

****NQF-ENDORSED VOLUNTARY CONSENSUS STANDARDS FOR HOSPITAL CARE****

Measure Information Form

Measure Set: Acute Myocardial Infarction (AMI)

Set Measure ID#: AMI-8a

Performance Measure Name: Primary PCI Received Within 90 Minutes of Hospital Arrival

Description: Acute myocardial infarction (AMI) patients receiving percutaneous coronary intervention (PCI) during the hospital stay with a time from hospital arrival to PCI of 90 minutes or less

Rationale: The early use of primary angioplasty in patients with acute myocardial infarction who present with ST-segment elevation or LBBB results in a significant reduction in mortality and morbidity. The earlier primary coronary intervention is provided, the more effective it is (Brodie, 1998 and DeLuca, 2004). National guidelines recommend the prompt initiation of PCI in patients presenting with ST-elevation myocardial infarction (Antman, 2004). Despite these recommendations, few eligible older patients hospitalized with AMI receive primary angioplasty within a timely manner (Jencks, 2000).

Type of Measure: Process

Improvement Noted as: An increase in the rate

Numerator Statement: AMI patients whose time from hospital arrival to PCI is 90 minutes or less

Included Populations: Not Applicable

Excluded Populations: None

Data Elements:

- *Arrival Date*
- *Arrival Time*
- *First PCI Date*
- *First PCI Time*

Denominator Statement: AMI patients with ST-elevation or LBBB on ECG who received PCI

Included Populations: Discharges with:

- An *ICD-9-CM Principal Diagnosis Code* for AMI as defined in Appendix A, Table 1.1
AND
- PCI (*ICD-9-CM Principal and Other Procedure Codes* for PCI as defined in Appendix A, Table 1.2)
AND
- ST-segment elevation or LBBB on the ECG performed closest to hospital arrival
AND
- PCI performed within 24 hours after hospital arrival

Excluded Populations:

- Patients less than 18 years of age
- Patients received in transfer from another acute care hospital, including another emergency department
- Patients with comfort measures only documented by a physician, nurse practitioner, or physician assistant
- Patients administered fibrinolytic therapy
- PCI described as non-primary by physician, nurse practitioner, or physician assistant
- Patients who did not receive PCI within 90 minutes and had a reason for delay documented by a physician, nurse practitioner, or physician assistant (e.g., social, religious, initial concern or refusal)

Data Elements:

- *Admission Date*
- *Admission Source*
- *Arrival Date*
- *Arrival Time*
- *Birthdate*
- *Comfort Measures Only*
- *Fibrinolytic Administration*
- *First PCI Date*
- *First PCI Time*
- *ICD-9-CM Other Procedure Codes*
- *ICD-9-CM Principal Diagnosis Code*
- *ICD-9-CM Principal Procedure Code*
- *Initial ECG Interpretation*
- *Non-Primary PCI*
- *Reason for Delay in PCI*
- *Transfer From Another ED*

Risk Adjustment: No

Data Collection Approach: Retrospective data sources for required data elements include administrative data and medical records.

Data Accuracy: Variation may exist in the assignment of ICD-9-CM codes; therefore, coding practices may require evaluation to ensure consistency.

Measure Analysis Suggestions: The measure rate for primary PCI received within 90 minutes of hospital arrival should be analyzed in conjunction with the median time to primary PCI measure (AMI-8). These measures, used together, will assist in understanding the number of AMI patients that are receiving primary PCI within 90 minutes of hospital arrival, and will identify the hospital's median time to primary PCI and potential opportunities for improvement to increase the rate of patients receiving primary PCI in 90 minutes or less.

Sampling: Yes, for additional information see the Sampling Section.

Data Reported as: Aggregate rate generated from count data reported as a proportion

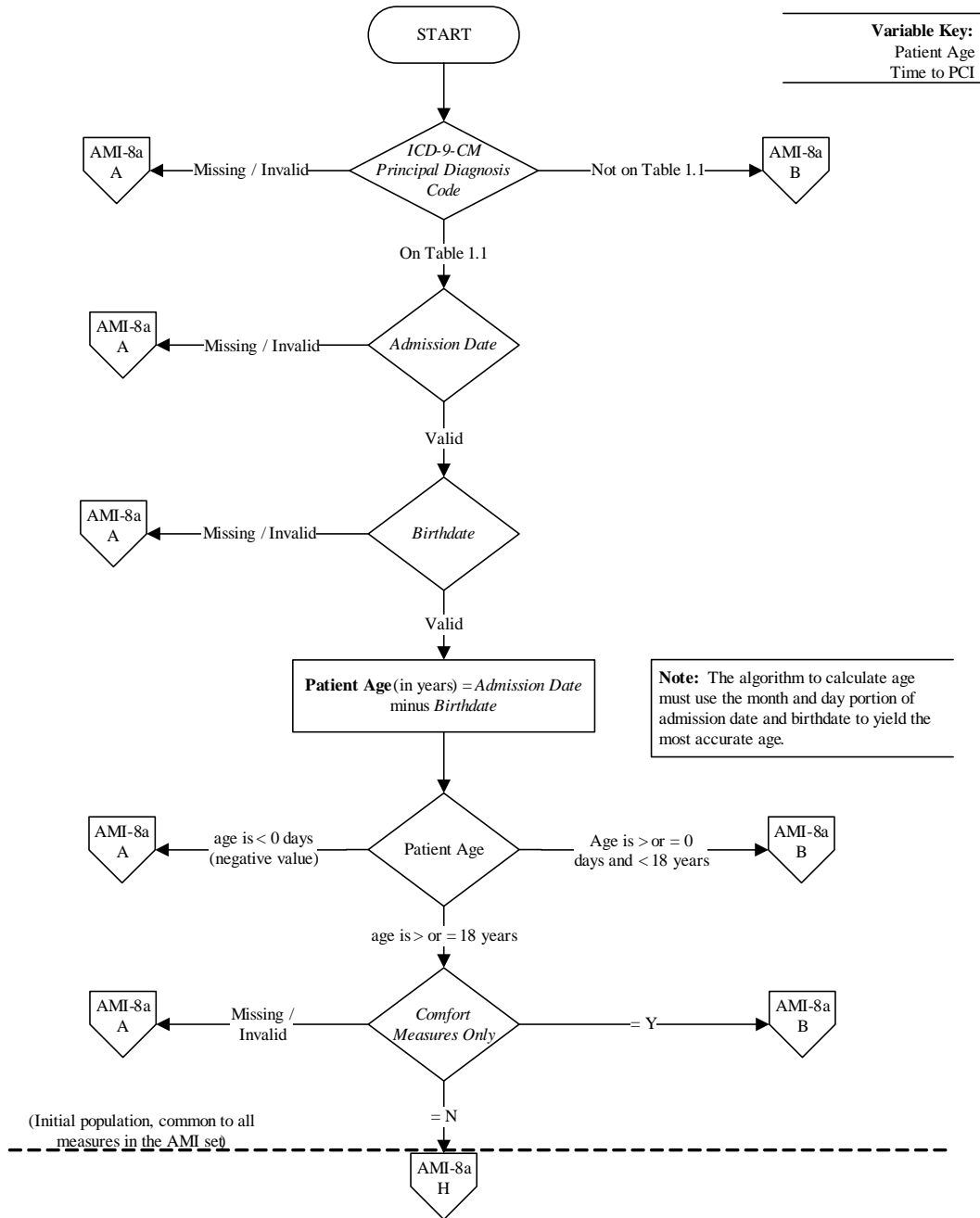
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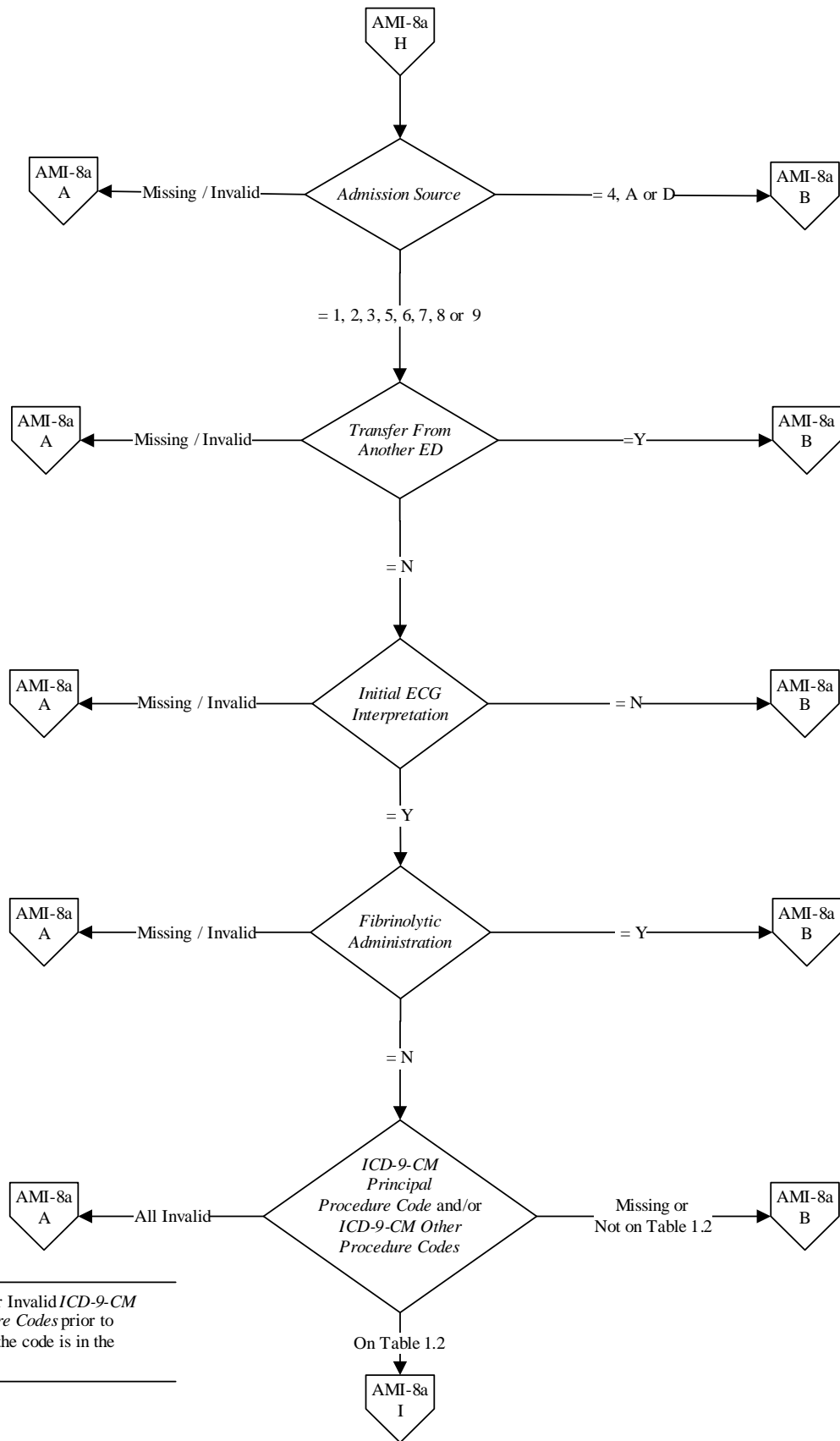
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Note: Look for Invalid *ICD-9-CM Other Procedure Codes* prior to determining if the code is in the population.

