

Timing of Antibiotic Prophylaxis — Ordering Physician

*This measure is to be reported **each time** a surgical procedure with the indications for prophylactic parenteral antibiotics¹ is performed for patients aged 18 years and older during the reporting period.*

Measure description

Percentage of surgical patients aged 18 years and older undergoing procedures with the indications for prophylactic parenteral antibiotics, who have an order for prophylactic parenteral antibiotic to be given within one hour (if fluoroquinolone or vancomycin, two hours), prior to the surgical incision (or start of procedure when no incision is required)

What will you need to report for each patient undergoing a surgical procedure with the indications for prophylactic parenteral antibiotics for this measure?

If you select this measure for reporting, you will report:

- Whether or not there is an order² for prophylactic parenteral antibiotic (written order, verbal order, or standing order/protocol)

OR

- Whether or not prophylactic parenteral antibiotic has been given within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required)

The antimicrobial drugs listed below are considered prophylactic parenteral antibiotics for the purposes of this measure.

- | | |
|------------------------|---------------------|
| ■ Ampicillin/sulbactam | ■ Ertapenem |
| ■ Aztreonam | ■ Erythromycin base |
| ■ Cefazolin | ■ Gatifloxacin |
| ■ Cefmetazole | ■ Gentamicin |
| ■ Cefotetan | ■ Levofloxacin |
| ■ Cefoxitin | ■ Metronidazole |
| ■ Cefuroxime | ■ Moxifloxacin |
| ■ Ciprofloxacin | ■ Neomycin |
| ■ Clindamycin | ■ Vancomycin |

What if this process or outcome of care is not appropriate for your patient?

There may be times when it is not appropriate that prophylactic parenteral antibiotic be given within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required), due to:

- Medical reasons (eg, not indicated, contraindicated, other medical reason)

In these cases, you will need to indicate that the medical reason applies, and specify the reason on the worksheet and in the medical chart. The office/billing staff will then report a code with a modifier that represents these valid reasons (also called exclusions).

¹Refer to coding specifications document for list of applicable procedures and codes.

²There must be documentation of order (written order, verbal order, or standing order/protocol) specifying that prophylactic parenteral antibiotic is to be given within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required) OR documentation that prophylactic parenteral antibiotic has been given within one hour (if fluoroquinolone or vancomycin, two hours) prior to the surgical incision (or start of procedure when no incision is required). In the event surgery is delayed, as long as the patient is redosed (if clinically appropriate) the numerator coding should be applied.