Perforated Appendix Admission Rate

Prevention Quality Indicators #2
Technical Specifications
Area-Level Indicator
AHRQ Quality Indicators, Version 4.4, March 2012

Numerator

All discharges with ICD-9-CM diagnosis code for perforations or abscesses of appendix in any field among cases meeting the inclusion rules for the denominator.

ICD-9-CM Perforated or abscesses of appendix diagnosis codes:

5400	AC APPEND W PERITONITIS	5401	ABSCESS OF APPENDIX

Denominator

Non-maternal discharges in the numerator are assigned to the denominator, which is limited to cases with appendicitis, based on the Metro Area[1] or county of the patient residence, not the Metro Area or county of the hospital where the discharge occurred.

Include ICD-9-CM diagnosis codes (population at risk):

5400	AC APPEND W PERITONITIS
5401	ABSCESS OF APPENDIX
5409	ACUTE APPENDICITIS NOS
541	APPENDICITIS NOS

Exclude cases:

- 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 gender (SEX=missing), age (AGE=missing), quarter (DQTR=missing), year (YEAR=missing), principal diagnosis (DX1=missing), or county (PSTCO=missing)

See *Prevention Quality Indicators Appendices*:

- Appendix A – Admission Codes for Transfers

[1] The term "metropolitan area" (MA) was adopted by the U.S. Census in 1990 and referred collectively to metropolitan statistical areas (MSAs), consolidated metropolitan statistical areas (CMSAs), and primary metropolitan statistical areas (PMSAs). In addition, "area" could refer to either 1) FIPS county, 2) modified FIPS county, 3) 1999 OMB Metropolitan Statistical Area, or 3) 2003 OMB Metropolitan Statistical Area. Micropolitan Statistical Areas are not used in the QI software.