Stroke and Stroke Rehabilitation

Discharged on Antiplatelet Therapy

PQRI Data Collection Sheet

Patient's Name   Practice Medical Record Number (MRN)   /   /   ☐ Male   ☐ Female

Birth Date (mm/dd/yyyy)   Gender

National Provider Identifier (NPI)   Date of Service

Clinical Information

Step 1   Is patient eligible for this measure?

	Yes	No
Patient is aged 18 years and older on date of encounter.	☐	☐
Patient has a line item diagnosis of ischemic stroke or transient ischemic attack.	☐	☐
There is a CPT Code for this visit.	☐	☐

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?

Antiplatelet Therapy[1]	Yes	No
Prescribed[2] at discharge	☐	☐
Not prescribed for one of the following reasons: • Medical (eg, patient on anticoagulation therapy, other medical reason)	☐	☐
• Patient (eg, patient declined, economic, social, religious, other patient reason)	☐	☐

Document reason here and in medical chart.

_____

_____

Billing Information

Code Required on Claim Form

Verify date of birth on claim form.

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.

Code to be Reported on Line 24D of Paper Claim Form, if _Yes_ (or Service Line 24 of Electronic Claim Form)

4073F

4073F–1P

4073F–2P

If **No** is checked for **all** of the above, report 4073F–8P
(Antiplatelet therapy was not prescribed at discharge, reason not otherwise specified.)

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[1]Antiplatelet therapy: aspirin, combination of aspirin and extended release dipyridamole, clopidogrel, ticlopidine.

[2]"Prescribed" may include prescription given to the patient for antiplatelet therapy during the measurement period OR patient already taking antiplatelet therapy as documented in the current medication list.