



PQRI Flow Sheet: Biliary Procedures

ANTIBIOTIC PROPHYLAXIS

VTE PROPHYLAXIS

Patient Name

Practice Medical Record Number

Birth Date (mm/dd/yyyy)

Male / Female Gender

National Provider Identifier (NPI)

Date of Service

CPT Code for Procedure

Auditing

All orders must be documented and can include:

- Written Orders
- Verbal Orders
- Standing Orders

VTE Prophylaxis

Includes at least one of the following:

- Low Molecular Weight Heparin
- Low-Dose Unfractionated Heparin
- Adjusted-Dose Warfarin
- Fondaparinux
- Mechanical Prophylaxis

Eligibility

PQRI does not include Medicare managed care plans. The program is only applicable to traditional Medicare.

Patient Eligibility

| | | | |
|--|-----|----|--|
| 1. Is the patient entitled to traditional Medicare? | YES | NO | If NO is circled for any question, STOP. Do not report quality data for antibiotic measures. |
| 2. Is the patient's procedure included in the following list: 47420, 47425, 47460, 47480, 47490, 47510, 47511, 47525, 47530, 47560, 47561, 47570, 47600, 47605, 47610, 47612, 47620, 47700, 47701, 47711, 47712, 47715, 47719, 47720, 47721, 47740, 47741, 47760, 47765, 47780, 47785, 47800, 47802, 47900? | YES | NO | |

Antibiotic Timing

If Yes, Report

| | | | |
|---|-----|----|------------|
| 1. Prophylactic antibiotic ordered to be administered (or administered) within 60 minutes prior to incision or start time *2 hours if fluoroquinolone or vancomycin | YES | NO | 4047F |
| 2. Prophylactic antibiotic NOT ordered to be delivered within 60 minutes for <u>medical reason</u> | YES | NO | 4047F - IP |

Document medical reason:

| | | | |
|---|-----|----|------------|
| 3. Prophylactic antibiotic NOT ordered to be delivered within 60 minutes, no reason specified | YES | NO | 4047F - 8P |
|---|-----|----|------------|

Antibiotic Selection

If Yes, Report

| | | | |
|--|-----|----|------------|
| 1. Cefazolin or cefuroxime ordered for antibiotic prophylaxis | YES | NO | 4041F |
| 2. Cefazolin or cefuroxime NOT ordered for <u>medical reason</u> (allergy, antibiotic resistance, etc) | YES | NO | 4041F - IP |

Document medical reason:

| | | | |
|---|-----|----|------------|
| 3. Cefazolin or cefuroxime NOT ordered, no reason specified | YES | NO | 4041F - 8P |
|---|-----|----|------------|

Antibiotic Discontinuation

If Yes, Report

| | | | |
|---|-----|----|-----------------------------|
| 1. Prophylactic antibiotic ordered to be discontinued (or discontinued) within 24 hours of surgery end-time | YES | NO | 4049F AND 4046F |
| 2. Prophylactic antibiotic NOT ordered to be discontinued within 24 hours for a <u>medical reason</u> | YES | NO | 4049F - IP AND 4046F |

Document medical reason:

| | | | |
|--|-----|----|-----------------------------|
| 3. Prophylactic antibiotic NOT ordered to be discontinued within 24 hours, no reason specified | YES | NO | 4049F - 8P AND 4046F |
| 4. Prophylactic antibiotic NOT administered for procedure | YES | NO | 4042F |

Patient Eligibility

| | | | |
|--|-----|----|---|
| 1. Is the patient entitled to traditional Medicare? | YES | NO | If NO is circled for any question, STOP. Do not report quality data for VTE measures. |
| 2. Is the patient's procedure included in the following list: 47400, 47420, 47425, 47460, 47480, 47500, 47505, 47560, 47561, 47562, 47563, 47564, 47570, 47600, 47605, 47610, 47612, 47620, 47630, 47700, 47701, 47711, 47712, 47715, 47720, 47721, 47740, 47741, 47760, 47765, 47780, 47785, 47800, 47801, 47802, 47900? | YES | NO | |

VTE Prophylaxis (click [here](#) for additional information)

If Yes, Report

| | | | |
|--|-----|----|------------|
| 1. VTE prophylaxis ordered or delivered within 24 hours prior to incision or start time or within 24 hours of surgery end time | YES | NO | 4044F |
| 2. VTE prophylaxis NOT ordered for <u>medical reason</u> | YES | NO | 4044F - IP |

Document medical reason:

| | | | |
|---|-----|----|------------|
| 3. VTE prophylaxis NOT ordered, no reason specified | YES | NO | 4044F - 8P |
|---|-----|----|------------|