**Measure #30 (NQF 0269): Perioperative Care: Timely Administration of Prophylactic Parenteral Antibiotics**

**2013 PQRS OPTIONS FOR INDIVIDUAL MEASURES: CLAIMS, REGISTRY**

**DESCRIPTION:**
Percentage of surgical patients aged 18 years and older who receive an anesthetic when undergoing procedures with the indications for prophylactic parenteral antibiotics for whom administration of the prophylactic parenteral antibiotic ordered has been initiated within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required).

**INSTRUCTIONS:**
This measure is to be reported **each time** an anesthesia service in the denominator is provided for surgical patients during the reporting period. There is no diagnosis associated with this measure. It is anticipated that clinicians who provide anesthesia services, as specified in the denominator coding*, will submit this measure - reporting on the timeliness of parenteral antibiotic administration. The clinician providing anesthesia services does not need to be the clinician who ordered the prophylactic parenteral antibiotic.

* The anesthesia services included in the denominator are associated with some surgical procedures for which prophylactic parenteral antibiotics may not be indicated. As a result, clinicians should report 4047F-8P for those instances in which anesthesia services are provided but not associated with surgical procedures for which prophylactic parenteral antibiotics are indicated.

If the clinician providing anesthesia services orders AND administers the prophylactic parenteral antibiotic within the appropriate timeframe, report quality-data code CPT II 4048F. Report CPT II 4048F with the **1P** modifier in circumstances where the prophylactic parenteral antibiotic was not given for medical reasons (e.g., contraindicated, patient already receiving antibiotics).

**Measure Reporting via Claims:**
CPT codes and patient demographics are used to identify patients who are included in the measure’s denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure via claims, submit the listed CPT codes, and the appropriate CPT Category II code **OR** the appropriate CPT Category II code **with** the modifier. The modifiers allowed for this measure are: **1P**- medical reasons, **8P**- reason not otherwise specified. All measure-specific coding should be reported on the claim(s) representing the eligible encounter as the denominator codes.

**Measure Reporting via Registry:**
CPT codes and patient demographics are used to identify patients who are included in the measure’s denominator. The numerator options as described in the quality-data codes are used to report the numerator of the measure.

The quality-data codes listed do not need to be submitted for registry-based submissions; however, these codes may be submitted for those registries that utilize claims data.

**DENOMINATOR:**
All surgical patients aged 18 years and older who receive an anesthetic when undergoing procedures* with the indications for prophylactic parenteral antibiotics.
**DENOMINATOR NOTE:** Anesthesia services included in denominator are associated with some surgical procedures for which prophylactic parenteral antibiotics may not be indicated. Clinicians should report 4047F-8P for those instances in which anesthesia services are provided but not associated with surgical procedures for which prophylactic parenteral antibiotics are indicated.

**Denominator Criteria (Eligible Cases):**
Patients aged ≥ 18 years on date of encounter

**AND**

**Patient encounter during the reporting period (CPT):** Anesthesia codes for which prophylactic parenteral antibiotics are commonly indicated for associated surgical procedure(s): 00100, 00102, 00103, 00120, 00140, 00145, 00147, 00160, 00162, 00164, 00170, 00172, 00174, 00176, 00190, 00192, 00210, 00211, 00212, 00214, 00215, 00216, 00218, 00220, 00222, 00300, 00320, 00322, 00350, 00352, 00400, 00402, 00404, 00406, 00450, 00452, 00454, 00470, 00472, 00474, 00500, 00528, 00529, 00530, 00532, 00534, 00537, 00539, 00540, 00541, 00542, 00546, 00548, 00550, 00552, 00554, 00556, 00561, 00563, 00564, 00566, 00568, 00570, 00572, 00574, 00576, 00578, 00579, 00580, 00600, 00604, 00620, 00622, 00624, 00626, 00630, 00632, 00634, 00670, 00700, 00730, 00750, 00752, 00754, 00756, 00770, 00790, 00792, 00794, 00796, 00797, 00800, 00802, 00820, 00830, 00832, 00840, 00844, 00846, 00848, 00851, 00853, 00860, 00862, 00864, 00865, 00866, 00868, 00870, 00880, 00882, 00902, 00904, 00906, 00908, 00910, 00912, 00914, 00916, 00918, 00920, 00921, 00922, 00924, 00926, 00928, 00930, 00932, 00934, 00936, 00938, 00940, 00942, 00944, 01120, 01140, 01150, 01170, 01173, 01180, 01190, 01202, 01210, 01212, 01214, 01215, 01230, 01232, 01234, 01250, 01260, 01270, 01272, 01274, 01320, 01360, 01382, 01392, 01400, 01402, 01404, 01430, 01432, 01440, 01442, 01464, 01460, 01470, 01472, 01474, 01480, 01482, 01484, 01486, 01500, 01502, 01520, 01522, 01610, 01612, 01630, 01634, 01636, 01638, 01650, 01652, 01654, 01656, 01670, 01710, 01712, 01714, 01716, 01732, 01740, 01742, 01744, 01756, 01758, 01760, 01770, 01772, 01780, 01782, 01810, 01829, 01830, 01832, 01840, 01842, 01844, 01850, 01852, 01924, 01925, 01926, 01951, 01952, 01953, 01961, 01962, 01963, 01965, 01966, 01968, 01969

**NUMERATOR:**
Surgical patients for whom administration of the prophylactic parenteral antibiotic ordered has been initiated within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required).

**Numerator Instructions:** This measure seeks to identify the timely administration of prophylactic parenteral antibiotic. This administration should begin within one hour (if fluoroquinolone or vancomycin, two hours) prior to surgical incision.

**Numerator Quality-Data Coding Options for Reporting Satisfactorily:**
The antimicrobial drugs listed below are considered prophylactic parenteral antibiotics for the purposes of this measure. **4048F-8P should be reported when antibiotics from this table were not ordered.**

- Ampicillin/sulbactam
- Aztreonam
- Cefazolin
- Cefmetazole
- Cefotetan
- Cefoxitin
- Cefuroxime
- Ciprofloxacin
- Clindamycin
- Ertapenem
- Erythromycin base
- Gentamicin
- Levofloxacin
- Metronidazole
- Moxifloxacin
- Neomycin
- Vancomycin

**NUMERATOR NOTE:** “Ordered” includes instances in which the prophylactic parenteral antibiotic is ordered by the clinician performing the surgical procedure OR is ordered by the clinician providing the anesthesia services.
Documentation that Prophylactic Parenteral Antibiotic was Administered Within Specified Timeframe

CPT II 4048F: Documentation that administration of prophylactic parenteral antibiotic was initiated within one hour (if fluoroquinolone or vancomycin, two hours) prior to surgical incision (or start of procedure when no incision is required), as ordered.

OR

Prophylactic Parenteral Antibiotic not Administered for Medical Reasons (eg, contraindicated, patient already receiving antibiotics)

Append a modifier (1P) to CPT Category II code 4048F to report documented circumstances that appropriately exclude patients from the denominator.

4048F with 1P: Documentation of medical reason(s) for not initiating administration of prophylactic parenteral antibiotics as specified (eg, contraindicated, patient already receiving antibiotics).

OR

If patient is not eligible for this measure because prophylactic parenteral antibiotic not ordered, report:

Prophylactic Parenteral Antibiotic not Ordered

Append a reporting modifier (8P) to CPT Category II code 4047F to report circumstances when the patient is not eligible for the measure.

4047F with 8P: No documentation of order for prophylactic parenteral antibiotics to be given within one hour (if fluoroquinolone or vancomycin, two hours) prior to surgical incision (or start of procedure when no incision is required)

OR

Prophylactic Parenteral Antibiotic Ordered but not Initiated Within One Hour, Reason not Otherwise Specified

Append a reporting modifier (8P) to CPT Category II code 4048F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

4048F with 8P: Administration of prophylactic parenteral antibiotic was not initiated within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required), reason not otherwise specified.

RATIONALE:
The appropriate timing of administration of prophylactic parenteral antibiotics has been demonstrated to reduce the incidence of surgical wound infections. Available evidence suggests that although most surgical patients receive a prophylactic antibiotic, many do not receive the drug within one hour before incision as recommended.

CLINICAL RECOMMENDATION STATEMENTS:
The anti-infective drug should ideally be given within 30 minutes to 1 hour before the initial incision to ensure its presence in an adequate concentration in the targeted tissues. For most procedures, scheduling administration at the time of induction of anesthesia ensures adequate concentrations during the period of potential contamination. Exceptions: cesarean procedures (after cross clamping of the umbilical cord); colonic procedures (starting 19 hours before the scheduled time of surgery). (ASHP)

Infusion of the first antimicrobial dose should begin within 60 minutes before incision. However, when a fluoroquinolone or vancomycin is indicated, the infusion should begin within 120 minutes before incision to prevent antibiotic-associated reactions. Although research has demonstrated that administration of the antimicrobial at the time of anesthesia induction is safe and results in adequate serum and tissue drug levels at the time of incision, there was no consensus that the infusion must be completed before incision. (SIPGWW)