



SCIP-Inf-9 Abstracting Tips For 4Q2009 to 3Q2010 Discharges *Specifications Manual 3.0c and 3.1a*

Performance Measure Name: Urinary catheter removed on Postoperative Day 1 (POD 1) or Postoperative Day 2 (POD 2) with day of surgery being day zero

The following is a short explanation to help you understand the purpose of this measure and to assist you with the abstraction of the data elements for this measure. This measure is only looking at patients who had a foley placed for surgery. It is measuring how many of those patients still have this same foley in place after POD 2. Many patients that have a foley placed for surgery will retain them after POD 2 simply because health care providers forget it is still in place. The longer a foley stays in place, the greater the risk for Catheter-Acquired Urinary Tract Infection (CAUTI).

In 2008 CMS included 10 categories in the Hospital Acquired Condition (HAC) payment provisions, one of these is CAUTI.

The intent of this measure is for the physician to evaluate the patient on POD 1 and POD 2 regarding the necessity for the catheter and determine if the catheter can be removed.

Urinary Catheter

- To select Value "1" you have to find documentation that an indwelling catheter was placed during the intraoperative period and is still in place immediately postoperatively.
- The intraoperative period begins when the patient enters the operating room and ends when the patient leaves the operating room.

Urinary Catheter Removal


- If you find documentation that the catheter was removed after the intra-operative period, but still on POD 0, you will consider this removal on POD 1 or 2, and abstract it as such.
- If you cannot find documentation of the catheter removal on POD 0, 1, or 2, and there is documentation that the patient is voiding, you can use the documentation of voiding as being synonymous to removal.
- Use of BSC or bedpan will not suffice unless there is specific documentation the patient used one of these for voiding.



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Reason for Continuing Urinary Catheter

- Physician needs to evaluate the patient on POD 1 or 2 to determine if the catheter can be removed. If the catheter needs to remain, the reason the patient needs to keep the catheter must be documented.
- An order to leave the catheter in will not be sufficient unless the reason to leave it in is written with the order.
- This documentation has to be found on POD 1 or 2.
- There are no specific reasons that have to be used: refer to the *Specifications Manual* for the excluded reasons.
- If the patient is in the ICU and there is documentation that a diuretic was given on POD 1 or 2, this will abstract as Allowable Value "1"; it is not necessary to look further for a physician documented reason. You can only select one Allowable Value.

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