

BMC2

PCI Report Dictionary

A guide that provides line-item details for BMC2 PCI facility and physician level reports. Revised 2023 Q3.

Matching NCDR & BMC2 Records

The following fields are used to match BMC2 records to NCDR records:

- NCDR Client ID
 - NCDR Patient or Patient Other ID Number
 - Procedure Date & Time (within 24 hours will be considered matched)
 - Discharge Date
-

Report Column Explanation

Example:

	Collaborative			Hospital		
	n	Denom	Pct.	n	Denom	Pct.
Primary Access						
Femoral	416	1104	37.7%	52	184	28.3%
Radial	686	1104	62.1%	130	184	70.7%
Secondary Access Site	83	1107	7.5%	18	185	9.7%

Mechanical Support	28	83	3.4%	8	18	44.4%
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Collaborative: data in these columns pertain to all non-federal facilities performing PCI in the State of Michigan.

Hospital: data in these columns pertain to an individual facility.

Case Mix

Discharges

Number of discharges undergoing one or more PCI procedures that were discharged during the reporting period.

Procedures

Number of percutaneous coronary intervention procedures performed in which discharge date is during the reporting period.

Acute Coronary Syndrome

Numerator: Number of procedures in which the PCI indication is documented as any of these options: ST-Elevation MI (STEMI) or equivalent, NSTEMI-ACS (NCDR#7825).

Denominator: Procedures

When including timeframes Q1 2018 and prior:

Numerator: Number of procedure in which the PCI indication is documented as any of these options: STEMI or equivalent, PCI for high risk Non-STEMI or unstable angina (NCDR V 4.4 #7035)

Denominator: Total Procedures

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

STEMI

Numerator: Number of procedures in which the PCI indication is documented as ST-Elevation MI (STEMI) or equivalent (NCDR#7825 any of the STEMI indications).

Denominator: Acute coronary syndrome.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which the PCI indication is documented as STEMI or equivalent (NCDR 4.4 #7035)

Denominator: Acute coronary syndrome.

NSTE-ACS

Numerator: Number of procedures in which the PCI indication is documented as NSTE-ACS (NCDR#7825).

Denominator: Acute coronary syndrome.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which the PCI indication is documented as "PCI for high risk Non-STEMI or unstable angina" (NCDR V 4.4 #7035)

Denominator: Acute coronary syndrome.

Low risk Acute Coronary Syndrome/USA

Numerator: Number of NSTE-ACS procedures in which BMC2 NSTE-ACS ="USA", BMC2 "Presented to cath lab="home", and Pre-Procedure Troponins (I or T)=not drawn (NCDR#6091 and 6096).

Denominator: NSTE-ACS.

When including timeframes Q1 2018 and prior:

Numerator: Procedures with: "Unstable Angina" selected for NCDR v 4.4 field #5000 (CAD Presentation), "not Drawn" selected for NCDR v 4.4 field #'s 7306 and 7311(Troponin I and Troponin T), and "other" selected for NCDR v 4.4 field # 3010 (Admit Source).

Denominator: Procedures with "Unstable Angina" selected for NCDR v 4.4 field#5000 (CAD Presentation).

(Procedures populating into this line item will also populate into the "Acute Coronary Syndrome" line item. This is a subset of the "Acute Coronary Syndrome" line item.)

Cardiovascular Instability at Start

Numerator: Number of procedures in which cardiovascular instability is documented at start of procedure (NCDR#7410)

Denominator: Total procedures.

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Cardiogenic Shock at Start

Numerator: Number of procedures in which "Cardiogenic Shock" or "Refractory Cardiogenic Shock" are selected (NCDR #7415).

Denominator: Procedures

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which Cardiogenic Shock at start of percutaneous coronary intervention is documented. (NCDR version 4.4 Sequence #7030)

Denominator: Total Procedures.

When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values for cardiogenic shock (even though "cardiogenic shock" is available to select in both versions).

Cardiac Arrest within 24 hours

Numerator: Number of discharges with BMC2 "Cardiac Arrest w/in 24 hrs" documented.

Denominator: Discharges

When including timeframes Q1 2018 and prior:

Numerator: The number of discharges with BMC2 Cardiac Arrest Field marked as "yes".

Denominator: Discharges.

Procedure

Primary Access-Arterial access site utilized for PCI

Femoral

Numerator: Number of procedures in which the femoral artery access site is documented (NCDR Seq #7320)

Denominator: procedures performed.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which the femoral artery access site is documented (NCDR v 4.4 #5350)

Denominator: Total procedures performed.

Radial

Numerator: Number of procedures in which the radial artery access site is documented (NCDR Seq #7320)

Denominator: procedures performed.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which the radial artery access site is documented (NCDR v 4.4 #5350)

Denominator: Total procedures performed.

Secondary Site

Numerator: Number of procedures in which there is a secondary arterial access site documented (BMC2 Secondary access site)

Denominator: procedures performed.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which there is a secondary arterial access site documented (BMC2 Secondary access site).

Denominator: Total procedures performed.

Adjunctive Measurements Obtained

Numerator: Number of procedures where adjunctive measures have been utilized (NCDR #7511 Native Vessel Adjunctive Measurements Obtained="Yes" **and/or** NCDR #7531 Graft Vessel Adjunctive Measurements Obtained="Yes")

Denominator: procedures

*This would include any adjunctive measurements obtained to diagnostically assess any lesion with angiographic stenosis of $\geq 50\%$, not necessarily the same lesion PCI was performed.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

FFR,iFR

Numerator: Number of procedures with FFR, iFR measurements obtained. (NCDR #7511 and/or #7531="Yes", and #7512/7532 "FFR Ratio" and/or #7513/7533 "iFR Ratio" have a value entered)

Denominator: procedures

These measurements would include those utilized to diagnostically assess any lesion with angiographic stenosis of $\geq 50\%$, not necessarily the same lesion PCI was performed.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

IVUS, OCT

Numerator: Number of procedures with IVUS and/or OCT measurements obtained. (NCDR #7511 Native Vessel Adjunctive Measurements Obtained="Yes" **and/or** NCDR #7531 Graft Vessel Adjunctive Measurements Obtained="Yes" **and** #7514/7534 "IVUS MLA" and/or #7515/7535 "OCT MLA" have a value entered)

Denominator: procedures

*This would include any adjunctive measurements obtained to diagnostically assess *any lesion* with angiographic stenosis of $\geq 50\%$, not necessarily the same lesion PCI was performed.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

Mechanical Ventricular Support

Numerator: Number of procedures where mechanical ventricular support has been utilized (NCDR #7420 "Ventricular Support"= "Yes" **and** NCDR #7422 "Mechanical Support"= "Yes")

Denominator: procedures

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

Ad hoc PCI

Numerator: Number of procedures where diagnostic coronary angiography (NCDR #7045="yes") **and** percutaneous coronary intervention (NCDR#7050="yes") are performed during the same procedure (NCDR #7000 procedure start date/time are the same).

Denominator: Total procedures.

When including timeframes Q1 2018 and prior:

Numerator: The number of procedures that have diagnostic coronary angiography (NCDR v 4.4 #5310= "yes") and PCI (NCDR v 4.4 #5305="yes") during the same cath lab visit (session).

Denominator: Total procedures.

Multi-Vessel PCI During Same Session

Numerator: The number of procedures that have multiple vessels intervened upon during the same cath lab visit (session) as the diagnostic procedure. NCDR #7000, 7005, 7045, and 7050 are utilized to determine what procedures are performed during the same cath lab visit .

Any combination of the following vessels (NCDR Field# 8001), with at least one segment involved, qualifies as a multi-vessel procedure:

- RCA= Segments 1-10
- Left Main = Segment 11a, 11b, 11c
- LAD= Segments 12-17 and 29 &29a
- Circumflex= Segments 18-27
- Ramus= Segments 28 & 28a

For example, one segment in RCA and two segments in Circumflex meets this definition, as does three in the LAD and one Ramus, one LAD, one RCA and one Circumflex. However, two segments in any given vessel does not meet this definition.

Denominator: Total procedures.

When including timeframes Q1 2018 and prior:

Numerator: The number of procedures that have multiple vessels intervened upon during the same cath lab visit (session) as the diagnostic procedure (NCDR v 4.4 #5305="yes" and NCDR v 4.4 #5310=yes)

Any combination of the following vessels (NCDR v 4.4 # 7105), with at least one segment involved, qualifies as a multi-vessel procedure:

- RCA= Segments 1-10
- Left Main = Segment 11
- LAD= Segments 12-17 and 29 &29a
- Circumflex= Segments 18-27
- Ramus= Segments 28 & 28a

For example, one segment in RCA and two segments in Circumflex meets this definition, as does three in the LAD and one Ramus, one LAD, one RCA and one Circumflex. However, two segments in any given vessel does not meet this definition.

Denominator: Total procedures.

Peak Intra-Procedure ACT Recorded

Numerator: Number of PCI procedures in which the Peak Activated Clotting Time (ACT) was recorded (BMC2 Procedure Information-Intraprocedure ACT="yes").

Denominator: Total number of PCI procedures which unfractionated heparin was administered (NCDR #7990)="Unfractionated Heparin" and #7995="yes"

Exclusion(s):

- Procedures with bivalirudin administered (NCDR #7990=Bivalirudin" and #7995="Yes")

When including timeframes Q1 2018 and prior:

Numerator: Number of PCI procedures in which the Peak Activated Clotting Time (ACT) was recorded (BMC2 Procedure Information-Intraprocedure ACT)

Denominator: Total number of PCI procedures which unfractionated heparin was administered (NCDR v 4.4 #9510 Procedure Medications Unfractionated Heparin (any)="yes").

Exclusion(s):

- Procedures with bivalirudin administered (NCDR v. 4.4 #9510 Procedure Medications Bivalirudin="Yes")

Peak ACT >= 350 Heparin Only

Numerator: Number of procedures with peak intra procedure >=350 seconds (BMC2 Procedure Information/Intra-procedure ACT ="yes").

Denominator: Procedures with unfractionated heparin administered(NCDR #7990="unfractionated heparin" and #7995="Yes")

Exclusion(s):

- Procedures with no peak ACT calculation entered in BMC2 (BMC2 Procedure Information-Intraprocedure ACT="Not documented" or value is missing)
- Procedures with glycoprotein IIb/IIIa inhibitors administered (BMC2 Medications Eptifibatide (Integrillin), or Tirofiban (Aggrastat) ="Given" and "During")
- Procedures with bivalirudin administered (NCDR #7990="Bivalirudin" and #7995="Yes")
- Procedures with BMC2 Outcomes in Lab "Rescue IIb/IIIa"="Yes"
- Procedures with Chronic Total Occlusion lesion (NCDR #8004="100%" and NCDR#8005="Yes")

When including timeframes Q1 2018 and prior:

Numerator: Number of PCI procedures in which the Peak Activated Clotting Time (ACT)>=350 (BMC2 Procedure Information-Intraprocedure ACT)

Denominator: Total number of PCI procedures which unfractionated heparin was administered (NCDR v 4.4 #9510 Procedure Medications Unfractionated Heparin (any)="yes").

Exclusion(s):

- Procedures with no peak ACT value entered into BMC2 (BMC2 Procedure Information-Intraprocedure ACT="Not documented" or value is missing)
- Procedures with bivalirudin administered (NCDR v. 4.4 #9510 Procedure Medications Bivalirudin="Yes")
- Procedures with glycoprotein IIb/IIIa inhibitors administered (NCDR v. 4.4 #9510 Procedure Medications GP IIb/IIIa="Yes")

Peak ACT >= 300 Heparin and GPI

Numerator: Number of procedures with peak intra procedure >=300 seconds (BMC2 Procedure Information-Intraprocedure ACT ="yes").

Denominator: Procedures with unfractionated heparin and GPI administered(NCDR #7990="unfractionated heparin"/ #7995="Yes" **AND** BMC2 Medications Eptifibatide (Integrillin), or Tirofiban (Aggrastat) ="Given" and "During")

Exclusion(s):

- Procedures with no peak ACT calculation entered in BMC2 (BMC2 Procedure Information-Intraprocedure ACT="Not documented" or value is missing)
- Procedures with bivalirudin administered (NCDR #7990="Bivalirudin" and #7995="Yes")
- Procedures with BMC2 Outcomes in Lab "Rescue IIb/IIIa"="Yes"
- Procedures with Chronic Total Occlusion lesion (NCDR #8004="100%" and NCDR#8005="Yes")

When including timeframes Q1 2018 and prior:

Numerator: Number of PCI procedures in which the Peak Activated Clotting Time (ACT)>=300 (BMC2 Procedure Information-Intraprocedure ACT)

Denominator: Total number of PCI procedures which unfractionated heparin and GP IIb/IIIa were administered (NCDR v 4.4 #9510 Procedure Medications Unfractionated Heparin (any)="yes" **and** GP IIb/IIIa="yes").

Exclusion(s):

- Procedures with no peak ACT value entered into BMC2 (BMC2 Procedure Information-Intraprocedure ACT="Not documented" or value is missing)
- Procedures with bivalirudin administered (NCDR v. 4.4 #9510 Procedure Medications Bivalirudin="Yes")

Lesion Details

Total Lesions

Number of lesions with attempted, or noted, treatment in patients discharged during the reporting period (NCDR #8000)

When including timeframes Q1 2019 and prior:

Number of lesions with attempted, or noted treatment in patients discharged during the reporting period (NCDR v 4.4 #7100)

Lesion Success

Numerator: Lesions with stenosis post procedure of equal to or less than 50% in cases of PTCA (NCDR Device=Balloon, Cutting Balloon, or Coated Balloon) only, and equal to or less than 10% in cases where stent is used (NCDR Device= Bare Metal Stent, Coated Stent, Drug Eluting Stent) alone or in combination with PTCA (NCDR Sequence #8025, 8027,8028) and post TIMI flow of 3 (NCDR Sequence #8026).

Denominator: Total lesions

Exclusion(s):

- Lesions with no post stenosis entered (NCDR#8025 blank)
- Lesions with no post TIMI flow entered (NCDR#8026 blank)
- Lesions in which guidewire is not able to cross lesion (NCDR#8023="No")
- Lesions in which no device was deployed (NCDR #8024="No")
- Lesions in which NCDR #8004 "Stenosis Immediately Prior to Rx "=100% **and** NCDR #8005 "If 100% Chronic Total Occlusion"="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Lesions with stenosis post procedure of equal to or less than 50% in cases of PTCA only(NCDR Device=Balloon, Cutting Balloon, or Coated Balloon) , and equal to or less than 10% in cases where stent (NCDR Device= Bare Metal Stent, Coated Stent, Drug Eluting Stent) is used alone or in combination with PTCA (NCDR v 4.4 #7210, 7225) and post TIMI flow of 3 (NCDR v 4.4 #7215).

Denominator: Total lesions excluding those lesions with no post stenosis documented, those cases in which guidewire is not able to cross lesion , those cases in which no device was deployed (NCDR v 4.4 #7210, #7205, #7220) or NCDR #7115 "Stenosis Immediately Prior to Rx "=100% **and** NCDR #7120 "If 100% Chronic Total Occlusion"="Yes"

IVUS/OCT Optimization

Numerator: Number of procedures where IVUS/OCT was utilized after PCI portion of procedure underway (BMC2 PCI IVUS/OCT post PCI="Yes").

Denominator: Total procedures

Exclusions:

- Brachytherapy=NCDR #8027/8028 "Intracoronary Device(s) Used"=any device labeled as "Brachytherapy" via NCDR ICD Device Master list.
- Attempted PCI=NCDR #8023 "Guidewire Across Lesion"="No" or NCDR #8024 "Device(s) Deployed"="No"

*This would not include any adjunctive measurements obtained to diagnostically assess any lesion. Specifically identifies when IVUS/OCT utilized to optimize PCI.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

IVUS/OCT Optimization LM, ISR, IST

Data Abstraction Instructions:

Numerator: Number of procedures where IVUS/OCT was utilized after PCI portion of procedure underway (BMC2 PCI IVUS/OCT post PCI="Yes").

Denominator: Procedures with treated segment of left main (LM) disease (NCDR #8001 segment 11a, 11b, 11c) **and/or** NCDR #8008 "Previously treated Lesion"="Yes" **and** NCDR #8010 "Treated with Stent"= "Yes" with either or both of the following being selected NCDR#8011 "In-Stent Restenosis"="Yes", NCDR#8012 "In-Stent Thrombosis"="Yes".

Exclusions:

- Brachytherapy=NCDR #8027/8028 "Intracoronary Device(s) Used"=any device labeled as "Brachytherapy" via NCDR ICD Device Master list.
- Attempted PCI=NCDR #8023 "Guidewire Across Lesion"="No" **or** NCDR #8024 "Device(s) Deployed"="No"

*This would not include any adjunctive measurements obtained to diagnostically assess any lesion. Specifically identifies when IVUS/OCT utilized to optimize PCI.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

Required:

No

LM Intervention

Numerator: The number of procedures that have the left main intervened upon (NCDR #8001 Segment(s) 11a, 11b, 11c).

Denominator: Total procedures

Exclusion(s):

- Prior CABG "Yes" (NCDR#4515)

*This includes any procedure that intervenes upon the left main (left main only interventions as well as multi-vessels procedures that intervene upon the left main).

When including timeframes Q1 2018 and prior:

Numerator: The number of procedures that have the left main intervened upon(NCDR v 4.4 # 7105, Segment= 11).

Denominator: Total procedures.

Exclusion(s):

- Prior CABG (NCDR v 4.4="yes")

*This includes any procedure that intervenes upon the left main (left main only interventions as well as multi-vessels procedures that intervene upon the left main).

Vein Graft

Numerator: Number of lesions treated located within vein graft vessels. (NCDR #8015="yes", #8016="Vein")

Denominator: Total lesions excluding those lesions which lack documentation of associated field. (NCDR #8015)

When including timeframes Q1 2018 and prior:

Numerator: Number of lesions treated located within vein graft vessels. (NCDR v 4.4 #7175="Vein")

Denominator: Total lesions excluding those lesions which lack documentation of associated field. (NCDR v 4.4 #7175)

Embollic Protection Device

Numerator: Number of vein graft lesions in which an embolic protection device was used. (NCDR #8027/8028="embolic protection")

Denominator: Total number of procedures in which lesion noted to be in vein graft. (NCDR#8015="yes", #8016="Vein")

When including timeframes Q1 2018 and prior:

Numerator: Number of vein graft lesions in which an embolic protection device was used (NCDR v 4.4 #7225="embolic protection device").

Denominator: Number of lesions treated located within vein graft vessels. (NCDR v 4.4 #7175="vein").

Calcium Modification Therapy (Any)

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy" and/or "Laser" and/or "Lithotripsy"

Denominator: Total procedures

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy" and/or "Laser". (Last available device list for this version July 2017)

Denominator: Total procedures

Orbital or Rotational Device

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy"

Denominator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy" and/or "Laser" and/or "Lithotripsy"

**if multiple calcium modification device types are utilized the procedure will be included in the numerator of each category.*

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy"

Denominator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy" and/or "Laser". (Last available device list for this version July 2017)

Laser Device

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Laser"

Denominator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type="Atherectomy" and/or "Laser" and/or "Lithotripsy"

**if multiple calcium modification device types are utilized the procedure will be included in the numerator of each category.*

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type= "Laser"

Denominator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type= "Atherectomy" and/or "Laser". (Last available device list for this version July 2017)

Lithotripsy Device

Numerator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type= "Lithotripsy"

Denominator: Number of procedures where NCDR#8027,8028 "Intracoronary Device(s) Used" device type= "Atherectomy" and/or "Laser" and/or "Lithotripsy"

**if multiple calcium modification device types are utilized the procedure will be included in the numerator of each category.*

When including timeframes of Q1 2018 and prior, no equivalent field available

Chronic Total Occlusion

Numerator: Number of procedures with at least one lesion entered as NCDR #8004 "Stenosis Immediately Prior to Rx"=100% **and** NCDR #8005 "If 100% Chronic Total Occlusion"="Yes"

Denominator: Total procedures

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures in which at least one lesion entered as NCDR #7115 "Stenosis Immediately Prior to Rx"=100% **and** NCDR #7120 "If 100% Chronic Total Occlusion"="Yes"

Denominator: Total procedures

CTO-Acute Coronary Syndrome

Numerator: Number of procedures in which the PCI indication is documented as any of these options: ST-Elevation MI (STEMI) or equivalent, NSTEMI-ACS (NCDR#7825).

Denominator: Chronic Total Occlusion

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures in which the PCI indication is documented as any of these options: STEMI or equivalent, PCI for high risk Non-STEMI or unstable angina (NCDR V 4.4 #7035)

Denominator: Chronic Total Occlusion

CTO Technical Success (ACS)

Numerator: NCDR#8025 "Stenosis (Post-Intervention) <= 30%, **and** NCDR#8026 "TIMI flow (Post Intervention)"= "III",

Denominator: Number of lesions where NCDR #8004 "Stenosis Immediately Prior to Rx"=100% **and** NCDR #8005 "If 100% Chronic Total Occlusion"="Yes" **AND** NCDR #7825 PCI indication=ST-Elevation MI (STEMI) or equivalent, NSTEMI-ACS

When including timeframes of Q1 2018 and prior:

Numerator: NCDR#7210 "Stenosis (Post-Intervention) <= 30%, **and** NCDR#7215 "Post Procedure TIMI flow"= "III"

Denominator: Number of lesions where NCDR #7115 "Stenosis Immediately Prior to Rx"=100% **and** NCDR #7120 "If 100% Chronic Total Occlusion"="Yes" **AND** PCI indication is documented as any of these options: STEMI or equivalent, PCI for high risk Non-STEMI or unstable angina (NCDR V 4.4 #7035)

CTO Procedural Success (ACS)

Numerator: NCDR#8025 "Stenosis (Post-Intervention) <= 50%, **and** NCDR#8026 "TIMI flow (Post Intervention)"= "III", **and** NCDR#9001 "Intra and Post-Procedure Events-Cardiac Tamponade"="No", **and** NCDR#9001 "Intra and Post-Procedure Events-Stroke Hemorrhagic"="No", **and** NCDR#9001 "Intra and Post-Procedure Events-Stroke Ischemic"="No", **and** NCDR#9001 "Intra and Post-Procedure Events-Stroke Undetermined"="No", **and** NCDR#10035 "If CABG-CABG Status=null or "elective", **and** NCDR#10105 "Discharge Status"="Alive".

Denominator: CTO-Acute Coronary Syndrome

*If more than one CTO lesion is attempted and/or treated during the same procedure all must be successfully treated to be considered a successful CTO procedure.

When including timeframes of Q1 2018 and prior:

Numerator: NCDR#7210 "Stenosis (Post-Intervention) <= 50%, **and** NCDR#7215 "Post Procedure TIMI flow"="III", **and** NCDR#8025 Tamponade="No", **and** NCDR#8015 CVA-Stroke="No", **and** NCDR#9005 "If CABG-CABG Status=null or "elective", **and** NCDR#9040 "Discharge Status"="Alive".

Denominator: CTO-Acute Coronary Syndrome

CTO Non-ACS

Numerator: Number of procedures in which the PCI indication is documented as any of these options: New Onset Angina <=2 months, Stable Angina, CAD (without Ischemic Sx), or Other (NCDR#7825).

Denominator: Chronic Total Occlusion

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedure in which the PCI indication is documented as any of these options: Staged PCI or Other (NCDR V 4.4 #7035)

Denominator: Chronic Total Occlusion

CTO Technical Success (Non-ACS)

Numerator: NCDR#8025 "Stenosis (Post-Intervention) <= 30%, **and** NCDR#8026 "TIMI flow (Post Intervention)"="III",

Denominator: Number of lesions where NCDR #8004 "Stenosis Immediately Prior to Rx"=100% **and** NCDR #8005 "If 100% Chronic Total Occlusion"="Yes" **AND** NCDR #7825 PCI indication=New Onset Angina <=2 months, Stable Angina, CAD (without Ischemic Sx), or Other.

When including timeframes of Q1 2018 and prior:

Numerator: NCDR#7210 "Stenosis (Post-Intervention) <= 30%, **and** NCDR#7215 "Post Procedure TIMI flow"="III"

Denominator: Number of lesions where NCDR #7115 "Stenosis Immediately Prior to Rx"=100% **and** NCDR #7120 "If 100% Chronic Total Occlusion"="Yes" **AND** PCI indication is documented as any of these options: Staged PCI or Other (NCDR V 4.4 #7035)

CTO Procedural Success (Non-ACS)

Numerator: NCDR#8025 "Stenosis (Post-Intervention) <= 50%, **and** NCDR#8026 "TIMI flow (Post Intervention)"="III", **and** NCDR#9001 "Intra and Post-Procedure Events-Cardiac Tamponade"="No", **and** NCDR#9001 "Intra and Post-Procedure Events-Stroke Hemorrhagic"="No", **and** NCDR#9001 "Intra and Post-Procedure Events-Stroke Ischemic"="No", **and** NCDR#9001 "Intra and Post-Procedure Events-Stroke Undetermined"="No", **and** NCDR#10035 "If CABG-CABG Status=null or "elective", **and** NCDR#10105 "Discharge Status"="Alive".

Denominator: CTO Non-ACS

*If more than one CTO lesion is attempted and/or treated during the same procedure all must be successfully treated to be considered a successful CTO procedure.

When including timeframes of Q1 2018 and prior:

Numerator: NCDR#7210 "Stenosis (Post-Intervention) <= 50%, **and** NCDR#7215 "Post Procedure TIMI flow"="III", **and** NCDR#8025 Tamponade="No", **and** NCDR#8015 CVA-Stroke="No", **and** NCDR#9005 "If CABG-CABG Status=null or "elective", **and** NCDR#9040 "Discharge Status"="Alive".

Denominator: CTO-Non ACS

Radiation

Fluoroscopy Time

Average and standard deviation calculations of fluoroscopy time reported in minutes for all PCI procedures in the appropriate timeframe (NCDR #7214).

When including timeframes Q1 2018 and prior:

Average and standard deviation calculations of fluoroscopy time reported in minutes for all PCI procedures in the appropriate timeframe (NCDR v 4.4 # 5320)

Kerma Area Product

Average and standard deviation calculations of Kerma Area Product (KAP; also known as: Dose Area Product (DAP)) reported in Gy.cm² for all PCI procedures in the appropriate timeframe (NCDR#7220).

When including timeframes Q1 2018 and prior:

Average and standard deviation calculations of Kerma Area Product (KAP; AKA Dose Area Product (DAP)) reported in Gy.cm² (BMC2 Procedure Information)

**Please note that the method in which values were entered varied for this field. Q1 2018 and prior, values were converted to the units being collected by the abstractor then entered into BMC2. Starting with Q2 2018 data, these values were added to the NCDR CathPCI dataset where the method is to enter the value and units noted, any conversion is performed via programming.

Air Kerma

Average and standard deviation calculations of Air Kerma (AK; Cumulative Air Kerma) reported in Gy for all PCI procedures in the appropriate timeframe (NCDR #7210)

When including timeframes Q1 2018 and prior:

Average and standard deviation calculations of Air Kerma (AK; Cumulative Air Kerma) reported in Gy for all PCI procedures in the appropriate timeframe (BMC2 Procedure Information)

**Please note that the method in which values were entered varied for this field. Q1 2018 and prior, values were converted to the units being collected by the abstractor then entered into BMC2. Starting with Q2 2018 data, these values were added to the NCDR CathPCI dataset where the method is to enter the value and units noted, any conversion is performed via programming.

Air Kerma \geq 5Gy

Number of procedures in which Air Kerma dose entered is \geq 5Gy (NCDR#7210).

Air Kerma \geq 15Gy

Number of cases in which Air Kerma dose entered is \geq 15Gy (NCDR#7210).

Cardiorenal Measures

Contrast Per Case

Average and standard deviation calculations of contrast amounts reported in milliliters (ml) for **all** PCI procedures performed during the timeframe being reported (NCDR #7215).

When including timeframes Q1 2018 and prior:

Average and standard deviation calculations of contrast volume reported in milliliters for all PCI procedures performed during the timeframe being reported (NCDR v 4.4 #5325).

Ratio of Contrast Volume to eGFR

This ratio is calculated by dividing the contrast volume by the eGFR. ***Excludes patients on dialysis (NCDR#4560)***

Please note: GFR is calculated by using the National Kidney Foundation® Chronic Kidney Disease Epidemiology Collaboration (CKD-EPI) formula via the equation found here <https://www.kidney.org/content/ckd-epi-creatinine-equation-2021> .

Fields utilized for this calculation are:

- NCDR #6050 "Creatinine" (BMC2 PCI calculation presumes entry of a standardized serum creatinine)

- NCDR #3001 "Arrival Date/Time"- NCDR #2050 "Birth Date" =Age in years
- NCDR #2060 "Sex"

CKD-EPI Creatinine Equation (2021)

Expressed as a single equation:

$$eGFR_{Cr} = 142 \times \min(Scr/\kappa, 1)^\alpha \times \max(Scr/\kappa, 1)^{-1.200} \times 0.9938^{Age} \times 1.012 \text{ [if female]}$$

where:

Scr = standardized serum creatinine in mg/dL

κ = 0.7 (females) or 0.9 (males)

α = -0.241 (female) or -0.302 (male)

$\min(Scr/\kappa, 1)$ is the minimum of Scr/ κ or 1.0

$\max(Scr/\kappa, 1)$ is the maximum of Scr/ κ or 1.0

Age (years)

Interpretation example:

Contrast dose=150ml eGFR=50 would equal ratio of 3.0

Contrast dose=100ml eGFR=50 would equal ratio of 2.0

Contrast dose= 35ml eGFR= 50 would equal ratio of 0.7

A lower ratio is more desirable than a higher ratio. Higher ratio is associated with higher incidence of CIN.

≥3 (significant risk of CIN)

Numerator: Number of procedures noted to have ratio of contrast dose (Contrast Volume/GFR) with results ≥ 3 . (NCDR Sequence #'s: 2050, 2060, 3001, 6050, 7215).

Denominator: Total procedures.

Exclusion(s):

- Procedures lacking information in any of the data fields used to calculate this field
- Patients currently on dialysis (#4560)

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures noted to have ratio of contrast dose (Contrast Volume/GFR) with results ≥ 3 . (NCDR Sequence #'s: 2050, 2060, 7315, 5325).

Denominator: Total procedures with exclusion of procedures lacking information in data fields used to calculate this field, as well as patients currently on dialysis (#4065). Including DOB, sex, serum creatinine, and contrast volume.

Exclusion(s):

- NCDR v 4.4 #4065 dialysis="Yes"
- Procedures lacking information in any of the data fields used to calculate this field

≤ 1 (ultra low)

Numerator: Number of procedures noted to have ratio of contrast dose (Contrast Volume/GFR) with results ≤ 1 . (NCDR Sequence #'s: 2050, 2060, 3001, 6050, 7215).

Denominator: Total procedures.

Exclusion(s):

- Procedures lacking information in data fields used to calculate this field
- Patients currently on dialysis (#4560)

Example:

Contrast Volume 35, eGFR 50, calculated as $35/50=0.7$ THIS VALUE WOULD PLACE THIS CASE IN THE ≤ 1 LINE.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures noted to have ratio of contrast dose (Contrast Volume/GFR) with results ≤ 1 . (NCDR Sequence #'s: 2050, 2060, 7315, 5325).

Denominator: Total procedures with exclusion of procedures lacking information in data fields used to calculate this field, as well as patients currently on dialysis (#4065). Including DOB, sex, weight, serum creatinine, and contrast volume.

Exclusion(s):

- NCDR v 4.4 #4065 dialysis="yes"
- Procedures lacking information in any of the data fields used to calculate this field

Contrast Induced Nephropathy (CIN)

Numerator: Number of procedures with calculated difference between pre and post procedure creatinine of ≥ 0.5 mg/dl (post-pre ≥ 0.5 mg/dl). (NCDR Sequence #'s: 8510, 6050). In cases where no post procedure creatinine value is available (NCDR # 8510), then discharge creatinine (NCDR#10060) will be utilized.

Denominator: Procedures (including Same Day Discharge with no post Creatinine value)

Exclusion(s):

- Procedures with missing creatinine values (NCDR #s 8510, 10060, or 6050) if discharge date (NCDR#10101) is not the same date as procedure start (NCDR#7000)
- Documented death in lab (NCDR#10120)
- Currently on Dialysis (NCDR Sequence # 4560)

Example 1: Pre Cr. 2.0mg/dl, Post Cr. 2.5mg/dl=CIN

Example 2: Pre Cr. 2.0mg/dl, Post Cr. not entered, Discharge Cr. 2.5mg/dl=CIN

Example 3: Pre Cr. 2.0mg/dl, Post Cr. 2.3mg/dl, Discharge Cr. 2.7mg/dl=No CIN (discharge value only utilized if no post value)

Example 4: Proc date 1/1/21, DC date 1/2/21, Pre Cr. 1.4 mg/dl, No Post Cr., No DC Cr=procedure excluded

Example 5: Proc date 1/1/21, DC date 1/1/21, Pre Cr. 1.1 mg/dl, No Post Cr., No DC Cr=procedure included in denominator, not in numerator

Example 6: Proc #1 date 1/1/21, Pre Cr. 0.8 mg/dl, Post Cr. 0.9 mg/dl, Proc #2 date 1/3/21, Pre Cr. 0.9 mg/dl, No Post Cr, No DC Cr = Proc#1 No CIN, Proc#2 in denominator, not in numerator

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with calculated difference between pre and post procedure creatinine of at least 0.5 mg/dl (post-pre ≥ 0.5 mg/dl). (NCDR v 4.4 #'s: 7315, 7341)

Denominator: Total Procedures

Exclusion(s):

- NCDR v 4.4 #7315/7340 creatinine values missing if discharge date (NCDR#10101) is not the same date as procedure(NCDR#9035)
- NCDR v 4.4 #9055 death in lab="yes"
- NCDR v 4.4 #4065 dialysis="yes"

**When comparing prior data and data from current version be mindful that the fields utilized on prior reports may have been different between V 4.4 and V5 which will alter numerical values. Beginning with Q1 2015 PCI reports, sites entering creatinine in BMC2, had CIN calculated using ONLY the BMC2 creatinine values. BMC2 values were entered utilizing the entire Creatinine value as entered. When NCDR creatinines are utilized we must expect different results as values entered into CathPCI were truncated and that coding instructions related to rounding varied throughout V 4.4 .

*results will appear different than historical reports due to inclusion of extraction devices

Nephropathy Requiring Dialysis

Numerator: Number of procedures with intra and post procedure event new requirement for dialysis documented "yes" (NCDR Sequence # 9001/9002).

Denominator: Total procedures

Exclusion(s):

- Death during the procedure (NCDR #10120)
- Currently on dialysis (NCDR #4650)

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with intra and post procedure event (NCDR v 4.4 #8030) new requirement for dialysis= yes

Denominator: Total Procedures

Exclusion(s):

- NCDR v 4.4 #9055 expired in lab="yes"
- NCDR v 4.4 #4065 dialysis="yes"

LVEDP Measured

Numerator: Number of cases with LVEDP value entered (BMC2 Procedure Information-LVEDP)

Denominator: Total procedures

When including timeframes Q1 2018 and prior:

Numerator: Number of cases with LVEDP value entered (BMC2 Procedure Information-LVEDP)

Denominator: Total procedures

Pre or Post IV Hydration

Numerator: Number of procedures in which "BMC2 Hydration-Intravenous"="Given" and number of mL administered is entered into pre and/or post PCI.

Denominator: Total procedures.

Exclusion(s):

- Currently on Dialysis=yes (NCDR #4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)
- Procedures with only post IV hydration noted will be excluded if BMC2 LVEDP \geq 25mmHg

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

When including timeframes Q1 2018 and prior:

Numerator: Procedures with pre and/or post hydration of any duration documented in the BMC2 Medications/Saline section="given" and any timeframe="pre" and/or "post".

Denominator: Total procedures.

Exclusion(s):

- NCDR v 4.4 #4065 Dialysis="yes" (was excluded on prior reports)
- BMC2 Patient History/Comorbidity Cardiac Arrest within 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)
- NCDR v 4.4 #7020 PCI Status="salvage" (not excluded on prior reports)
- NCDR v 4.4 #5040 Heart Failure w/in 2 weeks="yes" **and** NCDR v 4.4 #5045 NYHA=II, III, IV (not excluded on prior reports)
- NCDR v 4.4 #5060 Cardiogenic Shock w/in 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Pre IV Hydration

Numerator: Number of procedures noted to have intravenous fluid administered pre PCI (BMC2 Hydration-Intravenous)

Denominator: Total procedures

Exclusion(s):

- Currently on Dialysis=yes (NCDR #4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

When including timeframes Q1 2018 and prior:

Numerator: cases with pre-hydration of any duration documented BMC2 Medications/Saline section="given" and any timeframe="pre"

Denominator: total procedures.

Exclusion(s):

- NCDR v 4.4 #4065 Dialysis="yes" (was excluded on prior reports)
- BMC2 Patient History/Comorbidity Cardiac Arrest within 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)
- NCDR v 4.4 #7020 PCI Status="salvage" (not excluded on prior reports)
- NCDR v 4.4 #5040 Heart Failure w/in 2 weeks="yes" **and** NCDR v 4.4 #5045 NYHA=II, III, IV (not excluded on prior reports)
- NCDR v 4.4 #5060 Cardiogenic Shock w/in 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Post IV Hydration

Numerator: Number of procedures noted to have intravenous fluid administered post PCI (BMC2 Hydration-Intravenous)

Denominator: Total procedures

Exclusion(s):

- Currently on Dialysis=yes (NCDR #4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)
- LVEDP= ≥ 25 mmHg (BMC2 Procedure information LVEDP)

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

When including timeframes Q1 2018 and prior:

Numerator: cases with post hydration of any duration documented BMC2 Medications/Saline section="given" and any timeframe="post"

Denominator: total procedures.

Exclusion(s):

- NCDR v 4.4 #4065 Dialysis="yes" (was excluded on prior reports)
- BMC2 Patient History/Comorbidity Cardiac Arrest within 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)
- NCDR v 4.4 #7020 PCI Status="salvage" (not excluded on prior reports)
- NCDR v 4.4 #5040 Heart Failure w/in 2 weeks="yes" **and** NCDR v 4.4 #5045 NYHA=II, III, IV (not excluded on prior reports)
- NCDR v 4.4 #5060 Cardiogenic Shock w/in 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)
- LVEDP= ≥ 25 mmHg (BMC2 Procedure information LVEDP)

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Pre-Hydration (volume/ ≥ 3 ml/Kg)

Numerator: Number of procedures noted to have BMC2 Hydration-Intravenous and/or Oral Pre fluid vol/ ≥ 3 ML/Kg (BMC2 PCI Hydration Intravenous Given="Yes" and/or BMC2 PCI Hydration Oral Given="Yes" and number of ml's entered divided by weight entered in "kg" (NCDR#6005) ≥ 3 ml) Formula: PO+IV hydration/Kg=Xml

Denominator: Total procedures.

Exclusion(s):

- Currently on Dialysis=yes (NCDR #4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)
- PCI Indication= STEMI – Immediate PCI for Acute STEMI (NCDR #7825)

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

** Assume maximum body weight 100 kg

Examples:

Patient presents for elective PCI, weighs 100kg, has none of the exclusions above. They receive 500ml IVF pre-procedure. Calculation $500/100=5$ ml/kg, This example would be included in the numerator for this measure.

Patient presents for elective PCI, weighs 100kg, has none of the exclusions above. They receive 250ml IVF pre-procedure. Calculation $250/100=2.5$ ml/kg. This example would **not** be included in the numerator for this measure.

When including timeframes Q1 2018 and prior:

**When comparing prior data and data from current version there is no field that provides volume of fluid infused, therefore this measure can not be calculated using NCDR V 4.4 and BMC2 2018 Q1 (and prior quarters).

Pre-hydration(vol/ ≥ 3 ML/Kg) eGFR <60

Title on Performance Index Document: Pre-PCI hydration (oral and/or IV) (volume/3ML/Kg) in patients with eGFR <60

Numerator: Number of procedures noted to have BMC2 Hydration-Intravenous and/or Oral Pre fluid vol/≥3ML/Kg (BMC2 PCI Hydration Intravenous Given="Yes" and/or BMC2 PCI Hydration Oral Given="Yes" and number of ml's entered divided by weight entered in "kg" (NCDR#6005) =≥3ml) Formula: PO+IV hydration/Kg=Xml

Denominator: Total number of procedures where patient is noted to have eGFR < 60.

Exclusion(s):

- Currently on Dialysis (NCDR Sequence # 4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Cardiac Arrest within 24 hours (BMC2 Pt Hx and Comorbidity)
- Symptomatic Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)
- PCI Indication= STEMI – Immediate PCI for Acute STEMI (NCDR #7825)

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

** Assume maximum body weight 100 kg

Please note: eGFR is calculated by using the National Kidney Foundation® Chronic Kidney Disease Epidemiology Collaboration (CKD-EPI) formula via the equation found here <https://www.kidney.org/content/ckd-epi-creatinine-equation-2021> .

Fields utilized for this calculation are:

- NCDR #6050 "Creatinine" (BMC2 PCI calculation presumes entry of a standardized serum creatinine)
- NCDR #3001 "Arrival Date/Time"- NCDR #2050 "Birth Date" =Age in years
- NCDR #2060 "Sex"

CKD-EPI Creatinine Equation (2021)

Expressed as a single equation:

$$eGFR_{Cr} = 142 \times \min(Scr/k, 1)^\alpha \times \max(Scr/k, 1)^{-1.200} \times 0.9938^{Age} \times 1.012 \text{ [if female]}$$

where:

Scr = standardized serum creatinine in mg/dL

κ = 0.7 (females) or 0.9 (males)

α = -0.241 (female) or -0.302 (male)

$\min(Scr/\kappa, 1)$ is the minimum of Scr/ κ or 1.0

$\max(\text{Scr}/k, 1)$ is the maximum of Scr/k or 1.0

Age (years)

Other Key Performance Measures

Cardiac Rehabilitation Referral

Numerator: Number of discharges with "Cardiac Rehabilitation Referral"="Yes" (NCDR #10116)

Denominator: Discharges with any successfully treated lesion (NCDR #8024 Device deployed) with discharge status "Alive" (NCDR #10105) and "Discharge Location"="Home" (NCDR #10110).

Exclusions:

- Discharges with no successful lesions ("successful" = NCDR #8023 "Yes" AND NCDR #8024 "Yes").
- Intervention this hospitalization (NCDR#10030) "Yes", with Type=CABG (NCDR #10031) selected.
- Discharges with the following discharge locations : Skilled Nursing facility, Extended care/TCU/rehab, Other, Other acute care hospital, Left against medical advice, Hospice (NCDR #10110 and #10115).
- Comfort Measures Only="Yes" (NCDR #10075).
- Discharges with the following rationale for lack of cardiac rehabilitation referral : No-Medical Reason Documented, No-Health Care System Reason Documented (NCDR #10116).

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 Sequence # 9050 cardiac rehabilitation referral="Yes"

Denominator: Discharges with NCDR v 4.4 #9040 Discharge status="Alive" with NCDR v 4.4 # 9045 discharge location marked as "Home".

Exclusions:

- NCDR v 4.4 #7205 Guidewire Across Lesion= "no" for ALL lesions in ALL procedures during the discharge being reported
- NCDR v 4.4 #9000 CABG= "yes"
- NCDR v 4.4 # 9050 Cardiac Rehabilitation referral= "ineligible"
- NCDR v 4.4 #9045 Discharge location="patients transferred to another acute care facility", " hospice", "who left against medical advice (AMA)", "extended care/TCU/rehab", " nursing home", or "other".

*Data entry selections are different from V 4.4 to V 5.0, this will affect numerical values

Cardiac Rehab Liaison

Numerator: Number of discharges with BMC2 PCI "Cardiac Rehab Liaison"="Yes"

Denominator: Discharges with any successfully treated lesion (NCDR #8024 Device deployed) with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusions:

- Discharges with no successful lesions ("successful" = NCDR #8023 "yes" AND NCDR #8024 "yes")
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected
- Discharges with the following discharge locations (NCDR #10110 and #10115): Skilled Nursing facility, Extended care/TCU/rehab, Other, Other acute care hospital, Left against medical advice, Hospice.
- Comfort Measures Only="Yes" (NCDR #10075)
- Discharges with the following rationale for lack of cardiac rehabilitation referral (NCDR #10116): No-Medical Reason Documented, No-Health Care System Reason Documented.

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for some fields utilized for this measure.

LDL Goal Documented

Numerator: Number of discharges with BMC2 PCI "LDL Goal"="Yes"

Denominator: Discharges with NCDR #10105 discharge status= "Alive"

Exclusion(s):

- NCDR #10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR #10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"
- Discharges with no successful lesions (NCDR #8023 "No" or NCDR #8024 "No")

P2Y12 Duration Documented

Numerator: Number of discharges with BMC2 PCI "P2Y12 Duration"="Yes"

Denominator: Discharges with NCDR #10105 discharge status= "Alive" that have had *any* successful stent implantation (NCDR #8027/8028 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care

Exclusion(s):

- NCDR #10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR #10115 Hospice Care="Yes"
- NCDR #10020/10025 "P2Y12" selections= Prescribed = "No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"
- Discharges with no successful lesions ("successful" = NCDR #8023 "yes" AND NCDR #8024 "yes")

Surgical Consult

Numerator: Number of procedures with NCDR #7815 surgical consultation ="yes"

Denominator: Procedures with severe left main (LM) disease (NCDR #7507 segment 11a, 11b, 11c with NCDR #7508 documented $\geq 50\%$) and/or 3 vessel disease with proximal LAD involvement (NCDR field #7507 segments 12, 18, 19, 19a, 1,2,3, 28 with NCDR #7508 documented $\geq 70\%$ and/or NCDR #7511="yes" with child field #7512 ≤ 0.8 or child field #7513 ≤ 0.86).

Exclusions:

- Prior CABG=yes (NCDR #4515)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI Indication=STEMI which would apply to all of the following PCI Indication STEMI selections: STEMI-Immediate PCI for Acute STEMI, STEMI-Stable (≤ 12 hrs from Sx), STEMI-Stable (> 12 hrs from Sx), STEMI-Unstable (> 12 hrs from Sx), STEMI (after successful lytics), STEMI-Rescue (after unsuccessful lytics) (NCDR #7825)
- Isolated Left main disease $\geq 50\%$ with MLA $> 6\text{mm}^2$ (NCDR #7514/7515 or 7534/7535)

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Same Day Discharge

Numerator: Discharges with the arrival date (NCDR #3001) and discharge date occurring during (NCDR #10101) the same calendar day.

Denominator: Discharges with PCI indication (NCDR #7825) "New Onset Angina ≤ 2 months", "Stable Angina", "CAD (without Ischemic Sx)", or "other", discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home", "Skilled Nursing facility", "Extended care/TCU/rehab", "other".

Exclusion(s):

- PCI indication (NCDR #7825) "STEMI-Immediate PCI for Acute STEMI", "STEMI-stable (≤ 12 hrs from Sx)", "STEMI-Stable (> 12 hrs from Sx)", "STEMI-Unstable (> 12 hrs from Sx)", "STEMI (after successful lytics)", "STEMI-Rescue (after unsuccessful lytics)
- PCI indication (NCDR #7825) "NSTE-ACS" **AND** BMC2 indication for procedure NSTE-ACS (BMC2 Procedure information) selected option ="NSTEMI".
- Unsuccessful lesions (NCDR #8023="No" OR NCDR Sequence #8024="No")
- Discharges with the following discharge locations (NCDR #10110 and #10115): Other acute care hospital, Left against medical advice, Hospice.
- Discharges status "Deceased" (NCDR #10105)
- Comfort Measures Only="Yes" (NCDR #10075)

When including timeframes Q1 2018 and prior:

- NCDR v 4.4 #7035 PCI indication "STEMI-Immediate PCI for Acute STEMI", "STEMI-stable (<=12 hrs from Sx)", "STEMI-Stable (>12 hrs from Sx)", "STEMI-Unstable (>12 hrs from Sx)", "STEMI (after successful lytics)", "STEMI-Rescue (after unsuccessful lytics)", "PCI for high risk NSTEMI or unstable angina
- NCDR v 4.4 #7205 Guidewire across lesion="No" OR NCDR Sequence #7220 Device(s) Deployed="No"
- NCDR v 4.4 #9045 Discharge location: Other acute care hospital, Left against medical advice, Hospice.
- NCDR v 4.4 #9040 Discharge status= "Deceased"

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Current Smoker

Numerator: Discharges with NCDR #4625 tobacco use =Current-Every Day, Current-Some Days

Denominator: Discharges with discharge status "Alive" (NCDR #10105) and discharge location (NCDR# 10110) marked as "Home"

Exclusion(s):

- NCDR #10110 Discharge location=" other acute care hospital"," Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR #10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Discharges with NCDR v 4.4 Current Smoker="Yes"

Denominator: Discharges with NCDR v 4.4 #9040 Discharge Status="alive" and NCDR v 4.4 #9045 Discharge Location="Home",

Exclusion(s):

- NCDR v 4.4 #9045 Discharge location="other acute care hospital, left against medical advice (AMA), other, Hospice, Extended care/TCU/rehab", "Nursing Home"

*When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values

Smoking Cessation Tx.

Numerator: Discharges with 2 or more of the following BMC2 smoking cessation counseling interventions (physician delivered advice, nicotine replacement therapy, referral to smoking counseling services) = "Yes"

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR# 10110) marked as "Home".

Exclusion(s):

- NCDR#10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10105 Discharge Status="Deceased"

When including timeframes Q4 2022 and prior, please be aware there is no equivalent for this field.

**The previous "Smoking Cessation" measure did not include any of the treatments/interventions included in the current measure and should not be utilized as a comparison for this measure.*

Physician Delivered Advice

Numerator: Smoking cessation counseling= "Yes" and "Physician Delivered Advice" is selected.

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusion(s):

NCDR#10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"

NCDR#10115 Hospice Care="Yes"

NCDR #10075 Comfort Measures Only="Yes"

NCDR #10105 Discharge Status="Deceased"

Pt. Refused Physician Delivered Advice

Numerator: discharges with Smoking Cessation Counseling= "Yes" and "Physician delivered advice" and "Pt. refused" are selected.

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusion(s):

- NCDR#10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10105 Discharge Status="Deceased"

Nicotine Replacement Therapy (NRT)

Numerator: Smoking cessation counseling= "Yes" and "Nicotine Replacement Therapy" is selected.

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusion(s):

- NCDR#10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10105 Discharge Status="Deceased"

Pt. Refused Nicotine Replacement Therapy

Numerator: discharges with Smoking Cessation Counseling= "Yes" and "Nicotine Replacement Therapy" and "Pt. refused" are selected.

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusion(s):

- NCDR #10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR #10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10105 Discharge Status="Deceased"

Referral to Smoking Counseling Services

Numerator: Smoking cessation counseling= "Yes" and "Referral to Smoking Counseling Services" is selected.

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusion(s):

- NCDR #10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR #10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10105 Discharge Status="Deceased"

Pt. Refused Referral to Smoking Counseling Services

Numerator: discharges with Smoking Cessation Counseling= "Yes" and "Referral to Smoking Counseling Services" and "Pt. refused" are selected.

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR #10110) marked as "Home".

Exclusion(s):

- NCDR #10110 Discharge location= "other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR #10115 Hospice Care= "Yes"
- NCDR #10075 Comfort Measures Only= "Yes"
- NCDR #10105 Discharge Status= "Deceased"

Morbidity and Mortality

Cardiogenic Shock Post Proc.

Numerator: Number of procedures in which "Cardiogenic Shock (NCDR#9001) = "Yes" (NCDR #9002) and the "Event Date/Time" (NCDR # 9003) is documented as occurring after "Procedure End Date/Time" (NCDR #7005).

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Procedures in which Cardiogenic Shock post procedure is documented as "Yes" in NCDR field # 8005, but "No" in BMC2 Outcomes in Lab.

Denominator: Total procedures.

*****When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.***

Stroke Post Proc.

Numerator: Number of procedures in which "Stroke-Hemorrhagic", "Stroke-Ischemic" or "Stroke-Undetermined" (NCDR#9001) = "Yes" (NCDR #9002) and "Event Date/Time" (NCDR #9003) is documented as occurring after "Procedure End Date/Time (NCDR #7005).

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures where BMC2 Outcome in Lab Stroke/TIA="No" and NCDR v 4.4 #8015 intra and post procedure stroke ="Yes".

Denominator: Total procedures.

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Bleeding

Numerator: Number of procedures in which "Bleeding-Access Site", "Bleeding-Gastrointestinal", "Bleeding-Genitourinary", "Bleeding-Hematoma at Access Site", "Bleeding-Other", "Bleeding-Retroperitoneal", "Cardiac Tamponade", Stroke-Hemorrhagic"= "Yes" (NCDR #9001/9002).

Denominator: Procedures.

Exclusion(s):

- Intervention(s) this Hospitalization" (NCDR #10030) ="Yes" and "If Yes, Type" (NCDR#10031) = "CABG".

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field coding instructions are much different between V 5.0 and V 4.4

Major Bleeding

Numerator: Number of procedures in which a hemoglobin decrease ≥ 5 gm/dl is noted between "Pre-Procedure Hgb" (NCDR#6030) to "Post Procedure Hgb" (NCDR #8505).

Denominator: Procedures.

Exclusion(s):

- NCDR#7422="Yes" AND NCDR #7423="Extracorporeal Membrane Oxygenation (ECMO)" or "Combined Extracorporeal Membrane Oxygenation and Percutaneous Left Ventricular Assist Device (EPELLA)".
- NCDR#10030="Yes" **AND** NCDR#10031 "CABG", Valvular Intervention", "Cardiac Surgery (non CABG)", "Structural Heart Intervention (non-valvular)", "EP Study"

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for some fields utilized for this measure.

VT/VF Requiring Tx Post

Numerator: Number of procedures in which BMC2 outcomes post lab "VT/VF Requiring Treatment" ="Yes".

Denominator: Procedures

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 outcomes post lab "VT/VF Requiring Treatment" ="Yes".

Denominator: Total procedures.

All CABG

Numerator: Number of discharges in which coronary artery bypass grafting (CABG) surgery was performed during this episode of care. "Interventions this Hospitalization" (NCDR#10030) =" Yes" and "If Yes, Type" = "CABG" (NCDR#10031).

Denominator: Discharges.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9000 Coronary artery bypass grafting surgery performed this episode of care="Yes".

Denominator: Discharges.

Emergent/Salvage CABG

Numerator: Number of CABG surgeries with "CABG Status" (NCDR #10035) documented as "Emergency" or "Salvage".

Denominator: All CABG.

When including timeframes Q1 2018 and prior:

Numerator: number of discharges where NCDR v 4.4 #9005 CABG Status="Emergency" or "Salvage".

Denominator: All CABG.

Transferred for CABG

Numerator: Number of discharges in which of "Transferred for CABG" ="Yes" (NCDR #10111).

Denominator: Discharges.

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Discharged to Other Acute Care Hospital

Numerator: Number of discharges where "Discharge Location"(NCDR #10110) = "Other Acute Care Hospital".

Denominator: Discharges where "Discharge Status" (NCDR #10105) =" Alive".

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

All Deaths

Numerator: Number of discharges where "Discharge Status" = "Deceased" (NCDR # 10105).

Denominator: Discharges.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR Sequence# 9040 discharge status= "Deceased".

Denominator: Discharges.

Death in Lab

Numerator: Number of discharges where "Death During the Procedure" = "Yes" (NCDR #10120).

Denominator: All Deaths.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges in which NCDR #9055 death in lab="Yes"

Denominator: All Deaths.

Mortality Case Breakdown

Please note that more than one of the following fields could be applicable for a given discharge.

Example: A discharge could present as a STEMI, in cardiogenic shock, with a PCI status of salvage; this means the discharge would populate in all three items.

*All indications for all procedures for patients that expired are included in this section. Because a procedure can have multiple indications (STEMI, cardiogenic shock, etc.), and patients can have multiple procedures, these figures may not correlate with other line items of this report.

STEMI

Numerator: "PCI Indication" (NCDR #7825) = "STEMI" including: "Immediate PCI for Acute STEMI", "PCI for STEMI (Unstable, >12 hrs from Sx onset)", "PCI for STEMI (Stable, >12 hrs from Sx onset)", "STEMI – Stable (<= 12 hrs from Sx)", "STEMI PCI for STEMI (Stable after successful lytics)", "Rescue PCI for STEMI (after unsuccessful lytics)".

Denominator: All Deaths.

When including timeframes Q1 2018 and prior:

Numerator: NCDR field # 7035 PCI indication= Immediate PCI for STEMI, PCI for STEMI (Unstable, >12 hrs from Sx onset), PCI for STEMI (Stable, >12 hrs from Sx onset), PCI for STEMI (Stable after successful full-dose Thrombolysis), Rescue PCI for STEMI (after failed full-dose lytics).

Denominator: All Death

NSTEMI/ACS

Numerator: number of procedures with NCDR v 4.4 #7035 PCI Indication="PCI for high-risk non-STEMI or unstable angina".

Denominator: All Deaths.

**When comparing prior data and data from current version be mindful that the selections and coding instructions differ between V 4.4 and V5 which will alter numerical values.

Cardiovascular Instability at Start

Numerator: Number of procedures where "Cardiovascular Instability" = "Yes" (NCDR #7410).

Denominator: All Deaths.

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Cardiogenic Shock

Numerator: Number of procedures in which "Cardiovascular Instability" = "Yes" (NCDR #7410) and "Cardiovascular Instability Type" = "Cardiogenic Shock" or "Refractory Cardiogenic Shock" (NCDR #7415).

Denominator: All Deaths.

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures in which NCDR v 4.4 #7030 Cardiogenic Shock at Start of PCI="Yes".

Denominator: All Deaths.

*****When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.***

Cardiac Arrest within 24 hours

Numerator: Number of discharges with BMC2 Patient History/Comorbidity "Cardiac Arrest w/in 24 hours" ="Yes".

Denominator: All Deaths.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with BMC2 Patient History/Comorbidity "Cardiac Arrest" ="Yes".

Denominator: All Deaths.

**Although field names differ between BMC2 versions the coding instructions were the same. The name change was to provide a visual cue for abstractors to avoid confusion with the multiple NCDR arrest fields.

Elective

Numerator: Number of deaths where procedure "PCI Status" (NCDR #7800) = "Elective".

Denominator: All Deaths.

When including timeframes of Q1 2018 and prior:

Numerator: Number of discharges with any procedure NCDR v 4.4 #7020 PCI Procedure status="Elective".

Denominator: All Deaths.

Salvage

Numerator: Number of deaths where procedure "PCI Status" (NCDR #7800) = "Salvage".

Denominator: All Deaths.

When including timeframes of Q1 2018 and prior:

Numerator: Number of discharges with any procedure NCDR v 4.4 #7020 PCI Procedure status="Salvage".

Denominator: All Deaths.

Discharge to Hospice

Numerator: Number of discharges where "Discharge Status" (NCDR # 10105) = "Alive" and "If Alive, Hospice Care"="Yes". (NCDR #10115).

Denominator: Discharges.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR #9040 discharge status= "Alive" and "Hospice" (NCDR #9045 Discharge Location).

Denominator: Discharges.

Outcomes in Lab

Please note: Noticeable differences between procedures and /or patients enrolled (discharges) and denominators noted for these line items may be related to matching NCDR and BMC2 records. See overview section of this document "BMC2 Record Matching Logic".

Coronary Perforation

Numerator: Number of procedures where "Coronary Artery Perforation" = "Yes" (NCDR # 9145).

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with NCDR v 4.4 #7250 perforation= "Yes" and/or BMC2 Outcome in lab perforation="Yes".

Denominator: Total procedures.

*Please note the language "and/or" has been added as BMC2 stopped collecting perforation in February 2014 related to redundancy with NCDR #7250.

Tamponade

Numerator: Number of procedures in which "Cardiac Tamponade" = "Yes" (NCDR #9001/9002) and the "Event Date/time(s)" (NCDR #9003) is documented as occurring before "Procedure End Date/Time" (NCDR #7005).

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which tamponade in lab is coded. Please note that in cases where BMC2 Outcome in lab tamponade="Yes" and NCDR v 4.4 #8025 Intra and Post-Procedure Events Tamponade="Yes" is, this will be included as one instance of tamponade in lab.

Denominator: Total procedures.

*When NCDR v 4.4 #8025 ="Yes" and BMC2 "Outcome in lab tamponade" = "No" it will be presumed that tamponade occurred post procedure and will not be included.

Stroke

Numerator: Number of procedures in which "Stroke-Hemorrhagic", "Stroke-Ischemic" or "Stroke-Undetermined" = "Yes" (NCDR #9001/9002) and "Event Date/Time" (NCDR #9003) occurred before "Procedure End Date/Time" (NCDR#7005).

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which BMC2 Outcomes in lab Stroke/TIA ="Yes".

Denominator: Total procedures.

Cardiogenic Shock

Numerator: Number of procedures in which "Cardiogenic Shock" (NCDR #9001) ="Yes" (NCDR#9002) and "Event Date/Time" (NCDR #9003) occurred prior to "Procedure End Date/Time (NCDR #7005).

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which BMC2 Outcome in Lab Cardiogenic Shock in lab ="Yes". Please note that in cases where BMC2 "Outcome in lab Cardiogenic Shock"="Yes" and NCDR v 4.4 #8005 Intra and Post-Procedure Events- Cardiogenic Shock="Yes" this will be included as one instance of cardiogenic shock in lab.

Denominator: Total procedures.

*If NCDR v 4.4 #8005="Yes" and BMC2 Outcome in lab Cardiogenic Shock="No" it is presumed shock occurred post procedure and the instance would not be included.

Acute Closure

Numerator: Number of procedures with BMC2 "Outcomes in Lab Acute Closure" ="Yes".

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 "Outcomes in Lab Acute Closure" ="Yes".

Denominator: Total procedures.

No Reflow

Numerator: Number of procedures in which BMC2 "Outcomes in Lab No Reflow" ="Yes".

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which BMC2 "Outcomes in Lab No Reflow" ="Yes".

Denominator: Total procedures.

Side Branch Occlusion

Numerator: Number of procedures in which BMC2 "Outcomes in Lab Side Branch Occlusion" ="Yes".

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures in which BMC2 "Outcomes in Lab Side Branch Occlusion" ="Yes".

Denominator: Total procedures.

Transfusion/Vascular Complication

Transfusion BMC2

Numerator: Number of procedures in which "RBC Transfusion" (NCDR #9275) ="Yes", or BMC2 "Outcomes Post Lab Transfusion of FFP" or "Outcomes Post Lab Transfusion of Platelets" = "Yes".

Denominator: Total procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 Outcomes Post Lab fresh frozen plasma, or platelets ="Yes" and/or NCDR v 4.4 #8040 intra and post procedure transfusion PRBC/Whole Blood="Yes".

Denominator: Total procedures.

*Please note that if more than one product is administered per discharge, the numerator would still reflect one instance.

**When comparing prior data and data from current version be mindful that the selections are different between V 4.4 and V5 (timeframes and new selections Transfusion PCI, Transfusion Surgical are different) which may alter numerical values.

RBC Transfusion

Numerator: Number of procedures in which "RBC Transfusion" (NCDR #9275) ="Yes".

Denominator: Total procedures.

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures with NCDR v 4.4 # 8040 transfusion PBCS/Whole Blood="Yes".

Denominator: Total procedures.

*Please note that if more than one unit is administered, the numerator would still reflect one instance.

**When comparing prior data and data from current version be mindful that the selections are different between V 4.4 and V5 (timeframes and new selections Transfusion PCI, Transfusion Surgical are different) which may alter numerical values.

CABG with Transfusion

Numerator: Intervention(s) this Hospitalization" (NCDR #10030) ="Yes" and "If Yes, Type" (NCDR#10031) = "CABG".

Denominator: BMC2 Transfusion.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with NCDR Sequence #8040 transfusion of PRBC/Whole blood="Yes" and/or BMC2 Outcomes post lab fresh frozen plasma, or platelets="Yes" and NCDR v 4.4 #9000 CABG="Yes").

Denominator: BMC2 Transfusion.

*Please note that if more than one unit is administered, the numerator would still reflect one instance.

**When comparing prior data and data from current version be mindful that the selections are different between V 4.4 and V5 (timeframes and new selections Transfusion PCI, Transfusion Surgical are different) which may alter numerical values.

Primary Access Vascular Complication

Numerator: Number of procedures in which BMC2 "Outcome Post Lab: Primary Access Site Vascular Complication" = "Yes".

Denominator: Total procedures/

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 outcome post lab primary access site vasc comp ="Yes".

Denominator: Total procedures.

*Please note this line item is based on BMC2 primary vascular access site data only.

Secondary Access Site Complication

Numerator: number of procedures in which BMC2 "Outcome Post Lab: Secondary Access Site Vascular Complication" = "Yes".

Denominator: BMC2 "Secondary Access Site" = "Yes".

When including timeframes Q1 2018 and prior:

Numerator: number of procedures with BMC2 outcome post lab secondary access site vasc comp="Yes".

Denominator: BMC2 Secondary Access Site "Yes".

*Please note this line item is based on BMC2 primary and secondary vascular access site data only.

Transfusion in Vascular Complication

Numerator: Number of procedures in which "RBC Transfusion" (NCDR #9275) ="Yes", or BMC2 "Outcomes Post Lab Transfusion of FFP" or "Outcomes Post Lab Transfusion of Platelets" = "Yes".

Denominator: BMC2 "Outcome Post Lab: Primary Access Site Vascular Complication" = "Yes" or BMC2 "Outcome Post Lab: Secondary Access Site Vascular Complication" = "Yes".

When including timeframes of Q1 2018 and prior:

Numerator: Number of procedures with BMC2 outcome post lab primary access site vasc. comp and/or secondary access site vasc. comp ="Yes" and NCDR #8040 transfusion of PRBC/Whole Blood="Yes" and/or BMC2 Outcomes post lab fresh frozen plasma, or platelets="Yes".

Denominator: Number of procedures with BMC2 outcomes post lab primary access site vasc. comp and/or secondary access site vasc. comp "Yes".

Medical Therapy

Aspirin within 24 hours

Numerator: Number of procedures in which BMC2 PCI Aspirin w/in 24 hours =" Yes".

Denominator: Procedures.

Exclusion(s):

- Contraindicated to aspirin (BMC2 Medications)

When including timeframes Q1 2018 and prior:

Numerator: NCDR #9500=Aspirin and #9510 (Administered)=Yes.

Denominator: Total procedures.

Exclusion(s):

- NCDR#9510=Contraindicated
- NCDR#9510=Blinded

GP IIb/IIIa Inhibitors

Numerator: Number of procedures in which BMC2 Medications: "Eptifibatide" or "Tirofiban" ="Given".

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 Medications Abciximab and/or Eptifibatide and/or Tirofiban="Given".

Denominator: Total procedures.

GP IIb/IIIa Inhibitors Post

Numerator: Number of procedures in which BMC2 Medications: "Eptifibatide" or "Tirofiban" ="Given" and "Post".

Denominator: Number of procedures with BMC2 Medications: "Eptifibatide" or "Tirofiban" ="Given".

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 Medications Abciximab and/or Eptifibatide and/or Tirofiban="Given" and "Post".

Denominator: number of procedures with BMC2 Medications Abciximab and/or Eptifibatide and/or Tirofiban="Given".

Bivalirudin

Numerator: Number of procedures in which BMC2 Medications: "Bivalirudin" ="Given".

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with BMC2 Medications Bivalirudin="Given".

Denominator: Total procedures.

Guideline Medications Prescribed at Discharge

Numerator:

- Discharges with a stent placed (NCDR 8027/8028 "Intracoronary Device(s) Used" = Sub-type "Drug Eluting Stent", "Bare Metal Stent", "Covered Stent" or "Coated Stent" during this episode of care in which "Medication" (NCDR#10200) = *("Aspirin", "Apixaban", "Dabigatran", "Edoxaban", "Rivaroxaban", "Warfarin") and "Statin" and "P2Y12 Inhibitors" and "Prescribed" (NCDR #10205) =" Yes"

OR

- Discharges with no stent placed (NCDR 8027/8028) during this episode of care in which "Medication" (NCDR#10200) =*("Aspirin", "Apixaban", "Dabigatran", "Edoxaban", "Rivaroxaban", "Warfarin") and "Statin" and "Prescribed" (NCDR #10205) =" Yes"

*Patients with a medical or patient reason for not prescribing a medication will still meet the numerator IF they were prescribed all other medication(s) for which they were eligible.

Denominator:

- Discharges in which NCDR#7050=" Yes"

Exclusion(s):

No successful lesions (NCDR #8023="No" or NCDR Sequence #8024="No")

NCDR#10030 Intervention this hospitalization= "Yes", and NCDR #10031 Type="CABG", "Cardiac not CABG", or "Surgery not cardiac"

NCDR #10075 Comfort Measures Only="Yes"

NCDR #10101 Discharge status=" Deceased"

NCDR#10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"

NCDR#10115 Hospice Care="Yes"

NCDR #10200 "Aspirin" AND "Statin" AND all "P2Y12 Inhibitors" ="No medical reason" or "No-patient reason" (NCDR#10205)

NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"

Discharge Aspirin

Numerator: Number of discharges with "Medication" ="Aspirin" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

OR

One, or more, medications from the following list per NCDR#10200= Category "Anti-coagulant" medications="Warfarin" and/or Category "Non-Vitamin K Dependent Oral Anticoagulant" medications ="Apixiban", "Dabigatran", "Edoxaban", "Rivaroxaban" and NCDR#10205="Yes" **and** one medication from the following list: Category "P2Y12 Inhibitor" medications="Clopidogrel", Prasugrel", "Ticagrelor", Ticlopidine" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: "Discharge Status" = "Alive"(NCDR #10105)

The following Exclusions are applied if the numerator is not met:

- NCDR#10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR#10030 Intervention this hospitalization= "Yes", and NCDR #10031 Type="CABG", "Cardiac not CABG", "Surgery not cardiac"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Aspirin" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"
- NCDR v 4.4 #9000 CABG="Yes"

*Not able to correlate with prior version r/t Non-Vitamin K dependent oral anticoagulants and warfarin were not collected.

Discharge Beta Blocker in ACS

Numerator: Number of discharges with "Medication" ="Beta Blocker" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205). If there is no documentation related to beta blocker in NCDR (field was entered after version underway), please utilize BMC2 Medications at Discharge section Beta Blocker.

Denominator: Discharges with "Discharge Status" ="Alive" (NCDR #10105) and "PCI Indication" = "STEMI" (any) or "NSTE-ACS" (NCDR #7825).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Beta Blocker" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive" and NCDR #7035 PCI indication="STEMI" (any) or "non-STEMI/unstable angina".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"

*Please note that prior BMC2 PCI reports did contain information related beta blockers prescribed at discharge, the denominator is now different.

Discharge Beta Blocker EF<40%

Numerator: Number of discharges with "Medication" ="Beta Blocker" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205). If there is no documentation related to beta blocker in NCDR (field was entered after version underway), please utilize BMC2 Medications at Discharge section Beta Blocker.

Denominator: Discharges with "Discharge Status" ="Alive" (NCDR #10105) and "PCI Indication" = "STEMI" (any) or "NSTEMI-ACS" (NCDR #7825) and BMC2 Discharge section "LVEF Assessment this admit" ="Yes" if yes, "LVEF of <40%", if "no" then NCDR #7061 "LVEF during Dx LHC <40%", if "no" then NCDR #5111 "LVEF Assessed Pre-Procedure" <40%.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Beta Blocker" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive" and NCDR #9030 LVEF=<40%.

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"
- NCDR v 4.4 #9031 LVEF not assessed=coded

*Please note that prior BMC2 PCI reports did contain information related beta blockers prescribed at discharge, the denominator is now different.

Discharge LLA

Numerator: Number of discharges in which "Medication" ="Statin", "Non-Statin", or "PCSK9 Inhibitors (Alirocumab or Evolocumab)" (NCDR #10200) and "Prescribed" ="Yes".

Denominator: Discharges where "Discharge Status" ="Alive" (NCDR #10105).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason" for the following medication categories (statin, non-statin, PCSK9)
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Statin" and/or "Non-Statin" and NCDR v 4.4 #9510 Administered (prescribed)="Yes"

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive"

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"

Discharge Statin

Numerator: Number of discharges in which "Medication" ="Statin" (NCDR #10200) and "Prescribed" ="Yes".

Denominator: Discharges in which "Discharge Status" ="Alive" (NCDR #10105).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Statin" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"

Discharge ACE/ARB (EF <40%)

Numerator: Number of discharges in which "Medication" = "ACE Inhibitors" or "ARB" (NCDR #10200) and "Prescribed" = "Yes".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and BMC2 Discharge section "LVEF Assessment this Admit" = "Yes" if yes, and "LVEF of <40%, if BMC2 LVEF Assessment this admit= "No", then "LVEF Assessed Pre-Procedure" = "Yes" (NCDR #5111) and NCDR #5116 "If Yes, Most Recent LVEF" = <40%.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed = "No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="ACE Inhibitor" and/or "ARB"" and NCDR v 4.4 #9510 Administered (prescribed)="Yes"

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive" and NCDR #9030 LVEF=<40%

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"
- NCDR v 4.4 #9000 CABG="Yes"

Discharge ACE/ARB in DM HTN

Numerator: Number of discharges in which "Medication" = "ACE Inhibitors" or "ARB" (NCDR #10200) and "Prescribed" = "Yes".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) with "Hypertension" = "Yes" (NCDR #4615) and "Diabetes Mellitus" = "Yes" (NCDR #4555).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="ACE Inhibitors" and/or "ARB" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"
- NCDR v 4.4 #9000 CABG="Yes"

Discharge P2Y12

Numerator: Number of discharges in which "Medication" = "P2Y12 Inhibitor (clopidogrel and/or prasugrel and/or ticagrelor and/or ticlopidine)" (NCDR #10200) and "Prescribed" = "Yes" (NCDR#10205).

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) with any successful stent implantation "Intracoronary Device(s) Used" = Sub-type "Drug Eluting Stent", Bare Metal Stent", "Covered Stent" or "Coated Stent" (NCDR #8027/8028)) during this episode of care.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"
- Discharges with no successful lesions ("successful" = NCDR #8023 "Yes" AND NCDR #8024 "Yes")

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Thienopyridines (clopidogrel, prasugrel, ticagrelor, ticlopidine) " and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"
- NCDR v 4.4 #9000 CABG="Yes"
- NCDR v 4.4 #7205 Guidewire Across Lesion "no" for ALL lesions in ALL procedures during the discharge being reported.

*Stents not successfully deployed are not captured via the registry.

Discharge Non-Vitamin K Dependent Oral Anticoagulant

Numerator: Number of discharges in which "Medication" ="Non-Vitamin K Dependent Oral Anticoagulant (Apixiban, Dabigatran, Edoxaban, Rivaroxaban)" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: Discharges in which "Discharge Status" ="Alive" (NCDR #10105).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR#10030 Intervention this hospitalization= "Yes", and NCDR #10031 Type="CABG" and/or "Cardiac not CABG" and/or "Surgery not cardiac"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Discharge Warfarin

Numerator: Number of discharges in which "Medication" =" Anticoagulant/Warfarin" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: Discharges in which "Discharge Status" ="Alive" (NCDR #10105).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"

- NCDR#10030 Intervention this hospitalization = "Yes", and NCDR #10031 Type="CABG", "Cardiac not CABG", "Surgery not cardiac"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Discharge Opioid

Numerator: Number of discharges in which BMC2 "Medications at Discharge" =" Opioid".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field.

Discharge Prasugrel with Hx TIA/CVA

Numerator: Number of discharges in which "Medication" ="P2Y12 Inhibitor/Prasugrel" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205) where "BMC2 History/Comorbidity TIA/CVA" ="Yes".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and "Medication" =" P2Y12 Inhibitors/Prasugrel" (NCDR #10200) and "Prescribed" ="Yes" (NCDR #10205).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Thienopyridines /Prasugrel" and NCDR v 4.4 #9510 Administered (prescribed)="Yes" who also have (BMC2 Hx/comorbid TIA/CVA="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive" with NCDR v 4.4 #9505 "Thienopyridines/Prasugrel" and NCDR v 4.4 #9510="Yes".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"

*This information is provided as history of TIA/CVA is an absolute contraindication to the prescribing of Prasugrel.

Discharge Prasugrel <60Kg and/or age >75 yrs

Numerator: Number of discharges in which "Medication" = "P2Y12 Inhibitor/Prasugrel" (NCDR #10200) and "Prescribed" = "Yes" (NCDR#10205) who also have NCDR #6005 Weight= <60Kg and/or NCDR #2050 Age= >75years

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and "Medication" = "P2Y12 Inhibitors/Prasugrel" (NCDR #10200) and "Prescribed" = "Yes" (NCDR #10205).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Thienopyridines /Prasugrel" and NCDR v 4.4 #9510 Administered (prescribed)="Yes" who also have NCDR v 4.4 #4060 Weight= <60Kg and/or NCDR v 4.4 #2050 Age= >75years

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive" with NCDR v 4.4 #9505 "Thienopyridines/Prasugrel" and NCDR v 4.4 #9510="Yes"

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"

*This information is provided as age >75 years and/or weight <60kg are relative contraindications to the prescribing of Prasugrel.

Discharge Anti-Platelet

Numerator: Number of discharges in which "Medication" ="P2Y12 Inhibitor (clopidogrel and/or prasugrel and/or ticagrelor and/or ticlopidine)" (NCDR #10200) or "Medication" ="Aspirin" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) with any successful stent implantation "Intracoronary Device(s) Used" = Sub-type "Drug Eluting Stent", Bare Metal Stent", "Covered Stent" or "Coated Stent" (NCDR #8027/8028) during this episode of care.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10025 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"
- No successful lesions (NCDR #8023="No" or NCDR Sequence #8024="No")

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with stent implantation during this episode of care (NCDR v 4.4 #7225), prescribed P2Y12 or ASA at discharge. (NCDR v 4.4 # 9505/NCDR #9510 "Yes").

Denominator: Discharges with discharge status of alive that have any successful stent implanted during this episode of care (NCDR v 4.4 #7225).

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 medications captured as "blinded"
- NCDR v 4.4 #9510 = "contraindicated"
- NCDR v 4.4 #9040 discharge status "deceased"
- NCDR v 4.4 #9000="yes"
- NCDR v 4.4 #7205 "no" /NCDR #7220 "no"=unsuccessful lesion
- NCDR v 4.4 #9015 CABG at your facility="yes"

*Devices not successfully deployed are not captured via the registry.

Discharge GLP-1

Numerator: Number of discharges in which BMC2 "Medications at Discharge" ="GLP-1 Inhibitors".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and "Diabetes Mellitus" ="Yes" (NCDR #4555).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

Discharge SGLT2i w/DM

Numerator: Number of discharges in which BMC2 "Medications at Discharge" ="SGLT2 Inhibitors".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and "Diabetes Mellitus" ="Yes" (NCDR #4555).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

SGLT2i LVEF<40%

Numerator: Number of discharges in which BMC2 "Medications at Discharge" ="SGLT2 Inhibitors".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and BMC2 Discharge section "LVEF Assessment this Admit" ="Yes" if yes, and "LVEF of <40%, if BMC2 LVEF Assessment this admit= "No", then "LVEF Assessed Pre-Procedure" ="Yes" (NCDR #5111) and NCDR #5116 "If Yes, Most Recent LVEF"= <40%.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"

- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

PCI in Setting of STEMI

All STEMI

Numerator: Procedures in which "PCI indication" =STEMI (NCDR # 7825) including: "Immediate PCI for Acute STEMI", "PCI for STEMI (Unstable, >12 hrs from Sx onset)", "PCI for STEMI (Stable, >12 hrs from Sx onset)", "STEMI – Stable (<= 12 hrs from Sx)", "STEMI PCI for STEMI (Stable after successful lytics)", "Rescue PCI for STEMI (after unsuccessful lytics)".

Denominator: Procedures.

When including timeframes Q1 2018 and prior:

Numerator: Procedure with NCDR Sequence#7035= Immediate PCI for STEMI, PCI for STEMI (unstable >12 hrs from Sx onset), PCI for STEMI (Stable>12 hrs Sx onset), PCI for STEMI (stable after successful full-dose thrombolysis), Rescue PCI for STEMI (after failed full-dose lytics).

Denominator: Total procedures.

****When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values. Please note there is one additional STEMI selection in v 5.0.**

STEMI Discharges

Numerator: Discharges in which "PCI indication" =STEMI (NCDR # 7825) including: "Immediate PCI for Acute STEMI", "PCI for STEMI (Unstable, >12 hrs from Sx onset)", "PCI for STEMI (Stable, >12 hrs from Sx onset)", "STEMI – Stable (<= 12 hrs from Sx)", "STEMI PCI for STEMI (Stable after successful lytics)", "Rescue PCI for STEMI (after unsuccessful lytics)".

Denominator: All STEMI.

When including timeframes Q1 2018 and prior:

Numerator: Discharges in which any PCI procedure occurring during that episode of care included a procedure with PCI Indication of any type of STEMI NCDR Sequence#7035= Immediate PCI for STEMI, PCI for STEMI (unstable >12 hrs from Sx onset), PCI for STEMI (Stable>12 hrs Sx onset), PCI for STEMI (stable after successful full-dose thrombolysis), Rescue PCI for STEMI (after failed full-dose lytics).

Denominator: All STEMI.

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values. Please note there is one additional STEMI selection in v 5.0.

All STEMI Discharged Alive

Numerator: "Discharge Status" ="Alive" (NCDR #10105).

Denominator: STEMI Discharges.

When including timeframes Q1 2018 and prior:

Numerator: Discharges with NCDR v 4.4 #9040="Alive".

Denominator: STEMI Discharges.

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values. Please note there is one additional STEMI selection in v 5.0.

Total Acute STEMI

Numerator: Procedures in which "PCI Indication" = "Immediate PCI for Acute STEMI" (NCDR # 7825).

Denominator: All STEMI.

When including timeframes Q1 2018 and prior:

Numerator: Procedures with NCDR v 4.4 #7035 PCI Indication="Immediate PCI for STEMI".

Denominator: All STEMI.

Cardiogenic Shock

Numerator: Procedures in which "Cardiovascular Instability" = "Cardiogenic Shock" or "Refractory Shock" (NCDR #7415).

Denominator: All STEMI.

When including timeframes of Q1 2018 and prior:

Numerator: Procedures with NCDR #7030="cardiogenic shock at start of PCI".

Denominator: All STEMI.

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Drug Eluting Stents

Numerator: Number of drug eluting stents implanted "Intracoronary Device(s)" = Sub-type "Drug Eluting Stent" (NCDR # 8027/8028).

Denominator: All STEMI.

When including timeframes of Q1 2018 and prior:

Numerator: Number of NCDR v 4.4 #7225="drug eluting stents" implanted.

Denominator: All STEMI.

Thrombectomy

Numerator: Procedures in which "Intracoronary Device(s)" = Sub-type "Extraction Catheter" or "Thrombectomy" (NCDR # 8027/8028).

Denominator: All STEMI.

When including timeframes Q1 2018 and prior:

Numerator: NCDR v 4.4 #7225="Thrombectomy" and/or "Extraction Catheter".

Denominator: All STEMI.

*Results will differ from historical reports due to inclusion of extraction devices.

Radial Access

Numerator: Procedures in which "Arterial Access Site" = " Radial" (NCDR #7320).

Denominator: All STEMI.

When including timeframes Q1 2018 and prior:

Numerator: Procedures with NCDR v 4.4 #5350="Radial".

Denominator: All STEMI.

GP IIb/IIIa Inhibitors

Numerator: Procedures in which "PCI Medications" /GP IIb/IIIa Inhibitors ="Yes" (NCDR #'s 7990/7995).

Denominator: All STEMI.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with NCDR v 4.4 #9500=GP IIb/IIIa (any) and #9510="Yes".

Denominator: All STEMI.

Aspirin within 24 hours

Numerator: Number of procedures where BMC2 PCI "Aspirin w/in 24 hours" = "Given".

Denominator: All STEMI.

Exclusion(s):

- BMC2 PCI "Aspirin w/in 24 hours" = "Contraindicated"

When including timeframes Q1 2018 and prior:

Numerator: number of procedures where NCDR #9500= "Aspirin" and #9510 "Yes".

Denominator: All STEMI.

Exclusion(s):

- NCDR v 4.4 #9510="Blinded"
- NCDR v 4.4 #9510 ="Contraindicated"

Total Transferred STEMI

Numerator: Number of procedures in which "Transferred- In For Immediate PCI for STEMI" = "Yes" (NCDR #7841).

Denominator: Total Acute STEMI.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures where NCDR v 4.4 #7055="Yes".

Denominator: Total Acute STEMI.

Door to Door to Device (Median min)

Median calculation of door to door to balloon (device) times reported in minutes including all "Transferred In For Immediate PCI for STEMI" (NCDR #7841) that also have a PCI indication of "Immediate PCI for STEMI" documented (NCDR #7825).

Please note those procedures with STEMI noted per first ECG (NCDR #7835="First ECG") are calculated utilizing NCDR field's: 7842 "Date & Time ED Presentation at Referring Facility", 3001 "Arrival Date/Time" and 7845 "First Device Activation Date & Time". (First device activation date & time-date and time ED presentation at referring facility)

Transfer STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7850).**

When including timeframes Q1 2018 and prior:

Median calculation of door to balloon(device) times reported in minutes including NCDR v 4.4 #7055 Transferred in for Immediate PCI for STEMI="Yes" and have a NCDR v 4.4 #7035 PCI indication= "Immediate PCI for STEMI"

Please note those discharges with STEMI noted per first ECG are calculated utilizing NCDR field's: 7050&7051-3000&3001(device date and time-arrival date and time). STEMI discharges with STEMI noted per subsequent ECG are calculate utilizing NCDR field#s:7050&7051-7045&7046 (device date and time-subsequent ECG date and time)

All Fields utilized in this calculation. (NCDR Sequence #'s:3010, 3000, 3001, 7035, 7040, 7045, 7046, 7050, 7051, 7055)

Transfer STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7065)**

Door to Door to Device <=120 mins

Numerator: Number of procedures with door to door to device time less than or equal to 120 minutes.

Denominator: Number of procedures in which "Transferred In For Immediate PCI for STEMI" ="Yes" (NCDR #7841) and "PCI indication" ="Immediate PCI for Acute STEMI" (NCDR #7825).

Please note those discharges with STEMI noted per first ECG are calculated utilizing NCDR field's: 7842 "Date & Time ED Presentation at Referring Facility", 3001 "Arrival Date/Time" and 7845 "First Device Activation Date & Time".

Transfer STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7850).**

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with door to door to device time less than or equal 120 minutes.

Denominator: NCDR v 4.4 #7055 Transferred in for Immediate PCI for STEMI="Yes" and NCDR v 4.4 7035 PCI indication="Immediate PCI for STEMI".

Please note those procedures with STEMI noted per first ECG are calculated utilizing NCDR field's: 7050&7051-3000&3001(device date and time-arrival date and time). STEMI discharges with STEMI noted per subsequent ECG are calculate utilizing NCDR field#s:7050&7051-7045&7046 (device date and time-subsequent ECG date and time).

All Fields utilized in this calculation. (NCDR Sequence #'s:3010, 3000, 3001, 7035, 7040, 7045, 7046, 7050, 7051)

Transfer STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7065).**

Non-transfer STEMI

Numerator: Number of procedures in which "Transferred In For Immediate PCI for STEMI"= "No" (NCDR #7841).

Denominator: Total Acute STEMI.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures where NCDR v 4.4 #7055="No".

Denominator: Total Acute STEMI.

Door to Device (median mins)

Median calculation of door to device (aka D2B) times reported in minutes including all "Transferred In For Immediate PCI for STEMI"="No" (NCDR #7841) and "PCI Indication" = "Immediate PCI for Acute STEMI" (NCDR #7825).

Please note those procedures with STEMI noted per first ECG are calculated utilizing NCDR fields: 3001 "Arrival Date/Time" and 7845 "First Device Activation Date & Time" (first device Activation date & time-arrival date and time).

STEMI procedures with STEMI noted per subsequent ECG (NCDR#7835 ="Subsequent ECG") are calculated utilizing NCDR field#s:7836-"If Subsequent ECG, ECG with STEMI/STEMI Equivalent Date & Time" and 7845-"First Device Activation Date & Time" (device date and time-subsequent ECG date and time).

Direct admit STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7850).**

When including timeframes Q1 2018 and prior:

Median calculation of door to balloon(device) times reported in minutes including NCDR v 4.4 #7055 Transferred in for Immediate PCI for STEMI" ="No" and NCDR v 4.4 #7035 PCI indication = "Immediate PCI for STEMI".

Please note those discharges with STEMI noted per first ECG are calculated utilizing NCDR field's: 7050&7051-3000&3001(device date and time-arrival date and time). STEMI discharges with STEMI noted per subsequent ECG are calculate utilizing NCDR field#s:7050&7051-7045&7046 (device date and time-subsequent ECG date and time).

All Fields utilized in this calculation NCDR v 4.4 Sequence #'s:3010, 3000, 3001, 7035, 7040, 7045, 7046, 7050, 7051, 7055).

STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7065).**

Door to Device (<=90 mins)

Numerator: Number of procedures with door to device time less than or equal to 90 minutes.

Denominator: "Transferred- In For Immediate PCI for STEMI"="No" (NCDR #7841) with "PCI Indication" = "Immediate PCI for Acute" STEMI" (NCDR #7825).

Please note procedures with STEMI noted via first ECG are calculated utilizing NCDR fields: 3001 "Arrival Date/Time" and 7845 "First Device Activation Date & Time" (first device Activation date & time-arrival date and time).

STEMI procedures with STEMI noted per subsequent ECG (NCDR#7835 ="Subsequent ECG") are calculated utilizing NCDR field#s:7836-"If Subsequent ECG, ECG with STEMI/STEMI Equivalent Date & Time" and 7845-"First Device Activation Date & Time" (device date and time-subsequent ECG date and time).

Direct admit STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7850).**

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with door to door to device time less than or equal 90 minutes.

Denominator: NCDR v 4.4 #7055 "Transferred in for Immediate PCI for STEMI="No" and NCDR v 4.4 7035 PCI indication="Immediate PCI for STEMI".

Please note those discharges with STEMI noted per first ECG are calculated utilizing NCDR fields: 7050&7051-3000&3001(device date and time-arrival date and time). STEMI discharges with STEMI noted per subsequent ECG are calculate utilizing NCDR field#s:7050&7051-7045&7046 (device date and time-subsequent ECG date and time).

Fields utilized in this calculation: NCDR v 4.4 Sequence #'s:3010, 3000, 3001, 7035, 7040, 7045, 7046, 7050, 7051, 7055.

Door to Device (>120 mins)

Numerator: Number of procedures with door to device time greater than 120 minutes.

Denominator: "Transferred-In for Immediate PCI for STEMI="No" (NCDR #7841) with "PCI Indication" = "Immediate PCI for Acute" STEMI" (NCDR #7825).

Please note procedures with STEMI noted via first ECG are calculated utilizing NCDR fields: 3001 "Arrival Date/Time" and 7845 "First Device Activation Date & Time" (first device Activation date & time-arrival date and time).

STEMI procedures with STEMI noted per subsequent ECG (NCDR#7835 ="Subsequent ECG") are calculated utilizing NCDR field#s:7836-"If Subsequent ECG, ECG with STEMI/STEMI Equivalent Date & Time" and 7845-"First Device Activation Date & Time" (device date and time-subsequent ECG date and time).

Direct admit STEMI procedures with information necessary to perform calculation are included. Procedures lacking the necessary information are excluded.

***Please note that procedures coded as having a "non-system delay" are not excluded from this calculation (NCDR # 7850).**

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with door to door to device time greater than 120 minutes.

Denominator: NCDR v 4.4 #7055 "Transferred in for Immediate PCI for STEMI="No" and NCDR v 4.4 7035 PCI indication="Immediate PCI for STEMI".

Please note those discharges with STEMI noted per first ECG are calculated utilizing NCDR fields: 7050&7051-3000&3001 (device date and time-arrival date and time). STEMI discharges with STEMI noted per subsequent ECG are calculated utilizing NCDR field#s: 7050&7051-7045&7046 (device date and time-subsequent ECG date and time).

Fields utilized in this calculation: NCDR v 4.4 Sequence #'s: 3010, 3000, 3001, 7035, 7040, 7045, 7046, 7050, 7051, 7055.

STEMI Discharge Medications

Aspirin

Numerator: Number of discharges with "Medication" ="Aspirin" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: All STEMI Discharges.

Exclusion(s):

- Discharge status of "Deceased"
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed aspirin at discharge NCDR v 4.4 # 9505="Aspirin and NCDR v 4.4 #9510="Yes".

Denominator: All STEMI discharges.

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

P2Y12 Inhibitors

Numerator: Number of discharges in which "Medication" ="P2Y12 Inhibitor (clopidogrel and/or prasugrel and/or ticagrelor and/or ticlopidine)" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: All STEMI Discharges in which "Discharge Status" = "Alive" (NCDR #10105) with any successful stent implantation "Intracoronary Device(s) Used" = Sub-type "Drug Eluting Stent", Bare Metal Stent", "Covered Stent" or "Coated Stent" NCDR (#8027/8028) during this episode of care.

Exclusion(s):

- Discharges with no successful lesions ("no successful" = NCDR #8023 "no" or NCDR #8024 "no") during this episode of care.
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected.
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason).
- Comfort Measures Only="Yes" (NCDR #10075)
- Discharge Status=Deceased (NCDR #10105)

*Stents not successfully deployed are not captured via the registry.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed P2Y12 (at discharge NCDR v 4.4 # 9505="Thienopyridines" and NCDR v 4.4 #9510="Yes").

Denominator: All STEMI Discharges that have had any successful stent implantation (NCDR#7225 (Drug eluting stents, bare metal stents, covered stents or coated stents) during this episode of care.

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

Clopidogrel

Numerator: Number of discharges with stent implantation during this episode of care who are prescribed clopidogrel (NCDR#10200="Clopidogrel" and NCDR #10205="Yes").

Denominator: All STEMI discharges in which "Discharge Status" =" Alive" (NCDR #10105) with any successful stent implantation "Intracoronary Device(s) Used" = Sub-type "Drug Eluting Stent", Bare Metal Stent", "Covered Stent" or "Coated Stent" NCDR (#8027/8028) during this episode of care.

Exclusion(s):

- Discharges with no successful lesions ("no successful" = NCDR #8023 "no" or NCDR #8024 "no") during this episode of care
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)
- Discharge Status=Deceased (NCDR #10105)

*Stents not successfully deployed are not captured via the registry.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed Clopidogrel (at discharge NCDR v 4.4 # 9505="Clopidogrel" and NCDR v 4.4 #9510="Yes").

Denominator: All STEMI Discharges that have had any successful stent implantation (NCDR#7225 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care.

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

Prasugrel

Numerator: Number of discharges with stent implantation during this episode of care who are prescribed Prasugrel at discharge (NCDR #10200="Prasugrel" and NCDR #10205="Yes").

Denominator: All STEMI discharges that have had any successful stent implantation (NCDR#7225 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care.

Exclusion(s):

- Discharges with no successful lesions ("no successful" = NCDR #8023 "no" or NCDR #8024 "no") during this episode of care.
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected.
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason).
- Comfort Measures Only="Yes" (NCDR #10075)
- Discharge status="Deceased"

*Stents not successfully deployed are not captured via the registry.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed Prasugrel (at discharge NCDR v 4.4 # 9505="Prasugrel" and NCDR v 4.4 #9510="Yes").

Denominator: All STEMI Discharges that have had any successful stent implantation (NCDR#7225 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care.

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

Ticagrelor

Numerator: Number of discharges with stent implantation during this episode of care who are prescribed Ticagrelor (NCDR#10200="Ticagrelor" and NCDR #10205="Yes").

Denominator: All STEMI discharges with any successful stent implantation (NCDR#7225 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care.

Exclusion(s):

- Discharges with no successful lesions ("successful" = NCDR #8023 "no" or NCDR #8024 "no") during this episode of care.
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected.
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason).
- Comfort Measures Only="Yes" (NCDR #10075)
- Discharge status (NCDR#10105) ="Deceased"

*Stents not successfully deployed are not captured via the registry.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed Ticagrelor (at discharge NCDR v 4.4 # 9505="Ticagrelor" and NCDR v 4.4 #9510="Yes").

Denominator: All STEMI Discharges that have had any successful stent implantation (NCDR#7225 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care.

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA).
- NCDR v 4.4 #9510="contraindicated" or "blinded"

Beta Blocker

Numerator: Number of discharges in which beta blocker is prescribed at discharge (NCDR#10200="Beta Blocker" and NCDR #10205="Yes").

If there is no documentation related to beta blocker in NCDR (field was entered after version underway), please utilize BMC2 Medications at Discharge section Beta Blocker. Use the following to assist with interpretation of BMC2 PCI fields compared to NCDR Cath PCI V5 field#10025 "Presc"="Yes", "Not Presc"="No", "Contra=No-medical reason/No-patient reason".

Denominator: All STEMI discharges

Exclusion(s):

- "Discharge Status" = "Deceased" (NCDR #10105)
- "Discharge location"="Other acute care hospital", "Left against medical advice (AMA)", "Hospice" (NCDR#10110 and #10115).
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- "Comfort Measures Only" ="Yes" (NCDR #10075)

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed beta blocker at discharge NCDR v 4.4 # 9505="beta blocker" and NCDR v 4.4 #9510="Yes"

Denominator: All STEMI Discharges

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

ACE with LVEF <40%

Numerator: Number of discharges prescribed ACE at discharge (NCDR #10205)

Denominator: All STEMI Discharges with LVEF of <40% (BMC2 "LVEF Assessment this admit", if "no" then NCDR #7061 "LVEF during Dx LHC", if "no" then NCDR #5111 "LVEF Assessed Pre-Procedure") without documented contraindication (NCDR #10205=No-medical reason/No-patient reason).

Exclusion(s):

- "Discharge Status" = "Deceased" (NCDR #10105) =
- "Discharge location" = "Other acute care hospital", "Left against medical advice (AMA)", "Hospice" (NCDR#10110 and #10115).
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed ACE at discharge. (NCDR v 4.4 #9505="ACE Inhibitor" and NCDR v 4.4 #9510="Yes")

Denominator: Discharges with ejection fraction <40% and discharge status of alive without documented contraindication. (NCDR Sequence # 9040 and #9510)

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status=" Deceased"
- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510="contraindicated" or "blinded"

ACE/ARB with LVEF <40%

Numerator: Number of discharges prescribed ACE or ARB at discharge (NCDR #10200="ACE Inhibitors" or "ARB" and NCDR #10205="Yes").

Denominator: All STEMI Discharges with LVEF of <40% (BMC2 "LVEF Assessment this admit", if "no" then NCDR #7061 "LVEF during Dx LHC", if "no" then NCDR #5111 "LVEF Assessed Pre-Procedure").

Exclusion(s):

- "Discharge Status" = "Deceased" (NCDR #10105)
- "Discharge location" = "Other acute care hospital", "Left against medical advice (AMA)", "Hospice" (NCDR#10110 and #10115).

- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)
- Intervention this hospitalization (NCDR#10030) "yes", with Type=CABG (NCDR #10031) selected
- BMC2 LVEF Assessment this admit, NCDR #7061, and NCDR #5111 are all entered as "No"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed ACE inhibitor and/or ARB at discharge. (NCDR v 4.4 #9505="ACE Inhibitor" or "ARB" and NCDR v 4.4 #9510="Yes").

Denominator: Discharges with ejection fraction <40% (NCDR v 4.4 #9030 Discharge EF, if "no", then NCDR v 4.4 #7025 Pre-PCI LVEF).

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status=" Deceased"
- NCDR v 4.4 #9045 Discharge Location=Other acute care hospital, Hospice, Left against medical advice (AMA).
- NCDR v 4.4 #9510="contraindicated" or "blinded"
- NCDR v 4.4 #9030 Discharge EF and #7025 Pre-PCI LVEF are both entered as "No"

Lipid Lowering Agents

Numerator: Number of discharges in which "Medication" ="Statin", "Non-Statin", or "PCSK9 Inhibitors (Alirocumab or Evolocumab)" (NCDR #10200) and "Prescribed" ="Yes".

Denominator: All STEMI Discharges.

Exclusion(s):

- Discharge status of "Deceased"
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Statin" and/or "Non-Statin" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"

- NCDR v 4.4 #9040 Discharge status "Deceased"

Statin

Numerator: Number of discharges prescribed statin at discharge NCDR#10200="Statin" and NCDR #10205="Yes".

Denominator: All STEMI discharges.

Exclusion(s):

- Discharge status of "Deceased"
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed statin at discharge NCDR v 4.4 # 9505="Statin" and NCDR v 4.4 #9510="Yes".

Denominator: All STEMI Discharges.

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

Non-statin (any)

Numerator: Number of discharges prescribed non-statin at discharge. NCDR#10200="Non-Statin", and NCDR #10205="Yes".

Denominator: All STEMI discharges

Exclusion(s):

- Discharge status of "Deceased"
- Discharge location (NCDR#10110 and #10115): other acute care hospital, Left against medical advice (AMA), Hospice.
- Documented contraindication to this medication (NCDR #10025=No medical reason/No-patient reason)
- Comfort Measures Only="Yes" (NCDR #10075)

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges prescribed non-statin at discharge NCDR v 4.4 # 9505="Non-Statin " and NCDR v 4.4 #9510="Yes"

Denominator: All STEMI Discharges

Exclusion(s):

- NCDR v 4.4 #9040 Discharge Status "Deceased"
- NCDR v 4.4 9045 Discharge locations= other acute care hospital, Hospice, Left against medical advice (AMA)
- NCDR v 4.4 #9510="contraindicated" or "blinded"

STEMI Outcomes

In Stent Thrombosis

Numerator: Number of procedures in which "Previously Treated Lesion" (NCDR#8008) ="Yes", "Date" (NCDR#8009) =same as other procedure during this admission/episode of care and "In-stent Thrombosis" (NCDR#8012) ="Yes".

Denominator: All STEMI procedures.

****When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field "Previously Treated Date" was not available on prior version.***

CIN

Numerator: Number of procedures with calculated difference between pre and post procedure creatinine of ≥ 0.5 mg/dl (post-pre ≥ 0.5 mg/dl). "Post-Procedure Creatinine" - "Pre-Procedure Creatinine" (NCDR Sequence #'s: 8510, 6050). In cases where no post creatinine is entered, but a discharge creatinine value is entered (NCDR#10060), the "Discharge Creatinine" value will be used as a substitute for the "Post-Procedure Creatinine" for this calculation.

Denominator: All STEMI procedures.

Exclusion(s):

- Procedures with missing creatinine values (NCDR #s 8510 or 6050)
- Documented death in lab (NCDR#10120)
- Currently on Dialysis (NCDR Sequence # 4560)

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures with calculated difference between pre and post procedure creatinine of at least 0.5 mg/dl (post-pre \geq 0.5 mg/dl). (NCDR v 4.4 #'s: 7315, 7341).

Denominator: All STEMI procedures.

Exclusion(s):

- NCDR v 4.4 #7315/7340 creatinine values are missing.
- NCDR v 4.4 #9055 death in lab="Yes"
- NCDR v 4.4 #4065 dialysis="Yes"

****When comparing prior data and data from current version be mindful that the fields utilized on prior reports may have been different between V 4.4 and V5 which will alter numerical values. Beginning with Q1 2015 PCI reports, sites entering creatinine in BMC2, had CIN calculated using ONLY the BMC2 creatinine values. BMC2 values were entered utilizing the entire Creatinine value as entered. When NCDR creatinine is utilized, expect different results as values entered in CathPCI were truncated and that coding instructions related to rounding varied throughout V 4.4.**

Bleeding

Numerator: Number of procedures in which "Bleeding-Access Site", "Bleeding-Gastrointestinal", "Bleeding-Genitourinary", "Bleeding-Hematoma at Access Site", "Bleeding-Other", "Bleeding-Retroperitoneal", "Cardiac Tamponade", "Stroke-Hemorrhagic"="Yes" (NCDR #9001/9002).

Denominator: All STEMI procedures.

****When including timeframes Q1 2018 and prior, please be aware there is no equivalent for this field coding instructions are much different between V 5.0 and V 4.4.***

Major Bleeding

Numerator: Number of procedures in which a hemoglobin decrease \geq 5gm/dl is noted between "Pre-Procedure Hgb" (NCDR#6030) to "Post Procedure Hgb" (NCDR #8505).

Denominator: STEMI procedures.

Exclusion(s):

- NCDR#7422="Yes" AND NCDR #7423="Extracorporeal Membrane Oxygenation (ECMO)" or "Combined Extracorporeal Membrane Oxygenation and Percutaneous Left Ventricular Assist Device (EPELLA)".

- NCDR#10030="Yes" **AND** NCDR#10031 "CABG", Valvular Intervention", "Cardiac Surgery (non CABG)", "Structural Heart Intervention (non-valvular)", "EP Study"

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for some fields utilized for this measure. Numerator: Number of procedures with decrease in Hgb \geq 5gm/dl. "Pre-Procedure Hemoglobin" (NCDR#6030)- "Post-

Stroke

Numerator: Number of procedures in which "Stroke-Hemorrhagic", "Stroke-Ischemic", or "Stroke-Undetermined" = "Yes" (NCDR #9001/9002).

Denominator: Total STEMI procedures.

When including timeframes Q1 2018 and prior:

Numerator: Number of procedures where NCDR v 4.4 #8015 intra or post procedure stroke ="yes".

Denominator: Total STEMI procedures.

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Mortality

Numerator: Number of discharges in which "Discharge Status" = "Deceased" (NCDR#10105).

Denominator: All STEMI discharges.

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with "Discharge Status= "Deceased" (NCDR # 9040).

Denominator: All STEMI discharges.

BMC2 PCI Priority Measures

These measures are often in BMC2 Performance Index and/or BCBSM Value Based Reimbursement. Including the current calendar year and those measures for the next calendar year when available.

CV/eGFR \geq 3 (Goal < 20%)

Numerator: number of procedures noted to have ratio of contrast dose (Contrast Volume/GFR) with results \geq 3. (NCDR Sequence #'s: 2050, 2060, 3001, 6050, 7215).

Denominator: Total procedures.

Exclusion(s):

- Procedures lacking information in any of the data fields used to calculate this field
- Patients currently on dialysis (#4560)

When including timeframes Q1 2018 and prior:

Numerator: number of procedures noted to have ratio of contrast dose (Contrast Volume/GFR) with results \geq 3. (NCDR Sequence #'s: 2050, 2060, 7315, 5325).

Denominator: Total procedures with exclusion of procedures lacking information in data fields used to calculate this field, as well as patients currently on dialysis (#4065). Including DOB, sex, serum creatinine, and contrast volume.

Exclusion(s):

- NCDR v 4.4 #4065 dialysis="Yes"
- Procedures lacking information in any of the data fields used to calculate this field

Denominator: Total procedures with exclusion of procedures lacking information in data fields used to calculate this field, as well as patients currently on dialysis (NCDR v 4.4 #4065). Including DOB, race, sex, weight, serum creatinine, and contrast volume.

Excludes:

- patients on dialysis (NCDR#4065).

Values are not rounded.

Cardiac Rehab Referral (Goal > 90%)

Numerator: number of discharges with "Cardiac Rehabilitation Referral"="Yes" (NCDR #10116)

Denominator: Discharges with any successfully treated lesion (NCDR #8024 Device deployed) with discharge status "Alive" (NCDR #10105) and "Discharge Location"="Home" (NCDR #10110).

Exclusions:

- Discharges with no successful lesions ("successful" = NCDR #8023 "Yes" AND NCDR #8024 "Yes").
- Intervention this hospitalization (NCDR#10030) "Yes", with Type=CABG (NCDR #10031) selected.
- Discharges with the following discharge locations : Skilled Nursing facility, Extended care/TCU/rehab, Other, Other acute care hospital, Left against medical advice, Hospice (NCDR #10110 and #10115).
- Comfort Measures Only="Yes" (NCDR #10075).
- Discharges with the following rationale for lack of cardiac rehabilitation referral : No-Medical Reason Documented, No-Health Care System Reason Documented (NCDR #10116).

When including timeframes Q1 2018 and prior:

Numerator: number of discharges with NCDR v 4.4 Sequence # 9050 cardiac rehabilitation referral="Yes"

Denominator: Discharges with NCDR v 4.4 #9040 Discharge status="Alive" with NCDR v 4.4 # 9045 discharge location marked as "Home".

Exclusions:

- NCDR v 4.4 #7205 Guidewire Across Lesion= "no" for ALL lesions in ALL procedures during the discharge being reported
- NCDR v 4.4 #9000 CABG= "yes"
- NCDR v 4.4 # 9050 Cardiac Rehabilitation referral= "ineligible"
- NCDR v 4.4 #9045 Discharge location="patients transferred to another acute care facility", " hospice", "who left against medical advice (AMA)", "extended care/TCU/rehab", " nursing home", or "other".

*Data entry selections are different from V 4.4 to V 5.0, this will affect numerical values

Pre or Post IV Hydration (Goal $\geq 96\%$)

Numerator: number of procedures in which "BMC2 Hydration-Intravenous"="Given" and number of mL administered is entered into pre and/or post PCI.

Denominator: Total procedures.

Exclusion(s):

- Currently on Dialysis=yes (NCDR #4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)
- Procedures with only post IV hydration noted will be excluded if BMC2 LVEDP ≥ 25 mmHg

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

When including timeframes Q1 2018 and prior:

Numerator: Procedures with pre and/or post hydration of any duration documented in the BMC2 Medications/Saline section="given" and any timeframe="pre" and/or "post".

Denominator: Total procedures.

Exclusion(s):

- NCDR v 4.4 #4065 Dialysis="yes" (was excluded on prior reports)
- BMC2 Patient History/Comorbidity Cardiac Arrest within 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)
- NCDR v 4.4 #7020 PCI Status="salvage" (not excluded on prior reports)
- NCDR v 4.4 #5040 Heart Failure w/in 2 weeks="yes" **and** NCDR v 4.4 #5045 NYHA=II, III, IV (not excluded on prior reports)
- NCDR v 4.4 #5060 Cardiogenic Shock w/in 24 hours="yes" (not excluded on prior reports/not an exact match with version 5.0 field)

**When comparing prior data and data from current version be mindful that the selections are much different between V 4.4 and V5 which will alter numerical values.

Pre-hydration(volume/≥3ML/Kg) eGFR <60

Title on Performance Index Document: Pre-PCI hydration (oral and/or IV) (volume/3ML/Kg) in patients with eGFR <60

Numerator: Number of procedures noted to have BMC2 Hydration-Intravenous and/or Oral Pre fluid vol/≥3ML/Kg (BMC2 PCI Hydration Intravenous Given="Yes" and/or BMC2 PCI Hydration Oral Given="Yes" and number of ml's entered divided by weight entered in "kg" (NCDR#6005) =≥3ml) Formula: PO+IV hydration/Kg=Xml

Denominator: Total number of procedures where patient is noted to have eGFR < 60.

Exclusion(s):

- Currently on Dialysis (NCDR Sequence # 4560)
- Cardiac Arrest Out of Healthcare Facility=yes (NCDR #4630)
- Cardiac Arrest at Transferring Healthcare facility=yes (NCDR #4635)
- Cardiac Arrest at this facility=yes (NCDR #7340)
- Cardiovascular instability=yes (NCDR #7410)
- PCI status=salvage (NCDR #7800)
- Cardiac Arrest within 24 hours (BMC2 Pt Hx and Comorbidity)
- Symptomatic Heart Failure=yes (NCDR #4001) with NYHA=II, III, IV (NCDR #4011)
- PCI Indication= STEMI – Immediate PCI for Acute STEMI (NCDR #7825)

*Please note that discharges with Heart Failure=yes and NYHA=I are included.

** Assume maximum body weight 100 kg

Please note: eGFR is calculated by using the National Kidney Foundation® Chronic Kidney Disease Epidemiology Collaboration (CKD-EPI) formula via the equation found here <https://www.kidney.org/content/ckd-epi-creatinine-equation-2021> .

Fields utilized for this calculation are:

- NCDR #6050 "Creatinine" (BMC2 PCI calculation presumes entry of a standardized serum creatinine)
- NCDR #3001 "Arrival Date/Time"- NCDR #2050 "Birth Date" =Age in years
- NCDR #2060 "Sex"

CKD-EPI Creatinine Equation (2021)

Expressed as a single equation:

$$eGFR_{Cr} = 142 \times \min(\text{Scr}/\kappa, 1)^\alpha \times \max(\text{Scr}/\kappa, 1)^{-1.200} \times 0.9938^{\text{Age}} \times 1.012 \text{ [if female]}$$

where:

Scr = standardized serum creatinine in mg/dL

κ = 0.7 (females) or 0.9 (males)

α = -0.241 (female) or -0.302 (male)

$\min(\text{Scr}/\kappa, 1)$ is the minimum of Scr/ κ or 1.0

$\max(\text{Scr}/\kappa, 1)$ is the maximum of Scr/ κ or 1.0

Age (years)

Discharge ACE/ARB (EF <40%) (Goal ≥98%)

Numerator: Number of discharges in which "Medication" = "ACE Inhibitors" or "ARB" (NCDR #10200) and "Prescribed" = "Yes".

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) and BMC2 Discharge section "LVEF Assessment this Admit" = "Yes" if yes, and "LVEF of <40%, if BMC2 LVEF Assessment this admit= "No", then "LVEF Assessed Pre-Procedure" = "Yes" (NCDR #5111) and NCDR #5116 "If Yes, Most Recent LVEF" = <40%.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="ACE Inhibitor" and/or "ARB"" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive" and NCDR #9030 LVEF=<40%.

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"
- NCDR v 4.4 #9000 CABG="Yes"

Anti-Platelet Therapy (Goal $\geq 98\%$)

Numerator: Number of discharges in which "Medication" ="P2Y12 Inhibitor (clopidogrel and/or prasugrel and/or ticagrelor and/or ticlopidine)" (NCDR #10200) or "Medication" ="Aspirin" (NCDR #10200) and "Prescribed" ="Yes" (NCDR#10205).

Denominator: Discharges in which "Discharge Status" = "Alive" (NCDR #10105) with any successful stent implantation "Intracoronary Device(s) Used" = Sub-type "Drug Eluting Stent", Bare Metal Stent", "Covered Stent" or "Coated Stent" (NCDR #8027/8028) during this episode of care.

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital"," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10025 Prescribed ="No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"
- No successful lesions (NCDR #8023="No" or NCDR Sequence #8024="No")

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with stent implantation during this episode of care (NCDR v 4.4 #7225), prescribed P2Y12 or ASA at discharge. (NCDR v 4.4 # 9505/NCDR #9510 "Yes").

Denominator: Discharges with discharge status of alive that have any successful stent implanted during this episode of care (NCDR v 4.4 #7225).

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 medications captured as "blinded"
- NCDR v 4.4 #9510 = "contraindicated"

- NCDR v 4.4 #9040 discharge status "deceased"
- NCDR v 4.4 #9000="yes"
- NCDR v 4.4 #7205 "no" /NCDR #7220 "no"=unsuccessful lesion
- NCDR v 4.4 #9015 CABG at your facility="yes"

*Devices not successfully deployed are not captured via the registry.

Discharge LLA (Goal $\geq 98\%$)

Numerator: Number of discharges in which "Medication" = "Statin", "Non-Statin", or "PCSK9 Inhibitors (Alirocumab or Evolocumab)" (NCDR #10200) and "Prescribed" = "Yes".

Denominator: Discharges where "Discharge Status" = "Alive" (NCDR #10105).

Exclusion(s):

- NCDR#10110 Discharge location="Other acute care hospital," Left against medical advice (AMA)"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10205 Prescribed ="No medical reason" or "No-patient reason" for the following medication categories (statin, non-statin, PCSK9)
- NCDR #10075 Comfort Measures Only="Yes"

When including timeframes Q1 2018 and prior:

Numerator: Number of discharges with NCDR v 4.4 #9505 Medication="Statin" and/or "Non-Statin" and NCDR v 4.4 #9510 Administered (prescribed)="Yes".

Denominator: Discharges where NCDR v 4.4 #9040 Discharge Status="Alive".

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)".
- NCDR v 4.4 #9510 Administered= "Blinded"
- NCDR v 4.4 #9510 Administered= "Contraindicated"
- NCDR v 4.4 #9040 Discharge status "Deceased"

IVUS/OCT Post PCI (goal $\geq 40\%$)

Numerator: Number of procedures where IVUS/OCT was utilized after PCI portion of procedure underway (BMC2 PCI IVUS/OCT post PCI="Yes").

Denominator: Total procedures

Exclusions:

- Brachytherapy=NCDR #8027/8028 "Intracoronary Device(s) Used"=any device labeled as "Brachytherapy" via NCDR ICD Device Master list.
- Attempted PCI=NCDR #8023 "Guidewire Across Lesion"="No" or NCDR #8024 "Device(s) Deployed"="No"

*This would not include any adjunctive measurements obtained to diagnostically assess any lesion. Specifically identifies when IVUS/OCT utilized to optimize PCI.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

IVUS/OCT Post PCI LM, ISR, IST (goal $\geq 40\%$)

Numerator: Number of procedures where IVUS/OCT was utilized after PCI portion of procedure underway (BMC2 PCI IVUS/OCT post PCI="Yes").

Denominator: Procedures with treated segment of left main (LM) disease (NCDR #8001 segment 11a, 11b, 11c) **and/or** NCDR #8008 "Previously treated Lesion"="Yes" **and** NCDR #8010 "Treated with Stent"= "Yes" with either or both of the following being selected NCDR#8011 "In-Stent Restenosis"="Yes", NCDR#8012 "In-Stent Thrombosis"="Yes".

Exclusions:

- Brachytherapy=NCDR #8027/8028 "Intracoronary Device(s) Used"=any device labeled as "Brachytherapy" via NCDR ICD Device Master list.
- Attempted PCI=NCDR #8023 "Guidewire Across Lesion"="No" **or** NCDR #8024 "Device(s) Deployed"="No"

*This would not include any adjunctive measurements obtained to diagnostically assess any lesion. Specifically identifies when IVUS/OCT utilized to optimize PCI.

When including timeframes of Q1 2018 and prior, please be aware there is no equivalent field.

Air Kerma $\geq 5\text{Gy}$ (Goal $< 1\%$)

Number of procedures in which Air Kerma dose entered is $\geq 5\text{Gy}$ (NCDR#7210).

Smoking Cessation Tx. (Goal $\geq 25\%$)

Numerator: Discharges with 2 or more of the following BMC2 smoking cessation counseling interventions (physician delivered advice, nicotine replacement therapy, referral to smoking counseling services) = "Yes"

Denominator: Discharges with tobacco use (NCDR #4625) =Current-Every Day, Current-Some Days with discharge status "Alive" (NCDR #10105) and discharge location (NCDR# 10110) marked as "Home".

Exclusion(s):

- NCDR#10110 Discharge location=" other acute care hospital", " Left against medical advice (AMA)", "Skilled Nursing facility", "Extended care/TCU/rehab"
- NCDR#10115 Hospice Care="Yes"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10105 Discharge Status="Deceased"

When including timeframes Q1 2018 and prior:

Numerator: Discharges with documented smoking cessation counseling via BMC2 (Discharge Education) Smoking cessation counsel="Yes".

Denominator: Discharges with NCDR v 4.4 #9040 discharge status=" Alive" **and** NCDR v 4.4 #4000 Current Smoker="Yes"

Exclusion(s):

- NCDR v 4.4 #9045 Discharge Location="Other acute care hospital", "Hospice", "Left against medical advice (AMA)"
- NCDR v 4.4 #9040 discharge status "deceased"

P2Y12 Duration Documented (Goal $\geq 75\%$)

Numerator: Number of discharges with BMC2 PCI "P2Y12 Duration"="Yes"

Denominator: Discharges with NCDR #10105 discharge status= "Alive" that have had *any* successful stent implantation (NCDR #8027/8028 (Drug eluting stents, bare metal stents, covered stents or coated stents)) during this episode of care

Exclusion(s):

- NCDR #10110 Discharge location="Other acute care hospital", " Left against medical advice (AMA)"
- NCDR #10115 Hospice Care="Yes"
- NCDR #10020/10025 "P2Y12" selections= Prescribed = "No medical reason" or "No-patient reason"
- NCDR #10075 Comfort Measures Only="Yes"
- NCDR #10030 Intervention(s) this hospitalization="Yes" and NCDR #10031 Type="CABG"
- Discharges with no successful lesions ("successful" = NCDR #8023 "yes" AND NCDR #8024 "yes")

Major Bleeding (Goal $\leq 0.85\%$)

Numerator: Procedures in which a hemoglobin decrease $\geq 5\text{gm/dl}$ is noted between "Pre-Procedure Hgb" (NCDR#6030) to "Post Procedure Hgb" (NCDR #8505).

Denominator: Procedures

Exclusion(s):

- NCDR#7422="Yes" AND NCDR #7423="Extracorporeal Membrane Oxygenation (ECMO)" or "Combined Extracorporeal Membrane Oxygenation and Percutaneous Left Ventricular Assist Device (ECPELLA)"
- NCDR#10030="Yes"

When including timeframes Q1 2018 and prior, please be aware there is no equivalent for some fields utilized for this measure.

Goals/Graphs

CV/eGFR ≥ 3	Goal: $<20\%$
Cardiac Rehab Referral	Goal: $\geq 90\%$
Pre-hydration(vol/Kg ≥ 3 ML)eGFR <60	Goal: $\geq 70\%$
ACE/.ARB EF $<40\%$	Goal: $\geq 98\%$
Beta Blocker EF $<40\%$	Goal: $\geq 98\%$
Anti-Platelet Therapy	Goal: $\geq 98\%$
Lipid Lowering Agents	Goal: $\geq 98\%$
*IVUS/OCT Post PCI	Goal: $\geq 40\%$
*IVUS/OCT Post PCI LM, ISR, IST	Goal $\geq 40\%$
Air Kerma ≥ 5 Gy	Goal: $\leq 1\%$
Smoking Cessation Tx.	Goal: $\geq 25\%$
*P2Y12 Duration Documented	Goal: $\geq 75\%$
Major Bleeding	Goal: $\leq 0.85\%$

*** Also incentive measure**