M2S
QCDR Measures

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M2S 1: Procedures with statin and antiplatelet agents prescribed at discharge

Measure Description:

This measure estimates the frequency of procedures where a statin and antiplatelet agent was prescribed at discharge for any of the following procedures: Infra-Inguinal Bypass, Supra-Inguinal Bypass, Peripheral Vascular Intervention, Carotid Artery Stent, Carotid Endarterectomy, Thoracic and Complex EVAR, Endovascular AAA Repair, and Open AAA Repair.

Denominator:

All procedures captured in the Vascular Quality Initiative® Infra-Inguinal Bypass, Supra-Inguinal Bypass, Peripheral Vascular Intervention, Carotid Artery Stent, Carotid Endarterectomy, Thoracic and Complex EVAR, Endovascular AAA Repair, and Open AAA Repair Registries where the patient was discharged alive during the reporting period.

Denominator Exceptions:

N/A

Denominator Exclusions:

Exclude procedures associated with patients who were not discharged on statins or antiplatelets due to a documented medical reason.

Numerator:

All procedures captured in the Vascular Quality Initiative® Infra-Inguinal Bypass, Supra-Inguinal Bypass, Peripheral Vascular Intervention, Carotid Artery Stent, Carotid Endarterectomy, Thoracic and Complex EVAR, Endovascular AAA Repair, and Open AAA Repair Registries where the patient was discharged alive during the reporting period where a statin and antiplatelet agent were prescribed at discharge.

M2S 2: Amputation-free survival at one-year following Infra-Inguinal Bypass for intermittent claudication

Measure Description:

This measure estimates freedom from amputation or death one year after Infra-Inguinal Bypass for intermittent claudication.

Denominator:

All procedures captured in the Vascular Quality Initiative® Infra-Inguinal Bypass Registry with indication of claudication for the leg undergoing treatment during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All procedures captured in the Vascular Quality Initiative® Infra-Inguinal Bypass Registry with indication of claudication for the leg undergoing treatment during the calendar year prior to the reporting interval with at least 9 month follow up and who were alive and without minor or major amputation reported at a follow-up visit at least 9 months after the treatment

M2S 3: Infrainguinal bypass for claudication patency assessed at least 9 months following surgery

Measure Description:

This measure estimates the frequency of graft patency assessment one year Infra-Inguinal Bypass.

Denominator:

All Infrainguinal bypass procedures performed for claudication in Vascular Quality Initiative® Infrainguinal Bypass Registry during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All Infrainguinal bypass procedures performed for claudication in Vascular Quality Initiative® Infrainguinal Bypass Registry during the calendar year prior to the reporting interval with at least 9 month follow up where graft patency was assessed at follow-up.

M2S 4: Amputation-free survival at one-year following Supra-Inguinal Bypass for claudication

Measure Description:

This measure estimates freedom from amputation or death one year after Supra-Inguinal Bypass for claudication.

Denominator:

All procedures captured in the Vascular Quality Initiative® Supra-Inguinal Bypass Registry with indication of claudication in at least one leg and no pain while resting, and no tissue loss or acute ischemia for the leg(s) undergoing treatment during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All procedures captured in the Vascular Quality Initiative® Supra-Inguinal Bypass Registry with indication of claudication in at least one leg and no pain while resting, and no tissue loss or acute ischemia for the leg(s) undergoing treatment during the calendar year prior to the reporting interval with at least 9 month follow up who were alive and without minor or major amputation reported after the treatment.

M2S 5: Amputation-free survival at one-year following Peripheral Vascular Intervention for intermittent claudication

Measure Description:

This measure estimates freedom from amputation or death one year after Peripheral Vascular Intervention for intermittent claudication.

Denominator:

All procedures captured in the Vascular Quality Initiative® Peripheral Vascular Intervention Registry with indication of claudication for the treated leg(s) undergoing Peripheral Vascular Intervention below external iliac during the calendar year prior to the reporting interval with at least at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All procedures captured in the Vascular Quality Initiative® Peripheral Vascular Intervention Registry with indication of claudication for the treated leg(s) undergoing Peripheral Vascular Intervention below external iliac during the calendar year prior to the reporting interval with at least at least 9 month follow up associated with patients who were alive and without minor or major amputation reported after the intervention.

M2S 6: Peripheral Vascular Intervention patency assessed at one-year following infrainguinal PVI for claudication

Measure Description:

This measure estimates the frequency of patency assessment one year following infrainguinal Peripheral Vascular Intervention for claudication.

Denominator:

All procedures captured in the Vascular Quality Initiative® Peripheral Vascular Intervention Registry for claudication distal to the external iliac during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All procedures captured in the Vascular Quality Initiative® Peripheral Vascular Intervention Registry for claudication distal to the external iliac during the calendar year prior to the reporting interval with at least 9 month follow up where patency was assessed at follow up.

M2S 7: Ipsilateral stroke-free survival at one-year following isolated Carotid Artery Stenting for asymptomatic procedures

Measure Description:

This measure estimates freedom from one year stroke or death after carotid artery stenting for asymptomatic carotid stenosis.

Denominator:

All procedures captured in the Vascular Quality Initiative® Carotid Artery Stenting Registry for asymptomatic carotid stenosis during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All procedures captured in the Vascular Quality Initiative® Carotid Artery Stenting Registry for asymptomatic carotid stenosis during the calendar year prior to the reporting interval with at least 9 month follow up which are free of either stroke or death (any cause) after index carotid artery stenting.

M2S 8: Ipsilateral stroke-free survival at one-year following isolated CEA for asymptomatic procedures

Measure Description:

This measure estimates freedom from one year stroke or death after carotid endarterectomy for asymptomatic carotid artery stenosis.

Denominator:

All procedures captured in the Vascular Quality Initiative® Carotid Endarterectomy Registry for carotid endarterectomy for asymptomatic disease during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure. This measure also excludes combined Coronary Artery Bypass Graft procedures, and excludes combined proximal or distal intervention or other combined arterial procedures.

Numerator:

All procedures captured in the Vascular Quality Initiative® Carotid Endarterectomy Registry for carotid endarterectomy for asymptomatic disease during the calendar year prior to the reporting interval with at least 9 month follow up which are free of either stroke or death (any cause) after index carotid endarterectomy.

M2S 9: Imaging-based maximum aortic diameter assessed at one-year following Thoracic and Complex EVAR procedures

Measure Description:

This measure estimates the frequency of imaging-based maximum aortic diameter assessment one year after Thoracic and Complex EVAR procedures.

Denominator:

All Thoracic and Complex EVAR procedures captured in Vascular Quality Initiative® Thoracic and Complex EVAR Registry during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure. This measure also excludes conversion to open, and excludes deaths before one year.

Numerator:

All Thoracic and Complex EVAR procedures captured in Vascular Quality Initiative® Thoracic and Complex EVAR Registry during the calendar year prior to the reporting interval with at least 9 month follow up, where the follow up included a CT scan or MR documenting the maximum aortic diameter.

M2S 10: One-year survival after elective repair of small thoracic aortic aneurysms

Measure Description:

This measure estimates freedom from death one year after elective repair of small thoracic aortic aneurysms in patients without a known connective tissue disorder.

Denominator:

All elective procedures for aneurysm repair captured in the Vascular Quality Initiative® Thoracic and Complex EVAR Registry during the calendar year prior to the reporting interval where maximum aortic diameter is less than or equal to 6 cm for women, or less than or equal to 6.5 cm for men at the index procedure, and with at least at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up that are not dead are excluded from this measure. Procedures associated with patients with a known connective tissue disorder are excluded from this measure.

Numerator:

All elective procedures for aneurysm repair captured in the Vascular Quality Initiative® Thoracic and Complex EVAR Registry during the calendar year prior to the reporting interval where maximum aortic diameter is less than or equal to 6 cm for women, or less than or equal to 6.5 cm for men at the index procedure, and with at least 9 month follow up and who are alive.

M2S 11: Imaging-based maximum aortic diameter assessed at one-year following Endovascular AAA Repair procedures

Measure Description:

This measure estimates the frequency of imaging-based maximum aortic diameter assessment one year after Endovascular AAA Repair procedures.

Denominator:

All Endovascular AAA Repair procedures captured in Vascular Quality Initiative® Endovascular AAA Repair Registry during the calendar year prior to the reporting interval with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure. This measure also excludes procedures that were converted to open.

Numerator:

All Endovascular AAA Repair procedures captured in Vascular Quality Initiative® Endovascular AAA Repair Registry during the calendar year prior to the reporting where maximum aortic diameter was assessed during a follow up visit at least 9 months after surgery and who are alive.

M2S 12: One-year survival after elective repair of small abdominal aortic aneurysms

Measure Description:

This measure estimates freedom from death one year after elective repair of small abdominal aortic aneurysms.

Denominator:

All elective procedures for aneurysm repair captured in the Vascular Quality Initiative® Endovascular AAA Repair Registry during the calendar year prior to the reporting interval where maximum aortic diameter is less than or equal to 5.5 cm for women, or less than or equal to 6.0 cm for men at the index procedure, and with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All elective procedures for aneurysm repair captured in the Vascular Quality Initiative® Endovascular AAA Repair Registry during the calendar year prior to the reporting interval where maximum aortic diameter is less than or equal to 5.5 cm for women, or less than or equal to 6.0 cm for men at the index procedure, and with at least 9 month follow up and who are alive.

M2S 13: One-year survival after elective open repair of small abdominal aortic aneurysms

Measure Description:

This measure estimates freedom from death one year after elective open repair of small abdominal aortic aneurysms.

Denominator:

All elective procedures for aneurysm repair captured in the Vascular Quality Initiative® Open AAA Repair Registry during the calendar year prior to the reporting interval where maximum aortic diameter is less than or equal to 5.5 cm for women, or less than or equal to 6.0 cm for men at the index procedure, and with at least 9 month follow up.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients lost to follow up are excluded from this measure.

Numerator:

All elective procedures for aneurysm repair captured in the Vascular Quality Initiative® Open AAA Repair Registry during the calendar year prior to the reporting interval where maximum aortic diameter is less than or equal to 5.5 cm for women, or less than or equal to 6.0 cm for men at the index procedure, and with at least 9 month follow up who are alive.

M2S 14: Disease specific patient-reported outcome surveys for Varicose Vein procedures

Measure Description:

This measure estimates the frequency of disease specific patient reported outcomes assessments for varicose vein procedures during the reporting year.

Denominator:

All procedures captured in the Vascular Quality Initiative® Varicose Vein Registry during the reporting year.

Denominator Exceptions:

N/A

Denominator Exclusions:

Exclude procedures where the patient died prior to discharge.

Numerator:

All procedures captured in the Vascular Quality Initiative® Varicose Vein Registry during the reporting year that had patient reported outcomes recorded both prior to treatment and post-treatment during the reporting year.

M2S 15: Appropriate management of retrievable IVC filters

Measure Description:

This measure estimates the frequency of IVC Filter procedures that used a retrievable filter, and were managed appropriately. Appropriate management is described as one of the following: (1) the IVC Filter was removed during the reporting year, or (2) the IVC filter was attempted to be removed during the reporting year, or (3) the patient was evaluated within three months of filter placement, and removal was not clinically indicated.

Denominator:

All retrievable IVC filter procedures captured in the Vascular Quality Initiative® Inferior Vena Cava Filter Registry during the reporting year.

Denominator Exceptions:

N/A

Denominator Exclusions:

Procedures associated with patients who could not be contacted for follow-up, or who refused filter removal at evaluation, will be excluded from the measure.

Numerator:

All retrievable IVC filter procedures captured in the Vascular Quality Initiative® Inferior Vena Cava Filter Registry during the reporting year associated with one of the following: (1) the IVC Filter was removed during the reporting year, (2) the IVC filter was attempted to be removed during the reporting year, or (3) the patient was evaluated within three months of filter placement, and removal was not clinically indicated.

PQRS Measures

- 21: Perioperative Care: Selection of Prophylactic Antibiotic – First OR Second Generation Cephalosporin
- 22: Perioperative Care: Discontinuation of Prophylactic Parenteral Antibiotics (Non-Cardiac Procedures)
- 257: Statin Therapy at Discharge after Lower Extremity Bypass (LEB)
- 258: Rate of Open Repair of Small or Moderate Non-Ruptured Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #7
- 259: Rate of Endovascular Aortic Repair (EVAR) of Small or Moderate Non-Ruptured Abdominal Aortic Aneurysms (AAA) without Major Complications (Discharged to Home by Post-Operative Day #2)
- 260: Rate of Carotid Endarterectomy (CEA) for Asymptomatic Patients, without Major Complications (Discharged to Home by Post-Operative Day #2)
- 346: Rate of Postoperative Stroke or Death in Asymptomatic Patients Undergoing Carotid Endarterectomy (CEA)
- 347: Rate of Endovascular Aneurysm Repair (EVAR) of Small or Moderate Non-Ruptured Abdominal Aortic Aneurysms (AAA) Who Die While in Hospital