Sickle Cell Disease

Measure 16: Appropriate Emergency Department Pain Assessment for Children with Sickle Cell Disease

Description

The percentage of children identified as having Sickle Cell Disease presenting to an emergency department with an acute pain episode during the measurement year who had a pain assessment within 30 minutes following initial contact. A higher proportion indicates better performance as reflected by appropriate treatment.

Calculation

This measure requires medical record data and is calculated as follows:

The percentage of eligible children who received a pain assessment within 30 minutes (numerator divided by denominator).

Definitions

Intake period	January 1 to December 31 of the measurement year
Pain Assessment	A pain assessment was performed within 30 minutes following initial contact (see Table 16-A). Assume that an institution uses the same pain scale over time.
Acute pain episode	Considered to have occurred if there is any documentation of a Numeric Pain Intensity Assessment (see Table 16-A).
Initial contact	Child's first presentation to emergency department staff. Use the earliest time stamp in the medical record.

Table 16-A: Pain assessments for children with sickle cell disease

Definitions	Procedure Code	Short Description	Long Description
Pain Assessment	709110	Emer treat of pain minor prp46	EMER TREAT OF PAIN MINOR PRP46
Pain Assessment	1125F	Amnt pain noted pain prsnt	PAIN SEVERITY QUANTIFIED; PAIN PRESENT (ONC)1
Pain Assessment	1126F	Amnt pain noted none prsnt	PAIN SEVERITY QUANTIFIED; NO PAIN PRESENT (ONC)1
Pain Assessment	G8440	Pain assess f/u pln document	DOCUMENTATION OF PAIN ASSESSMENT (INCLUDING LOCATION, INTENSITY AND DESCRIPTION) PRIOR TO INITIATION OF TREATMENT OR DOCUMENTATION OF THE ABSENCE OF PAIN AS A RESULT OF ASSESSMENT THROUGH DISCUSSION WITH THE PATIENT INCLUDING THE USE OF A STANDARDIZED TOOL AND A FOLLOW-UP PLAN IS DOCUMENTED
Pain Assessment	G8509	Pain assess no f/u pln doc	DOCUMENTATION OF PAIN ASSESSMENT (INCLUDING LOCATION, INTENSITY AND DESCRIPTION) PRIOR TO INITIATION OF TREATMENT OR DOCUMENTATION OF THE ABSENCE OF PAIN AS A RESULT OF ASSESSMENT THROUGH DISCUSSION WITH THE PATIENT INCLUDING THE USE OF A STANDARDIZED TOOL; NO DOCUMENTATION OF A FOLLOW-UP PLAN, REASON NOT SPECIFIED
Pain Assessment	G8512	Pain sev quant present	PAIN SEVERITY QUANTIFIED; PAIN PRESENT
Pain Assessment	G8730	Pain doc pos and plan	PAIN ASSESSMENT DOCUMENTED AS POSITIVE UTILIZING A STANDARDIZED TOOL AND A FOLLOW-UP PLAN IS DOCUMENTED
Pain Assessment	G8731	Pain neg no plan	PAIN ASSESSMENT DOCUMENTED AS NEGATIVE, NO FOLLOW-UP PLAN IS REQUIRED

Eligible Population

The determination of eligible population for this measure requires medical record data.

Ages Younger than eighteen years of age during measurement year

Event/Diagnosis Diagnosed with sickle cell disease and presented to an emergency department with an acute pain episode as documented in the medical record (see Table 16-

B). All emergency department visits for an acute pain episode during the measurement year qualify.

NOTE: See exclusions noted below; there are several sickle cell variants that may be recorded under the 282.49 ICD-9 code that do not qualify for inclusion (see Table 16-D). Medical records for cases with ICD-9 code 282.49 should not be reviewed unless a diagnosis of Hb beta zero-thalassemia can be confirmed.

Table 16-B: Codes to Identify Sickle Cell Disease

Condition Name	Hemoglobin Screening Result	ICD-9 Code(s)
Hb beta zero-thalassemia	Hb F only	282.49
Hb S beta-thalassemia	Hb F,S,A	282.41, 282.42
Hb SC-disease	Hb F,S,C	282.63, 282.64
Hb SD-disease	Hb F,S,D	282.68, 282.69
Hb SS-disease (sickle cell anemia)	Hb F,S	282.6, 282.61, 282.62

Specification

Denominator The eligible population for the denominator is the number of children younger than 18 years of age with SCD presenting to the ED with an acute pain episode during the measurement year.

Numerator The eligible population for the numerator is the number of children younger than 18 years of age with SCD presenting to the ED with an acute pain episode during the measurement year who had a pain assessment within 30 minutes following initial contact, as determined by a medical record review.

Documentation in medical record must include, at a minimum, a note containing the time at which the pain assessment was performed.

Exclusions

- Inpatient stays, outpatient visits, urgent care visits, acute care (evaluation and management) visits with primary care physician
- Ineligible pain assessment procedure codes (see Table 16-C).
- Children with diagnosis in the sampled medical record indicating one of the sickle cell disease variants listed in Table 16-D should not be included the eligible population *unless* there is also a diagnosis for a sickle cell variant listed in Table 16-B.

Table 16-C: Excluded pain assessment procedure codes

Definitions	Procedure Code	Short Description	Long Description
Pain Assessment	G8441	No document of pain assess	NO DOCUMENTATION OF PAIN ASSESSMENT (INCLUDING LOCATION, INTENSITY AND DESCRIPTION) PRIOR TO INITIATION OF TREATMENT
Pain Assessment	G8442	Pt inelig pain assessment	DOCUMENTATION THAT PATIENT IS NOT ELIGIBLE FOR PAIN ASSESSMENT
Pain Assessment	G8508	Pt inelig; pain asses no f/u	DOCUMENTATION OF PAIN ASSESSMENT (INCLUDING LOCATION, INTENSITY AND DESCRIPTION) PRIOR TO INITIATION OF TREATMENT OR DOCUMENTATION OF THE ABSENCE OF PAIN AS A RESULT OF ASSESSMENT THROUGH DISCUSSION WITH THE PATIENT INCLUDING THE USE OF A STANDARDIZED TOOL; NO DOCUMENTATION OF A FOLLOW-UP PLAN, PATIENT NOT ELIGIBLE

Table 16-D: Excluded Sickle Cell Disease Diagnosis Codes

Condition Name	Hemoglobin Screening Result	ICD-9 Code(s)
Hb C beta-thalassemia	Hb F,C,A	282.49
Hb D beta-thalassemia	Hb F,D,A	282.49
Hb E beta-thalassemia	Hb F,E,A	282.49
Hb C-disease	Hb F,C	282.7
Hb E-disease	Hb F,E	282.7
Hb H-disease	Hb F,H	282.49
Hb SE-disease	Hb F,S,E	282.68, 282.69
Hb C-carrier	Hb F,A,C	282.7
Hb D-carrier	Hb F,A,D	282.7
Hb E-carrier	Hb F,A,E	282.7
Hb S (sickle)-carrier	Hb F,A,S	282.5