

Timing of Antibiotic Prophylaxis — Ordering Physician

Physician Quality Reporting System 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?			
	Yes	No	Code Required on Claim Form
Patient is aged 18 years and older on date of encounter.	<input type="checkbox"/>	<input type="checkbox"/>	Verify date of birth on claim form.
There is a CPT Code for a surgical procedure with the indications for prophylactic parenteral antibiotics.	<input type="checkbox"/>	<input type="checkbox"/>	Refer to coding specifications document for list of applicable codes. Codes determining a patient's eligibility must be reported on the same claim as the quality code(s) identified below.
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?			
Prophylactic Parenteral Antibiotic Within Timeframe¹	Yes	No	Code to be Reported on Line 24D of Paper Claim Form, if Yes (or Service Line 24 of Electronic Claim Form)
Documentation of Order ² for Prophylactic Parenteral Antibiotic (written order, verbal order, or standing order/protocol)	<input type="checkbox"/>	<input type="checkbox"/>	G8629
Documentation that Prophylactic Parenteral Antibiotic has been Given ³ within One Hour Prior to the Surgical incision (or start of procedure when no incision is required)	<input type="checkbox"/>	<input type="checkbox"/>	G8630
Order for Prophylactic Parenteral Antibiotic not Given for Documented Reasons	<input type="checkbox"/>	<input type="checkbox"/>	G8631
Order for Administration of Prophylactic Parenteral Antibiotic not Given fo, Reason not Specified	<input type="checkbox"/>	<input type="checkbox"/>	If No is checked for all of the above, report G8632 (Prophylactic parenteral antibiotics were not ordered to be given or given within one hour [if fluoroquinolone or vancomycin, two hours] prior to the surgical incision [or start of procedure when no incision is required], reason not otherwise specified.)
Document reason here and in medical chart. _____ _____			

¹To 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). Refer to measure description sheet for list of medications.

²Written, verbal, or standing order/protocol in chart specifying approved prophylactic parenteral antibiotic to be given within one hour (if fluoroquinolone or vancomycin, two hours) prior to surgical incision (or start of procedure when no incision is required)

³Documentation specifying administration of approved prophylactic parenteral antibiotic within one hour (if fluoroquinolone or vancomycin, two hours) prior to 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.