

# Quality Committee Meeting

February 27, 2023

10:00am - 11:00am Eastern Time



# Agenda

## Announcements

**Measure Review:** TOC-03 Dr. Alvin Stewart,  
University of Arkansas

**New Measure Proposal:** Sugammadex Dosing -  
Dr. Megan Anders, University of Maryland

## Measure Updates:

- CARD 04/05
- GLU 01

# Meeting Minutes January 2023

Roll Call – via Zoom or  
contact us



# Announcements

- Welcome UAB!
- Registration for MSQC/ASPIRE meeting is open
- VBR measurement period updated: 12/1/2022 - 9/30/2023
- OB Subcommittee Update



Welcome to the  
University of  
Alabama  
Birmingham

Chair: Dr. Dan Berkowitz  
Quality Champion & PI: Dr. Philip McArdle  
IT Champion: Dr. Dale Parks

# 2023 Meetings

**Friday, April 21, 2023**

MSQC/ASPIRE Collaborative Meeting  
Michigan Union, Ann Arbor, Michigan

**Registration Now Open!**

**See MPOG Website for  
information and registration**



# 2023 Meetings

**Friday, July 14, 2023**

ASPIRE Collaborative Meeting  
Henry Executive Center, Lansing, Michigan



**Friday, September 15, 2023**

ACQR Retreat  
DoubleTree Hotel, Ann Arbor, Michigan



**Friday, October 13, 2023**

MPOG Retreat  
San Francisco, California



# VBR Update - Michigan Sites

Due to BCBSM reporting timelines for 2024 VBR, the measurement time period for this year has been updated to **December 1, 2022 - September 30, 2023.**

This time period update applies to both standard and smoking cessation [VBR measures](#).

Please contact Kate with questions: [kjbucrek@med.umich.edu](mailto:kjbucrek@med.umich.edu)



# SUS-03 Released (Beta)

## SUS-03: Global Warming Footprint, Induction

[More Info](#)

Providers



Case List



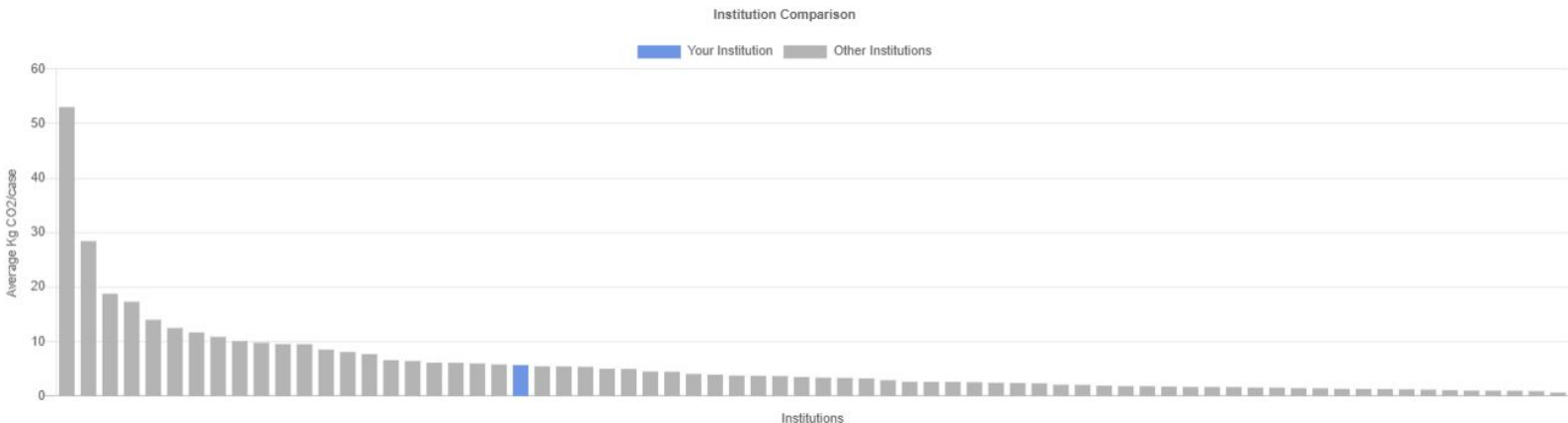
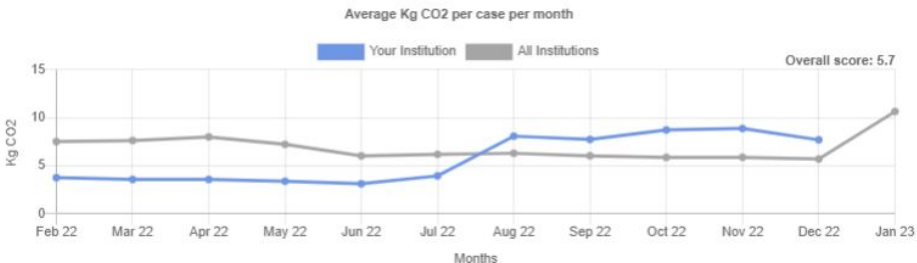
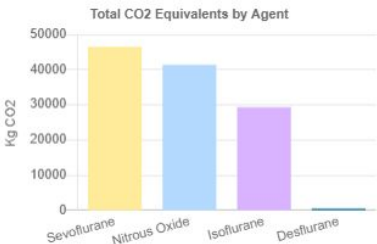
Carbon dioxide equivalents normalized by case for cases receiving halogenated agents and/or nitrous oxide during the induction period of anesthesia

### Carbon Footprint

5.70 kg CO<sub>2</sub>/case



MPOG Average:  
6.69 kg CO<sub>2</sub>/case





# **Subcommittee Updates**

# OB Subcommittee Update

- Last meeting held on February 15th
  - QI Story: Dr. Robert Nicholson (Bronson-Kalamazoo)
  - Research Overview: Dr. Mike Mathis (MPOG)
- Call for Measure Reviewers!
  - ABX-01 & TEMP-05
- Next Meeting: **May 24th @ 1pm EST**
  - BMI Stratification
  - Second line uterine tone medications
- Please contact Nicole Barrios ([Nicbarri@med.umich.edu](mailto:Nicbarri@med.umich.edu)) if interested in attending future meetings.

# Cardiac Subcommittee Update

- The Cardiac Subcommittee met in December with more than 20 participants in attendance
- Included an unblinded performance review of TEMP-06 & TEMP-07: Avoiding Hypo & Hyperthermia in Open Cardiac Surgery
- Seeking cardiac anesthesiologists to participate as peer reviewers in a NHLBI-funded R01 study
- Contact Subcommittee Chair, Allison Janda ([ajanda@med.umich.edu](mailto:ajanda@med.umich.edu)) if interested in joining the committee or becoming a peer reviewer.

Next Meeting: April 5, 1-2pm EST

# Measure Review: TOC 03

Alvin Stewart  
University of Arkansas



# Transfer of Care - ICU Vote

1 vote/ site

Continue as is/ modify/ retire

Need > 50% to retire measure

Coordinating center will review all votes after meeting to ensure no duplication



# **Measure Proposal: Sugammadex dosing**

Megan Anders  
University of Maryland



# Low-dose Sugammadex Measure Proposal

Megan Graybill Anders, MD, MS (she/her)

Associate Professor of Anesthesiology

Vice Chair for Safety and Quality

Department of Anesthesiology

University of Maryland School of Medicine



# Measure Background

- Sugammadex FDA approved in 2015
- A STRONGER argument for use (thanks, MPOG!)
  - In a multicenter observational matched cohort study of noncardiac surgery, sugammadex administration was associated with:
    - 30% reduced risk of pulmonary complications
    - 47% reduced risk of pneumonia
    - 55% reduced risk of respiratory failure
- 2023 ASA guideline endorses sugammadex over neostigmine for reversal of deep, moderate, shallow blockade

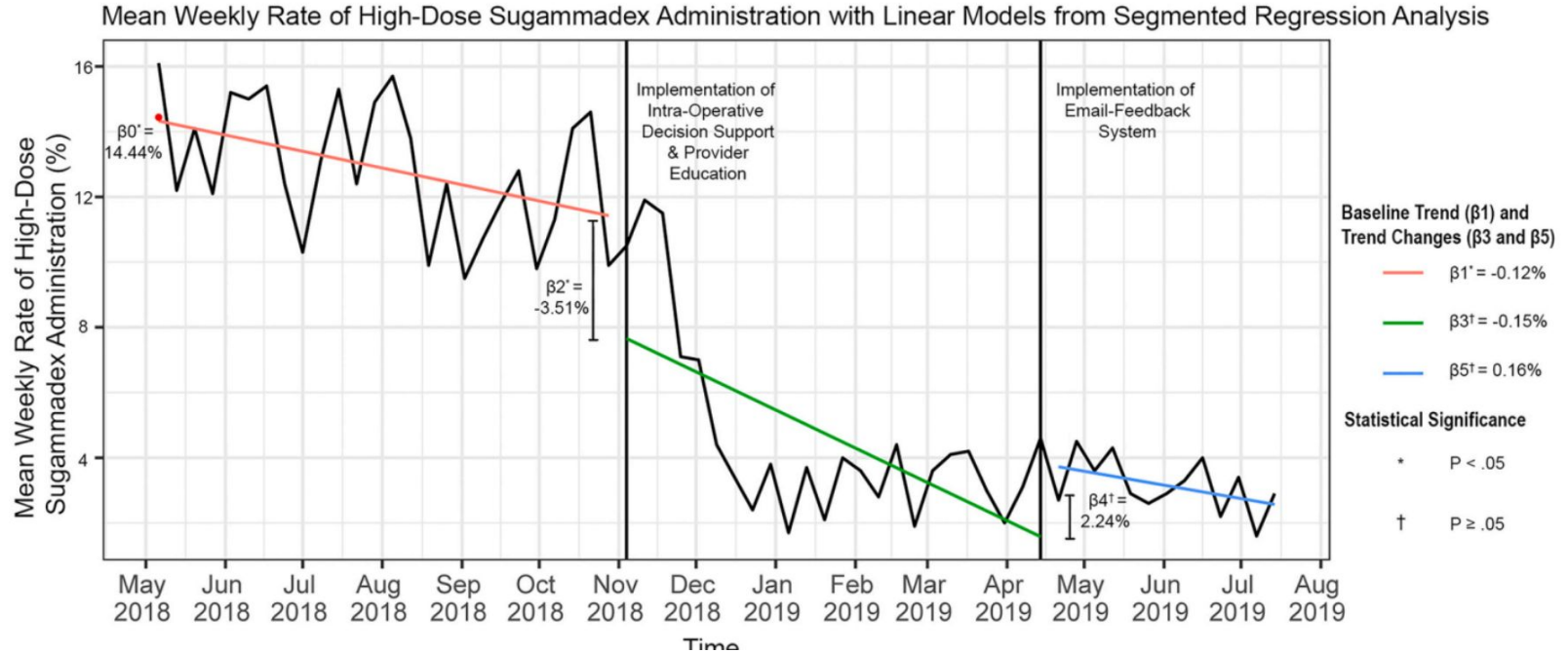
# Background – cost containment

- Strategies for cost-containment are an area of interest
  - Formulary restrictions
  - Lower-dosing strategies (0.5 or 1mg/kg)
  - Dosing at "adjusted" body weight instead of actual body weight
    - $IWB + 0.4(\text{Actual} - IBW)$
  - Decision support and email feedback for dosage guideline
- A timely measure – groups may be engaging in discussion of loosening formulary restrictions given ASA guideline

# Measure Specification/Rationale

- Percentage of cases with sugammadex administration where cumulative sugammadex dose  $< 200\text{mg}$  OR  $\leq 3\text{mg/kg}$ 
  - Fixed cost of 200mg vial
  - Acknowledges dose rounding given small injection volumes
  - Encourages judicious use of NMBD to end with at least TOF = 2
  - Compliant with FDA approved dosing and ASA 2023 guideline
- Threshold – 90%
  - Acknowledges CICV, unexpected discontinuation of surgery, safety margin for individualized dosing

# Pregnall et al (Vanderbilt)



# Measure Specification - Detail

- Time Period: Anes start to Anes stop/end
- Inclusion:
  - **Is valid case**
  - **Sugammadex administered**
  - Adult patients?
- Exclusion: No weight documented, ASA 6
- Attribution options
  - **Provider(s) signed into case at time of last sugammadex administration**
  - Provider signed into case at time of last NMBD administration
  - Only include case if a and b are the same

# Sugammadex Dosing Vote

1 vote/ site

Build as is, Build with modification, Do not build

Plurality wins

Coordinating center will review all votes after meeting to ensure no duplication





**Measure Updates**

# CARD 04 and CARD 05 - replacing CARD 02 and 03

**Reviewed by Dr. Andrea Reidy - Washington University, 2021**

## Plan

- CARD 04 - outcome measure that identifies patients that had elevated troponin levels (>99th percentile upper reference limit) within 72 hours postoperatively.
- CARD 05 Percentage of *high cardiac risk* cases with significantly elevated postoperative troponin levels (> 99th percentile URL)
- Sites must submit upper and lower reference limits for each cardiac troponin assay used by their site in order to participate with this measure.
- Reference limit data can be submitted to the MPOG Coordinating Center as part of the standard lab extract. For sites that are unable to add to the extract, MPOG will distribute a survey to collect the upper and lower reference limits on an annual basis.

## Reality

- Unable to modify the extract to reliably incorporate reference limits.
- Unable to develop process to reliably obtain reference limits manually

**Pausing work on these until we can reliably get reference information using automated methods**



# Hyperglycemia Measure Updates Released!

## **GLU 01:**

- Assigned a 'pass' criteria for cases that were administered insulin SQ within 120 minutes before the high glucose value (this change was already applied to GLU 03/05)
- Added exclusion for cases with measure duration  $\leq 30$  minutes
- Score changes were significant at some sites:  $>15\%$  improvement!

## **GLU 03 & GLU 05:**

- Added exclusion for cases with measure duration  $\leq 30$  minutes
- Score changes were minimal:  $\pm 1\%$



**Thank You!**