

Acute Myocardial Infarction

Aspirin at Arrival for Acute Myocardial Infarction (AMI)

PQRI Data Collection Sheet

Patient's Name	Practice Medical Record Number (MRN)	Birth Date (mm/dd/yyyy) / /	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female
National Provider Identifier (NPI)		Date of Service	

Clinical Information

Billing Information

Step 1 Is patient eligible for this measure?			Code Required on Claim Form
	Yes	No	
Any patient regardless of age.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
Patient has emergency department (ED) discharge diagnosis of acute myocardial infarction.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes.
There is a CPT E/M Service Code for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
There is a Place of Service Indicator for emergency department (23) for this visit.	<input type="checkbox"/>	<input type="checkbox"/>	
If No is checked for any of the above, STOP. Do not report a CPT category II code.			
Step 2 Does patient meet or have an acceptable reason for not meeting the measure?			Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Aspirin within 24 hours before ED Arrival or during ED stay	Yes	No	
Received	<input type="checkbox"/>	<input type="checkbox"/>	4084F
Not received for one of the following reasons:			
• Medical (eg, not indicated, contraindicated, other medical reason)	<input type="checkbox"/>	<input type="checkbox"/>	4084F-1P
• Patient (eg, patient declined, economic, social, religious, other patient reason)	<input type="checkbox"/>	<input type="checkbox"/>	4084F-2P
Document reason here and in medical chart. _____ _____			If No is checked for all of the above, report 4084F-8P (Aspirin was not received within 24 hours before emergency department arrival or during emergency department stay, reason not otherwise specified.)