



AAO13: Bell's Palsy: Inappropriate Use of Magnetic Resonance Imaging or Computed Tomography Scan (Inverse Measure)

High Priority: Yes; Appropriate Use
NQF Number: N/A

Percentage of patients age 16 years and older with a new onset diagnosis of Bell's palsy within the past 3 months who had a magnetic resonance imaging (MRI) or a computed tomography scan (CT) of the internal auditory canal, head, neck or brain ordered for the primary diagnosis of Bell's palsy.

Denominator:

All patients age 16 years and older with a diagnosis of new onset Bell's palsy within the past 3 months.

Denominator Exclusions:

None

Denominator Exceptions:

Medical reason for ordering an MRI or CT scan of the internal auditory canal, head, neck or brain for the primary diagnosis of Bell's palsy including:

- Patient with diagnosis of Bell's palsy more than 3 months prior to the date of the referral or performance of imaging with no signs of recovery.
- Patient with recurrent diagnosis of Bell's palsy.
- Patient with paralysis limited to a specific branch, or branches, of the facial nerve.
- Patients with paralysis associated with other cranial nerve abnormalities, including olfactory nerve, glossopharyngeal nerve, vagus nerve, and hypoglossal nerve.
- Patient with other diagnosed neurological abnormalities, including simultaneous sudden hearing loss, tinnitus, and/or dizziness; stroke; tumor; seizures; extremity weakness; and/or extremity hypoaesthesia.

Numerator:

Patients with whom a MRI or CT scan of the internal auditory canal, head, neck, or brain was ordered for a primary diagnosis of Bell's palsy.

Numerator Exclusions:

None

Measure Classifications:

Measure Type: Process

National Quality Strategy (NQS) domain: Efficiency and Cost Reduction

Meaningful Measure Area: Appropriate Use of Healthcare

Care Setting(s): Ambulatory Care: Clinician Office/Clinic

Includes Telehealth: Yes

Calculation: 1st Performance Rate

Inverse measure: Yes

Continuous measure: No

Proportional measure: Yes

Ratio measure: No

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Risk Adjusted measure: No

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