Aligning Forces | Improving Health & Health Care for Quality | in Communities Across America

Language to use in public reporting about hospital care • August 2010



Table of Contents

Introduction	4
What's Included?	4
How Do I Use This Document?	5
Aim #1: Motivate	5
Aim #2: Educate	5
Aim #3: Inform	6
Recommended Language for Hospital Measures	6
Getting the Best Hospital Care – Information to Help You Compare Hospitals	7
More Facts to Think About as You Choose a Hospital	8
Asthma Care for Children	9
Care During the Hospital Stay	9
Care Just Before Leaving the Hospital	9
Heart Attack Care	11
Care When You Get to the Hospital	11
Care During the Hospital Stay	12
Care Just Before Leaving the Hospital	12
What Happens to Some Heart Attack Patients within 30 Days	13
Heart Failure Care	15
Care During the Hospital Stay	15
Care Just Before Leaving the Hospital	16
What Happens to Some Heart Failure Patients within 30 Days	16
Pneumonia Care	18
Care When You Get to the Hospital	18
Care During the Hospital Stay	19
What Happens to Some Pneumonia Patients within 30 Days	20
Surgical Care	21
Preventing Blood Clots	21
Preventing Infection	22
Maintaining Heart Health	22
What Patients Say About Their Hospital Stay	24

Appendix A: AF4Q Suggested Hospital Measure Descriptions	27
Asthma Care for Children	27
Heart Attack Care	27
Heart Failure Care	28
Pneumonia Care	28
Surgical Care	29
What Happens to Some Patients within 30 Days	30
Appendix B: CMS Hospital Measure Descriptions	31
Children's Asthma Care Process of Care Measures	31
Heart Attack Process of Care Measures	31
Heart Failure Process of Care Measures	32
Pneumonia Process of Care Measures	32
Surgical Care Improvement Project Process of Care Measures	33
Outcome of Care Measures	34

Introduction

This report offers guidance for language to use in your public reports about performance on hospital care measures. It offers a framework and vetted language for presenting the hospital quality measures that *Aligning Forces for Quality* alliances may include in their public reports.

We present this language in two ways: 1) In the main body of this report, starting on page 7, we offer a wholly a new framework for reporting that includes new, simpler language to describe the measures; and, 2) In Appendix A on page 27 we offer a concise list of *Aligning Forces for Quality's* suggested language to describe clinical and outcome measures to make it easy for Alliances to cut and paste new language into their existing report formats. Language for patient experience reports can be found on page 24.

By providing this language, we hope to save you from having to research each measure and come up with your own explanation. You can also be confident that by using this language, you are describing the measures in a way that is both technically accurate and understandable to consumers.

The language about measures is presented in the context of the broader aims of a comparative quality report, which are to:

- Motivate
- Educate
- Inform

This framework is intended to highlight how "informing" consumers about quality measures and hospital performance fits with other elements of engaging consumers in their care.

What's Included?

Two kinds of hospital quality measures are included in this document:

- Clinical measures for five topics
 - o Asthma care for children
 - Heart attack care
 - Heart failure care
 - o Pneumonia care
 - o Surgical care
- Patient experience

Outcome measures are incorporated in the heart attack, heart failure and pneumonia sections. We derived the explanations and definitions of these topics and measures from multiple sources, including CMS's Hospital Compare Web site, well-regarded comparative sites such as CalHospitalCompare.org, hospital-specific quality reports, and report language developed and tested by MS&L, the American Institutes for Research, National Partnership for Women & Families and Mettger Communications. We also incorporated information about comparative quality reports from the Agency for Healthcare Research and Quality's (AHRQ) TalkingQuality Web site, and research on reporting issues for AHRQ's CAHPS program.

How Do I Use This Document?

The primary purpose of this document is to provide language you can copy into your own reports and descriptions of measures. Depending on how your report is structured and how you display the information, you may need to adapt some of the language, but the basic content is provided.

You can also use the language in this document to offer some context for the measures you are reporting, so that consumers get a better understanding of why the measures are worth their time.

Finally, we encourage you to use this document as a starting point for thinking about how your report can go beyond simply delivering information.

Aim #1: Motivate

When consumers first visit your quality report, you have to give them a reason to stick around. Why should they keep looking? What will they see and why should they bother?

Suggested Guidelines

- Keep the focus on what the users of your site need and want to know.
- Tell them:
 - o Why they need this kind of information.
 - o What information they can find.
 - o How they can use the information.
 - o Most importantly, the benefits of using the information.
- Be succinct.
- Give users a way to get to the information they want quickly and easily.

Aim #2: Educate

While some people will come to your report because they know what it is and why they want information on quality, most will need to learn what this information is, why you are providing it, and how it could be helpful to them. You can also explain how information on quality complements other information they may be using to make a choice among hospitals, and where they can find other useful information about their health care concerns. Finally, you may need to educate users on why your report is a trustworthy, reliable source of information.

Suggested Guidelines

- Elaborate on how hospital quality varies and explain why that matters to patients. Don't assume that everyone already knows this.
- When possible, include other information that people may want to factor into their decisions. When that's not possible, note what information could be useful and indicate where to find it.
- Tell who produced the report and why you can be trusted as a source of impartial information.

• Make this information easily available to those who want it, but don't let it become a barrier to accessing the comparative information.

Aim #3: Inform

A comparative quality report can inform consumers on several levels. It can help them develop a more concrete understanding of health care quality in general, as well as quality for specific medical conditions. It can give them a language and a framework for assessing and discussing what makes some hospitals better or worse than others. Most importantly, it can provide them with the information they need to make informed choices and to ensure they get high-quality care.

Suggested Guidelines

- Give people a framework or context for understanding the purpose of the measures.
- Use plain language to explain measures and be specific.
- There are two options to explain technical terms for procedures or medicines: use hyperlinks to describe more detail, or include technical information in the main text about the measure. If you do the second option, we recommend it be the last sentence. (NOTE: Language displayed in this document as footnotes are suggested material to describe technical terms).
- Tell people why the measures matter.
- Help people interpret the data display. Explain statistical terms, and when possible, use natural frequencies such as "1 out of 100."
- Tell people what they can do to ensure they get high-quality care wherever they go.

Recommended Language for Hospital Measures

The rest of this report offers suggested language to describe clinical measures and patient experience. For each category of clinical measures, the suggested language is organized by when care is given, with the exception of surgical care. (The surgical care category is organized differently, since the measures reflect a procedure.) While we recognize that this organizational format doesn't reflect the current practice of many *Aligning Forces for Quality* alliances, the framework does help with comprehension and can be incorporated at your discretion.

Suggested language for patient experience measures is presented on page 24 in the same order as found on CMS's Hospital Compare Web site. Appendix A on page 27 includes a condensed list of *Aligning Forces for Quality's* suggested language to describe clinical and outcome measures. To review CMS's descriptions of clinical and outcome measures as a reference, see Appendix B on page 31.

Getting the Best Hospital Care - Information to Help You Compare Hospitals

You want to get the very best care when you or a loved one is in the hospital. To help you make good decisions about where to go for quality care, [insert name of community organization] is providing information about hospital care in [insert region].

This information lets you compare the health care patients got in different hospitals. For example, if you need to have surgery, you can look at how well different hospitals do at making sure surgery patients get the correct medicine to prevent infections. You may want to use this information to help you choose a hospital or make better decisions about your care.

All hospitals do not provide the same quality of care. One hospital might do a very good job of caring for patients with some health problems and not such a good job caring for patients with other health problems. Our goal is to give you information you can use to increase your chances of getting the best possible hospital care when you need it. This information can also help you learn about the care that is right for you.

Understanding this Information

This report provides information on how well [insert region] hospitals care for patients with a wide range of health problems. It is divided into two sections.

The *first section* tells you:

- What type of care patients got. This information only covers care for certain types of illnesses, such as heart attacks or asthma, and surgical care. It does not tell you about all the different illnesses that hospitals treat.
- What medical research shows can reduce the chance of health problems and lead to good results. Medical experts conduct research to determine what treatments work best for preventing and treating different illnesses. They look at scientific studies that show the best way to help patients stay healthy or get better when they are sick. This is the care that is proven to work and the care you should expect and deserve.
- How many patients got the care they needed, such as the right medicine, surgery or advice. This is shown as the number of patients who got the right care.
 - O Sometimes a higher number means better care. For example, if 95 out of 100 heart attack patients got aspirin at the hospital, it means that the hospital did a good job. In this case, the higher the number, the better the hospital did giving the best care.
 - O Sometimes a lower number means better care. For example, if only 2 out of 100 patients had to go back to the hospital for the same problem within 30 days of their first visit, it means that the hospital did a good job. In this case, the lower the number, the better the hospital did giving the best care.
 - O Under each type of care, it notes if it is better to have a higher or lower number.
- What happened to some patients within 30 days of going to the hospital.

The **second section** tells you what patients had to say about the care they got in the hospital.

More Facts to Think About as You Choose a Hospital

Here are more facts to consider as you decide where to go for the best hospital care:

- Not all hospitals provide the same quality of care. Some hospitals are better than others.
- A hospital might do a good job caring for patients with some health problems, and not such a good job caring for patients with other health problems.
- Each time a person goes to the hospital, there is a chance that he or she may get a new health problem while getting treatment for an existing problem. Some hospitals are better than others at protecting people from getting new health problems while in the hospital.
- The care you get in the hospital depends on how skilled your doctor is, how well the hospital staff takes care of you, how well the doctors and staff communicate with you and with each other, and how well the hospital is organized.

¹ NOTE TO ALLIANCES: This text is provided to accompany the introductory language as sidebar text.

Asthma Care for Children

What is asthma care? Asthma (AZ-muh) care includes any treatment to help children with asthma breathe easier.

Asthma is a disease that can make it hard to breathe. For children, asthma is one of the most common reasons they go to a hospital.

What can I find here? You can see how often hospitals do things that medical research shows:

- Reduce the chance of health problems.
- Lead to good results.

Select a topic:

Care during the hospital stay

- Medicine given to reduce swelling in airways
- Medicine given to relax airway muscles

Care just before leaving the hospital

• Parents or other caregivers given a plan for managing asthma care

Care During the Hospital Stay

Medicine given to reduce swelling in airways

Doctors should give children with asthma a medicine² to reduce swelling in their airways. These medicines help control the symptoms of asthma, which makes it easier for children to breathe.

The numbers in the [chart/table/graph] tell you how many out of 100 children got medicine to reduce swelling in their airways. A higher number is better. The children were ages 2 to 17.

Medicine given to relax airway muscles

Doctors should give children with asthma a medicine³ that works fast to relax the muscles of the airway, which makes it easier for children to breathe.

The numbers in the [chart/table/graph] tell you how many out of 100 children got medicine to relax their airway muscles. A higher number is better. The children were ages 2 to 17.

Care Just Before Leaving the Hospital

Parents or other caregivers given a plan for managing asthma care

Hospital staff should give parents or other caregivers of children with asthma a plan for how to manage asthma at home.

² You may hear your doctor or hospital staff refer to this medicine as "systemic corticosteroids."

³ You may hear your doctor or hospital staff refer to this medicine as "reliever medication" or "albuterol."

This plan helps parents or caregivers know when to seek follow-up care, how to avoid things that trigger asthma attacks, and when to take action. It should also explain how to use medicines to help control asthma.

The numbers in the [chart/table/graph] tell you how many out of 100 children got a plan for managing their asthma at home. A higher number is better. The children were ages 2 to 17.

Heart Attack Care

What is heart attack care? Heart attack⁴ care includes any treatment to get the blood flowing to the heart again or to prevent another heart attack.

A heart attack happens when the flow of blood to the heart is blocked. It is important that blood begin flowing to the heart as quickly as possible after a heart attack to reduce damage to the heart. Without that blood, the heart 5 doesn't get the oxygen and nutrients it needs.

What can I find here? You can see how often hospitals do things that medical research shows:

- Reduce the chance of problems.
- Lead to good results.

Select a topic:

Care when you get to the hospital

- Aspirin given when patient gets to the hospital
- Medicine to reduce blood clots given within 30 minutes of getting to the hospital
- Procedure to open blood vessels done within 90 minutes of getting to the hospital

Care during the hospital stay

Advice to stop smoking

Care just before leaving the hospital

- Aspirin prescribed before leaving the hospital
- Medicine to lower blood pressure given before leaving the hospital
- Medicine to make the heart work better given before leaving the hospital

You can also compare what happened to some heart attack patients within 30 days of going to the hospital:

What happens to some heart attack patients within 30 days

- Dying after treatment for a heart attack
- Returning to the hospital after getting care for a heart attack

Care When You Get to the Hospital

Aspirin given when patient gets to the hospital

Doctors should give aspirin to heart attack patients when they get to the hospital. Aspirin can help keep blood clots from forming. It also helps break up blood clots that may cause another heart attack.

⁴ You may hear your doctor or hospital staff refer to a heart attack as an "acute myocardial infarction," or AMI.

⁵ You may hear your doctor or hospital staff refer to the heart as the "heart muscle."

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients got aspirin within 24 hours of getting to the hospital. A higher number is better.

Medicine to reduce blood clots given within 30 minutes of getting to the hospital

Doctors should give heart attack patients a medicine⁶ within 30 minutes of getting to the hospital. The medicine⁷ helps break up blood clots and improve blood flow to the heart.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients got medicine to reduce blood clots within 30 minutes of getting to the hospital. A higher number is better.

Procedure to open blood vessels done within 90 minutes of getting to the hospital

Doctors should do a procedure⁸ on heart attack patients within 90 minutes of getting to the hospital. The procedure⁹ helps blood flow to the heart by opening blocked blood vessels. Blood vessels carry blood through the body.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients got a procedure to open blood vessels within 90 minutes of getting to the hospital. A higher number is better.

Care During the Hospital Stay

Advice to stop smoking

Hospital staff should talk to heart attack patients who smoke about quitting. Smoking increases the chance of another heart attack, heart disease and stroke. Patients who get even brief advice to quit smoking are more likely to stop.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients who smoke got advice to quit. A higher number is better.

Care Just Before Leaving the Hospital

Aspirin prescribed before leaving the hospital

Doctors should give heart attack patients a prescription for aspirin before they leave the hospital. For most patients¹⁰, taking aspirin can keep blood clots from forming, improve the chances of survival, and help prevent another heart attack.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients got a prescription for aspirin before they left the hospital. A higher number is better.

⁶ You may hear your doctor or hospital staff refer to this medicine as "fibrinolytic drugs."

⁷ Doctors may also do a procedure to open the blocked flow of blood. Sometimes doctors give patients medicine *and* do the procedure.

⁸ You may hear your doctor or hospital staff refer to this procedure as a "percutaneous coronary intervention," or PCI.

⁹ Doctors may also give a medicine that can help break up blood clots and improve blood flow to the heart. Sometimes doctors do the procedure *and* give patients medicine.

¹⁰ Patients who have had a heart attack should talk to their doctor about taking aspirin on a regular basis. Aspirin may not be right for everyone.

Medicine to lower blood pressure given before leaving the hospital

Doctors should give heart attack patients a prescription for medicine called beta blockers¹¹. Taking this medicine lowers blood pressure, treats chest pain and heart failure, and can help prevent a future heart attack.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients got a prescription for beta blockers before they left the hospital. A higher number is better.

Medicine to help the heart work better given before leaving the hospital

Doctors should give heart attack patients with a problem on the left side of their heart¹² a special prescription. The prescription is for medicine¹³ that lowers blood pressure and makes it easier for the heart to work.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients with this problem got a special prescription before they left the hospital. A higher number is better.

What Happens to Some Heart Attack Patients within 30 Days

Dying after getting care in the hospital for a heart attack

Hospitals keep track of how many of their patients died soon after getting care for a heart attack. This is called a death rate. These rates show how many patients died within 30 days of going to the hospital for a heart attack.

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing complications, teaching patients how to take care of themselves after they leave the hospital, and helping patients make a smooth transition to their home or another setting such as a nursing home.

[If displaying numbers] The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients on Medicare died within 30 days of coming to the hospital. A **lower** number is better because it means fewer people died.

[If displaying symbols] The chart below shows you how each hospital's death rate compares to [insert benchmark]. The death rate tells you how many out of 100 heart attack patients on Medicare died within 30 days of coming to the hospital. **Below average** is better because it means fewer people died.

Returning to the hospital after getting care for a heart attack

Hospitals keep track of how many of their patients had to go back to the hospital soon after getting care for a heart attack. This is called a readmission rate. These rates show how many patients had to go back to a hospital within 30 days of their original stay. The patients may have needed hospital care because of their heart attack or for a different reason.

¹¹ Beta blocker medicine works by slowing the heart rate and keeping the blood vessels open in the heart, brain and rest of the body.

¹² You may hear your doctor or hospital staff refer to this problem as "left ventricular systolic dysfunction," or LVSD.

¹³ This medicine comes in two kinds – ACEIs (angiotensin converting enzyme inhibitors) and ARBs (angiotensin receptor blockers). Your doctor needs to decide which kind of medicine is best for you.

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing problems and teaching patients how to care for themselves at home.

[If displaying numbers] The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients on Medicare left the hospital and then had to go back to a hospital within 30 days of leaving the hospital. A **lower** number is better because it means fewer people had to go back to the hospital.

[If displaying symbols] The chart below shows you how each hospital's readmission rate compares to [insert benchmark]. The readmission rate tells you how many out of 100 heart attack patients on Medicare had to go back to a hospital within 30 days of leaving the hospital. **Below average** is better because it means fewer people had to go back to the hospital.

Heart Failure Care

What is heart failure? Heart failure happens when the heart cannot pump enough blood throughout the body. When this happens, the body does not get enough oxygen and nutrients.

Heart failure care includes a test of how the heart is pumping, treatment that helps the heart work better, and advice on how to manage care.

What can I find here? You can see how often hospitals do things that medical research shows:

- Reduce the chance of problems.
- Lead to good results.

Select a topic:

Care during the hospital stay

- Test of how well the heart is able to pump blood
- Advice to stop smoking

Care just before leaving the hospital

- Instructions for follow-up care given before leaving the hospital
- Medicine to make the heart work better given before leaving the hospital

You can also compare what happened to some heart failure patients within 30 days of going to the hospital:

What happens to some heart failure patients within 30 days

- Dying after treatment for heart failure
- Returning to the hospital after getting care for heart failure

Care During the Hospital Stay

Test of how well the heart is able to pump blood

Doctors should give heart failure patients a test¹⁴ that shows how well the heart is pumping blood. The test results tell doctors which parts of the heart are not working well. Doctors then treat the heart failure based on these results.

The numbers in the [chart/table/graph] tell you how many out of 100 heart failure patients got a test to show how well the heart is pumping blood. A higher number is better.

Advice to stop smoking

Hospital staff should talk to heart failure patients who smoke about quitting. Smoking increases the chance of more heart failure, a heart attack and stroke. Patients who get even brief advice to quit smoking are more likely to stop.

¹⁴ This test evaluates the left ventricular systolic (LVS) function.

The numbers in the [chart/table/graph] tell you how many out of 100 heart attack patients who smoke got advice to quit. A higher number is better.

Care Just Before Leaving the Hospital

Instructions for follow-up care given before leaving the hospital

Hospital staff should give follow-up care instructions to heart failure patients before they leave the hospital. These instructions will help patients manage their symptoms and lower the chances of getting other health problems.

The numbers in the [chart/table/graph] tell you how many out of 100 heart failure patients got follow-up care instructions before they left the hospital. A higher number is better.

Medicine to make the heart work better given before leaving the hospital

Doctors should give heart failure patients a prescription for medicine to improve how the heart works before they leave the hospital. This medicine¹⁵ can lower blood pressure and make it easier for the heart to pump.

The numbers in the [chart/table/graph] tell you how many out of 100 heart failure patients got medicine to make the heart work better. A higher number is better.

What Happens to Some Heart Failure Patients within 30 Days

Dying after getting care in the hospital for heart failure

Hospitals keep track of how many of their patients died soon after getting care for heart failure. This is called a death rate. These rates show how many patients died within 30 days of going to the hospital for heart failure.

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing complications, teaching patients how to take care of themselves after they leave the hospital, and helping patients make a smooth transition to their home or another setting such as a nursing home.

[If displaying numbers] The numbers in the [chart/table/graph] tell you how many out of 100 heart failure patients on Medicare died within 30 days of coming to the hospital. A **lower** number is better because it means fewer people died.

[If displaying symbols] The chart below shows you how each hospital's death rate compares to [insert benchmark]. The death rate tells you how many out of 100 heart failure patients on Medicare died within 30 days of coming to the hospital. **Below average** is better because it means fewer people died.

Returning to the hospital after getting care for heart failure

Hospitals keep track of how many of their patients had to go back to a hospital soon after getting care for heart failure. This is called a readmission rate. These rates show how many patients had to

¹⁵ This medicine comes in two kinds – ACEIs (angiotensin converting enzyme inhibitors) and ARBs (angiotensin receptor blockers). Your doctor needs to decide which kind of medicine is best for you.

go back to a hospital within 30 days of their original stay. The patients may have needed hospital care because of their heart failure or for a different reason.

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing problems and teaching patients how to care for themselves at home.

[If displaying numbers] The numbers in the [chart/table/graph] tell you how many out of 100 heart failure patients on Medicare left the hospital and then had to go back to a hospital within 30 days of leaving the hospital. A **lower** number is better because it means fewer people had to go back to the hospital.

[If displaying symbols] The chart below shows you how each hospital's readmission rate compares to [insert benchmark]. The readmission rate tells you how many out of 100 heart failure patients on Medicare had to go back to a hospital within 30 days of leaving the hospital. **Below average** is better because it means fewer people had to go back to the hospital.

Pneumonia Care

What is pneumonia care? Pneumonia (noo-mohn-yuh) care means preventing, treating or reducing the chance of problems from the infection.

Pneumonia is a serious lung infection that can cause trouble breathing, fever, cough and tiredness. Some people die of pneumonia.

What can I find here? You can see how often hospitals do things that medical research shows:

- Reduce the chance of problems.
- Lead to good results.

Select a topic:

Care when you get to the hospital

• Blood test done before getting antibiotics

Care during the hospital stay

- Antibiotics given within 6 hours of getting to the hospital
- Right antibiotics given
- Flu shot given (if needed)
- Pneumonia shot given (if needed)
- Advice to stop smoking

You can also compare what happened to some pneumonia patients within 30 days of going to the hospital:

What happens to some pneumonia patients within 30 days

- Dying after getting care for pneumonia
- Returning to the hospital after getting care for pneumonia

Care When You Get to the Hospital

Blood test done before getting antibiotics

Doctors should give pneumonia patients a blood test before they get any antibiotics (an-tye-bye-OT-iks). This test can help find out which bacteria may have caused the pneumonia. Different antibiotics work for different kinds of bacteria. Knowing the kind of bacteria will allow doctors to pick the right medicine.

The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients got a blood test before they got antibiotics. A higher number is better.

Care During the Hospital Stay

Antibiotics given within 6 hours of getting to the hospital

Hospital staff should give pneumonia patients an antibiotic to fight infection within 6 hours of getting to the hospital. Taking antibiotics early can cure pneumonia caused by bacteria and reduce the chance of problems.

The numbers in the [chart/table/graph] tell you how many out of 100 patients with bacterial pneumonia got antibiotics within 6 hours after getting to the hospital. A higher number is better.

Right antibiotics given

Doctors should give patients the right antibiotic for the type of pneumonia they have. Different antibiotics are used to treat different kinds of bacteria that cause pneumonia.

The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients got the right antibiotics. A higher number is better.

Flu shot given (if needed)

Hospital staff should check if pneumonia patients have gotten a flu shot recently. If patients have not already gotten this shot, they should get it during their hospital stay. The flu shot helps protect pneumonia patients from other lung infections, lower the chances of getting the flu, and prevent the spread of flu. It is most important for pneumonia patients 50 and older.

The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients 50 and older were asked about the flu shot and given the shot if needed. A higher number is better.

Pneumonia shot given (if needed)

Hospital staff should check if pneumonia patients have gotten a pneumonia shot recently. If patients have not already gotten this shot, they should get it during their hospital stay. Even for patients who already have pneumonia, getting this shot may prevent or lower the chance of getting pneumonia again.

The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients were asked about the pneumonia shot and given the shot if needed. A higher number is better.

Advice to stop smoking

Hospital staff should talk to pneumonia patients who smoke about quitting. Smoking increases the chance of getting pneumonia or other lung diseases. Patients who get even brief advice to quit smoking are more likely to stop.

The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients who smoke got advice to quit. A higher number is better.

¹⁶ This number does not include patients who came down with pneumonia while they were in the hospital.

What Happens to Some Pneumonia Patients within 30 Days

Dying after getting care in the hospital for pneumonia

Hospitals keep track of how many of their patients died soon after getting care for pneumonia. This is called a death rate. These rates show how many patients died within 30 days of going to the hospital for pneumonia.

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing complications, teaching patients how to take care of themselves after they leave the hospital, and helping patients make a smooth transition to their home or another setting such as a nursing home.

[If displaying numbers] The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients on Medicare died within 30 days of coming to the hospital. A **lower** number is better because it means fewer people died.

[If displaying symbols] The chart below shows you how each hospital's death rate compares to [insert benchmark]. The death rate tells you how many out of 100 pneumonia patients on Medicare died within 30 days of coming to the hospital. **Below average** is better because it means fewer people died.

Returning to the hospital after getting care for pneumonia

Hospitals keep track of how many of their patients had to go back to a hospital soon after getting care for pneumonia. This is called a readmission rate. These rates show how many patients had to go back to a hospital within 30 days of their original stay. The patients may have needed hospital care because of their pneumonia or for a different reason

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing problems and teaching patients how to care for themselves at home.

[If displaying numbers] The numbers in the [chart/table/graph] tell you how many out of 100 pneumonia patients on Medicare had to go back to a hospital within 30 days of leaving the hospital. A **lower** number is better because it means fewer people had to go back to the hospital.

[If displaying symbols] The chart below shows you how each hospital's readmission rate compares to [insert benchmark]. The readmission rate tells you how many out of 100 pneumonia patients on Medicare had to return to a hospital within 30 days of leaving the hospital. **Below average** is better because it means fewer people had to go back to the hospital.

Surgical Care

What is surgical care? Surgical care is the care you get before, during and after surgery.

What can I find here? You can see how often hospitals do things that research shows:

- Reduce the chance of problems from surgery.
- Lead to good results.

Select a topic:

Preventing blood clots

- Treatment prescribed to prevent blood clots
- Patients got treatment to prevent blood clots

Preventing infection

- Antibiotics given 1 hour before surgery
- Right antibiotics given
- Hair removed safely (if needed)
- Antibiotics stopped 24 hours after surgery

Maintaining heart health

- Medicine to lower blood pressure given (if needed)
- Blood sugar level controlled after surgery

Preventing Blood Clots

Treatment prescribed to prevent blood clots

Doctors should give surgery patients a prescription for treatment to prevent blood clots from forming after certain surgeries. Blood clots can lead to heart attacks and strokes. You are at risk for getting blood clots because you do not move during surgery. They are one of the most common problems that people have related to surgery¹⁷.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients got a prescription for treatment to prevent blood clots. A higher number is better.

Patients got treatment to prevent blood clots

Hospital staff should give surgery patients treatment to prevent blood clots within 24 hours before and after certain surgeries¹⁸. These treatments include blood-thinning medicines and special stockings that help blood move through the body.

¹⁷ Your doctor will know your risk for blood clots and steps that will help prevent them, such as giving you the right medicine before surgery. The best time to give treatments to prevent blood clots is 24 hours before surgery to 24 hours after surgery.

¹⁸ Your doctor will know your risk for blood clots and steps that will help prevent them, such as giving you the right medicine before surgery. The best time to give treatments to prevent blood clots is 24 hours before surgery to 24 hours after surgery.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients got treatment to prevent blood clots within 24 hours before and after surgery. A higher number is better.

Preventing Infection

Antibiotics given 1 hour before surgery

Hospital staff should give surgery patients antibiotics (an-tye-bye-OT-iks) within 1 hour before surgery. Antibiotics are medicines that fight infections in your body. Given properly, antibiotics can greatly lower your chances of getting an infection after surgery.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients got antibiotics within 1 hour before surgery. A higher number is better.

Right antibiotics given

Hospital staff should give surgery patients the right kind of antibiotics to lower the chance of infection after surgery. The right antibiotic for a patient depends on the kind of surgery.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients got the antibiotics that were right for them. A higher number is better.

Hair removed safely (if needed)

Hospital staff should use safe methods if they need to remove a patient's hair from the surgery area. Electric clippers and hair removal cream are safe methods. Staff should not use a razor because of the risk of leaving small cuts on the skin.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients who needed hair removed had it removed using a safe method. A higher number is better.

Antibiotics stopped 24 hours after surgery

Hospital staff should stop giving antibiotics to surgery patients within 24 hours after some surgeries. Giving antibiotics to patients more than 24 hours after surgery increases the chances of side effects such as stomach problems and severe diarrhea.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients had antibiotics stopped within 24 hours of surgery. A higher number is better.

Maintaining Heart Health

Medicine to lower blood pressure given (if needed)

Hospital staff should give surgery patients who have heart problems or are at risk for heart problems medicine to lower their blood pressure. Surgery patients who have heart problems or are at risk for heart problems may already take this medicine. They should continue to take this medicine because it can lower the risk of death.

The numbers in the [chart/table/graph] tell you how many out of 100 surgery patients who were taking medicine to lower their blood pressure stayed on it before and after surgery. A higher number is better.

Blood sugar level controlled after heart surgery

Hospital staff should help heart surgery patients keep their blood sugar as close to normal as possible after their surgery. Controlling a patient's blood sugar after surgery can lower the chances of infections, heart attack, and brain, kidney, lung and stomach problems.

The numbers in the [chart/table/graph] tell you how many out of 100 heart surgery patients had good blood sugar control in the days after surgery. A higher number is better.

What Patients Say About Their Hospital Stay

The best way to find out about some parts of hospital care is to ask the patients. Each year, some hospitals do a survey of their patients to learn about their hospital stay. These hospitals ask patients the same set of questions about their stay at the hospital. Patients also rate the care they got at the hospital and say whether they would recommend it to others.

Select a topic¹⁹:

[Tested Label]	[Short Version]
How often did nurses communicate well with patients?	Nurse Communication
How often did doctors communicate well with patients?	Doctor Communication
How often did patients receive help quickly from hospital staff?	Timely help from hospital staff
How often was patients' pain well controlled?	Pain control
How often did hospital staff explain about medicines before giving them to patients?	Explanation of medicines
How often were patients' rooms and bathrooms kept clean?	Cleanliness
• How often was the area around patients' rooms quiet at night?	Quiet at night
• Were patients given information about what to do during their recovery at home?	Information about recovery
How do patients rate the hospital overall?	Overall rating of hospital
Would patients recommend the hospital to friends and family?	Would recommend hospital

How often did nurses communicate well with patients?

The survey asked patients about communication with nurses. Good communication means that nurses explained things clearly, listened carefully, and treated patients with courtesy and respect.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that nurses always communicated well. A higher number is better.

How often did doctors communicate well with patients?

The survey asked patients about communication with their doctors. Good communication means that doctors explained things clearly, listened carefully, and treated patients with courtesy and respect.

¹⁹ NOTE TO ALLIANCES: The CAHPS labels and descriptions have been extensively tested by researchers. The long label (question format) worked best in testing. The short labels are provided in recognition that there may be space constraints or other considerations.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that doctors always communicated well. A higher number is better.

How often did patients receive help quickly from hospital staff?

The survey asked patients about the timeliness of help when they used the call button and when they needed help getting to the bathroom or using a bedpan.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that they always got help as soon as they wanted it. A higher number is better.

How often was patients' pain well controlled?

The survey asked patients who needed pain medicine about the control of that pain and the helpfulness of hospital staff.

The numbers in the [chart/table/graph] tell you how many out of 100 patients who needed pain medicine said that their pain was always under control. A higher number is better.

How often did hospital staff explain about medicines before giving them to patients?

The survey asked patients if they were told about new medicines and possible side effects.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that hospital staff always explained new medicines. A higher number is better.

How often were patients' rooms and bathrooms kept clean?

The survey asked patients about the cleanliness of their hospital room and bathroom.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that their room and bathroom were always clean. A higher number is better.

How often was the area around patients' rooms quiet at night?

The survey asked patients about noise at night in the area around their hospital room.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that the area around their hospital room was always quiet at night. A higher number is better.

Were patients given information about follow-up care?

The survey asked patients about the information they got before they left the hospital. Hospital staff should talk to patients about the care they will need at home and give them information on symptoms and health problems to watch for.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that the staff gave them information on what to do during recovery at home. A higher number is better.

How do patients rate the hospital overall?

The survey asked patients to rate the hospital on a scale of 0 to 10. A 10 is the best score.

The numbers in the [chart/table/graph] tell you how many out of 100 patients rated the hospital a 9 or a 10. A higher number is better.

Would patients recommend the hospital to friends and family?

The survey asked patients if they would recommend the hospital to friends and family.

The numbers in the [chart/table/graph] tell you how many out of 100 patients said that they would definitely recommend the hospital. A higher number is better.

Appendix A: AF4Q Suggested Hospital Measure Descriptions

Asthma Care for Children

1. Medicine given to reduce swelling in airways

Doctors should give children with asthma a medicine to reduce swelling in their airways. These medicines help control the symptoms of asthma, which makes it easier for children to breathe.

2. Medicine given to relax airway muscles

Doctors should give children with asthma a medicine that works fast to relax the muscles of the airway, which makes it easier for children to breathe.

3. Parents or other caregivers given a plan for managing asthma care

Hospital staff should give parents or other caregivers of children with asthma a plan for how to manage asthma at home. This plan helps parents or caregivers know when to seek follow-up care, how to avoid things that trigger asthma attacks, and when to take action. It should also explain how to use medicines to help control asthma.

Heart Attack Care

1. Aspirin given when patient gets to the hospital

Doctors should give aspirin to heart attack patients when they get to the hospital. Aspirin can help keep blood clots from forming. It also helps break up blood clots that may cause another heart attack.

2. Medicine to reduce blood clots given within 30 minutes of getting to the hospital Doctors should give heart attack patients a medicine within 30 minutes of getting to the hospital. The medicine helps break up blood clots and improve blood flow to the heart.

3. Procedure to open blood vessels done within 90 minutes of getting to the hospital Doctors should do a procedure on heart attack patients within 90 minutes of getting to the hospital. The procedure helps blood flow to the heart by opening blocked blood vessels. Blood vessels carry blood through the body.

4. Advice to stop smoking

Hospital staff should talk to heart attack patients who smoke about quitting. Smoking increases the chance of another heart attack, heart disease and stroke. Patients who get even brief advice to quit smoking are more likely to stop.

5. Aspirin prescribed before leaving the hospital

Doctors should give heart attack patients a prescription for aspirin before they leave the hospital. For most patients, taking aspirin can keep blood clots from forming, improve the chances of survival, and help prevent another heart attack.

6. Medicine to lower blood pressure given before leaving the hospital

Doctors should give heart attack patients a prescription for medicine called beta blockers. Taking this medicine lowers blood pressure, treats chest pain and heart failure, and can help prevent a future heart attack.

7. Medicine to help the heart work better given before leaving the hospital

Doctors should give heart attack patients with a problem on the left side of their heart a special prescription. The prescription is for medicine that lowers blood pressure and makes it easier for the heart to work.

Heart Failure Care

1. Test of how well the heart is able to pump blood

Doctors should give heart failure patients a test that shows how well the heart is pumping blood. The test results tell doctors which parts of the heart are not working well. Doctors then treat the heart failure based on these results.

2. Advice to stop smoking

Hospital staff should talk to heart failure patients who smoke about quitting. Smoking increases the chance of more heart failure, a heart attack and stroke. Patients who get even brief advice to quit smoking are more likely to stop.

3. Instructions for follow-up care given before leaving the hospital

Hospital staff should give follow-up care instructions to heart failure patients before they leave the hospital. These instructions will help patients manage their symptoms and lower the chances of getting other health problems.

4. Medicine to make the heart work better given before leaving the hospital

Doctors should give heart failure patients a prescription for medicine to improve how the heart works before they leave the hospital. This medicine can lower blood pressure and make it easier for the heart to pump.

Pneumonia Care

1. Blood test done before getting antibiotics

Doctors should give pneumonia patients a blood test before they get any antibiotics (an-tye-bye-OT-iks). This test can help find out which bacteria may have caused the pneumonia. Different antibiotics work for different kinds of bacteria. Knowing the kind of bacteria will allow doctors to pick the right medicine.

2. Antibiotics given within 6 hours of getting to the hospital

Hospital staff should give pneumonia patients an antibiotic to fight infection within 6 hours of getting to the hospital. Taking antibiotics early can cure pneumonia caused by bacteria and reduce the chance of problems.

3. Right antibiotics given

Doctors should give patients the right antibiotic for the type of pneumonia they have. Different antibiotics are used to treat different kinds of bacteria that cause pneumonia.

4. Flu shot given (if needed)

Hospital staff should check if pneumonia patients have gotten a flu shot recently. If patients have not already gotten this shot, they should get it during their hospital stay. The flu shot helps protect pneumonia patients from other lung infections, lower the chances of getting the flu, and prevent the spread of flu. It is most important for pneumonia patients 50 and older.

5. Pneumonia shot given (if needed)

Hospital staff should check if pneumonia patients have gotten a pneumonia shot recently. If patients have not already gotten this shot, they should get it during their hospital stay. Even for patients who already have pneumonia, getting this shot may prevent or lower the chance of getting pneumonia again.

6. Advice to stop smoking

Hospital staff should talk to pneumonia patients who smoke about quitting. Smoking increases the chance of getting pneumonia or other lung diseases. Patients who get even brief advice to quit smoking are more likely to stop.

Surgical Care

1. Treatment prescribed to prevent blood clots

Doctors should give surgery patients a prescription for treatment to prevent blood clots from forming after certain surgeries. Blood clots can lead to heart attacks and strokes. You are at risk for getting blood clots because you do not move during surgery. They are one of the most common problems that people have related to surgery.

2. Patients got treatment to prevent blood clots

Hospital staff should give surgery patients treatment to prevent blood clots within 24 hours before and after certain surgeries. These treatments include blood-thinning medicines and special stockings that help blood move through the body.

3. Antibiotics given 1 hour before surgery

Hospital staff should give surgery patients antibiotics (an-tye-bye-OT-iks) within 1 hour before surgery. Antibiotics are medicines that fight infections in your body. Given properly, antibiotics can greatly lower your chances of getting an infection after surgery.

4. Right antibiotics given

Hospital staff should give surgery patients the right kind of antibiotics to lower the chance of infection after surgery. The right antibiotic for a patient depends on the kind of surgery.

5. Hair removed safely (if needed)

Hospital staff should use safe methods if they need to remove a patient's hair from the surgery area. Electric clippers and hair removal cream are safe methods. Staff should not use a razor because of the risk of leaving small cuts on the skin.

6. Antibiotics stopped 24 hours after surgery

Hospital staff should stop giving antibiotics to surgery patients within 24 hours after some surgeries. Giving antibiotics to patients more than 24 hours after surgery increases the chances of side effects such as stomach problems and severe diarrhea.

7. Medicine to lower blood pressure given (if needed)

Hospital staff should give surgery patients who have heart problems or are at risk for heart problems medicine to lower their blood pressure. Surgery patients who have heart problems or are at risk for heart problems may already take this medicine. They should continue to take this medicine because it can lower the risk of death.

8. Blood sugar level controlled after heart surgery

Hospital staff should help heart surgery patients keep their blood sugar as close to normal as possible after their surgery. Controlling a patient's blood sugar after surgery can lower the chances of infections, heart attack, and brain, kidney, lung and stomach problems.

What Happens to Some Patients within 30 Days

1. Dying after getting care in the hospital for a heart attack

Hospitals keep track of how many of their patients died soon after getting care for [a heart attack, heart failure, pneumonia]. This is called a death rate. These rates show how many patients died within 30 days of going to the hospital for [a heart attack, heart failure, pneumonia].

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing complications, teaching patients how to take care of themselves after they leave the hospital, and helping patients make a smooth transition to their home or another setting such as a nursing home.

2. Returning to the hospital after getting care for a heart attack

Hospitals keep track of how many of their patients had to go back to the hospital soon after getting care for [a heart attack, heart failure, pneumonia]. This is called a readmission rate. These rates show how many patients had to go back to a hospital within 30 days of their original stay. The patients may have needed hospital care because of their [heart attack, heart failure, pneumonia] or for a different reason.

The rate takes into account how sick patients were before they went to the hospital. A lower rate may mean that the hospital does a good job of preventing problems and teaching patients how to care for themselves at home.

Appendix B: CMS Hospital Measure Descriptions²⁰

Children's Asthma Care Process of Care Measures

1. Percent of Children Who Received Reliever Medication While Hospitalized for Asthma

National guidelines recommend using reliever medication in the severe phase and gradually cutting down the dosage of medications to provide control of asthma symptoms. Relievers are medications that relax the bands of muscle surrounding the airways and are used to quickly make breathing easier.

Percent of Children Who Received Systemic Corticosteroid Medication (oral and IV Medication That Reduces Inflammation and Controls Symptoms) While Hospitalized for Asthma

National guidelines recommend using systemic corticosteroid medication (oral and IV medication that reduces inflammation and controls symptoms) in the severe phase and gradually cutting down the dosage of medications to provide control of the asthma symptoms. Systemic corticosteroids are a type of medication that work in the body as a whole. Systemic corticosteroids help control allergic reactions and reduce inflammation.

3. Percent of Children and their Caregivers Who Received a Home Management Plan of Care Document While Hospitalized for Asthma

The Home Management Plan of Care document includes arrangements for follow-up care. It will help children with asthma and their caregivers develop a plan to manage the child's asthma symptoms and to know when to take action. The plan of care should clearly tell the child and their caregiver when and how to use medication.

Heart Attack Process of Care Measures

1. Percent of Heart Attack Patients Given Aspirin at Arrival

Aspirin can help keep blood clots from forming and dissolve blood clots that can cause heart attacks.

2. Percent of Heart Attack Patients Given Aspirin at Discharge

Taking aspirin may help prevent further heart attacks.

3. Percent of Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)

ACE (angiotensin converting enzyme) inhibitors and ARBs (angiotensin receptor blockers) are medicines used to treat heart attacks, heart failure, or a decreased function of the heart.

4. Percent of Heart Attack Patients Given Smoking Cessation Advice/Counseling

²⁰ NOTE TO ALLIANCES: This language can be found online at http://www.hospitalcompare.hhs.gov/staticpages/for-consumers/poc/explainations-of-measures.aspx and http://www.hospitalcompare.hhs.gov/staticpages/for-consumers/ooc/outcome-of-care.aspx.

Smoking is linked to heart attacks. Quitting may help prevent another heart attack.

5. Percent of Heart Attack Patients Given Beta Blocker at Discharge

Beta blockers are a type of medicine used to lower blood pressure, treat chest pain (angina) and heart failure, and to help prevent a heart attack.

6. Percent of Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival

Blood clots can cause heart attacks. Doctors may give this medicine, or perform a procedure to open the blockage, and in some cases, may do both.

7. Percent of Heart Attack Patients Given PCI Within 90 Minutes Of Arrival

The procedures called Percutaneous Coronary Interventions (PCI) are among those that are the most effective for opening blocked blood vessels that cause heart attacks. Doctors may perform PCI, or give medicine to open the blockage, and in some cases, may do both.

Heart Failure Process of Care Measures

1. Percent of Heart Failure Patients Given Discharge Instructions

The staff at the hospital should provide you with information to help you manage your heart failure symptoms when you are discharged.

2. Percent of Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function

An evaluation of the LVS function checks how the left chamber of the heart is pumping.

3. Percent of Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)

ACE (angiotensin converting enzyme) inhibitors and ARBs (angiotensin receptor blockers) are medicines used to treat heart attacks, heart failure, or a decreased function of the heart.

4. Percent of Heart Failure Patients Given Smoking Cessation Advice/Counseling Smoking is linked to heart failure. Quitting may help improve your condition.

Pneumonia Process of Care Measures

- 1. Percent of Pneumonia Patients Assessed and Given Pneumococcal Vaccination A pneumonia (pneumococcal) shot can help prevent pneumonia in the future, even for patients who have been hospitalized for pneumonia.
- 2. Percent of Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics A blood culture tells what kind of medicine will work best to treat your pneumonia.
- 3. Percent of Pneumonia Patients Given Smoking Cessation Advice/Counseling Smoking is linked to pneumonia. Quitting may help prevent you from getting pneumonia again.

4. Percent of Pneumonia Patients Given Initial Antibiotic(s) within 6 Hours After Arrival

Timely use of antibiotics can improve the treatment of pneumonia caused by bacteria.

- 5. Percent of Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)
 Antibiotics are medicines that treat infection, and each one is different. Hospitals should choose the antibiotics that best treat the infection type for each pneumonia patient.
- 6. Percent of Pneumonia Patients Assessed and Given Influenza Vaccination
 An influenza shot can help prevent influenza in the future, even for patients who have been hospitalized for pneumonia.

Surgical Care Improvement Project Process of Care Measures

- 1. Percent of patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery

 This measure tells how often patients having certain types of surgery received treatment to prevent blood clots in the period from 24 hours before surgery to 24 hours after surgery.
- 2. Percent of surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries

Certain types of surgery can increase patients' risk of having blood clots after surgery. For these types of surgery, this measure tells how often treatment to help prevent blood clots was ordered by the doctor.

3. Percent of surgery patients who were given the right kind of antibiotic to help prevent infection

Some antibiotics work better than others to prevent wound infections for certain types of surgery. This measure shows how often hospital staff make sure patients get the right kind of preventive antibiotic medication for their surgery.

4. Percent of surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery)

Taking preventive antibiotics for more than 24 hours after routine surgery is usually not necessary. This measure shows how often hospitals stopped giving antibiotics to surgery patients when they were no longer needed to prevent surgical infection.

5. Percent of all heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery

All heart surgery patients get their blood sugar checked after surgery. Any patient who has high blood sugar after heart surgery has a greater chance of getting an infection. This measure tells how often the blood sugar of heart surgery patients was kept under good control in the days right after their surgery.

6. Percent of surgery patients needing hair removed from the surgical area before surgery, who had hair removed using a safer method (electric clippers or hair removal cream – not a razor)

For those patients who needed to have hair removed to prepare for surgery, this measure tells how often one of the safer methods was used (electric clippers or hair removal cream).

7. Percent of surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection

Getting an antibiotic within one hour before surgery reduces the risk of wound infections. This measure shows how often hospital staff make sure surgery patients get antibiotics at the right time.

8. Percent of surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their surgery

Many people who have heart problems or are at risk for heart problems take drugs called beta blockers to reduce the risk of future heart problems. This measure shows whether surgery patients who were already taking beta blockers before coming to the hospital were given beta blockers during the time period just before and after their surgery.

Outcome of Care Measures

1. Hospital Readmissions Measures

"Readmission" is when patients who have had a recent stay in the hospital go back into a hospital again. The information on this website shows how often patients are readmitted within 30 days of discharge from a previous hospital stay for heart attack, heart failure, or pneumonia. Patients may have been readmitted back to the same hospital or to a different hospital or acute care facility. They may have been readmitted for the same condition as their recent hospital stay, or for a different reason.

2. Hospital Death (Mortality) Measures

One way to tell whether a hospital is doing a good job is to find out whether patients admitted to the hospital have death (mortality) rates that are lower (better) than the U.S. National Rate, about the same as the U.S. National Rate, or higher (worse) than the U.S. National Rate, given how sick they were when they were admitted to the hospital.