

Meeting Questions and Answers:

Subject: ACTION Registry®-GWTG™ Training for Accelerator Project Regions

Start Time: Wednesday, April 10, 2013 1:00:00 PM GMT-5:00

Robin **Asked:** Great job! Very helpful presentation!

Sheela **Asked:** We need further clarification on the HF patient? They did have Sx of ACS?

A: The patient must have symptoms of HF to answer as HF on presentation or as In-Hospital event.

Glenda **Asked:** Do you include a patient who presented to the first hospital for ortho reasons; had a STEMI, and then was transported to our facility as an acute STEMI.

A: No, this patient would not be included since they did not present to the first facility for symptoms of ACS.

Demarius **Asked:** Will ACTION always prompt you if the patient does not qualify for the registry?

A: We recommend that you utilize the ACTION Inclusion Worksheet to help determine if a patient should be included. The tool will provide you errors when the patient does not meet inclusion criteria, but that does not occur until you have entered in most or all of your data for that patient. The inclusion worksheet will save you time, so you can determine quickly that a patient should or should not be included. It is located at [ncdr.com/ Log in/ ACTION/Resources/Documents v2](http://ncdr.com/Log%20in/ACTION/Resources/Documents%20v2).

Sheela **Asked:** So on the HF patient if the ED physician says NSTEMI then would you include?

A: If the patient presents with symptoms of ACS and is ruled in as HF and AMI then yes you would include this patient.

jeff palichuck **Asked:** If the patient presents to outside hospital with STEMI and receives TNK, reperfuses but continues to have chest pain and is transferred to our facility and has a PCI, is this case to be included?

A: Yes, the patient came to you as an acute MI, and required a Rescue PCI for failed thrombolytic.

Kristy **Asked:** Where can the previous recorded session be found?

Lori Hollowell **Answered:**

<https://www150.livemeeting.com/cc/qualityinitiatives/view?cn=&id=NSZB9C&pw=view>

Joseph **Asked:** How can we download this presentation for future review with staff? Thank you

Lori Hollowell **Answered:** Look at the top of the webinar window on the right, click on the icon that looks like 3 sheets of paper. Attachments are located there. Thanks for asking.

Jodie **Changes Question To:** Would you include a patient if the patient arrested at work with c/o n/v and malaise voiced to coworker earlier in the morning, patient brought in post arrest to ED on day one, for example March 11th, then on day 3 taken to lab, march 13th. Initial EKG did not show STEMI, but had positive cardiac markers within first 24 hours. Patient received PCI with DES placement

A: This patient did present with symptoms of ACS and did rule in as a NSTEMI with the positive biomarkers within 24 hours of arrival. We do not exclude based on when the patient went to the cath lab.

Theresa **Changes Question To:** please clarify -- if scenario regarding clean coronaries includes + biomarkers too? I understand that spasm and high demand states etc can cause MI without disease, but your scenario without + biomarkers would not be an MI...

A: The patient presented as STEMI, STEMI patients do not have to have positive cardiac biomarkers to be included. You are correct in your thinking though for this group of AMI patients. The Steering Committee does want all Type II MI to have positive biomarkers, but do not have this as a rule for inclusion at this time.

Jessica **Asked:** Can you comment on how to pull reports at the patient level. For example, if I want a patient list of all outliers for D2B>90min in 2012Q3, how do i get that? Thank you.

A: You will use the Dashboard, which is a selection on the ncdr.com webpage, select the timeframe (quarter you wish to look at), then click on the “tab” under the timeframe that has the metric you wish to look at. Graphs will open of all metrics in the category. You will find the specific metric you wish to drill down on, then click on the bar graph for the quarter of data you wish to evaluate. An excel will open with all the patients listed that are included in the denominator for that quarter. The numerator column will provide whether that patient met the metric or not. The fall outs are the “no’s”. You are welcome to view the recorded webinar on how to read the dashboard, located on the home page, near the end of the announcements.

Joseph **Asked:** Once we completed the episode for a quality review it presented as complete. I know some data elements were not all filled. Are there certain fields that do not need data entered?

A: Most all fields do require data to be completed. There are a few fields that have a zero threshold that you are able to leave blank without failing the DQR. These would be Middle Name, HIC #, Duration of ADP at discharge. All other fields require a specific % of fields to be answered to pass the DQR. These percentages are documented in the Thresholds document under Resources/ Documents v2.

jeff palichuck **Changes Question To:** If the patient presents to OSH w/ STEMI, receives TNK has reperfusion with resolution of STE's. Continues to have chest pain is transferred to our facility for PCI. Is this case included?

A: Yes, this patient came to you for STEMI care. The PCI indication would be “Rescue PCI”.

Jodie **Changes Question To:** Would you include a patient if the patient voiced to coworker c/o n/v then arrested at work. Brought to ED on day one. Had positive cardiac markers. EKG did not show STEMI. Patient brought to Lab on Day 3. Underwent PCI with DES? Thank you

A: Yes, this patient did have symptoms of ACS, did have positive cardiac biomarkers, so would be included as NSTEMI.

Jessica **Changes Question To:** Fantastic explanation... I was able to follow right along. Thanks! Is there a way to get physician level detail...so we can trend data per physician for our internal QA Committee. TY

A: ACTION Registry-GWTG does not capture physician data. We do though have the “Optional Section K” that you may use on your own, entering the data in Section K and extracting the data through raw data extract, to then create your own reports.

Maureen **Asked:** We have a patient that was having Chest Pain for 8 days, pain persisted Had EGD outpatient that was negative, went to Cardiologist positive STEMI positive biomarkers- would we include this patient?

A: If the patient was still having symptoms of ACS within 24 hours of arrival and the physician did not document the AMI as “old”, then you would include this patient. We do not exclude based on how long the patient was having symptoms, just if they were still having symptoms within the 24 hours.

Joanne **Changes Question To:** I was asking about pre hospital EKG's. Several EMS's have been doing 4 lead EKG's instead of 12 lead EKG's. This scenario the patient had a 4 lead EKG that was NSR the hospital EKG read STEMI. Does the hospital EKG get recorded as a subsequent EKG?

A: You may not include 4 lead ECG.

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