The Joint Commission has approved the following revisions for prepublication. While revised requirements are published in the semiannual updates to the print manuals (as well as in the online E-dition®), accredited organizations and paid subscribers can also view them in the monthly periodical The Joint Commission Perspectives®. To begin your subscription, call 800-746-6578 or visit http://www.jcrinc.com.

Please note: Where applicable, this report shows current standards and EPs first, with deleted language struck-through. Then, the revised requirement follows in bold text, with new language underlined.

**APPLICABLE TO THE COMPREHENSIVE CARDIAC CENTER CERTIFICATION PROGRAM**

**Effective January 1, 2022**

**Certification Participation Requirements (CPR) Chapter**

**CPR 5**

The organization submits comprehensive cardiac center performance measurement data to The Joint Commission on a routine basis.

**Element(s) of Performance for CPR 5**

1. The organization makes its comprehensive cardiac center performance measurement and nationally audited registry data available during on-site certification reviews.

2. The organization submits comprehensive cardiac center performance measurement and/or nationally audited registry data to The Joint Commission upon request and at the time of the intracycle and recertification reviews.

**Performance Improvement (CCCPI) Chapter**

**CCCPI.2**

The comprehensive cardiac center collects data to monitor its performance.

**Element(s) of Performance for CCCPI.2**

**Key:** □ indicates that documentation is required; □□ indicates an identified risk area;
2. The center utilizes a nationally audited registry or similar data collection tool to monitor the data and measure outcomes for, at minimum, the following:
- Acute myocardial infarction (AMI)
- Coronary artery bypass grafting (CABG)
- Cardiac rehabilitation
- Diagnostic cardiac catheterization procedures
- Heart Failure
- Implantable cardioverter defibrillator (ICD) procedures
- Percutaneous coronary intervention (PCI)
- Valve replacement/repair

2. The center utilizes an audited registry to monitor the data and measure outcomes for, at minimum, the following:
- Acute myocardial infarction (AMI)
- Coronary artery bypass grafting (CABG)
- Cardiac rehabilitation
- Diagnostic cardiac catheterization procedures
- Heart Failure
- Implantable cardioverter defibrillator (ICD) procedures
- Percutaneous coronary intervention (PCI)
- Valve replacement/repair

Note: See the Glossary for the definition of audited registry.
3. The center demonstrates sufficient quality and/or maintenance of experience through:
   - Coronary artery bypass grafting of 125 patients/annual volume requirement (alone or in combination with other procedures). Hospitals with less than annual volume of 125 patients undergoing coronary artery bypass grafting must participate in a nationally audited registry and demonstrate risk-adjusted outcomes that meet or exceed the national average.
   - Valve replacement/repair of 50 patients/annual volume requirement (alone or in combination with other procedures). Hospitals with less than annual volume of 50 patients undergoing valve replacement/repair must participate in a nationally audited registry and demonstrate outcomes that meet or exceed the national average for risk-adjusted outcomes.
   - Percutaneous coronary intervention (PCI) of 200 patients/annual volume requirement. Hospitals with less than annual volume of 200 patients must participate in a nationally audited registry for catheterization and interventional procedures and demonstrate outcomes that meet or exceed the national average for risk-adjusted outcomes.
   - Primary PCI for ST-segment elevation myocardial infarction (STEMI) of 36 patients/annual volume requirement. Hospitals with less than annual volume of 36 patients must participate in a nationally audited registry for catheterization and interventional procedures and demonstrate outcomes that meet or exceed the national average for risk-adjusted outcomes.

Note: See the Glossary for the definition of audited registry.