**ASPIRE Measures Provider Guide: 2020**

* **TOC 01: Patients who undergo a procedure under anesthesia in which a permanent intraoperative anesthesia staff change occurred.**

* **TOC 02: All patients receiving anesthesia care and admitted to PACU receive a formal transfer of care.**
* **TOC 03: All patients receiving anesthesia care and admitted to ICU receive a formal transfer of care.**
* **Pul 1: Median tidal volume < 10ml/kg IBW, ET & PPV PIP>6 on vent.**

**Excludes LMA.**

* **Pul 2: Median tidal volume < 8ml/kg IBW, ET & PPV PIP>6 on vent.**

**Excludes LMA**

* **Pul 3: Percentage of cases in which Positive End Expiratory Pressure (PEEP) is used.**

**(as defined by median PEEP ≥ 2)**

* **Temp 1: Use of active warming (forced air) or core or peripheral site temp measure > 36.0 C within 30 minutes of anesthesia end.**

**Includes GA or Neuraxial cases but NOT MAC cases. Cases 60 minutes or longer.**

* **Temp 2: Core Temp source documented in assessment between case start and stop.**

**ONLY GA cases.**

* **Temp 3: Temp between 36.0/ 96.8 is documented within 30 minutes immediately before or 15 minutes after anesthesia end time.**

**All GA and Neuraxial cases 60 minutes or longer.**

* **Temp 4: Percentage of patients < 18 years old who undergo any procedure greater than 30 minutes and have a Median core/near core body temperature > 36C (96.8F)**
* **PONV 01**: **Patient receives combination therapy consisting of at least two prophylactic pharmacologic anti-emetic agents of different classes preoperatively or intraoperatively.**

1. **Older receiving inhalational GA with 3 or more risk factors for PONV**

* **PONV 02: Patient receives combination therapy consisting of at least two prophylactic pharmacologic anti-emetic agents of different classes preoperatively or intraoperatively.**

**Ages 3-17 receiving inhalational GA with 2 or more risk factors for PONV**

* **PONV 03: Percentage of patients, regardless of age, who undergo a procedure and have a documented nausea/emesis occurrence posto0peratively or receive a rescue antiemetic during the immediate postoperative period.**
* **Tran 1: HGB/HCT (any value) documented 90 minutes prior to transfusion and/or HGB/HCT 8/24 within 36 hours of the transfusion.**

**{FYI always redraw a HGB/HCT (Hemi-q, i-stat) in-between units and document results, in EPIC, prior to hanging a subsequent unit. No waiting for recirculation needed.}**

* **Tran 2: HGB/HCT <10/30 post transfusion.**

**Considerations: All hemoglobin/hematocrit lab values drawn after the last transfusion and within 18 hours after anesthesia end will be evaluated. If the lowest of these values is ≤10g/dL or ≤30%, the case will pass.**

**If the hemoglobin or hematocrit at the time of transfusion (within 90 minutes before) is less than or equal to 8/24, the case will pass.**

**No hematocrit or hemoglobin checked within 18 hours of anesthesia end the case will pass.**

* **NMB 1: TO4 of at least ¼ must be *documented in the* *flowsheet* after last dose of NDMR. This includes a defasciculating dose before succinylcholine.**

* **NMB 2: Reversal agent given before extubation.**
* **BP 1: MAP < 55 for cumulative time of 20 min.**
* **BP 2: Keep BP gaps < 10 minutes. ALL cases.**

* **BP 3: MAP <65 for cumulative time of 15 minutes.**
* **AKI: Non- Urology Procedures. Creatinine not > 1.5 times within 7 days or 0.3 mg/dl within 48 hours.**
* **Card 2: Trop ≤ 0.6 within 72 hours from anesthesia end. ALL Cases.**
* **Card 3: Trop ≤ 0.6 within 72 hours from anesthesia end in high cardiac risk patients.**
* **Med 1: Absence of Narcan & Flumazenil. ALL Cases.**
* **Sus 01: cases with mean fresh gas flow equal to, or less than 3L/min, during administration of halogenated hydrocarbons and/or nitrous oxide.**
* **Gluc 1: Glucose > 200, recheck glucose within 90 min or insulin given. ALL Cases.**

**Exclusion of Note: Outpatient procedures of less than 4-hour duration.**

* **Gluc 2: Glucose < 60 with dextrose given or recheck within 90 min.**

**ALL Cases**

* **Gluc 3: Glucose >200mg/dL with administration of insulin or glucose recheck within 90 minutes of original glucose measurement. This measure spans from preop through PACU.**
* **Gluc 4: Glucose <60 with administration of dextrose containing solution or glucose recheck within 90 minutes of original glucose measurement. This measure spans from preop through PACU.**
* **ABX 1: Percentage of cesarean deliveries with documentation of antibiotic administration initiated within one hour before surgical incision. For Vancomycin, 120 minutes before measure end time**.
* **Mort 1: Percentage of patients with in-hospital death reported within 30 days after procedure. Institutional measure - individual provider attribution not applicable**

**Please refer to:** <https://mpog.org/quality/our-measures/>

**Site has all the specifications and references used to determine measure requirements**