

Specifications Manual for National Hospital Quality Measures
Release Notes 1.01 **November 16, 2004**

Section of the Manual	Impacts	Description of Changes	Implementation Date
Release Notes 1.01 provide modifications to the <i>Specifications Manual for National Hospital Quality Measures</i> . Changes include corrections and clarifications based on ongoing alignment discussions between the Centers for Medicare & Medicaid Services and the Joint Commission.			
All Sections	Initiative name change	“National Voluntary Hospital Reporting Initiative (NVHRI)” has been changed to “Hospital Quality Alliance (HQA)”	01-01-2005 Discharges
Table of Contents	Subtitle change to reflect alignment	Section 5, Data Quality, remove “(Joint Commission Performance Measurement Systems Only)” from the sub title.	01-01-2005 Discharges
Data Dictionary	Alpha Data Element List	Page numbers have changed due to the addition of the ARBs.	01-01-2005 Discharges
Data Dictionary	Data Elements	In all data elements where “Emergency room record” is listed under the Suggested Data Sources, this entry has been changed to read, “Emergency department record”.	01-01-2005 Discharges
Data Dictionary	Data Elements related to times	Data elements that relate to times should be HH:MM, with no space after the colon.	01-01-2005 Discharges
Measure Information forms (MIFs) Data Dictionary National Hospital Quality Measure Verification Process	Measures: AMI-3 ACEI for LVSD HF-3 ACEI for LVSD Data elements: <i>ACEI Prescribed at Discharge</i> , <i>Contraindication to ACEI at Discharge</i> Appendix C	NOTE measures and data elements previously addressing ACEIs have been changed to include ARBs with the exception of the data element <i>ACEI Clinical Trial</i> . These changes will occur wherever the data elements or measures are addressed in the manual. Relevant changes are as follows: <ul style="list-style-type: none"> Measures AMI-3 and HF-3 will change from ACEI for LVSD to ACEI or ARB for LVSD. Data element <i>ACEI Prescribed at Discharge</i> will change to <i>ACEI or ARB Prescribed at Discharge</i> Data element <i>Contraindication to ACEI at Discharge</i> will change to <i>Contraindication to Both ACEI and ARB at Discharge</i>. Table 1.7, ARBs will be added to Appendix C. 	01-01-2005 Discharges
Data Dictionary	<i>Antibiotic Administration Route</i>	Data element <i>Antibiotic Administration Route</i> , Allowable Values, remove from option 6 “Mixed in cement” and add “* RETIRED VALUE –No longer an option”, page 1-35.	01-01-2005 Discharges
Data Dictionary	<i>Antibiotic Administration Route</i>	Data element <i>Antibiotic Administration Route</i> , Notes for Abstraction, add “*The route “mixed in cement” has been moved to the exclusion list and is no longer a valid value for discharges beginning with 01-01-2005.” page 1-36	01-01-2005 Discharges
Data Dictionary	<i>Antibiotic Administration Route</i>	Data element <i>Antibiotic Administration Route</i> , Guidelines for Abstraction, Inclusion, SIP, delete “mixed in cement”	01-01-2005 Discharges

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		from Inclusion column and add “mixed in cement” to the Exclusion column, page 1-37.	
Data Dictionary	<i>Antibiotic Received</i>	Data element <i>Antibiotic Received</i> , Guidelines for Abstraction, add “mixed in cement” to the Exclusion column, page 1-45.	01-01-2005 Discharges
Data Dictionary	<i>Antibiotics Prior to Arrival</i>	Data element <i>Antibiotics Prior to Arrival</i> , Guidelines for Abstraction, Inclusion, SIP, delete “mixed in cement” from Inclusion column and add “mixed in cement” to the Exclusion column, page 1-48.	01-01-2005 Discharges
Data Dictionary	<i>Comfort Measures Only</i>	Data element <i>Comfort Measures Only</i> , Guidelines for Abstraction, Inclusion, 4 th bullet, add to the end of the phrase “or patient’s condition is grave or that death is imminent”, page 1-74.	01-01-2005 Discharges
Data Dictionary	<i>Comfort Measures Only</i>	Data element <i>Comfort Measures Only</i> , Guidelines for Abstraction, Inclusion, add “continue supportive care” and “comfort measures provided”, page 1-74.	01-01-2005 Discharges
Data Dictionary	<i>Compromised</i>	Data element <i>Compromised</i> , Definition, second #1, change the phrase “Immunosuppressive therapy within last three months” to read “ Systemic immunosuppressive therapy within past three months”, page 1-75.	01-01-2005 Discharges
Data Dictionary	<i>Compromised</i>	Data element <i>Compromised</i> , Allowable Values, option 1, change the phrase, “immunosuppressive therapy” to read “ systemic immunosuppressive therapy”, page 1-75.	01-01-2005 Discharges
Data Dictionary	<i>Compromised</i>	Data element <i>Compromised</i> , Notes for Abstraction, change “None” to read “A single dose does not constitute therapy”, page 1-76.	01-01-2005 Discharges
Data Dictionary	<i>Compromised</i>	Data element <i>Compromised</i> , Guidelines for Abstraction, Inclusion, add “corticosteroid therapy” and “malignancy within past 3 months”, page 1-76.	01-01-2005 Discharges
Data Dictionary	<i>Discharge Status</i>	Data element <i>Discharge Status</i> , Allowable Values, option 05, change the spelling of the last word in the 4 th sentence to inpatient , page 1-111.	01-01-2005 Discharges
Data Dictionary	<i>Discharge Status</i>	Data element <i>Discharge Status</i> , Allowable Values, option 05, change the spelling of the 4 th word in the 7 th sentence to patient , page 1-111.	01-01-2005 Discharges
Data Dictionary	<i>Discharge Status</i>	Data element <i>Discharge Status</i> , Allowable Values, option 08, change the wording to “Discharged/transferred to home under care of a Home IV provider”, page 1-112	01-01-2005 Discharges
Data Dictionary	<i>Discharge Status</i>	Data element <i>Discharge Status</i> , Allowable	01-01-2005

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		Values, option 65, information in the parenthesis should read, "Effective 04-01-2004", page 1-113.	Discharges
Data Dictionary	<i>Influenza Vaccination Status</i>	Data element <i>Influenza Vaccination Status</i> , Allowable Values, option 4, add to the end of the sentence "OR prior history of Guillian-Barré syndrome", page 1-144	01-01-2005 Discharges
Data Dictionary	<i>Other Surgeries</i>	Data element <i>Other Surgeries</i> , Notes for Abstraction, change the "None" to "The intent of this data element is to exclude cases with multiple procedures, which take place during separate surgical episodes during the same hospital stay. Prophylactic antibiotics for additional procedures <u>may</u> interfere with the discontinuation of the prophylaxis of the initial procedure and this would result in the case inappropriately failing SIP-3 (Antibiotic Prophylaxis Discontinues Within 24 Hours.) Following are two scenarios that must be clarified: 1) If multiple procedures are performed during the <u>same surgical episode</u> , whether or not additional procedures are among the procedures of interest, the case should be included in SIP-3. Under this scenario additional procedures do not affect the discontinuation of prophylaxis. The 24-hour window begins at the end of the surgical episode. For this scenario, the answer to the question <i>Other Surgeries</i> would be "No". 2) If additional/subsequent procedures are performed during <u>separate surgical episodes</u> that require major anesthesia (e.g., general, regional, spinal) and occur within three days of the initial procedure (the date of initial surgery being day 0), the case should be excluded from SIP-3. Under this scenario prophylaxis for additional procedures are likely to interfere with the discontinuation of the prophylaxis of the initial procedure. For this scenario, the answer to the question <i>Other Surgeries</i> would be "Yes", whether or not additional surgeries were among the procedures of interest." Page 1-169	01-01-2005 Discharges
Data Dictionary	<i>Payment Source</i>	Data element <i>Payment Source</i> , Allowable Values, option 3 Other, first sentence, add "source" after the word payment, page 1-	01-01-2005 Discharges

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		173.	
Data Dictionary	<i>Postoperative Infections</i>	Data element <i>Postoperative Infections</i> , Notes for Abstraction, change “None” to “Postoperative infection timeframe is defined as within 2 days postop with day of surgery being zero”, page 1-185.	01-01-2005 Discharges
Data Dictionary	<i>Postoperative Infections</i>	Data element <i>Postoperative Infections</i> , Guidelines for Abstraction, Inclusion, add “Gross fecal/extensive fecal contamination”, page 1-186.	01-01-2005 Discharges
Data Dictionary	<i>Pseudomonas Risk</i>	Data element <i>Pseudomonas Risk</i> , Guidelines for Abstraction, Inclusion, Malnutrition, add “ Marasmus ”, page 1-199	01-01-2005 Discharges
Data Dictionary	<i>Surgical Incision Time</i>	Data element <i>Surgical Incision Time</i> , Notes for Abstraction, first bullet, change “latest time” to “ earliest time”, page 1-216.	01-01-2005 Discharges
Data Dictionary	<i>Surgical Incision Time</i>	Data element <i>Surgical Incision Time</i> , Notes for Abstraction Example 1, Enter time should read 13:10 , page 1-216.	01-01-2005 Discharges
Data Dictionary	<i>Surgical Incision Time</i>	Data element <i>Surgical Incision Time</i> , Notes for Abstraction Example 2, Enter time should read 08:10 , page 1-217.	01-01-2005 Discharges
Data Dictionary	<i>Surgical Incision Time</i>	Data element <i>Surgical Incision Time</i> , Guidelines for Abstraction, Inclusion, should read “If multiple times are found use earliest time among the highest priority”, page 1-217.	01-01-2005 Discharges
Measure Information	AMI Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for AMI-2, page AMI-2-5.	01-01-2005 Discharges
Measure Information	AMI Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for AMI-3, page AMI-3-5.	01-01-2005 Discharges
Measure Information	AMI Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for AMI-4, page AMI-4-5.	01-01-2005 Discharges
Measure Information	AMI Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for AMI-5, page AMI-5-5.	01-01-2005 Discharges
Measure Information	AMI-8a Measure Information Form	Under Excluded Populations, second bullet, change to “another acute care hospital”, page AMI-8a-2.	01-01-2005 Discharges
Measure Information	AMI Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for AMI-9, page 9-4.	01-01-2005 Discharges
Measure Information	AMI Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for AMI-T1a, page AMI-T1a-5.	01-01-2005 Discharges
Measure Information	AMI-T2 Measure Information Form	Under Included Populations, the second sub-bullet under the second bullet, the LDL-c should have \geq instead of $>$, page AMI-T2-2.	01-01-2005 Discharges
Measure	AMI Analytic	<i>Discharge Status</i> Code 65 has been added	01-01-2005

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Information	Flowchart	to the analytic flowcharts for AMI-T2, page AMI-T2-5.	Discharges
Measure Information	HF Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for HF-1, page HF-1-5.	01-01-2005 Discharges
Measure Information	HF Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for HF-2, page HF-2-4.	01-01-2005 Discharges
Measure Information	HF Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for HF-3, page HF-3-5.	01-01-2005 Discharges
Measure Information	HF Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for HF-4, page HF-4-5.	01-01-2005 Discharges
Measure Information	PN National Quality Measures	Set Measure ID# PN-6a and PN-6b should read “Immunocompetent”, page PN-1.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for PN-2, page PN-2-5.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for PN-4, page PN-4-5.	01-01-2005 Discharges
Measure Information	PN Measure Information Form	On page PN-6, 6ab-5, “Pneumonia Antibiotic Consensus Recommendations” table, Pseudomonal Risk column, 2 nd set of antibiotic combinations, 2 nd line, add “either” after “IV aminoglycoside Table 2.11+”.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	A process box has been added before the PN-6 J page connector which reads “Proceed with antibiotics that had ANTIMINUTES <=1440 minutes or Antibiotic Days=0”, page PN-6, 6ab-8.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	Due to the merged data element <i>Antibiotic Administration Route</i> , which combines both SIP and PN values, the additional allowable values have been added in the flow chart next to the diamond <i>Antibiotic Administration Route</i> . Pages PN-6, 6ab-9 and 10.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	A process box has been added before the PN-6a J page connector which reads “Proceed with antibiotics that had ANTIMINUTES <=1440 minutes or Antibiotic Days=0”, page PN-6, 6ab-15.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	<i>Antibiotic Administration Route</i> value ‘4’ should be replaced with value ‘10’, page PN-6, 6ab-16.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	A process box has been added before the PN-6b J page connector which reads “Proceed with antibiotics that had ANTIMINUTES <=1440 minutes or	01-01-2005 Discharges

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		Antibiotic Days=0”, page PN-6, 6ab-21.	
Measure Information	PN Analytic Flowchart	Due to the merged data element <i>Antibiotic Administration Route</i> , which combines both SIP and PN values, the additional allowable values have been added in the flow chart next to the diamond <i>Antibiotic Administration Route</i> . Pages PN-6, 6ab-22.	01-01-2005 Discharges
Measure Information	PN Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for PN-7, page PN-7-5.	01-01-2005 Discharges
Measure Information	SIP Analytic Flowchart	Numerator statement on the analytic flowchart should read “within one hour prior to surgical incision ”, page SIP 1-5.	01-01-2005 Discharges
Measure Information	PR Analytic Flowchart	<i>Discharge Status</i> Code 65 has been added to the analytic flowcharts for PR-2, page PR-2-3.	01-01-2005 Discharges
Measure Information	PR Analytic Flowchart	First page of PR-3 analytic flowchart has been replaced with the correct one, page PR-3-4.	01-01-2005 Discharges
Sampling Methods	Sampling Strategies	The sampling chapter has been modified to more fully describe two possible sampling strategies which meet the sampling requirements: monthly sampling and quarterly sampling. Minimum sample size tables for monthly sampling (with accompanying examples) have been added to this chapter to provide more detail on monthly sampling.	01-01-2005 Discharges
Data Quality	Subtitle change to reflect alignment	Remove the phrase “Joint Commission Performance Measurement Systems Only” from the subtitle. CMS and Joint Commission have aligned.	01-01-2005 Discharges
Data Quality	Chart level re-abstractation	On page 5-2, text added to explain measurement system’s responsibility to use CDAC findings when multiple vendors are used: ‘If a healthcare organization submits data to the Joint Commission through the measurement system and submits data to CMS through a vendor other than the measurement system, then the measurement system is responsible for obtaining the CDAC results from the healthcare organization.’	01-01-2005 Discharges
Data Quality	Chart level re-abstractation for measure sets not reported to CMS	On page 5-2, text added to clarify that measurement system will need to sample and perform chart level validation for measure sets not reported to CMS: ‘Reabstraction must be conducted quarterly and include records from a random sample of the listed measurement system’s client organizations that do NOT submit data to the national clinical data repository (refer to Table 1, below) or who are reporting	01-01-2005 Discharges

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		measure sets that are not reported to CMS (e.g. Pregnancy and Related Conditions measure set).’	
Data Quality	Sampling records for measure sets not reported to CMS	On Page 5-2 text added to explain sampling for data sets not submitted to CMS: ‘From this selected sample of hospitals, for each measure set, the ICD populations are combined into a total ICD measure set population and a random sample of medical records is then selected from each of these pooled measure set ICD populations (See Table 2 for the minimum measure set sample size requirements.’	01-01-2005 Discharges
Data Quality	Chart level re-abstractation for measure sets not reported to CMS	On page 5-4, text added to Option B for measure sets not submitted to CMS.	01-01-2005 Discharges
Data Quality	Alternative to CMS data accuracy and completeness	On Page 5-4, Note describing option to use alternative to CDAC data abstraction eliminated: ‘ Note: If a measurement system has developed an alternative approach to evaluating the accuracy and completeness of national quality measure data... ’	01-01-2005 Discharges
Data Quality	Chart level re-abstractation data analysis	On Page 5-5, clarification for examining paired records with NULL values clarified: ‘Paired records, therefore, should NOT include records where no value was abstracted by the reabstractor for one or more null fields of the data, since it would not be possible to compare the results to the reabstractor in that case. Paired records where no value was abstracted by the original abstractor but where a value was abstracted by the reabstractor should still be included since the reabstractor is considered the gold standard.’	01-01-2005 Discharges
Data Quality	Chart level re-abstractation data analysis	On Page 5-6, example corrected for explaining comparisons of NULL values.	01-01-2005 Discharges
Data Quality	Results of reliability testing	On Page 5-7, acceptable thresholds and effective dates modified due to CMS and Joint Commission reaching alignment on data quality standards. Note that there are two components that will be used to examine data reliability: Data Element Agreement Rate (DEAR) and Category Assignment Agreement Rate (CAAR).	01-01-2005 Discharges
National Hospital Quality Measure Verification Process	PN test case layout	On page 8-16, the data element 'Antibiotic Allergy' was left off of the PN patient level format. It has been inserted in position 59.	01-01-2005 Discharges
National	SIP test case	On page 8-35, the labels for positions 416	01-01-2005

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Hospital Quality Measure Verification Process	layout	and 417 should read, 'Antibiotic Administration Time 75' and 'Prophylactic Antibiotic 75' respectively. Correction to typo.	Discharges
National Hospital Quality Measure Verification Process	SIP test case layout	On page 8-35, the data element 'Infection PTA' in position 419 changed to 'Infection Prior to Anesthesia'. Correction to typo.	01-01-2005 Discharges
National Hospital Quality Measure Verification Process	SIP test case layout	On page 8-36, the data element 'Surgery Incision Time' in position 422 changed to 'Surgical Incision Time'. Correction to typo.	01-01-2005 Discharges
National Hospital Quality Measure Verification Process	SIP test case layout	On page 8-37, the data element 'Date of Infection (SIP)' in position 426 changed TO 'Date of Infection'. Correction to typo.	01-01-2005 Discharges
National Hospital Data Quality Measure Data Transmission	Data re-transmission to the Joint Commission (clarification to JCAHO policy)	On page 9-4, ORYX data re-transmission section bullet #2 was modified to improve clarity: 'PMSs are required to correct their recognized data integrity issues and re-transmit up to seven quarters of updated national hospital quality (core) measures and non-core measure data (due to the rolling quarters of the ORYX Performance Measure Reports that display up to 24 months of data) by the next regularly scheduled quarterly transmission deadline. Re-transmitted data may be inclusive of updated data previously submitted and/or data that may have been erroneously omitted. Re-transmission of corrected data from issues emanating at the client health care organization-level is encouraged whenever feasible. See associated fees that apply.'	ORYX data transmitted starting with 1/2005
National Hospital Data Quality Measure Data Transmission	Data re-transmission to the Joint Commission (clarification to JCAHO policy)	On page 9-5, Oryx data re-transmission section bullet #5 was modified to reflect the 2005 fee schedule: 'For the 2005 Performance Measurement System Agreement period, usual transmission fees (i.e., core: [\$39/per set * number of quarters transmitted*HCO count for the set] and non-core: [\$13/per measure * number of quarters transmitted*HCO count for that measure]) will apply for all re-transmission scenarios. In addition, a single quarterly \$3,500 handling charge will be invoiced to re-transmitting vendors, regardless of the volume, number of files, or frequency of re-transmissions made during that quarter.'	ORYX data transmitted starting with 1/2005

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National Hospital Data Quality Measure Data Transmission	Data re-transmission to the Joint Commission (clarification to JCAHO policy)	On page 9-5, Oryx data re-transmission section for bullet #7 the example was updated to reflect the 2005 data transmission schedule and associated Quality Report refresh dates.	ORYX data transmitted starting with 1/2005
National Hospital Data Quality Measure Data Transmission	Data Transmission Schedule for National Data Comparison Group	On page 9-6, Table 2, the 3Q2004 comparison group data will be available to measurement systems on 02/28/2005. Correction to typo.	ORYX data transmitted starting with 1/2005
National Hospital Data Quality Measure Data Transmission	XML file Layout	The XML file layout has been modified according to these release notes.	01-01-2005 Discharges
Appendix A	Table 1.1 Acute Myocardial Infarction (AMI)	Code 410.71 description should read, "Subendocardial, acute myocardial infarction-initial episode," page Appendix A-1.	01-01-2005 Discharges
Appendix A	Table 5.09	On page Appendix A-71, remove ICD-9-CM code 790.8, Viremia, unspecified.	01-01-2005 Discharges
Appendix A	Table 5.09	On page Appendix A-68, add ICD-9-CM code 567.2, Other suppurative peritonitis.	01-01-2005 Discharges
Appendix B	AMI-9	For variable 'RF05' definition changes TO : '250.01, 250.03, 250.10-250.93, 648.00-648.04'. Comma inserted between '250.01' and '250.03', page Appendix B-1.	01-01-2005 Discharges
Appendix B	AMI-9, PR-1 and PR-3	Header for definition column changed TO : 'ICD-9-CM Principal and/or Other Diagnosis/Procedure Codes', pages Appendix B-1 to Appendix B-5 and Appendix B-7 to Appendix B-8. Change allows possibility of diagnosis code or procedure code as risk factor.	01-01-2005 Discharges
Appendix B	AMI-9	For variable RF16, DELETE ICD-9-CM Diagnosis Code='278.0', page Appendix B-2. This is not a valid ICD-9-CM Diagnosis Code.	01-01-2005 Discharges
Appendix B	PR-1	For variable RF109M, DELETE ICD-9-CM Diagnosis Code='653.51', page Appendix B-6. This ICD-9-CM Diagnosis Code appears in variable RF118M.	01-01-2005 Discharges
Appendix B	PR-1	For variable RF119M_RF124M ADD Definition, 'RF119M multiplied by RF112M', page Appendix B-6. Definition for this data element was inadvertently left blank.	01-01-2005 Discharges
Appendix C	Table 1.6	On page Appendix C-9, add Ezetimibe/simvastatin	01-01-2005 Discharges
Appendix C	Table 1.6	On page Appendix C-10 add Vytorin.	01-01-2005 Discharges

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Appendix C	Table 1.7	Table 1.7 ARBs has been added to Appendix C	01-01-2005 Discharges
Appendix C	Table 2.1	Add the following medications to Table 2.1, Antimicrobial Medications: Azithromax Ciloxan Genticin Hydroxychloroquine Lyphocin Peditamycin Periostat Vancocin HCL VFEND Voriconazole	01-01-2005 Discharges
Appendix C	Table 2.1	Remove the following medications from Table 2.1, Antimicrobial Medications: Azulfidine Cipro IV Flagyl IV Floxin IV Merrem IV Primaxin IM Primaxin IV Rifadin IV Rocephin IM Convenience Kit Senox Septra IV Sulfasalazine	01-01-2005 Discharges
Appendix C	Table 2.2	On page Appendix C-20, add Adalimumab, and Abacavir-lamivudine to Table 2.2, Immunosuppressive Medications, on page Appendix C-25, add Emtricitabine-tenofovir.	01-01-2005 Discharges
Appendix C	Table 2.3	Remove Rocephin IM Convenience Kit from the Beta-Lactams table	01-01-2005 Discharges
Appendix C	Table 2.4	Remove Primaxin IV from the Beta-Lactams (Pseudomonal Risk) table.	01-01-2005 Discharges
Appendix C	Table 2.5	Add the following medications to the Macrolides (Non-ICU) table: Azithromax Erythrocin Peditamycin	01-01-2005 Discharges
Appendix C	Table 2.6	Add the following medications to the Macrolides (ICU) table: Azithromax E.E.S. E-Mycin Erythrocin ERYC EryPed Erythromycin Lactobionate Erythromycin Stearate PCE	01-01-2005 Discharges

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		Pediazole	
Appendix C	Table 2.8	Add Ciloxan to the Quinolones (PN-Pseudomonal Risk/SIP-Colon or Hysterectomy β -lactam Allergy) table	01-01-2005 Discharges
Appendix C	Table 2.10	Add Adoxa, DoxyCaps and Periostat to the Tetracyclines table	01-01-2005 Discharges
Appendix C	Table 2.11	Add Gentamicin and G-Mycin to the Aminoglycosides (Pseudomonal Risk) table	01-01-2005 Discharges
Appendix C	Table 2.12	Add Cleocin HCL and Cleocin Phosphate to the Clindamycin table	01-01-2005 Discharges
Appendix C	Table 2.13	Add Lyphocin and Vancocin HCL to the Glycopeptides table	01-01-2005 Discharges
Appendix C	Table 3.5	Add Cefoxitin to the Colon – Parenteral – Antibiotics – I table and delete Cefozitin and the duplicated Cefotetan from the same table.	01-01-2005 Discharges
Appendix C	Table 3.4	Add EYRC, Erythromycin/Sulfisoxazole and Pediamycin to the Colon – Oral Antibiotics – II table	01-01-2005 Discharges
Appendix C	Table 3.8	Add Lyphocin and Vancocin HCL to the CABG, Cardiac or Vascular, Hip/Knee Arthroplasty table	01-01-2005 Discharges
Appendix C	Table 3.9	Add Cleocin HCL and Cleocin Phosphate to the CABG, Cardiac or Vascular, Hip/Knee Arthroplasty, β -lactam allergic Colon and Hysterectomy – Antibiotics table	01-01-2005 Discharges
Appendix C	Table 3.10	Add the following medications to the All Surgeries – Antibiotic/Fluroquinolone table: Alatrofloxacin Mesylate Avelox Ciloxan Ciprofloxacin Hydrochloride Floxin Moxifloxacin Hydrochloride TEC-PAQ Trovafoxacin Mesylate Trovafoxacin/Alatrofloxacin Trovan	01-01-2005 Discharges
Appendix C	Table 3.11	Add G-Mycin to the Colon, Hysterectomy β -lactam Allergy - Antibiotics table	
Appendix H	Table 1.5	Add title to the top of the page “ <i>LVSD Notes Table cont.</i> ”, page Appendix H-5.	01-01-2005 Discharges
Appendix I	Appendix I	Changes have been made in the “Definitions of Valid Format for Patient Identifiers” on page Appendix 1-2. Delete the last 2 bullets under “If First Character is Numeric” and the last bullet under “If the First Character is Alpha”.	01-01-2005 Discharges