Release Notes:
Measure Information Form
Version 2.1a

SURGICAL CARE IMPROVEMENT PROJECT NATIONAL QUALITY MEASURES

Set Measure ID #	Measure Short Name
Infection	
SCIP-Inf-1a	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Overall Rate
SCIP-Inf-1b*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - CABG
SCIP-Inf-1c*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Other Cardiac Surgery
SCIP-Inf-1d*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Hip Arthroplasty
SCIP-Inf-1e*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Knee Arthroplasty
SCIP-Inf-1f*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Colon Surgery
SCIP-Inf-1g*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Hysterectomy
SCIP-Inf-1h*	Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision - Vascular Surgery
SCIP-Inf-2a	Prophylactic Antibiotic Selection for Surgical Patients - Overall Rate
SCIP-Inf-2b*	Prophylactic Antibiotic Selection for Surgical Patients - CABG
SCIP-Inf-2c*	Prophylactic Antibiotic Selection for Surgical Patients - Other Cardiac Surgery
SCIP-Inf-2d*	Prophylactic Antibiotic Selection for Surgical Patients - Hip Arthroplasty
SCIP-Inf-2e*	Prophylactic Antibiotic Selection for Surgical Patients - Knee Arthroplasty
SCIP-Inf-2f*	Prophylactic Antibiotic Selection for Surgical Patients - Colon Surgery
SCIP-Inf-2g*	Prophylactic Antibiotic Selection for Surgical Patients - Hysterectomy
SCIP-Inf-2h*	Prophylactic Antibiotic Selection for Surgical Patients - Vascular Surgery

*Joint Commission ONLY

SURGICAL CARE IMPROVEMENT PROJECT NATIONAL QUALITY MEASURES

Set Measure ID #	Measure Short Name
SCIP-Inf-3a	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Overall Rate
SCIP-Inf-3b*	Prophylactic Antibiotics Discontinued Within 48 Hours After Surgery End Time - CABG
SCIP-Inf-3c*	Prophylactic Antibiotics Discontinued Within 48 Hours After Surgery End Time - Other Cardiac Surgery
SCIP-Inf-3d*	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Hip Arthroplasty
SCIP-Inf-3e*	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Knee Arthroplasty
SCIP-Inf-3f*	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Colon Surgery
SCIP-Inf-3g*	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Hysterectomy
SCIP-Inf-3h*	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time - Vascular Surgery
SCIP-Inf-4	Cardiac Surgery Patients With Controlled 6 A.M. Postoperative Serum Glucose
SCIP-Inf-6	Surgery Patients with Appropriate Hair Removal
SCIP-Inf-7	Colorectal Surgery Patients with Immediate Postoperative Normothermia
Cardiac	
SCIP-Card-2	Surgery Patients on Beta Blocker Therapy Prior to Admission Who Received a Beta Blocker During the Perioperative Period
VTE	
SCIP-VTE-1	Surgery Patients with Recommended Venous Thromboembolism Prophylaxis Ordered
SCIP-VTE-2	Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours Prior to Surgery to 24 Hours After Surgery

*Joint Commission ONLY

SCIP DATA ELEMENT LIST

General Data Element Name	Collected For:
*Abstraction Date**	All Records*
*Abstractor Identification (ID) Number**	All Records*
Admission Date	All Records
Admission Source	All Records
Admission Type	All Records
Birthdate	All Records
Case Identifier[1]**	All Records**
Discharge Date	All Records (Used in Algorithm for SCIP-Inf-4)
Discharge Status	All Records
*First Name**	All Records*
*Health Care Organization Identifier***	All Records (Used in Data Transmission)**
Hispanic Ethnicity	All Records
*ICD Population Size***	Used in Data Transmission and Verification**
ICD-9-CM Other Diagnosis Codes	All Records
ICD-9-CM Other Procedure Codes	All Records
ICD-9-CM Other Procedure Dates	All Records
ICD-9-CM Principal Diagnosis Code	All Records
ICD-9-CM Principal Procedure Code	All Records (Used in Algorithm for all SCIP Measures)
ICD-9-CM Principal Procedure Date	All Records
*Last Name**	All Records*
National Provider Identifier (NPI)	Optional for All Records
Other Patient Case Identifier[2]	All Records
Patient HIC #[2]	All Records
Patient Social Security Number[2]	All Records
Payment Source	All Records
*Performance Measure Identifier***	Used in Data Transmission**
*Performance Measurement System (PMS) Identifier***	Used in Data Transmission and Verification**
*Physician 1**	Optional for All Records*
*Physician 2**	Optional for All Records*
Postal Code	All Records
Provider ID	All Records
Race	All Records
Sample	All Records (Used in Data Transmission)
Sex	All Records

Algorithm Output Data Element Name	Collected For:
*Measure Category Assignment***	Used for Measure Calculation**

*CMS ONLY
**Joint Commission ONLY

[1] Case Identifier is required for all episodes of care collected for the Joint Commission.
[2] These patient identifiers are required to uniquely identify an episode of care for the Hospital Quality Alliance.

SCIP DATA ELEMENT LIST

SCIP Data Element Name	Collected For:
Antibiotic Administration Date	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3
Antibiotic Administration Route	SCIP-Inf-1, SCIP-Inf-2
Antibiotic Administration Time	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3
Antibiotic Allergy	SCIP-Inf-2
Antibiotic Name	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3
Antibiotic Received	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3
Beta Blocker Current Medication	SCIP-Card-2
Beta Blocker Perioperative	SCIP-Card-2
Contraindication to Beta Blocker - Perioperative	SCIP-Card-2
Contraindication to VTE Prophylaxis	SCIP-VTE-1, SCIP-VTE-2
Date of Infection	SCIP-Inf-3
Discharge Time	SCIP-VTE-1, SCIP-VTE-2
Documented Bleeding Risk	SCIP-VTE-1, SCIP-VTE-2
Glucose POD 1	SCIP-Inf-4
Glucose POD 2	SCIP-Inf-4
Infection Prior to Anesthesia	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3, SCIP-Inf-4, SCIP-Inf-7
Intraop Death	SCIP-Inf-7
Neuraxial Anesthesia	SCIP-VTE-1, SCIP-VTE-2
Oral Antibiotics	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3
Other Surgeries	SCIP-Inf-1, SCIP-Inf-3
Perioperative Death	SCIP-Card-2
Postoperative Infections	SCIP-Inf-3
Preadmission Warfarin	SCIP-VTE-1, SCIP-VTE-2
Preop Hair Removal	SCIP-Inf-6
Surgery End Date	SCIP-Inf-2, SCIP-Inf-3, SCIP-Inf-4, SCIP-VTE-1, SCIP-VTE-2
Surgery End Time	SCIP-Inf-2, SCIP-Inf-3, SCIP-VTE-1, SCIP-VTE-2
Surgery Start Date	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3, SCIP-Inf-4, SCIP-Inf-6, SCIP-Inf-7, SCIP-Card-2, SCIP-VTE-1, SCIP-VTE-2,
Surgical Incision Time	SCIP-Inf-1, SCIP-Inf-2, SCIP-Inf-3, SCIP-VTE-1, SCIP-VTE-2
Temperature Value	SCIP-Inf-7
Vancomycin	SCIP-Inf-2
VTE Laparoscope	SCIP-VTE-1, SCIP-VTE-2
VTE Prophylaxis	SCIP-VTE-1, SCIP-VTE-2
VTE Timely	SCIP-VTE-2

Surgical Care Improvement Project Measure Set Population

The population for all measure sets is identified using the same process steps. The order of data flow is:

- First, identify all discharges that meet the definition of the data element *ICD Population Size*, as defined in the 'Sampling Availability' discussion within the Sampling Methods section of this manual. This data pull utilizes administrative data such as ICD-9-CM diagnosis and procedure codes, admission date, and birthdate.

  Reporting systems must apply all ICD-9-CM diagnosis and procedure codes included in the appropriate *ICD Population Size* definition. This identification process must be completed prior to the application of data integrity filter, measure exclusions, and the application of sampling methodology.

- Second, if the health care organization is sampling, use the population identified above and pull the sample of medical records for each sampling strata. Refer to the 'Sample Size Requirements' discussion within the Sampling Methods section of this manual to determine the appropriate sample size for each strata.

- Third, collect or abstract from the identified medical records the EOC level data elements that are required for the measure set. If the hospital is not sampling, use the medical records identified in the first data pull. If the hospital is sampling, use the medical records identified after the second data pull.

After the measure set population is identified, the data are run through the measure algorithms that comprise the set. All of the Surgical Care Improvement Project (SCIP) measures use the same initial common algorithm logic.

The following algorithm should be used to process all records for which EOC level data elements have been collected or abstracted using the above order of data flow for the SCIP measure set. Records with a measure category assignment of "B" (not in measure population) will not need to be processed through individual measure algorithms. Records with a measure category assignment of "A" (missing or invalid population data) will also not need to be processed through the individual measure algorithms. However, the total count of records with an "A" category assignment must be added to the "A" count (number of cases with missing/invalid population) for each individual measure. This will provide a total count of all records that could not be processed through each measure due to missing or invalid data. (Performance measurement systems need to refer to the *ORYX® Data Quality Manual* for greater detail.)

Initial algorithm logic, common to all Measures in the SCIP set