

# Pressure Ulcer Rate Technical Specifications

## Patient Safety Indicators #3 (PSI #3) AHRQ Quality Indicator™, Version 4.5, May 2013 Provider-Level Indicator Type of Score: Rate

### Description

Stage III or IV pressure ulcers (secondary diagnosis) per 1,000 discharges among patients ages 18 years and older. Excludes stays less than 5 days; cases with a principal diagnosis of pressure ulcer; cases with a secondary diagnosis of Stage III or IV pressure ulcer that is present on admission; cases with diseases of the skin, subcutaneous tissue and breast; obstetric cases; cases with hemiplegia, paraplegia, quadriplegia, spina bifida, or anoxic brain damage; cases in which debridement or pedicle graft is the only operating room procedure; discharges with debridement or pedicle graft before or on the same day as the major operating room procedure; and transfers from another facility.

*[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.]*

### Numerator

Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-9-CM diagnosis codes for pressure ulcer and any secondary ICD-9-CM diagnosis codes for pressure ulcer stage III or IV (or unstageable).

#### ICD-9-CM Pressure ulcer diagnosis codes<sup>1</sup>:

7070	PRESSURE ULCER	70704	PRESSURE ULCER, HIP
70700	PRESSURE ULCER, SITE NOS	70705	PRESSURE ULCER, BUTTOCK
70701	PRESSURE ULCER, ELBOW	70706	PRESSURE ULCER, ANKLE
70702	PRESSURE ULCER, UPR BACK	70707	PRESSURE ULCER, HEEL
70703	PRESSURE ULCER, LOW BACK	70709	PRESSURE ULCER, SITE NEC

<sup>1</sup> The procedure or diagnosis codes are continuously updated. The current list of ICD-9-CM codes is valid for October 2012 through September 2013. Italicized codes are not active in Fiscal Year 2013.

#### ICD-9-CM Pressure ulcer stage diagnosis codes<sup>1</sup>:

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

<sup>1</sup> Valid for discharges on or after October 1, 2008

### Denominator

Surgical and medical discharges, for patients ages 18 years and older. Surgical and medical

discharges are defined by specific DRG or MS-DRG codes.

See *Patient Safety Indicators Appendices*:

- Appendix B – Medical Discharge DRGs
- Appendix C – Medical Discharge MS-DRGs
- Appendix D – Surgical Discharge DRGs
- Appendix E – Surgical Discharge MS-DRGs

Exclude cases:

- with length of stay of less than 5 days
- with a principal ICD-9-CM diagnosis code for pressure ulcer (see above)
- with any secondary ICD-9-CM diagnosis codes for pressure ulcer (see above) present on admission and any secondary ICD-9-CM diagnosis codes for pressure ulcer stage III or IV (or unstageable, see above) present on admission
- with any-listed ICD-9-CM diagnosis codes for hemiplegia, paraplegia, or quadriplegia
- with any-listed ICD-9-CM diagnosis codes for spina bifida or anoxic brain damage
- with any-listed ICD-9-CM procedure codes for debridement or pedicle graft before or on the same day as the major operating room procedure (surgical cases only)
- with any-listed ICD-9-CM procedure codes for 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 9 (skin, subcutaneous tissue, and breast)
- 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 *Patient Safety Indicators Appendices*:

- Appendix A – Operating Room Procedure Codes
- Appendix J – Admission Codes for Transfers

**ICD-9-CM Hemiplegia, paraplegia, or quadriplegia diagnosis codes<sup>1</sup>:**

33371	ATHETOID CEREBRAL PALSY	34292	UNSP HMIPLGA NONDMNT SDE
3341	HERED SPASTIC PARAPLEGIA	3430	CONGENITAL DIPLEGIA
3420	FLACCID HEMIPLEGIA	3431	CONGENITAL HEMIPLEGIA
34200	FLCCD HMIPLGA UNSPF SIDE	3432	CONGENITAL QUADRIPLEGIA
34201	FLCCD HMIPLGA DOMNT SIDE	3433	CONGENITAL MONOPLLEGIA
34202	FLCCD HMIPLG NONDMNT SDE	3434	INFANTILE HEMIPLEGIA
3421	SPASTIC HEMIPLEGIA	3438	CEREBRAL PALSY, NEC
34210	SPSTC HMIPLGA UNSPF SIDE	3439	CEREBRAL PALSY, NOS
34211	SPSTC HMIPLGA DOMNT SIDE	3440	QUADRIPLEGIA AND QUADRIPARESIS
34212	SPSTC HMIPLG NONDMNT SDE	34400	QUADRIPLEGIA, UNSPECIFD
34280	OT SP HMIPLGA UNSPF SIDE	34401	QUADRPLG C1-C4, COMPLETE
34281	OT SP HMIPLGA DOMNT SIDE	34402	QUADRPLG C1-C4, INCOMPLT
34282	OT SP HMIPLG NONDMNT SDE	34403	QUADRPLG C5-C7, COMPLETE
3429	HEMIPLEGIA, UNSPECIFIED	34404	QUADRPLG C5-C7, INCOMPLT
34290	UNSP HEMIPPLGA UNSPF SIDE	34409	OTHER QUADRIPLEGIA
34291	UNSP HEMIPPLGA DOMNT SIDE	3441	PARAPLEGIA NOS

**AHRQ QI™ Version 4.5, Patient Safety Indicators #3, Technical Specifications,  
Pressure Ulcer Rate  
www.qualityindicators.ahrq.gov**

---

3442	DIPLEGIA OF UPPER LIMBS	43820	LATE EF-HEMPLGA SIDE NOS
3443	<i>MONOPLÉGIA OF LOWER LIMB</i>	43821	LATE EF-HEMPLGA DOM SIDE
34430	MONPLGA LWR LMB UNSP SDE	43822	LATE EF-HEMIPLGA NON-DOM
34431	MONPLGA LWR LMB DMNT SDE	43830	LATE EF-MPLGA UP LMB NOS
34432	MNPLG LWR LMB NONDMNT SD	43831	LATE EF-MPLGA UP LMB DOM
3444	<i>MONOPLÉGIA OF UPPER LIMB</i>	43832	LT EF-MPLGA UPLMB NONDOM
34440	MONPLGA UPR LMB UNSP SDE	43840	LTE EF-MPLGA LOW LMB NOS
34441	MONPLGA UPR LMB DMNT SDE	43841	LTE EF-MPLGA LOW LMB DOM
34442	MNPLG UPR LMB NONDMNT SD	43842	LT EF-MPLGA LOWLMB NONDM
3445	MONOPLÉGIA NOS	43850	LT EF OTH PARAL SIDE NOS
34460	CAUDA EQUINA SYND NOS	43851	LT EF OTH PARAL DOM SIDE
34461	NEUROGENIC BLADDER	43852	LT EF OTH PARALS NON-DOM
3448	<i>OTHER SPECIFIED PARALYTIC SYNDROMES</i>	43853	LT EF OTH PARALS-BILAT
34481	LOCKED-IN STATE	7687	<i>HYPOXIC-ISCHEMIC ENCEPH</i>
34489	OTH SPCF PARALYTIC SYND	76870	HYPOXC-ISCHEM ENCEPH NOS
3449	PARALYSIS NOS	76872	MOD HYPOS-ISCHEM ENCEPH
		76873	SEV HYPOX-ISCHEM ENCEPH

<sup>1</sup>The procedure or diagnosis codes are continuously updated. The current list of ICD-9-CM codes is valid for October 2012 through September 2013. Italicized codes are not active in Fiscal Year 2013.

**ICD-9-CM Spina bifida or anoxic brain damage diagnosis codes:**

3481	ANOXIC BRAIN DAMAGE	74190	SPINA BIFIDA
74100	SPIN BIF W HYDROCEPH NOS	74191	SPINA BIFIDA-CERV
74101	SPIN BIF W HYDRCEPH-CERV	74192	SPINA VIFIDA-DORSAL
74102	SPIN BIF W HYDRCEPH-DORS	74193	SPINA BIFIDA-LUMBAR
74103	SPIN BIF W HYDRCEPH-LUMB	7685	SEVERE BIRTH ASPHYXIA

**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