

## ABG PSO OBSERVATIONS LIST 2016

Database ID#*	Observation Category	Observation	Observation Subcategories (if any)	Definitions
7	Airway/Respiratory	Aspiration	Unspecified	LMA or ETT, suspected or confirmed.
3		Use of difficult airway equipment	Unspecified	Use of difficult airway equipment- reason not specified.
36		Use of difficult airway equipment	Planned	Difficult airway equipment is brought to the room before it is needed and used for any reason (difficult airway, educational, cervical spine instability, etc).
37		Use of difficult airway equipment	Unplanned	Difficult airway equipment is brought to the room after induction and used when difficult airway is encountered unexpectedly.
4		Use of difficult airway equipment	Unable to intubate	Unable to achieve translaryngeal tracheal intubation.
38	Airway/Respiratory	Use of difficult airway equipment	Surgical airway required	Res ipsa loquitur.
39	Airway/Respiratory	Laryngospasm w intervention		Upper airway obstruction thought to result from laryngospasm requiring intervention other than positive pressure.
40	Airway/Respiratory	Bronchospasm w intervention		Lower airway constriction thought to be related to bronchospasm requiring intervention/input beyond anesthetic agents.
41	Airway/Respiratory	Pulmonary Edema		Pulmonary edema thought to be caused by fluid overload, e.g. cardiac or renal, requiring intervention/input including PEEP>3cm H <sub>2</sub> O.
42	Airway/Respiratory	Negative Pressure Pulmonary Edema		Pulmonary edema thought to be caused by negative inspiratory pressure against closed airway.
43	Airway/Respiratory	Pulmonary Embolus		Any clinical scenario thought to be PE with consistent ETCO <sub>2</sub> /Pulse Ox, ABG or radiographic findings.
8	Airway/Respiratory	Tracheal intubation in PACU		Any patient who requires tracheal intubation in the PACU after receiving anesthesia.
9	Airway/Respiratory	Post Op Mechanical Ventilation	Unspecified	A patient who requires mechanical ventilation in the immediate postoperative period- reason unspecified.
82	Airway/Respiratory	Post Op Mechanical Ventilation	Planned	Plan for post op mechanical ventilation is known with certainty prior to induction.
83	Airway/Respiratory	Post Op Mechanical Ventilation	Unexpected	Plan for postop mechanical ventilation is determined after induction.
44	Airway/Respiratory	NM block reversal in PACU		Muscle relaxant antagonist given in PACU.
45	Airway/Respiratory	Naloxone given		Naloxone administered for any reason during an anesthetic or in the PACU.
23	Patient Satisfaction	Antiemetic(s) in PACU		Any symptoms requiring use of antiemetics in PACU.
24	Patient Satisfaction	Vomiting in PACU		A patient that vomited in PACU.
46	Patient Satisfaction	Nausea/Vomiting-prolonged/resistant		Prolonged nausea/vomiting that is resistant to routine treatment and requires discharge to home/floor without resolution of symptoms.
17	Patient Safety	Unintended Awareness under GA		Awareness under anesthesia occurs when a patient remembers events during surgery/procedure while under general anesthetic. Does not include recall of events during periods of intended intra-operative "wake-up" or sedation.
25	Patient Safety	Postoperative hypothermia <36		A temperature of <36 degrees centigrade in the immediate postoperative period within 15 minutes of arrival in PACU.
47	Patient Safety	Medication error		Wrong drug or dose given requiring treatment or resulting in harm to the patient.
48	Patient Safety	Equipment malfunction		Any malfunction requiring intervention not part of routine device/machine checkout.
49	Patient Safety	Patient Fall		Patient fall while under anesthesia care.
50		OR fire/burn	Unspecified	Fire in OR, location not specified.
51		OR fire/burn	Surface burn	Any fire on patient surface.
52		OR fire/burn	Airway fire	Any fire in patient airway.
53	Patient Safety	OR fire/burn	OR fire	Fire in OR, not contacting patient.
54	Patient Safety	Agitation requiring restraint/treatment		Agitation that was not present preoperatively requiring restraints or medication treatment in PACU.
55	Patient Safety	Time out error- surgical		Incorrect surgical site, side, patient, procedure, implant
56	Patient Safety	Time out error- regional block		Incorrect regional block site, side, patient, procedure
57		Skin injury	Unspecified	Skin injury during surgery not related to surgical procedure, location not specified
58		Skin injury	New pressure sore/breakdown	New pressure sore or breakdown occurring during surgery
59		Skin injury	Eyelid injury	Eyelid injury occurring during surgery from tape or other anesthesia intervention
60	Patient Safety	Skin injury	Laceration/skin tear	Laceration or skin tear occurring during surgery that is not related to the surgical procedure.
61	Patient Safety	Air Embolus		Arterial obstruction due to the introduction of air bubbles into the veins following surgery, trauma, or medical intervention.
14	CardioVascular	Cardiac Arrest (w CPR)		Any alteration in cardiac activity requiring CPR and/or unplanned defibrillation within the first 24 hours after the completion of an anesthetic.
12	CardioVascular	Myocardial Ischemia req intervention		Any scenario felt to be indicative of myocardial ischemia that requires intervention after physician evaluation.
13	CardioVascular	Myocardial Infarction		New myocardial infarction from induction or anesthesia until 24 hours after OR end, diagnosed by troponin, CK MB or any other criteria of American College of Cardiology.
62	CardioVascular	Dysrhythmia requiring intervention		Arrhythmia that requires intervention with anti-arrhythmics other than anesthetics. Does not include beta blockade for cases for HR < 100.
2		Case Cancelled Day of Surgery	Unspecified	A procedure/surgery that is cancelled on the day of surgery, reason unspecified.
63		Case Cancelled Day of Surgery	System Reasons	Case cancelled on day of surgery due to system reasons such as surgeon unavailable/previous long case, equipment not available, etc.
64		Case Cancelled Day of Surgery	Medical Reasons	Case cancelled on day of surgery due to medical or surgical factor, such as surgery no longer indicated or patient illness.
65	Discharge/Planning	Case Cancelled Day of Surgery	Patient Reasons	Case cancelled on day of surgery due to patient failure to follow directions or other economic, social, or religious reasons.

31	Discharge/Planning	Unplanned return to OR		Unplanned return to the OR/procedure room within 24 hours.
11	Discharge/Planning	Unplanned Hospital Admission (and 23 hr stays)		Patient admitted to the hospital from the PACU that was originally scheduled to go home.
10	Discharge/Planning	Unplanned ICU Admission		A patient admitted to the ICU within 24 hours of anesthesia care when the need for ICU care is determined after the induction of anesthesia.
15	Neurologic/Procedural	Brain Injury	Unspecified/Other	Unspecified cause of supratentorial neurologic dysfunction requiring evaluation or intervention. Includes TIA, hemorrhage, anoxic or metabolic coma. Symptoms occurring within 24 hours of OR end and persisting > 24 hours.
66		Brain Injury	CVA	Neurologic dysfunction from a cerebrovascular accident with symptoms occurring within 24 hours of OR end and persisting > 24 hours.
67		Brain Injury	Hypoxemic brain Injury/Coma	Hypoxic brain injury and/or coma from any cause within 24 hours of OR end time.
69		Spinal Cord Event	Unspecified/Other	Spinal cord event of any type that may be related to an anesthetic procedure, or occurs within 24 hours of OR end time, type unspecified.
70	Neurologic/Procedural	Spinal Cord Event	Epidural abscess following regional	Radiological evidence of an epidural abscess within 30 days of, and in the proximity of previous spinal/epidural injection by an anesthesia provider, combined with symptoms of infection.
71		Spinal Cord Event	Epidural hematoma following regional	Radiological evidence of an epidural hematoma in the proximity of previous spinal/epidural injection by an anesthesia provider.
28	Neurologic/Procedural	Visual Loss		Any loss of visual field or acuity following anesthesia not related periocular treatments (eye drops, ointments, or eye surgery) lasting more than 24 hours.
16	Neurologic/Procedural	Peripheral Nerve Injury; in distribution of or absence of regional anesthesia		The new onset of peripheral nerve injury identified within 24 hours of an anesthetic in the absence of a known surgical cause.
20	Neurologic/Procedural	Failed Regional Block as primary anesthetic		Regional anesthesia intended as primary anesthetic that requires GA.
18	Neurologic/Procedural	Pneumothorax	Unspecified/Other	A new onset of a pneumothorax in the perioperative period, cause unspecified.
84		Pneumothorax	After regional procedure	A new onset of a pneumothorax in the perioperative period following anesthesiologically performed perithoracic regional procedures.
73		Pneumothorax	After perithoracic vascular procedure	A new onset of a pneumothorax in the perioperative period following anesthesiologically performed perithoracic vascular procedures.
21	Neurologic/Procedural	Post-Dural Puncture Headache		Any new headache felt to be related to dural puncture after an attempt at epidural or spinal anesthesia requiring treatment.
19	Neurologic/Procedural	Vascular Access Event		An event arising from an attempt at securing vascular access (arterial, central venous, or peripheral venous) requiring intervention (not including pneumothorax- For pneumothorax, please use "Pneumothorax after perithoracic vascular procedure").
22	Neurologic/Procedural	Wet tap		An unintended dural puncture that occurs during an attempt at epidural anesthesia.
75	Neurologic/Procedural	Local anesthetic toxicity		Any CNS or Cardiac effects following instillation of LA for regional block thought to be related to systemic LA levels.
76	Neurologic/Procedural	Infection after peripheral nerve block		Signs of infection in the area of a regional block requiring intervention.
77	Neurologic/Procedural	Excessive block requiring airway support		Compromise of adequate spontaneous respiration resulting from local anesthetic related neural dysfunction requiring airway management.
78	Pharmacy/Blood Bank	Malignant Hyperthermia		Suspected MH following induction of general anesthesia requiring treatment with Dantrolene.
79	Pharmacy/Blood Bank	Anaphylaxis		Immediate sensitivity response after exposure to specific antigen; results in life-threatening respiratory distress; usually followed by vascular collapse, shock, urticaria, angioedema and pruritus.
6	Head/Neck Trauma	Dental injury		Unintended change in the patient's perioperative dental status.
80	Head/Neck Trauma	Corneal Abrasion		Any ocular surface injury requiring evaluation, follow up, or treatment.
81	Head/Neck Trauma	Nondental Upper Airway Trauma		Any nondental upper airway pain or trauma requiring physician evaluation/input beyond routine orders.
32	Other Major Morbidity/Mortality	Death		Death within 24 hours after completion of anesthesia/ in-hospital death.
1		No Significant Observations		Selecting this item certifies that no significant observations occurred. Significant observations are made when events occur that cause patient harm or require intervention beyond routine anesthetic management.
33		Other significant observation not listed elsewhere		Selecting this item certifies that an observation was made of a significant event which caused patient harm or required intervention beyond routine anesthetic management, and that the observation is not found elsewhere on this list.

\* To report a PSO Observation, the database ID# should be placed in one of the **EventID#s** column of the upload spreadsheet. EventID#s column should be chosen based on phase of care that event is reported in. Multiple entries should be separated by commas.

Comments

1. ABG recommends that observations be collected and reported in all phases (OR, PACU, Postop). For groups participating in the ABG QCDR, we HIGHLY recommend reporting by phase.
2. ABG recognizes differing abilities to collect in Postop phase, but recommends that all groups make best effort to collect at least through 24 hours after anesthetic.
3. For observations with subcategories, submissions with no selected subcategory will be placed in "unspecified" subcategory.
4. See below for Observations that are not part of the standard PSO Observations list, but are required for some ABG QCDR Measures.

## ABG QCDR OBSERVATIONS LIST 2016

Associated QCDR Measure #	Database ID#**	Description
ABG 7	1001	Pain score 0-6 on arrival to PACU
	1002	Pain score 7-10 on arrival to PACU
	1003	Patient unable to report pain score on arrival to PACU
	1017	Patient not transferred to PACU
ABG 8	1004	Checklist/Protocol used for transfer to non-anesthesia provider
	1005	Checklist/Protocol NOT used for transfer to non-anesthesia provider
ABG 12	1006	Patient survey provided
	1007	Patient survey NOT provided
ABG 18	1008	Patient/Parent unable to complete survey
	1009	Preop medication review attested
	1010	Preop medication review NOT attested
	1011	Preop medication review omitted for system,
ABG 19	1012	Postop temperature documented
	1013	Postop temperature NOT documented
ABG 22	1014	Preoperative OSA assesment done
	1015	Preoperative OSA assesment NOT done
	1016	System, medicalor patient reason for no

\*\* To report a QCDR Observation, the database ID# should be placed in the **MeasureEvent#s** column of the upload spreadsheet. Multiple entries should be separated by commas.