

Postoperative Sepsis Rate Technical Specifications

Pediatric Quality Indicators #10 (PDI #10)

AHRQ Quality Indicators™, Version 5.0

March 2015

Provider-Level Indicator

Type of Score: Rate

Description

Postoperative sepsis cases (secondary diagnosis) per 1,000 surgery discharges for patients ages 17 years and younger. Includes metrics for discharges grouped by risk category. Excludes cases with a principal diagnosis of sepsis, cases with a secondary diagnosis of sepsis present on admission, cases with a principal diagnosis of infection, cases in which the procedure belongs to surgical class 4, neonates, obstetric discharges, and cases with stays less than four (4) days.

[NOTE: The software provides the rate per hospital discharge. However, common practice reports the measure as per 1,000 discharges. The user must multiply the rate obtained from the software by 1,000 to report events per 1,000 hospital discharges.]

[NOTE: To obtain stratified results, the user must run the PDSASG2.SAS program in the SAS QI Software Version 5.0 or choose to stratify by risk category in the Windows QI Software Version 4.5]

Numerator

Overall:

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for sepsis.

ICD-9-CM Sepsis diagnosis codes:

0380	STREPTOCOCCAL SEPTICEMIA	03844	SERRATIA
0381	STAPHYLOCOCCAL SEPTICEMIA	03849	SEPTICEMIA DUE TO OTHER GRAM-NEGATIVE ORGANISMS
03810	STAPHYLOCOCCAL SEPTICEMIA, UNSPECIFIED	0388	OTHER SPECIFIED SEPTICEMIAS
03811	METH SUSC STAPH AUR SEPT	0389	UNSPECIFIED SEPTICEMIA
03812	MRSA SEPTICEMIA	78552	SEPTIC SHOCK
03819	OTHER STAPHYLOCOCCAL SEPTICEMIA	78559	SHOCK W/O TRAUMA NEC (before Oct. 1, 2004 only)
0382	PNEUMOCOCCAL SEPTICEMIA (STREPTOCOCCUS PNEUMONIAE SEPTICEMIA)	99591	SYSTEMIC INFLAMMATORY RESPONSE SYNDROME DUE TO INFECTIOUS PROCESS WITHOUT ORGAN DYSFUNCTION
0383	SEPTICEMIA DUE TO ANAEROBES	99592	SYSTEMIC INFLAMMATORY RESPONSE

03840	GRAM-NEGATIVE ORGANISM, UNSPECIFIED	9980	SYNDROME DUE TO INFECTIOUS PROCESS WITH ORGAN DYSFUNCTION POSTOPERATIVE SHOCK
03841	HEMOPHILUS INFLUENZAE	99800	POSTOPERATIVE SHOCK, UNSPECIFIED (before Oct. 1, 2004 only)
03842	ESCHERICHIA COLI	99802	SHOCK FOLLOWING TRAUMA OR SURGERY, SEPTIC
03843	PSEUDOMONAS		

Risk Category 1:

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for sepsis (see above).

Risk Category 2:

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for sepsis (see above).

Risk Category 3:

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for sepsis (see above).

Risk Category 4:

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for sepsis (see above).

Risk Category 9:

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for sepsis (see above).

Denominator

Overall:

Surgical discharges, for patients ages 17 years and younger, with any-listed ICD-9-CM procedure codes for an operating room procedure. Surgical discharges are defined by specific DRG or MS-DRG codes.

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes
- Appendix B – Surgical DRGs

- Appendix C – Surgical MS-DRGs

Exclude cases:

- with a principal ICD-9-CM diagnosis code (or secondary diagnosis present on admission) for sepsis (see above)
- with a principal ICD-9-CM diagnosis code for infection
- with DRG or MS-DRG code for surgical class 4
- with length of stay of less than four (4) days
- neonates
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn

DRG codes for surgical class 4:

164	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W CC	578	INFECTIOUS & PARASITIC DISEASES W OR PROCEDURE
165	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W/O CC	579	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W OR PROCEDURE
415	OR PROCEDURE FOR INFECTIOUS AND PARASITIC DISEASES		

MS-DRG codes for surgical class 4:

338	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W MCC	855	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W/O CC/MCC
339	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W CC	856	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W MCC
340	APPENDECTOMY W COMPLICATED PRINCIPAL DIAG W/O CC/MCC	857	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W CC
853	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W MCC	858	POSTOPERATIVE OR POST-TRAUMATIC INFECTIONS W O.R. PROC W/O CC/MCC
854	INFECTIOUS & PARASITIC DISEASES W O.R. PROCEDURE W CC		

Risk Category 1:

Elective surgical class 1 discharges, for patients ages 17 years and younger, with any-listed ICD-9-CM procedure codes for an operating room procedure. Elective surgical class 1 discharges are defined by specific DRG or MS-DRG codes with admission type recorded as elective (SID ATYPE=3).

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes

DRG codes for surgical class 1:

003	CRANIOTOMY AGE 0-17	007	PERIPH & CRANIAL NERVE & OTHER NERV SYST PROC W CC
006	CARPAL TUNNEL RELEASE		

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008	PERIPH & CRANIAL NERVE & OTHER NERV SYST PROC W/O CC	213	AMPUTATION FOR MUSCULOSKELETAL SYSTEM & CONN TISSUE DISORDERS
036	RETINAL PROCEDURES		
037	ORBITAL PROCEDURES	216	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE
038	PRIMARY IRIS PROCEDURES		
039	LENS PROCEDURES WITH OR WITHOUT VITRECTOMY	217	WND DEBRID & SKN GRFT EXCEPT HAND, FOR MUSCSKELET & CONN TISS DIS
041	EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 0-17	220	LOWER EXTREM & HUMER PROC EXCEPT HIP, FOOT, FEMUR AGE 0-17
042	INTRAOCULAR PROCEDURES EXCEPT RETINA, IRIS & LENS	223	MAJOR SHOULDER/ELBOW PROC, OR OTHER UPPER EXTREMITY PROC W CC
049	MAJOR HEAD & NECK PROCEDURES		
050	SIALOADENECTOMY		
051	SALIVARY GLAND PROCEDURES EXCEPT SIALOADENECTOMY	224	SHOULDER, ELBOW OR FOREARM PROC, EXC MAJOR JOINT PROC, W/O CC
052	CLEFT LIP & PALATE REPAIR		
054	SINUS & MASTOID PROCEDURES AGE 0-17	225	FOOT PROCEDURES
		226	SOFT TISSUE PROCEDURES W CC
055	MISCELLANEOUS EAR, NOSE, MOUTH & THROAT PROCEDURES	227	SOFT TISSUE PROCEDURES W/O CC
		228	MAJOR THUMB OR JOINT PROC, OR OTH HAND OR WRIST PROC W CC
056	RHINOPLASTY		
058	T&A PROC, EXCEPT TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE 0-17	229	HAND OR WRIST PROC, EXCEPT MAJOR JOINT PROC, W/O CC
		230	LOCAL EXCISION & REMOVAL OF INT FIX DEVICES OF HIP & FEMUR
060	TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE 0-17	232	ARTHROSCOPY
062	MYRINGOTOMY W TUBE INSERTION AGE 0-17	233	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W CC
063	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES	234	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W/O CC
103	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM	257	TOTAL MASTECTOMY FOR MALIGNANCY W CC
104	CARDIAC VALVE & OTH MAJOR CARDIOTHORACIC PROC W CARD CATH	258	TOTAL MASTECTOMY FOR MALIGNANCY W/O CC
		259	SUBTOTAL MASTECTOMY FOR MALIGNANCY W CC
105	CARDIAC VALVE & OTH MAJOR CARDIOTHORACIC PROC W/O CARD CATH	260	SUBTOTAL MASTECTOMY FOR MALIGNANCY W/O CC
106	CORONARY BYPASS W PTCA	261	BREAST PROC FOR NON- MALIGNANCY EXCEPT BIOPSY & LOCAL EXCISION
108	OTHER CARDIOTHORACIC PROCEDURES		
110	MAJOR CARDIOVASCULAR PROCEDURES W CC	262	BREAST BIOPSY & LOCAL EXCISION FOR NON-MALIGNANCY
111	MAJOR CARDIOVASCULAR PROCEDURES W/O CC	285	AMPUTAT OF LOWER LIMB FOR ENDOCRINE, NUTRIT, & METABOL DISORDERS
113	AMPUTATION FOR CIRC SYSTEM DISORDERS EXCEPT UPPER LIMB & TOE	286	ADRENAL & PITUITARY PROCEDURES
114	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS	287	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DISORDERS
117	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT	289	PARATHYROID PROCEDURES
118	CARDIAC PACEMAKER DEVICE REPLACEMENT	290	THYROID PROCEDURES
		291	THYROGLOSSAL PROCEDURES
119	VEIN LIGATION & STRIPPING	292	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W CC
120	OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	293	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W/O CC
163	HERNIA PROCEDURES AGE 0-17		
168	MOUTH PROCEDURES W CC	338	TESTES PROCEDURES, FOR MALIGNANCY
169	MOUTH PROCEDURES W/O CC		
212	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 0-17	340	TESTES PROCEDURES, NON- MALIGNANCY AGE 0-17

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393	SPLENECTOMY AGE 0-17	536	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK
394	OTHER O.R. PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS	537	LOCAL EXCIS & REMOV OF INT FIX DEV EXCEPT HIP & FEMUR W CC
471	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY	538	LOCAL EXCIS & REMOV OF INT FIX DEV EXCEPT HIP & FEMUR W/O CC
479	OTHER VASCULAR PROCEDURES W/O CC	543	CRANIOTOMY W MAJOR DEVICE IMPLANT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS
481	BONE MARROW TRANSPLANT	544	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY
491	MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITY	545	REVISION OF HIP OR KNEE REPLACEMENT
496	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION	546	SPINAL FUSION EXC CERV WITH CURVATURE OF THE SPINE OR MALIG
497	SPINAL FUSION EXCEPT CERVICAL W CC	547	CORONARY BYPASS W CARDIAC CATH W MAJOR CV DX
498	SPINAL FUSION EXCEPT CERVICAL W/O CC	548	CORONARY BYPASS W CARDIAC CATH W/O MAJOR CV DX
499	BACK & NECK PROCEDURES EXCEPT SPINAL FUSION W CC	549	CORONARY BYPASS W/O CARDIAC CATH W MAJOR CV DX
500	BACK & NECK PROCEDURES EXCEPT SPINAL FUSION W/O CC	550	CORONARY BYPASS W/O CARDIAC CATH W/O MAJOR CV DX
501	KNEE PROCEDURES W PDX OF INFECTION W CC	551	PERMANENT CARDIAC PACEMAKER IMPL W MAJ CV DX OR AICD LEAD OR GNRTR
502	KNEE PROCEDURES W PDX OF INFECTION W/O CC	552	OTHER PERMANENT CARDIAC PACEMAKER IMPLANT W/O MAJOR CV DX
503	KNEE PROCEDURES W/O PDX OF INFECTION	553	OTHER VASCULAR PROCEDURES W CC W MAJOR CV DX
515	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH	554	OTHER VASCULAR PROCEDURES W CC W/O MAJOR CV DX
518	PERC CARDIO PROC W/O CORONARY ARTERY STENT OR AMI	555	PERCUTANEOUS CARDIOVASCULAR PROC W MAJOR CV DX
519	CERVICAL SPINAL FUSION W CC	556	PERCUTANEOUS CARDIOVASC PROC W NON-DRUG-ELUTING STENT W/O MAJ CV DX
520	CERVICAL SPINAL FUSION W/O CC	557	PERCUTANEOUS CARDIOVASCULAR PROC W DRUG-ELUTING STENT W MAJOR CV DX
525	OTHER HEART ASSIST SYSTEM IMPLANT	558	PERCUTANEOUS CARDIOVASCULAR PROC W DRUG-ELUTING STENT W/O MAJ CV DX
528	INTRACRANIAL VASCULAR PROC W PDX HEMORRHAGE	577	CAROTID ARTERY STENT PROCEDURE
529	VENTRICULAR SHUNT PROCEDURES W CC		
530	VENTRICULAR SHUNT PROCEDURES W/O CC		
531	SPINAL PROCEDURES W CC		
532	SPINAL PROCEDURES W/O CC		
533	EXTRACRANIAL PROCEDURES W CC		
534	EXTRACRANIAL PROCEDURES W/O CC		
535	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK		

MS-DRG codes for surgical class 1

001	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W MCC	017	AUTOLOGOUS BONE MARROW TRANSPLANT W/O CC/MCC
002	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM W/O MCC	020	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W MCC
009	<i>BONE MARROW TRANSPLANT</i>	021	INTRACRANIAL VASCULAR PROCEDURES W PDX HEMORRHAGE W CC
014	ALLOGENIC BONE MARROW TRANSPLANT	022	INTRACRANIAL VASCULAR
016	AUTOLOGOUS BONE MARROW TRANSPLANT W CC/MCC		

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	PROCEDURES W PDX HEMORRHAGE W/O CC/MCC	215	OTHER HEART ASSIST SYSTEM IMPLANT
023	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W MCC OR CHEMO IMPLANT	216	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W MCC
024	CRANIO W MAJOR DEV IMPL/ACUTE COMPLEX CNS PDX W/O MCC	217	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W CC
027	CRANIOTOMY & ENDOVASCULAR INTRACRANIAL PROCEDURES W/O CC/MCC	218	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W CARD CATH W/O CC/MCC
028	SPINAL PROCEDURES W MCC	219	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W MCC
029	SPINAL PROCEDURES W CC OR SPINAL NEUROSTIMULATORS	220	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W CC
030	SPINAL PROCEDURES W/O CC/MCC	221	CARDIAC VALVE & OTH MAJ CARDIOTHORACIC PROC W/O CARD CATH W/O CC/MCC
031	VENTRICULAR SHUNT PROCEDURES W MCC	222	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK W MCC
032	VENTRICULAR SHUNT PROCEDURES W CC	223	CARDIAC DEFIB IMPLANT W CARDIAC CATH W AMI/HF/SHOCK W/O MCC
033	VENTRICULAR SHUNT PROCEDURES W/O CC/MCC	224	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK W MCC
034	CAROTID ARTERY STENT PROCEDURE W MCC	225	CARDIAC DEFIB IMPLANT W CARDIAC CATH W/O AMI/HF/SHOCK W/O MCC
035	CAROTID ARTERY STENT PROCEDURE W CC	226	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH W MCC
036	CAROTID ARTERY STENT PROCEDURE W/O CC/MCC	227	CARDIAC DEFIBRILLATOR IMPLANT W/O CARDIAC CATH W/O MCC
037	EXTRACRANIAL PROCEDURES W MCC	228	OTHER CARDIOTHORACIC PROCEDURES W MCC
038	EXTRACRANIAL PROCEDURES W CC	229	OTHER CARDIOTHORACIC PROCEDURES W CC
039	EXTRACRANIAL PROCEDURES W/O CC/MCC	230	OTHER CARDIOTHORACIC PROCEDURES W/O CC/MCC
040	PERIPH & CRANIAL NERVE & OTHER NERV SYST PROC W MCC	231	CORONARY BYPASS W PTCA W MCC
041	PERIPH/CRANIAL NERVE & OTHER NERV SYST PROC W CC OR PERIPH NEUROSTIM	232	CORONARY BYPASS W PTCA W/O MCC
042	PERIPH & CRANIAL NERVE & OTHER NERV SYST PROC W/O CC/MCC	233	CORONARY BYPASS W CARDIAC CATH W MCC
113	ORBITAL PROCEDURES W CC/MCC	234	CORONARY BYPASS W CARDIAC CATH W/O MCC
114	ORBITAL PROCEDURES W/O CC/MCC	235	CORONARY BYPASS W/O CARDIAC CATH W MCC
115	EXTRAOCULAR PROCEDURES EXCEPT ORBIT	236	CORONARY BYPASS W/O CARDIAC CATH W/O MCC
116	INTRAOCULAR PROCEDURES W CC/MCC	237	MAJOR CARDIOVASC PROCEDURES W MCC
117	INTRAOCULAR PROCEDURES W/O CC/MCC	238	MAJOR CARDIOVASCULAR PROCEDURES W/O MCC
129	MAJOR HEAD & NECK PROCEDURES W CC/MCC OR MAJOR DEVICE	239	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W MCC
130	MAJOR HEAD & NECK PROCEDURES W/O CC/MCC	240	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W CC
131	CRANIAL/FACIAL PROCEDURES W CC/MCC	241	AMPUTATION FOR CIRC SYS DISORDERS EXC UPPER LIMB & TOE W/O CC/MCC
132	CRANIAL/FACIAL PROCEDURES W/O CC/MCC		
133	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES W CC/MCC		
134	OTHER EAR, NOSE, MOUTH & THROAT O.R. PROCEDURES W/O CC/MCC		
136	SINUS & MASTOID PROCEDURES W/O CC/MCC		
137	MOUTH PROCEDURES W CC/MCC		
138	MOUTH PROCEDURES W/O CC/MCC		
139	SALIVARY GLAND PROCEDURES		

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242	PERMANENT CARDIAC PACEMAKER IMPLANT W MCC	456	SPINAL FUSION W/O CC/MCC
243	PERMANENT CARDIAC PACEMAKER IMPLANT W CC	457	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFECTION OR 9+ FUS W MCC
244	PERMANENT CARDIAC PACEMAKER IMPLANT W/O CC/MCC	458	SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFECTION OR 9+ FUS W CC
245	AICD GENERATOR PROCEDURES		SPINAL FUS EXC CERV W SPINAL CURV/MALIG/INFECTION OR 9+ FUS W/O CC/MCC
246	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W MCC OR 4+ VESSELS/STENTS	459	SPINAL FUSION EXCEPT CERVICAL W MCC
247	PERC CARDIOVASC PROC W DRUG-ELUTING STENT W/O MCC	460	SPINAL FUSION EXCEPT CERVICAL W/O MCC
248	PERC CARDIOVASC PROC W NON-DRUG-ELUTING STENT W MCC OR 4+ VES/STENTS	461	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W MCC
249	PERC CARDIOVASC PROC W NON-DRUG-ELUTING STENT W/O MCC	462	BILATERAL OR MULTIPLE MAJOR JOINT PROCS OF LOWER EXTREMITY W/O MCC
250	PERC CARDIOVASC PROC W/O CORONARY ARTERY STENT OR AMI W MCC	463	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W MCC
251	PERC CARDIOVASC PROC W/O CORONARY ARTERY STENT OR AMI W/O MCC	464	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W CC
252	OTHER VASCULAR PROCEDURES W MCC	465	WND DEBRID & SKN GRFT EXC HAND, FOR MUSCULO-CONN TISS DIS W/O CC/MCC
253	OTHER VASCULAR PROCEDURES W CC	466	REVISION OF HIP OR KNEE REPLACEMENT W MCC
254	OTHER VASCULAR PROCEDURES W/O CC/MCC	467	REVISION OF HIP OR KNEE REPLACEMENT W CC
255	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W MCC	468	REVISION OF HIP OR KNEE REPLACEMENT W/O CC/MCC
256	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W CC	469	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W MCC
257	UPPER LIMB & TOE AMPUTATION FOR CIRC SYSTEM DISORDERS W/O CC/MCC	470	MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY W/O MCC
258	CARDIAC PACEMAKER DEVICE REPLACEMENT W MCC	471	CERVICAL SPINAL FUSION W MCC
259	CARDIAC PACEMAKER DEVICE REPLACEMENT W/O MCC	472	CERVICAL SPINAL FUSION W CC
260	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W MCC	473	CERVICAL SPINAL FUSION W/O CC/MCC
261	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W CC	474	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W MCC
262	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT W/O CC/MCC	475	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W CC
263	VEIN LIGATION & STRIPPING	476	AMPUTATION FOR MUSCULOSKELETAL SYS & CONN TISSUE DIS W/O CC/MCC
264	OTHER CIRCULATORY SYSTEM O.R. PROCEDURES	477	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W MCC
266	ENDOVASC CARDIAC VALVE REPLACEMENT W MCC	478	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W CC
267	ENDOVASC CARDIAC VALVE REPLACEMENT W/O MCC	479	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE W/O CC/MCC
352	INGUINAL & FEMORAL HERNIA PROCEDURES W/O CC/MCC	482	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT W/O CC/MCC
453	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W MCC	483	MAJOR JOINT & LIMB REATTACHMENT PROC OF UPPER EXTREMITY W
454	COMBINED ANTERIOR/POSTERIOR SPINAL FUSION W CC		
455	COMBINED ANTERIOR/POSTERIOR		

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484	CC/MCC MAJOR JOINT & LIMB REATTACHMENT PROC OF UPPER EXTREMITY W/O CC/MCC	515	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W MCC
485	KNEE PROCEDURES W PDX OF INFECTION W MCC	516	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W CC
486	KNEE PROCEDURES W PDX OF INFECTION W CC	517	OTHER MUSCULOSKELET SYS & CONN TISS O.R. PROC W/O CC/MCC
487	KNEE PROCEDURES W PDX OF INFECTION W/O CC/MCC	582	MASTECTOMY FOR MALIGNANCY W CC/MCC
488	KNEE PROCEDURES W/O PDX OF INFECTION W CC/MCC	583	MASTECTOMY FOR MALIGNANCY W/O CC/MCC
489	KNEE PROCEDURES W/O PDX OF INFECTION W/O CC/MCC	584	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W CC/MCC
490	BACK & NECK PROC EXC SPINAL FUSION W CC/MCC OR DISC DEVICE/NEUROSTIM	585	BREAST BIOPSY, LOCAL EXCISION & OTHER BREAST PROCEDURES W/O CC/MCC
491	BACK & NECK PROC EXC SPINAL FUSION W/O CC/MCC	614	ADRENAL & PITUITARY PROCEDURES W CC/MCC
494	LOWER EXTREM & HUMER PROC EXCEPT HIP, FOOT, FEMUR W/O CC/MCC	615	ADRENAL & PITUITARY PROCEDURES W/O CC/MCC
495	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W MCC	616	AMPUTAT OF LOWER LIMB FOR ENDOCRINE, NUTRIT, & METABOL DIS W MCC
496	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W CC	617	AMPUTAT OF LOWER LIMB FOR ENDOCRINE, NUTRIT, & METABOL DIS W CC
497	LOCAL EXCISION & REMOVAL INT FIX DEVICES EXC HIP & FEMUR W/O CC/MCC	618	AMPUTAT OF LOWER LIMB FOR ENDOCRINE, NUTRIT, & METABOL DIS W/O CC/MCC
498	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W CC/MCC	622	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W MCC
499	LOCAL EXCISION & REMOVAL INT FIX DEVICES OF HIP & FEMUR W/O CC/MCC	623	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W CC
500	SOFT TISSUE PROCEDURES W MCC	624	SKIN GRAFTS & WOUND DEBRID FOR ENDOC, NUTRIT & METAB DIS W/O CC/MCC
501	SOFT TISSUE PROCEDURES W CC	625	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W MCC
502	SOFT TISSUE PROCEDURES W/O CC/MCC	626	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W CC
503	FOOT PROCEDURES W MCC	627	THYROID, PARATHYROID & THYROGLOSSAL PROCEDURES W/O CC/MCC
504	FOOT PROCEDURES W CC	628	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W MCC
505	FOOT PROCEDURES W/O CC/MCC	629	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W CC
506	MAJOR THUMB OR JOINT PROCEDURES	630	OTHER ENDOCRINE, NUTRIT & METAB O.R. PROC W/O CC/MCC
507	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W CC/MCC	711	TESTES PROCEDURES W CC/MCC
508	MAJOR SHOULDER OR ELBOW JOINT PROCEDURES W/O CC/MCC	712	TESTES PROCEDURES W/O CC/MCC
509	ARTHROSCOPY	799	SPLENECTOMY W MCC
510	SHOULDER, ELBOW OR FOREARM PROC, EXC MAJOR JOINT PROC W MCC	800	SPLENECTOMY W CC
511	SHOULDER, ELBOW OR FOREARM PROC, EXC MAJOR JOINT PROC W CC	801	SPLENECTOMY W/O CC/MCC
512	SHOULDER, ELBOW OR FOREARM PROC, EXC MAJOR JOINT PROC W/O CC/MCC	802	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W MCC
513	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W CC/MCC	803	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W CC
514	HAND OR WRIST PROC, EXCEPT MAJOR THUMB OR JOINT PROC W/O CC/MCC	804	OTHER O.R. PROC OF THE BLOOD & BLOOD FORMING ORGANS W/O CC/MCC

Exclude cases:

- with a principal ICD-9-CM diagnosis code (or secondary diagnosis present on admission) for sepsis (see above)
- with a principal ICD-9-CM diagnosis code for infection
- with DRG or MS-DRG code for surgical class 4 (see above)
- with length of stay of less than four (4) days
- neonates
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn

Risk Category 2:

Non-elective surgical class 1 discharges, for patients ages 17 years and younger, with any-listed ICD-9-CM procedure codes for an operating room procedure. Non-elective surgical class 1 discharges are defined by specific DRG or MS-DRG codes (see above) with admission type recorded as non-elective (SID ATYPE not equal to 3).

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes

Exclude cases:

- with a principal ICD-9-CM diagnosis code (or secondary diagnosis present on admission) for sepsis (see above)
- with a principal ICD-9-CM diagnosis code for infection
- with DRG or MS-DRG code for surgical class 4 (see above)
- with length of stay of less than four (4) days
- neonates
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn

Risk Category 3:

Elective surgical class 2, 3, or 9 discharges, for patients ages 17 years and younger, with any-listed ICD-9-CM procedure codes for an operating room procedure. Elective surgical class 2, 3, or 9 discharges are defined by specific DRG or MS-DRG codes with admission type recorded as elective (SID ATYPE=3).

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes

DRG codes for surgical class 2

075	MAJOR CHEST PROCEDURES	266	SKIN GRAFT &/OR DEBRID EXCEPT FOR SKIN ULCER OR CELLULITIS W/O CC
076	OTHER RESP SYSTEM O.R. PROCEDURES W CC	267	PERIANAL & PILONIDAL PROCEDURES
077	OTHER RESP SYSTEM O.R. PROCEDURES W/O CC	268	SKIN, SUBCUTANEOUS TISSUE & BREAST PLASTIC PROCEDURES
146	RECTAL RESECTION W CC	269	OTHER SKIN, SUBCUT TISS & BREAST PROC W CC
147	RECTAL RESECTION W/O CC	270	OTHER SKIN, SUBCUT TISS & BREAST PROC W/O CC
149	MAJOR SMALL & LARGE BOWEL PROCEDURES W/O CC	288	O.R. PROCEDURES FOR OBESITY
150	PERITONEAL ADHESIOLYSIS W CC	302	KIDNEY TRANSPLANT
151	PERITONEAL ADHESIOLYSIS W/O CC	303	KIDNEY AND URETER PROCEDURES FOR NEOPLASM
152	MINOR SMALL & LARGE BOWEL PROCEDURES W CC	304	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC
153	MINOR SMALL & LARGE BOWEL PROCEDURES W/O CC	305	KIDNEY AND URETER PROCEDURES FOR NON-NEOPLASM WITHOUT CC
156	STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE 0-17	306	PROSTATECTOMY W CC
157	ANAL & STOMAL PROCEDURES W CC	307	PROSTATECTOMY W/O CC
158	ANAL & STOMAL PROCEDURES W/O CC	308	MINOR BLADDER PROCEDURES W CC
166	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W CC	309	MINOR BLADDER PROCEDURES W/O CC
167	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W/O CC	310	TRANSURETHRAL PROCEDURES W CC
170	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W CC	311	TRANSURETHRAL PROCEDURES W/O CC
171	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W/O CC	314	URETHRAL PROCEDURES, AGE 0-17
191	PANCREAS, LIVER & SHUNT PROCEDURES W CC	315	OTHER KIDNEY & URINARY TRACT O.R. PROCEDURES
192	PANCREAS, LIVER & SHUNT PROCEDURES W/O CC	334	MAJOR MALE PELVIC PROCEDURES W CC
193	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W CC	335	MAJOR MALE PELVIC PROCEDURES W/O CC
194	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W/O CC	336	TRANSURETHRAL PROSTATECTOMY W CC
195	CHOLECYSTECTOMY W C.D.E. W CC	337	TRANSURETHRAL PROSTATECTOMY W/O CC
196	CHOLECYSTECTOMY W C.D.E. W/O CC	341	PENIS PROCEDURES
197	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W CC	343	CIRCUMCISION AGE 0-17
198	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W/O CC	344	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROCEDURES FOR MALIGNANCY
199	HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR MALIGNANCY	345	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXCEPT FOR MALIGNANCY
200	HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR NON-MALIGNANCY	353	PELVIC EVISCERATION, RADICAL HYSTERECTOMY & RADICAL VULVECTOMY
201	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES	354	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W CC
265	SKIN GRAFT &/OR DEBRID EXCEPT FOR SKIN ULCER OR CELLULITIS W CC	355	UTERINE,ADNEXA PROC FOR NON-OVARIAN/ADNEXAL MALIG W/O CC
		356	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES

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357	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY	468	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
358	UTERINE & ADNEXA PROC FOR NON- MALIGNANCY W CC	476	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
359	UTERINE & ADNEXA PROC FOR NON- MALIGNANCY W/O CC	477	NON-EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
360	VAGINA, CERVIX & VULVA PROCEDURES	480	LIVER TRANSPLANT AND/OR INTESTINAL TRANSPLANT
361	LAPAROSCOPY & INCISIONAL TUBAL INTERRUPTION	482	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES
362	ENDOSCOPIC TUBAL INTERRUPTION	493	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W CC
363	D&C, CONIZATION & RADIO-IMPLANT, FOR MALIGNANCY	494	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W/O CC
364	D&C, CONIZATION EXCEPT FOR MALIGNANCY	495	LUNG TRANSPLANT
365	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES	512	SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT
370	CESAREAN SECTION W CC	513	PANCREAS TRANSPLANT
371	CESAREAN SECTION W/O CC	541	ECMO OR TRACH W MV 96+HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.
372	VAGINAL DELIVERY W COMPLICATING DIAGNOSES	542	TRACH W MV 96+HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.
373	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES	559	ACUTE ISCHEMIC STROKE WITH USE OF THROMBOLYTIC AGENT
374	VAGINAL DELIVERY W STERILIZATION &/OR D&C	569	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC W MAJOR GI DX
375	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C	570	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC W/O MAJOR GI DX
377	POSTPARTUM & POST ABORTION DIAGNOSES W O.R. PROCEDURE	573	MAJOR BLADDER PROCEDURES
381	ABORTION W D&C, ASPIRATION CURETTAGE OR HYSTEROTOMY		

MS-DRG codes for surgical class 2

003	ECMO OR TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W MAJ O.R.	166	OTHER RESP SYSTEM O.R. PROCEDURES W MCC
004	TRACH W MV 96+ HRS OR PDX EXC FACE, MOUTH & NECK W/O MAJ O.R.	167	OTHER RESP SYSTEM O.R. PROCEDURES W CC
005	LIVER TRANSPLANT W MCC OR INTESTINAL TRANSPLANT	168	OTHER RESP SYSTEM O.R. PROCEDURES W/O CC/MCC
006	LIVER TRANSPLANT W/O MCC	327	STOMACH, ESOPHAGEAL & DUODENAL PROC W CC
007	LUNG TRANSPLANT	329	MAJOR SMALL & LARGE BOWEL PROCEDURES W MCC
008	SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT	330	MAJOR SMALL & LARGE BOWEL PROCEDURES W CC
010	PANCREAS TRANSPLANT	331	MAJOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC
011	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W MCC	332	RECTAL RESECTION W MCC
012	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W CC	333	RECTAL RESECTION W CC
013	TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES W/O CC/MCC	334	RECTAL RESECTION W/O CC/MCC
061	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W MCC	335	PERITONEAL ADHESIOLYSIS W MCC
062	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W CC	336	PERITONEAL ADHESIOLYSIS W CC
063	ACUTE ISCHEMIC STROKE W USE OF THROMBOLYTIC AGENT W/O CC/MCC	337	PERITONEAL ADHESIOLYSIS W/O CC/MCC
163	MAJOR CHEST PROCEDURES W MCC	341	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W MCC
164	MAJOR CHEST PROCEDURES W CC	342	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W CC
165	MAJOR CHEST PROCEDURES W/O CC/MCC	343	APPENDECTOMY W/O COMPLICATED PRINCIPAL DIAG W/O CC/MCC
		344	MINOR SMALL & LARGE BOWEL PROCEDURES W MCC

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345	MINOR SMALL & LARGE BOWEL PROCEDURES W CC	579	OTHER SKIN, SUBCUT TISS & BREAST PROC W MCC
346	MINOR SMALL & LARGE BOWEL PROCEDURES W/O CC/MCC	580	OTHER SKIN, SUBCUT TISS & BREAST PROC W CC
347	ANAL & STOMAL PROCEDURES W MCC	581	OTHER SKIN, SUBCUT TISS & BREAST PROC W/O CC/MCC
348	ANAL & STOMAL PROCEDURES W CC	619	O.R. PROCEDURES FOR OBESITY W MCC
349	ANAL & STOMAL PROCEDURES W/O CC/MCC	620	O.R. PROCEDURES FOR OBESITY W CC
356	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W MCC	621	O.R. PROCEDURES FOR OBESITY W/O CC/MCC
357	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W CC	652	KIDNEY TRANSPLANT
358	OTHER DIGESTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC	653	MAJOR BLADDER PROCEDURES W MCC
405	PANCREAS, LIVER & SHUNT PROCEDURES W MCC	654	MAJOR BLADDER PROCEDURES W CC
406	PANCREAS, LIVER & SHUNT PROCEDURES W CC	655	MAJOR BLADDER PROCEDURES W/O CC/MCC
407	PANCREAS, LIVER & SHUNT PROCEDURES W/O CC/MCC	656	KIDNEY & URETER PROCEDURES FOR NEOPLASM W MCC
408	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W MCC	657	KIDNEY & URETER PROCEDURES FORNEOPLASM W CC
409	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W CC	658	KIDNEY & URETER PROCEDURES FOR NEOPLASM W/O CC/MCC
410	BILIARY TRACT PROC EXCEPT ONLY CHOLECYST W OR W/O C.D.E. W/O CC/MCC	659	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W MCC
411	CHOLECYSTECTOMY W C.D.E. W MCC	660	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W CC
412	CHOLECYSTECTOMY W C.D.E. W CC	661	KIDNEY & URETER PROCEDURES FOR NON-NEOPLASM W/O CC/MCC
413	CHOLECYSTECTOMY W C.D.E. W/O CC/MCC	662	MINOR BLADDER PROCEDURES W MCC
414	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W MCC	663	MINOR BLADDER PROCEDURES W CC
415	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W CC	664	MINOR BLADDER PROCEDURES W/O CC/MCC
416	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE W/O C.D.E. W/O CC/MCC	665	PROSTATECTOMY W MCC
417	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W MCC	666	PROSTATECTOMY W CC
418	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W CC	667	PROSTATECTOMY W/O CC/MCC
419	LAPAROSCOPIC CHOLECYSTECTOMY W/O C.D.E. W/O CC/MCC	668	TRANSURETHRAL PROCEDURES W MCC
420	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W MCC	669	TRANSURETHRAL PROCEDURES W CC
421	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W CC	670	TRANSURETHRAL PROCEDURES W/O CC/MCC
422	HEPATOBIILIARY DIAGNOSTIC PROCEDURES W/O CC/MCC	672	URETHRAL PROCEDURES W/O CC/MCC
423	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W MCC	673	OTHER KIDNEY & URINARY TRACT PROCEDURES W MCC
424	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W CC	674	OTHER KIDNEY & URINARY TRACT PROCEDURES W CC
425	OTHER HEPATOBIILIARY OR PANCREAS O.R. PROCEDURES W/O CC/MCC	675	OTHER KIDNEY & URINARY TRACT PROCEDURES W/O CC/MCC
576	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W MCC	707	MAJOR MALE PELVIC PROCEDURES W CC/MCC
577	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W CC	708	MAJOR MALE PELVIC PROCEDURES W/O CC/MCC
578	SKIN GRAFT EXC FOR SKIN ULCER OR CELLULITIS W/O CC/MC	709	PENIS PROCEDURES W CC/MCC
		710	PENIS PROCEDURES W/O CC/MCC
		713	TRANSURETHRAL PROSTATECTOMY W CC/MCC
		714	TRANSURETHRAL PROSTATECTOMY W/O CC/MCC
		715	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W CC/MCC

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716	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC FOR MALIGNANCY W/O CC/MCC	750	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES W/O CC/MCC
717	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W CC/MCC	765	CESAREAN SECTION W CC/MCC
718	OTHER MALE REPRODUCTIVE SYSTEM O.R. PROC EXC MALIGNANCY W/O CC/MCC	766	CESAREAN SECTION W/O CC/MCC
734	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W CC/MCC	767	VAGINAL DELIVERY W STERILIZATION &/OR D&C
735	PELVIC EVISCERATION, RAD HYSTERECTOMY & RAD VULVECTOMY W/O CC/MCC	768	VAGINAL DELIVERY W O.R. PROC EXCEPT STERIL &/OR D&C
736	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W MCC	769	POSTPARTUM & POST ABORTION DIAGNOSES W O.R. PROCEDURE
737	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W CC	770	ABORTION W D&C, ASPIRATION CURETTAGE OR HYSTEROTOMY
738	UTERINE & ADNEXA PROC FOR OVARIAN OR ADNEXAL MALIGNANCY W/O CC/MCC	774	VAGINAL DELIVERY W COMPLICATING DIAGNOSES
739	UTERINE,ADNEXA PROC FOR NON- OVARIAN/ADNEXAL MALIG W MCC	775	VAGINAL DELIVERY W/O COMPLICATING DIAGNOSES
740	UTERINE,ADNEXA PROC FOR NON- OVARIAN/ADNEXAL MALIG W CC	981	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W MCC
741	UTERINE,ADNEXA PROC FOR NON- OVARIAN/ADNEXAL MALIG W/O CC/MCC	982	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W CC
742	UTERINE & ADNEXA PROC FOR NON- MALIGNANCY W CC/MCC	983	EXTENSIVE O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC
743	UTERINE & ADNEXA PROC FOR NON- MALIGNANCY W/O CC/MCC	984	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W MCC
744	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W CC/MCC	985	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W CC
745	D&C, CONIZATION, LAPAROSCOPY & TUBAL INTERRUPTION W/O CC/MCC	986	PROSTATIC O.R. PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC
746	VAGINA, CERVIX & VULVA PROCEDURES W CC/MCC	987	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W MCC
747	VAGINA, CERVIX & VULVA PROCEDURES W/O CC/MCC	988	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W CC
748	FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES	989	NON-EXTENSIVE O.R. PROC UNRELATED TO PRINCIPAL DIAGNOSIS W/O CC/MCC
749	OTHER FEMALE REPRODUCTIVE SYSTEM O.R. PROCEDURES W CC/MCC		

DRG codes for surgical class 3

263	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W CC	485	LIMB REATTACHMENT, HIP AND FEMUR PROC FOR MULTIPLE SIGNIFICANT TRAUMA
264	SKIN GRAFT &/OR DEBRID FOR SKN ULCER OR CELLULITIS W/O CC	486	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA
439	SKIN GRAFTS FOR INJURIES	504	EXTEN. BURNS OR FULL THICKNESS BURN W/MV/ 96+HRS W/SKIN GFT
440	WOUND DEBRIDEMENTS FOR INJURIES	506	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W CC OR SIG TRAUMA
441	HAND PROCEDURES FOR INJURIES	507	FULL THICKNESS BURN W SKIN GRFT OR INHAL INJ W/O CC OR SIG TRAUMA
442	OTHER O.R. PROCEDURES FOR INJURIES W CC		
443	OTHER O.R. PROCEDURES FOR INJURIES W/O CC		
484	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA		

MS-DRG codes for surgical class 3

570	SKIN DEBRIDEMENT W MCC	909	OTHER O.R. PROCEDURES FOR INJURIES W/O CC/MCC
571	SKIN DEBRIDEMENT W CC	927	EXTENSIVE BURNS OR FULL THICKNESS BURNS W MV 96+ HRS W SKIN GRAFT
572	SKIN DEBRIDEMENT W/O CC/MCC	928	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W CC/MCC
573	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W MCC	929	FULL THICKNESS BURN W SKIN GRAFT OR INHAL INJ W/O CC/MCC
574	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W CC	955	CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA
575	SKIN GRAFT FOR SKIN ULCER OR CELLULITIS W/O CC/MCC	956	LIMB REATTACHMENT, HIP & FEMUR PROC FOR MULTIPLE SIGNIFICANT TRAUMA
901	WOUND DEBRIDEMENTS FOR INJURIES W MCC	957	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W MCC
902	WOUND DEBRIDEMENTS FOR INJURIES W CC	958	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W CC
903	WOUND DEBRIDEMENTS FOR INJURIES W/O CC/MCC	959	OTHER O.R. PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA W/O CC/MCC
904	SKIN GRAFTS FOR INJURIES W CC/MCC		
905	SKIN GRAFTS FOR INJURIES W/O CC/MCC		
906	HAND PROCEDURES FOR INJURIES		
907	OTHER O.R. PROCEDURES FOR INJURIES W MCC		
908	OTHER O.R. PROCEDURES FOR INJURIES W CC		

DRG codes for surgical class 9

401	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W CC	424	O.R. PROCEDURE W PRINCIPAL DIAGNOSES OF MENTAL ILLNESS
402	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W/O CC	461	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES
406	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R.PROC W CC	488	HIV W EXTENSIVE O.R. PROCEDURE
407	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R.PROC W/O CC	539	LYMPHOMA & LEUKEMIA W MAJOR OR PROCEDURE W CC
408	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R.PROC	540	LYMPHOMA & LEUKEMIA W MAJOR OR PROCEDURE W/O CC

MS-DRG codes for surgical class 9

820	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W MCC	829	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R. PROC W CC/MCC
821	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W CC	830	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W OTHER O.R. PROC W/O CC/MCC
822	LYMPHOMA & LEUKEMIA W MAJOR O.R. PROCEDURE W/O CC/MCC	876	O.R. PROCEDURE W PRINCIPAL DIAGNOSES OF MENTAL ILLNESS
823	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W MCC	939	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W MCC
824	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W CC	940	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W CC
825	LYMPHOMA & NON-ACUTE LEUKEMIA W OTHER O.R. PROC W/O CC/MCC	941	O.R. PROC W DIAGNOSES OF OTHER CONTACT W HEALTH SERVICES W/O CC/MCC
826	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W MCC	969	HIV W EXTENSIVE O.R. PROCEDURE W MCC
827	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W CC	970	HIV W EXTENSIVE O.R. PROCEDURE W/O MCC
828	MYELOPROLIF DISORD OR POORLY DIFF NEOPL W MAJ O.R. PROC W/O CC/MCC		

Exclude cases:

- with a principal ICD-9-CM diagnosis code (or secondary diagnosis present on admission)

for sepsis (see above)

- with a principal ICD-9-CM diagnosis code for infection
- with DRG or MS-DRG code for surgical class 4 (see above)
- with length of stay of less than four (4) days
- neonates
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn

Risk Category 4:

Non-elective surgical class 2, 3, or 9 discharges, for patients ages 17 years and younger, with any-listed ICD-9-CM procedure codes for an operating room procedure. Non-elective surgical class 2, 3, or 9 discharges are defined by specific DRG or MS-DRG codes with admission type recorded as non-elective (SID ATYPE not equal to 3).

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes

Exclude cases:

- with a principal ICD-9-CM diagnosis code (or secondary diagnosis present on admission) for sepsis (see above)
- with a principal ICD-9-CM diagnosis code for infection
- with DRG or MS-DRG code for surgical class 4 (see above)
- with length of stay of less than four (4) days
- neonates
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn

Risk Category 9:

Surgical discharges not meeting the inclusion rules for Risk Category 1 through Risk Category 5, for patients ages 17 years and younger, with any-listed ICD-9-CM procedure codes for an operating room procedure. Surgical discharges are defined by specific DRG or MS-DRG codes.

See *Pediatric Quality Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes

Exclude cases:

- with a principal ICD-9-CM diagnosis code (or secondary diagnosis present on admission) for sepsis (see above)
- with a principal ICD-9-CM diagnosis code for infection
- with DRG or MS-DRG code for surgical class 4 (see above)
- with length of stay of less than four (4) days
- neonates
- MDC 14 (pregnancy, childbirth, and puerperium)
- with missing gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing) or principal diagnosis (DX1=missing)

See *Pediatric Quality Indicators Appendices*:

- Appendix H – Infection Diagnosis Codes
- Appendix I – Definitions of Neonate, Newborn, Normal Newborn, and Outborn