## Sinusitis





### Measures

#130 Documentation of Current Medications in the Medical Record

#131 Pain Assessment and Follow-Up

#226 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

#331 Adult Sinusitis: Antibiotic Prescribed for Acute Sinusitis (Overuse)

#332 Adult Sinusitis: Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate

Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use)

#333 Adult Sinusitis: Computerized Tomography (CT) for Acute Sinusitis (Overuse)

## **Reporting Instructions**

- (1) Identify patients with the following criteria:
  - Aged 18 years or older on the date of encounter
  - Encounter during January1 December 31, 2016 with the following:

One of the following diagnosis codes indicating acute sinusitis: J01.00, J01.01, J01.10, J01.11, J01.20, J01.21, J01.30, J01.31, J01.40, J01.41, J01.80, J01.90 and

One of the following patient encounter codes: 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99281, 99282, 99283, 99284, 99285, 99304, 99305, 99306, 99307, 99308, 99309, 99310, 99324, 99325, 99326, 99327, 99328, 99334, 99335, 99336, 99337, 99341, 99342, 99343, 99344, 99345, 99347, 99348, 99349, 99350

- (2) Report all applicable measures within the measures group for at least 20 patients.
  - The majority of the patients reported must be Medicare Part B Fee-for-service (FFS) patients, including Medicare Secondary and Railroad Medicare.
  - For each measure, the measure's clinical performance must be satisfied for at least 1 patient. [Note: An asterisk (\*) indicates that the measure's clinical performance is satisfied.]

For additional information or clinical rationale for measures, review the CMS Measure Specification for 2016 PQRS. All measures group Measure Specifications can be found on the NJII Member Portal > Registry > Getting Started section.

# **Sinusitis**Measures Group



Patient Information				
First Name	Middle Initial	Last Name		Date of Birth
Visit Date	Medical Record Number	Gender	Male	Female
		Medicare FFS Patient	Yes	No

## **Select Measures Performance**

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### Select one (1) clinical action for each measure below, where applicable:

#### **#130 Documentation of Current Medications in the Medical Record**

Eligible professional attests to documenting, updating or reviewing a patient's current medications using all immediate resources available on the date of encounter. This list must include ALL known prescriptions, over-the counters, herbals, and vitamin/mineral/dietary (nutritional) supplements AND must contain the medications' name, dosages, frequency and route of administration

Current medications documented\*

Current medications not documented (Patient not eligible) ^

Current medications not documented (Reason not given)

#### #131 Pain Assessment and Follow-Up

Patient visits with a documented pain assessment using a standardized tool(s) AND documentation of a follow-up plan when pain is present

Pain documented as negative; no follow-up plan required\*

Pain present and follow-up documented\*

Pain assessment not documented, or pain assessment documented as positive with no follow-up plan documented (patient not eligible)^

Pain assessment documented as positive and follow-up plan not documented (No reason given)

Pain assessment not documented (No reason given)

Need more information? Connect with NJII PQRS Registry 973-642-4055 • pqrs@njii.com • www.njii.com/pqrs

<sup>\*</sup> Recommended clinical performance satisfied

<sup>^</sup> Patient is excluded from measure's performance

# **Sinusitis**Measures Group



## **Select Measures Performance**

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### #226 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Patients screened for tobacco use at least once within 24 months AND received tobacco cessation counseling intervention if identified as a tobacco user

Identified as tobacco user and cessation intervention performed\*

Screened for tobacco use and identified as non-user of tobacco\*

Not screened for tobacco use (Medical reason documented)^

Identified as tobacco user and cessation intervention NOT performed

Not screened for tobacco use (No reason documented)

#### **#331 Adult Sinusitis: Antibiotic Prescribed for Acute Sinusitis (Overuse)**

Patients prescribed any antibiotic within 10 days after onset of symptoms

Antibiotic regimen prescribed within 10 days after onset of symptoms

Antibiotic regimen prescribed within 10 days after onset of symptoms for documented medical reason^

Antibiotic regimen not prescribed within 7 days of diagnosis or within 10 days after onset of symptoms\*

## #332 Adult Sinusitis: Appropriate Choice of Antibiotic: Amoxicillin With or Without Clavulanate Prescribed for Patients with Acute Bacterial Sinusitis (Appropriate Use)

Patients who were prescribed amoxicillin, with or without clavulanate, as a first line antibiotic at the time of diagnosis

Amoxicillin prescribed as first line antibiotic at diagnosis\*

Antibiotic regimen prescribed within 10 days after onset of symptoms for documented medical reason^

Antibiotic regimen not prescribed within 7 days of diagnosis or within 10 days after onset of symptoms

# **Sinusitis**Measures Group



## **Select Measures Performance**

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### **#333 Adult Sinusitis: Computerized Tomography (CT) for Acute Sinusitis (Overuse)**

Patients who had a computerized tomography (CT) scan of the paranasal sinuses ordered at the time of diagnosis or received within 28 days after date of diagnosis

NOTE: A lower calculated performance rate for this measure indicates better clinical care or control.

CT scan ordered at diagnosis or received within 28 days after diagnosis

CT scan ordered at the time of diagnosis (Reason documented)^

CT scan not ordered at diagnosis or received within 28 days after diagnosis\*