PSI # 15: Accidental Puncture or Laceration
NQF#: 0345
Developer: Agency for Healthcare Research and Quality (AHRQ)
Data Source: CMS Hospital Compare
Description: This measure is used to assess the number of cases of technical difficulty (e.g., accidental cut, puncture, perforation, or laceration during procedure) per 1,000 discharges.
Rationale: Widespread consensus exists that health care organizations can reduce patient injuries by improving the environment for safety from implementing technical changes, such as electronic medical record systems, to improving staff awareness of patient safety risks. Clinical process interventions also have strong evidence for reducing the risk of adverse events related to a patient's exposure to hospital care. Patient Safety Indicators (PSIs), which are based on computerized hospital discharge abstracts from the AHRQ's Healthcare Cost and Utilization Project (HCUP), can be used to better prioritize and evaluate local and national initiatives. Analyses of these and similar inexpensive, readily available administrative data sets may provide a screen for potential medical errors and a method for monitoring trends over time. The accidental puncture or laceration indicator is intended to flag cases of complications that arise due to technical difficulties in medical care—specifically, those involving an accidental puncture or laceration.
Evidence for Rationale: · AHRQ quality indicators. Guide to patient safety indicators [version 3.1]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ);2007 mar 12. 76 p. (AHRQ Pub; no.03-R203). · Kohn LT, Corrigan JM, Donaldson MS, editor(s). To err is human: building a safer health system. Washington (DC): National Academy Press; 2000.
Numerator: Discharges among cases meeting the inclusion and exclusion rules for the denominator with ICD-9-CM code denoting accidental cut, puncture, perforation or laceration during a procedure in any secondary diagnosis field.
Denominator: All surgical and medical discharges, age 18 years and older, defined by specific DRGs or MS-DRGs. Exclude cases: with principal diagnosis denoting accidental cut, puncture, perforation or laceration, or secondary diagnosis present on admission; MDC 14 (pregnancy, childbirth, puerperium); with ICD-9-CM code for spine surgery.
Opportunity: · Opportunity for improvement exists, based on the coefficient of variation for the measure.
Evidence: · The evidence has not been formally assessed.

http://qualitymeasures.ahrq.gov/content.aspx?id=26530&search=accidental+puncture+or+laceration
http://www.qualityindicators.ahrq.gov/Downloads/Software/SAS/v41A/TechSpecs/PSI%2015%20Accidental%20Puncture%20or%20Laceration.pdf