

**\*Measure #54: Electrocardiogram Performed for Non-Traumatic Chest Pain**

**DESCRIPTION:**

Percentage of patients aged 40 years and older with an emergency department discharge diagnosis of non-traumatic chest pain who had a 12-lead electrocardiogram (ECG) performed

**INSTRUCTIONS:**

This measure is to be reported each time a patient has been discharged from the emergency department with a discharge diagnosis of non-traumatic chest pain during the reporting period. Claims data will be analyzed to determine the emergency department discharge. Patients who were discharged from an emergency department with a diagnosis of non-traumatic chest pain should have documentation in the medical record of having a 12-lead ECG performed. It is anticipated that clinicians who provide care in the emergency department will submit this measure. The Part B claim form place-of-service field must indicate that the encounter has taken place in the emergency department.

**This measure is reported using CPT Category II codes:**

ICD-9 diagnosis codes, CPT E/M service codes, and patient demographics (age, gender, etc.) are used to identify patients who are included in the measure's denominator. CPT Category II codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT E/M service codes, and the appropriate CPT Category II code **OR** the CPT Category II code **with** the modifier. The modifiers allowed for this measure are: 1P- medical reasons, 2P- patient reasons, 8P- reasons not otherwise specified.

**NUMERATOR:**

Patients who had a 12-lead ECG performed

**Numerator Coding:**

12-Lead ECG Performed

CPT II 3120F: 12-Lead ECG Performed

OR

**12-Lead ECG not Performed for Medical or Patient Reasons**

Append a modifier (**1P or 2P**) to CPT Category II code **3120F** to report documented circumstances that appropriately exclude patients from the denominator.

- **1P:** Documentation of medical reason(s) for not performing a 12-Lead ECG
- **2P:** Documentation of patient reason(s) for not performing a 12-Lead ECG

OR

**12-Lead ECG not Performed, Reason not Specified**

Append a reporting modifier (**8P**) to CPT Category II code 3120F to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

- **8P:** 12-Lead ECG not Performed, reason not otherwise specified

**DENOMINATOR:**

All patients aged 40 years and older with an emergency department discharge diagnosis of non-traumatic chest pain

**Denominator Coding:**

An ICD-9 diagnosis code for non-traumatic chest pain and a CPT E/M service code are required to identify patients for denominator inclusion. The Part B claim form place-of-service field must indicate emergency department.

**ICD-9 diagnosis codes:** 413.0, 413.1, 413.9, 786.50, 786.51, 786.52, 786.59

**AND**

**CPT E/M service codes:** 99281, 99282, 99283, 99284, 99285, 99291

**AND**

**Place of Service Indicator:** 23

**RATIONALE:**

All patients in the age group for which CAD/ACS is part of the differential diagnosis, should have a 12-lead ECG performed.

**CLINICAL RECOMMENDATION STATEMENTS:**

A 12-lead ECG should be performed and shown to an experienced emergency physician within 10 minutes of ED arrival for all patients with chest discomfort (or anginal equivalent) or other symptoms of STEMI. (ACC/AHA)(Class I, Level C)

If pain is severe or pressure or substernal or exertional or radiating to jaw, neck, shoulder or arm, then the following are recommended:

- 12-lead ECG (Rule)
- IV access, supplemental oxygen, cardiac monitor, serum cardiac markers (e.g., CKMB), CXR, nitrates, management of ongoing pain, admit (ACEP)