 08 | Specification/ Calculations | <p>Description: Removed ICD-10 PCS codes 099D00Z, 099D0ZZ, 099E00Z, 099E0ZZ from the existing denominator inclusion for post-operative hemorrhage or Miscellaneous hemorrhage hematoma-related procedure (HEMOTH2P).</p> <p>Rationale for the change: Inner ear unlikely location for postoperative hemorrhage requiring drainage.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 08 | Specification/ Calculations | <p>Description: Removed ICD-10 PCS codes Extirpation of Matter from Right Inner Ear, Open Approach (09CD0ZZ) and Extirpation of Matter from Left Inner Ear, Open Approach (09CE0ZZ) from the existing denominator inclusion for post-operative hemorrhage or Miscellaneous hemorrhage hematoma-related procedure (HEMOTH2P).</p> <p>Rationale for the change: Inner ear unlikely location for postoperative hemorrhage requiring extirpation.</p> |
| v2018 (ICD-10) for SAS QI & | April 2018 | PDI 09 | Fiscal Year Coding | <p>Description: Added ICD10-CM codes for Juvenile dermatomyositis with respiratory involvement, M3301, Other dermatomyositis with respiratory involvement, M3311, Polymyositis with respiratory involvement M3321,</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|------------|-----------|--------------------------------|---|
| WinQI | | | | <p>Dermatopolymyositis, unspecified with respiratory involvement M3391 to the existing denominator exclusion for Neuromuscular disorders (NEUROMD); Replaces ICD-10 CM Codes M3302, 3312, 3322,3392 due to Clinical Specification: Myopathy WITH respiratory involvement is essential for this exclusion.</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 09 | Fiscal Year Coding | <p>Description: Added ICD10-PCS codes to the existing denominator exclusion for craniofacial anomalies (NUCRANP).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 09 | Specification/ Calculations | <p>Description: Removed ICD10-PCS codes from the existing denominator exclusion for craniofacial anomalies (NUCRANP).</p> <p>Rationale for the change: Corresponding codes for insertion of monitoring, infusion, or intraluminal devices into tracheobronchial tree not included in specification.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 09 | Specification/ Calculations | <p>Description: Removed ICD10-PCS codes 0DQ50ZZ, 0DQ53ZZ, 0DQ54ZZ, 0DQ57ZZ, 0DQ58ZZ from the existing denominator exclusion for craniofacial anomalies (NUCRANP).</p> <p>Rationale for the change: Esophageal procedures usually do not compromise the airway.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 10 | Fiscal Year Coding | <p>Description: Added ICD10-CM codes for Enterocolitis due to clostridium difficile, not specified as recurrent, A0472, Other dermatomyositis with respiratory involvement, M3311, to existing denominator for exclusion (INFECID).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & | April 2018 | PDI 11 | Fiscal Year Coding | <p>Description: Added ICD10-PCS codes to the existing denominator inclusion for abdominopelvic surgery, open approach (ABDOMIPOPEN).</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|------------|-----------|--------------------------------|--|
| WinQI | | | | Rationale for the change: Annual coding update. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11 | Specification/ Calculations | Description: Removed ICD10-PCS codes 0DB10ZX,0DB20ZX,0DT10ZZ,0DT20ZZ from the existing denominator inclusion for abdominopelvic surgery, open approach (ABDOMIPOPEN). Rationale for the change: Esophageal procedures involving upper/middle esophagus unlikely to be approached through the abdomen. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11 | Fiscal Year Coding | Description: Added ICD10-PCS codes to the existing denominator inclusion for abdominopelvic surgery, other than open approach(ABDOMIPOTHER). Rationale for the change: Annual coding update. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11 | Specification/ Calculations | Description: Removed ICD10-PCS codes 0DB13ZX, 0DB14ZX, 0DB14ZZ, 0DB23ZX, 0DB24ZX, 0DB24ZZ, 0DT14ZZ, 0DT24ZZ, 0DW630Z, 0DW632Z, 0DW633Z, 0DW637Z, 0DW63CZ, 0DW63DZ from the existing denominator inclusion for abdominopelvic surgery, other than open approach(ABDOMIPOTHER). Rationale for the change: Esophageal procedures involving upper/middle esophagus unlikely to be approached through the abdomen. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11 | Specification/ Calculations | Description: Removed ICD10-PCS codes 0DH632Z, 0DH633Z, 0DH63DZ, 0DH63MZ, 0DH63UZ from the existing denominator inclusion for abdominopelvic surgery, other than open approach(ABDOMIPOTHER). Rationale for the change: Other esophageal insertion procedures not included in specification, not approached through abdomen. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11 | Specification/ Calculations | Description: Removed ICD10-PCS codes 0DP630Z, 0DP632Z, 0DP633Z, 0DP637Z, 0DP63CZ, 0DP63DZ from the existing denominator inclusion for abdominopelvic surgery, other than open approach(ABDOMIPOTHER). Rationale for the change: |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|------------|------------------------|--------------------------------|--|
| | | | | Other esophageal removal procedures not included in specification, not approached through abdomen. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11 | Fiscal Year Coding | <p>Description: Added ICD10-PCS codes 0KRK07Z, 0KRK0JZ, 0KRK0KZ, 0KRK47Z, 0KRK4JZ, 0KRK4KZ, 0KRL07Z, 0KRL0JZ, 0KRL0KZ, 0KRL47Z, 0KRL4JZ, 0KRL4KZ to the existing denominator inclusion for Reclosure procedure (RECLOIP).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 11, PDI 12, PDI 18 | Specification/ Calculations | <p>Description: Added ICD10-CM codes for Dermatopolymyositis, unspecified without myopathy, M3393, Juvenile dermatomyositis without myopathy, M3303, Other dermatomyositis without myopathy, M3313, to existing denominator for exclusion (IMMUITD).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 12 | Fiscal Year Coding | <p>Description: Added ICD10-CM codes for Aggressive systemic mastocytosis, C9621, Malignant mast cell neoplasm, unspecified, C9620, Malignant mast cell neoplasm, unspecified, C9620, Malignant mast cell neoplasm, unspecified, C9620, to existing denominator for inclusion (CANITD).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 15 | Fiscal Year Coding | <p>Description: Added ICD10-CM codes for Acute myocardial infarction, unspecified, E11.10, E11.11, to existing numerator for inclusion for Type 2 diabetes mellitus with ketoacidosis without coma and with coma (ACDIASD).</p> <p>Rationale for the change: Annual coding update.</p> |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 16 | Fiscal Year Coding | <p>Description: Added ICD10-CM codes for Myocardial infarction type 2, A04.71, A04.72, to existing numerator for exclusion for Enterocolitis due to clostridium difficile, recurrent and non-recurrent (ACBACGD).</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--|-------------------|-----------|--------------------------------|---|
| | | | | Rationale for the change: Annual coding update. |
| v2018 (ICD-10) for SAS QI & WinQI | April 2018 | PDI 18 | Specification/ Calculation | Description: Removed ICD10-CM code N119, chronic tubulo-interstitial nephritis, unspecified, from the list of urinary tract infection diagnosis codes (ACSUTID) in the numerator. Rationale for the change: The numerator specification for acute urinary tract infections (ACSUTID) identifies discharges that should be treated in an ambulatory setting and should exclude chronic conditions. The diagnosis is included in the numerator exclusion for any-listed ICD-10-CM diagnosis codes for kidney/urinary tract disorder (KIDNEY). |
| v7.0 (ICD-10) for SAS QI & WinQI | September 2017 | NQI 01 | Specification/ Calculations | Description: The following codes were removed from THORAIP in ICD-10: 0JH604Z Insertion of Pacemaker, Single Chamber into Chest Subcutaneous Tissue and Fascia, Open Approach 0JH634Z Insertion of Pacemaker, Single Chamber into Chest Subcutaneous Tissue and Fascia, Percutaneous Approach 0JH804Z Insertion of Pacemaker, Single Chamber into Abdomen Subcutaneous Tissue and Fascia, Open Approach 0JH834Z Insertion of Pacemaker, Single Chamber into Abdomen Subcutaneous Tissue and Fascia, Percutaneous Approach Rationale for the change: These codes were left in the logic of PDI 05/NQI 01 due to a GEM mapping error and should be removed because they do not put patients at an increased risk of an iatrogenic pneumothorax, unlike diaphragmatic pacemaker insertion procedures that may involve entering the pleural space. |
| v7.0 (ICD-10) | July 2017 | NQI 03 | Specification/ Calculations | Description: Respecified numerator to require an organism code only for diagnoses without an organism integrated into the code. Rationale for the change: P36 codes (except P36.8) have an organism integrated into the code, and do not allow for a separate organism code. The former definition would miss a majority of neonatal sepsis cases. |
| v7.0 (ICD-10) | July 2017 | NQI 03 | Specification/ | Description: |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|----------------------------|--|
| | | | Calculations | Removed redundant exclusion for sepsis. Rationale for the change: All codes are included in a separate exclusion for sepsis for ICD-10. (BSI4DX). |
| v7.0 (ICD-10) | July 2017 | NQI 03 | Specification/Calculations | Description: Reduce the length of stay exclusion from < 7 days to < 3 days. Rationale for the change: This change harmonizes with The Joint Commission measure of neonatal sepsis. |
| v7.0 (ICD-10) | July 2017 | PDI 01 | Specification/Calculation | Description: Updated codes for spine procedures for existing denominator exclusion. Rationale for the change: Annual coding update. |
| v7.0 (ICD-10) | July 2017 | PDI 02 | Specification/Calculation | Description: An exclusion for severe burns ($\geq 20\%$ body surface area) was added to the denominator for the ICD-10 version of PDI02. Rationale for the change: Patients with severe burns are at an increased risk for skin breakdown and already receive intensive skin care as a result of their burn-related injury. Despite best efforts, progression to stage III or IV pressure ulcers may be largely unpreventable, which is inconsistent with the intent of PDI02 to capture preventable hospital-acquired pressure ulcers. |
| v7.0 (ICD-10) | July 2017 | PDI 02 | Specification/Calculation | Description: PDI 02 denominator exclusions were removed for the following procedures and conditions in ICD-10: pedicle graft procedures, and major skin disorders. Exclusions for patients admitted from acute hospitals or SNFs/ICFs were also removed in the ICD-10 version of PDI 02. Rationale for the change: Before POA reporting was required, these conditions and procedures potentially associated with pressure ulcers were assumed to indicate that the pressure injury was POA. Therefore, exclusions for these conditions and procedures served as a means of removing events that might not be attributable to hospitals. However, now that POA status is required, these exclusions are redundant and lead to undercounting of hospital-acquired pressure ulcers. |
| v7.0 (ICD-10) | July 2017 | PDI 05 | Specification/Calculation | Description: |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|---------------------------|---|
| | | | culation | <p>The following codes were removed from THORAIP in ICD-10: 0JH604Z Insertion of Pacemaker, Single Chamber into Chest Subcutaneous Tissue and Fascia, Open Approach 0JH634Z Insertion of Pacemaker, Single Chamber into Chest Subcutaneous Tissue and Fascia, Percutaneous Approach 0JH804Z Insertion of Pacemaker, Single Chamber into Abdomen Subcutaneous Tissue and Fascia, Open Approach 0JH834Z Insertion of Pacemaker, Single Chamber into Abdomen Subcutaneous Tissue and Fascia, Percutaneous Approach.</p> <p>Rationale for the change: These codes were left in the logic of PDI 05 due to a GEM mapping error and should be removed because they do not put patients at an increased risk of an iatrogenic pneumothorax, unlike diaphragmatic pacemaker insertion procedures that may involve entering the pleural space.</p> |
| v7.0 (ICD-10) | July 2017 | PDI 08 | Specification/Calculation | <p>Description: Antineoplastic chemotherapy induced pancytopenia and other disorders impacting coagulation were added to the definition of platelet disorders for the purpose of excluding patients in the ICD-10 version of PDI 08.</p> <p>Rationale for the change: As an antiplatelet disorder, patients with antineoplastic chemotherapy induced pancytopenia have a higher risk for a PDI 08 event and should consequently be excluded from the measure. Other disorders can decrease coagulation.</p> |
| v7.0 (ICD-10) | July 2017 | PDI 08 | Specification/Calculation | <p>Description: Updated procedure codes for control of hemorrhage or drainage of hematoma</p> <p>Rationale for the change: Annual coding update.</p> |
| v7.0 (ICD-10) | July 2017 | PDI 08 | Specification/Calculation | <p>Description: Updated codes to capture postprocedural hemorrhage and hematoma</p> <p>Rationale for the change: Annual coding update.</p> |
| v7.0 (ICD-10) | July 2017 | PDI 09 | Specification/Calculation | <p>Description: Revise the list of procedures performed to correct craniofacial anomalies that would involve an inherent risk of airway compromise (addressed by prolonged intubation to protect the airway).</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|---------------------------|--|
| | | | | <p>Rationale for the change: More specific procedure codes in ICD-10-PCS permit a more tailored denominator exclusion based on the procedures that involve airway compromise requiring extended intubation.</p> |
| v7.0 (ICD-10) | July 2017 | PDI 09 | Specification/Calculation | <p>Description: Removed exclusion for gastrectomy.</p> <p>Rationale for the change: Patients with gastrectomy are not at higher risk for respiratory failure</p> |
| v7.0 (ICD-10) | July 2017 | PDI 09 | Specification/Calculation | <p>Description: Removed logic that required cranial procedures to be accompanied by a craniofacial anomaly dx code.</p> <p>Rationale for the change: Craniofacial anomalies place patients at high risk for extended intubation regardless of the procedure performed.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 10 | Specification/Calculation | <p>Description: Updated codes for infection in existing denominator exclusion.</p> <p>Rationale for the change: Annual coding update</p> |
| V7.0 (ICD-10) | July 2017 | PDI 10 | Specification/Calculation | <p>Description: Removed software code assigning cases to Risk category 5</p> <p>Rationale for the change: Patients in DRGs in surgical class 4 are not eligible for this measure.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Calculation | <p>Description: Added large number of additional abdominopelvic procedure codes to the denominator of PDI11.</p> <p>Rationale for the change: Codes were unintentionally omitted from Version 6.0.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Calculation | <p>Description: Updated codes for transplant procedures in existing denominator exclusion.</p> <p>Rationale for the change: Annual coding update.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Calculation | <p>Description:</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|-------------------------------|---|
| | | | culation | Updated codes for denominator specification of abdominal procedures Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Cal culation | Description: Updated codes for immunocompromised diagnoses in existing denominator exclusion. Rationale for the change: Annual coding update |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Cal culation | Description: Updated codes for immunocompromised diagnoses in existing denominator exclusion. Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Cal culation | Description: Applied stratification of denominator by open vs. laparoscopic (including all non-open approaches). This resulted in the setname for abdominopelvic procedures (ABDOMI14P) split into two setnames (ABDOMIPOPEN and ABDOMIPOTHER) Rationale for the change: Laparoscopic procedures have lower risk of dehiscence |
| V7.0 (ICD-10) | July 2017 | PDI 12 | Specification/Cal culation | Description: Updated codes for transplant procedures in existing stratification criterion. Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 12 | Specification/Cal culation | Description: Updated codes for immunocompromised diagnoses in existing stratification criterion. Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 12 | Specification/Cal culation | Description: Updated codes for immunocompromised diagnoses in existing stratification criterion. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|---------------------------|--|
| | | | | Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 12 | Specification/Calculation | Description: Updated codes for cancer in existing stratification criterion. Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 14 | Specification/Calculation | Description: Updated diagnosis codes for cystic fibrosis and anomalies of respiratory system diagnoses. Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 15 | Specification/Calculation | Description: Removed codes E10.65 and E11.65 from numerator. Rationale for the change: Changes in coding clinic rulings has clarified that Type II diabetes with ketoacidosis can be coded with just one diagnosis code. Codes E10.65 and E11.65 now more likely represent non-DKA admissions classifiable to PQI 14 (adults only). |
| V7.0 (ICD-10) | July 2017 | PDI 16 | Specification/Calculation | Description: Updated diagnosis code for gastroenteritis Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 16 | Specification/Calculation | Description: Updated diagnosis code for gastrointestinal disorders Rationale for the change: Annual coding update. |
| V7.0 (ICD-10) | July 2017 | PDI 18 | Specification/Calculation | Description: Updated codes for transplant procedures in existing denominator exclusion. Rationale for the change: Annual coding update. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-------------|----------------------------|---|
| V7.0 (ICD-10) | July 2017 | PDI 18 | Specification/Calculation | <p>Description: Updated codes for immunocompromised diagnoses in existing denominator exclusion.</p> <p>Rationale for the change: Annual coding update.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 18 | Specification/Calculation | <p>Description: Updated codes for immunocompromised diagnoses in existing denominator exclusion.</p> <p>Rationale for the change: Annual coding update.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Calculations | <p>Description: Revised logic for exclusion of abdominopelvic procedures that occur prior to reclosures.</p> <p>Rationale for the change: Logic incorrectly included cases with a third abdominopelvic procedure (index, reclosure and a third procedure). This has been fixed.</p> |
| V7.0 (ICD-10) | July 2017 | PDI 11 | Specification/Calculation | <p>Description: Update diagnosis codes for kidney or urinary tract disorder diagnosis codes.</p> <p>Rationale for the change: Annual coding update.</p> |
| V7.0 (ICD-10) | July 2017 | PDI | Specification/Calculation | <p>Description: Update ORPROC</p> <p>Rationale for the change: Annual coding update.</p> |
| V7.0 (ICD-10) | July 2017 | All modules | Specification/Calculation | <p>Description: Remove risk adjustment variables and associated code.</p> <p>Rationale for the change: Risk adjustment variables and associated code were removed from all modules, as risk adjustment is not presently available in the ICD10 v7.00 software.</p> |
| V7.0 (ICD-10) | July 2017 | All modules | Specification/Calculations | <p>Description: Changed structure for one MDRGs: acute myocardial infarction.</p> <p>Rationale for the change:</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------|---|-------------------------|---|
| | | | | Root MS-DRGs are structured by mortality and as mortality may be related to the numerator event, this MS-DRGs was combined with the corresponding MS-DRG for patients discharged alive. |
| V6.0.2 (ICD-9) | August 2017 | All PDI, PQI 09, and PSI 17 module programs | Software /Documentation | <p>Description: Update all program names and internal libref and macros</p> <p>Rationale for the change: Software cleanup</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Corrected reference population to include 34 states (previous estimates mistakenly based on 33 states). Risk adjustment models were recreated, and updated coefficients, signal variance, and reference arrays were included in the revised software</p> <p>Rationale for the change: One state mistakenly omitted from the reference population.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Algorithm added to assign MDC based on principal diagnosis to align with CMS regulation.</p> <p>Rationale for the change: CMS requires MDC to be assigned based on principal diagnosis rather than MS-DRG assignment. Doing so will assign MDCs for discharges assigned to "Pre-MDC" MS-DRGs.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Modified code in PROV_RISKADJ to prevent the SUMWGT warning from being triggered.</p> <p>Rationale for the change: The warning was inconsequential but may be confusing to users.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Removed formats that are no longer used in the PDI algorithms or risk adjustment.</p> <p>Rationale for the change: Software code clean-up.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Implemented PDI 06 risk model described in Jenkins et al. 2016. Development and Validation of an Agency for Healthcare Research and Quality Indicator for Mortality After Congenital Heart Surgery Harmonized With Risk Adjustment for</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------|-----------|-------------------------|---|
| | | | | <p>Congenital Heart Surgery (RACHS-1) Methodology. J Am Heart Assoc. 5(5).</p> <p>Rationale for the change: This risk model resulted from harmonization across organizations.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated risk model with variable selection and coefficients.</p> <p>Rationale for the change: Revision of the risk models with updates to the risk model variables and systematic model builds.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: MDRG length increased from 3 to 4 bytes</p> <p>Rationale for the change: Fixed error that resulted in truncation of some MDRGs.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated signal variance and population rate arrays</p> <p>Rationale for the change: Annual update.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Changed structure for two MDRGs: acute myocardial infarction and neonates died or transferred.</p> <p>Rationale for the change: Root MS-DRGs are structured by mortality and as mortality may be related to the numerator event, these MS-DRGs were combined with the corresponding MS-DRG for patients discharged alive.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated age and age and sex variables, removed interaction effects from provider level variables.</p> <p>Rationale for the change: Updates better reflect clinical risk factors related to age and gender.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated candidate MDRG variables in risk model, removed specific variables potentially related to the outcomes of interest.</p> <p>Rationale for the change:</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------|-----------|-------------------------|--|
| | | | | MDRGs may be related to the outcome and should not be adjusted for. |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Add external composite weights file</p> <p>Rationale for the change: This change was added to improve production processes.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Rename SEXCAT covariates.</p> <p>Rationale for the change: Sex covariate renamed from SEXCAT to GENDER_CAT to avoid namespace collision with the strata class variable SEXCAT.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Update POVCAT format used for Area Risk Adjustment</p> <p>Rationale for the change: Update POVCAT using census ACS data 5 year estimate using definition in STATA file. Implement in software and provide documentation of variable. Document/notate development program used to update POVCAT</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Update ORPROC list to exclude "0094", "0110", "0116", "0117", "5013"</p> <p>Rationale for the change: Remove codes for procedures that are no longer designated as major OR procedures in ORPROC.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Update ORPROC list to add "1481", "1482","1483"</p> <p>Rationale for the change: Add codes inadvertently omitted from ORPROC.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Removed formats that are no longer used in the PDI algorithms or risk adjustment.</p> <p>Rationale for the change: Software code clean-up.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Revise exclusion for craniofacial anomalies and head procedures in PDI 09 to</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------|-----------|-------------------------|--|
| | | | | <p>exclude any procedures from expanded list of head and neck procedures or any diagnosis of craniofacial anomalies.</p> <p>Rationale for the change: Modified exclusion criteria simplify the exclusions.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Removed gastric resection procedures as an exclusion for PDI 09.</p> <p>Rationale for the change: Gastric exclusions usually do not result in excess risk.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Fix error that triggers exclusion of patients with umbilical hernia repair only when procedure day is missing.</p> <p>Rationale for the change: Software fix.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Update risk variables and coefficients</p> <p>Rationale for the change: Annual update</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Added new comorbidity risk categories for obesity (moved into separate variable), ventilator dependence, adverse neonatal conditions.</p> <p>Rationale for the change: Clinically significant comorbidity categories added or separated from other comorbidities categories.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Added an alternative definition of transfer-in for newborns.</p> <p>Rationale for the change: Newborn admissions receive different point of origin codes than non-newborn admissions.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated indicator names in program comments.</p> <p>Rationale for the change: Software cleanup.</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------|-----------|-------------------------|--|
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated macros and POVCAT in PQI 09 standalone program.</p> <p>Rationale for the change: Annual update</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated macros and POVCAT in PSI 17 standalone program.</p> <p>Rationale for the change: Annual update.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 08 | Software /Documentation | <p>Description: Removed exclusion of records from denominator with hip fracture repair as the first or only OR procedure. With the inclusion of "present on admission" criteria it is no longer necessary to focus on surgical patients to avoid false positives.</p> <p>Rationale for the change: Date of hip fracture repair is empirically not associated with reported POA status.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 02 | Software /Documentation | <p>Description: Changed exclusion for length of stay from less than 5 days to less than 3 days.</p> <p>Rationale for the change: Source of false negatives and long length of stay potentially redundant with "present on admission".</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 05 | Software /Documentation | <p>Description: Restricted the chest trauma exclusion to rib fractures, traumatic pneumothorax and related chest wall injuries that are associated with "difficult-to-detect" or nascent pneumothorax.</p> <p>Rationale for the change: Not all chest traumas are associated with pneumothoraxes.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 09 | Software /Documentation | <p>Description: Expanded exclusion for acute posttraumatic or postoperative respiratory failure present on admission to include other etiologies of acute respiratory failure.</p> <p>Rationale for the change: Other etiologies of respiratory failure require exclusion.</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|---|-------------|------------------|-----------------------------|--|
| V6.0.2 (ICD-9) | August 2017 | PDI 10 | Software /Documentation | <p>Description: Removed exclusion for length of stay less than 4 days.</p> <p>Rationale for the change: Exclusion less necessary due to present on admission data.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 11 | Software /Documentation | <p>Description: Added exclusion for diagnosis of "disruption of internal operation wound" that is present on admission to denominator.</p> <p>Rationale for the change: Implementing standard exclusion</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Added 46.97 to the definition of immunocompromised state procedures (Added \$IMMUNIP, exists in \$TRANSPP). IMMUNE flag added to PDI.</p> <p>Rationale for the change: Unintentionally omitted in previous versions.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 09 | Software /Documentation | <p>Description: Changed name of PRESOPP set name for PDI to PRESOPP_PDI</p> <p>Rationale for the change: Distinguish from IQI PRESOPP format.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 02 | Software /Documentation | <p>Description: Removed MDC 09 exclusion. Added new exclusion for any diagnosis code POA using new formats, PUXD; EXFOLIATXD, which includes all codes listed on tabs "#272 PU EXCL" and "#272 EXFOLIATION BSA" in specifications.</p> <p>Rationale for the change: Removed MDC 09 exclusion. Added focused exclusion for major skin disorders that are associated with higher risk of pressure ulcer.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 09 | Software /Documentation | <p>Description: Added exclusion of hospitalizations with any procedure code for lung transplantation. New format, LUNGTRANSP, per tab "294 Lung Transplant" in specifications.</p> <p>Rationale for the change: Added exclusion of hospitalizations involving lung transplantation.</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------|-----------|-------------------------|--|
| V6.0.2 (ICD-9) | August 2017 | PDI 02 | Software /Documentation | <p>Description: Modified logic to also include cases with 2 or more qualifying codes in format DECUBVD, when at least one of those are not POA.</p> <p>Rationale for the change: Modified logic to also include cases with 2 or more qualifying pressure ulcers, when at least one of the ulcers are not POA.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated MS-DRG list to account for FY2016 changes.</p> <p>Rationale for the change: Annual update.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated MS-DRG list to account for FY2016 changes.</p> <p>Rationale for the change: Annual update.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI All | Software /Documentation | <p>Description: Updated MS-DRG list to account for FY2016 changes.</p> <p>Rationale for the change: Annual update.</p> |
| V6.0.2 (ICD-9) | August 2017 | PDI 08 | Software /Documentation | <p>Description: Aligned definitions of hemorrhage and hematoma procedures within PDI 08.</p> <p>Rationale for the change: Previous versions had multiple, largely overlapping lists of hemorrhage control procedures.</p> |
| v6.0 (ICD-10) | July 2016 | PDI All | Software /Documentation | <p>Description: Length of the MDRG variable increased from 3 to 4 bytes to allow for additional value.</p> <p>Rationale for the change: The current software assigned a length=3 for the MDRG variable, which limited values to 3 bytes, or integers with a maximum value of 8,192. The peculiar consequence is that 8898 and 8899 were lumped together.</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|-------------------------------|---|
| v6.0 (ICD-10) | July 2016 | PDI All | Software /Documentation | <p>Description: Changed number of MDRG "Other" from 8898 to 9999</p> <p>Rationale for the change: Cleans up MDRG list</p> |
| v6.0 (ICD-10) | July 2016 | PDI All | Software /Documentation | <p>Description: Updated MS-DRG list to account for FY2016 changes.</p> <p>Rationale for the change: Update DRG lists for FY 16 changes</p> |
| v6.0 (ICD-10) | July 2016 | PDI All | Software /Documentation | <p>Description: Updated OR procedure list to account for FY2016 changes.</p> <p>Rationale for the change: Updated OR procedure list to account for FY2016 changes.</p> |
| v6.0 (ICD-10) | July 2016 | PDI All | Software /Documentation | <p>Description: Remove former DRG classification from software, include only MS-DRG in software.</p> <p>Rationale for the change: The DRG classification system has been replaced, and the inclusion of both the DRG and MS-DRG classification system is confusing to users.</p> |
| v6.0 (ICD-10) | July 2016 | PDI 02 | Specification/Cal culation | <p>Description: Changed exclusion for length of stay from less than 5 days to less than 3 days. Source of false negatives and long length of stay potentially redundant with "present on admission".</p> <p>Rationale for the change: This exclusion is >87% POA-enhanced, and thus appears largely redundant with POA reporting</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|----------------------------|---------------------------|---|
| v6.0 (ICD-10) | July 2016 | PDI 02 | Specification/Calculation | <p>Description: Removed MDC 09 exclusion. Added focused exclusion for major skin disorders that are associated with higher risk of pressure ulcer.</p> <p>Rationale for the change: Some skin disorders put patients at greater risk for skin breakdown (e.g. Epidermolysis Bullosa). These types of skin disorders could lead to greater rates of decubitus ulcers and secondary complications in this patient group. Redundant with POA reporting</p> |
| v6.0 (ICD-10) | July 2016 | PDI 05 | Specification/Calculation | <p>Description: Restricted the chest trauma exclusion to rib fractures, traumatic pneumothorax and related chest wall injuries that are associated with "difficult-to-detect" or nascent pneumothorax.</p> <p>Rationale for the change: Chest trauma, in general, shows no evidence of POA enhancement (i.e., 14% POA), so the exclusion does not appear to have its intended effect.</p> |
| v6.0 (ICD-10) | July 2016 | PDI 02, 08, 09, 10, NQI 03 | Specification/Calculation | <p>Description: Revised OR Procedure list to remove known instances where procedures are not typically performed in an operating room. These changes result in the AHRQ QI OR procedure list not being aligned with the CMS OR Procedure list.</p> <p>Rationale for the change: CMS OR procedure list contains some common procedures that are not typically performed in the OR, and as a result these cases are incorrectly pushed into a surgical PSI denominator.</p> |
| v6.0 (ICD-10) | July 2016 | PDI 08 | Specification/Calculation | <p>Description: Removed selected procedures that have weak connections with diagnosis or treatment of perioperative hemorrhage or hematoma from the numerator inclusion list. This was a source of false positives.</p> <p>Rationale for the change: Source of false positives, because users are reporting cases in which the triggering procedure is unrelated to perioperative hemorrhage or hematoma, and therefore cannot be used as a severity marker.</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------|-----------|---------------------------|--|
| v6.0 (ICD-10) | July 2016 | PDI 09 | Specification/Calculation | <p>Description: Expanded exclusion for acute posttraumatic or postoperative respiratory failure present on admission to include other etiologies of acute respiratory failure.</p> <p>Rationale for the change: ARF of any cause POA obviates the usefulness of postoperative ARF as a quality indicator; users report some false positives for this reason.</p> |
| v6.0 (ICD-10) | July 2016 | PDI 09 | Specification/Calculation | <p>Description: Added exclusion of hospitalizations involving lung transplantation.</p> <p>Rationale for the change: We are seeing where cystic fibrosis patients having both bilateral lung transplant along with liver transplant are qualifying for PSI-11-Perioperative Respiratory Failure when the payor is Blue Cross/Blue Shield since it goes to an APR-DRG and not an MS-DRG. Specifically, the principal diagnosis for the hospitalization in question plays an important role in MS-DRG assignment, which affects which MDC applies. In general, it would not be appropriate to exclude all hospitalizations involving a diagnosis of cystic fibrosis because we would not want to assume that all (or most) cases of postoperative respiratory failure in this subpopulation are non-preventable. However, exclusion of hospitalizations involving lung transplantation (33.5x) seems reasonable and appropriate.</p> |
| v6.0 (ICD-10) | July 2016 | PDI 10 | Specification/Calculation | <p>Description: Removed exclusion for length of stay less than 4 days. Exclusion less necessary due to present on admission data.</p> <p>Rationale for the change: Consistency with PSI 13; stratification appears to enhance the apparent benefit of LOS exclusion in identifying events that were actually POA (i.e., 62% vs 21% POA among non-elective clean operations, which are excluded from PSI 13)</p> |
| v6.0 (ICD-10) | July 2016 | PDI 11 | Specification/Calculation | <p>Description: Added exclusion for diagnosis of "disruption of internal operation wound" that is present on admission to denominator.</p> <p>Rationale for the change: Would presumably reduce FPs due to operative repair a dehiscent wound from a prior operation (but no validation evidence)</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|--|---------------------------|---|
| V5.0 | March 2015 | Neonatal Iatrogenic Pneumothorax Rate (NQI 02) | Specification/Calculation | The exclusion for polycystic kidney disease was corrected from autosomal dominant (753.13) to autosomal recessive (753.14). |
| V5.0 | March 2015 | Accidental Puncture or Laceration Rate (PDI 01) | Specification/Calculation | E-codes (E870.x) were removed from the numerator and denominator. |
| V5.0 | March 2015 | Accidental Puncture or Laceration Rate (PDI 01) | Specification/Calculation | The code for insertion of recombinant BMP (84.52) was removed from the denominator exclusion for spine surgery. |
| V5.0 | March 2015 | Pressure Ulcer Rate (PDI 02) | Specification/Calculation | Records with any secondary diagnosis of pressure ulcer present on admission and any secondary diagnosis of pressure ulcer stage III or IV or unstageable present on admission were dropped from the denominator exclusion definition. |
| V5.0 | March 2015 | Retained Surgical Item or Unretrieved Device Fragment Count (PDI 03) | Specification/Calculation | E-codes (E870.x) were removed from the numerator and denominator. |
| V5.0 | March 2015 | Perioperative Hemorrhage or Hematoma Rate (PDI 08) | Specification/Calculation | Setnames HEMATIP, HEMORIP and HEMOTHP were consolidated into one set for “Control of perioperative hemorrhage and evacuation of hematoma”. The procedure code for endovascular embolization or occlusion of vessel(s) of the head or neck using bioactive coils (39.76) and the codes for uterine art embolization with or without coils (68.24, 68.25) were added to the denominator code set for the Perioperative Hemorrhage or Hematoma Rate measure. |
| V5.0 | March 2015 | Perioperative Hemorrhage or Hematoma Rate (PDI 08) | Specification/Calculation | Setnames POHMAID and POHMRID were consolidated into one set for “Perioperative Hemorrhage or Hematoma” (998.11, 998.12). |
| V5.0 | March 2015 | Perioperative Hemorrhage or Hematoma Rate (PDI 08) | Specification/Calculation | The denominator exclusion for coagulopathy (COAGDID, 286.0-286.4, 286.52, 286.59, 286.6, 286.7, 286.9) was removed in favor of the existing stratification approach. |
| V5.0 | March 2015 | Postoperative Respiratory Failure Rate (PDI 09) | Specification/Calculation | The code for temporary tracheostomy (31.1) was added to the definition of tracheostomy. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|---|-------------|--|-----------------------------|---|
| V5.0 | March 2015 | Postoperative Respiratory Failure Rate (PDI 09) | Specification/Calculation | The denominator exclusion for Gingivoplasty (24.2) was removed. A denominator exclusion for facial bone operations (76.31, 76.39, 76.41-76.45, 76.61-76.64, 76.7x, 76.92-76.99). was added. A denominator exclusion for laryngo-tracheal operations (31.0, 31.61-31.64, 31.71-31.72, 31.91-31.95) was added. Setnames for laryngeal, pharyngeal, facial, and nose/mouth procedures were consolidated. |
| V5.0 | March 2015 | Postoperative Respiratory Failure Rate (PDI 09) | Specification/Calculation | The code for senility (old age) without psychosis (797) was removed from the denominator exclusion for “degenerative neurological disorder”. |
| V5.0 | March 2015 | Postoperative Respiratory Failure Rate (PDI 09) | Specification/Calculation | The denominator exclusion for lung cancer surgery was expanded to include thoroscopic surgery (32.30, 32.41, 32.50). |
| V5.0 | March 2015 | Postoperative Respiratory Failure Rate (PDI 09) | Specification/Calculation | The denominator exclusion for esophageal surgery was expanded to include esophagostomy (42.10, 42.11, 42.12, 42.19). |
| V5.0 | March 2015 | Postoperative Sepsis Rate (PDI 10) | Specification/Calculation | The code for postoperative shock N.O.S. (998.00) was removed from the numerator and denominator definitions for Postoperative Sepsis Rate. |
| V5.0 | March 2015 | Postoperative Wound Dehiscence Rate (PDI 11) | Specification/Calculation | The code for transplant of intestine (46.97) was added to the denominator exclusion for transplant procedures. |
| V5.0 | March 2015 | Central Venous Catheter-Related Blood Stream Infection Rate (PDI 12) | Specification/Calculation | The code for transplant of intestine (46.97) was added to the denominator stratification for “high-risk” transplant procedures. |
| V5.0 | March 2015 | Transfusion Reaction Count (PDI 13) | Specification/Calculation | The code for mismatched blood transfusion (E8760) was removed from the numerator and denominator definitions for Transfusion Reaction Count. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|---|-------------|---|-----------------------------|---|
| V5.0 | March 2015 | Gastroenteritis Admission Rate (PDI 16) | Specification/Calculation | The diagnosis code for amebic nondysenteric infection (006.2) was removed from the denominator exclusion for "bacterial gastroenteritis". |
| V5.0 | March 2015 | PDSASA3 | Specification/Calculation | Age/Sex risk-adjustment models were updated with the 2012 reference population file; the code was revised to use new regression coefficients. |
| V5.0 | March 2015 | PDSASP3 | Specification/Calculation | Risk adjustment models were updated using the 2012 reference population file; The code was revised to use new regression coefficients. |
| V5.0 | March 2015 | PDSAS1 | Specification/Calculation | The macro code that uses POA values to identify conditions present on admission was revised to only use POA as indicated on the input file. The user must indicate if the input file includes POA data. |
| V5.0 | March 2015 | PDSASP2 | Specification/Calculation | The code for T flags for the POA to SAS1 program was adjusted. |
| V5.0 | March 2015 | PDI Composite | Specification/Calculation | Weights for the measures that make up the Composite measure were updated using the 2012 reference population. |
| V5.0 | March 2015 | All PDI | Specification/Calculation | The reference population was updated based on 2012 HCUP SIDS data. |
| V5.0 | March 2015 | All PDI | Specification/Calculation | The population file was updated with US Census County estimates for 2014. |
| V4.5a | July 2014 | PDI 06 | Specification/Calculation | A software bug was fixed that will once again allow reporting of the expected, risk adjusted and smoothed rates for PDI 06. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| | | | | |
|--------|-----------|--------------|---------------------------|--|
| V4. 5a | July 2014 | PDI 06 | Specification/Calculation | Numerator exclusion based on patent ductus arteriosus (PDA) and any-listed ICD-9-CM procedure codes for catheterization without any-listed ICD-9-CM procedure codes for extracorporeal circulation is changed so that the definition of PDA can include atrial septal defect or ventricular septal defect. |
| V4. 5a | July 2014 | PDI 07 | Specification/Calculation | Numerator exclusion based on patent ductus arteriosus (PDA) and any-listed ICD-9-CM procedure codes for catheterization without any-listed ICD-9-CM procedure codes for extracorporeal circulation is changed so that the definition of PDA can include atrial septal defect or ventricular septal defect. |
| V4. 5a | July 2014 | PDI 09 | Specification/Calculation | A bug in the PDFMY.SAS program was fixed that could affect the calculations for PDI 09 |
| V4. 5a | July 2014 | All PDIs | Software (WinQI, V4.6) | A denominator adjustment added to SAS for Version 4.4 has been added to WinQI. This applies to the census population counts when certain combinations of strata are zero. |
| V4.5a | July 2014 | All PDIs | Software (SAS, V4.5a) | To improve the output of results in a better format, the PROCMEANS statement was modified. |
| V4.5 | May 2013 | All area PDI | Specification/Calculation | Updated data are used for population estimates (i.e., through 2013). The population data are used to calculate the denominator for the area-level QI. |
| V4.5 | May 2013 | All PDI | Specification/Calculation | Updated reference population rates were calculated using 44 state files from the 2010 State Inpatient Databases (SID). New risk adjustment coefficients were calculated using the updated reference population. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| | | | | |
|------|----------|--|---------------------------|---|
| V4.5 | May 2013 | Neonatal Blood Stream Infection Rate (NQI 3) | Specification/Calculation | <p>1. Add numerator inclusion codes for any secondary diagnosis of methicillin resistant staphylococcus aureus septicemia to Criteria #1: 03812 METH RES STAPH AUR SEPT</p> <p>2. Drop numerator inclusion code for secondary diagnosis of (non-neonatal) bacteremia from Criteria #2: 7907 BACTEREMIA</p> <p>3. Add numerator inclusion codes for secondary diagnosis of methicillin resistant staphylococcus aureus and Escherichia coli infection to Criteria #3: 04112 MTH RES STAPH AUR 04141 SHIGA TOXIN-PROD E. COLI 04142 SPEC SHIGA TOXIN-PROD E. COLI OTH 04143 SHIGA TOXIN-PROD E. COLI UNS 04149 SHIGA TOXIN-PROD E. COLI OTH/UNS</p> <p>4. Drop denominator inclusion for transfers into an acute care facility (DISP=2)</p> <p>5. Add denominator inclusion for transfers from another healthcare facility within two days of birth</p> <p>6. Add denominator exclusion codes for selected principal diagnosis of sepsis or bacteremia or secondary diagnosis present on admission of sepsis or bacteremia: 04104 ENTEROCOCCUS GROUP D 04110 STAPHYLOCOCCUS UNSPCFIED 04111 MTH SUS STPH AUR ELS/NOS 04112 MTH RES STAPH AUR</p> |
|------|----------|--|---------------------------|---|

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|--|
| | | | | <p>04119 OTHER STAPHYLOCOCCUS 0413 KLEBSIELLA PNEUMONIAE 0414 E. COLI INFECT NOS 04141 SHIGA TOXIN-PROD E. COLI 04142 SPEC SHIGA TOXIN-PROD E. COLI OTH 04143 SHIGA TOXIN-PROD E. COLI UNS 04149 SHIGA TOXIN-PROD E. COLI OTH/UNS 0417 PSEUDOMONAS INFECT NOS 04185 OTH GRAM NEGATV BACTERIA 1125 DISSEMINATED CANDIDIASIS 77181 SEPTICEMIA OF NEWBORN 77183 BACT OF NEWBORN</p> <p>7. Add denominator exclusion codes for principal diagnosis (or secondary diagnosis present on admission only for those cases qualifying for the numerator) for sepsis or bacteremia: 1125 DISSEMINATED CANDIDIASIS 77181 SEPTICEMIA OF NEWBORN 77183 BACT OF NEWBORN 7907 BACTEREMIA</p> <p>8. Drop denominator exclusion codes for principal diagnosis of infection or secondary diagnosis present on admission: PDI Appendix H – Infection Diagnosis Codes</p> <p>9. Drop denominator exclusion for length of stay less than 2 days</p> <p>10. Add denominator exclusion for length of stay less than 7 days</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------|--|---------------------------|--|
| V4.5 | May 2013 | Postoperative Hemorrhage or Hematoma Rate (PDI 8) | Specification/Calculation | <p>1. Add denominator exclusion codes for any diagnosis code of coagulation disorder:</p> <p>2860 CONG FACTOR VIII DISORDER 2861 CONG FACTOR IX DISORDER 2862 CONG FACTOR XI DISORDER 2863 CONG DEF CLOT FACTOR NEC 2864 VON WILLEBRAND'S DISEASE 28652 ACQUIRED HEMOPHILIA 28659 OT HEM D/T CIRC ANTICOAG 2866 DEFIBRINATION SYNDROME 2867 ACQ COAGUL FACTOR DEF 2869 COAGUL DEFECT NEC NOS</p> <p>2. Add numerator inclusion codes for miscellaneous hemorrhage or hematoma-related procedures: Codes listed in Appendix C</p> |
| V4.5 | May 2013 | All mortality PDI and Postoperative Wound Dehiscence Rate (PDI 11) | Specification/Calculation | <p>Modify the parameters in the analysis module for measures that are never present on admission (this is, where P=0 for all cases) by increasing the estimated precision threshold, i.e., modify the precision parameter in the analysis module to less than 1×10^9. This change only affected the software. The user will not see the change in parameters as they are embedded in the regression intercept and coefficients that are used by the prediction module.</p> <p>Rationale: Effect will be to change the reference population rate used for shrinkage to be closer to empirically estimated reference population rate given P=0.</p> |
| V4.5 | May 2013 | All PDI | Software/ Documentation | Respiratory complications diagnosis codes – Corrections were made to assure that three specific diagnosis codes were present in both the SAS and WinQI software. This change only affected the software. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------|-----------|-------------------------|---|
| V4.5 | May 2013 | All PDI | Software/ Documentation | In WinQI there was an error in the smoothed rate calculation involving the noise variance and signal variance. This error was not previously observed because it only became significant in particular cases with relatively unusual variances. This issue was fixed in WinQI Version 4.5. |
| V4.5 | May 2013 | All PDI | Software/ Documentation | The variable DISCWT in SAS QI v4.5 was set equal to 1 and the variable DISCWT was removed from the KEEP statement associated with the inputfile. This change ensures that the SAS programs do not account for complex sampling design when calculating QI estimates and standard errors. The SAS QI software, beginning with Version 4.1, does not support weighted QI estimates or standard errors for weighted estimates. The WinQI software has never supported weighted QI estimates or standard errors for weighted estimates. |
| V4.5 | May 2013 | All PDI | Software/ Documentation | The definitions of Newborn and Outborn were revised in WinQI to better align them with SAS. The differences affected cases where discharge records have some combinations of missing values for one or more of the required data fields (e.g., Age, Age in Days). |
| V4.5 | May 2013 | All PDI | Software/ Documentation | The installation packages have been improved for Version 4.5 of the SAS and WinQI software, including the Prediction Module and 3M™ APR DRG software. Both the SAS and WinQI software are available in Version 4.5 as either 32-bit or 64-bit applications. The 32-bit applications are targeted for Windows XP operating systems, and the 64-bit applications are targeted for Windows 7 operating systems. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------|--|-------------------------|--|
| V4.5 | May 2013 | All PDI | Software/ Documentation | <p>The WinQI software was corrected to address the following issues:</p> <ol style="list-style-type: none"> 1. On Step 2 of the Sampling Wizard dialog, the Sample Data File text box was not working correctly. Users were not able to save the file specified using the Browse explorer function. This issue has been fixed in WinQI Version 4.5. 2. Denominators were not being adjusted (i.e., dividing by the number of discharge quarters) when the calculations were being stratified by quarter. This issue has been fixed in WinQI Version 4.5. 3. On the WinQI Additional Options for Data Analysis screen of the Report Wizard, if the “<i>Ref. Pop. Rate</i>” is deselected, and then the expected rate and O/E ratio are reported incorrectly. These rates should be disabled on this screen if “<i>Ref. Pop. Rate</i>” is not selected. This issue has been included in the software documentation. 4. The compiled C# program was named AHRQ.exe, and this was the same name used for the compiled Prediction Module C++ program. This potential conflict has been fixed in WinQI Version 4.5. 5. Excel files with an .xlsx extension were not recognized. MS Access file types also needed to be updated. These issues were fixed in WinQI Version 4.5. |
| V4.5 | May 2013 | Neonatal Blood Stream Infection Rate (NQI 3) | Software/ Documentation | <ol style="list-style-type: none"> 1. WinQI was mistakenly including the operating room procedure code 640 which only applies to adults. And, SAS was not consistently excluding this code for all pediatric indicators and cases. This issue was fixed in SAS and WinQI Version 4.5. This change only affected the software. 2. WinQI was mistakenly allowing some adult discharges to be included in the QI calculations in cases where the discharge record presents contradictory information about patient age and admission type. Specifically, software testing found that some adult discharge records include Newborn admission type. WinQI was fixed to make sure these adult cases are properly excluded from any pediatric indicator calculations. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------|--|-------------------------|---|
| V4.5 | May 2013 | Volume of Foreign Body Left during Procedure (PDI 3) | Software/ Documentation | Rename indicator to “Retained Surgical Item or Unretrieved Device Fragment Count.” This change only affected the documentation. Rationalee: NQF measure refinements agreed upon with the Surgery Endorsement Maintenance 2010 Steering Committee |
| V4.5 | May 2013 | Iatrogenic Pneumothorax Rate (PDI 5) | Software/ Documentation | 1. Add denominator exclusion codes for any cardiac procedure: 3597 PERC MTRL VLV REPR W IMP 3737 EXC/DEST HRT LES, THRSPC This change only affected the documentation. |
| V4.5 | May 2013 | Pediatric Heart Surgery Mortality Rate (PDI 6) | Software/ Documentation | Rename indicator to “RACHS-1 Pediatric Heart Surgery Mortality Rate.” This change only affected the documentation. Rationalee: NQF measure refinements agreed upon with the Surgery Endorsement Maintenance 2010 Steering Committee |
| V4.5 | May 2013 | Pediatric Heart Surgery Volume (PDI 7) | Software/ Documentation | Rename indicator to “RACHS-1 Pediatric Heart Surgery Volume.” This change only affected the documentation. Rationalee: NQF measure refinements agreed upon with the Surgery Endorsement Maintenance 2010 Steering Committee |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------|---|-------------------------|--|
| V4.5 | May 2013 | Postoperative Hemorrhage or Hematoma Rate (PDI 8) | Software/ Documentation | <p>1. Rename indicator to “Perioperative Hemorrhage or Hematoma Rate.” This change only affected the documentation.</p> <p>Rationalee: Cases identified included adverse events that occur both peri- and post-operatively</p> <p>2. For the denominator exclusion criterion that excludes cases where the procedure of interest occurs before the first operating room procedure, explicitly say that a secondary diagnosis for postoperative hemorrhage or postoperative hematoma must also be present in the discharge record for the record to be excluded. This change only affected the documentation.</p> <p>3. WinQI was mistakenly including the operating room procedure code 640 which only applies to adults. And, SAS was not consistently excluding this code for all pediatric indicators and cases. This issue was fixed in SAS and WinQI Version 4.5. This change only affected the software.</p> |
| V4.5 | May 2013 | Postoperative Respiratory Failure Rate (PDI 9) | Software/ Documentation | <p>1. Added the following codes to Neruomuscular disorder diagnosis codes: 35921 MYOTONIC MUSCULAR DYSTRPHY 35929 OTHER MYOTONIC DISORDER This changed affected both the software and documentation.</p> <p>2. Added the following code to Esophageal resection procedure codes in the technical specification (as it should have been included): 4399 TOTAL GASTRECTOMY NEC This changed only affected the documentation.</p> |
| V4.5 | May 2013 | Transfusion Reaction Volume (PDI 13) | Software/ Documentation | Rename indicator to “Transfusion Reaction Count.” This changed only affected the documentation. |
| V4.5 | May 2013 | Urinary Tract Infection Admission Rate (PDI 18) | Software/ Documentation | <p>Add numerator exclusion codes for any diagnosis of kidney/urinary tract disorder: 59000 CHR PYELONEPHRITIS NOS 59001 CHR PYELONEPH W MED NECR This change only affected the documentation.</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------------|---|
| V4.4 | March 2012 | All Area PDI | Specification/Calculation | Updated data are used for population estimates (i.e., through 2012). The population data are used to calculate the denominator for the area-level QI. The comparative data tables have been updated using Version 4.4 of the software. Because the risk adjustment models and reference population have not changed for Version 4.4, the Risk Adjustment Coefficients remain as they were in Version 4.3. |
| V4.4 | March 2012 | Accidental Puncture or Laceration Rate (PDI 1) | FY Coding Change | Add denominator inclusion for surgical MS-DRGs (PDI Appendix C) Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--------------------------------|---------------------|--|
| V4.4 | March 2012 | Pressure Ulcer Rate (PDI 2) | FY Coding Change | <p>1. Add/remove denominator inclusion for operating room procedure codes (PDI Appendix A)</p> <p>Add code:</p> <p>0221 INSERT/REPLACE EVD 0222 INTRCRAN VENT SHUNT/ANAS 1267 INSERT AQUEOUS DRAIN DEV 1753 PERC ATHER EXTRACRAN VSL 1754 PERC ATHER INTRACRAN VSL 1755 TRANSLUM COR ATHERECTOMY 1756 ATHER OTH NON-VOR VESSEL 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE 3509 ENDOVAS REPL UNS HRT VLV 3826 INSRT PRSR SNSR W/O LEAD 3977 TEMP ENDOVSC OCCLS VESSL 3978 ENDOVAS IMPLN GRFT AORTA 4382 LAP VERTICAL GASTRECTOMY 6824 UTERINE ART EMB W COILS 6825 UTERINE ART EMB W/O COIL</p> <p>Remove code:</p> <p>0058 INS INTRA-ANSM PRES MNTR 0059 INTRAVASC MSMNT COR ART 0067 INTRAVAS MSMNT THORC ART 0068 INTRAVAS MSMT PERIPH ART 0069 INTRAVS MSMT VES NEC/NOS</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|--|---------------------|---|
| | | | | <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |
| V4.4 | March 2012 | Volume of Foreign Body Left During Procedure (PDI 3) | FY Coding Change | <p>Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |
| V4.4 | March 2012 | Iatrogenic Pneumothorax Rate (PDI 5) | FY Coding Change | <p>1. Add denominator exclusions for cardiac procedure</p> <p>Add code: 3506 TRNSAPCL REP AORTIC VALVE 3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------|--|
| V4.4 | March 2012 | Pediatric Heart Surgery Mortality Rate (PDI 6) | FY Coding Change | <p>1. Add denominator inclusions for procedures to repair congenital heart defect</p> <p>Add code: 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add denominator inclusions for diagnosis of congenital heart disease</p> <p>Add code: 74731 PULMON ART COARCT/ATRES 74732 PULMONARY AV MALFORMATN 74739 OTH ANOM PUL ARTERY/CIRC</p> |
| V4.4 | March 2012 | Pediatric Heart Surgery Volume (PDI 7) | FY Coding Change | <p>1. Add numerator inclusions for procedures to repair congenital heart defect</p> <p>Add code: 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add numerator inclusion for diagnosis of congenital heart disease</p> <p>Add code: 74731 PULMON ART COARCT/ATRES 74732 PULMONARY AV MALFORMATN 74739 OTH ANOM PUL ARTERY/CIRC</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------|---|
| V4.4 | March 2012 | Postoperative Hemorrhage or Hematoma Rate (PDI 8) | FY Coding Change | <p>1. Add stratification high risk inclusion codes for coagulopathies to high risk group</p> <p>Add code: 28652 ACQUIRED HEMOPHILIA 28653 ANTIPHOSPHOLIPID W HEMOR 28659 OT HEM D/T CIRC ANTICOAG</p> <p>2. Add/remove denominator inclusion for operating room procedure codes (PDI Appendix A)</p> <p>Add code: 0221 INSERT/REPLACE EVD 0222 INTRCRAN VENT SHUNT/ANAS 1267 INSERT AQUEOUS DRAIN DEV 1753 PERC ATHER EXTRACRAN VSL 1754 PERC ATHER INTRACRAN VSL 1755 TRANSLUM COR ATHERECTOMY 1756 ATHER OTH NON-VOR VESSEL 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE 3509 ENDOVAS REPL UNS HRT VLV 3826 INSRT PRSR SNSR W/O LEAD 3977 TEMP ENDOVSC OCCLS VESSL 3978 ENDOVAS IMPLN GRFT AORTA 4382 LAP VERTICAL GASTRECTOMY 6824 UTERINE ART EMB W COILS 6825 UTERINE ART EMB W/O COIL</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|--|
| | | | | <p>Remove code: 0058 INS INTRA-ANSM PRES MNTR 0059 INTRAVASC MSMNT COR ART 0067 INTRAVAS MSMNT THORC ART 0068 INTRAVAS MSMT PERIPH ART 0069 INTRAVS MSMT VES NEC/NOS</p> <p>3. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------|---|
| V4.4 | March 2012 | Postoperative Respiratory Failure Rate (PDI 9) | FY Coding Change | <p>1. Add numerator inclusions for diagnosis of acute respiratory failure</p> <p>Add code: 51851 AC RESP FLR FOL TRMA/SRG 51853 AC/CHR RSP FLR FOL TR/SG</p> <p>2. Remove numerator inclusions for diagnosis of acute respiratory failure</p> <p>Remove code: 51881 ACUTE RESPIRATORY FAILURE 51884 ACUTE & CHRONC RESP FAIL</p> <p>3. Add denominator exclusions for diagnosis of degenerative neurological disorder</p> <p>Add code: 31081 PSEUDOBULBAR AFFECT 31089 NONPSYCH MNTL DISORD NEC 3316 CORTICOBASAL DEGENERATION 34882 BRAIN DEATH</p> <p>4. Add denominator exclusions for diagnosis of neuromuscular disorders</p> <p>Add code: 35830 LAMBERT-EATON SYND NOS 35831 LAMBERT-EATON SYND NEOPL 35839 LAMBERT-EATON SYN OT DIS</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|--|
| | | | | <p>5. Add/remove denominator inclusion for operating room procedure codes (PDI Appendix A)</p> <p>Add code:</p> <p>0221 INSERT/REPLACE EVD 0222 INTRCRAN VENT SHUNT/ANAS 1267 INSERT AQUEOUS DRAIN DEV 1753 PERC ATHER EXTRACRAN VSL 1754 PERC ATHER INTRACRAN VSL 1755 TRANSLUM COR ATHERECTOMY 1756 ATHER OTH NON-VOR VESSEL 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE 3509 ENDOVAS REPL UNS HRT VLV 3826 INSRT PRSR SNSR W/O LEAD 3977 TEMP ENDOVSC OCCLS VESSL 3978 ENDOVAS IMPLN GRFT AORTA 4382 LAP VERTICAL GASTRECTOMY 6824 UTERINE ART EMB W COILS 6825 UTERINE ART EMB W/O COIL</p> <p>Remove code:</p> <p>0058 INS INTRA-ANSM PRES MNTR 0059 INTRAVASC MSMNT COR ART 0067 INTRAVAS MSMNT THORC ART 0068 INTRAVAS MSMT PERIPH ART 0069 INTRAVS MSMT VES NEC/NOS</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|--|
| | | | | <p>6. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code:</p> <p>16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|---------------------------------------|---------------------|---|
| V4.4 | March 2012 | Postoperative Sepsis Rate (PDI 10) | FY Coding Change | <p>1. Add denominator exclusions for diagnosis of infection (PDI Appendix H)</p> <p>Add code: 04141 SHIGA TXN-PRODUCE E.COLI 04142 SHGA TXN PROD E.COLI NEC 04143 SHGA TXN PROD E.COLI NOS 04149 E.COLI INFECTION NEC/NOS 53901 INT D/T GASTRC BAND PROC 53981 INF D/T OT BARIATRC PROC 59681 INFECTION OF CYSTOSTOMY 99931 OTH/UNS INF-CEN VEN CATH 99932 BLOOD INF DT CEN VEN CTH 99933 LCL INF DT CEN VEN CTH 99934 AC INF FOL TRANS,INF BLD</p> <p>2. Add code for high risk immunocompromised states (PDI Appendix F)</p> <p>Add code: 996.88 COMP TP ORGAN-STEM CELL</p> <p>3. Add numerator inclusions for diagnosis of sepsis</p> <p>Add code: 99800 POSTOPERATIVE SHOCK, NOS 99802 POSTOP SHOCK, SEPTIC</p> <p>4. Add code for intermediate risk immunocompromised states (PDI Appendix G):</p> <p>Add code: 573.5 HEPATOPULMONARY SYNDROME</p> |

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|--|
| | | | | <p>5. Remove numerator inclusion for diagnosis of sepsis</p> <p>Remove code: 998.0 POSTOPERATIVE SHOCK, NOS</p> <p>6. Add denominator inclusions operating room procedure codes (PDI Appendix A)</p> <p>Add code: 0221 INSERT/REPLACE EVD 0222 INTRACRAN VENT SHUNT/ANAS 1267 INSERT AQUEOUS DRAIN DEV 1753 PERC ATHER EXTRACRAN VSL 1754 PERC ATHER INTRACRAN VSL 1755 TRANSLUM COR ATHERECTOMY 1756 ATHER OTH NON-VOR VESSEL 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE 3509 ENDOVAS REPL UNS HRT VLV 3826 INSRT PRSR SNSR W/O LEAD 3977 TEMP ENDOVSC OCCLS VESSL 3978 ENDOVAS IMPLN GRFT AORTA 4382 LAP VERTICAL GASTRECTOMY 6824 UTERINE ART EMB W COILS 6825 UTERINE ART EMB W/O COIL</p> <p>Remove code: 0058 INS INTRA-ANSM PRES MNTR 0059 INTRAVASC MSMNT COR ART 0067 INTRAVAS MSMNT THORC ART 0068 INTRAVAS MSMT PERIPH ART 0069 INTRAVS MSMT VES NEC/NOS</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|---|
| | | | | <p>7. Add denominator and stratification inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code:</p> <p>16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------|---|
| V4.4 | March 2012 | Postoperative Wound Dehiscence Rate (PDI 11) | FY Coding Change | <p>1. Add denominator inclusion for abdominopelvic procedures</p> <p>Add code: 4382 LAP VERTICAL GASTRECTOMY</p> <p>2. Add denominator exclusion for diagnosis of high-risk immunocompromised state (PDI Appendix F)</p> <p>Add code: 28411 ANTIN CHEMOP INDCD PANCYOT 28412 OTH DRG INDCD PANCYTOPNA 28419 OTHER PANCYTOPENIA 99688 COMP TP ORGAN-STEM CELL</p> <p>3. Add denominator exclusion for diagnosis of intermediate-risk immunocompromised state (PDI Appendix G)</p> <p>Add code: 5735 HEPATOPULMONARY SYNDROME</p> <p>4. Add stratification inclusion for surgical MS-DRGs</p> <p>Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------|--|
| V4.4 | March 2012 | Central Venous Catheter-Related Blood Stream Infection Rate (PDI 12) | FY Coding Change | <p>1. Add numerator definition for diagnosis of central venous catheter-related blood stream infections diagnosed on or after October 1, 2011. Add code: 99931 OTH/UNS INF-CEN VEN CATH 99932 BLOOD INF DT CEN VEN CTH</p> <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C) Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> <p>3. Add denominator exclusion for diagnosis of high- risk immunocompromised state (PDI Appendix F) Add code: 28411 ANTIN CHEMOP INDCD PANCYOT 28412 OTH DRG INDCD PANCYTOPNA 28419 OTHER PANCYTOPENIA 99688 COMP TP ORGAN-STEM CELL</p> <p>4. Add denominator exclusion for diagnosis of intermediate-risk immunocompromised state (PDI Appendix G) Add code: 5735 HEPATOPULMONARY SYNDROME</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|---|---------------------|--|
| V4.4 | March 2012 | Transfusion Reaction Volume (PDI 13) | FY Coding Change | Add denominator inclusion for surgical MS-DRGs (PDI Appendix C) Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC |
| V4.4 | March 2012 | Asthma Admission Rate (PDI 14) | FY Coding Change | Add denominator exclusion code for cystic fibrosis and anomalies of the respiratory system Add code: 51661 NEUROEND CELL HYPRPL INF 51662 PULM INTERSTITL GLYCOGEN 51663 SURFACTANT MUTATION LUNG 51664 ALV CAP DYSP W VN MISALN 51669 OTH INTRST LUNG DIS CHLD |
| V4.4 | March 2012 | Urinary Tract Infection Admission Rate (PDI 18) | FY Coding Change | 1. Add denominator exclusion for diagnosis of high- risk immunocompromised state (PDI Appendix F) Add code for high-risk: 28411 ANTIN CHEMOP INDCD PANCYT 28412 OTH DRG INDCD PANCYTOPNA 28419 OTHER PANCYTOPENIA 99688 COMP TP ORGAN-STEM CELL 2. Add denominator exclusion for diagnosis of intermediate-risk immunocompromised state (PDI Appendix G) Add code for intermediate risk: 5735 HEPATOPULMONARY SYNDROME |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|---|---------------------|--|
| V4.4 | March 2012 | Neonatal Iatrogenic Pneumothorax Rate (NQI 1) | FY Coding Change | <p>1. Add denominator exclusion code for cardiac procedure</p> <p>Add code: 3506 TRNSAPCL REP AORTC VALVE 3508 TRNSAPCL REPL PULM VALVE</p> <p>2. Add denominator inclusion for surgical MS-DRGs (PDI Appendix C)</p> <p>Add code: 16 AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC 17 AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC 570 SKIN DEBRIDEMENT W MCC 571 SKIN DEBRIDEMENT W CC 572 SKIN DEBRIDEMENT W/O CC/MCC</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|--|---------------------|---|
| V4.4 | March 2012 | Neonatal Blood Stream Infection Rate (NQI 3) | FY Coding Change | <p>1. Add denominator exclusions for diagnosis of infection (PDI Appendix H)</p> <p>Add code: 04141 SHIGA TXN-PRODUCE E.COLI 04142 SHGA TXN PROD E.COLI NEC 04143 SHGA TXN PROD E.COLI NOS 04149 E.COLI INFECTION NEC/NOS 53901 INT D/T GASTRC BAND PROC 53981 INF D/T OT BARIATRC PROC 59681 INFECTION OF CYSTOSTOMY 99931 OTH/UNS INF-CEN VEN CATH 99932 BLOOD INF DT CEN VEN CTH 99933 LCL INF DT CEN VEN CTH 99934 AC INF FOL TRANS,INF BLD</p> <p>2. Add denominator exclusions for diagnosis of sepsis</p> <p>Add code: 99800 POSTOPERATIVE SHOCK, NOS 99802 SHOCK FOLLOW TRAUMA OR SURGERY, SEPTIC</p> <p>3. Remove denominator exclusion for diagnosis of sepsis</p> <p>Remove code: 9980 POSTOPERATIVE SHOCK</p> |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|-----------|-------------------------|--|
| | | | | <p>4. Add/remove denominator inclusion for Operating Room Procedure Codes (PDI Appendix A)</p> <p>Add code: 0221 INSERT/REPLACE EVD 0222 INTRCRAN VENT SHUNT/ANAS 1267 INSERT AQUEOUS DRAIN DEV 1753 PERC ATHER EXTRACRAN VSL 1754 PERC ATHER INTRACRAN VSL 1755 TRANSLUM COR ATHERECTOMY 1756 ATHER OTH NON-VOR VESSEL 3500 CLOSED VALVOTOMY NOS 3505 ENDOVAS REPL AORTC VALVE 3506 TRNSAPCL REP AORTC VALVE 3507 ENDOVAS REPL PULM VALVE 3508 TRNSAPCL REPL PULM VALVE 3509 ENDOVAS REPL UNS HRT VLV 3826 INSRT PRSR SNSR W/O LEAD 3977 TEMP ENDOVSC OCCLS VESSL 3978 ENDOVAS IMPLN GRFT AORTA 4382 LAP VERTICAL GASTRECTOMY 6824 UTERINE ART EMB W COILS</p> <p>Remove code: 0058 INS INTRA-ANSM PRES MNTR 0059 INTRAVASC MSMNT COR ART 0067 INTRAVAS MSMNT THORC ART 0068 INTRAVAS MSMT PERIPH ART 0069 INTRAVS MSMT VES NEC/NOS 6825 UTERINE ART EMB W/O COIL</p> |
| V4.4 | March 2012 | Software | Software/ Documentation | Revised the data step of creating permanent data set containing all records which are deleted from the analysis because key variable values having missing data |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|-----------|-------------------------|--|
| V4.4 | March 2012 | Software | Software/ Documentation | PDI 12: Modified inclusion logic to include time dependent logic to discharges before October 1, 2011 and after October 1, 2011 for central line-associated blood stream infection diagnosis codes |
| V4.4 | March 2012 | Software | Software/ Documentation | WinQI v4.3 and v4.4 do not check for a possible issue with user-defined composite weighting – users must set weights for all possible individual indicators, including zero weights for indicators that are not to be included in the composite. This requirement has been included in the software documentation. |
| V4.4 | March 2012 | Software | Software/ Documentation | PDI 09: Modified inclusion logic to include time dependent logic to discharges before October 1, 2011 and after October 1, 2011 for acute Respiratory Failure diagnosis codes |
| V4.4 | March 2012 | Software | Software/ Documentation | Both SAS and WinQI v4.3 were improperly truncating the (Observed rate)/(Expected rate) ratio and associated upper confidence bound (95%) to be ≤ 1.0 in cases where a stratification of the rates was being implemented. This issue was fixed in both SAS and WinQI so that this truncation only applies in cases where no stratification is being performed. |
| V4.4 | March 2012 | Software | Software/ Documentation | SAS and WinQI v4.4 remain 32-bit applications developed on a Windows XP operating system. Some limited testing has been performed to ensure that these applications will run successfully under a 64-bit, Windows 7 environment. One additional installation requirement related to administrator rights has been included in the software documentation. |
| V4.4 | March 2012 | Software | Software/ Documentation | WinQI v4.3 was missing the PRPED5D code set and codes 7454 and 7455. This issue was fixed in v4.4 of WinQI and affects PDI 06 only. |
| V4.4 | March 2012 | Software | Software/ Documentation | The WinQI v4.3 patient-level report showed incorrect POA exclusions in some cases. This issue was fixed in v4.4 of WinQI. |
| V4.4 | March 2012 | Software | Software/ Documentation | WinQI v4.3 was not properly calculating quarterly rates when requested by the user. This issue was fixed in v4.4 of WinQI. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|---------------|-----------|-------------------------|---|
| V4.4 | March 2012 | Software | Software/ Documentation | SAS v4.3 did not properly handle stratifications where the user requested a two-way stratification that overlapped with a one-way stratification (e.g., Age-by-Gender at the same time as Age by itself). This issue was in fixed in v4.4 of SAS. |
| V4.4 | March 2012 | Software | Software/ Documentation | Sort routine was (PROC SORT) was introduced to PDSASP3 and PDSASA3 programs before merging all the indicators together to sorting problems in SAS whenever user selects multiple stata (e.g. stratifies by age, gender, and age by gender) |
| V4.4 | March 2012 | Software | Software/ Documentation | WinQI v4.3 did not properly implement a user selection of years later than 2009 during area report generation. Users were unable to select the year 2010 or 2011 to derive the denominator for area indicators. This issue, which affected all area-level QI, was fixed in v4.4 of WinQI. |
| V4.4 | March 2012 | Software | Software/ Documentation | The files of shrinkage factors (MSXPDP43.TXT) which were applied to the risk-adjusted were revised using re-calculated signal variance. |
| V4.4 | March 2012 | Software | Software/ Documentation | PDI 09: Modified the order of denominator exclusion/inclusions and numerator flags. |
| V4.4 | March 2012 | Software | Software/ Documentation | PDSASA2.SAS program was revised to include denominator adjustment when the population count for certain combination of strata was zero. |
| V4.4 | March 2012 | Software | Software/ Documentation | Minor SAS versus WinQI coding differences were corrected in the implementation of the technical specifications (e.g., differences in the order in which statements were evaluated) for PDI 01 and PDI 02. |
| V4.4 | March 2012 | Software | Software/ Documentation | PDI 15 (Diabetes Short-term Complications Admission Rate) can be calculated using the number of diabetics in the state as the denominator, stratified by age. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|---|-------------------------|---|
| V4.4 | March 2012 | Software | Software/ Documentation | Changes were made to the SAS and WinQI software to implement a re-estimation of the signal variance in order to correct the fact that the smoothed rates in v4.3 of the software were constant for all providers for four indicators (IQI-11, IQI-14, NQI-01 and PSI-08). |
| V4.3 | April 2011 | Iatrogenic Pneumothorax (PDI 5) Denominator (Exclusion, thoracic procedure) | Coding | Add code: 3227 BRNC THRMPLSTY, ABLT MSCL |
| V4.3 | April 2011 | Iatrogenic Pneumothorax (PDI 5) Denominator (Exclusion, cardiac procedure) | Coding | Add code: 3597 PERC MRTL VLV REPR W IMP 3737 EXC/DEST HRT LES, THRSPC |
| V4.3 | April 2011 | Postoperative Hemorrhage or Hematoma (PDI 8) | Coding | Add to risk category for diagnosis of coagulopathy 28741 POSTTRANSFUSION PURPURA |
| V4.3 | April 2011 | Transfusion Reaction (PDI 13) Numerator (Inclusion, transfusion reaction) | Coding | Add code: 99960 ABO INCOMPAT REACT NOS 99961 ABO INCOMP/HTR NEC 99962 ABO INCOMPAT/ACUTE HTR 99963 ABO INCOMPAT/DELAY HTR 99969 ABO INCOMPAT REACTN NEC 99970 RH INCOMPAT REACTION NOS 99971 RH INCOMP/HTR NEC 99972 RH INCOMPAT/ACUTE HTR 99973 RH INCOMPAT/DELAY HTR 99974 RH INCOMPAT REACTION NEC |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|----------------------|---------------------|--|
| V4.3 | April 2011 | AHRQ Procedure Class | Coding | Add to procedure class: Class 1: 1771 NON-CORONARY IFVA Class 2: 0060 INS D-E STNT SUP FEM ART 3897 CV CATH PLCMT W GUIDANCE Class 4: 0120 IMP/REPL BRAIN PULSE GEN 0129 REM BRAIN PULSE GENERATR 3227 BRNC THRMPLSTY ABLT MSCL 3597 PERC MTRL VLV REPR W IMP 3737 EXC/DEST HRT LES THRSPC 3981 IMP CRTD SINUS STMTOTL 3982 IMP/REP CRTD SINUS LEAD 3983 IMP/RED CRTD SINUS GNRTR 3984 REV CRTD SINUS STM LEADS 3985 REV CRTD SINUS PULSE GEN 3986 REM CRTD SINUS STM TOTL 3987 REM CRTD SINUS STM LEAD 3988 REM CRTD SINUS PULSE GEN 3989 OTH CARTD BODY/SINUS OP 8188 RVRS TOTL SHLDR REPLACMT 8494 INS STRN FIX W RGD PLATE 8555 FAT GRAFT TO BREST 8687 FAT GRFT SKIN/SUBQ TISS 8690 EXT FAT FOR GRFT/BANKING |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|--------------------------------|---------------------|--|
| V4.3 | April 2011 | Major Operating Room Procedure | Coding | Add codes: 0120 IMP/REPL BRAIN PULSE GEN 0129 REM BRAIN PULSE GENERATR 3227 BRNC THRMPLSTY ABLT MSCL 3597 PERC MTRL VLV REPR W IMP 3737 EXC/DEST HRT LES THRSPC 3981 IMP CRTD SINUS STMTOTL 3982 IMP/REP CRTD SINUS LEAD 3983 IMP/REP CRTD SINUS GNRTR 3984 REV CRTD SIMUS STM LEADS 3985 REV CRTD SINUS PULSE GEN 3986 REM CRTF SINUS STM TOTL 3987 REM CRTD SINUS STM LEAD 3988 REM CRTD SINUS PULSE GEN 3989 OTH CARTD BODY/SINUS OP 8188 RVRS TOTL SHLDR REPLACMT 8494 INS STRN FIX W RGD PLATE 8555 FAT GRAFT TO BREAST 8587 FAT GRFT SKIN/SUBQ TISS 8690 EXT FAT FOR GRFT/BANKING |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|---|---------------------|---|
| V4.3 | April 2011 | AHRQ Clinical Classification Software | Coding | Add codes: CCS 58: 27501 HEREDIT HEMOCHROMATOSIS 27502 HEMOCHROMATOS-RBC TRANS 27503 HEMOCHROMATOSIS NEC 27509 DISORD IRON METABLSM NEC 27803 OBESITY HYPOVENTS SYND V8541 BMI 40.0-44.9, ADULT V8542 BMI 45.0-49.9, ADULT V8543 BMI 50.0-59.9, ADULT V8544 BMI 60-69.9, ADULT V8545 BMI 70 AND OVER, ADULT CCS 62: 28749 SEC THROMBOCYTPENIA NEC CCS 83: 78033 POST TRAUMATIC SEIZURES CCS 95: 78452 FLNCY DSORD COND ELSEWHR 79951 ATTN/CONCENTRATE DEFICIT 79952 COG COMMUNICATE DEFICIT 79953 VISUOSPATIAL DEFICIT 79954 PSYCHOMOTOR DEFICIT 79955 FRONTAL LOBE DEFICIT 79959 COGNITION SIGN/SYMPT NEC CCS 133: 78630 HEMOPTYSIS NOS 78631 AC IDIO PUL HEMRG INFANT 78639 HEMOPTYSIS NEC |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------|--|---------------------|---|
| | | | | CCS 213: V1365 HX-CONG MALFORM-HEART CCS 214: V1367 HX-CONG MALFORM-DIGEST CCS 215: 75231 AGENESIS OF UTERUS 75232 HYPOPLASIA OF UTERUS 75233 UNICORNUATE UTERUS 75234 BICORNUATE UTERUS 75235 SEPTATE UTERUS 75236 ARCUATE UTERUS 75239 ANOMALIES OF UTERUS NEC 75243 CERVIAL AGENESIS 75244 CERVICAL DUPLICATION 75245 VAGINAL AGENESIS 75246 TRANSV VAGINAL SEPTUM 75247 LONGITUD VAGINAL SEPTUM V1362 HX-CONG MALFORM-CU CCS 216: V1363 HX-CONG MALFORM-NERVOUS CCS 217: V1364 HX-CONG MALFORM-EYE,FACE V1366 HX-CONG MALFORM-RESP SYS V1368 HX-CONG MALFORM-SKIN,MS CCS 654: 31535 CHLDHD ONSET FLNCY DISOR |
| V4.3 | April 2011 | Surgical MS-DRG | Coding | Add to numerator inclusion for Surgical DRG 14 ALLOGENIC BONE MARROW TRANSPLANT 15 AUTOLOGOUS BONE MARROW TRANSPLANT |
| V4.3 | April 2011 | Software (SAS and WinQI) and Documentation | Software/ Documents | PDI #2: Modified inclusion logic to remove exclusion of pressure ulcer in stage I or II to capture diagnosis of stage III or IV ulcers. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|--------------------|--|---------------------|---|
| V4.3 | April 2011 | Software (SAS and WinQI) and Documentation | Software/ Documents | PDI #5: Added denominator exclusions for thoracic procedures (43.5, 43.99, 44.67, 77.81, 77.91) |
| V4.3 | April 2011 | Software (SAS and WinQI) and Documentation | Software/ Documents | PDI #9: Added denominator exclusion for esophageal resection procedure (MDC 4), lung cancer procedures (32.39, 32.49, 32.59), ENT/neck procedures (CCS 33), and degenerative neurological disorders (CCS 653) |
| V4.3 | June 30, 2011 | Software (SAS and WinQI) and Documentation | Software/ Documents | AHRQ Clinical Classification Software: Modified CCS 65 to CCS 654 and CCS 67 to CCS 661. Added codes: 307.0, 307.9, 315.00, 315.01, 315.02, 315.09, 315.1, 315.2, 315.31, 315.32, 315.34, 315.35, 315.39, 315.4, 315.5, 315.8, 315.9, V40.0, V40.1, 648.30, 648.31, 648.32, 648.33, 648.34, 655.50, 655.51, 655.53, 760.72, 760.73, 760.75, 779.5, 965.00, 965.01, 965.02, 965.09, V65.42. Removed codes: 305.1, 305.10, 305.11, 305.12, 305.13, V15.82 |
| V4.3 | June 30, 2011 | Guide | Software/ Documents | Revised and updated all sections of the guide document to reflect current state of indicators, software and body of evidence. |
| V4.2 | September 30, 2010 | Pressure Ulcer (PDI 2) | Coding | Add diagnosis codes to stratifiers by hemiplegia, paraplegia, or quadriplegia 768.70 Hypoxic-ischemic encephalopathy, unspecified 768.72 Moderate hypoxic-ischemic encephalopathy 768.73 Severe hypoxic-ischemic encephalopathy |
| V4.2 | September 30, 2010 | Postoperative Respiratory Failure (PDI 9) Denominator (Exclusion, neuromuscular disorders) | Coding | 359.71 Inclusion body myositis IBM 359.79 Other inflammatory and immune myopathies, NEC |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------------------|--|---------------------|---|
| V4.2 | September 30, 2010 | Postoperative Sepsis (PDI 10) Denominator (Exclusion, Infection) | Coding | 670.00 Major puerperal infection NOS-unsp 670.02 Major puerperal Infection NOS-del p/p 670.04 Major puerperal infection NOS-p/p 670.10 Puerperal endometritis-unsp 670.12 Puerperal endometritis del w p/p 670.14 Puerperal endometritis-postpart 670.20 Puerperal sepsis-unsp 670.22 Puerperal sepsis-del w p/p 670.24 Puerperal sepsis-postpart 670.30 Puerperal septic thrombophlebitis-unsp 670.32 Puerperal septic thrombophlebitis-del w p/p 670.34 Puerperal septic thrombophlebitis-postpart 670.80 Major puerperal infection NEC-suspec 670.82 Major puerperal infection NEC-dl w p/p 670.84 Major puerperal infection NEC-p/p |
| V4.2 | September 30, 2010 | Postoperative Wound Dehiscence (PDI 11) Denominator (Exclusion, high risk group) | Coding | 279.41 Autoimmune lymphoproliferative syndrome ALPS 279.49 Autoimmune disease, not elsewhere classified |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------------------|----------------------------|---------------------|--|
| V4.2 | September 30, 2010 | Multiple PDI Indicators | Coding | Add procedure codes: 0049 Superstat O2 Therapy 0058 Ins Intra-ansm Pres Mntr 0059 Intravasc Msmnt Cor Art 0067 Intravas Msmnt Thorc Art 0068 Intravas MsMt Periph Art 0069 Intravs Msmt Ves NEC/NOS 1751 Implant CCM, total system 1752 Implant CCM pulse gentr 1761 LITT lesn brain, guidance 1762 LITT les hd/nck, guidance 1763 LITT lesn liver, guidance 1769 LITT lesn, guide oth/NOS 1770 Intravenous Infusion of Clofarabine 3373 Endo ins/re brnc val, mul 3824 Intravas img corves OCT 3825 Intravas img non-cor OCT 3975 Endo emb hd/nk, bare coil 3976 Endo em hed/nk, bioac coil 4686 Endo insrt colonic stent 4687 Insert colonic stent NEC 3850 ABDPERNEAL RES RECTM NOS 8570 TOTL RECONSTC Breast NOS |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------------------|----------------------------|---------------------|--|
| V4.2 | September 30, 2010 | Multiple PDI Indicators | Coding | Change procedure codes: 3760 Imp Bivn Ext Hrt Ast Sys 4840 Pull-thru Res Rectum NOS Change procedure codes category assignments: 0044 PROC-VESSEL BIFURCATION 0074 HIP REPL SURFMETAL/POLY 0075 HIP REP SURFMETAL/METAL 0076 HIP REP SURFCERMC/CERMC 0077 HIP REPL SURF- CERMC/POLY 0094 HITRA-OP NEUROPHYS MONTR 0110 INTRACRAN PRESSURE MONTR 0116 INTRACRANIAL 02 MONITOR 0117 BRAIN TEMP MONITORING 0126 INS CATHCRANIAL CAVITY 0127 REM CATHCRANIAL CAVITY 1741 OPEN ROBOTIC ASSIST PROC 1742 LAP ROBOTIC ASSIST PROC 1743 PERC ROBOTIC ASSIST PROC 1744 ENDO ROBOTIC ASSIST PROC 1745 THORACO ROBOTIC AST PROC 1749 ROBOTIC AST PROC NEC/NOS 3372 ENDO PULM ARWY FLOW MSMT 3736 EXC LEFT A TRAIL APPENDAG 3768 PERCUTAN HRT ASSIST SYST 3790 INS LEFT ATR APPEND DEV 3823 INTRAVASCLR SPECTROSCOPY 5013 TRANSJUGULAR LIVER BX 7094 INSERT BIOLOGICAL GRAFT 7095 INSERT SYNTH GRAFT/PROST 8472 APP EXT FIX DEVRING SYS 8473 APP HYBRID EXT FIX DEV 9227 RADIOACTIVE ELEM IMPLANT |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-----------------------|----------------------------|---------------------|--|
| V4.2 | September 30, 2010 | Multiple PDI Indicators | Coding | Add new operating procedure codes: 1751 Implant CCM, total system 1752 Implant CCM pulse genr 1761 LITT lesn brain, guidance 1762 LITT les hd/nck, guidance 1763 LITT lesn liver, guidance 1769 LITT lesn, guide oth/NOS 3975 Endo emb hd/nk, bare coil 3976 Endo em hed/nk, bioac coil 4850 ABDPERNEAL RES RECTM NOS 8570 TOTL RECONSTC BREAST NOS Modify: 9227 RADIOACTIVE ELEM IMPLANT 3760 IMP BIVN EXT HRT AST SYS 4840 PULL-THRU RES RECTUM NOS 3768 PERCUTAN HRT ASSIST SYST |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|--------------------|--------------------------------|---------------------|---|
| V4.2 | September 30, 2010 | Multiple PDI Indicators | Coding | Remove operating procedure codes: 0044 PROC-VESSEL BIFURCATION 0074 HIP REPL SURFMETAL/POLY 0075 HIP REP SURFMETAL/METAL 0076 HIP REP SURFCERM/CERM 0077 HIP REPL SURF- CERM/POLY 0126 INS CATHCRANIAL CAVITY 0127 REM CATHCRANIAL CAVITY 1741 OPEN ROBOTIC ASSIST PROC 1742 LAP ROBOTIC ASSIST PROC 1743 PERC ROBOTIC ASSIST PROC 1744 ENDO ROBOTIC ASSIST PROC 1745 THORACO ROBOTIC AST PROC 1749 ROBOTIC AST PROC NEC/NOS 3372 ENDO PULM ARWY FLOW MSMT 3736 EXC LEFT A TRAIL APPENDAG 3790 INS LEFT ATR APPEND DEV 3823 INTRAVASCLR SPECTROSCOPY 7094 INSERT BIOLOGICAL GRAFT 7095 INSERT SYNTH GRAFT/PROST 8472 APP EXT FIX DEVRING SYS 8473 APP HYBRID EXT FIX DEV |
| V4.2 | September 30, 2010 | Multiple PDI Indicators | Coding | Add ICD-9-CM codes to the corresponding CCS categories, per Table 2 in Appendix. |
| V4.1 | December 2, 2009 | SAS Software and Documentation | Software/ Documents | PQI #9 – Low Birth Weight and PSI #17 – Birth Trauma Injury to Neonates – now calculated in the PDI SAS module. Technical Specifications for these indicators are distributed with their respective (PQI and PSI) set of documents. |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | PDI #2 – Pressure Ulcer (formerly Decubitus Ulcer) – added diagnosis code to denominator exclusion for hemi- and paraplegia (334.1) |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------------------|-------------------------------|---------------------|---|
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | NQI #1 and PDI #5 – Iatrogenic Pneumothorax – 1) replaced the DRG denominator exclusion for cardiac surgery with procedure code denominator exclusion for cardiac procedures; 2) added procedure codes to denominator exclusion for thoracic procedures |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | PDI #4 – Iatrogenic Pneumothorax in Neonates has been redesignated as NQI #1. It is still calculated by the PDI SAS module. |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | PDI #9 – Postoperative respiratory failure – added denominator exclusion for craniofacial anomalies with 1) a procedure code for laryngeal or pharyngeal surgery or 2) a procedure on face and a diagnosis code of craniofacial abnormalities. |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | PDI #10 – Postoperative sepsis – removed diagnosis code from numerator inclusion for sepsis for discharges after 2004Q4 (effective October 1, 2004) |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | PDI #12 – Central Line-associated Bloodstream Infection – renamed the indicator from “Selected infections due to medical care” |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | PDI #16 – Gastroenteritis – added diagnosis code to numerator exclusion for gastrointestinal abnormalities (538 Gastrointestinal mucositis (ulcerative)) |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Multiple – Infection – 1) removed diagnosis codes for non-bacterial infections from denominator exclusion for infection; 2) Add diagnosis code to denominator exclusion for infection (078.3 CAT-SCRATCHDISEASE) |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Multiple – Major Operating Room Procedures – removed selected procedure codes from the denominator inclusion for major operating room procedures |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Medical DRGs – replaced the DRG denominator inclusion for medical discharges with the MS-DRG denominator inclusion for medical discharges for discharges after 2007Q4 (effective October 1, 2007). |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|---|---------------------|--|
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Surgical DRGs – replaced the DRG denominator inclusion for surgical discharges with the MS-DRG denominator exclusion for surgical discharges for discharges after 2007Q4 (effective October 1, 2007) |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Adult DRGs – dropped the DRG denominator inclusion for adult DRGs. |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Pediatric Heart Surgery Mortality (PDI #6) – excluded cases with any diagnosis of ASD or VSD with PDA as the only procedure |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Iatrogenic Pneumothorax – Neonates (PDI #4) – renamed PDI #4 to NQI #1 |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Neonatal Mortality (NQI #2) – added the Neonatal Mortality indicator |
| V 4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Blood Stream Infection – Neonates (NQI #3) – added the Blood Stream Infection – Neonates indicator |
| V4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Implement UB-04 – The UB-04 (effective October 1, 2007) changes were implemented including new data elements for point-of-origin and present on admission |
| V4.0 | June 30, 2009 | Software and Documentation | Software/ Documents | Update Benchmarking Data to 2007 – used data from the 2007 SID for computation of benchmarks |
| V4.0 | February 25, 2009 | Accidental Puncture or Laceration (PDI 1) Denominator (Inclusion, spinal surgeries) | Coding | Add procedure codes to denominator inclusion for spinal surgeries (\$SPINEP) Add codes: 80.53 Repair of the annulus fibrosus with graft or prosthesis 80.54 Other and unspecified repair of the anulus fibrosus |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|---|---------------------|---|
| V4.0 | February 25, 2009 | Pressure Ulcer (PDI 2) Denominator (Exclusion, diagnosis of Stage I or Stage II) | Coding | Add denominator exclusion for diagnosis of Stage I or Stage II (\$DECUBVD) Add code: 707.20 PRESSURE ULCER, STAGE NOS 707.21 PRESSURE ULCER, STAGE I 707.22 PRESSURE ULCER, STAGE II |
| V4.0 | February 25, 2009 | Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion, diaphragmatic surgery repair) | Coding | Add procedure codes to denominator exclusion for diaphragmatic surgery repair (\$DIAPHRP) Add code: 53.71 Laparoscopic repair of diaphragmatic hernia, abdominal approach 53.72 Other and open repair of diaphragmatic hernia, abdominal approach 53.75 Repair of diaphragmatic hernia, abdominal approach, NOS 55.83 Laparoscopic repair of diaphragmatic hernia, with thoracic approach 55.84 Other and open repair of diaphragmatic hernia, with thoracic approach |
| V4.0 | February 25, 2009 | Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion, pleural effusion) | Coding | Add diagnosis codes to denominator exclusion for pleural effusion (\$PLEURAD) Add code: 511.81 Malignant pleural effusion 511.89 Other specified forms of effusion, except tuberculosis |
| V4.0 | February 25, 2009 | Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion) | Coding | Replace the DRG denominator exclusion for cardiac surgery (\$CARSDR) with a procedure code denominator exclusion for cardiac procedures (\$CARDSIP). See Table 1 in Appendix for cardiac procedure codes. Add code: 37.36 Excision or destruction of left atrial appendage (LAA) 37.55 Removal of internal biventricular heart replacement system 37.60 Implantation or insertion of biventricular external heart assist system |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|---|---------------------|---|
| V4.0 | February 25, 2009 | Pediatric Heart Surgery (PDI 6 and 7) Denominator (Inclusion, procedures to repair congenital heart defect) | Coding | Add procedure code to denominator inclusion for procedures to repair congenital heart defect (\$PRPED1P) Add code: 37.36 Excision or destruction of left atrial appendage (LAA) |
| V4.0 | February 25, 2009 | Postoperative Sepsis (PDI 10) Numerator (Inclusion, sepsis) | Coding | Add diagnosis code to numerator inclusion for sepsis (\$SEPTIID) Modify code: 38.11 Methicillin susceptible staphylococcus aureus septicemia Add code: 38.12 Methicillin resistant Staphylococcus aureus septicemia |
| V4.0 | February 25, 2009 | Postoperative Wound Dehiscence (PDI 11) Denominator (Inclusion, abdominopelvic procedures) | Coding | Add procedure codes to denominator inclusion for abdominopelvic procedures (\$ABDOMIP) Add codes: 17.31 Laparoscopic multiple segmental resection of large intestine 17.32 Laparoscopic cecectomy 17.33 Laparoscopic right hemicolectomy 17.34 Laparoscopic resection of transverse colon 17.35 Laparoscopic left hemicolectomy 17.36 Laparoscopic sigmoidectomy 17.39 Other laparoscopic partial excision of large intestine 45.81 Laparoscopic total intra-abdominal colectomy 45.82 Open total intra-abdominal colectomy 45.83 Other and unspecified total intra-abdominal colectomy 48.40 Pull-through resection of rectum, not otherwise specified 48.43 Open pull-through resection of rectum 48.50 Abdominoperineal resection of the rectum, NOS 48.52 Open abdominoperineal resection of the rectum 48.59 Other abdominoperineal resection of the rectum 53.75 Repair of diaphragmatic hernia, abdominal approach, NOS |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------------|--|---------------------|--|
| V4.0 | February 25, 2009 | Gastroenteritis (PDI 16) Numerator (Exclusion, gastrointestinal abnormalities) | Coding | Add diagnosis codes to numerator exclusion for gastrointestinal abnormalities (\$ACGDISD) Add codes: 53570 EOSINOPHIL GASTRT WO HEM 53571 EOSINOPHILC GASTRT W HEM 558.41 Eosinophilic gastroenteritis 558.42 Eosinophilic colitis |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------------|--|---------------------|--|
| V4.0 | February 25, 2009 | Multiple – Immunocompromised Denominator (Exclusion, high risk immuno- compromised) | Coding | <p>Add diagnosis codes to denominator exclusion for high risk immunocompromised (\$IMMUNHD)</p> <p>Add codes:</p> <p>199.2 Malignant neoplasm associated with transplanted organ 238.79 Other lymphatic and hematopoietic tissues 238.77 Post-transplant lymphoproliferative disorder 279.50 Graft-versus-host disease, unspecified 279.51 Acute graft-versus-host disease 279.52 Chronic graft-versus-host disease 279.53 Acute on chronic graft-versus-host disease V45.11 Renal dialysis status</p> <p>Add codes:</p> <p>203.02 MULT MYELOMA IN RELAPSE 203.12 PLSM CEL LEUK IN RELAPSE 203.82 OTH IMNPRLF NEO-RELAPSE 204.02 ACT LYMP LEUK IN RELAPSE 204.12 CHR LYMP LEUK IN RELAPSE 204.22 SBAC LYM LEUK IN RELAPSE 204.82 OTH LYM LEUK IN RELAPSE 204.92 LYMP LEUK NOS RELAPSE 205.02 ACT MYEL LEUK IN RELAPSE 205.12 CHR MYEL LEUK IN RELAPSE 205.22 SBAC MYL LEUK IN RELAPSE 205.32 MYEL SARCOMA IN RELAPSE 205.82 OTH MYEL LEUK IN RELAPSE 205.92 MYEL LEUK NOS IN RELAPSE 206.02 ACT MONO LEUK IN RELAPSE 206.12 CHR MONO LEUK IN RELAPSE 206.22 SBAC MONO LEU IN RELAPSE 206.82 OTH MONO LEUK IN RELAPSE 206.92 MONO LEUK NOS RELAPSE</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|------|-----------|---------------------|---|
| | | | | 207.02 AC ERTH/ERYLK IN RELAPSE 207.12 CHR ERYTHRMIA IN RELAPSE 207.22 MGKRYCYT LEUK IN RELAPSE 207.82 OTH SPF LEUK IN RELAPSE 208.02 AC LEUK UNS CL RELAPSE 208.12 CH LEU UNS CL IN RELAPSE 208.22 SBAC LEU UNS CL-RELAPSE 208.82 OTH LEUK UNS CL-RELAPSE 208.92 LEUKEMIA NOS IN RELAPSE |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------------|---|---------------------|---|
| V4.0 | February 25, 2009 | Multiple – Infection Denominator (Exclusion, infection) | Coding | <p>Add diagnosis codes to denominator exclusion for infection (\$INFECID)</p> <p>Modify codes: 038.11 Methicillin susceptible staphylococcus aureus septicemia 041.11 Methicillin susceptible staphylococcus aureus 482.41 Methicillin susceptible pneumonia due to staphylococcus aureus</p> <p>Add codes: 038.12 Methicillin resistant Staphylococcus aureus septicemia 041.12 Methicillin resistant Staphylococcus aureus (MRSA) 482.42 Methicillin resistant pneumonia due to staphylococcus aureus 707.20 Pressure ulcer unspecified stage 707.22 Pressure ulcer stage II 707.23 Pressure ulcer stage III 707.24 Pressure ulcer stage IV 777.50 Necrotizing enterocolitis in newborn, unspecified 777.51 Stage I necrotizing enterocolitis in newborn 777.52 Stage II necrotizing enterocolitis in newborn 777.53 Stage III necrotizing enterocolitis in newborn</p> <p>Delete codes (for discharges after 2008Q4 effective October 1, 2008): 707.1 PRESSURE ULCER, SITE NOS 707.2 PRESSURE ULCER, ELBOW 707.3 PRESSURE ULCER, UPR BACK 707.4 PRESSURE ULCER, LOW BACK 707.5 PRESSURE ULCER, HIP 707.6 PRESSURE ULCER, BUTTOCK 707.7 PRESSURE ULCER, ANKLE 707.8 PRESSURE ULCER, HEEL 707.09 PRESSURE ULCER, SITE NEC</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|--|--------------------------------|---|
| V4.0 | February 25, 2009 | Pressure Ulcer (PDI 2) Denominator (Exclusion, hemi- and paraplegia) | Indicator Specification Change | Add diagnosis code to denominator exclusion for hemi- and paraplegia (\$HEMIPID) Add code: 334.1 Hereditary spastic paraplegia |
| V4.0 | February 25, 2009 | Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion) | Indicator Specification Change | Replace the DRG denominator exclusion for cardiac surgery (\$CARSDR) with procedure code denominator exclusion for cardiac procedures (\$CARDSIP). See Table 1 in Appendix for cardiac procedure codes. |
| V4.0 | February 25, 2009 | Iatrogenic Pneumothorax (PDI 4 and 5) Denominator (Exclusion, thoracic procedures) | Indicator Specification Change | Add procedure codes to denominator exclusion for thoracic procedures (\$THORAIP) Add codes: 5.22 Sympathectomy Cervical 5.23 Sympathectomy Lumbar 05.29 Other sympathectomy and ganglionectomy 7.80 Thymectomy, not otherwise specified 7.81 Other partial excision of thymus 7.82 Other total excision of thymus 7.83 Thoracoscopic partial excision of thymus 7.84 Thoracoscopic total excision of thymus 32.49 Other lobectomy of lung |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------------|--|-----------------------------------|---|
| V4.0 | February 25, 2009 | Postoperative Respiratory Failure (PDI 9) Denominator (Exclusion) | Indicator Specification Change | <p>Add denominator exclusion for craniofacial anomalies with 1) a procedure code for laryngeal or pharyngeal surgery (\$CRANI1P) <i>or</i> 2) a procedure on face (\$CRANI2P) <i>and</i> a diagnosis code of craniofacial abnormalities (\$CRANIID).</p> <p>Add codes for pharyngeal surgery (\$CRANI1P):</p> <ul style="list-style-type: none"> 25.3 Complete glossectomy 25.4 Radical glossectomy 27.31 Local excision or destruction of lesion or tissue of bony palate 29.0 Pharyngotomy 29.33 Pharyngectomy (partial) 29.39 Other excision or destruction of lesion or tissue of pharynx 29.4 Plastic operation on pharynx 29.53 Closure of other fistula of pharynx 29.59 Other repair of pharynx 29.91 Dilation of pharynx 30.09 Other excision or destruction of lesion or tissue of larynx 30.21 Epiglottidectomy 30.22 Vocal cordectomy 30.29 Other partial laryngectomy 30.3 Complete laryngectomy 30.4 Radical laryngectomy 31.3 Other incision of larynx or trachea 31.5 Local excision or destruction of lesion or tissue of trachea 31.69 Other repair of larynx 31.73 Closure of other fistula of trachea 31.75 Reconstruction of trachea and construction of artificial larynx 31.79 Other repair and plastic operations on trachea 31.98 Other operations on larynx 31.99 Other operations on trachea |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|---|--------------------------------|---|
| | | | | <p>Add codes for procedure on face (\$CRANI2P):</p> <p>25.2 Partial glossectomy 25.59 Other repair and plastic operations on tongue 27.32 Wide excision or destruction of lesion or tissue of bony palate 27.62 Correction of cleft palate 27.63 Revision of cleft palate repair 27.69 Other plastic repair of palate 29.31 Cricopharyngeal myotomy 76.65 Segmental osteoplasty [osteotomy] of maxilla 76.66 Total osteoplasty [osteotomy] of maxilla 76.46 Other reconstruction of other facial bone 76.69 Other facial bone repair 76.91 Bone graft to facial bone</p> <p>Add codes for craniofacial abnormalities (\$CRANIID).</p> <p>744.83 Macrostomia 744.84 Microstomia 744.9 Unspecified anomalies of face and neck 748.3 Congenital anomalies of skull and face bones 756.0 Tracheomalacia and congenital tracheal stenosis</p> |
| V4.0 | February 25, 2009 | Postoperative Sepsis (PDI 10) Numerator (Inclusion) | Indicator Specification Change | <p>Remove diagnosis code from numerator inclusion for sepsis (\$SEPTIID) for discharges after 2004Q4 (effective October 1, 2004)</p> <p>Drop code: 785.59 Shock without mention of trauma, other</p> |
| V4.0 | February 25, 2009 | Hospital Acquired Vascular Catheter Related Infections (PDI 12) | Indicator Specification Change | <p>Rename the indicator from “Selected infections due to medical care” to “Hospital acquired vascular catheter related infections”</p> |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------------|--|-----------------------------------|---|
| V4.0 | February 25, 2009 | Gastroenteritis (PDI 16) Numerator (Exclusion, gastrointestinal abnormalities) | Indicator Specification Change | Add diagnosis code to numerator exclusion for gastrointestinal abnormalities (\$ACGDISD) Add code: 538 Gastrointestinal mucositis (ulcerative) |
| V4.0 | February 25, 2009 | Multiple – Infection Denominator (Exclusion, infection) | Indicator Specification Change | Remove diagnosis codes for non-bacterial infections from denominator exclusion for infection (\$INFECID) Drop codes: 376.00 ACUTE INFLAM NOS, ORBIT 386.30 LABYRINTHITIS NOS 386.31 SEROUS LABYRINTHITIS 386.32 CIRCUMSCRI LABYRINTHITIS 598.1 URETHR STRICT:INFECT NOS 598.2 URETH STRICT:OTH INFECT 686.01 PYODERMA GANGRENOSUM Add diagnosis code to denominator exclusion for infection (\$INFECID) Add codes: 078.3 CAT-SCRATCH DISEASE |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|--|--------------------------------|---|
| V4.0 | February 25, 2009 | Multiple – Major Operating Room Procedures Denominator (Inclusion) | Indicator Specification Change | Remove procedure codes from the denominator inclusion for major operating room procedures (\$ORPROC) Drop codes: 38.7 INTERRUPTION VENA CAVA 41.0 LYMPH STRUCTURE OP NEC 41.1 BONE MARROW TRNSPLNT NOS 41.2 AUTO BONE MT W/O PURG 41.3 ALO BONE MARROW TRNSPLNT 41.4 ALLOGRFT BONE MARROW NOS 41.5 AUTO HEM STEM CT W/O PUR 41.6 ALLO HEM STEM CT W/O PUR 41.7 CORD BLD STEM CELL TRANS 41.8 AUTO HEM STEM CT W PURG 41.9 ALLO HEM STEM CT W PURG 41.10 AUTO BONE MT W PURGING |
| V4.0 | February 25, 2009 | Iatrogenic Pneumothorax – Neonates (PDI 4) | Indicator Specification Change | Rename PDI 4 to NQI 1 |
| V4.0 | February 25, 2009 | Neonatal Mortality (NQI 2) | Indicator Specification Change | Add the Neonatal Mortality indicator |
| V4.0 | February 25, 2009 | Blood Stream Infection – Neonates (NQI 3) | Indicator Specification Change | Add the Blood Stream Infection – Neonates indicator |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------|--|---------------------|--|
| V 3.2 | March 10, 2008 | Iatrogenic Pneumothorax (PDI #5) Denominator (Exclusion, Thoracic Surgery) | Coding | Added new codes: 32.20 THORAC EXC LUNG LESION 32.30 THORAC SEG LUNG RESECT 32.39 OTH SEG LUNG RESECT NOS 32.41 THORAC LOBECTOMY LUNG 32.50 THORACOSPC PNEUMONECTOMY 32.59 OTHER PNEUMONECTOMY NOS 33.20 THORACOSCOPC LUNG BIOPSY 34.20 THORACOSCOPIC PLEURAL BX 34.52 THORACOSCOPC DECORT LUNG |
| V 3.2 | March 10, 2008 | Selected Infections due to Medical Care (PDI #12) Numerator (Inclusion) | Coding | Added new code 999.31 INFECT D/T CENT VEN CATH |
| V 3.2 | March 10, 2008 | Multiple PDI Indicators Exclusion (Infection) | Coding | Add new codes 040.41 INFANT BOTULISM and 040.42 WOUND BOTULISM |
| V 3.2 | March 10, 2008 | Multiple PDI Indicators | Coding | Updated DRG to Version 25.0 |
| V 3.2 | March 10, 2008 | Software and Documentation | Software/ Documents | PDI #1 (Accidental puncture or laceration) – Added an exclusion for discharges with an ICD-9-CM procedure code for spine surgery PDI #13 (Transfusion Reaction) – Revised the indicator from a rate to a count PDI #3 (Foreign Body left in During Procedure) – Revised the indicator from a rate to a count and to require the POA flag |
| V 3.1a | March 16, 2007 | SAS Software and Documentation | Software/ Documents | Added program to calculate the pediatric patient safety composite measure. The new files are PDI_COMPOSITE.SAS and MSXPDC31.TXT. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|-------------------|--|---------------------|---|
| V 3.1a | March 16, 2007 | Software (PDSASA2) | Software/ Documents | Amended the aggregation algorithm to correctly sum the numerator and denominator counts across stratifiers. |
| V 3.1 | March 12, 2007 | Software (SAS and Windows) and Technical Specifications | Software/ Documents | Revised numerator inclusion criteria for Postoperative Hemorrhage and Hematoma (PDI #8) to include a diagnosis of hemorrhage or hematoma and a procedure for control of hemorrhage or drainage of hematoma. |
| V 3.1 | March 12, 2007 | Covariates. Software (SAS and Windows), | Software/ Documents | Based on recommendations of the Risk Adjustment and Hierarchical Modeling (RAHM) Workgroup, computed covariates using logistic regression model with a hospital random-effect instead of the existing simple logistic model. Because the AHRQ QI use a large sample, the impact on the covariates of using the hierarchical model (and hence the impact on the risk-adjusted rates) is minor. Updated the coefficients used in the calculation of expected and risk-adjusted rates to the reference population, based on the 2002-2004 State Inpatient Data (SID). |
| V 3.1 | March 12, 2007 | Covariates, Software (SAS and Windows), Software Documentation | Software/ Documents | Included an option to incorporate the present on admission indicator into the specifications. In general, cases where the outcome of interest is present on admission are excluded from the denominator, as these cases are no longer at risk of having the outcome of interest occur during the hospitalization. The release also includes alternative parameter files of risk-adjustment covariates and population rates using 2002-2004 SID data from California and New York. |
| V 3.1 | March 12, 2007 | Software (SAS and Windows) | Software/ Documents | Age-, race-, gender- and county-specific population estimates used for AHRQ QI area rates were updated to use revised post-censal estimates for years 2001 through 2005 and projections for the years 2006 and 2007. Added capability to apply weight value to each discharge. The syntax computes risk-adjusted rates and observed-to-expected ratios for the pre-defined set of stratification variables (e.g., age, gender, payer, race). When stratifications other than hospital or area are selected, the RPPDxx variables and their confidence intervals are observed/expected ratios to avoid confounding with risk adjustment variables. |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|--------------------|---------------------------------------|---------------------|---|
| V 3.0b | September 29, 2006 | Windows | Software/ Documents | Implemented the pediatric risk adjustment. |
| V 3.0b | September 29, 2006 | SAS Software | Software/ Documents | Changed the PAGECAT stratification data element to correctly assign non-integer AGE values. Changed PHS_RACHS1.TXT syntax to correctly assign the risk category when AGE > 0 and AGEDAY is missing. In general, these cases are now assigned to a lower risk category (impacts about 3% of cases). |
| V 3.0b | September 29, 2006 | Technical Specifications and Software | Software/ Documents | PedQI #1, #3, #6, #10-12. Changed the exclusion from newborns less than 500g to neonates less than 500g. |
| V 3.0b | September 29, 2006 | Measures | Software/ Documents | Revised the text to clarify clinical panel recommendations of indicators for inclusion in Pediatric module and those deferred for further development. Added description of Pediatric Heart Surgery Volume. |
| V 3.0a | May 1, 2006 | SAS | Software/ Documents | Implemented the pediatric risk adjustment. |
| V 3.0a | May 1, 2006 | SAS Software | Software/ Documents | PDSAS1.SAS – Corrected the principal diagnosis exclusion for PedQI#8. PDSASA2.SAS – Corrected the denominator calculation for PedQI#17 |
| V 3.0a | May 1, 2006 | Technical Specifications | Software/ Documents | PedQI #2 – Added exclusion for cases with an ICD-9-CM procedure code of debridement or pedicle graft as the only major operating room procedures (surgical cases only) PedQI #4/#5 – Added exclusion for cases with ICD-9-CM procedure code of diaphragmatic surgery repair PedQIs #16 and #18– Modified exclusion to cases with age less than or equal to 90 days (or neonates if age in days is missing) Deleted ICD-9-CM procedure code 41.0 from the list of major operating room procedure codes Intermediate Risk Immuno-compromised state – Clarified that codes for hepatic failure must be accompanied by codes for cirrhosis. |

AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions

| VERSION/ REVISION NUMBER | DATE | COMPONENT | NATURE OF CHANGE | CHANGES |
|--------------------------------|----------------------|---|---------------------|--|
| V 3.0a | May 1, 2006 | Technical Specifications and Software | Software/ Documents | <p>Corrected ICD-9-CM diagnosis codes 590.00 and 590.01 in the numerator exclusion for PedQI #18.</p> <p>Dropped ICD-9-CM diagnosis codes 585.1, 585.2, 585.3, 585.4 and 585.9 from the high risk immunocompromised state specification.</p> <p>Added ICD-9-CM diagnosis codes 276.50, 276.51 and 276.52 to the numerator specification for PedQI #16.</p> <p>Refined the definition of neonate by dropping the DRG and MDC inclusion criteria.</p> <p>Refined the newborn definition by requiring that age in days be equal to zero (or missing if there is a liveborn diagnosis code).</p> |
| V 3.0 | February 20, 2006 | Technical Specifications and Software | Software/ Documents | <p>Dropped ICD-9-CM diagnosis code 5185 from numerator specification for PedQI #9.</p> <p>Dropped exclusion of all newborns and neonates transferring from another institution, added exclusion of neonates for PedQI #10.</p> |

Appendices

Appendix A. Cardiac Procedure Codes as of February 2009

| | | | |
|------|--------------------------|------|--------------------------|
| 3510 | OPEN VALVULOPLASTY NOS | 3613 | AORTOCOR BYPAS-3 COR ART |
| 3511 | OPN AORTIC VALVULOPLASTY | 3614 | AORTCOR BYPAS-4+ COR ART |
| 3512 | OPN MITRAL VALVULOPLASTY | 3615 | 1 INT MAM-COR ART BYPASS |
| 3513 | OPN PULMON VALVULOPLASTY | 3616 | 2 INT MAM-COR ART BYPASS |
| 3514 | OPN TRICUS VALVULOPLASTY | 3617 | ABD-CORON ARTERY BYPASS |
| 3520 | OPN/OTH REP HRT VLV NOS | 3619 | HRT REVAS BYPS ANAS NEC |
| 3521 | OPN/OTH REP AORT VLV-TIS | 362 | ARTERIAL IMPLANT REVASC |
| 3522 | OPN/OTH REP AORTIC VALVE | 3631 | OPEN CHEST TRANS REVASC |
| 3523 | OPN/OTH REP MTRL VLV-TIS | 3632 | OTH TRANSMYO REVASCULAR |
| 3524 | OPN/OTH REP MITRAL VALVE | 3639 | OTH HEART REVASCULAR |
| 3525 | OPN/OTH REP PULM VLV-TIS | 3691 | CORON VESS ANEURYSM REP |
| 3526 | OPN/OTH REPL PUL VALVE | 3699 | HEART VESSEL OP NEC |
| 3527 | OPN/OTH REP TCSPD VLV-TS | 370 | PERICARDIOCENTESIS |
| 3528 | OPN/OTH REPL TCSPD VALVE | 3710 | INCISION OF HEART NOS |
| 3531 | PAPILLARY MUSCLE OPS | 3711 | CARDIOTOMY |
| 3532 | CHORDAE TENDINEAE OPS | 3712 | PERICARDIOTOMY |
| 3533 | ANNULOPLASTY | 3731 | PERICARDIECTOMY |
| 3534 | INFUNDIBULECTOMY | 3732 | HEART ANEURYSM EXCISION |
| 3535 | TRABECUL CARNEAE CORD OP | 3733 | EXC/DEST HRT LESION OPEN |
| 3539 | TISS ADJ TO VALV OPS NEC | 3735 | PARTIAL VENTRICULECTOMY |
| 3550 | PROSTH REP HRT SEPTA NOS | 3741 | IMPL CARDIAC SUPPORT DEV |
| 3551 | PROS REP ATRIAL DEF-OPN | 3749 | HEART/PERICARD REPR NEC |
| 3553 | PROS REP VENTRIC DEF-OPN | 3751 | HEART TRANSPLANTATION |
| 3554 | PROS REP ENDOCAR CUSHION | 3752 | IMP TOT INT BI HT RP SYS |
| 3560 | GRFT REPAIR HRT SEPT NOS | 3753 | REPL/REP THR UNT TOT HRT |
| 3561 | GRAFT REPAIR ATRIAL DEF | 3754 | REPL/REP OTH TOT HRT SYS |
| 3562 | GRAFT REPAIR VENTRIC DEF | 3761 | PULSATION BALLOON IMPLAN |
| 3563 | GRFT REP ENDOCAR CUSHION | 3762 | INSRT NON-IMPL CIRC DEV |
| 3570 | HEART SEPTA REPAIR NOS | 3763 | REPAIR HEART ASSIST SYS |
| 3571 | ATRIA SEPTA DEF REP NEC | 3764 | REMVE EXT HRT ASSIST SYS |
| 3572 | VENTR SEPTA DEF REP NEC | 3765 | IMP VENT EXT HRT AST SYS |
| 3573 | ENDOCAR CUSHION REP NEC | 3766 | IMPLANTABLE HRT ASSIST |
| 3581 | TOT REPAIR TETRAL FALLOT | 3767 | IMP CARDIOMYOSTIMUL SYS |
| 3582 | TOTAL REPAIR OF TAPVC | 3791 | OPN CHEST CARDIAC MASSAG |
| 3583 | TOT REP TRUNCUS ARTERIOS | 3804 | INCISION OF AORTA |
| 3584 | TOT COR TRANSPOS GRT VES | 3805 | THORACIC VESSEL INC NEC |
| 3591 | INTERAT VEN RETRN TRANSP | 3844 | RESECT ABDM AORTA W REPL |
| 3592 | CONDUIT RT VENT-PUL ART | 3845 | RESECT THORAC VES W REPL |
| 3593 | CONDUIT LEFT VENTR-AORTA | 3864 | EXCISION OF AORTA |
| 3594 | CONDUIT ARTIUM-PULM ART | 3865 | THORACIC VESSEL EXCISION |
| 3595 | HEART REPAIR REVISION | 3884 | OCCLUDE AORTA NEC |
| 3598 | OTHER HEART SEPTA OPS | 3885 | OCCLUDE THORACIC VES NEC |
| 3599 | OTHER HEART VALVE OPS | 390 | SYSTEMIC-PULM ART SHUNT |
| 3603 | OPEN CORONRY ANGIOPLASTY | 3921 | CAVAL-PULMON ART ANASTOM |
| 3610 | AORTOCORONARY BYPASS NOS | 3922 | AORTA-SUBCLV-CAROT BYPAS |
| 3611 | AORTOCOR BYPAS-1 COR ART | 3923 | INTRATHORACIC SHUNT NEC |
| 3612 | AORTOCOR BYPAS-2 COR ART | | |

Appendix B. ICD-9-CM Codes for Corresponding CCS Categories as of September 2010

| | | | |
|-------|---------------------------|-------|--------------------------|
| 0700 | HEPATITIS A WITH COMA | 20048 | MANTLE CELL LYMPH MULTIP |
| 0701 | HEPATITIS A W/O COMA | 20050 | PRIMARY CNS LYMPH XTRNDL |
| 0702 | HEPATITIS B WITH COMA* | 20051 | PRIMARY CNS LYMPH HEAD |
| 07020 | HPT B ACTE COMA WO DLTA | 20052 | PRIMARY CNS LYMPH THORAX |
| 07021 | HPT B ACTE COMA W DLTA | 20053 | PRIMARY CNS LYMPH ABDOM |
| 07022 | HPT B CHRN COMA WO DLTA | 20054 | PRIMARY CNS LYMPH AXILLA |
| 07023 | HPT B CHRN COMA W DLTA | 20055 | PRIMARY CNS LYM INGUIN |
| 0703 | HEPATITIS B W/O COMA* | 20056 | PRIMARY CNS LYMPH PELVIC |
| 07030 | HPT B ACTE WO CM WO DLTA | 20057 | PRIMARY CNS LYMPH SPLEEN |
| 07031 | HPT B ACTE WO CM W DLTA | 20058 | PRIMARY CNS LYMPH MULTIP |
| 07032 | HPT B CHRN WO CM WO DLTA | 20060 | ANAPLASTIC LYMPH XTRNDL |
| 07033 | HPT B CHRN WO CM W DLTA | 20061 | ANAPLASTIC LYMPH HEAD |
| 0704 | VIRAL HEPAT NEC W COMA* | 20061 | ANAPLASTIC LYMPH HEAD |
| 07041 | HPT C ACUTE W HEPAT COMA | 20062 | ANAPLASTIC LYMPH THORAX |
| 07042 | HPT DLT WO B W HPT COMA | 20062 | ANAPLASTIC LYMPH THORAX |
| 07043 | HPT E W HEPAT COMA | 20063 | ANAPLASTIC LYMPH ABDOM |
| 07044 | CHRN C HPT C W HEPAT COMA | 20063 | ANAPLASTIC LYMPH ABDOM |
| 07049 | OTH VRL HEPAT W HPT COMA | 20064 | ANAPLASTIC LYMPH AXILLA |
| 0705 | VIRAL HEPAT NEC W/O COMA* | 20064 | ANAPLASTIC LYMPH AXILLA |
| 07051 | HPT C ACUTE WO HPAT COMA | 20065 | ANAPLASTIC LYMPH INGUIN |
| 07052 | HPT DLT WO B WO HPT COMA | 20065 | ANAPLASTIC LYMPH INGUIN |
| 07053 | HPT E WO HEPAT COMA | 20066 | ANAPLASTIC LYMPH PELVIC |
| 07054 | CHRN C HPT C WO HPAT COMA | 20066 | ANAPLASTIC LYMPH PELVIC |
| 07059 | OTH VRL HPAT WO HPT COMA | 20067 | ANAPLASTIC LYMPH SPLEEN |
| 0706 | VIRAL HEPAT NOS W COMA | 20067 | ANAPLASTIC LYMPH SPLEEN |
| 07070 | HPT C W/O HEPAT COMA NOS | 20068 | ANAPLASTIC LYMPH MULTIP |
| 07071 | HPT C W HEPATIC COMA NOS | 20068 | ANAPLASTIC LYMPH MULTIP |
| 0709 | VIRAL HEPAT NOS W/O COMA | 20070 | LARGE CELL LYMPH XTRNDL |
| 20030 | MARGNL ZONE LYM XTRNDL | 20070 | LARGE CELL LYMPH XTRNDL |
| 20030 | MARGNL ZONE LYM XTRNDL | 20071 | LARGE CELL LYMPHOMA HEAD |
| 20031 | MARGIN ZONE LYM HEAD | 20071 | LARGE CELL LYMPHOMA HEAD |
| 20031 | MARGIN ZONE LYM HEAD | 20072 | LARGE CELL LYMPH THORAX |
| 20032 | MARGIN ZONE LYM THORAX | 20072 | LARGE CELL LYMPH THORAX |
| 20032 | MARGIN ZONE LYM THORAX | 20073 | LARGE CELL LYMPH ABDOM |
| 20033 | MARGIN ZONE LYM ABDOM | 20073 | LARGE CELL LYMPH ABDOM |
| 20033 | MARGIN ZONE LYM ABDOM | 20074 | LARGE CELL LYMPH AXILLA |
| 20034 | MARGIN ZONE LYM AXILLA | 20074 | LARGE CELL LYMPH AXILLA |
| 20034 | MARGIN ZONE LYM AXILLA | 20075 | LARGE CELL LYMPH INGUIN |
| 20035 | MARGIN ZONE LYM INGUIN | 20075 | LARGE CELL LYMPH INGUIN |
| 20035 | MARGIN ZONE LYM INGUIN | 20076 | LARGE CELL LYMPH PELVIC |
| 20036 | MARGIN ZONE LYM PELVIC | 20077 | LARGE CELL LYMPH SPLEEN |
| 20037 | MARGIN ZONE LYMPH SPLEEN | 20078 | LARGE CELL LYMPH MULTIP |
| 20038 | MARGIN ZONE LYMPH MULTIP | 20270 | PERIPH T CELL LYM XTRNDL |
| 20040 | MANTLE CELL LYM XTRNDL | 20271 | PERIPH T CELL LYMPH HEAD |
| 20041 | MANTLE CELL LYMPH HEAD | 20272 | PERIPH T CELL LYM THORAX |
| 20042 | MANTLE CELL LYMPH THORAX | 20273 | PERIPH T CELL LYM ABDOM |
| 20043 | MANTLE CELL LYMPH ABDOM | 20274 | PERIPH T CELL LYM AXILLA |
| 20044 | MANTLE CELL LYMPH AXILLA | 20275 | PERIPH T CELL LYM INGUIN |
| 20045 | MANTLE CELL LYMPH INGUIN | 20276 | PERIPH T CELL LYM PELVIC |
| 20046 | MANTLE CELL LYMPH PELVIC | 20277 | PERIPH T CELL LYM SPLEEN |
| 20047 | MANTLE CELL LYMPH SPLEEN | 20278 | PERIPH T CELL LYM MULTIP |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| | | | |
|-------|---------------------------|-------|---------------------------|
| 20312 | PLSM CEL LEUK IN RELAPSE | 32730 | CIRCADIAN RHYM SLEEP NOS |
| 20402 | ACT LYMP LEUK IN RELAPSE | 32731 | CIRCADIAN RHY-DELAY SLP |
| 20412 | CHR LYMP LEUK IN RELAPSE | 32732 | CIRCADIAN RHY-ADVC SLEEP |
| 20422 | SBAC LYM LEUK IN RELAPSE | 32733 | CIRCADIAN RHYM-IRREG SLP |
| 20482 | OTH LYM LEUK IN RELAPSE | 32734 | CIRCADIAN RHYM-FREE RUN |
| 20482 | OTH LYM LEUK IN RELAPSE | 32735 | CIRCADIAN RHYTHM-JETLAG |
| 20492 | LYMP LEUK NOS RELAPSE | 32736 | CIRCADIAN RHY-SHIFT WORK |
| 20502 | ACT MYEL LEUK IN RELAPSE | 32737 | CIRCADIAN RHYM OTH DIS |
| 20512 | CHR MYEL LEUK IN RELAPSE | 32739 | CIRCADIAN RHYM SLEEP NEC |
| 20522 | SBAC MYL LEUK IN RELAPSE | 32753 | SLEEP RELATED BRUXISM |
| 20532 | MYEL SARCOMA IN RELAPSE | 3315 | NORML PRESSURE HYDROCEPH |
| 20582 | OTH MYEL LEUK IN RELAPSE | 33183 | MILD COGNITIVE IMPAIREMT |
| 20592 | MYEL LEUK NOS IN RELAPSE | 33700 | IDIO PERPH AUTO NEUR NOS |
| 20602 | ACT MONO LEUK IN RELAPSE | 33701 | CAROTID SINUS SYNDROME |
| 20612 | CHR MONO LEUK IN RELAPSE | 33709 | IDIO PERPH AUTO NEUR NEC |
| 20622 | SBAC MONO LEU IN RELAPSE | 34881 | TEMPORAL SCLEROSIS |
| 20682 | OTH MONO LEUK IN RELAPSE | 34889 | BRAIN CONDITIONS NEC |
| 20692 | MONO LEUK NOS RELAPSE | 34939 | DURAL TEAR NEC |
| 20702 | AC ERTH/ERYLK IN RELAPSE | 35921 | MYOTONIC MUSCLR DYSTRPHY |
| 20712 | CHR ERYTHRMIA IN RELAPSE | 35922 | MYOTONIA CONGENITA |
| 20722 | MGKRYCYT LEUK IN RELAPSE | 35923 | MYOTONIC CHONDRODYSTRPHY |
| 20782 | OTH SPF LEUK IN RELAPSE | 35924 | DRUG INDUCED MYOTONIA |
| 20802 | AC LEUK UNS CL RELAPSE | 35929 | MYOTONIC DISORDER NEC |
| 20812 | CH LEU UNS CL IN RELAPSE | 35971 | INCLUSION BODY MYOSITIS |
| 20822 | SBAC LEU UNS CL-RELAPSE | 35979 | INFLM/IMMUNE MYOPATH NEC |
| 20882 | OTH LEUK UNS CL-RELAPSE | 4041 | BEN HYPERT HRT/RENAL DIS* |
| 20892 | LEUKEMIA NOS IN RELAPSE | 41512 | SEPTIC PULMONARY EMBOLSM |
| 20922 | MALIG CARCINOID THYMUS | 4162 | CHR PULMONARY EMBOLISM |
| 20924 | MALIG CARCINOID KIDNEY | 42682 | LONG QT SYNDROME |
| 20924 | MALIG CARCINOID KIDNEY | 51181 | MALIGNANT PLEURAL EFFUSN |
| 20925 | MAL CARCNOID FOREGUT NOS | 53013 | EOSINOPHILIC ESOPHAGITIS |
| 20926 | MAL CARCINOID MIDGUT NOS | 57142 | AUTOIMMUNE HEPATITIS |
| 20927 | MAL CARCNOID HINDGUT NOS | 72990 | SOFT TISSUE DISORD NOS |
| 20971 | SEC NEUROEND TU DIST LYM | 72991 | POST-TRAUMATIC SEROMA |
| 20972 | SEC NEUROEND TUMOR-LIVER | 72992 | NONTRAUMA HEMA SOFT TISS |
| 20973 | SEC NEUROENDO TUMOR-BONE | 72999 | SOFT TISSUE DISORDER NEC |
| 20974 | SEC NEUROENDO TU-PERITON | 75672 | OMPHALOCELE |
| 25541 | GLUCOCORTICOID DEFICIENT | 75673 | GASTROSCHISIS |
| 25542 | MINERALCORTICOID DEFCNT | 76061 | AMNIOCENTESIS AFFECT NB |
| 25801 | MULT ENDO NEOPLAS TYPE I | 76062 | IN UTERO PROC NEC AFF NB |
| 25950 | ANDROGEN INSENSITVTY NOS | 76063 | MAT SURG DUR PREG AFF NB |
| 25951 | ANDROGEN INSENSITVTY SYN | 76064 | PREV MATERN SURG AFF NB |
| 25952 | PART ANDROGEN INSNSITVTY | 77750 | NEC ENTEROCOLITIS NB NOS |
| 2755 | HUNGRY BONE SYNDROME | 77751 | STG I NEC ENTEROCOL NB |
| 27941 | AUTOIMMUN LYMPHPROF SYND | 77752 | STG II NEC ENTEROCOL NB |
| 27949 | AUTOIMMUNE DISEASE NEC | 77753 | STG III NEC ENTEROCOL NB |
| 2865 | INTR CIRCUL ANTICOAG DIS# | 77931 | NB FEEDING PROBLEMS |
| 2866 | DEFIBRATION SYNDROME | 77932 | NB BILIOUS VOMITING |
| 2867 | ACQ COAGUL FACTOR DEFIC | 77933 | NB OTHER VOMITING |
| 2874 | SECOND THROMBOCYTOPENIA# | 77934 | NB FAILURE TO THRIVE |
| 28866 | BANDEMIA | 78072 | FUNCTIONAL QUADRIPLÉGIA |
| 28982 | SEC HYPERCOAGULABLE ST | 782 | SKIN/OTH INTEGUMENT SYMP* |
| 28984 | HEPARIN-INDU THROMBOCYTO | 78451 | DYSARTHRIA |
| 32702 | INSOMNIA DT MENTAL DISOR | 78459 | SPEECH DISTURBANCE NEC |
| 32715 | HYPERSOM DT MENTAL DISOR | 78951 | MALIGNANT ASCITES |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| | | | |
|-------|--------------------------|-------|--------------------------|
| 78959 | ASCITES NEC | V1053 | HX MALIG RENAL PELVIS |
| 7897 | COLIC | V1053 | HX MALIG RENAL PELVIS |
| 79510 | ABN GLAND PAP SMR VAGINA | V1090 | HX MALIG NEOPLASM NOS |
| 79511 | PAP SMEAR VAG W ASC-US | V1091 | HX MALIG NEUROENDO TUMOR |
| 79512 | PAP SMEAR VAGINA W ASC-H | V1359 | HX MUSCULOSKLETL DIS NEC |
| 79513 | PAP SMEAR VAGINA W LGSIL | V4511 | RENAL DIALYSIS STATUS |
| 79514 | PAP SMEAR VAGINA W HGSIL | V4512 | NONCMLNT W RENAL DIALYS |

Appendix C. Miscellaneous Hemorrhage or Hematoma-related Procedure Codes as of December 2012

| | | | |
|------|--------------------------|------|---------------------------|
| 0121 | CRANIAL SINUS I & D | 2109 | EPISTAXIS CONTROL NEC |
| 0124 | OTHER CRANIOTOMY | 211 | INCISION OF NOSE |
| 0131 | INCISE CEREBRAL MENINGES | 2121 | RHINOSCOPY |
| 0139 | OTHER BRAIN INCISION | 2219 | NASAL SINUS DX PROC NEC |
| 0213 | MENINGE VESSEL LIGATION | 2239 | EXT MAXILLARY ANTROT NEC |
| 0239 | VENT SHUNT EXTRACRAN NEC | 2241 | FRONTAL SINUSOTOMY |
| 0241 | IRRIGATE/EXPL VENT SHUNT | 2251 | ETHMOIDOTOMY |
| 0309 | SPINAL CANAL EXPLOR NEC | 2252 | SPHENOIDOTOMY |
| 0401 | EXCISION ACOUSTC NEUROMA | 260 | INCIS SALIVARY GLND/DUCT |
| 0404 | PERIPH NERVE INCIS NEC | 270 | DRAIN FACE & MOUTH FLOOR |
| 0443 | CARPAL TUNNEL RELEASE | 280 | PERITONSILLAR I & D |
| 0444 | TARSAL TUNNEL RELEASE | 2911 | PHARYNGOSCOPY |
| 0602 | REOPEN THYROID FIELD WND | 313 | INCIS LARYNX TRACHEA NEC |
| 0609 | INCIS THYROID FIELD NEC | 3141 | TRACHEOSCOPY THRU STOMA |
| 0692 | THYROID VESSEL LIGATION | 3142 | LARYGNOSCOPY/TRACHEOSCOPY |
| 0700 | ADRENAL EXPLORATION NOS | 330 | INCISION OF BRONCHUS |
| 0701 | UNILAT ADRENAL EXPLORAT | 331 | INCISION OF LUNG |
| 0702 | BILAT ADRENAL EXPLORAT | 3322 | FIBER-OPTIC BRONCHOSCOPY |
| 0741 | ADRENAL INCISION | 3323 | OTHER BRONCHOSCOPY |
| 0743 | ADRENAL VESSEL LIGATION | 3324 | CLOSED BRONCHIAL BIOPSY |
| 0751 | PINEAL FIELD EXPLORATION | 3402 | EXPLORATORY THORACOTOMY |
| 0752 | PINEAL GLAND INCISION | 3403 | REOPEN THORACOTOMY SITE |
| 0771 | PITUITARY FOSSA EXPLORAT | 3409 | OTHER PLEURAL INCISION |
| 0772 | PITUITARY GLAND INCISION | 341 | INCISION OF MEDIASTINUM |
| 0791 | THYMUS FIELD EXPLORATION | 3421 | TRANSPLEURA THORACOSCOPY |
| 0792 | OTHER INCISION OF THYMUS | 3422 | MEDIASTINOSCOPY |
| 0795 | THORAC INCISION THYMUS | 3582 | TOTAL REPAIR OF TAPVC |
| 0809 | OTHER EYELID INCISION | 3639 | OTH HEART REVASCULAR |
| 090 | LACRIMAL GLAND INCISION | 3699 | HEART VESSEL OP NEC |
| 0953 | LACRIMAL SAC INCISION | 370 | PERICARDIOCENTESIS |
| 1244 | EXCISE CILIARY BODY LES | 3711 | CARDIOTOMY |
| 1289 | SCLERAL OPERATION NEC | 3799 | OTHER HEART/PERICARD OPS |
| 149 | OTHER POST SEGMENT OPS | 3800 | INCISION OF VESSEL NOS |
| 1609 | ORBITOTOMY NEC | 3801 | INTRACRAN VESSEL INCIS |
| 1802 | EXT AUDITORY CANAL INCIS | 3802 | HEAD/NECK VES INCIS NEC |
| 1809 | EXTERNAL EAR INCIS NEC | 3803 | UPPER LIMB VESSEL INCIS |
| 1811 | OTOSCOPY | 3804 | INCISION OF AORTA |
| 2001 | MYRINGOTOMY W INTUBATION | 3805 | THORACIC VESSEL INC NEC |
| 2009 | MYRINGOTOMY NEC | 3806 | ABDOMEN ARTERY INCISION |
| 2021 | MASTOID INCISION | 3807 | ABDOMINAL VEIN INCISION |
| 2022 | PETRUS PYRAM AIR CEL INC | 3808 | LOWER LIMB ARTERY INCIS |
| 2023 | MIDDLE EAR INCISION | 3809 | LOWER LIMB VEIN INCISION |
| 2079 | INC/EXC/DESTR IN EAR NEC | 3850 | VARICOSE V LIG-STRIP NOS |
| 2100 | CONTROL OF EPISTAXIS NOS | 3851 | INTCRAN VAR V LIG-STRIP |
| 2101 | ANT NASAL PACK FOR EPIST | 3852 | HEAD/NECK VAR V LIG-STR |
| 2102 | POST NASAL PAC FOR EPIST | 3853 | ARM VARICOSE V LIG-STRIP |
| 2103 | CAUTERY TO STOP EPISTAX | 3855 | THORAC VAR V LIG-STRIP |
| 2104 | ETHMOID ART LIGAT-EPIST | 3857 | ABD VARICOS V LIGA-STRIP |
| 2105 | MAX ART LIG FOR EPISTAX | 3859 | LEG VARICOS V LIGA-STRIP |
| 2106 | EXT CAROT ART LIG-EPIST | 387 | INTERRUPTION VENA CAVA |
| 2107 | NASAL SEPT GRFT-EPISTAX | 3930 | SUTURE OF VESSEL NOS |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| | | | |
|------|---------------------------|------|--------------------------|
| 3931 | SUTURE OF ARTERY | 5184 | ENDOSC DILATION AMPULLA |
| 3932 | SUTURE OF VEIN | 5188 | ENDOSC REMOVE BILE STONE |
| 3952 | ANEURYSM REPAIR NEC | 5196 | PERC EXTRAC COM DUC CALC |
| 3953 | ARTERIOVEN FISTULA REP | 5198 | OTH PERC PROC BIL TRCT |
| 3972 | ENDOVASC EMBOL HD/NK VES | 5209 | PANCREATOTOMY NEC |
| 3979 | OTH ENDO PROC OTH VESSEL | 5213 | ENDOSC RETRO PANCREATOG |
| 398 | CARTD BODY/SINUS/VASC OP# | 5411 | EXPLORATORY LAPAROTOMY |
| 400 | INCIS LYMPHATIC STRUCTUR | 5419 | LAPAROTOMY NEC |
| 412 | SPLENOTOMY | 5421 | LAPAROSCOPY |
| 4209 | ESOPHAGEAL INCISION NEC | 5495 | PERITONEAL INCISION |
| 4221 | ESOPHAGOSCOPY BY INCIS | 5501 | NEPHROTOMY |
| 4222 | ESOPHAGOSCOPY THRU STOMA | 5511 | PYELOTOMY |
| 4223 | ESOPHAGOSCOPY NEC | 5521 | NEPHROSCOPY |
| 4233 | ENDOSC DESTRUC ESOPH LES | 5522 | PYELOSCOPY |
| 4239 | DESTRUCT ESOPHAG LES NEC | 562 | URETEROTOMY |
| 4291 | LIGATION ESOPH VARIX | 5631 | URETEROSCOPY |
| 430 | GASTROTOMY | 5719 | CYSTOTOMY NEC |
| 4341 | ENDOSC DESTR STOMACH LES | 5731 | CYSTOSCOPY THRU STOMA |
| 4411 | TRANSABDOMIN GASTROSCOPY | 5732 | CYSTOSCOPY NEC |
| 4412 | GASTROSCOPY THRU STOMA | 580 | URETHROTOMY |
| 4413 | GASTROSCOPY NEC | 5822 | URETHROSCOPY NEC |
| 4440 | SUTURE PEPTIC ULCER NOS | 5909 | PERIREN/URETER INCIS NEC |
| 4441 | SUT GASTRIC ULCER SITE | 600 | INCISION OF PROSTATE |
| 4442 | SUTURE DUODEN ULCER SITE | 6081 | PERIPROSTATIC INCISION |
| 4443 | ENDOSC CONTROL GAST HEM | 620 | INCISION OF TESTES |
| 4444 | TRANSCATH EMBO GAST HEM | 631 | EXC SPERMATIC VARICOCELE |
| 4449 | OTHER CONTROL GAST HEM | 636 | VASOTOMY |
| 4491 | LIGATE GASTRIC VARICES | 6372 | SPERMATIC CORD LIGATION |
| 4500 | INTESTINAL INCISION NOS | 6392 | EPIDIDYMYOTOMY |
| 4501 | DUODENAL INCISION | 6393 | SPERMATIC CORD INCISION |
| 4502 | SMALL BOWEL INCISION NEC | 6492 | INCISION OF PENIS |
| 4503 | LARGE BOWEL INCISION | 6501 | LAPAROSCOPIC OOPHOROTOMY |
| 4511 | TRANSAB SM BOWEL ENDOSC | 6509 | OTHER OOPHOROTOMY |
| 4512 | ENDOSC SM BOWEL THRU ST | 6601 | SALPINGOTOMY |
| 4513 | SM BOWEL ENDOSCOPY NEC | 680 | HYSTEROTOMY |
| 4516 | EGD WITH CLOSED BIOPSY | 6811 | DIGITAL EXAM OF UTERUS |
| 4521 | TRANSAB LG BOWEL ENDOSC | 6812 | HYSTEROSCOPY |
| 4522 | ENDOSC LG BOWEL THRU ST | 6995 | INCISION OF CERVIX |
| 4523 | COLONOSCOPY | 700 | CULDOCENTESIS |
| 4524 | FLEXIBLE SIGMOIDOSCOPY | 7012 | CULDOTOMY |
| 4543 | ENDOSC DESTRU LG INT LES | 7021 | VAGINOSCOPY |
| 4549 | DESTRUC LG BOWEL LES NEC | 7022 | CULDOSCOPY |
| 480 | PROCTOTOMY | 757 | MANUAL EXPLOR UTERUS P/P |
| 4822 | PROCTOSIGMOIDOSC THRU ST | 7710 | OTHER BONE INCISION NOS |
| 4823 | RIGID PROCTOSIGMOIDOSCPY | 8010 | OTHER ARTHROTOMY NOS |
| 4921 | ANOSCOPY | 8201 | EXPLOR TEND SHEATH-HAND |
| 4945 | HEMORRHOID LIGATION | 8202 | MYOTOMY OF HAND |
| 500 | HEPATOTOMY | 8203 | BURSOTOMY OF HAND |
| 5110 | ENDOSC RETRO CHOLANGIOPA | 8204 | I & D PALMAR/THENAR SPAC |
| 5111 | ENDOSC RETRO CHOLANGIO | 8209 | INC SOFT TISSUE HAND NEC |
| 5141 | CDE FOR CALCULUS REMOV | 8301 | TENDON SHEATH EXPLORAT |
| 5142 | CDE FOR OBSTRUCTION NEC | 8302 | MYOTOMY |
| 5149 | INCIS OBSTR BILE DUC NEC | 8303 | BURSOTOMY |
| 5151 | COMMON DUCT EXPLORATION | 8309 | SOFT TISSUE INCISION NEC |
| 5159 | BILE DUCT INCISION NEC | 850 | MASTOTOMY |

**AHRQ Quality Indicators
Pediatric Quality Indicators (PDI), Log of Coding Updates and Revisions**

| | | | |
|------|--------------------------|------|-------------------------|
| 8603 | INCISION PILONIDAL SINUS | 9925 | INJECT CA CHEMOTHER NEC |
| 8609 | SKIN & SUBQ INCISION NEC | 9929 | INJECT/INFUSE NEC |
| 9621 | DILAT FRONTAL NASAL DUCT | | |