

DOCUMENTATION OF SUPPORT SURFACE OR OFFLOADING OF PATIENTS WITH STAGE III or IV PRESSURE ULCERS

DESCRIPTION:

Percentage of total visits among patient aged 18 years and older with a diagnosis of stage III or IV pressure ulcers in whom the status of offloading or use of support surface was documented within the 12-month reporting period.

DEMOGRAPHICS:

Patients aged 18 years and older; males and females

DENOMINATOR CODING:

All visits for patients aged 18 years and older with a diagnosis of stage III and IV pressure ulcer

Denominator Criteria (Eligible Cases):

Patients aged \geq 18 years on date of encounter

AND

Diagnosis for pressure ulcer (line-item ICD-9-CM): 707.00, 707.01, 707.02, 707.03, 707.04, 707.05, 707.06, 707.07, 707.09, 707.20, 707.21, 707.22, 707.23 and 707.24, 707.25 (must have a location diagnosis code and the stage of the pressure ulcer diagnosis code)

AND

Patient encounter during the reporting period (CPT): 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 11042-11047, 97597-97598, 97605-97606, 99183, 15170-15431

NUMERATOR:

Visits in which the status of offloading or use of support surface was documented within the 12 month reporting period.

Numerator Quality-Data Coding Options for Reporting Satisfactorily:

CPT II NewCode: Documentation of Support Surface or offloading

OR

Support Surface or offloading not documented, Reason not Specified

Append a reporting modifier (8P) to CPT Category II code **NewCode** to report circumstances when the action described in the numerator is not documented and the reason is not otherwise specified.

NewCode with 8P: Adequate support surfaces not documented, reason not otherwise specified

Measure Reporting via Registry:

ICD-9-CM diagnosis codes, CPT codes, and patient demographics are used to identify patients who are included in the measure's denominator. The numerator options as described in the quality-data codes are used to report the numerator of the measure. The quality-data codes listed do not need to be submitted for registry-based submissions however these codes may be submitted for those registries that utilize claims data.

RATIONALE:

Offloading of pressure in the area of severe pressure ulcers is required for the ulcer to heal and prevent further damage.

CLINICAL RECOMMENDATION STATEMENTS:

A dynamic support surface may be appropriate for patients with a pressure ulcer who cannot assume a variety of positions in bed, or who "bottom out" on a static surface, or whose ulcer is failing to progress

toward healing. (Level I evidence). In patients who have a large stage 3 or stage 4 pressure ulcers, or multiple pressure ulcers involving several turning surfaces, a low-air-loss or air-fluidized bed may be indicated. (Level I evidence) (Wound Healing Society 2007). Available at: <http://www3.interscience.wiley.com/cgi-bin/fulltext/118605279/HTMLSTART>

Patients with advanced skin breakdown (stage III or IV) need advanced pressure relief products. Patients with multiple stage sites may be appropriate for pressure relief surfaces [Level of evidence is "R"]. Institute for Clinical Systems Improvement - Private Nonprofit Organization. 2008 Jan. 28 pages. NGC:007032. Available at: http://www.guideline.gov/summary/summary.aspx?doc_id=13698&nbr=007032&string=pressure+AND+ulcers

Use pressure-reducing bed support surfaces for individuals who have pressure ulcers.

- Select a static (updated term: reactive non powered surface*) support surface for individuals who can be positioned without weight bearing on an ulcer and without bottoming out on the support surface.
- Select a dynamic (updated term-reactive powered or active powered surface*) support surface if the individual cannot be positioned without pressure on an ulcer, when a static support surface bottoms out, if there is no evidence of ulcer healing, or if new ulcers develop.
- Use low-air loss (updated term: powered active support surface)* and air-fluidized beds in the treatment of pressure ulcers if one or more of the following conditions exist:
 1. Pressure ulcers on multiple turning surfaces
 2. Compromised skin temperature and moisture control in the presence of large stage III or IV pressure ulcers.(Updated terms- Powered active support surface or use of a microclimate manager over an adequate pressure redistribution surface.*)

Scientific evidence: I, II, V; Grade of recommendation: A, B, C; Strength of panel opinion: Strong.
*** from National Pressure Ulcer Advisory Panel definitions and terms**

Wheelchair Positioning: Prescribe wheelchairs and seating systems according to individualized anthropometric, ergonomic, and functional principles:

- Obtain specific body measurements for optimal selection of seating system dimensions.
- Measure the effects of posture and deformity on interface pressure distribution.
- Prescribe a power weight-shifting wheelchair system for individuals who are unable to independently perform an effective weight shift.
- Use clinical judgment as well as objective data in determining the compatibility of the individual's shape with the seating system.

Scientific evidence: II, III, V; Grade of recommendation: B, C; Strength of panel opinion: Strong.

Consortium for Spinal Cord Medicine - Private Nonprofit Organization
Paralyzed Veterans of America - Private Nonprofit Organization. 2000 Aug (reviewed 2005). Available at: <http://www.guideline.gov/search/searchresults.aspx?Type=3&txtSearch=pressure+ulcers&num=20>