Overall Diabetes Cardiovascular Initiative Composite Score (AHASTR150) criteria:
≥ 80% Compliance for 12 Consecutive Months (Calendar Year)

- IV Thrombolytics
  Arrive by 3.5 hours / Treat by 4.5 hours (AHASTR149)
- Early Antithrombotics for Patients With Diabetes (AHASTR148)
- VTE Prophylaxis (AHASTR154)
- Antithrombotic Prescribed at Discharge (AHASTR145)
- Anticoagulation Prescribed for AFib/AFlutter at Discharge (AHASTR144)
- Smoking Cessation (AHASTR151)

Intensive Statin Prescribed at Discharge (AHASTR298)
- Diabetes Treatment (AHASTR130)
- Therapeutic Lifestyle Changes (TLC) Recommendations at Discharge (AHASTR153)
- Antihyperglycemic Medication With Proven CVD Benefit (AHASTR146)

Overall Diabetes Cardiovascular Initiative Composite Score (AHACAD73) criteria:
≥ 75% Compliance for 12 Consecutive Months (Calendar Year)

- ACE-I or ARB for LVSD at Discharge for Patients with Diabetes (AHACAD66)
- Adult Smoking Cessation Advice for Patients with Diabetes (AHACAD67)
- Antihyperglycemic Medication with Proven CVD Benefit (AHACAD74)
- Aspirin at Discharge for Patients with Diabetes (AHACAD68)
- Beta-Blocker at Discharge for Patients with Diabetes (AHACAD69)
- Cardiac Rehabilitation Patient Referral from an Inpatient Setting (AHACAD70)
- Dual Antiplatelet Therapy Prescribed at Discharge (AHACAD71)
- High-Intensity Statin at Discharge (AHACAD72)

Overall Diabetes Cardiovascular Initiative Composite Score criteria:
≥ 75% Compliance for 12 Consecutive Months (Calendar Year)

- ACEI/ARBs or ARNI at Discharge (AHAHF77)
- Evidence-Based Beta Blocker Prescribed at Discharge (AHAHF78)
- Post-Discharge Appointment Scheduled (AHAHF80)
- Smoking Cessation (AHAHF82)
- Left Ventricular Function Assessed (AHAHF79)
- Lipid-Lowering Medication Prescribed at Discharge (AHAHF81)
- Diabetes Treatment (AHAHF26)
- Antihyperglycemic Medication With Proven CVD Benefit (AHAHF84)

Hospital Must Qualify for Silver Level or Higher Achievement Award

≥10 Patients with a New Onset or Previous History of Diabetes

THE AWARD REPORTING PERIOD MUST:
1. Be the same calendar year as your eligible achievement award
2. Include the same patient population as is included in the eligible achievement award

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