CBE ID

0472

Title

Appropriate Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision – Cesarean section.

Project

Perinatal

Endorsement Status

Endorsement Removed

Is Under Review

No

Previous Endorsement Cycle

Full Year 2015

Removal Date

Tue, 10/13/2015 - 20:00

Initial Endorsement

Thu, 10/23/2008 - 20:00

Steward

Massachusetts General Hospital

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

Percentage of patients undergoing cesarean section who receive appropriate prophylactic antibiotics within 60 minutes of the start of the cesarean delivery, unless the patient is already receiving appropriate antibiotics

1.7 Measure Type

Process

1.8 Level of Analysis

Facility, Population: Regional and State

1.9 Care Setting

Inpatient/Hospital

1.14 Numerator

Percentage of women who receive recommended antibiotics within one hour before the start of cesarean section. This requires that (a) the antibiotic selection is consistent with current evidence and practice guidelines, and (b) that the antibiotics are given within an hour before delivery.If the patient is already receiving appropriate antibiotics, for example for chorioamnionitis, additonal dosing is not necessary.

1.15 Denominator

All patients undergoing cesarean section without evidence of prior infection or already receiving prophylactic antibiotics for other reasons. Patients with significant allergies to penicillin and/or cephalosporins AND allegies to gentamicin and/or clindamycin are also excluded.

1.20 Types of Data Sources

Claims Data, Electronic Health Records: Electronic Health Records, Other, Paper Patient Medical Records

6.1.2 Current or Planned Use(s)

Payment Program, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

6.1.3 Current Use(s)

Payment Program, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Exclusions

Women with evidence of prior infection or already receiving prophylactic antibiotics for other reasons; or with significant allergies to penicillin and/or cephalosporins AND allegies to gentamicin and/or clindamycin.

We do not exclude patients having emergency cesarean deliveries. We recognize that while in the case of most urgent and emergent cesarean deliveries administering timely antibiotic prophylaxis will be possible, very rarely clinical circumstances may not permit administration of antibiotic prophylaxis before skin incisions. Specifying these unusual circumstances, especially from readily abstracted medical record data, is not possible/feasible. Allowing a self-defined exclusion risks inappropriate definition. Instead we recognize that ideal performance on this measure may not be 100% given the small number of unusual emergencies and/or other circumstances. Providers/facilities should however target a 100% goal by, among other efforts, considering how antibiotic prophylaxis will be appropriately delivered even in the case of emergencies

Planned Use

Payment Program, Public Reporting, Quality Improvement (Internal to the specific organization), Quality Improvement with Benchmarking (external benchmarking to multiple organizations)

Risk Adjustment

No risk adjustment or risk stratification

Target Population

Women

Steward Organization

Massachusetts General Hospital

Steward POC email

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