Adverse Drug Event (ADE) Frequently Asked Questions (FAQs)

The following FAQs represent inquiries received by the Health Services Advisory Group (HSAG) Hospital Improvement Innovation Network (HIIN) Analytics Team on ADEs during HSAG HIIN’s Data Analytics Office Hours, telephone conferences with hospitals, questions received through Clinical Improvement Advisors (CIAs), and questions received via the measurehelp@hsaghiin.org inbox. This document is updated as new questions are received. Additionally, the current responses may change as the project evolves over time.

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Questions and Answers

Q1: When collecting patient days for INR > 5, does that refer to actual patient days per patient, or any number of patients?

- A: When looking at the INR > 5, the denominator is the number of patient days for adults (18 years of age or older) patients on warfarin, excluding the emergency department. For example, your hospital has Patient A who was in the hospital for 7 days total, the patient was on warfarin for 5 days, and 3 of those patient days they had an INR > 5. Using the example, the denominator would be 7 days for that patient. Your hospital would sum that up across all the incidents, and get the number of total patient days for the patients that are on warfarin for the time period in question. For the numerator, no matter how many times there was an INR > 5 on those days, even if it was more than once a day for 3 days, the numerator would be 3. This logic can be applied for all the ADE measures located in the Compendium of Measures (CoM).

Q2: What if the patient was on warfarin before they were admitted? Is the INR > 5 measure only referring to patient days once they are inpatient or before they were admitted?

- A: HSAG HIIN is only looking for the patient days once they are inpatient at your hospital.

Q3: When submitting data for INR > 5 per 1,000 patient days, should patients currently transitioning to Coumadin from another medication be included?

- A: The denominator is the number of patient days for adults (18 years of age or older) on warfarin, excluding the emergency department. Any patient who has received warfarin, or has an order for warfarin (this can be used as a proxy for administration to reduce data collection burden), should be included in the denominator.

Q4: Should inpatient days be included for patients who use their own insulin pump (which are self-administered) be included in the denominator?

- A: Patients using their own insulin pump can be excluded. Given the inconsistencies in how hospitals document self-administered or patient's own medications, this will be challenging to universally exclude from the measure for all facilities, but each facility can choose to manage these circumstances in the least burdensome way.
Q5: What drugs are considered an “opioid agent”?

- A: HSAG HIIN considers the following opioid agents to be included in the Naloxone User of Reversal of Opioid Over-Sedation per 1,000 Patients Days: codeine, fentanyl, hydrocodone, hydrocodone/acetaminophen, hydromorphone, meperidine, methadone, morphine, oxycodone, oxycodone and acetaminophen, and oxycodone and naloxone.

Q6: Should the metrics be grouped by month based on the discharge date of the visit or the date of that specific inpatient day?

- A: Patient days should be grouped by the date of the specific inpatient day.

Q7: What type of patients are to be included in the measure, or what are the specifications on the numerator and denominator?

- A: For the ADE measures, the patient type, numerator and denominator specifications are located in the Compendium of Measures. For example, the measure Naloxone Use for Reversal of Opioid Over Sedation, the patient type is an adult (18 years of age or older) on an opioid agent. The numerator for this measure is the number of patient days where naloxone administration was required for adult patients on an opioid agent. The denominator for this measure is the number of patient days for adult patients on an opioid agent, excluding emergency department and operating room.

Q8: Are the patients to be included only inpatients and are there any exclusions?

- A: The patients to be included are only inpatients. Any exclusions are outlined in the Compendium of Measures.

Q9: What are the deadlines for ADE self-reported data submissions?

- A: All deadlines are detailed in the Data Submission Instructions on the Secure Data Portal. HSAG HIIN encourages all participating hospitals to submit their ADE data by June 16.