# MSQC 2022: CWM & Colorectal Cancer Surgical Quality Measures Reference Sheet

# Collaborative Wide Measure

Measurement Period 1/1/2022 – 12/31/2022 (from Workstation Opioid Prescribing Dashboard report)

• Goal: Reduce excess oral morphine equivalent (OME) prescribing across all MSQC procedures ("lower is better" measure)\*

- ➤ ≤ 25.9 OME excess: 20 points
- ➤ 26.0 26.6 OME excess: 15 points
- ➢ 26.7 − 27.1 OME excess: 10 points
- ➤ 27.2 27.4 OME excess: 5 points
- > > 27.4 OME excess: 0 points

\*2021 baseline of 28.8 OME excess was calculated using 2021 surgery data available as of 1/18/2022.

- Population:
  - All MSQC-eligible procedures (as defined in 2022 Program Manual Appendix A) and
  - Discharge destination of Home, or Home with Home Health Care and
  - Complete abstraction of discharge opioid prescription (including opioid type, unit, dose, and quantity prescribed) and
  - Number of doses taken (collected in 30-day PRO survey)

## Goal #1: Preoperative Goals (5 points each; 10 points total). Measurement Period 1/1/2022 – 12/31/2022

Preoperative Measures (demonstrate 90% compliance with each)	Variable in Workstation
1a. Oral antibiotics/mechanical bowel prep (all CRC cases)	Preop Tab: Mechanical Bowel Prep $\rightarrow$ Yes selected <u>AND</u>
Excludes cases where Mechanical Bowel Prep $ ightarrow$ Exception	Were Oral Antibiotic(s) Ordered as part of the Bowel Prep? $\rightarrow$ Yes selected
1b. Patient education related to smoking* cessation documented	ERP Tab: Pre-admission counseling/ teaching $\rightarrow$ Tobacco Cessation selected
*includes cases where Tobacco Use within 1 month – Cigarette = Yes	

### Goal #2: Intraoperative Goals (5 points each; 15 points total). Measurement Period 1/1/2022 – 12/31/2022

Intraoperative Measures	Variable in Workstation
2a. ≥ 12 lymph nodes examined (90% compliance)	CRC Tab: Total Number of Lymph Nodes Examined $\rightarrow$ value $\geq$ 12 entered
2b. Intraoperative use of multimodal pain management (90% compliance)	ERP Tab: Intraoperative Use of Multimodal Pain Management Types $ ightarrow$ all administered
	medications are abstracted (minimum of two medications entered)
2c. Maintain or decrease positive margin rate:	CRC Tab: Positive Surgical Margin →No selected
<ul> <li>from 2021 compared to 2022 (continuing sites only)</li> </ul>	
<ul> <li>from Q1 2022 compared to Q3 &amp; Q4 2022 (new sites)</li> </ul>	

### Goal #3: Postoperative Goals (5 points each; 15 points total). Measurement Period 1/1/2022 – 12/31/2022

Goal #3: Postoperative Measures	Variable in Workstation
3a. TME grading* (100% compliance)	CRC Tab: TME Grade →Grade 3 – Complete, Grade 2 – Near Complete, or Grade 1 – Incomplete
Excludes 'Local excision'	selected
Includes Preoperative Rectal Cancer Location = Middle 1/3rd of rectum or Lower	
1/3rd of rectum	
3b. Postoperative Multimodal pain management order if patient	ERP Tab: Multimodal Pain Management <u>ordered</u> within the first 24 hours following surgery? $ ightarrow$ Yes
discharged* on POD 0 (90% compliance)	selected
*Discharge Destination equal to Home, or Home with Home Health Care	
3c. Postoperative Multimodal pain management <u>use</u> if patient discharged* ≥	ERP Tab: Postoperative Use of Multimodal Pain Management Types $ ightarrow$ all administered medications
POD 1 (90% compliance)	are abstracted (minimum of two medications entered)
*any Discharge Destination	