

Pressure Ulcer Rate

Pediatric Quality Indicators #2

Technical Specifications

Provider-Level Indicator

AHRQ Quality Indicators, Version 4.3, August 2011

Numerator

Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM code of pressure ulcer in any secondary diagnosis field and ICD-9-CM code of pressure ulcer stage III or IV (or unstagable) in any secondary diagnosis field.

ICD-9-CM Pressure ulcer diagnosis codes:

7070*	PRESSURE ULCER	70704	PRESSURE ULCER, HIP (OCT04)
70700	PRESSURE ULCER SITE NOS (OCT04)	70705	PRESSURE ULCER, BUTTOCK (OCT04)
70701	PRESSURE ULCER, ELBOW (OCT04)	70706	PRESSURE ULCER, ANKLE (OCT04)
70702	PRESSURE ULCER, UP BACK (OCT04)	70707	PRESSURE ULCER, HEEL (OCT04)
70703	PRESSURE ULCER, LOW BACK (OCT04)	70709	PRESSURE ULCER, SITE NEC (OCT04)

*No longer valid in FY2005

ICD-9-CM Pressure ulcer stage diagnosis codes*:

70723	PRESSURE ULCER, STAGE III	70725	PRESSURE ULCER, UNSTAGEBL
70724	PRESSURE ULCER, STAGE IV		

* Valid for discharges on or after 10/1/2008

Denominator

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

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes
- Appendix B – Surgical Discharge DRGs
- Appendix C – Surgical Discharge MS-DRGs
- Appendix D – Medical Discharge DRGs
- Appendix E – Medical Discharge MS-DRGs

Exclude cases:

- neonates
- with length of stay of less than 5 days
- with preexisting condition of pressure ulcer (see Numerator) (principal diagnosis or secondary diagnosis present on admission)
- in MDC 9 (Skin, Subcutaneous Tissue, and Breast)
- with an ICD-9-CM procedure code for debridement or pedicle graft before or on the same day as the major operating room procedure (surgical cases only)
- with an ICD-9-CM procedure code of debridement or pedicle graft as the only major operating room procedure (surgical cases only)

- Transfer from a hospital (different facility)
- Transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF)
- Transfer from another health care facility
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing discharge gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn
- Appendix J – Admission Codes for Transfers

ICD-9-CM Debridement or pedicle graft procedure codes:

8345	OTHER MYECTOMY	8671	CUT & PREP PEDICLE GRAFT
8622	EXC WOUND DEBRIDEMENT	8672	PEDICLE GRAFT ADVANCEMEN
8628	NONEXCIS DEBRIDEMENT WND	8674	ATTACH PEDICLE GRAFT NEC
8670	PEDICLE GRAFT/FLAP NOS	8675	REVISION OF PEDICLE GRFT

Stratification

PDI 2 stratifies rates by high-risk vs. lower risk groups.

High risk group:

ICD-9-CM Hemiplegia, paraplegia, or quadriplegia diagnosis codes :

33371	ATHETOID CEREBRAL PALSY	3440	QUADRIPLEGIA AND QUADRIPARESIS
3420	FLACCID HEMIPLEGIA	34400	QUADRIPLEGIA, UNSPECIFD
34200	FLCCD HMIPLGA UNSPF SIDE	34401	QUADRPLG C1-C4, COMPLETE
34201	FLCCD HMIPLGA DOMNT SIDE	34402	QUADRPLG C1-C4, INCOMPLT
34202	FLCCD HMIPLG NONDMNT SDE	34403	QUADRPLG C5-C7, COMPLETE
3421	SPASTIC HEMIPLEGIA	34404	QUADRPLG C5-C7, INCOMPLT
34210	SPSTC HMIPLGA UNSPF SIDE	34409	OTHER QUADRIPLEGIA
34211	SPSTC HMIPLGA DOMNT SIDE	3441	PARAPLEGIA
34212	SPSTC HMIPLG NONDMNT SDE	3442	DIPLEGIA OF UPPER LIMBS
34280	OT SP HMIPLGA UNSPF SIDE	3443	MONOPLGIA OF LOWER LIMB
34281	OT SP HMIPLGA DOMNT SIDE	34430	MONPLGA LWR LMB UNSP SDE
34282	OT SP HMIPLG NONDMNT SDE	34431	MONPLGA LWR LMB DMNT SDE
3429	HEMIPLEGIA, UNSPECIFIED	34432	MNPLG LWR LMB NONDMNT SD
34290	UNSP HEMIPLGA UNSPF SIDE	3444	MONOPLGIA OF UPPER LIMB
34291	UNSP HEMIPLGA DOMNT SIDE	34440	MONPLGA UPR LMB UNSP SDE
34292	UNSP HMIPLGA NONDMNT SDE	34441	MONPLGA UPR LMB DMNT SDE
3430	INFANTILE CEREBRAL PALSY, DIPLEGIC	34442	MNPLG UPR LMB NONDMNT SD
3431	INFANTILE CEREBRAL PALSY, HEMIPLEGIC	3445	UNSPECIFIED MONOPLGIA
3432	INFANTILE CEREBRAL PALSY, QUADRIPLEGIC	3446	CAUDA EQUINA SYNDROME
3433	INFANTILE CEREBRAL PALSY, MONOPLGIC	34460	CAUDA EQUINA SYNDROME, WITHOUT MENTION OF NEUROGENIC BLADDER
3434	INFANTILE CEREBRAL PALSY	34461	CAUDA EQUINA SYNDROME, WITH NEUROGENIC BLADDER
3438	INFANTILE CEREBRAL PALSY OTHER SPECIFIED INFANTILE CEREBRAL PALSY	3448	OTHER SPECIFIED PARALYTIC SYNDROMES
3439	INFANTILE CEREBRAL PALSY, INFANTILE CEREBRAL PALSY, UNSPECIFIED	34481	LOCKED-IN STATE
		34489	OTH SPCF PARALYTIC SYND
		3449	PARALYSIS, UNSPECIFIED
		43820	LATE EF-HEMPLGA SIDE NOS
		43821	LATE EF-HEMPLGA DOM SIDE
		43822	LATE EF-HEMIPLGA NON-DOM
		43830	LATE EF-MPLGA UP LMB NOS

**AHRQ QI, Pediatric Quality Indicators #2, Technical Specifications,
Pressure Ulcer Rate
www.qualityindicators.ahrq.gov**

43831	LATE EF-MPLGA UP LMB DOM	7687	HYPOXIC-ISCHEMIC ENCEPH
43832	LT EF-MPLGA UPLMB NONDOM	76870	HYPOXIC-ISCHEMIC ENCEPHALOPATHY, UNSPECIFIED (OCT09)
43840	LTE EF-MPLGA LOW LMB NOS		
43841	LTE EF-MPLGA LOW LMB DOM		
43842	LT EF-MPLGA LOWLMB NONDM	76872	MODERATE HYPOXIC-ISCHEMIC ENCEPHALOPATHY (OCT09)
43850	LT EF OTH PARAL SIDE NOS		
43851	LT EF OTH PARAL DOM SIDE	76873	SEVERE HYPOXIC-ISCHEMIC ENCEPHALOPATHY (OCT09)
43852	LT EF OTH PARALS NON-DOM		
43853	LT EF OTH PARALS-BILAT		

ICD-9-CM Spina bifida diagnosis codes:

74100	SPINA BIFIDA, W HYDROCEPHALUS UNSPECIFIED REGION	74191	SPINA BIFIDA, W/O HYDROCEPHALUS CERVICAL REGION
74101	SPINA BIFIDA, W HYDROCEPHALUS CERVICAL REGION	74192	SPINA BIFIDA, W/O HYDROCEPHALUS DORSAL REGION
74102	SPINA BIFIDA, W HYDROCEPHALUS DORSAL REGION	74193	SPINA BIFIDA, W/O HYDROCEPHALUS LUMBAR REGION
74103	SPINA BIFIDA, W HYDROCEPHALUS LUMBAR REGION	7687	HYPOXIC-ISCHEMIC ENCEPH
74190	SPINA BIFIDA, W/O HYDROCEPHALUS UNSPECIFIED REGION		

ICD-9-CM Anoxic brain damage diagnosis codes:

3481	ANOXIC BRAIN DAMAGE	7685	SEVERE BIRTH ASPHYXIA
------	---------------------	------	-----------------------

ICD-9-CM Continuous mechanical ventilation procedure code:

9672	ADD CONTINUOUS MECHANICAL VENTILATION >=96 HRS
------	---

Low risk group:

All patients not qualifying as high risk.