

Module 1 Downloading and Accessing the MPOG Application Suite



Downloading and Accessing the MPOG Application Suite

- Obtain administrative rights from site's IT department. You will need this level of access to download the MPOG application to your workstation.
- Go to the **Downloads Page** on the MPOG website to download the app suite



Contact: support@mpog.zendesk.com

OUTCOMES GRO

• Follow steps to download the suite to your computer. The MPOG Application Suite should automatically open. *Some tools may display in gray.



 Next, set up a connection to your local MPOG database by clicking: 'Edit Connections'



 Click "Add New" if there are no profiles available for connection. Otherwise, choose the appropriate connection- 'LOCAL,' 'Whichever site you plan to map for...' Click "Edit Selected":

Connection Pr	rofile Manager	
You can use this databases.	window to adjust how the MPOG application suite connects to the variou	us MPOG
Selected Profile:	Local	•
Actions:	Edit Selected Delete Selected Add New	Add Existing
	Apply and Restart	Cancel



- Fill in the server address in both the top and middle sections of this form.
- Ask the MPOG technical lead at your site for the server connection.
- In the Config Connection section, select 'Import Manager' and make sure the database name is listed as MPOG_Import_Manager.
- Click OK

😪 Edit Connection Profile	
Profile Name	Local
Main Connection (Required)
Server	
Database	MPOG_MAS
Trusted Authentication	(Uses your Windows credientials)
Username	
Password	
Config Connection (Opt	ional)
Choose your configuration	type:
Import Manager (Rec	ommended for new hospitals)
Legacy Epic	
U Legacy	
Server	
Database	MPOG_Import_Manager
Trusted Authentication	(Uses your Windows credientials)
Username	
Password	
Research Connection (C	ptional)
Server	
Database	MPOG_Research
Trusted Authentication	(Uses your Windows credientials)
O Username	
Password	
	OK Cancel



 The 'Connection Profile Manager' form will repopulate as follows. Click "Apply and Restart."

Existing

 The MPOG Application should run again and open as follows. *More tools should have turned blue. If not, contact your site technical team to update your database roles.

🐐 MPOG Application Suite Edit Connections About Connection: import manager OUTCOMES GROUP **Case Viewer Concept Browser** Variable Mapping STS Import NSQIP Import PHI Scrubber **Data Diagnostics Case Validation** Transfer to MPOG Central Batch MRN Lookup **Content Synchronization Research Data Cleaning** Location Mapping **Provider Contacts** Case Viewer V2 (Beta) Import Manager Assistant



- Click on 'Variable Mapping' to test connection. A utility that looks like this should open up.
- If yes, the MPOG Application is ready to go!

	MPOG Configuration						
Variable Mappin	ng Administration Totali	ng Observation Entry					
Mapping Type:	Administration Type			-			
Organization:	All Assigned Organizati	ons (Merged)			Direction:	Normal	
94 (3) (4 (19)(3)							
Display Mode:	All Variables			*	Options:	Auto Search On	Auto Select On
Search Filter:					Search Filter	white	
ID	Org	Name	Times Used Mapped As	Туре	Man	Name	ID Type
FLO-1120100(/	Multiple	FiO2	11,305,175 Variable Excluded from Imp	ort Meta	map		
FLO-1121000(/	Multiple	SpO2	10,815,067 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	ETCO2	10,105,037 Variable Excluded from Imp	ort Meta	Unmap		
FLO-1120100(/	Multiple	02	8,803,598 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	Tidal Volume Exp	7,160,671 Variable Excluded from Im	ort Meta	Exclude		
FLO-1121000(/	Multiple	PIP Observed	7,141,726 Variable Excluded from Imp	ort Meta			
FLO-1121000(/	Multiple	PEEP	3,886,678 Variable Excluded from Im	ort Meta			
FLO-1120100(/	Multiple	Sevoflurane	3,830,019 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	Air	2,835,786 Variable Excluded from Imp	ort Meta			
FLO-1121000(/	Multiple	Arterial Line MAP	1,967,259 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	Desflurane	1,864,289 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	Isoflurane	1,613,381 Variable Excluded from Imp	ort Meta			
FLO-10444 /	Multiple	Press Support	1,401,688 Variable Excluded from Imp	ort Meta			
FLO-10 /	Multiple	SpO2	1,280,006 Variable Excluded from Imp	ort Meta			
FLO-1121000(/	Multiple	ET N2O	681,928 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	CVP	522,897 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	N2O	454,719 Variable Excluded from Imp	ort Meta			
FLO-1121000(/	Multiple	PAP (Mean)	338,881 Variable Excluded from Imp	ort Meta			
FLO-1121820 /	Multiple	cco	337,234 Variable Excluded from Imp	ort Meta			
ERX-11150 /	Multiple	propofol (DIPRIVAN) 10mg/ml injection	311,232 PROPOFOL	Medicatio			
ERX-4318 /	Multiple	lactated ringers infusion	281,923 LACTATED RINGERS	Fluids In			
FLO-250026 /	Multiple	O2 Flow Rate (L/min)	255,456 Variable Excluded from Imp	ort Meta			
ERX-3037 /	Multiple	fentaNYL (PF) (SUBLIMAZE) 50 mcg/mL injection	189,945 FENTANYL	Medicatio			
ERX-27838 /	Multiple	0.9% NaCl infusion 1,000 ml	181,085 SALINE 0.9%	Fluids In			
FLO-1121000(/	Multiple	Auxillary O2	144,648 Variable Excluded from Imp	ort Meta			
FLO-61 /	Multiple	Urine	138,845 URINE OUTPUT	Fluids Ou			
FLO-1120100(/	Multiple	FiO2	113,864 Unknown Concept	Meta			
FLO-1121000(/	Multiple	SpO2	112,698 Unknown Concept	Meta			
FLO-1120100(H	HFWY BROWNSTOWN	ETCO2	110,880 Variable Excluded from Imp	ort Meta			
FLO-1120100(/	Multiple	02	110,794 Unknown Concept	Meta			
FLO-1120100(/	Multiple	ETCO2	107,426 Unknown Concept	Meta	Examine		
FLO 1121000/ J	M. Jahola	DEED	107 D10 University Connect	Make	4		





Module 2 Concept Browser



Concept Browser

- Contains a comprehensive list of all available MPOG Concepts.
- Allows you to search the dictionary of MPOG concepts to identify an appropriate MPOG concept for mapping purposes.
- For more information on variable mapping, please refer to Module 3: Variable Mapping.

Access Concept Browser in the MPOG Suite



- The MPOG Application Suite will open to the 'Concept Browser' webpage, where you can select specific search criteria
- To search the dictionary of all MPOG concept types, use the 'Query String' field and maintain default settings in all other fields

-Please select a	a concept type and query string
Concept type	[All concept types]
Query string	e.g. id:concept ID# or any text
Count Mode	Concept occurrences
Hide inactiv Submit	/e concepts



Each MPOG Concept ID includes:

- **Concept ID Number**: The MPOG Concept ID number associated with each particular concept.
- Concept Name: Names associated with the concept (including ICD-9 & ICD-10 Codes)
- **Concept Type**: Indicates the location details associated with the concept (i.e. Access Location, Intraoperative Events, Interventions, and Observations).
- **Concept Occurrences**: Displays the number of concept occurrences that have been submitted to MPOG as well as the, number of unique patients, or number of unique cases associated with each MPOG Concept ID depending on the count mode selected in the last search field.

ID	Concept Name	Concept Type	# of Occurrences
50140	Noninvasive blood pressure cuff location	Intraoperative Events, Interventions, and Observations	4,169,149

- Based on your search criteria, scan the results for the most appropriate MPOG concept for mapping purposes.
- You can utilize the 'Query String' field to identify a desired MPOG concept:
 - Type the name associated with the MPOG concept you are attempting to identify.
 - For example, you may want to find an MPOG concept ID for an interscalene block. Simply type 'interscalene' into the query string field as shown below

–Please se	elect a concept type and query string						
Concept	pe [All concept types] -						
Query st	ring interscalene						
Count M	ode Concept occurrences						
🗷 Hide ir	nactive concepts						
Submit	2						
ID	Concept Name	Concept Type	# of Occurrences				
50384	Regional - Interscalene Block	e Block Observations					
50034	Neuraxial - Vertebral interspace final (Unspecified)	Intraoperative Events, Interventions, and Observations	1,185				
50147	Neuraxial - Spinal vertebral interspace final	Intraoperative Events, Interventions, and Observations	159,863				
50155	Epidural vertebral interspace final	Intraoperative Events, Interventions, and Observations	278,557				
100011	Internal Jugular	Access Location	225,187				



To search by MPOG ID, type "id:" prior the number

–Please sele	ect a concept type and query string—						
Concept ty	pe [All concept types]	[All concept types]					
Query strir	ng id:50099						
Count Mod	de Concept occurrence s	Concept occurrence s					
🗷 Hide ina	✓ Hide inactive concepts						
Submit							
ID	Concept Name	Concept Type	# of Occurrences				
50099	Intubation - Nasal approach note	Intraoperative Events, Interventions, and Observations	110,133				



- You may also use the 'Concept type' search field in addition to the 'Query string' when searching for a matching MPOG concept.
- For example, you may want to find an intraoperative fluid such as dextrose or a dextrose mixture. To search all available intraoperative MPOG fluid concepts, select the Intraoperative Fluids concept type.





- Enter 'dextrose' into the query string and select 'submit.'
- A group of intraoperative fluids that include the word 'dextrose' will display in the menu below.





- Once you have identified an appropriate MPOG Concept to match the AIMS variable, you can utilize the MPOG Concept ID for mapping purposes.
- Logging into the MPOG website will also allow you to view other institutions that have used the concepts available in Concept Browser.
- This is helpful for research purposes to know which institutions are using a given concept. To obtain an MPOG website username and password, please contact the Coordinating Center (<u>support@mpog.zendesk.com</u>)





Module 3 Variable Mapping Utility



Variable Mapping

- The Variable Mapping utility provides sites the ability to map electronic health record (EHR) variables to standardized MPOG concepts.
- This process of standardizing terms across multiple EHRs and across multiple sites allows for common data elements to be used for research or quality improvement purposes.





Variable Mapping

- Once a variable is mapped, source data from the local EHR will always map to the corresponding MPOG concept automatically unless mapping is modified.
- The MPOG Variable Mapping utility simplifies the mapping process by allowing MPOG clinical reviewers to select data variables (source concepts) and match them to corresponding MPOG concepts



Variable Mapping

- Important Note: Institutional data needs to be pulled into the MPOG database before mapping can begin.
- Typically, sites begin mapping with a small amount of data (one day to one week) and then load more data after mapping is started.
- Usually sites will automate the process of applying mappings after one month of data is loaded and mapped in the database.
- Automatic updates are typically scheduled to occur each night.



Pre-Mapping

- For new **Epic** sites, a select amount of variables will map automatically prior to beginning manual mapping.
- Your site technical team will be asked to run a script to complete the premapping.
- Once the script is run, pre-mapped variables will show as 'green' in the variable mapping utility.

ID	Org	Name	Times Used	Mapped As	Туре	
FLO-40100000	OHSU	Airway Resp Rate	9,472	Respiratory Rate Actual from EtC	Physiolog	\wedge
FLO-40100000	OHSU	ETCO2	9,405	End Tidal CO2 (mmHg)	Physioloc	
FLO-40100000	OHSU	SpO2	9,335	SpO2 %	Physiolog	
FLO-40100000	OHSU	Pulse - Plethysmograph	9,333	Physical Exam - Pulse Rate	Preop	
FLO-40100000	OHSU	Pmean/PAW	9,262	Mean Inspiratory Pressure	Physiolog	
FLO-40100000	OHSU	max Pos Airway P	9,229	Unknown Concept	Meta	
FLO-40100001	OHSU	ETO2	9,216	Oxygen Exp %	Physiolog	
FLO-40100001	OHSU	FIO2	9,216	Oxygen Insp %	Physiolog	
FLO-40100000	OHSU	Heart Rate	9,047	Unknown Concept	Meta	
FLO-40100000	OHSU	PeeP	8,910	Unknown Concept	Meta	
FLO-11200163	OHSU	O2 FR Avance (Total Liters	8,263	Flows Oxygen (L/Min)	Physiolog	
FLO-40100000	OHSU	Circuit O2	8,048	Unknown Concept	Meta	
FLO-40100000	OHSU	Vent Mode	8,048	Ventilator Mode	Physiolog	
FLO-40100000	OHSU	RR freq/Min	7,541	Ventilator Respiratory Rate Actu	Physiolog	
FLO-40100015	OHSU	MV (L/min)	7,519	Minute ventilation	Physiolog	
FLO-40100000	OHSU	Vte	7,496	Tidal Volume actual	Physiolog	
FLO-40100000	OHSU	ST-II	7,357	ST Lead II	Physiolog	
FLO-40100000	OHSU	Vt	6,946	Tidal Volume Set	Physiolog	



Using the Variable Mapper

• Open the MPOG Suite and select "Variable Mapping"

🍕 MPOG Application Suite	– 🗆 X			
MULTICENTER PERIOPER OUTCOMES GROUP	Edit Connections About Connection: import manager			
Case Viewer	Concept Browser			
Variable Mapping	STS Import Disabled due to insufficient rights or missing connection.			
NSQIP Import Disabled due to insufficient rights or missing connection.	PHI Scrubber			
Data Diagnostics	Case Validation			
Transfer to MPOG Central	Batch MRN Lookup			
Content Synchronization	Research Data Cleaning Disabled due to insufficient rights or miseling connection.			
Location Mapping	Provider Contacts			
Import Manager Assistant	Case Viewer V2 (Beta)			

- The 'Variable Mapping' utility should open and look similar to the image below. The left side of the utility will list your institution (AIMS) variables and the right side will list MPOG concepts available to map to.
- You will also notice four fields within the MPOG Configuration that allow you to filter by category. These include Mapping Type, Organization, Display Mode, and Search Filter.

ର୍କ୍ତ୍ରେ MPOG Con	figuration							- 🗆 X
Mapping Type:					~			Import Export
Organization:	University	/ of Michigan Ann Ai	rbor		~	Direction:	Normal	Ŷ
Display Mode:	All Variables		\$	Options:	Auto Search On	Auto Select On		
Search Filter:						Search Filter:		
	AIN	AS Va	riables				MPOG Co	ncepts
ID	Org	Name	Times Used	Mapped As	Туре	Map	Name	ID Type
						Unmap		
						Exclude		
						Examine		



- Mapping Type: This is a general mapping category that can be further filtered to subcategories
- **Organization:** This field will be populated with your institutional name.
- **Display Mode:** This feature allows you to filter by 'All Variables,' 'Unmapped Variables,' or 'Mapped Variables.'
- Search Filter: This function allows you to search for a specific AIMS variable.
 - Can search by original variable ID using prefix "ID" (example "ID:1448")

ේ	MPOG	Configuration
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Mapping Type:		-
Organization:	University of Michigan Ann Arbor	v
Display Mode:	All Variables	~
Search Filter:		

*There may be additional sites in the dropdown menu for multi-site institutions in which you are assigned (i.e. Henry Ford Detroit, Henry Ford West Bloomfield). For institutions with multiple sites, It is recommended that mapping is completed under the Merged Organization.

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- To utilize the category filter option, click on the 'Mapping Type' field. A dropdown menu will appear and you may select from the various options
- Select from the desired category from the 'Mapping Type' dropdown menu, as shown below

Mapping Type:				Piccola I
Organization: Display Mode:	Administration Route Administration Type Admission Type Ethnicity	Direction: Options:	Normal Auto Search On	Auto Select On
Search Filter:	Gender Lab Type Observation Detail Type	Search Filt	ter:	
ID	Procedure Service Race	Туре Мар	Name	ID Type
	Staff Type Units of Measurement (Administration)	Unmap)	
		Exclude	2	



• In the example below, we have selected the Mapping Type 'Race.'

🍕 MPOG Configuration								
Mapping Type:	Race	×						
Organization:	University of Michigan App Arbor							
Display Mode:	All Variables	~						
Search Filter:								

 Once 'Race' has been selected from the dropdown menu, you will notice a variety of race related variables populate the window as shown below. You may notice lines of existing variables on the left side of the screen if variables have been populated or mapped by the MPOG Coordinating Center technical team or premapping has been completed



- Click the 'Race' variable you wish to map. Once the row has been selected, it will turn blue and a corresponding "guess" MPOG concept will appear in the 'Description' field on the right side. If several options appear, you can click on one of the bold terms above the MPOG concept window to narrow the search. If the desired concept does not appear, use the search filter on the right side to modify your search
- In this example, we have selected 'American Indian/Alaska Native.'

	Race				~					Expo
rganization:	University of	f Michigan Ann Arbor			~	Direction:	Normal			
isplay Mode:	All Variable	5			v	Options:	Auto Search On	A	uto Selec	: On
earch Filter:						Search Filter:	Native alaska indian			
							A			
ID	Org	Name	Times Used	Mapped As	Туре	Map	Name	ID	Туре	ı
w i	University of I	W	10,068	White	Race		American Indian or Alaska Native	304	Race	6
3	University of I	В	1,182	Black	Race					
4 1	University of I	Н	430	Unknown	Race	Unmap				
0	University of I	0	338	Other	Race					
ו ט	University of I	U	329	Unknown	Race	Exclude				
Α	University of I	A	55	Unknown Concept	Meta					
2	University of I	D	47	Unknown	Race					
<no given<="" id="" td=""><td>University of I</td><td><no given="" id=""></no></td><td>14</td><td>Unknown</td><td>Race</td><td>-</td><td></td><td></td><td></td><td></td></no>	University of I	<no given="" id=""></no>	14	Unknown	Race	-				
2	University of I	P	6	Unknown Concept	Meta	-				



- Click the MPOG Variable you wish to map to. This will highlight it in blue.
- Click "Map". Your variable is now mapped to an MPOG Concept and will turn green. You can also map by double clicking the MPOG concept. The "Mapped As" column will be updated to reflect this change

📽 MPOG Cor	nfiguration								- 0	×
Mapping Type:	Race				¥				Ex	port
Organization:	University of	of Michigan Ann Arbor			Ŷ	Direction:	Normal			~
Display Mode:	All Variable	S			¥	Options:	Auto Search On	Aut	o Select On	
Search Filter:						Search Filter:	Native alaska indian			
							Α			
ID	Org	Name	Times Used	Mapped As	Туре	Map	Name	ID	Туре	
W	University of	NW	10,068	White	Race		American Indian or Alaska Native	304	Race	
В	University of	NB	1,182	Black	Race					
Н	University of	МН	430	Unknown	Race	Unmap				
0	University of	0	338	Other	Race					
U	University of	NU	329	Unknown	Race	Exclude				
A	University of	A	55	Unknown Concept	Meta					
D	University of	ND	47	Unknown	Race					



 You may also filter by 'Display Mode' to visualize 'All Variables,' 'Unmapped Variables Only,' or 'Mapped Variables' to focus mapping efforts. By selecting from the dropdown menu, only the variables within the selected category will appear.

MPOG Configuration

Mapping Type:		~					
Organization:	University o	of Michigan Ann Ar	rbor			\sim	
Display Mode:	Display Mode: All Variables v						
Search Filter:	All Variable	All Variables					
Unmapped Variables Only							
	Mapped Va	riables Only					
ID	Org	Name		Times Used	Mapped As		Туре



Additional Functions within Variable Mapping

Examine

 The 'Examine' function allows you to view the Epic variable in greater detail by values from different cases this variable has been documented. This is beneficial when you desire additional context related to the variable you wish to map.

ID	Org	Name	Times Used	Mapped As	Туре	Мар
FLO-40100000	OHSU	Airway Resp Rate	9,472	Respiratory Rate Actual from Etc	Physiolog 🔿	· · ·
FLO-40100000	OHSU	ETCO2	9,405	End Tidal CO2 (mmHg)	Physiolog	
FLO-40100000	OHSU	SpO2	9,335	SpO2 %	Physiolog	Unmap
FLO-40100000	OHSU	Pulse - Plethysmograph	9,333	Physical Exam - Pulse Rate	Preop	
FLO-40100000	OHSU	Pmean/PAW	9,262	Mean Inspiratory Pressure	Physiolog	Exclude
FLO-40100000	OHSU	max Pos Airway P	9,229	Unknown Concept	Meta	
FLO-40100001	OHSU	ETO2	9,216	Oxygen Exp %	Physiolog	
FLO-40100001	OHSU	FIO2	9,216	Oxygen Insp %	Physiolog	
FLO-4010000(OHSU	Heart Rate	9,047	Unknown Concept	Meta	
FLO-40100000	OHSU	PeeP	8,910	Unknown Concept	Meta	
FLO-11200163	OHSU	O2 FR Avance (Total Liters	8,263	Flows Oxygen (L/Min)	Physiolog	
FLO-40100000	OHSU	Circuit O2	8,048	Unknown Concept	Meta	
FLO-40100000	OHSU	Vent Mode	8,048	Ventilator Mode	Physiolog	
FLO-40100000	OHSU	RR freq/Min	7,541	Ventilator Respiratory Rate Actu	Physiolog	
FLO-40100015	OHSU	MV (L/min)	7,519	Minute ventilation	Physiolog	
FLO-40100000	OHSU	Vte	7,496	Tidal Volume actual	Physiolog	
FLO-40100000	OHSU	ST-II	7,357	ST Lead II	Physiolog	
FLO-40100000	OHSU	Vt	6,946	Tidal Volume Set	Physiolog	Examine
FLO_40100001	0000	CT V	6 704	Halmanna Canaant	Mata	



Examine

- Highlight the variable row you wish to examine and click "Examine".
- A window will open containing detailed information related to the selected variable.

🥵 MPOG Co	infiguration			🤹 Variable I	🗞 Variable Details — 🗆 🗙								
Mapping Type	Observatio	on Type		A Please	note the data below may	not							
Organization:	University	of Michigan Ann Arbor		be a re	presentative sample.								
Display Mode	AU 17 - 11	LANK		e_Name	ObservationTime	EnteredTime	WasDeleted	WasUser_Entered	WasUser_Entry_Expected	ObsValu	JE		
Display Mode.	All variables			Oxygen Exp	10/29/2017 12:44:42 PM	10/29/2017 12:44:43 PM				18	1		
Search Filter:				Oxygen Exp	10/29/2017 12:48:46 PM	10/29/2017 12:48:48 PM				20			
	÷			Oxygen Exp	10/29/2017 12:59:57 PM	10/29/2017 12:59:58 PM				29	7		
				Oxygen Exp	10/29/2017 1:03:30 PM	10/29/2017 1:03:33 PM				27			
				Oxygen Exp	10/29/2017 12:53:51 PM	10/29/2017 12:53:52 PM				26			
ID	Org	Name	Times I	Oxygen Exp	10/29/2017 12:57:55 PM	10/29/2017 12:57:56 PM				28	7		
201424	University of	f Monitor IETCO2 Resp	949	Oxygen Exp	10/29/2017 12:52:50 PM	10/29/2017 12:52:51 PM				26			
201408	University of	f Monitor lOxygen Insp	94	Oxygen Exp	10/29/2017 12:56:54 PM	10/29/2017 12:56:56 PM				27			
1448	University of	f NFF- End Tidal CO2	94	Oxygen Exp	10/29/2017 1:07:34 PM	10/29/2017 1:07:38 PM				28			
201405	University of	f Monitor Nitrous Insp	944	Oxygen Exp	10/29/2017 1:11:38 PM	10/29/2017 1:11:41 PM				28			
201407	University of	f Monitor Oxygen Exp	94	Oxygen Exp	10/29/2017 1:01:59 PM	10/29/2017 1:02:00 PM				28			
201404	University of	f Monitor Nitrous Exp	94	Oxygen Exp	10/29/2017 1:05:32 PM	10/29/2017 1:05:36 PM				28			
42603	University of	f Vent Flows O2	918	Oxygen Exp	10/29/2017 1:00:58 PM	10/29/2017 1:00:59 PM				29			
15	University of	f NFF-CV Pulse	90	Oxygen Exp	10/29/2017 1:04:31 PM	10/29/2017 1:04:34 PM				27			
308	University of	f NFF-CV SpO2	904	Oxygen Exp	10/29/2017 1:09:36 PM	10/29/2017 1:09:40 PM				28			
9066	University of	f CBD - SpO2 HR	894	<						>			
450	University of	f NFF-Pul FiO2 %	88	6,864 Ventilat	or FiO2 % Measured P	hysioloc							
457	University of	f NFF-Pul Vent PIP	884	4,712 Peak ins	piratory pressure P	hysioloc							
651	University of	f NFF-Pul Vent PEEP	88	2,105 Positive	End Expiratory Pressure P	hysiolog							
201020	University of	f Vent Mean Airway press	u 868	8,590 Mean Ir	spiratory Pressure P	hysioloc							
201028	University of	f Vent Rate Setting	86	1,569 Ventilat	or Respiratory Rate Set P	hysioloc							
201032	University of	f Vent vent mode	860	0,404 Ventilat	or Mode P	hysiolog							
7686	University of	f NFF-Pul Inspired CO2	838	8,969 Inspired	CO2 % P	'hysiolo <u>c</u>							
504	University of	f NFF- RR	69	5,978 Ventilat	or Respiratory Rate Actu P	hysioloc Examine							
201015	University of	E Vant Minuta valuma /1/m		200 Minuto	vontilation D	burialar 1							



Unmap

• The 'Unmap' feature allows you to unmap incorrectly mapped variables at any time. Simply select and highlight the variable in the MPOG side, and click 'Unmap'. The variable will then turn white.

ID C	Drg	Name	Times Used	Mapped As	Туре		Мар
FLO-40100000 O	HSU	Airway Resp Rate	9,472	Respiratory Rate Actual from EtC	Physiolog	\sim	
FLO-40100000 O	HSU	etco2	9,405	End Tidal CO2 (mmHg)	Physiolog		
FLO-40100000 O	HSU	SpO2	9,335	SpO2 %	Physiolog		Unmap
FLO-40100000 O	HSU	Pulse - Plethysmograph	9,333	Physical Exam - Pulse Rate	Preop		
FLO-40100000 O	HSU	Pmean/PAW	9,262	Mean Inspiratory Pressure	Physiolog		Exclude
FLO-40100000 O	HSU	max Pos Airway P	9,229	Unknown Concept	Meta		
FLO-40100001 O	HSU	eto2	9,216	Oxygen Exp %	Physiolog		
FLO-40100001 O	HSU	FIO2	9,216	Oxygen Insp %	Physiolog		
FLO-4010000(O	HSU	Heart Rate	9,047	Unknown Concept	Meta		
FLO-40100000 O	HSU	PeeP	8,910	Unknown Concept	Meta		
FLO-1120016E O	HSU	O2 FR Avance (Total Liters	8,263	Flows Oxygen (L/Min)	Physiolog		
FLO-4010000C O	HSU	Circuit O2	8,048	Unknown Concept	Meta		
FLO-4010000C O	HSU	Vent Mode	8,048	Ventilator Mode	Physiolog		
FLO-4010000C O	HSU	RR freq/Min	7,541	Ventilator Respiratory Rate Actu	Physiolog		
FLO-40100015 O	HSU	MV (L/min)	7,519	Minute ventilation	Physiolog		
FLO-40100000 O	HSU	Vte	7,496	Tidal Volume actual	Physiolog		
FLO-40100000 O	HSU	ST-II	7,357	ST Lead II	Physiolog		
FLO-40100000 O	HSU	Vt	6,946	Tidal Volume Set	Physiolog		Examine
FLO 40100001 O	LICH	CT V	6 704	Halmanna Canaant	Mada	\sim	



Exclude

- The 'Exclude' function allows you to exclude selected variables from mapping.
- The Coordinating Center will advise you on which variables are appropriate for exclusion.
- Extreme caution must be applied when excluding variables from mapping, especially within the 'Administration Route' mapping type, as ALL data associated with 'route' will be excluded

÷							
	ID	Org	Name	Times Used	Mapped As	Туре	Мар
	FLO-40100000	OHSU	Airway Resp Rate	9,472	Respiratory Rate Actual from EtC	Physiolog ^	
	FLO-40100000	OHSU	ETCO2	9,405	End Tidal CO2 (mmHg)	Physiolog	
	FLO-40100000	OHSU	SpO2	9,335	SpO2 %	Physiolog	Unmap
ſ	FLO-40100000	OHSU	Pulse - Plethysmograph	9,333	Physical Exam - Pulse Rate	Preop	
ſ	FLO-40100000	OHSU	Pmean/PAW	9,262	Mean Inspiratory Pressure	Physiolog	Exclude
	FLO-40100000	OHSU	max Pos Airway P	9,229	Unknown Concept	Meta	
	FLO-40100001	OHSU	ETO2	9,216	Oxygen Exp %	Physiolog	
	FLO-40100001	OHSU	FIO2	9,216	Oxygen Insp %	Physiolog	
	FLO-40100000	OHSU	Heart Rate	9,047	Unknown Concept	Meta	
	FLO-40100000	OHSU	PeeP	8,910	Unknown Concept	Meta	
	FLO-11200163	OHSU	O2 FR Avance (Total Liters	8,263	Flows Oxygen (L/Min)	Physiolog	
l	FLO-40100000	OHSU	Circuit O2	8,048	Unknown Concept	Meta	
	FLO-40100000	OHSU	Vent Mode	8,048	Ventilator Mode	Physiolog	
	FLO-40100000	OHSU	RR freq/Min	7,541	Ventilator Respiratory Rate Actu	Physiolog	
	FLO-40100015	OHSU	MV (L/min)	7,519	Minute ventilation	Physiolog	
	FLO-40100000	OHSU	Vte	7,496	Tidal Volume actual	Physiolog	
	FLO-40100000	OHSU	ST-II	7,357	ST Lead II	Physiolog	
	FLO-40100000	OHSU	Vt	6,946	Tidal Volume Set	Physiolog	Examine
I	FLO 40100001	OUCU	CT V	6 704	Halmanna Cananat	Mada	



Exclude

- Highlight the variable(s) you wish to exclude from mapping and click "Exclude"
- Excluded variables will turn pink.

ID	Org	Name	Times Used	Mapped As	Type	
29134	University of	Taped at @	134	Intubation Endotracheal Tube Se	Intraop N	~
47910	University of	Blade/View	129	Intubation view note	Intraop N	
38178	University of	Concerns	124	Airway - Laryngeal Mask Airway	Intraop N	
7758	University of	Stopped indicator	124	Variable Excluded from Import	Meta	
8559	University of	Paresthesia	120	Neuraxial insertion parasthesia y	Intraop N	
8563	University of	Aspiration	118	Neuraxial insertion aspiration of	Intraop N	
15814	University of	Skin Depth	116	Epidural catheter withdrawn to c	Intraop N	
36891	University of	Position Confirmed by	110	Categorized note - Positioning	Intraop N	
15905	University of	Sensory Level	108	Neuraxial technique - Bilateral S	Intraop N	
8570	University of	Test Dose	108	Epidural test dose administered	Intraop N	
8595	University of	Catheter status	106	Epidural anesthesia catheter pla-	Intraop N	
40011	University of	Type of Medication	92	Misc – Medication Free Text Enti	Intraop N	
47914	University of	Cricoid Pressure	89	Intubation - cricoid pressure app	Intraop N	
36542	University of	Nurse's Name	86	Variable Excluded from Import	Meta	
36543	University of	Pain Score	86	Pain Score (Generic)	Physiolog	
36544	University of	Repositioned	86	Positioning - Patient position	Intraop N	
44130	University of	Motor Blockade	82	Regional - Motor response to st	Intraop N	
5976	University of	Attempts	82	Neuraxial technique number of	Intraop N	
26560	University of	Sancon Loval	02	Nouravial technique - Rilatoral C	Intraon N	V

MULTICENTER PERIOPERATIVE OUTCOMES GROUP

Category Exclusion Rules

Can Exclude	Do Not Exclude
Administration Type	Administration Route
Observation Type	Units of Administration
Observation Type Detail	Room Type
Lab Type	Procedure Type



Auto Search

• While auto search is ON, the variable name that is selected on the left hand side will auto populate in the search filter on the right side. Clicking the auto search button will turn this function OFF and will not auto populate the search filter.

og MPOG Co	nfiguration								- 0	×	
Mapping Type:	Observation Type University of Michigan Ann Arbor Unmapped Variables Only				-	Direction: Options:				Export	
Organization:							Normal				
Display Mode:					*		Auto Search On Auto Select /		Auto Select Or	Dn	
Search Filter:						Search Filter:	score	-			
							Discharges Score				
ID	Org	Name	Times Used	Mapped As	Type	Map	Name	ID	Type		
304011390	University of	Total Score	5.585	Unknown Concept	Meta		FLACC Score: Legs	3098	Physiologic		
304011388	University of	Risks Score	5.585	Unknown Concept	Meta		FLACC Score: Activity	3099	Physiologic	2	
304011387	University of	Orders Score	5.585	Unknown Concept	Meta	Unmap	FLACC Score: Cry	3101	Physiologic	ologic	
304011385	University of	LDAs Score	5.585	Unknown Concept	Meta		FLACC Score: Consolability	3104	Physiologic	ê l	
304011389	University of	Wounds Score	5,585	Unknown Concept	Meta	Exclude	Braden Score: Friction and Shear	3106	Physiologic	ologic	
304011383	University of Assessments Score		5,585	Unknown Concept	Meta		Braden Score: Sensory Perception	3107	107 Physiologic		
304011382	University of	Admissions/Transfers Sco	5.585	Unknown Concept	Meta		Braden Score: Mobility	3108	Physiologic		
304011381	University of	ADLs Score	5.585	Unknown Concept	Meta		Braden Score: Moisture	3109	Physiologic	â j	
304011386	University of Medications Score		5,585	Unknown Concept	Meta	Meta	Braden Score: Activity	3111	Physiologic		
304011384	University of	Discharges Score	5,585	Unknown Concept	Meta		Braden Score: Nutrition	3112	Physiologic	8 1	
30411682634	University of	Cardiac WDL	5,571	Unknown Concept	Meta		RAMSAY Sedation Score	3126	Physiologic	§ 1	
30411683963	University of	Peripheral Neurovascular	5.543	Unknown Concept	Meta		Modified Early Warning Sign Scor	3127	Physiologic	2	
40900	University of	Perfus 8000 Device Event	5,515	Unknown Concept	Meta		Systemic Inflammatory Response	50092	Intraop Not	tes	
30400400555	University of	Probe Placed On (Pulse O	5,194	Unknown Concept	Meta	8	National Early Warning Score (NE	50093	Intraop Not	tes	
30411682586	University of	Breath Sounds	5,189	Unknown Concept	Meta		Fall Risk Score	50094	Intraop Not	tes	
661176	University of	Speech	5.163	Unknown Concept	Meta		Phase II Discharge Score	50104	Intraop Not	tes	
3040112059	University of	All anterior fields	5,139	Unknown Concept	Meta		Patient Discharge Score	50111	Intraop Not	tes	
661932	University of	Skin Integrity	4,895	Unknown Concept	Meta	Examine	Obstetrics - Apgar score checked	50359	Intraop Not	tes	
660037	I had an enter of	Ounil Cine Laft	1041	Linhanna Consent	Adada.	×	Obstatales Association & minute	60260	Interne Mat		


Auto Select

• After mapping a variable on the left hand side, having auto select ON will automatically jump to the next variable. To turn this function OFF, click the "auto select" button.

Con MPOG Co	nfiguration								– 🗆 ×
Mapping Type:	Observatio	on Type		÷		1			Export
Organization	University	of Michigan Ann Arbor		-		Direction:	Normal		
Display Mode:	Unmappe	d Variables Only		÷		Options:	Auto Search On	A	uto Select On
earch Filter:	discharge					Search Filter:	discharge phase		
							Phase I Discharge Criteria	Met	
ID	Org	Name	Times Used	Mapped As	Ту	Map	Name	ID	Туре
304011384	University of	Discharges Score	5,585	Patient Discharge Score	Intr o		Phase II Discharge Score	50104	Intraop Notes
1072004280	University of	Phase I Discharge Criteria Met	3,442	Unknown Concept	Mei				
1071705010	University of	Discharge Prescription Reviewed	1,648	Unknown Concept	Met	Unmap			
1072004281	University of	Phase II Discharge Criteria	484	Unknown Concept	Mei				
3040120038	University of	Team Anticipated Discharge Date	453	Unknown Concept	Mei	Exclude			
30402266378	University of	CM Daily Plan and Discharge Plan	444	Unknown Concept	Mei				
30402266136	University of	CM Discharge Disposition	375	Unknown Concept	Met				
30401300217	University of	Discharge Disposition of Belongin-	256	Unknown Concept	Mei				
3040221043	University of	CM Barriers to Discharge	252	Unknown Concept	Mei				
30402266353;	University of	Equipment Needed At Discharge	178	Unknown Concept	Mei				
304022666215	University of	CM Discharge Risks	113	Unknown Concept	Met				
3040150387	University of	Anticipated Discharge Disposition	97	Unknown Concept	Met				
5220	University of	Anticipated Equipment Needs at D	88	Unknown Concept	Met				
3040150385	University of	Is this patient cleared for safe horr	71	Unknown Concept	Mei				
3040080031	University of	Functional Status/Discharge/Follow	66	Unknown Concept	Met				
30402246	University of	Priority Discharge	36	Unknown Concept	Met				
3040260113	University of	Priority Discharge (Read Only)	36	Unknown Concept	Met				
3040031684	University of	Patient Exercise = Patient will be in	34	Unknown Concept	Mei	Examine			
2040021784	I Initerative of	Dationst will be cleared by DT fee en	34	Heleneum Concept	Mai	CONTRACTOR .			





• You can export all variables and their mappings to an excel spreadsheet through the export button

Cor MPOG Cor	nfiguration						- 0 X			
Mapping Type:			٣				Export			
Organization:	University of Michigan Ann Ar	bor	-	Direction:	Normal		~			
Display Mode:	All Variables		*	Options:	Auto Search On	A	uto Select On			
Search Filter:				Search Filter:						
ID	Ora Name	Timer Und Manual &r	Turne		Name	10	Turne			
10	org Name	Times Osed Mapped As	iype	Мар	over 11	10	iype			
				Unmap						
				Exclude						
				Examine						
				CARTINE						
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								OUTCO	MESC	POU
								UUICO	IVIES U	RUL

Contact: support@mpog.zendesk.com

Tips for Mapping Success

- Focus on mapping variables with high row counts ('Times Used').
- Once you have mapped the majority of high row count variables, you can begin to focus your attention to mapping the lower row count variables that may be relevant for anesthesia research or quality purposes.

			\frown	
ID	Org	Name	Times Used	Mapped As
1600000310	University of	Heart Rate Source	14,656	Unknown Concept
40877	University of	Perfus Stockert Air Needl	13,003	Unknown Concept
40876	University of	Perfus Stockert Air Needl	13,003	Unknown Concept
40886	University of	Perfus Stockert CP RPM	13,003	Unknown Concept
40890	University of	Perfus Stockert LV Vent(m	13,002	Unknown Concept
40895	University of	Perfus Stockert Pump Suc	13,002	Unknown Concept
40889	University of	Perfus Stockert LV Vent R	13,002	Unknown Concept
40894	University of	Perfus Stockert Pump Suc	13,002	Unknown Concept
16011780	University of	BP Method	10,304	Unknown Concept
3040103232	University of	Pulse Oximetry Type	9,689	Unknown Concept



 Utilizing the MPOG Concept Browser utility will facilitate efficient identification of corresponding MPOG concepts. Please reference *Module 2: Concept Browser* for more information

Please select a concept type and quer	string	
Concept type		
[All concept types]	•	
Query string		
propofol		
Count Mode		
Concept occurrences *		
Hide inactive concepts		
Submit		

ID	Concept Name	Concept Type	# of Occurrences
10377	PROPOFOL	Intraoperative Medications (Administered Mixtures)	16,421,110
10378	PROPOFOL W/ REMIFENTANIL 10 MG/ML + 5 MCG/ML	Intraoperative Medications (Administered Mixtures)	247
10453	PROPOFOL W/ KETAMINE 10 MG/ML + 1 MG/ML	Intraoperative Medications (Administered Mixtures)	6,602
10572	PROPOFOL W/ KETAMINE 10MG/ML + UNSPECIFIED KETAMINE	Intraoperative Medications (Administered Mixtures)	342
10577	PROPOFOL W/ KETAMINE 10 MG/ML + 0.5 MG/ML	Intraoperative Medications (Administered Mixtures)	1,148
10578	PROPOFOL W/ KETAMINE 10 MG/ML + 1.5 MG/ML	Intraoperative Medications (Administered Mixtures)	21
10579	PROPOFOL W/ KETAMINE 10 MG/ML + 2 MG/ML	Intraoperative Medications (Administered Mixtures)	711
10597	PROPOFOL W/ ALFENTANIL 10 MG/ML + 50 MCG/ML	Intraoperative Medications (Administered Mixtures)	863



Groups to Map First

DO NOT EXCLUDE IN ANY OF THESE CATEGORIES

- Race
- Gender
- Ethnicity
- Procedure Service
- Admission Type
- Staff Type



Groups to Map Last

- Lab Type
 - Map variables that are important to surgical/anesthesia care i.e. Hgb/Hct/Creatinine/Troponin/Glucose. Focus on mapping labs that MPOG has concepts for an exclude the rest
- Administration Type
 - This category includes IN's and OUT's such as fluids, medications, blood products, EBL and urine output.
 - Exclude "volume (mL)" medication variables.
 - **Exclude all physiologic and gas flow variables from this mapping group



Groups to Map Last

- Administration Route
 - Do Not Exclude in this category map unspecified concepts to "Other"
- Units of Measurement Administration
 - Do not exclude in this category leave those variables without a corresponding MPOG concept unmapped
- Observation Detail Type
 - These are observation Details. Map Observation Type first.
- Observation Type (procedure notes)



Variable Type Mapping Guide- EPIC Sites Only

Variable Type	Description	Notes
LEV-* variables	Timed Event Notes	Most reliable when looking for timing of events (i.e. intubation/extubation)
EAP/HLX-* variables	Procedure Note Documentation	Provides the details associated with a procedure: size, number of attempts etc. Observed time is not always populated. If no time associated with EAP/HLX note, map related LEV note as well.



Variable Type Mapping Guide - EPIC Sites Only

Variable Type	Description	Notes
FLO-* variables	Data from flowsheet	Data from flowsheet. LDA documentation corresponding to placement, removal etc. Usually duplicate doc
CT-* variables	Case Tracking Variables	Exclude these if multiple variables show for event times. *If you do not have an LEV variable for a certain concept you will need to include the CT variable.
AT-* variables	Attestations	Exclude or leave unmapped



Airway Variable Mapping

- ETT/LMA/Intubation/Extubation, regional and neuraxial
- Map LEV/HLX/EAP variables
 - Exclude FLO variables associated with these concepts <u>if</u> both an HLX/EAP and LEV variable exists.
- If duplicate variables exist for critical times such as anesthesia start/end, surgery start/end, In room times, etc.- can exclude the CT variables as these come from nursing. If there are only nursing (CT) variables, keep them and map (Phase I, Phase II in/out times, etc.). Bottom line: Anesthesia documentation is preferred but adopt nursing documentation if anesthesia documentation is not available for critical times/events.



How Mapping Translates to MPOG Case Viewer

The **'type'** of MPOG concept you map to an AIMS variable will determine where the data within that variable will display in Case Viewer.

- Those mapped to 'Physiologic' and 'Intraop Note' type concepts will populate in the Chart section of case viewer
- Those mapped to 'Preop' type concepts will populate in the H&P section of case viewer
- Those mapped to 'Outcomes' type concepts will populate in the Outcomes section of case viewer

Name	ID	Туре
BP Combined Invasive Unspecified Site 3	3706	Physiologic
BP Combined Aorta	3707	Physiologic
BP Combined Invasive Unspecified Site 5	3708	Physiologic
Unmapped Intraoperative Note Concept	50000	Intraop Notes
AACD Time Room Ready Date/Time	50001	Intraop Notes
AACD Anesthesia Start Date/Time Respiratory - Oral steroids required	50002 71230	Intraop Notes Preop
Respiratory - Prior intubation for pulmonary f	71235	Preop
Respiratory - Most recent exacerbation (Date)	71240	Preop
Unmapped Outcome Concept	90000	Outcomes
Intraoperative observed quality assurance eve	90001	Outcomes
Postoperative visit patient pain score	90002	Outcomes





Module 4 Location Mapping



Location Mapping

- Provides sites the ability to establish a hierarchy of facilities and procedure room locations as they exist within the health system
- Allows providers to filter performance data by operating locations
- Provides the opportunity to filter and group locations that may have similar case types, though not physically located in the same building.



Location Mapping

- Example for use: a site may have several outpatient surgery centers and would want to "group" the data from these locations to examine performance at outpatient facilities.
- Mapping of locations is usually completed when a site initially joins MPOG but should be maintained as new rooms are added.

↓			\oslash
Age	>=		
Emergent	=		-
BMI Classification	=		-
Height (cm)	<=		
ASA Status	=		-
Surgical Service	=		-
Sex	=		-
Date of Service	<=		
Date of Service	>=		
Quarter	=		-
Case	=		
Location	=		-
Month	=	Not in a reporting group Royal Oak	
AimsStaffld	=	Royal Oak - Hospital Only West Bloomfield	
Admission Type	=		-
Year	=		-
Age	<		

MULTICENTER PERIOPERATIVE OUTCOMES GROUP

Access 'Location Mapping' on the MPOG Suite



MULTICENTER PERIOPERATIVE OUTCOMES GROUP

Select 'Add Location' from the bottom of the display box.

M Location Mapping	contracts have much in a fact arm of the and then do have been by	
Unmapped Rooms	Room Hierarchy	
(Room Name Not Available) • ANAISYS-01 • ANAISYS-02 • ANAISYS-03 • ANAISYS-04 • ANAISYS-05 • ANAISYS-04 • ANAISYS-05 • ANAISYS-04 • ANAISYS-05 • ANAISYS-04 • ANMOB-01 • ANMOB-02 • ANMOB-03 • ANMOB-04 • ANMOB-05 • ANITRO-01 • ANTIRO-02 • ANTIRO-03 • ANTIRO-05 •		Location Tags
Map to No location selected	Add Location Rename Location Delete Location Unmap Location	View Tag Members



A text box will appear. Type the name of the primary site at your organization. For example: University of Michigan Health System, all other sites will be categorized under the primary location. Click "Ok."





The new location will populate the middle portion of the display box to begin the Room Hierarchy process

Unmapped Rooms	Room Hierarchy	
U-OFFS MPU U-OFFS RA2 U-OFFS RAD U-OR 01 U-OR 02 U-OR 03 U-OR 04 U-OR 05 U-OR 06 U-OR 07 U-OR 06 U-OR 07 U-OR 10 U-OR 11 U-OR 11 U-OR 13 U-OR 13 U-OR 15 U-OR 15 U-OR 17 •	University of Michigan Health System	Location Tags
Map to No location selected	Add Location Rename Location Delete Location Unman Location	View Tag Members



If your organization has multiple campuses or hospitals, continue to add those locations by selecting "Add Location."

As new locations are added, you can 'click and drag' to list secondary sites under primary locations.

For example, 'Ann Arbor Main Campus' is currently listed as another primary location but belongs under the Health System title.

M Location Mapping	Contraction of the second	
Unmapped Rooms	Room Hierarchy	
(Room Name Not Available) ANAISYS-01 ANAISYS-02 ANAISYS-03 ANAISYS-04 ANAISYS-05 ANAISYS-04 ANAISYS-05 ANAISYS-04 ANAISYS-05 ANAISYS-05 ANMOB-01 ANMOB-02 ANMOB-03 ANMOB-04 ANMOB-05 ANMOB-06 ANMOB-07 ANTIRO-01 ANTIRO-03 ANTIRO-04 ANTIRO-05 ANTIRO-06	Ann Arbor Main Campus University of Michigan Health System	Location Tags Facility type - Acute care hospital Facility type - Attached ambulatory surgery center Facility type - Office-based anesthesia OB-GYN - Labor and delivery OB-GYN - Obsteric operating room Other - Hybrid operating room Other - Mixed use operating room Other - Mixed use operating room Other - Mixed use operating room Other - Outpatient surgery room Other - Pediatric Radiology - Interventional radiology Radiology - MRI Recovery - ICU Recovery - ICU Service specific room - Cardiac operating room Service specific room - Endoscow
Map to Ann Arbor Main Campus	Add Location Rename Location Delete Location Unmap Location	View Tag Members

Clicking on 'Ann Arbor Main Campus' and dragging it over the 'University of Michigan Health System' title will indent the secondary site to be listed under the primary

Location Mapping		
Unmapped Rooms	Room Hierarchy	
(Room Name Not Available) ANAISYS-01 ANAISYS-02 ANAISYS-03 ANAISYS-03 ANAISYS-05 ANAISYS-05 ANAISYS-05 ANAISYS-TUB ANMOB-01 ANMOB-02 ANMOB-03 ANMOB-03 ANMOB-04 ANMOB-05 ANMOB-06 ANMOB-06 ANMOB-07 ANTIRO-01 ANTIRO-01 ANTIRO-03 ANTIRO-03 ANTIRO-05 ANTIRO-06	✓ University of Michigan Health System Ann Arbor Main Campus	Location Tags
Map to University of Michigan Healt	Add Location Rename Location Delete Location Unmap Location	View Tag Members



Continue to sort by clicking and dragging titles to properly reflect sites and locations at your facility. See example below.

Unmapped Rooms	Room Hierarchy	
(Room Name Not Available) ANAISYS-01 ANAISYS-02 ANAISYS-03 ANAISYS-04 ANAISYS-04 ANAISYS-05 ANAISYS-TUB ANMOB-01 ANMOB-01 ANMOB-02 ANMOB-04 ANMOB-04 ANMOB-05 ANMOB-05 ANMOB-07 ANTIRO-01 ANTIRO-01 ANTIRO-02 ANTIRO-03 ANTIRO-04 ANTIRO-05 ANTIRO-05 ANTIRO-06	 University of Michigan Health System Ann Arbor Main Campus C.S. Mott Children's Hospital Cancer Center CVC Main Hospital Women's Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center Northville Surgery Center 	Location Tags



Click on the site in the middle of the screen that you would like to assign operating rooms. In the example below, 'CVC' is selected.

M Location Mapping	and the second design of the s	
Unmapped Rooms	Room Hierarchy	
CVC OS EP3 CVC OS EP4 CVC-CTH 01 CVC-CTH 02 CVC-CTH 03 CVC-CTH 04 CVC-CTH 05 CVC-CTH W1 CVC-CTH W1 CVC-CTH W2 CVC-EP 02 CVC-EP 02 CVC-EP 03 CVC-EP 03 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP PROC CVC-EP PROC CVCOFFS 01 CVCOFFS 02	 University of Michigan Health System Ann Arbor Main Campus C.S. Mott Children's Hospital Cancer Center CVC Main Hospital Women's Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center Northville Surgery Center 	Location Tags
Map to CVC	Add Location Rename Location Delete Location Unmap Location	View Tag Members



Select operating rooms from the left side of the screen. You can map one room at a time or select a group of rooms by holding the 'shift' key down and selecting all rooms applicable. It is also possible to click and drag rooms to sites within the hierarchy.

Unmapped Rooms	Room Hierarchy	
C-B2A C-B2B C-OR 01 CVC OS EP1 CVC OS EP2 CVC OS EP2 CVC OS EP3 CVC OS EP4 CVC-CTH 01 CVC-CTH 02 CVC-CTH 04 CVC-CTH 05 CVC-CTH W1 CVC-CTH W2 CVC-CTH W2 CVC-EP 03 CVC-EP 04 CVC-EP 05 CVC-EP 05CR	 University of Michigan Health System Ann Arbor Main Campus C.S. Mott Children's Hospital Cancer Center CVC Main Hospital Women's Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center Northville Surgery Center 	Location Tags



Now select the "Map to CVC' button in the bottom left corner. All of the selected anesthetizing locations will move under the CVC title in the middle portion of the display box.

Unmapped Rooms	Room Hierarchy	
C-82A C-82A C-82B C-0R 01 CVC 0S EP1 CVC 0S EP2 CVC 0S EP3 CVC 0S EP4 CVC-CTH 01 CVC-CTH 02 CVC-CTH 04 CVC-CTH 05 CVC-CTH 04 CVC-CTP 01 CVC-EP 01 CVC-EP 03 CVC-EP 03 CVC-EP 03 CVC-EP 05 CVC-EP	 ✓ University of Michigan Health System ✓ Ann Arbor Main Campus C.S. Mott Children's Hospital Cancer Center CVC Main Hospital Women's Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center Northville Surgery Center 	Location Tags Facility type - Acute care hospital Facility type - Attached ambulatory surgery center Facility type - Office-based anesthesia B-GNY - Labor and delivery B-GYN - Labor and delivery B-GYN - Obstetric operating room Other - Hybrid operating room Other - Minor procedure room Other - Mixed use operating room Other - Offiste anesthesia Other - Outpatient surgery room Other - Pediatric Radiology - MRI Recovery - ICU Service specific room - Electrophysiology/Cardiac cath Service specific room - Electrophysiology/Cardiac cath
Man to CVC	Add Location Rename Location Delate Location Upman Location	View Tag Members



Continue mapping all unmapped rooms from the left column to the appropriate locations in the middle 'Room Hierarchy' column. **Epic Sites:** 'Unspecified Room' will remain in the unmapped rooms category and should not be mapped to a location as the 'unspecified room' designation is typically used across a variety of sites within the organization.

Unmapped Rooms	Room Hierarchy	
C-B2A C-B2B C-OR 01 CVC-EP 01 CVC-EP 02 CVC-EP 03 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 06 CVC-EP PRO CVC-EP PRO CVC-F5 01 CVCOFF5 02 CVCOFF5 02 CVCOFF5 03 CVC-OR 04 CVC-OR 05	 University of Michigan Health System Ann Arbor Main Campus CS. Mott Children's Hospital Cancer Center CVC CVC OS EP1 CVC OS EP2 CVC OS EP3 CVC OS EP4 CVC-CTH 01 CVC-CTH 02 CVC-CTH 03 CVC-CTH 04 CVC-CTH W1 CVC-CTH W1 CVC-CTH W2 Main Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center 	Location Tags Facility type - Acute care hospital Facility type - Attached ambulatory surgery center Facility type - Office-based anesthesia DB-GYN - Obstetric operating room Other - Hybrid operating room Other - Mixed use operating room Other - Mixed use operating room Other - Offsite anesthesia Other - Offsite anesthesia Other - Offsite anesthesia Other - Offsite anesthesia Other - Pediatric Radiology - Interventional radiology Radiology - MRI Recovery - PACU Service specific room - Cardiac operating room Service specific room - Electrophysiology/Cardiac cath Service specific room - Endoscopy
Map to CVC	Add Location Rename Location Delete Location Unmap Location	View Tag Members



Each room can now be 'tagged' to indicate the type of room or type of procedures performed in each OR/procedure area. Select a room from the 'Room Hierarchy' list.

M Location Mapping	and the second state of th	
Unmapped Rooms	Room Hierarchy	
C-B2A C-B2B C-OR 01 CVC-EP 01 CVC-EP 02 CVC-EP 03 CVC-EP 03 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP PRO CVC-EP PRO CVC-EP PRO CVC-EP PRO CVC-FF 01 CVCOFFS 01 CVCOFFS 02 CVCOFFS 03 CVC-OR 02 CVC-OR 02 CVC-OR 03 CVC-OR 05 ▼	 ✓ University of Michigan Health System ✓ Ann Arbor Main Campus C.S. Mott Children's Hospital Cancer Center ✓ CVC CVC OS EP1 CVC OS EP2 CVC OS EP3 CVC OC FD4 CVC-CTH 01 CVC-CTH 02 CVC-CTH 03 CVC-CTH 04 CVC-CTH 05 CVC-CTH W1 CVC-CTH W2 Main Hospital Women's Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center 	Location Tags
Map to CVC	Add Location Rename Location Delete Location Unmap Location	View Tag Members



While the room is highlighted, click the appropriate 'location tags' from the right side of the display box to designate what procedures occur in the selected room.

In the example below, the tags of '*Facility type- Acute care hospital*' and '*Service specific room- Electrophysiology/Cardiac Cath*' are applied to the CVC OS EP1 room. Use Ctrl + Shift to select multiple rooms at a time

M Location Mapping	and a second distance for the second	
Unmapped Rooms	Room Hierarchy	
C-B2A C-B2B C-OR 01 CVC-EP 01 CVC-EP 02 CVC-EP 03 CVC-EP 03 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 05 CVC-EP 06 CVC-EP 07 CVC-EP 07 CVC-EP 08 CVC-EP 08 CVC-OR 01 CVC-OR 02 CVC-OR 03 CVC-OR 05 VC-OR 05 VC-OR 05 VC-OR 05 VC-OR 05 VC-OR 05 VC-OR 08 CVC-OR 08 CVC-	 University of Michigan Health System Ann Arbor Main Campus C.S. Mott Children's Hospital Cancer Center CVC CVC OS EP1 CVC OS EP2 CVC OS EP3 CVC OS EP4 CVC-CTH 01 CVC-CTH 02 CVC-CTH 03 CVC-CTH 04 CVC-CTH 04 CVC-CTH W1 CVC-CTH W1 CVC-CTH W2 Main Hospital Women's Hospital East Ann Arbor Ambulatory Surgery Center Kellogg Eye Center 	Location Tags
Map to CVC	Add Location Rename Location Delete Location Unmap Location	View Tag Members



When assigning tags to 'Parent' Locations, all 'Children' listed under the 'Parent' inherit that tag(s). When the 'child' location is selected, tags attributed through the 'parent' will appear greyed out. This can only be changed by changing the 'parent' location tag





Location Mapping Tips

- Right click on any Location Tag to see rooms assigned to the tag.
- Continue assigning the proper location tags for all rooms in the room hierarchy. There is no need to save any changes to room locations or tags. **Any changes made are automatically saved**.
- To update the location mappings, the MPOG/ASPIRE programmer for your site will need to run the following script: EXEC Locations_UpdateCaseLocations. It is recommended that this script be programmed to run automatically on a schedule basis before diagnostics to capture any mapping changes that may occur in the future.
- <u>Note:</u> It is possible to rename, delete, or unmap locations as necessary using the buttons at the bottom of the display box. However, if an operating room or location is no longer in use, it is best to leave mapped as historical data will still rely upon this hierarchy.





Module 5 Case Viewer



Case Viewer Overview

The MPOG Case Viewer application displays individual case data just as an anesthesia information management system (AIMS) would display.





Last Updated: 10/15/2020

MPOG Case Viewer



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View Multiple Cases from Case List

Enter a list of MPOG Case IDs in the box, one per line, and click "Import". A case will open.





Using the Case List

- Arrows appear along the bottom of the left hand column to scroll between cases. If a case number is known (ex: you want to go to case 50 of 100), use the text field to type the desired case number.
- When scrolling through cases using this feature, any 'Sections' opened in the case view (see 'Sections' slide) will remain open
- User will remain in the same section of the chart when scrolling between cases





Search by Filter

Browse for Cases

Find cases by using one or more of the filters below.

- Age
- CPT Code
- MPOG Concept ID
- **Opened Date Range**
- Primary Surgical Service
- Procedure Text
- Registry Data
- Surgery Date Range

Filter Shortcuts

Case Type	Patient Age
CABG	Pediatric
Knee Arthroplasty	Adult
Labor Epidural	

Recently Opened Date of Surgery February 2020 Today January 2020 Yesterday December 2019 This Week Year to Date Last Week February 2020 January 2020

- Age- Search for cases by specific age ranges
- **CPT code-** Search for cases that include a specific CPT code.
- **MPOG Concept ID** Lists all cases that have a specific MPOG ۲ concept documented.
 - Without other filters, searching by MPOG Concept ID may take awhile. Consider adding a date range filter.
- **Opened Date Range-** This will generate a list of cases that the user previously opened during that time period.
- **Primary Surgical Service** allows users to search by the primary ۲ surgical service associated with each case
- **Procedure Text-** Searches for matches in the Procedure Text field associated with a case (eg. CABG)
- **Registry Data-** Lists all cases that include data from MSQC, NSQIP, • STS Adult Cardiac, STS Congenital Heart and STS General Thoracic
- Surgery Date Range- Find cases that occurred between specific dates.



Search By Filter

Browse for Case	s e or more of the fill	ters below	
Age CPT Code MPOG Concept ID Opened Date Rang Primary Surgical Se Procedure Text Registry Data Surgery Date Rang	ge ervice	lets below.	
Filter Shortcuts Case Type CABG Knee Arthroplasty Labor Epidural	Patient Age Pediatric Adult	Date of Surgery February 2020 January 2020 December 2019 Year to Date	Recently Opened Today Yesterday This Week Last Week February 2020 January 2020

Multiple filters may be applied at a time to narrow down a case list. The "Search Results" pane will automatically update a list of cases as filters are added.




Search Results					×
Case Time	Service	Patient Age	Procedure	Institution	

No results found. Please try another search.

To search cases by filter, click the filter name and supply any necessary information.

For example, to find a General Surgery case from September, click "Primary Surgical Service" and choose General from the dropdown box.



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ch Results				
e Time	Service	Patient Age	Procedure	
3-2019 09:15	General	r uticiti rige		
6-2019 14:30	General			
5-2019 08:45	General			
6-2019 09:45	General			
4-2019 08:15	General			
	_			
4-2019 16:42	General			
5-2019 09:20	General			
5-2019 15:00	General			
5-2019 11:00	General			
5-2019 09:00	General			
6-2019 10:45	General			
6-2019 08:15	General			
6-2019 07:15	General			
7-2019 15:45	General			
7-2019 08:00	General			
3-2019 07:45	General			
8-2019 18:05	General			
9-2019 12:25	General			
6-2019 13:15	General			
5-2019 07:15	General			
6-2019 08:45	General			
3-2019 14:10	General			
4-2019 12:45	General			
	-			
8-2019 09:15	General			
6-2019 11:40	General			
3-2019 12:45	General			
4-2019 09:45	General			
3-2019 09:15	General			
C 2010 10 15	C 1			
0-2019 10:45	General			
0 2010 15 15	Constal			
9-2019 15:15	General			
5 2010 07 15	C 1			
5-2019 07:15	General			
6 2019 17:05	General			
0-2019 08:30	General			
0-2019 11:05	General			
7 2010 17:00	Ganaral			
6-2019 17:00	General			
4-2019 21:50	General			
4-2019/20:40	General			
4-2010 15:15	General			
A-2019 10:10	General			
5-2010 07:15	General			
5-2019 07:15	General			
2-2019 13:30	General			
2 2010 10.00	Ceneral			
7-2019 09-15	General			
	Ceneral			
7-2019 09:50	General			
5-2019 08:45	General			
2012 00.45	General			

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MPOG Case Viewer

Find a Specific Case Enter patient ID / case ID / MRN Case Search Chart Record Search Administrative H & P Outcomes Labs Primary Surgical Service Proceed Date Range Primary Surgical Service Procedure Text Registry Date Range Primary Surgical Service Procedure Text Registry Date Range Filter Shortcuts Case Type CABG Pediatric October Epidural Aduit September 2020 Yesterday Labor Epidural Aduit September 2020 Yesterday Labor Epidural Aduit September 2020		(No case loaded) 🗙	+		
Case Search Chart Record Search Administrative H & P Outcomes Labs Opened Date Range Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Patient Age October Epidural Adult September 2020 Knee Arthroplasty Adult September 2020 The Week Cator Epidural August 2020 This Week Labor Epidural August 2020 This Week Cater Case List Patient of MPOG Case IDs in the box below, each case on a separate line. Import	Fast Case Lookup	Find a Specific C	Case case ID / MRN		
Chart Record Search Administrative H & P Outcomes Labs Browse for Cases File cases by using one or more of the filters below. Age Choole MPOG Concept ID SOUD2_103777,10007 MPOG Concept ID Bolow and may time out. Consider adding date range filter. Opened Date Range Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Patient Age CABG Pediatric Case Type Patient Age Cabe Pediatric Case Type Patient Age Cabe Pediatric Case Type Cabe Pediatric Case Type Labor Epidural Adult September 2020 Yesterday This Week Last Week Last Week Case Case List Patie a list of MPOG Case IDs in the box below, each case on a separate line. Import	Case Search				
Record Search Age Administrative MPOG Concept ID 50002,103777,10007 × H & P Warning: Without other filters, searching by MPOG Concept ID can be slow and may time out. Consider adding date range filter. × Outcomes Opened Date Range Primary Surgical Service Procedure Text Registry Data Surgery Date Range Date of Surgery Recently Opened Filter Shortcuts Case Type Patient Age Date of Surgery Recently Opened CABG Pediatric October 2020 Today Yesterday Labor Epidural Adult September 2020 This Week Labor Epidural Adult September 2020 September 2020 September 2020 September 2020 September 2020 September 2020	Chart	Browse for Case	s e or more of the	filters below	
Administrative H & P MPOG Concept ID 50002, 103777, 10007] ★ Warning: Without other filters, searching by MPOG Concept ID can be slow and may time out. Consider adding date range filter. Copened Date Range Distribution Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Patient Age CABG Pediatric October 2020 Knee Arthroplasty Adult September 2020 Labor Epidural August 2020 This Week Labor Epidural August 2020 This Week Cother 2020 September 2020 September 2020 Vear to Date Last Week October 2020 September 2020 September 2020 September 2020 Vear to Date Last Week October 2020 September 2020 September 2020 September 2020 September 2020 September 2020 September 2020 <th>Record Search</th> <th>Age</th> <th></th> <th>inters below.</th> <th></th>	Record Search	Age		inters below.	
H & P Outcomes Labs Opened Date Range Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Patient Age CABG Rediatric CABG Rediatric CABG Rediatric CABG Rediatric CABG Rediatric CABG Rediatric Case Type CABG Recently Opened Today Yesterday Labor Epidural Case IDS in the box below, each case on a separate line. Import Import	Administrative	MPOG Concept ID		50002, 103777, 10007	×
Outcomes besidening Of who Content Consider adding date range filter. Labs Opened Date Range Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Case Type Patient Age Date of Surgery Recently Opened CABG Verify Adult September 2020 Verify Labor Epidural August 2020 This Week User to Date Labor Epidural Verify to Date Enter Case List Paste a list of MPOG Case IDs in the box below, each case on a separate line. Import Import	H & P			Warning: Without other filt	ers, at ID can
Labs Opened Date Range Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Patient Age CABG Pediatric October 2020 Today Knee Arthroplasty Adult Labor Epidural August 2020 This Week Vear to Date Last Week October 2020 September 2020 September 2020 Se	Outcomes			be slow and may time out.	Consider
Primary Surgical Service Procedure Text Registry Data Surgery Date Range Filter Shortcuts Case Type Patient Age CABG Pediatric October 2020 Today Knee Arthroplasty Adult September 2020 This Week Labor Epidural August 2020 This Week October 2020 September 2020 September 2020	Labs	Opened Date Rang	je	adding date runge inter.	
Filter Shortcuts Case Type Patient Age Date of Surgery Recently Opened CABG Pediatric October 2020 Today Knee Arthroplasty Adult September 2020 This Week Labor Epidural August 2020 This Week Last Week Vear to Date October 2020 September 2020 September 2020 Finter Case List Paste a list of MPOG Case IDs in the box below, each case on a separate line. Import		Primary Surgical Se Procedure Text Registry Data Surgery Date Rang	e		
Enter Case List Paste a list of MPOG Case IDs in the box below, each case on a separate line. Import		Filter Shortcuts Case Type CABG Knee Arthroplasty Labor Epidural	Patient Age Pediatric Adult	Date of Surgery October 2020 September 2020 August 2020 Year to Date	Recently Opened Today Yesterday This Week Last Week October 2020 September 2020
		Enter Case List Paste a list of MPOG C	ase IDs in the bo	x below, each case on a separa	ate line.

"MPOG Concept ID" filter allows for finding cases based on one or multiple concepts being present on the case

To search by multiple concept IDs, use a comma between IDs

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Opening a Case

 Double click on a case in the Search Results pane to open. Case viewer will open to the "Chart" Tab. PHI has been removed for the purposes of this guide.

Search Results					
Casa Tima	Constan	Detiret Ann	Descedure	Institution	
Case Time	Service	Patient Age	Procedure	Institution	
J9-23-2019 09:15	General				
9-20-2019 14:30	General				
9-25-2019 08:45	General				
9-26-2019 09:45	General				
9-24-2019 08:15	General				
9-24-2019 16:42	General				
9-25-2019 09:20	General				
9-25-2019 15:00	General				
9-25-2019 11:00	General				
9-25-2019 09:00	General				
9-26-2019 10:45	General				
0.26.2010 08:15	General				
0-26-2010 07:15	General				
5-20-2015 01:15	General				
0 27 2010 15.45	General				
5-27-2019 15:45	General				
0.07.0010.00.00	Connert				
9-27-2019 08:00	General				
9-23-2019 07:45	General				
9-18-2019 18:05	General				
9-19-2019 12:25	General				
9-26-2019 13:15	General				
9-25-2019 07:15	General				
9-26-2019 08:45	General				
9-23-2019 14:10	General				
09-24-2019 12:45	General				
9-28-2019 09:15	General				
9-26-2019 11:40	General				
9-23-2019 12:45	General				
9-24-2019 09:45	General				
9-23-2019 09:15	General				
9-26-2019 10:45	General				
9-19-2019 15:15	General				
-25-2019 07:15	General				
9-26-2019 17:05	General				
-26-2019 08-30	General				
9-26-2019 11:05	General				
20 2010 11.00	Centeror				
0.27.2010 17:00	General				
9-26-2019 21:20	General				
9-24-2019 20:40	General				
24-2015-2040	General				
.24.2010 15:15	General				
-24-2019 10:10	General				
25 2010 07:15	Conserval				
9-25-2019 07:15	General				
9-25-2019 10:30	General				
9-22-2019 13:30	General				
0.07.0010.00.15	Connect				
9-27-2019 09:15	General				
-27-2019 09:50	General				
9-25-2019 08:45	General				

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Chart View

MPOG Case Viewer



To return to the case list generated in the previous step, click "Case Search" in the upper left hand corner at any time while the case is open



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The MRN and MPOG Case ID can be copied using the 'Copy' button

Case ID			Сору	Patient IDs (Last Name Missing), (First Name Missing) (MRN Missing) Copy	
he as a	 	147	 e 1.1			





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Record Search Administrative H & P Outcomes	Collapse All Main Chart	Expa [-]
Labs	Times	[-]
	All Staff	[-]
I	Bolus Meds	[-]
	Bolus Inputs	[-]
	Outputs	[-]
	Physio	[-]

 For viewing on smaller laptop screens, the blue panel can be collapsed to save space by using the small arrow



o × _



Zoom In Pres	ets				
	^	Multiple Values			
200		Time	Mapped As	Value	Original Variable
		01-02-2020 06:49	Patient in Facility	Patient in Facility	Patient in Facility
100		01-02-2020 07:29	Patient Identified (ID Band)	Self;Identification Band	Patient ID Verified
0	. 1	01-02-2020 07:42	Anesthesia Machine Checked	Anesthesia Machine Checked	Anesthesia Machine Checked
		01-02-2020 07:42	Equipment Verified	Equipment verified	Equipment verified
	. 1	01-02-2020 07:53	Patient Identified	Patient identified, chart review	Patient identified, chart review
		01-02-2020 07:53	NPO Verification	NPO status confirmed to be so	NPO status confirmed to be
cu		01-02-2020 07:54	IV Access (Misc)	New Site - Left Hand 18 g, pla	Peripheral IV
		01-02-2020 08:09	NIBP Cuff Location	NIBP Cuff placed on R upper a	NIBP Cuff placed on
		01-02-2020 08:26	Anesthesia Start	Anesthesia Start	Anesthesia Start
		01-02-2020 08:31	Room Ready	Room Ready	Room Ready
		01-02-2020 08:36	Patient in Room	Patient In Room	Patient In Room
	. 1	01-02-2020 08:39	Pre-Induction Verification	PRIOR to Induction/Initiation of	PRIOR to Induction/Initiation
		01-02-2020 08:41	Preoxygenation/Denitrogenation	Patient preoxygenated using 8	Patient preoxygenated by
	. 1	01-02-2020 08:44	Mask Ventilation Difficulty (Scaled)	Mask ventilation Grade 1: Vent	Mask ventilation
		01-02-2020 08:44	Eye Protection Detail	Mask removed and Eyes taped	Mask removed and Eyes _
	~	01-02-2020 08:47	Intubation Approach	Orally intubated using Direct I	Orally intubated using _ on t
	~	01-02-2020 08:47	Intubation Tube	7.5 mm single-lumen cuffed E	mm ET tube taped @
		01-02-2020 08:47	Breath Sounds Auscultated	Equal bilateral breath sounds a	Equal bilateral breath sounds
		01-02-2020 08:47	Atraumatic	Atraumatic Laryngoscopy	Atraumatic Laryngoscopy
		01-02-2020 08:47	Induction End Window Snip	Anesthesia Induction End	Anesthesia Induction End
		01-02-2020 08:52	Patient Position	Patient positioned Supine	Patient positioned
	. 1	01-02-2020 08:52	Arm Position	Patient arms placed on arm bo	Patient arms
		01-02-2020 08:52	Table Turned (Misc)	Bed not turned	Bed
		01-02-2020 08:52	Temperature Probe Placed	Nasal temperature probe chec	_ temperature probe checke
		01-02-2020 08:53	Free Text Note	Head and neck maintained in	Free text
		01-02-2020 08:55	Peripheral Nerve Stimulator Placed	Peripheral nerve stimulator pla	Peripheral nerve stimulator p
		01-02-2020 09:18	Tourniquet Up	Tourniquet #1 Right Leg up @	Tourniquet #1 _ up @ _
		01-02-2020 09:18	Procedure Start	Surgical Incision	Surgical Incision
		01-02-2020 09:28	Convective Warmer	Forced air warmer (convective	Forced air warmer (convectiv
200 ml		01-02-2020 10:11	Tourniquet Down	Tourniquet #1 down (total elap	Tourniquet #1 down
	. 1	01-02-2020 10:30	Oral Airway Placed	Oral airway placed	Oral airway placed
Oral		01-02-2020 10:32	Local Infiltration	Local Anesthetic by Surgeon	Local Anesthetic by Surgeon
97.5		01-02-2020 11:00	Emergence (Misc)	Page Staff Anesthesiologist for	Page Staff Anesthesiologist fo
73	1	01-02-2020 11:00	Procedure End	Surgical Dressing Complete	Surgical Dressing Complete
		01-02-2020 11:06	Pharynx Suctioned	Pharynx suctioned	Pharynx suctioned
16		01-02-2020 11:10	Neuromuscular Function Intact	Neuromuscular function intact	Neuromuscular function inta
0		01-02-2020 11:10	Patient Obeys Commands	Patient obeys commands	Patient obeys commands
		01-02-2020 11:10	Patient Extubated	Patient extubated Awake	Patient extubated
1100.00		01-02-2020 11:12	Controlled Substance	Controlled Substances SECURI	Controlled Substances SECUR
120/68		01-02-2020 11:12	Patient Out of Room	Patient transported to PACU	Patient transported to _
les		01-02-2020 11:13	Patient in Recovery Room	Patient Admitted to PACU	Patient Admitted to PACU

Surgical Service Orthopedics

Outpatient

Admission

Room Name

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130 mg

Fast Case Lookup Case ID Copy Patient IDs (Last Name Missing), (First Name Missing) (MRN Missing) Copy Surgical Service Orthopedics Institution Age/Sex/Race Admission Outpatient Height/Weight 167.6 cm. 63.5 kg Time 01-02-2020 08:26 - 01-02-2020 11:17 (02 hours, 51 minutes) Room Name Case Search Procedure LEFT HARDWARE REMOVAL FFMU ASA 2 ASA Class RIGHT HARDWARE REMOVAL TIBIA Chart Collapse All Expand All Sections Zoom Out Zoom In Presets Record Search Show Reference Line Main Chart 08:30:00 09:00:00 09:30:00 Multiple Values Administrative BP Sys Cuff Mapped As Value **Original Variable** Time BP Dias Cuff H & P SpO2 Pulse Rate 01-02-2020 06:49 Patient in Facility Patient in Facility Patient in Facility End Tidal CO2 (mmHg) 01-02-2020 07:29 Patient Identified (ID Band) Self;Identification Band Patient ID Verified Outcomes 1-02-2020 07:42 Anesthesia Machine Checked Anesthesia Machine Checked Anesthesia Machine Checked [-] Preop Labs Times -02-2020 07:42 Equipment verified Equipment verified Equipment Verified 01-02-2020 07:53 Patient Identified Patient identified, chart review Patient identified, chart review In Room In Room 01-02-2020 07:53 NPO Verification NPO status confirmed to be sc NPO status confirmed to be Surgery Surgery 01-02-2020 07:54 New Site - Left Hand 18 g, pla Peripheral IV PACU IV Access (Misc) PACU 01-02-2020 08:09 NIBP Cuff placed on R upper a NIBP Cuff placed on _ All Staff Cuff Location [-] Staff Level - Anesthesia Attending #1 01-02-2020 08:26 Anesthesia Start Anesthesia Start Staff Level - Anesthesia Attending #2 Anesthesia Start Staff Level - Anesthesia CRNA #1 01-02-2020 08:31 Room Ready Room Ready Room Ready Staff Level - Anesthesia CRNA #2 01-02-2020 08:36 Patient In Room Patient In Room Patient in Roon Staff Level - Preop Nurse #1 01-02-2020 08:39 PRIOR to Induction/Initiation c PRIOR to Induction/Initiation of Pre-Induction Verification Staff Level - Surgical Attending/Procedu 01-02-2020 08:41 Patient preoxygenated using & Patient preoxygenated by ___ Preoxygenation/Denitrog Staff Level - Surgical Resident #1 Mask ventilation Grade 1: Vent Mask ventilation _ 01-02-2020 08-44 Staff Level - Surgical Resider apec Mask removed and Eves Staff Level - Surgical Reside The top of "Chart" view shows physiologic data in a graphical format ect | Orally intubated using _ on t Staff Level - Surgical Reside ed E' __ mm __ ET tube taped @ __ Bolus Meds -] CEFAZOLIN DEXAMETHASONE nds a Equal bilateral breath sounds A key is available to the left DIPHENHYDRAMINE Atraumatic Laryngoscopy FENTANYL Anesthesia Induction End This section is "frozen" meaning that as you scroll to see more data, KETAMINE Patient positioned _ KETOROLAC bc Patient arms LIDOCAINE Aqueous 4% Bed __ the graph will remain at the top MAGNESIUM SULFATE chec temperature probe checked MIDAZOLAM d in | Free text MORPHINE Use the [-] buttons to expand and collapse sections as needed r pla Peripheral nerve stimulator pla ONDANSETRON PROPOFOL @ Tourniquet #1 _ up @ _ ROCURONIUM Surgical Incision SUGAMMADEX 130 mg 01-02-2020 09:28 Convective Warmer Forced air warmer (convective) Forced air warmer (convective) 400 ml 200 ml Bolus Inputs - I LACTATED RINGERS 300 m 200 m 01-02-2020 10:11 Tourniquet Down Tourniquet #1 down (total elar Tourniquet #1 down 50 ml Outputs ESTIMATED BLOOD LOSS 01-02-2020 10:30 Oral Airway Placed Oral airway placed Oral airway placed Physio [-] Temperature - Skin 01-02-2020 10:32 Local Anesthetic by Surgeon Local Anesthetic by Surgeon Local Infiltration Temperature Route Dral 01-02-2020 11:00 Emergence (Misc) Page Staff Anesthesiologist for Page Staff Anesthesiologist for 97.5 Temp 1 - Unspecified Site 01-02-2020 11:00 Surgical Dressing Complete Surgical Dressing Complete Procedure End SpO2 Pulse Rate 01-02-2020 11:06 Pharynx suctioned Pharynx suctioned EKG Pulse Rate Pharynx Suctioned Respiratory Rate - Unspecified source 01-02-2020 11:10 Neuromuscular Function Intact Neuromuscular function intact Neuromuscular function intact Respiratory Rate Actual from EtCO2 trad 01-02-2020 11:10 Patient Obeys Commands Patient obeys commands Patient obeys commands 86 BP Sys Cuff 01-02-2020 11:10 Patient Extubated Patient extubated Awake Patient extubated BP Dias Cuff 01-02-2020 11:12 Controlled Substances SECURI Controlled Substances SECUR Controlled Substance BP Combined Non-invasive 120/68 **Table View** 01-02-2020 11:12 Patient Out of Room Patient transported to PACU Patient transported to 85 68 72 81 65 70 69 BP Mean Cuff 01-02-2020 11:13 Patient in Recovery Roon Patient Admitted to PACU Patient Admitted to PACU Preferences Pulse Pressure Variation

MPOG Case Viewer

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- Choosing "Show Reference Line" adds an adjustable horizontal line across the grid
- This can be adjusted by clicking moving up or down





🕏 MPOG Case Viev	wer			– a ×
Find a Case <u>Fast Case Lookup</u> Chart	X + Case ID Institution Time 09-01-2019 09:30 - 09-01-2019 11:08 (01 hou Procedure REPAIR UMBILICAL HERNIA > 5 YO STRANGU	Patient IDs Age/Sex/Race urs, 38 minutes) Height/Weight 183 cm, 117.9 kg JLATED/INCARCERATED ASA Class 3	Surgical Service General Admission Inpatient Room Name	
Record Search Administrative H&P	Main Chart [-] V BP Sys Non-invasive V BP Dias Non-invasive V SpO2 Pulse Rate V End Tidal CO2 (mmHg)	09:30:00 10:00:00	10:30:00	Sections Zoom Out Zoom In Presets 11:00:00 200 100 0
Outcomes Labs	Imes I=1 Anesthesia In Room Surgery All Staff [=] Staff Level - Anesthesia Attending ≢1 Staff Level - Anesthesia (RNA ≢1 Staff Level - Surgical Attending/Procedu Staff Level - Surgical Attending/Procedu	Anesthesia In Room Surgery International Int		
	Staff Level - Surgical Resident #2 Bolus Meds [-] CEFAZOLIN DEXAMETHASONE EPHEDRINE FENTANYL LIDOCAINE 2%	2 gm 4 mg 50 mcg 50 mcg	5 mg 5 mg 25 mcg	
	 The top froze Anesthe In room Length o Staff sig 	en section also shows a timeli esia Start to End to out of rom of surgery n in/out times	ne representation of key time	es in the case:
	Flows Air (Chillin) Flows Nitrous Oxide (L/min) End Tidal CO2 (mmHg) Nitrous Insp % Sevoflurane Exp % Sevoflurane Exp % Ventilator Mode Tidal Volume actual Minute ventilation Peak inspiratory pressure Plateau Inspiratory Pressure Positive End Expiratory Pressure - Meas	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	

MPOG Case Viewer



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Information available in the body of the chart is arranged to match the chronological timeline listed across the top of the Ventilato view. To view more information, hover the mouse pointer over the flow sheet and use the scroll bar to scroll in or out. "Zoom Out" and "Zoom In" buttons are also available in the upper right corner

ormal Jab - Alkaline Phosphatase, Sen



Tick marks on the flowsheet let users know that more information is available if you scroll in.









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MULTICENTER P

- Clicking a value brings up more information
- Allows for further drill down of the information





• Data in this view can also be sorted by clicking on the column header

	C	lick head	der
Multiple Values			
Time	Mapped As	Value	Original Variable
12-01-2019 06:10	BP Sys Non-invasive	114	2100310150
12-01-2019 08:08	BP Sys Non-invasive	109	7
12-01-2019 08:12	BP Sys Non-invasive	109	7
12-01-2019 08:15	BP Sys Non-invasive	118	7
12-01-2019 08:18	BP Sys Non-invasive	84	7
12-01-2019 08:21	BP Sys Non-invasive	88	7
12-01-2019 08:24	BP Sys Non-invasive	93	7
12-01-2019 08:27	BP Sys Non-invasive	93	7
12-01-2019 08:30	BP Sys Non-invasive	105	7
12-01-2019 08:33	BP Sys Non-invasive	107	7
12-01-2019 08:36	BP Sys Non-invasive	97	7
12-01-2019 08:39	BP Sys Non-invasive	106	7

Time	Mapped As	Value	Origi	nal Variable	
12-01-2019 08:18	BP Sys Non-invasive	84	7		
12-01-2019 08:21	BP Sys Non-invasive	88	7		
12-01-2019 08:24	BP Sys Non-invasive	93	7		
12-01-2019 08:27	BP Sys Non-invasive	93	7	Value	20
12-01-2019 08:36	BP Sys Non-invasive	97	7	Value	
12-01-2019 08:30	BP Sys Non-invasive	105	7	sorteo	d in
12-01-2019 08:39	BP Sys Non-invasive	106	7	ordo	
12-01-2019 08:33	BP Sys Non-invasive	107	7	orue	31
12-01-2019 08:08	BP Sys Non-invasive	109	7		
12-01-2019 08:12	BP Sys Non-invasive	109	7		
12-01-2019 06:10	BP Sys Non-invasive	114	21003	10150	
12-01-2019 08:48	BP Sys Non-invasive	115	7		
12-01-2019 09:00	BP Sys Non-invasive	115	7		



- Side box view can be especially helpful when reviewing notes if users wish to see them in chronological order similar to some EHRs
- The note information is also available in the body of the flowsheet

/lultiple Values				>
lime	Mapped As	Value	Original Variable	
1-29-2019 20:43	Patient in Facility	Patient in Facility	Patient in Facility	1
2-01-2019 07:28	Fall Risk Score	No Risk Factors Present	Fall Risk Assessment	
2-01-2019 08:22	Patient Identified (ID Bar	Self;Identification Band	Patient ID Verified	
2-01-2019 08:59	Anesthesia Machine Che	Anesthesia Machine Che	Anesthesia Machine Che	
2-01-2019 08:59	Equipment Verified	Equipment verified	Equipment verified	
2-01-2019 08:59	Patient Identified	Patient identified, chart (Patient identified, chart (
2-01-2019 08:59	NPO Verification	NPO status confirmed to	NPO status confirmed to	
2-01-2019 09:00	Patient Identified (ID Bar	Identification Band;Self	Patient ID Verified	
2-01-2019 09:05	Room Ready	Room Ready	Room Ready	
2-01-2019 09:07	Anesthesia Start	Anesthesia Start	Anesthesia Start	
2-01-2019 09:13	Patient in Room	Patient In Room	Patient In Room	
2-01-2019 09:15	Patient in Room	Patient In Room	Patient In Room	
2-01-2019 09:16	Monitors Specified	Standard monitors place	Standard monitors place	
2-01-2019 09:17	Pre-Induction Verification	PRIOR to Induction/Initia	PRIOR to Induction/Initia	
2-01-2019 09:24	Pre-Induction Verification	PRIOR to Induction/Initia	PRIOR to Induction/Initia	
2-01-2019 09:24	Preoxygenation/Denitr	Patient preoxygenated k	Patient preoxygenated k	

Airway Manipulation Image: Start Imag	Notes	L ^{- J} Airway Assessment								Intact
Anesthesia End Image: Start Image: St		Airway Manipulation								Oral airway pi
Anesthesia Machine Checked Anesthesia Start Anesthesia Start Anesthesia Start Image:		Anesthesia End								Anesth
Anesthesia Start Anesthesia Start Image: Start Ima		Anesthesia Machine Checked								
Arm Position Image: Controlled Substance Equipment Verified Equipment Verified Eye Protection Fall Risk Score Handoff of Care Head of Bed Elevated Imduction End		Anesthesia Start	Ane	sthesia Start						
Breath Sounds Auscultated Image: Controlled Substance Controlled Substance Image: Controlled Substance Equipment Verified Image: Controlled Substance Eye Protection Image: Controlled Substance Fall Risk Score Image: Controlled Substance Handoff of Care Image: Controlled Substance Head of Bed Elevated Image: Controlled Substance Induction End Image: Controlled Substance		Arm Position				Patient arms left	arm padded and	tucked right arm		
Controlled Substance Image: State of the state of		Breath Sounds Auscultated			E	qual bilateral brea	th sounds auscult	ated		
Equipment Verified Image: Second Secon		Controlled Substance								Controlled Su
Eye Protection Eyes taped shut Fall Risk Score Handoff of Care Head of Bed Elevated Induction End		Equipment Verified								
Fall Risk Score Image: Core of the core of t		Eye Protection			Eyes	taped shut				
Handoff of Care Handoff Head of Bed Elevated HoB at 15 deg Induction End Anesthesia Induction End		Fall Risk Score								
Head of Bed Elevated HOB at 15 deg Induction End Anesthesia Induction End		Handoff of Care								Hando
Induction End Anesthesia Induction End		Head of Bed Elevated								HOB at 15 dec
		Induction End			Anes	thesia Induction E	nd			
Laryngeal Mask Airway Removed		Laryngeal Mask Airway Removed								LMA removed Dec
Laryngeal Mask Placement LMA Placed: Type: Ambu Aura Straight (single use)		Laryngeal Mask Placement			LM	A Placed: Type: Am	bu Aura Straight ((single use)		
Mask Ventilation Difficulty (Scaled)		Mask Vantilation Difficulty (Scalad)			Mas	k ventilation Grad	e Ω· Ventilation hv	mask not		



• The notes pane can be quickly re-opened via the "notes" shortcut in the upper right hand corner





- When applicable, the note entered time is available at the bottom of the yellow pane to compare differences between Observed Time and Entered Time
- Observed Time- The time the event/note happened
- Entered Time- The time the user entered in the information into the EHR

1 State				
Back				
Concept	AACD Patient	: In Facility Date/Time		
Value	Patient in Fac	ility		
Observed Time	11-29-2019 2	0:43		
Entered Time	12-01-2019 0	18:07		
Entered Time Variable Mappings	12-01-2019 0 Note Type	18:07 Mapped As AACD Patient In Facility Date/ Time	Original Patient in Facility	



 Bolded "parent" notes have associated "child" detail notes. Clicking on a bolded note will give the additional details as well







 Holding down 'Shift' and selecting multiple headers will open those headers together in the notes pane



- Data can be copied out of the yellow pane and pasted into Excel for purposes of chart review
- Highlight desired rows
- Use Ctrl + C to copy
- Use Ctrl + V to paste in Excel

om In Presets				
):00	Multiple Values			:
200	Time	Mapped As	Value	Original Variable
100	02-01-2020 07:39	EKG Pulse Rate	63	FLO-892
55	02-01-2020 07:40	EKG Pulse Rate	62	FLO-892
0	02-01-2020 07:41	EKG Pulse Rate	59	FLO-892
	02-01-2020 07:42	EKG Pulse Rate	69	FLO-892
	02-01-2020 07:43	EKG Pulse Rate	71	FLO-892
	02-01-2020 07:44	EKG Pulse Rate	68	FLO-892
	02-01-2020 07:45	EKG Pulse Rate	68	FLO-892
	02-01-2020 07:46	EKG Pulse Rate	67	FLO-892
	02-01-2020 07:47	EKG Pulse Rate	65	FLO-892
695	02-01-2020 07:48	EKG Pulse Rate	61	FLO-892
	02-01-2020 07:49	EKG Pulse Rate	58	FLO-892
	02-01-2020 07:50	EKG Pulse Rate	56	FLO-892
~	02-01-2020 07:51	FKG Pulse Rate	62	FLO-892

A1	•	×	f_x	2/1/2020 7:	39:00 AM	
	А	В	С	D	E	F
1	2/1/2020 7:39	EKG Pulse Rate	e	3 FLO-892		
2	2/1/2020 7:40	EKG Pulse Rate	e	62 FLO-892		
3	2/1/2020 7:41	EKG Pulse Rate	ŧ	59 FLO-892		
4	2/1/2020 7:42	EKG Pulse Rate	e	9 FLO-892		
5	2/1/2020 7:43	EKG Pulse Rate	7	'1 FLO-892		
6	2/1/2020 7:44	EKG Pulse Rate	e	8 FLO-892		
7	2/1/2020 7:45	EKG Pulse Rate	e	8 FLO-892		
8	2/1/2020 7:46	EKG Pulse Rate	e	67 FLO-892		
9	2/1/2020 7:47	EKG Pulse Rate	e	5 FLO-892		



Sections Menu

- Upper right hand corner
- Use to add and remove sections from the body of the chart as needed
- MPOG Measure related sections pull in a summary section of all relevant variables to complete chart review on those measures.



Surgical Service General

Inpatient

Admission



For example, the PONV section summarizes PONV relevant information such as anti-emetics given, anesthetic gases used, and PONV and smoking history and risk factors. While this information is available elsewhere in the chart, this view quickly summarizes and puts the information into one place.

PONV [-]	[-] ONDANSETRON						4 mg	
	DEXAMETHASONE		4 mg					
	PROPOFOL	200 mg					50 mg	
	FENTANYL			50 mcg	50 mcg		25 mcg	
	Sevoflurane Exp %	0,,,,0,,,0,	0.8 1 1	1 1 1.7	1.7 1.6	1.5 1.4 1.3	1.2 1.3	14, , 14, , ,
	Sevoflurane Insp %	0 0	1.2 1.2	1.2 1.2 2	2 1.8	1.7 1.5 1.5	1.5 1.6	1.9 1.9
	Nitrous Insp %	0 0	0 0	0 0	0 0	0 0	0 0	0 0
	Nitrous Exp %	0 0	0	0 0	0 0	0 0	0 0	0 0
	History - Social History - Tobacco Detai							
	General - PONV Risk Factors							
	General - PONV Risk Total Score							



When using an imported case list and the box on the left to move through cases, any 'Section' you have open will remain open case to case



Preset Menu

• The "Preset" menu in the upper right corner shows users preset views of the chart based on their choice.





Main Chart	Image: Spot System BP System Spot System Image: Spot System Spot System Spot System Image: Spot System End Tidal CO2 (mmHg)	09:55:00 10:00	Sections Zoom Out
Times	[-] Anesthesia In Room		
All Staff	Surgery	Surgery	
Anotan	Staff Level - Anesthesia CRNA #1		
	Staff Level - Surgical Attending/Proced Staff Level - Surgical Resident #1	·	
DOM:V	Staff Level - Surgical Resident #2		
POINV	DEXAMETHASONE		a mg
	PROPOFOL	ca.	50 mg
	Sevoflurane Exp %	1.7	17 17 16 16 16 14 13 13 12 13 13 13 14 14 14 14 1 11 1
	Sevoflurane Insp %	2.1	
	Nitrous Exp %	0	
	History - Social History - Tobacco Detai	i l	For example, choosing "Surgery Duration" zooms the
	General - PONV Risk Factors General - PONV Risk Total Score		
Bolus Meds	[-] CEFAZOLIN		chart to show the times between surgery start and end.
	EPHEDRINE		
	FENTANYL	cg	Users can see the rest of the chart by zooming in or out
	ONDANSETRON		
	PROPOFOL		or clicking and dragging as usual.
	SUCCINYLCHOLINE		
	SUGAMMADEX		200 mg
Infusion Meds Bolus Inputs	[-] NORMOSOL		600 ml
Outputs	I - 1 OTHER OUTPUT, UNSPECIFIED	100.4	
Physio	Temperature - Esophageal Temperature - Temporal Artery	98.4	1984 1984 1984 1984 1984 1984 1984 1984
	SpO2 Pulse Rate	84 69	74 59 55 57 59 63 62 63 64 90 68 100 78 74
	EKG Pulse Rate Respiratory Rate - Unspecified source	82 69 69 12 12 12	12 12 12 12 12 12 12 12 12 12 12 12 12 11 4 15 15 14
	BP Sys Non-invasive	120	118 119 104 96 109 106 102 129 119 119 109
	BP Dias Non-invasive BP Mean Non-invasive	89	62 69 62 53 62 64 59 72 69 64 59 84 90 77 69 81 79 74 95 89 86 77
	Cardiac Rhythm		NSR NSR
	ST Lead II ST Lead V1	0.6 0.3	
	SpO2 %	100 100	100 100 100 100 100 100 100 100 100 100
			4/4:Sustained Tetanus
Ventilator	Train-of-four (subjective assessment) [-] Flows Oxygen (L/Min)	0.7	10.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 2.6
Ventilator	Train-of-four (subjective assessment) [-] Flows Oxygen (L/Min) Flows Air (L/min)	0.7	0.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 2.6
Ventilator	Train-of-four (subjective assessment) [-1] Flows Oxygen (L/Min) Flows Air (L/min) Flows Nitrous Oxide (L/min) End Tidal CO2 (mmHn)	0.7 1 0 32	0.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 26
Ventilator	Train-of-four (subjective assessment) [-1 Flows Oxygen (L/Min) Flows Air (L/min) Flows Nitrous Oxide (L/min) End Tidal CO2 (mmHg) Nitrous Insp %	0.7 1 0 32 0	0.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 0.7 2.6 2



Record Search

- Next view available in the left pane
- Search relevant information, including by MPOG Concept ID (exact match required for Concept ID) and original variable ID/name
- Temporarily save that information together in the "Shopping cart" to the right using the "+"
- Remove information from the shopping cart using the "X"

Chart	propofol	
Record Search		
Administrative	Sep 01, 2019 (day of surgery)	Sep 01, 2019 (day of surgery)
H&P	0937 PROPOFOL 200 mg +	09:37 PROPOFOL 200 mg 🗙
Outcomer		
Labs		



Record Search

- Search for multiple terms/variables at the same time using the '|' symbol between variables
 - Hint: | is found on the same key as \, use 'Shift' to type |
- Ex: 50002 | 50003 | Propofol | lactated ringers
 - This will pull in everything mapped to those two concept IDs and everything including the words 'propofol' and 'lactated ringers'
- CTRL + Z will undo searches in record search

Record Search	50002 50	50002 50003 Propofol lactated ringers						
Administrative	Fe	Feb 01, 2020 (day of surgery)						
H & P	07:30	Anesthesia Start	Anesthesia Start	+				
Outcomes	07:30	Patient in Room	RN Documented In Room	+				
outcomes	07:39	PROPOFOL	150 mg	+				
Labs	08:45	LACTATED RINGERS	800 ml	+				
	10:00	LACTATED RINGERS	50 ml	+				
	11:31	PROPOFOL	50 mg	+				



Record Search

• Ctrl + Click or Shift + Click allows for multi-select and the ability to add more than one row of information into the "Shopping Cart"

Fentanyl			
Dec 01, 2019 (day of surgery)		Dec 01, 2019 (day of surgery)	
09:18 FENTANYL	50 mcg 🕂	09:18 FENTANYL	50 mcg 🗙
09:40 FENTANYL	25 mcg 🕂	09:40 FENTANYL	25 mcg 🗙
10:34 FENTANYL	25 mcg 🕂	10:34 FENTANYL	25 mcg 🗙



• Utilize Record Search to look at information relevant to a chart evaluation in one location

<u>.</u>	1 IOCEUUI		د ددها.		
Chart	anesthesi	ia			
Record Search					
Administrative	— Ja	n 01, 0001 No Valid Date Specified		Sep 01, 2019 (day of surgery)	
/ tarrinistrative	00:00	Assessment and Plan - Anesthesia Technique	General 🕇	09:30 Anesthesia Start	Anesthesia Start 🗙
H&P	00:00	Misc Note	Placed by Anesthesia Team +	09:37 PROPOFOL	200 mg 🗙
Outcomes	00:00	Airway Manipulation	ANESTHESIA AIRWAY +	10:26 PROPOFOL	50 mg 🗙
	00:00	Lines/Tubes/Drains (Misc)	ANESTHESIA PERIPHERAL IV +	11:08 Anesthesia End	Anesthesia Stop 🗙
Labs	Se	ep 01, 2019 (day of surgery)			
	00-02	According to an Allan Anostheria Consont	Var 📕		
	09.03	Assessment and Plan - Anesthesia Consent	nationt +		
	09.03	Patient Identified	Immdt PreOn Assessment +		
	09:30	Anesthesia Start	Anesthesia Start +		
	09:30	Staff Level - Anesthesia Attending	10082 +		
	09:30	Staff Level - Anesthesia CRNA	2233144 +		
	09:37	Induction Start	Anesthesia Induction +		
	09:41	Misc Note	Anesthesia Ready +		
	10:43	Emergence (Misc)	Anesthesia Emergence +		
	11:08	Anesthesia End	Anesthesia Stop 🕇		
	15:18	Administrative Note (Misc)	Post Anesthesia Note Sign +		


Record Search

- Users can copy and paste select information from the "Shopping Cart" into an Excel file if needed
- Select the desired rows and use Ctrl + C to copy information
- In an Excel spreadsheet, Paste the information

—— Dec 01, 2019 (day of surgery)	
09:18 FENTANYL	50 mcg 🗙
09:40 FENTANYL	25 mcg 🗙
10:34 FENTANYL	25 mcg 🗙

	Α	В	С	D
1	12/1/2019 9:18	FENTANYL	50 mcg	
2	12/1/2019 9:40	FENTANYL	25 mcg	
3	12/1/2019 10:34	FENTANYL	25 mcg	
4				
5				
0				



Administrative



MULTICENTER P

OUTCOMES GROUP

History and Physical

Chart	Procedure REPAIR O	UMBILICAL HERNIA > 5 YO STRANGULATED/INCARCERAT	EU ASA CIASS 3		
Record Search	Assessment				
Administrative	Airway	Airway - Mallampati Score Unspecified Exam Position Airway - Hyoid to Mentum	> II >3 FB		
Outcomes	Anesthetic Plan	Assessment and Plan - Anesthesia Technique	General		
Labs	History				
	Past Medical History	General - PONV Risk Factors General - PONV Risk Total Score General - Past Medical History ICD-9 Code	1 Yes 2 ENDOCRINE HISTORY HYPERTENSION NOS MALIGN NEOPL PROSTATE		
		General - Past Medical History ICD-10 Code	UPPER GI SYSTEM HISTORY VASCULAR HISTORY Oth abdominal hernia with obstruction, without gangrene	The H&P View shows	
	Past Surgical History	General - Past Surgical History	HEAD NECK SURGERY UROLOGIC SURGERY		
	Social History	History - Social History - Tobacco Details Current vs Pas	t 1 Never Smoker	perioperative assessm	ent data.
	Medications			Similar to in Chart viou	
	Home	General - Medications - Home	ciprofloxacin 500 mg oral tablet docusate sodium 100 mg oral capsule Multiple Vitamins oral tablet	blue text can be alight	v, any d to
	Preop	General - Medications Detail - Dose (numerical)		blue text can be clicke	
		General - Medications Detail - Dose (unit of measure)	tab(s)	show more informatio	n in the
		General - Medications Detail - Route of Administration	tao(s) oral oral	right vellow pane	
		General - Medications Detail - Frequency	oral BID once a day		
		General - Medications Detail - Scheduled vs PRN	TID N N		
		General - Medications Detail - Name	Y ciprofloxacin 500 mg oral tablet docusate sodium 100 mg oral capsule Multiple Vitamins oral tablet		
	Physical Exam	l.			
	Preop Height	Physical Exam - Height (cm)	182.9 183		
Table View		Physical Exam - Height (in)	72 72 724		
Preferences	Preop Weight	Physical Exam - Weight (kg)	117.9		



Outcomes

The Outcomes view shows documented outcomes and mortality if available. The blue text in this view also remains clickable to reveal more information in the yellow right pane.

Chart	Procedure REPAIR U	IMBILICAL HERNIA > 5 YO STRANGULATED/INCARCERAT	FED	ASA Class	3				
Record Search	Documented (Dutcomes							
Administrative	Outcomes	Intraoperative observed quality assurance event	No Intraoperative Events						
H&P	Mortality								
Outcomes	Nothing docume	nted							
Labs									
						~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	<b>M</b>		G
							MULTICENTE	R PERIOPER	RATIVE
10/15/20	)20			Conta	ct: support@mpog.zendesk.com		— оитсо	MES GROUP	47

### Labs

	Procedure REPA	IR UMBILICAL HERNIA > 5 YO STRANG	GULATED/INCAR	CERATED		ASA CI	ass 3						
Chart	~		06-03-2019	08-19-2019	08-28-2019	08-29-2019		08-30-2019	08-31-2019	09-01-2	2019		<b>9</b> -02-2019
Record Search			15:43	17:19	01:43	10:10	12:27	05:43	05:42	0	07:03	09:	07 05:01
Administrative	Blood Bank	ABO/Rhesus (Rh) Factor										B Posit	
Administrative		Antibody Screen										Negat	
H&P	Blood Gas	None documented											
0	Cardiac	Cholesterol	219										
Outcomes		HDL	53										Shows labs in clinical grounings and
Labs		LDL	145										Shows labs in chincal groupings and
		Iriglycerides	107										0 1 0
	Chemistry	Alanine Aminotransferase (ALT)	41								51		abranalagical ardar
		Albumin	4.3								3.6		chronological order
		Alkaline Phosphatase	101								83		
		Aspartate Aminotransferase (AST)	23								28		
		Biliturbin, Total	0.6								1		
		Calcium	9.7	10.1	9	9.7		8.7	9.1		9.5		Info is also available in abort view
		Chloride	108	107	106	104		109	108		107	•	INIO IS AISO AVAIIADIE IN CHARL VIEW
		Creatinine	1.1	1.1	1.1	1.1		1	1		1.3		
		Glucose	91	71	105	117		98	100		93		
		Lactate	208				1.3		1.2				
		LDH	208										Plue cheding across the ten chouse the
		Magnesium						2.2	2		2.1		DILLE STAUINE ACTOSS LITE LOD SHOWS LITE
		Potassium	4.2	3.7	4.2	4.2		3.9	4.3		4		
		Protein	7.2								6.5		
		Sodium	144	142	139	140		141	141		141		
		Urea Nitrogen	13	13	13	10		9	7		9		udy of surgery
	Coagulation	International Normalized Ratio (INR)		1		1.1					1.1		
		Partial Thromboplastin Time (PTT)		28.3		27.3							
		Protrhombin Time (PT)		13.1		13.2					13.2		
	Complete Blood	Hemaglobin (HGB)	14.3	14.2	12.2	14.2		12.6	12.5		12.7		
	Count	Hematocrit (HCT)	45.3	44.9	37.6	43.2		39.3	38.3		38.6		
		Platelets (PLT)	268	272	270	328		289	302		323		
		WBC Count	5.9	5.8	11.8	13.8		11.1	11.3		11.3		9.9
	Drug Monitoring	None documented											
	Endocrine	Hemoglobin A1c	4.7										
	Other	None documented											
	Urine	None documented											



Plead Pape	APO/Phonus (Ph) Easter								P. Decitio			Time	Value	Mapped As	L
DIOOG DANK	Antibody Screen								D POSIU	ve		06-03-2019 15	5:43 91	Formal lab - Glucose, Serum/Plas	na 👘
Read Gas	None documented								Negativ	ve		08-19-2019 17	7:19 71	Formal lab - Glucose, Serum/Plas	na
Cardiac	Cholesterol	210										08-28-2019 01	1:43 105	Formal lab - Glucose, Serum/Plas	na '
Carcilac	HDI	53										08-29-2019 10	):10 117	Formal lab - Glucose, Serum/Plas	na -
	LDL	145									-	08-30-2019 05	5.43 09	Formal Jab - Glucose Serum/Plas	-
	Trialycerides	107							_			08-31-2019 05	542 100	Formal Jab - Glucose, Serum/Plas	-
Chemistry	Alanine Aminotransferase (ALT)	41							51			00 01 2010 07	7.42 100 7.02 02	Formal Jab - Glucose, Serum/Plas	
1	Albumin	4.3							3.6			09-01-2019 07	05 93	Formal lab - Glucose, Serum/Plas	Id -
	Alkaline Phosphatase	101							83			09-02-2019 03	01 93	Formai lab - Glucose, Serum/Plasi	1a .
	Aspartate Aminotransferase (AST)	23							28						
	Biliturbin, Total	0.6							1						
	Calcium	9.7	10.1	-	9.7		8.7	9.1	9.5	8.5					
	Chloride	108	101	106	104		109	108	107	107					
	Creatinine	int.	1.1	1.1	1.1		1	1	1.3	1					
	Glucose	91	71	105	117		98	100	93	93					
	Lactate	208				1.3		1.2							
	LDH	208													
	Magnesium						2.2								1
	Potassium	4.2	3.7	4.2	4.2		3.9		licking (	on the lah	name on the	right w	vill ch	and lle we	
	Protein	7.2							iickiiig (		name on the	e nght w			
	Sodium	144	142	139	140		141								
	Urea Nitrogen	13	13	13	10		9	l in	that ca	ategory in	the right har	nd vellov	w nan	e. Clicking a	1
Coagulation	International Normalized Ratio (INR)		1		1.1			_ ···					, pan		
	Partial Thromboplastin Time (PTT)		28.3		27.3			1.1.	I I			<b>f</b>			1
	Protrhombin Time (PT)		13.1		13.2			l la	b value	e itseit will	give more in	Tormati	on ab	out that lab	٣
Complete Blood	Hemaglobin (HGB)	14.3	14.2	12.2	14.2		12.6				0				
Count	Hematocrit (HCT)	45.3	44.9	37.6	43.2		39.3	1	میباد						- E
	Platelets (PLT)	268	272	270	328		289	Vc	alue.						
	WBC Count	5.9	5.8	11.8	13.8		11.1								┛╻╴
Drug Monitoring	None documented														
Endocrine	Hemoglobin A1c	4.7													
Other	None documented														
Urine	None documented														



### • Clicking a value brings up more information

	Procedure REPAI	IK UMBILICAL HEKINIA > 5 YO STRAING	GULATED/INCA	KUEKATED		ASA U	lass :	5								
Chart	~		06-03-2019	08-19-2019	08-28-2019	08-29-2019		08-30-2019	08-31-2019	09-01-2019		09-02-2019		Lab Value		×
Record Search			15:43	17:19	01:43	10:10	12:27	05:43	05:42	07:03	09:07	05:01			Farmel July Charges Carry (Planna	
Administrative	Blood Bank	ABO/Rhesus (Rh) Factor									B Positive			Concept	Formai lab - Glucose, Serum/Plasma	
	Black Car	Antibody Screen									ivegative			Value	91	
H&P	Blood Gas	None accumentea	210											value		
Outcomes	Cardiac	Cholesterol	219											Time	06-03-2019 15:43	
outcomes			145											nine		
Labs		Triphopoides	145											User Comment	Fasting reference:	
	Chamista	Alapino Aminotransforaço (ALT)	107							51				oser comment	Pre-Diabetes 100-125	
	Chemistry	Albumin	41							2.6					Diabetes >125	
		Alkaline Phosphatase	101							93					Non-Fasting:	
		Aspartate Aminotransferase (AST)	23							28					Normal <140 Disbates > (-200	
		Biliturbin Total	0.6							1					Diabetes >/=200	
		Calcium	97	10.1	0			87	91	95		85				
		Chloride	108	107	-	104		109	108	107		107				
		Creatinine	100	101	11	11		1	100	13		1				
		Glucose	91	71	105	117		98	100	93		93				
		Lactate			105		1.3		1.2							
		LDH	208													
		Magnesium						2.2	2	2.1		2.1				
		Potassium	4.2	3.7	4.2	4.2		3.9	4.3	4		3.9				
		Protein	7.2							6.5						
		Sodium	144	142	139	140		141	141	141		139				
		Urea Nitrogen	13	13	13	10		9	7	9		10				
	Coagulation	International Normalized Ratio (INR)		1		1.1				1.1	1					
		Partial Thromboplastin TIme (PTT)		28.3		27.3					27.5					
		Protrhombin Time (PT)		13.1		13.2				13.2	12.9					
	Complete Blood	Hemaglobin (HGB)	14.3	14.2	12.2	14.2		12.6	12.5	12.7		11.6				
	Count	Hematocrit (HCT)	45.3	44.9	37.6	43.2		39.3	38.3	38.6		36				
		Platelets (PLT)	268	272	270	328		289	302	323		319				
		WBC Count	5.9	5.8	11.8	13.8		11.1	11.3	11.3		9.9				
	Drug Monitoring	None documented														
	Endocrine	Hemoglobin A1c	4.7													
	Other	None documented														

MULTICENTER PERIOPERATIVE OUTCOMES GROUP

		WPOGCase_ID	wiPOGwied_Concept_IL	wiPOGDose_type_CD	wiPOGOOW_concept_iD	WPOGRoute_Concept_ID	AllVISDOSe_
	adffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10702	1	1005	2008	2330975-27
	aeffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10253	1	1014	2014	2330975-28
	afffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10186	1	1010	2001	2330975-30
	b0ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10186	1	1010	2001	2330975-30
	b1ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10186	1	1010	2001	2330975-30
	b2ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10219	1	1005	2001	2330975-37
	b3ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10070	1	1025	2007	2330975-40
	b4ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10306	1	1005	2001	2330975-40
	b5ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10374	1	1005	2001	2330975-40
	b6ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10374	1	1005	2001	2330975-40
	b7ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10301	1	1005	2001	35921702
	b8ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10131	1	1005	2001	35921960
	b9ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10216	1	1005	2001	35922076
	baffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10160	1	1005	2001	35922154
	bbffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10210	1	1005	2001	35922156
	bcffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10377				
	bdffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10393	hla Via	A/		
	beffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10186		V V		
	bfffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10186	i i 🔹 👘	1.1		
	c0ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10202	ble view	v displav:	s all data	sub
•	c1ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10219		· · · · · · · · · · · · · · · · · · ·		
	c2ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10219	cumont	tod for a	narticula	nr ch
	c3ffd0cb-b60c-eb11-910d-005056b4993c	07b7f25e-17fb-ea11-910c-005056b4993c	10239 UC	JUILIEII	LEU IUI d	particula	a Ca

10070

10206

10315 10335

10219

MIDO

Med_Concept_ID	MPOGDose_Type_CD	MPOGUOM_Concept_ID	MPOGRoute_Concept_ID	AIMSDose_ID	AIMSMed_Concept_ID	AIMSDose_Start_DT	AIMSDose_End_DT	AIMSMed_Nar
	1	1005	2008	2330975-27694-2020-09-15 09:13:00-1-465158003	27694	9/15/2020 9:13:00 AM		omeprazole 20
	1	1014	2014	2330975-28203-2020-09-15 20:00:00-1-465321507	28203	9/15/2020 8:00:00 PM		lidocaine 5 % t
	1	1010	2001	2330975-3037-2020-09-15 17:18:00-1-465230852	3037	9/15/2020 5:18:00 PM		fentaNYL (PF) 5
	1	1010	2001	2330975-3037-2020-09-15 17:27:00-2-465230852	3037	9/15/2020 5:27:00 PM		fentaNYL (PF) 5
	1	1010	2001	2330975-3037-2020-09-15 17:47:00-3-465230852	3037	9/15/2020 5:47:00 PM		fentaNYL (PF) 5
	1	1005	2001	2330975-3757-2020-09-15 18:17:00-1-465230853	3757	9/15/2020 6:17:00 PM		HYDROmorphe
	1	1025	2007	2330975-40822484-2020-09-15 16:54:00-2-465230834	40822484	9/15/2020 4:54:00 PM		bupivacaine (P
	1	1005	2001	2330975-40823880-2020-09-15 22:16:00-1-465321534	40823880	9/15/2020 10:16:00 PM		morphine 2 mç
	1	1005	2001	2330975-40840565-2020-09-15 21:22:00-1-465321530	40840565	9/15/2020 9:22:00 PM		PROMETHAZIN
	1	1005	2001	2330975-40843105-2020-09-15 10:18:00-2-465158026	40843105	9/15/2020 10:18:00 AM		PROMETHAZIN
	1	1005	2001	35921702	3092	9/15/2020 12:17:00 PM		Midazolam (IV)
	1	1005	2001	35921960	5456	9/15/2020 12:31:00 PM		Clindamycin N
	1	1005	2001	35922076	21090	9/15/2020 12:47:46 PM		Hydrocortisone
	1	1005	2001	35922154	47653	9/15/2020 12:52:50 PM		Diphenhydram
	1	1005	2001	35922156	42297	9/15/2020 12:52:56 PM		Haloperidol (H

Table view displays all data submitted to MPOG central that was documented for a particular case regardless of if it was mapped to an MPOG concept or not. The dropdown menu allows to view data in specific storage tables.

The search bar below the drop down allows for text search of the information in table view

Chart Record Search

H & P

Outcomes Labs

Administrative

AIMS IntraopMedications

c4ffd0cb-b60c-eb11-910d-005056b4993

c5ffd0cb-b60c-eb11-910d-005056b4993 c6ffd0cb-b60c-eb11-910d-005056b4993

c7ffd0cb-b60c-eb11-910d-005056b4993

c8ffd0cb-b60c-eb11-910d-005056b4993

MOOCO

07b7f25e-17fb-ea11-910c-005056b4993c

07b7f25e-17fb-ea11-910c-005056b4993c

07b7f25e-17fb-ea11-910c-005056b4993c

07b7f25e-17fb-ea11-910c-005056b4993

07b7f25e-17fb-ea11-910c-005056b4993c

Find value

MOOCD

### Preferences

- The preferences option on the bottom of the left pane lets users turn on/off PHI viewing and deleted record information
- Values marked as 'Artifact' are not shown when the option to not show Deleted data is selected





## ACQR "Cheat Sheet"

• Example search strings for failed case review. Copy and paste into "Record Search"

### • Glucose Measures:

glucose | insulin | anesthesia start | anesthesia End | dextrose | diabetes | 50012 | 50304 | 6008 | 50301 | 50443 | 50016 | 50002 | 50011 | 50069 | 50110 | 50211 | 50009

### • Transfusion Measures:

anesthesia start | anesthesia end | HCT | hematocrit | hemoglobin | HGB | Red blood cells | Estimated blood loss | Saline 0.9% | lactated ringers | albumin | platelets | phenylephrine | ephedrine | epinephrine



# Module 6 Data Diagnostics



### Data Diagnostics Overview

• ASPIRE sites may contribute information from various sections of an EHR: preoperative, intraoperative, and postoperative notes and physiologic data, demographic information, laboratory values, and procedure codes.



### Data Diagnostics Overview

- Two separate strategies are employed to improve data quality and ensure data accuracy.
  - First, data diagnostics are used by technical and clinical staff to detect systematic errors with data extraction, transformation, or mappings. Diagnostic visualizations represent specific pass/failure thresholds to determine compliance at a macro level.
  - Second, clinicians at each site are required to manually validate between 5 and 10 cases per month to ensure that the data that have been extracted into MPOG matches the original EHR information utilizing the Case Validator utility (see Module 7: Case by Case Validation)



### Data Diagnostics Requirements

- Data Diagnostic review and attestation are **required** for **all sites before uploading** to the Central MPOG database.
- All **funded** sites are required to conduct this attestation process on a **monthly** basis.
- Non-funded sites are required to complete before each upload to MPOG Central. If submission is on a monthly basis, then attestation should also occur on a monthly basis.



## **Accessing Data Diagnostics**





Last Updated: 10/15/2020

- Your institution/site should be defaulted in the top field.
- Select a module to filter the diagnostic list to accommodate the type of data to review. If planning to review all data diagnostics for the monthly attestation process, click "(All)" from the dropdown menu.





## **Diagnostic Search**

• If searching for a specific diagnostic, a free text search is available on the left-hand side





## Click on the name of the Data Diagnostic in the left column to display the graphical results on the right.



Last Updated: 10/15/2020

Contact: support@mpog.zendesk.com

**OUTCOMES GROUP** 

- For the example on the previous slide, Pro Fee Procedures are highlighted in the left column, and the diagnostic displays the percentage of cases with hospital discharge procedure codes by month.
- If your site does not submit billing data, the graph will display 0% of cases have Pro Fee Procedure codes.



### **COVID-19 Adjustments**

- For some diagnostics, the months of March/April/May 2020 are now excluded from diagnostic pass/fail consideration due to COVID-19's impact on case volume
- These months will appear as red data points on the graph







OUTCOMES GROUP

To understand when the Diagnostic was last updated, view the 'Diagnostic Executed On: XX/XX/XXXX' date listed beneath the graph.





- To seek further clarification for the diagnostic selected, click on the "Description" header beneath the graph.
- Clicking on the Description will expand the box to display the definition of the Data Diagnostic shown as well as the MPOG concept IDs that impact that diagnostic.

Percentage of Ou	Itpatient Cases with a LMA Note						
Priority:	High Priority	Open case list for selected month					
Diagnostic Executed On: 10/30/2019							
<ul> <li>Description</li> </ul>							
Description of the							
Percentage of outpa Check extract or ma	atient cases with an LMA (laryngeal mask airway) note between anesthesia star	t and anesthesia end. Excludes inpatient cases.					
Check extract or ma	atient cases with an LMA (laryngeal mask airway) note between anesthesia star apping if inconsistent with your institution's practices.	t and anesthesia end. Excludes inpatient cases.					
Check extract or ma	atient cases with an LMA (laryngeal mask airway) note between anesthesia star apping if inconsistent with your institution's practices.	t and anesthesia end. Excludes inpatient cases.					
Check extract or ma Concepts Used:	atient cases with an LMA (laryngeal mask airway) note between anesthesia star apping if inconsistent with your institution's practices.	t and anesthesia end. Excludes inpatient cases.					
Check extract or ma Concepts Used: LMA Notes 50141	atient cases with an LMA (laryngeal mask airway) note between anesthesia star apping if inconsistent with your institution's practices. Airway - Laryngeal Mask airway type	t and anesthesia end. Excludes inpatient cases.					
Check extract or ma Concepts Used: LIMA Notes 50141 50142	atient cases with an LMA (laryngeal mask airway) note between anesthesia star apping if inconsistent with your institution's practices. Airway - Laryngeal Mask airway type Airway - Laryngeal Mask airway size	t and anesthesia end. Excludes inpatient cases.					
Check extract or ma Concepts Used: <b>4 LMA Notes</b> 50141 50142 50143	atient cases with an LMA (laryngeal mask airway) note between anesthesia star apping if inconsistent with your institution's practices. Airway - Laryngeal Mask airway type Airway - Laryngeal Mask airway size Airway - Laryngeal mask airway placement difficulty	t and anesthesia end. Excludes inpatient cases.					



• Beneath the description is an Attestation section. Click on the dropdown arrow next to 'Attestation' to open.

Description		
Use this chart to verify that professional fee procedure codes ha	ve been successfully imported. If this percentage is lo	ow, check your extract.
Attestation		
Current Attestation	Comment	Previous Attestations
Data Accurately Represented The results of this diagnostic accurately represents the data from our documentation systems.		04/11/16 Data Accurately Represented 03/02/16 Data Accurately Represented 02/19/16 Data Not Accurately Represented
Data Not Accurately Represented The results of this diagnostic are not representative of data from our documentation and needs to be		01/18/16 Data Not Accurately Represented 12/14/15 Data Not Accurately Represented
Not Contributing Data We are unable to contribute data for this content area.		10/21/15 Data Accurately Represented 09/23/15 Data Not Accurately Represented



 In the Attestation section, the site Anesthesia Clinical Quality Reviewer (ACQR) or Quality Champion has the opportunity to review the diagnostic and determine if the data accurately represents the documentation present at the site (either in the EHR or billing software).



- If the site is not submitting data for the content area measured in the diagnostic (i.e. billing data), the option of "Not Contributing Data" should be selected.
- Click the box next to the attestation selection that most represents the analysis conducted on the Data Diagnostic under review. When the Data Diagnostic application is updated the following weekend, the current attestation will move to the Previous Attestation box on right side of the screen with an associated date



- For the purpose of this example (slide 9), "Data Accurately Represented" would be chosen since the data reflects the documentation for the cases that have been loaded to date.
- Comments can be added to the middle column as needed

<ul> <li>Attestation</li> </ul>		
Current Attestation	Comment	Previous Attestations
Data Accurately Represented         The results of this diagnostic accurately represents         the data from our documentation systems.         Data Not Accurately Represented         The results of this diagnostic are not representative         of data from our documentation and needs to be		04/11/16 Data Accurately Represented 03/02/16 Data Accurately Represented 02/19/16 Data Not Accurately Represented 01/18/16 Data Not Accurately Represented 12/14/15 Data Not Accurately Represented
Not Contributing Data We are unable to contribute data for this content area.		10/21/15 Data Accurately Represented 09/23/15 Data Not Accurately Represented



### **Viewing Previous Diagnostics**

 To view diagnostic graphs from a previous attestation, doubleclick on the row of the attestation to review and a new screen will display with the previous graph



### • Previous attestation graph will display in a new window



MULTICENTER PERIOPERATIVE OUTCOMES GROUP

## **Investigating Diagnostics**

- If data is not accurately represented (gaps in the data or values are higher or lower than expected)
- Thresholds for many of the diagnostics are reflective of common practice across man sites
  - Acceptable (green)
  - Borderline (yellow)
  - Non-standard (red)





### **Diagnostics Investigation**

- If you are below the threshold, with data in the 'Borderline' or 'Non-standard' areas of the graph, please verify the accuracy of the data.
- If not accurate, investigate further with the site technical team to identify if extract or mapping issues exist.



Click on the data point associated with the time period in question and select 'Open case list for selected month' to display a list of cases for that time period.





- A case list will open showing a random sampling of cases from the selected month
- Open cases as needed in case viewer for further investigation



- A date column also allows users to quickly see any trends to missing data by date on which the cases occurred
- By drilling down in to cases, it may be possible to determine if a mapping issue exists.
- Contact the QI Coordinators to identify next steps to improving the data quality.

### Percentage of Cases with a PEEP Observation

The selection has 226 cases available

Procedure	Date	Has PEEP?	
THYROIDECTOMY, TOTAL THYROIDECTOMY POSSIBLE PARTIAL STERNOTOMY WITH RLN MONITORING THYROIDECTOMY, TOTAL THYROIDECTOMY POSSIBLE PARTIAL STERNOTOMY WITH RLN MONITORING THYROIDECTOMY, TOTAL THYROIDECTOMY POSSIBLE PARTIAL STERNOTOMY WITH RLN MONITORING THY	05-01-2014 08:30	Yes	^
LAPAROSCOPIC PROSTATECTOMY WITH DAVINCI, POSSIBLE RADICAL RETROPUBIC PROSTATECTOMY RADICAL RETROPUBIC PROSTATECTOMY, POSSIBLE RADICAL RETROPUBIC PROSTATECTOMY	05-01-2014 08:30	Yes	
IR NEUROLOGICAL EMBOLIZATION, IR NEURO Left ICA aneurysm: Endovascular occlusion	05-01-2014 08:30	Yes	
AAA ENDO, EVAR	05-01-2014 08:30	Yes	
COLONOSCOPY, POSSIBLE BIOPSY, COLONOSCOPY, POSSIBLE BIOPSY	05-01-2014 09:30	No	
CYSTOSCOPY - RETROGRADE, CYSTOSCOPY - RETROGRADE PG URETERAL STENT PLACEMENT, CYSTOSCOPY - RETROGRADE PG	05-01-2014 10:30	No	
ECCE IOL, RIGHT POSSIBLE PARS PLANA CAPSULOTOMY- HAVE OCUTOME LEAVE UNOPENED POSTERIOR CAPSULOTOMY, RIGHT POSSIBLE PARS PLANA CAPSULOTOMY- HAVE OCUTOME LEAVE UNOPENED	05-01-2014 10:30	Yes	~
			_

Open Case Cancel



## **Diagnostics Priorities**

• Diagnostics are labeled by priority type. A definition for each priority type is listed below. These definitions are also available when clicking on the priority type

### Percentage of Cases with Hemoglobin or Potassium Labs - 30 Days Post

Priority:	Medium Priority
Diagnostic Executed On:	4/20/2016

Step 1: Click on the Priority type for definition.

### Percentage of Cases with Hemoglobin or Potassium Labs - 30 Days Post

Priority:	Medium Priority			
Diagnostic Executed On:	Medium priority dia	gnostics must be attested to and generally should		
<ul> <li>Description</li> </ul>	pass. Failure to pass these diagnostics is acceptable but usually not recommended if otherwise possible.			
Attactation		Step 2: A definition window will present window window will present wi	th the	

## **Diagnostics** Priories

- * **<u>Required</u>**: A required diagnostic MUST be passed before submission to MPOG.
- * High Priority: High priority diagnostics must be attested to and it is strongly recommended that any detected issues are fixed prior to submission. Failure to pass these diagnostics can severely impact the quality assessment and research capabilities of your institution.
- ***Medium Priority:** Medium priority diagnostics must be attested to and generally should pass. Failure to pass these diagnostics is acceptable but usually not recommended if otherwise possible.




# **Diagnostics Priories**

**Low Priority**: Low priority diagnostics are for low impact areas of the MPOG database.

Extraneous Priority: Extraneous diagnostics are meant purely as supplemental information. Reviewing them is not required and they are hidden by default.

Priority type for each diagnostic is easily viewed on the right side in each diagnostic.

Institution:		
Module: (All)		
By Priority  Required (13)  High (39)  Kodium (24)  Low (8)  Extraneous (32)	By Result Failed (18) Warning (7) Passed (40) N/A (51)	By Attestation Status Accurate (0) Not Accurate (0) Not Contributing (0) Missing (116)
Medication Route I Medications	Mapping	High Priority
Known Patient Rac Patients	e	Medium Priority
Diagnosis Text Fill Cases	Rate	Low Priority
Fluid Route Mappie Fluids	ng	Low Priority
Construction of the second	leds	Required
Cases with Bolus M Medications		



# **Filtering Diagnostics**

• Filters can be applied by Priority, Result, or Attestation Type. Filtering allows the user to limit the number of diagnostics listed and improve the selection process for tailored and purposeful review of the data.



#### Extraneous

- Extraneous diagnostics are blue diagnostics and indicate that thresholds do not exist because every site differs in terms of case mix and patient population.
- It is important to verify that the diagnostic reflects your site case mix, population, practice, and distribution.





# **Exporting Diagnostics**

- Click on the "Export Results" button at the bottom of the Diagnostic listings
- Will export ALL diagnostics at once
- Save file to a location you an easily retrieve from
- If the Coordinating Center requests a copy of recent Diagnostics, simply attach the file to an email and send to one of the QI Coordinators. This report does not contain PHI, and can be sent through email.





# **Exporting Diagnostics**

- Helpful when comparing local diagnostics to MPOG Central Diagnostics
- Local Diagnostics refresh each night
- MPOG Central Diagnostics refresh each Sunday





# **Module 7** Case Validation



### **Case Validation Overview**

- Case validation is used along with Data Diagnostics (Module 6) to ensure data accuracy
- Ensures that the data extracted into MPOG matches the original EHR documentation utilizing the MPOG Case Validation application
- Allows for detection of data issues at an individual case level that may not be visible using data diagnostics
- Series of standard questions are used to validate case information



### **Case Validation Overview**

- A variety of cases should be sampled
  - For example, if your institution has cardiac surgery, orthopedic surgery, obstetrics/gynecologic surgery, vascular surgery, and transplant surgery, then you should review a case for every service
- Emergent cases should be validated as the data for an emergent case may not always extract in the same way a scheduled case does.
- After a few months, you may see trends in issues with mapping.



### **Case Validation Overview**

- Based upon initial review and with help from an MPOG QI Coordinator, you will decide how to select future cases for review.
- For example, you may find that there is a trend in issues with mapping for cardiac procedures. In this case, you will want to place emphasis on reviewing cardiac cases for a few months until the data issue is resolved.



# Requirements

#### **BCBS Funded sites**

- MPOG requires review of 10 cases per month for at least 6 months prior to initial MPOG Central upload
- All historical data should be validated with a minimum of 5 case validations completed per month.
- Required to validate 10 cases per month prior to uploading to MPOG central each month

#### Non-funded sites

- MPOG requires review of 5 cases per month for 6 months before initial upload.
- All historical data should be validated with a minimum of 5 case validations completed per month but can be completed after initial upload if Data Diagnostics are accurate throughout.
- Required to validate 5 cases per month prior to each upload to MPOG Central



# Accessing Case Validation





# **Case Validation App**

- The left side of window displays 4 options for how you can select and open a case.
- The right side of the window displays the number of cases that have been reviewed historically for each month.
- Green indicates that the required number of cases per month have been reviewed.

🚭 Case Validation			—	$\times$
• Pick case by MRN and	d date	2019-10	0 / 10	^
Patient MRN		2019-09	20 / 10	
Date of Operation	10/15/2019	2019-08	20 / 10	
O Pick case by case ID		2019-07	20 / 10	
MPOG Case ID	0000000-0000-0000-000000000000000000000	2019-06	24 / 10	
O Pick random upraview	ved case	2019-05	4 / 10	
		2019-04	10 / 10	
Time Period	10/01/2019 0 / 10 v	2019-03	5 / 10	
Service Type	(Any)	2019-02	5 / 10	
Disk share do serieved	· · · ·	2019-01	5 / 10	
<ul> <li>Pick already reviewed</li> </ul>	case	2018-12	5 / 10	
Reviewed Cases	Ŷ	2018-11	5 / 10	~
Validate Case			Review Saved Validation	



### Pick a Case for Review

#### • 4 Options

- Pick case by MRN and date
- Pick case by case ID
- Pick random unreviewed case
- Pick already reviewed case



# Pick a Case for Review: Select by MRN and Date

- Click the dial next to "Pick case by MRN and date." Both MRN and Date of Operation are required for this type of case selection method. Click "Validate Case"
- The Case Validation screen should display. You would typically verify that the patient MRN & Date of Operation are the same as the case you were initially trying to select and then begin case validation.

Pick case by MRN ar	nd date		2019-10	0/10
Patient MRN			2019-09	20 / 10
Date of Operation	10/15/2019	15	2019-08	20 / 10
) Pick case by case ID			2019-07	20 / 10
MPOG Case ID	0000000-0000-0000	-0000-000000000000000000000000000000000	2019-06	24 / 10
MPOG Case ID			2019-05	4 / 10
) Pick random unrevie	wed case		2019-04	10 / 10
Time Period	10/01/2019	0 / 10 🛛 🗸	2019-03	5 / 10
Service Type	(Any)	v	2019-02	5 / 10
			2019-01	5 / 10
) Pick already reviewe	d case		2018-12	5 / 10
Reviewed Cases		Ý	2018-11	5 / 10



# Pick a Case for Review: Select by Case ID

- Click the dial next to "Pick case by case ID." Enter MPOG Case ID. Click "Verify Case"
- The Case Validation screen should display. Typically, you would verify that the MPOG Case ID is the same as the case you were initially trying to select and then begin case validation.

🔹 Case Validation				_		x
O Pick case by MRN and	l date		2019-10		0 / 10	>
Patient MRN			2019-09		20 / 10	
Date of Operation	10/15/2019	15	2019-08		20 / 10	
• Pick case by case ID			2019-07		20 / 10	
MPOG Case ID	0000000-0000-0000-0000-000000000	0000	2019-06		24 / 10	
O Pick random unreview	ied case	_	2019-05		4 / 10	
			2019-04		10 / 10	
Time Period	10/01/2019 0 / 10	~	2019-03		5 / 10	
Service Type	(Any)	~	2019-02		5 / 10	
			2019-01		5 / 10	
<ul> <li>Pick already reviewed</li> </ul>	case		2018-12		5 / 10	
Reviewed Cases		~	2018-11		5/10	~
Validate Case			Γ	Review Saved \	/alidation	



### Pick random unreviewed case

• Click the dial next to "Pick random unreviewed case."

🗳 Case Validation			- 0	×
O Pick case by MRN and	d date	2019-10	0 / 10	>
Patient MRN		2019-09	20 / 10	
Date of Operation	10/15/2019	2019-08	20 / 10	
O Pick case by case ID		2019-07	20 / 10	
MPOG Case ID	0000000-0000-0000-000000000000000000000	2019-06	24 / 10	
Dick random unraviau	ved care	2019-05	4 / 10	
	veu case	2019-04	10 / 10	
Time Period	10/01/2019 0 / 10 v	2019-03	5 / 10	
Service Type	(Any) v	2019-02	5 / 10	
		2019-01	5 / 10	
O Pick already reviewed	case	2018-12	5 / 10	
Reviewed Cases	~	2018-11	5 / 10	~
Validate Case			Review Saved Validation	



#### Pick random unreviewed case

• Choose the date range

Pick case by MRN and date       2019-10       0 / 10         Patient MRN       2019-09       20 / 10         Date of Operation       10/15/2019       2019-08       20 / 10         Pick case by case ID       00000000-0000-0000-00000000000       2019-06       24 / 10         MPOG Case ID       0000000-0000-0000-00000000000       2019-06       24 / 10         Pick random unreviewed case       10/01/2019       0 / 10         10/01/2019       0 / 10       2019-06       24 / 10         08/01/2019       0 / 10       2019-03       5 / 10         09/01/2019       20 / 10       2019-02       5 / 10         08/01/2019       20 / 10       2019-01       5 / 10         08/01/2019       20 / 10       2019-02       5 / 10         03/01/2019       20 / 10       2018-12       5 / 10         02/01/2019       2 / 10       2018-12       5 / 10         03/01/2019       5 / 10       2018-11       5 / 10         02/01/2019       5 / 10       2018-12       5 / 10         02/01/2019       5 / 10       2018-12       5 / 10         03/01/2019       5 / 10       2019-04       2019-04         10/01/2019       10 / 10       2018-12	🍓 Case Validation				- 0	×
Patient MRN       2019-09       20 / 10         Date of Operation       10/15/2019       2019-08       20 / 10         Pick case by case ID       0000000-0000-0000-00000000000       2019-06       24 / 10         MPOG Case ID       10/01/2019       0 / 10       2019-06       24 / 10         Pick already reviewed       10/01/2019       0 / 10       2019-04       10 / 10         O Pick already reviewed       08/01/2019       20 / 10       2019-04       10 / 10         O Pick already reviewed       06/01/2019       20 / 10       2018-12       5 / 10         O S/01/2019       24 / 10       2018-11       5 / 10       2018-11       5 / 10         O S/01/2019       5 / 10       03/01/2019       5 / 10       2018-12       5 / 10       2018-11       5 / 10       2018-11       5 / 10       2018-11       5 / 10       2018-11       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-11       5 / 10       2018-12       5 / 10       2018-11       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-12       5 / 10       2018-12       5 / 10	O Pick case by MRN and	date		2019-10	0 / 10	^
Date of Operation         10/15/2019           Pick case by case ID         0000000-0000-0000-0000-000000000000           MPOG Case ID         0000000-0000-0000-00000-00000-00000-0000	Patient MRN			2019-09	20 / 10	
Pick case by case ID       2019-07       20 / 10         MPOG Case ID       0000000-0000-0000-0000-00000000000       2019-06       24 / 10         Pick random unreviewed case       0/01/2019       0 / 10       2019-05       4 / 10         Time Period       10/01/2019       0 / 10       0       2019-02       5 / 10         Service Type       99/01/2019       20 / 10       2019-01       5 / 10       2019-02       5 / 10         Pick already reviewed       06/01/2019       20 / 10       0/10       2018-12       5 / 10         Validate Case       05/01/2019       2 / 10       0/10       2018-11       5 / 10         02/01/2019       5 / 10       0/10/12019       5 / 10       2018-11       5 / 10         03/01/2019       5 / 10       0/10/12019       5 / 10       2018-11       5 / 10         02/01/2019       5 / 10       0/10/12019       5 / 10       2018-11       5 / 10         02/01/2018       5 / 10       10/01/2018       5 / 10       9/01/2018       5 / 10         09/01/2018       5 / 10       09/01/2018       5 / 10       9/01/2018       9/01	Date of Operation	10/15/2019	15	2019-08	20 / 10	
MPOG Case ID         0000000-0000-0000-0000-00000000000000	Pick case by case ID		,	2019-07	20 / 10	
• Pick random unreviewed case           2019-05           4 / 10         2019-04         10 / 10         2019-03         5 / 10         2019-03         5 / 10         2019-02         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2018-12         5 / 10         2018-12         5 / 10         2018-11         5 / 10         2018-11         5 / 10         02/01/2019         5 / 10         02/01/2019         5 / 10         02/01/2019         5 / 10         02/01/2019         5 / 10         02/01/2019         5 / 10         02/01/2019         5 / 10         11/01/2018         5 / 10         11/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         07/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         08/01/2018         5 / 10         0         7/01/2018         5 / 10         0         7/01/2018         5 / 10         0         7/01/2018         5 / 10         0         7/01/2018         5 / 10         0	MPOG Case ID	0000000-0000-00	00-0000-0000000000000000000000000000000	2019-06	24 / 10	
Image: Pick random unreviewed case         2019-04         10/10           Time Period         10/01/2019         0/10         0           Service Type         09/01/2019         20/10         2019-02         5/10           O Pick already reviewed         08/01/2019         20/10         2019-01         5/10           O Pick already reviewed         08/01/2019         20/10         2019-01         5/10           O Pick already reviewed         08/01/2019         20/10         2018-12         5/10           O/01/2019         24/10         04/01/2019         10/10         2018-11         5/10           O3/01/2019         5/10         02/01/2019         5/10         2018-11         5/10           O2/01/2019         5/10         02/01/2019         5/10         2018-11         5/10           O2/01/2019         5/10         02/01/2019         5/10         2018-11         5/10           O2/01/2019         5/10         02/01/2018         5/10         2019-01         2019-01           O2/01/2018         5/10         08/01/2018         5/10         2018-12         2019-01           O/01/01/2018         5/10         08/01/2018         5/10         2019-01         2019-01		- 1		2019-05	4 / 10	
Time Period         10/01/2019         0 / 10            Service Type         09/01/2019         20 / 10         2019-03         5 / 10           09/01/2019         20 / 10         2019-02         5 / 10         2019-01         5 / 10           0         Pick already reviewed         08/01/2019         20 / 10         2019-01         5 / 10         2019-01         5 / 10           0         Pick already reviewed         06/01/2019         20 / 10         2018-12         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2019-01         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2018-11         5 / 10         2018-11         5 / 10         2019-01         5 / 10         2019-01         5 / 10         2018-11	Pick random unreview	ed case		2019-04	10 / 10	
Service Type         10/01/2019         0 / 10           09/01/2019         20 / 10         2019-02         5 / 10           09/01/2019         20 / 10         2019-01         5 / 10           08/01/2019         20 / 10         2019-01         5 / 10           07/01/2019         20 / 10         2019-01         5 / 10           08/01/2019         20 / 10         2018-12         5 / 10           05/01/2019         24 / 10         2018-11         5 / 10           05/01/2019         4 / 10         2018-11         5 / 10           03/01/2019         5 / 10         2018-11         5 / 10           03/01/2019         5 / 10         2018-11         5 / 10           02/01/2019         5 / 10         2018-11         5 / 10           02/01/2019         5 / 10         2018-11         5 / 10           02/01/2019         5 / 10         2019-01         5 / 10           12/01/2018         5 / 10         2019-01         2019-01           09/01/2018         5 / 10         2018-11         5 / 10           08/01/2018         5 / 10         2019-01         2019-01	Time Period	10/01/2019	0/10 👻	2019-03	5 / 10	
Service type         09/01/2019         20 / 10           O Pick already reviewed         08/01/2019         20 / 10           O Pick already reviewed         07/01/2019         20 / 10           O Pick already reviewed         05/01/2019         20 / 10           O S/01/2019         24 / 10         2018-12         5 / 10           Validate Case         05/01/2019         4 / 10         2018-11         5 / 10           03/01/2019         5 / 10         03/01/2019         5 / 10         2018-11         5 / 10           02/01/2019         5 / 10         01/01/2019         5 / 10         12/01/2018         5 / 10           11/01/2018         5 / 10         10/01/2018         5 / 10         9/01/2018         5 / 10           08/01/2018         5 / 10         08/01/2018         5 / 10         9/01/2018	Service Ture	10/01/2019	0 / 10 🔷	2019-02	5/10	
Pick already reviewed         08/01/2019         20 / 10           Reviewed Cases         07/01/2019         20 / 10           Obj01/2019         24 / 10         2018-12         5 / 10           Validate Case         05/01/2019         4 / 10         2018-11         5 / 10           03/01/2019         5 / 10         03/01/2019         5 / 10         Review Saved Validation           01/01/2019         5 / 10         01/01/2019         5 / 10         12/01/2018         5 / 10           11/01/2018         5 / 10         10/01/2018         5 / 10         10/01/2018         5 / 10           08/01/2018         5 / 10         08/01/2018         5 / 10         10/01/2018         5 / 10	Service Type	09/01/2019	20 / 10	2019-01	5 / 10	
Reviewed Cases         07/01/2019         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10         20/10 <th><ul> <li>Pick already reviewed</li> </ul></th> <th>08/01/2019</th> <th>20 / 10</th> <th>2019 12</th> <th>5 / 10</th> <th></th>	<ul> <li>Pick already reviewed</li> </ul>	08/01/2019	20 / 10	2019 12	5 / 10	
Nervey Cases         06/01/2019         24 / 10         2018-11         5 / 10           Validate Case         05/01/2019         4 / 10         Review Saved Validation           04/01/2019         10 / 10         10 / 10           03/01/2019         5 / 10         Review Saved Validation           02/01/2019         5 / 10         12/01/2018         5 / 10           11/01/2018         5 / 10         10/01/2018         7 / 10           09/01/2018         5 / 10         08/01/2018         5 / 10           08/01/2018         5 / 10         07/01/2018         5 / 10	Reviewed Cases	07/01/2019	20 / 10	2010-12	5710	
Validate Case         05/01/2019         4 / 10         Review Saved Validation           04/01/2019         10 / 10         03/01/2019         5 / 10           02/01/2019         5 / 10         01/01/2019         5 / 10           01/01/2019         5 / 10         11/01/2018         5 / 10           11/01/2018         5 / 10         09/01/2018         5 / 10           08/01/2018         5 / 10         08/01/2018         5 / 10	neviewed cases	06/01/2019	24 / 10	2018-11	5 / 10	$\sim$
04/01/2019     10/10       03/01/2019     5/10       02/01/2019     5/10       01/01/2019     5/10       12/01/2018     5/10       10/01/2018     5/10       09/01/2018     5/10       08/01/2018     5/10       08/01/2018     5/10	Validate Case	05/01/2019	4 / 10		Review Saved Validation	
03/01/2019       5 / 10         02/01/2019       5 / 10         01/01/2019       5 / 10         12/01/2018       5 / 10         11/01/2018       7 / 10         09/01/2018       5 / 10         08/01/2018       5 / 10         08/01/2018       5 / 10		04/01/2019	10 / 10			
02/01/2019       5 / 10         01/01/2019       5 / 10         12/01/2018       5 / 10         11/01/2018       7 / 10         09/01/2018       5 / 10         08/01/2018       5 / 10         07/01/2018       5 / 10		03/01/2019	5 / 10			
01/01/2019       5 / 10         12/01/2018       5 / 10         11/01/2018       5 / 10         09/01/2018       5 / 10         08/01/2018       5 / 10         07/01/2018       5 / 10		02/01/2019	5 / 10			
12/01/2018     5 / 10       11/01/2018     5 / 10       10/01/2018     7 / 10       09/01/2018     5 / 10       08/01/2018     5 / 10       07/01/2018     5 / 10		01/01/2019	5/10			
11/01/2018     5 / 10       10/01/2018     7 / 10       09/01/2018     5 / 10       08/01/2018     5 / 10       07/01/2018     5 / 10		12/01/2018	5/10			
10/01/2018     // 10       09/01/2018     5/ 10       08/01/2018     5/ 10       07/01/2018     5/ 10		11/01/2018	5/10			
09/01/2018 5 / 10 08/01/2018 5 / 10 07/01/2018 5 / 10		10/01/2018	//10			
08/01/2018 5 / 10 07/01/2018 5 / 10		09/01/2018	5 / 10			
07/01/2018 5 / 10		08/01/2018	5 / 10			
		07/01/2018	5 / 10			

#### Pick random un-reviewed case

- Select a surgical service from the dropdown menu (optional)
- Select "Validate Case" at the bottom of the screen

🗠 Case Validation							×
O Pick case by MRN and	date	2019-10				0/1	0 ^
Patient MRN		2019-09				20 / 1	0
		2010-08				20 / 1	0
Date of Operation	10/15/2019	2013 00				2071	
O Pick case by case ID		2019-07				20 / 1	D
MPOG Case ID	0000000-0000-0000-000000000000000000000	2019-06				24 / 1	0
Pick random unreview	ed case	2019-05				4/1	U
		2019-04				10 / 1	0
Time Period	10/01/2019 0 / 10 ~	2019-03				5/1	0
Service Type	(Any) 🗸	2019-02				5/1	0
O Dick already reviewed	(Any)	Reviewed:	0	Total:	3134	^ <b>1</b>	0
Pick already reviewed	Cardiac	Reviewed:	0	Total:	86	1	0
Reviewed Cases	Dentistry	Reviewed:	0	Total:	15		_
	General	Reviewed:	0	Total:	222	1	0 ~
Validate Care	Medical - cardiology	Reviewed:	0	Total:	127		
validate case	Medical - gastroenterology	Reviewed:	0	Total:	34		'n
	Medical - hematology/oncology	Reviewed:	0	Total:	21		
	Medical - nephrology	Reviewed:	0	Total:	6		
	Medical - other	Reviewed:	0	Total:	9		
	Medical - pulmonology	Reviewed:	0	Total:	9		
	Neurosurgery	Reviewed:	0	Total:	90		
	Obstetrics / Gynecology	Reviewed:	0	Total:	151		
	Ophthalmology	Reviewed:	0	Total:	335		
	Oral / Maxillofacial	Reviewed:	0	Total:	46		
	Orthopedics	Reviewed:	0	Total:	233		
	Otolaryngology	Reviewed:	0	Total:	288		
	Plastics	Reviewed:	0	Total:	109		
	Podiatry	Reviewed:	0	Total:	2		
	Psychiatry	Reviewed:	0	Total:	68		
	Radiology - Unspecified	Reviewed:	0	Total:	100	$\sim$	

MULTICENTER PERIOPERATIVE OUTCOMES GROUP

# Pick a Case for Review: Picking an Already **Reviewed** Case

- Click the dial next to "Pick an already" reviewed case."
- Select a case from the dropdown menu. The date of operation and procedure type will display.
- Select "Validate Case" at the bottom of the screen.
- The Case Validation screen should display. At this point, you would verify that the case selected matches the case type that displays in the validator and begin case validation.

🍕 Case Validation			- 0	×
O Pick case by MRN and	date	2019-10	0 / 10	^
Patient MRN		2019-09	20 / 10	
Date of Operation	10/15/2019	2019-08	20 / 10	
O Pick case by case ID		2019-07	20 / 10	
MPOG Case ID	0000000-0000-0000-000000000000000000000	2019-06	24 / 10	
O Pick random upreview	ed care	2019-05	4 / 10	
	eu case	2019-04	10 / 10	
Time Period	10/01/2019 0 / 10 ··	2019-03	5 / 10	
Service Type	Medical - pulmonology	2019-02	5 / 10	
		2019-01	5 / 10	
<ul> <li>Pick already reviewed</li> </ul>	case	2018-12	5 / 10	
Reviewed Cases	v	2018-11	5 / 10	~
Validate Case	12/05/2017 MIDLINE CARDIAC PUMP AGE 0 MIDLINE ATRIAL SEPTAL DEFECT MIDLINE VENTRICULAR SEPTAL I MIDLINE PERFUSION CARDIAC	3M REPAI DEFECT REPAI		
	01/04/2018 BILATERAL BLEPHAROPLASTY			
	01/09/2018 UMBILICAL HERNIA REPAIR			



- Select a case using one of the previously described options
- The Case Validation questionnaire will display. For the purpose of this training exercise, the PHI was removed.

									_
🚭 MPOG Case Validation Utility						_		2	×
Case Lookup Information Patient MRN: Date of Operation: MPOG Case ID:					Ope MPOG	n Case Case V	in 'iewer		
Questions for Validation									
Case Information	lo Time Restriction					Add cor	nments l	here	^
Was the patient's name				Yes No					
Was the patient's age at the time of operation	1			🗌 Yes 🗌 No					
Is the admission type correctly mapped as 'Ou	utpatient'?			🗌 Yes 🗌 No					
Was the ASA physical status of the patient 'AS	A 2'?			Yes No					
Is the following procedure description correct UNKNOWN MUSCLE BIOPSY	?			🗌 Yes 🗌 No					
Was this procedure performed in procedure re	oom 'M-OR 07'?			🗌 Yes 🗌 No					
Are the following tags correct for procedure m Facility type - Acute care hospital Other - Mixed use operating room Other - Pediatric	oom 'M-OR 07'?			🗌 Yes 🗌 No					
Is the primary procedure service correctly map	oped as 'General'?			🗌 Yes 🗌 No					
Preop Fi	rom 4 Hours Before .	Anesthesia Start	t to Anesthesia Sta	rt		Add cor	nments I	here	
Was AACD Patient In Facility Date/Time at 12:	50?			🗌 Yes 🗌 No					
Perioperative Times     Fi	rom 4 Hours Before .	Anesthesia Start	t to Anesthesia En	d + 6 Hours		Add cor	nments I	here	
Was anesthesia start at '2020-03-05 14:19'? Save As Image				🗌 Yes 🗌 No	Save Ans	swers	Ca	incel	~



- You must answer every question with 'yes' or 'no' unless there is no data in which case the row for the question is highlighted in red.
- Compare questions against EHR. Please add comments as needed to explain any discrepancies.
- For issues that need follow- up from the site technical team or coordinating center, the "Save As Image" button is available to save a screenshot of the case. PHI will automatically be eliminated from the screenshot.
- A window will display asking you to save the image. The MPOG Case ID will automatically populate the File Name. Choose a file location where you will be able to access again. Click 'Save

File name:	MPOG CASE ID WILL POPULATE HERE.png		
ave as type:	Image files (*.png)		
Folders		Save	Cancel



• Tooltips are available by hovering over the "(i)". Tooltips provide more information regarding which concepts the question uses

<ul> <li>Intraop Staff</li> </ul>	No Time Restriction	Add comments here
Was there 1 anesthesiology attending(s) th	nat signed into this case?	📵 🗌 Yes 🗌 No
Was there 1 anesthesiology CRNA(s) that signed into this case?		Scans provider sign-ins for:
Was there 0 anesthesiology residents that signed into this case?		6000:Staff Level - Anesthesia Attending
Preop Physiologic	From 4 Hours Before Anesthesia Start to Anesthesia	Start Add comments here

Intraop Medications and Fluids     From Anesthesia Start to Patient Out of Room	Add comments here
Did the patient receive 300 ml of LACTATED RINGERS at 09:33?	9 Yes No
Did the patient receive a bolus total of 50 mg of PROPOFOL?	9 Yes No
Did the patient receive a bolus total of 50 mg of PROPOFOL?	9 Yes No
Did the patient receive a bolus tot Alphabetically last medication with a bolus do	ose. Note that this question may appear duplicated if there are few medications given on this case
Did the patient receive a bolus total of 50 mg of PROPOFOL?	9 Yes No



- May need 3-4 programs open at a time to verify the data in the MPOG case validator "matches" the information present in the hospital Anesthesia Information Management System (AIMS)
- It is recommended reviewers have 2 monitors/screens available for use
- Most likely will need intra-op record open on one screen and the MPOG case validator on the other
- The source of truth varies per institution depending on the electronic documenting system

- For example: At the University of Michigan Health System, multiple systems are used for case validation:
  - Centricity contains the Intra-op record, Anesthesia H&P, Case details.
  - Epic: Inpatient record, used for validation preop medications and admission status
  - Carelink: Previous EHR used for validating cases pre-dating Epic implementation.



- It may be useful to open the Case Viewer within the MPOG Suite to assist in the case review.
- To access from the Case Validation Utility screen, click on the 'Open Case in MPOG Case Viewer' tab at the top right hand of the screen. For further details on the Case Viewer, refer to Module 5

🍕 MPOG Case Validation Utility		- 🗆 X
Case Lookup Information Patient MRN: Date of Operation: MPOG Case ID:	09/20/2019 - 11:56	Open Case in MPOG Case Viewer
Questions for Validation		Enter Comments Below Here
Case Information	No Time Restriction	<u>^</u>

- If a case is missing information in the MPOG database for any reason, the case validator will highlight the row for that question in red and will not gray out the yes/no checkboxes.
- If multiple cases seem to be missing the same type of data, note the MPOG case IDs. This can indicate an extract issue or a documentation issue- discuss with the MPOG QI Coordinator to identify next steps. See example below.

Is the admission type correctly mapped as 'Inpatient'?	
Was the ASA physical status of the patient 'NOT FOUND'?	Yes No
ls the following procedure description correct? ESOPHAGOGASTRODUODENOSCOPY WITH FOREIGN BODY REMOVAL	Yes No
Was this procedure performed in procedure room 'M-PR 01'?	Ves No
Are the following tags correct for procedure room 'M-PR 01'? Facility type - Acute care hospital Other - Mixed use operating room Other - Pediatric Service specific room - Endoscopy	☐ Yes ☐ No
Is the primary procedure service correctly mapped as 'Medical - gastroenterology'?	Ves No
Preop     No Time Restriction	Add comments here
Nothing found	
Perioperative Times     No Time Restriction	Add comments here
Was anesthesia start at 'NOT FOUND'?	Yes No
Was surgical incision at 'NOT FOUND'?	Yes No
Was the patient transferred somewhere other than the recovery room?	Yes No
Was anesthesia end at 'NOT FOUND'?	Yes No
Intraop Staff     No Time Restriction	Add comments here



- After all questions are answered for the selected case, click the "Save Answers" button in the bottom right corner of the screen.
- Once the case has been submitted, there is no way to go back and make change to the form.
- Once the case is open, you must complete it as the information will not be saved if the case is closed before submitting.

Is the	Is the primary procedure service correctly mapped as 'Ophthalmology'?									
Θ	Ргеор	From 4 Hours Before Anesthesia Start to Anesthesia	Add comments here	Add comments here						
Was A	AACD Patient In Facility Date/Time at 0	7:58?	🗌 Yes 🗌 No							
Θ	Perioperative Times	From 4 Hours Before Anesthesia Start to Anesthesia I	Add comments here	Add comments here						
Was a	anesthesia start at '2020-03-10 09:11'?		🗌 Yes 🗌 No							
14/		,			$\sim$					



This will automatically save and update the monthly count for cases reviewed in the 'Overall Progress' section as seen below.

Pick a case for review			
Use the following options	Overall Progress		
Pick case by MRN and	l date	2016-03	0 / 20
D .: MDN		2016-02	20 / 20
Patient MRN		2016-01	21/20
Date of Operation	3/24/2016	2015-12	20 / 20
Pick case by case ID		2015-11	20 / 20
MBOG Care ID		2015-10	20 / 20
MPOG Case ID	0000000-0000-0000-000000000000000000000	2015-09	20 / 20
Pick random unreview	ved case	2015-08	20 / 20



• To review a summary of past case validations, use the "Review Saved Validation" button. First, click the month that you want to see. Then, click "Review Saved Validation

🔹 Case Validation			- 0	×
O Pick case by MRN and	d date	2019-10	0 / 10	,
Patient MRN		2019-09	20 / 10	
Date of Operation	10/15/2019	2019-08	20 / 10	
• Pick case by case ID		2019-07	20 / 10	
MPOG Case ID	0000000-0000-0000-000000000000000000000	2019-06	24 / 10	
Pick random unreview	ved case	2019-05	4 / 10	
0		2019-04	10 / 10	
Time Period	10/01/2019 0 / 10 🗸	2019-03	5 / 10	-
Service Type	(Any) v	2019-02	5 / 10	
-		2019-01	5 / 10	
<ul> <li>Pick already reviewed</li> </ul>	case	2018-12	5 / 10	
Reviewed Cases	~	2018-11	5 / 10	_
Validate Case			Review Saved Validation	



 This screen will appear with a summary of the case validation questions and counts of the number of cases that month that had the question answered "No" and the number of cases with comments

🍪 Validation for the month of 09-2019					- 🗆 ×
	🗌 Hide p	assing questions			Hide passing questions
Question	No / Missing	Comment	Date Reviewed	Question	Response Comment MPOG Case ID
Admission Type Mapping		^			
Anesthesia Technique: General					
Anesthesia Technique: Neuraxial					
Arterial Line					
ASA Status	1	1			
BP Baseline					
BP Systolic (Highest)	1	1			
BP Systolic (Lowest)	1	1			
Inhalational Agents					
Med Total					
Med Total: Bolus 1	2	2			
Med Total: Bolus 2					
Med Total: Largest Bolus		~			

👒 Validation for the month of 09-2019 — 🗆 🗙								
	[	Hide pa	ssing questions				🗆 Hi	ide passing questions
Question	No / Miss	ing	Comment	Date Reviewed	Question	Response	. Commer	nt MPOG Case ID
Administry Trues Manualism			~	10-01-2019 08:16	Was the ASA physical status of the patient 'ASA 2'?	Yes		0c2a355f-66d3-e§
Admission Type Mapping				10-01-2019 08:20	Was the ASA physical status of the patient 'ASA 1'?	Yes		8d4bf143-5bd2-e
Aposthosia Tashnigua: Conoral				10-01-2019 08:31	Was the ASA physical status of the patient 'ASA 3'?	Yes		d14bf143-5bd2-e
Anestnesia lechnique: General				10-01-2019 08:47	Was the ASA physical status of the patient 'ASA 3'?	Yes		064ef143-5bd2-e
Aposthosia Tashpiguar Nauravial				10-01-2019 11:13	Was the ASA physical status of the patient 'ASA 4'?	Yes		ab4df143-5bd2-e
Anestnesia lechnique. Neuraxiai				10-01-2019 11:20	Was the ASA physical status of the patient 'ASA 2'?	Yes		964bf143-5bd2-e
Artorial Line				10-01-2019 11:25	Was the ASA physical status of the patient 'ASA 1'?	Yes		cb29355f-66d3-e!
Arterial Line				10-01-2019 11:28	Was the ASA physical status of the patient 'ASA 3'?	Yes		c34bf143-5bd2-e!
ASA Status		1	1	10-01-2019 11:31	Was the ASA physical status of the patient 'ASA 3'?	Yes		c64bf143-5bd2-e!
ASA Status		1		10-01-2019 11:42	Was the ASA physical status of the patient 'ASA 4'?	Yes		814bf143-5bd2-е
PD Pasolino				10-01-2019 11:44	Was the ASA physical status of the patient 'ASA 3'?	Yes		b34df143-5bd2-e
br baseline				10-01-2019 11:53	Was the ASA physical status of the patient 'ASA 2E'?	Yes		344bf143-5bd2-е
PD Systelia (Highest)		1	4	10-01-2019 12:01	Was the ASA physical status of the patient 'ASA 3'?	Yes		6829355f-66d3-e!
br Systolic (righest)		1		10-01-2019 12:12	Was the ASA physical status of the patient 'NOT FOUND'?	Missing	ASA 2	0aac178f-2fd4-e9
PD Systelia (Lawast)		1	1	10-01-2019 12:22	Was the ASA physical status of the patient 'ASA 2'?	Yes		424bf143-5bd2-e
BP Systolic (Lowest)		1		10-01-2019 12:55	Was the ASA physical status of the patient 'ASA 3E'?	Yes		5d7dd3b9-f8d4-e
Inhalational Agents				10-01-2019 01:01	Was the ASA physical status of the patient 'ASA 2'?	Yes		1a2a355f-66d3-e!
Innalational Agents				10-01-2019 01:10	Was the ASA physical status of the patient 'ASA 2'?	Yes		122a355f-66d3-e!
Mad Tatal				10-01-2019 01:15	Was the ASA physical status of the patient 'ASA 2'?	Yes		3d4df143-5bd2-e
wed total				10-01-2019 01:20	Was the ASA physical status of the patient 'ASA 3'?	Yes		b04bf143-5bd2-e
Med Total: Bolus 1		2	2					
Med Total: Bolus 2								
Med Total: Largest Bolus			~					

- Clicking on a question will bring up more information on the case validation answers for each case.
- You can use his screen to find cases with "No" answers for further review. To hide the "Yes" answers, click "Hide passing questions".
- Double click on any MPOG Case ID to open the case in Case Viewer
- Look for trends in issues, such as date of the case. This can be helpful when identifying issues with the data.





# Module 8 PHI Scrubber



### PHI Scrubber Overview

- Allows sites to remove staff and patient identifiers before transferring data to the MPOG Central database
- Must be executed before each transfer



# PHI Scrubber Dictionary

- Several dictionaries have been preloaded into the application including a list of the most common first and last names from the US Census Bureau and the Snomed dictionary to identify healthcare terminology that should remain with the transfer.
- The site technical team must load the local institution-specific provider names and identifier dictionary to allow scrubbing of staff identifiers.
- It is important to note that though the PHI Scrubber will remove as many identifiers as it detects, there will always be a minimal (non-zero) risk of identifiers transferring via free text notes.



# Accessing the PHI Scrubber



MULTICENTER PERIOPERATIVE OUTCOMES GROUP

Last Updated: 3/19/2020

# **PHI Scrubbing Options**

- Three options for selecting a 'Case Set' to be scrubbed
  - PHI scrub all cases (Including previous cases already PHI scrubbed): Allows users to scrub all cases including those that have been scrubbed in the past.
  - Cases Waiting for PHI scrub: Allows users to scrub only those cases marked as needing to be scrubbed.
  - **Specific Case:** Allows users to scrub a single case using the MPOG Case ID. A date range should not be selected for scrubbing a single case.
- Date Range: Selecting a date range is optional but is often used to assist with limiting the scrubbing procedure to only those cases the user wishes to transfer. Again, a 'Case Set' must be selected in addition to a date range in order to proceed with the scrubbing process.


# Initiating PHI Scrubber

- Once the case set is selected, click 'Start PHI Scrubbing' to start the process.
- There are options to 'Pause' or 'Stop' PHI Scrubbing.
  - If pausing the PHI Scrubber, the application must remain open in order to 'un-pause' and restart the scrubbing process.
  - If for some reason, the user exits out of the application while 'paused,' the Case Set and Date Range (if applicable) will need to be selected again to continue scrubbing.





## **PHI Scrubbing**

• The Progress Bar displays the percent complete and number of cases completed. The tool also assigns an Estimated Time Remaining to the job.

PHI Scrubber	Configuration	PHI Scrubber Sample Testing	
Case Set:	O PHI scrub al	cases (Including previous cases already P	HI scrubbed)
	O Cases Waitir	g for PHI scrub	
	O Specific Case	Enter MPOG_Case_ID here	
(optional)	☑ To: 1/	/2017 15	
Start PHI S	Crubbing	Pause PHI Scrubbing Stop PHI Sc	rubbing
Progress: 2%	6 (36 of 1240 ca	es completed) Estimated	d Time Remaining:

Contact: <a href="mailto:support@mpog.zendesk.com">support@mpog.zendesk.com</a>

OUTCOMES GR

### **AIMS Dictionary Configuration**

- The Configuration tab provides access to the AIMS PHI Dictionary and allows you to search through several dictionaries to establish what words/strings should be considered PHI and removed, and which should remain.
- The AIMS PHI Dictionary should be previously loaded by your designated technical team and consists of all institution-specific provider names and identifiers.
- The purpose of the institution specific provider PHI dictionary is to allow the PHI scrubbing process to remove provider names or identifiers that you do not want included in your MPOG contribution.
- Although the scrubbing algorithm can use MPOG dictionaries to remove nationally known common names (e.g. Kevin), local dictionaries are needed for uncommon names (e.g. Sachin).





- To search specific strings, select 'All Search Strings' and then click 'Search' to display the list of strings in your local database. Each institution must determine what provider information they are comfortable leaving in their database (i.e. provider numbers, initials, clinical terms, etc.)
- **Note:** If the custom search string checkbox is not selected, the program will display all the words found in the dictionary for the selected categories.





- If 'Search String' is selected, the program will search the selected categories for the specified search string indicated.
- To remove a string from the AIMS PHI Dictionary, simply highlight the desired string and click 'Remove from AIMS Dictionary.'
- Assess the list to determine which terms are common words that you want to keep.
- For example, you may have a provider name of "Pain," you must determine the research value vs. privacy risk

 Clinical terms will need to be removed from the local dictionary. All instances of clinical terms such as Miller and Macintosh will not be scrubbed unless it is the patient's name.





- The 'Compare provider strings to common words' function searches through the preloaded dictionaries to identify PHI, which strings should be removed, and which strings should be kept.
- Once you have removed all terms in your local dictionary, click on 'Compare provider strings to common words.'
- This will compare the provider names in your local dictionary to clinical terms which are listed in Snomed (such as CRNA, attending, and Miller).



- The MPOG PHI Dictionary can also be tested to identify medical terminology and provider names already existing in the default dictionary.
- The MPOG Dictionary includes:
  - US Census: Includes all common first and last names (strings to remove)
  - Snomed: Includes comprehensive list of medical terms (strings to keep)
  - Common Perioperative Terms and Acronyms (strings to keep)



- To test the 'Configuration' function, select the 'Configuration' tab at the top.
- Select 'First Names' and 'Last Names,' then click 'Search.'
- Provider names from the PHI dictionary should display in the Results section as shown below.
- If the Results display is empty, contact your technical team to load your local PHI dictionary data.

HI Scrubber Configuration P	HI Scrubber Sample Testing			
AIMS PHI Dictionary Search Search strings: All Search St Ste Commo V First Names Identifiers (p Initials Search Strin Search	trings moords (words to not remove) provider #, user IDs) g:	Type:	Compare provider strings to com Select Type  Add to AIM Remove from A	non words S Dictionary AIMS Dictiona
String	String Type		String Type Description	
Bassin	19018		PHI Dictionary - Staff Last Nam	es
			1	
Bassiony	19018		PHI Dictionary - Staff Last Nam	es
Bassiony *	19018 '''		PHI Dictionary - Staff Last Nam	es 🔸
Bassiony	19018 III Ind provider name strings Ferms g:		PHI Dictionary - Staff Last Nam	es +
Bassiony	19018 III nd provider name strings Ferms g: String Type		PHI Dictionary - Staff Last Nam	es 🛛 🕨
Bassiony	19018 m nd provider name strings Ferms g: String Type 19003		PHI Dictionary - Staff Last Nam String Type Description	es 👘 🕨



# PHI Scrubber Sampling Test

- The 'PHI Scrubber Sample Testing' runs scrubbing logic for a given sample string and categorizes each word.
- This function is used to run a test string to determine if identified PHI information (in this case, staff names) will be properly excluded.

you do not a	associate the test string	with an MPOG case, no patient-specific data will	be removed.	
Associat	te with an MPOG case:	Enter MPOG_Case_ID here		
Show w	hitespace and delimite	rs.		
Source Wor	d Rule T	riggered	Resulting Word	
Dr	Keep b	ecause word is commonly found in medical notes	s Dr	
Reed	Remov	e because word is a known first or last name	[PHI]	
is	Keep b	ecause word is a common 1 or 2 letter word	is	
a	Keep b	ecause word length < 3	a	
good	Keep b	ecause word is commonly found in medical note	s good	
doctor	Keep b	ecause word is commonly found in medical note	s doctor	
a	_			•
lesulting Str	ing: Dr. [PHI] is a goo	od doctor		

PHI Scrubber Logic will display included and excluded variables within your test string phrase, indicating PHI has been removed as displayed in the 'Resulting String.' A grid will display the following elements:

- Source Word: Original word(s) entered into the 'Test String' prior to PHI removal
- **Rule Triggered:** The reason why the word was or was not removed
- **Resulting Word:** The word(s) after 'PHI Scrubber Logic' has been applied and PHI has been removed
- Note: Clinical terms will need to be removed from the local dictionary. All instances of clinical terms such as Miller, Macintosh, and Brown will not be scrubbed unless it is the patient name.

	Rule Triggered	Resulting Word	
Dr	Keep because word is commonly found in medical notes	Dr	
Reed	Remove because word is a known first or last name	(PHI)	
is	Keep because word is a common 1 or 2 letter word	is	
a	Keep because word length < 3	ā	
good	Keep because word is commonly found in medical notes	good	
doctor	Keep because word is commonly found in medical notes	doctor	



#### Associate with an MPOG Case

- You can also run a 'Test String' against a specific case to ensure PHI is being scrubbed from cases.
- This allows users to enter a valid case ID, which will run the results of the' PHI Scrubber' process.
- Without associating with an MPOG case, no patient specific data scrubbing can be tested. Only name strings in the US Census Bureau and MPOG staff identifier list would be removed. If there is patient PHI in the test string that is not a common name or institution-specific staff name, association with an MPOG case will show the patient name and will not be scrubbed.



#### Associate with an MPOG Case

- Select 'Associate with an MPOG case' then click 'Test.'
- The MPOG case ID can be obtained from the MPOG case viewer application.
- 'Show whitespace and delimiters' displays the whitespace and the delimiter characters that were present in the test string as words in the Results data grid.

M PHI Scrubbe	er		
PHI Scrubber	Configuration	PHI Scrubber Sample Testing	
Runs PHI scru	ubber lo <mark>gic f</mark> or a	given sample string and explains what was done with each word	in the string
Test String:			Test
If you do not	associate the te	st string with an MPOG case, no patient-specific data will be rem	oved.
Associa	ate with an MPO	G case: Enter MPOG_Case_ID here	
Show v	vhitespace an <mark>d</mark> d	elimiters	



#### Associate with an MPOG Case

M PHI Scrubber		
PHI Scrubber Configuration	PHI Scrubber Sample Testing	
Runs PHI scrubber logic for a	given sample string and explains what was done with each	h word in the string
Test String: Dr. miller used	propofol for sedation.	Test
If you do not associate the te	st string with an MPOG case, no patient-specific data will b	be removed.
Associate with an MPO	G case: Enter MPOG_Case_ID here	
Show whitespace and c	Jelimiters	
Source Word	Rule Triggered	Resulting Word
Dr	Keep because word is commonly found in medical notes	Dr
	Whitespace/Delimiter	
	Whitespace/Delimiter	
miller	Keep because word is commonly found in medical notes	miller
	Whitespace/Delimiter	E
used	Keep because word is commonly found in medical notes	used
	Whitespace/Delimiter	
propofol	Keep because word is commonly found in medical notes	propofol
	Whitespace/Delimiter	
for	Keep because word is commonly found in medical notes	for
4	Whitespace /Delimiter	
Resulting String: Dr. miller	used propofol for sedation.	

MULTICENTER PERIOPERATIVE OUTCOMES GROUP

Last Updated: 3/19/2020



# Module 9 Transfer to MPOG Central



#### Transfer to MPOG Overview

- Exports cases from your Local MPOG database and sends them to the MPOG Central Repository
- A 'Test Transfer' of your local data to 'MPOG Central' is required prior to the initial 'Production Transfer.'
- MPOG QI Coordinators will assist you with initial upload to the MPOG Central TEST and Production environments.
- Prior to transferring data to MPOG Central, PHI Scrubbing must occur. Refer to 'Module 8: PHI Scrubber' for more details on how to complete the scrubbing process.



## Accessing Transfer to MPOG Central





### Transferring to MPOG Central – **TEST** Environment

- Test environment allows sites to transfer data to the Coordinating Center without impacting the larger production data set used for research and quality improvement activities.
- A QI Coordinator will direct the transfer process for initial upload.
- Open the 'Database Selection' dropdown window and select the 'Developer (Use for testing)' option.

og WDC	)G Uploader	-	×
Upload	Status		
Datal	pase Selection		
Dev	eloper (Use for testing)		~
Pro	duction		
- Dev	eloper (Use for testing)		



#### Ensure the following selections have been made prior to beginning the transfer process (The QI Coordinator will advise on the date range to transfer for initial upload)

 Once cases have processed in Central, a QI Coordinator will review your data and contact you with how to proceed.

🚭 MPOG Uploader 🛛 🚽	
Upload Status	
Database Selection	
Developer (Use for testing)	v
Case Selection	
There are 484966 cases that need to be PHI scrubbed. Cases awaiting upload	0
<ul> <li>Cases awaiting initial upload</li> <li>Cases awaiting re-upload</li> <li>All cases (including those already uploaded)</li> </ul>	0
✓ Specify Date Range	
From 10/1/2019 To 10/31/2019 15	2
Blinded Record Index Note: You must be running a BRI service in order to us	e this.
Create/update the blinded record index for this pa Update BRI only (Do not upload case data)	atient
Table Selection (applicable to cases being re-uploaded	only)
✓ Billing       ✓ Lab Values       ✓ Physiologic         ✓ Case Info       ✓ Medications       ✓ Preop         ✓ Input Outputs       ✓ Mortality       ✓ Registry Da         ✓ Intraop Notes       ✓ Outcomes       ✓ Sites         ✓ Intraop Staff       ✓ Patients	ata
Use Stored Modularity Only	
Start Transfer	



#### Transferring to MPOG Central – **PRODUCTION** Environment

- Note: An MPOG QI Coordinator or MPOG Director must approve first upload to the MPOG Central Production Environment. Please contact the Coordinating Center for directions on how to execute your first transfer to production.
- Open 'Transfer to MPOG Central' in the MPOG Suite.
- In the Database Selection window, check that the default selection for 'Production' is highlighted in the dropdown menu.

ଣ୍ଟି MPC	)G Uploader	_	×
Upload	Status		
Data	base Selection		
Pro	duction		~
Pro	duction		
( Dev	eloper (Use for testing)		



Next, ensure the following selections have been made prior to beginning the production transfer process and select 'Start Transfer:'

📽 MPC	OG Uploa	ader					—		×
Jpload	Status	]							
Datab	oase Sele	ection –							
Pro	duction								2
Case	Selection	n							
There © C	e are 484 Cases awa	4966 cas aiting up	es that pload	need to b	be PH	l scrub	bed.	2004	
	ases aw ases aw II cases	aiting in aiting re (includir	-upload -upload ng those	already i	uploa	ded)		0 2004 2143	
□ S Fro	om Sele	o <mark>ate Ran</mark> ect a dat	<b>ge</b>	To Sel	lect a	date	15		
Blinde Note:	ed Recor : You mu	rd Index ist be ru	nning a	BRI servi	ce in	order t	o use t	his.	
	Create/up Update	pdate th BRI only	e blinde (Do not	d record	inde: case	k for th data)	is patie	ent	
Table	Selectio	on (appli II	cable to	cases be	ing re	e-uploa	ided o	nly) —	
	Billing Case Inf Input Or Intraop Intraop	o [ utputs [ Notes [ Staff [	Lab Medi Mort Outc Patie	/alues ications ality omes nts		Physiol Preop Registr Sites	logic y Data		
<b>√</b> I	Jse Stor	ed Mod	ularity	Only					
			S	tart Trans	fer				



After clicking 'Start Transfer' a window will display the date range and case count that you have selected for upload. Review the attestation on the left – If all four items have been completed, select 'Submit Data' to begin transfer.

🧐 Upload Agreement				×
By clicking "Submit Data", you attest the following:	Month	Case Count	Date Range	
<ol> <li>That you have PHI scrubbed your data to comply with the Multicenter Perioperative Outcomes Groups guidelines and that your data constitute a limited dataset.</li> <li>2) That you have Institutional Review Board approval from your institution to submit this data and that this approval has not lapsed or otherwise expired.</li> <li>3) That you are submitting these data to the Multicenter Perioperative Outcomes Group of your own volition. These data may be removed from the central database at any time, upon request.</li> <li>4) That you have followed all guidelines detailed elsewhere, including but not limited to the Data Use Agreement(s) between your institution and the University of Michigan.</li> </ol>	2/1/2019	7,633	2/1/2019 to 2/28/2019	
		[	Submit Data Canc	el



### Resubmitting Data for Transfer to MPOG Central

 Occasionally, specific data type and/or date range may require re-submission to MPOG Central due to changes that were made in your site's MPOG local database after the previously scheduled monthly data upload (i.e. 'Billing' or 'Intraop Notes'



To resubmit data, such as 'Billing' to MPOG Central, ensure the following selections have been made in the MPOG Uploader window prior to beginning the production transfer process:

Production	
Production	
Case Selection	
There are 21506 cases that need to be PHI scrubbed.	
Cases awaiting upload	649
Cases awaiting initial upload	0
Cases awaiting re-upload	649
<ul> <li>All cases (including those already uploaded)</li> </ul>	808
✓ Specify Date Range	
From 3/1/2018 To 3/31/2018	
	2
Blinded Record Index	
Note: You must be running a BRI service in order to u	se this.
Create/update the blinded record index for this p	atient
Update BRI only (Do not upload case data)	
Table Selection (applicable to cases being re-uploade	d only)
	u u,,
C Rillian Lab Values D Bhusialan	-
Billing Lab values Physiolog     Case Info     Medications     Preon	IC
Input Outputs     Mortality     Registry	lata
Intraop Notes Outcomes Sites	
Intraop Staff Patients	



# Blinded Record Index (BRI)

- Approved by the federal government registries manual as non-PHI
- BRI is a method of using a secure hashing algorithm to match PHI data sets without actually sharing any PHI
- This can allow data systems to match patients without the risk of sharing protected patient information
- For more information on how BRI works, visit our website.

# **BRI Uploading**

- Use the MPOG Uploader to BRI your data
- In the Blinded Record Index section, make selections based on whether you are blinding historical or new data (see next slide)
- Uploading all case data will take longer than updating BRI only
- If there are no changes to the data the require re-upload, we recommend that you be sure to select the "Update BRI only" box



#### Historical Upload

🖏 MPOG Uploader 🦳 —		×		
Database Selection				
Production		~		
Case Selection				
There are 10564 cases that need to be PHI scrubbed. Cases awaiting upload	57749			
<ul> <li>Cases awaiting initial upload</li> </ul>	2			
Cases awaiting re-upload     All areas (including theory closed out)	57747			
<ul> <li>All cases (including those already uploaded)</li> </ul>	66431			
Specify Date Range				
From 1/1/2019 15 To 8/31/2019 15	]			
Note: You must be running a BRI service in order to use this. Create/update the blinded record index for this patient Update BRI only (Do not upload case data)				
- Table Selection (applicable to cases being re-uploaded only)				
Select All				
✓ Billing ✓ Lab Values ✓ Physiologic				
Case Info Medications Preop				
Input Outputs V Mortality Registry Data				
✓ Intraop Notes ✓ Outcomes ✓ Sites				
Use Stored Modularity Only				
Start Transfer				

#### Monthly Upload

🥵 MPOG Uploader — 🗌 🗙				
- Database Selection				
Database Selection				
Production				
Core Selection				
Case Selection				
There are 8517 cases that need to be PHI scrubbed.				
Cases awaiting upload     13//09     Cases awaiting initial upload     70000				
Cases awaiting initial upload 79962				
Cases awarding re-upload     S/14/     All cases (including those already uploaded)     238351				
From 1/1/2019 15 To 8/31/2019 15				
Blinded Record Index				
Note: You must be running a BRI service in order to use this.				
✓ Create/update the blinded record index for this patient				
Update BRI only (Do not upload case data)				
Table Selection (applicable to cases being re-uploaded only)				
Billing     Disk Values     Developing				
Case Info Medications Preop				
Input Outputs Mortality Registry Data				
Intraop Notes Outcomes Sites				
Intraop Staff Patients				
✓ Use Stored Modularity Only				
Start Transfer				

# **BRI Upload Tracking**

• Once you select 'start transfer', a status bar will appear with an estimated processing time.

🍕 Uploading data to MPOG Central Staging Area 🛛 🚽 🗌					×	
Progress						
						3%
Status:	Uploading BRI					
Cases Transferred:	66 of 2000 (0 to re	etry)				
Time Remaining:	49 min					
		Stop Transfer		Pause Ti	ransfer	



A status tab located in the MPOG uploader which displays which cases have been uploaded versus what cases have a blinded record index.

🖁 MPOG Uploade	r			—	
Ipload Status					
Cases					
Month	Total	To Scrub	Never Sent	To Resend	
September 2019	1,578	1,578	1,578	0	~
August 2019	8,682	0	1	228	
July 2019	8,603	0	0	960	
June 2019	8,070	0	36	903	
May 2019	8,397	0	0	1,647	
April 2019	8,764	0	0	1,074	
March 2019	7,851	0	0	1,789	
February 2019	7,633	0	0	1,173	
January 2019	8,431	0	0	847	
December 2018	7,161	0	0	1,757	
November 2018	8,133	0	0	211	
October 2018	8,617	0	0	1,525	
Sentember 2018	7 397	0	0	1 978	~
BRI					
Month	Total	Sent N	ot Sent		
September 2019	1,578	0	1,578		~
August 2019	8,682	7,446	1,236		
July 2019	8,603	8,603	0		
June 2019	8,070	1,992	6,078		
May 2019	8,397	2,134	6,263		
April 2019	8,764	7,406	1,358		
March 2019	7,851	7,850	1		
February 2019	7,633	1,908	5,725		
January 2019	8,431	2,026	6,405		
December 2018	7,161	7,121	40		
November 2018	8,133	7,158	975		
October 2018	8,617	1,922	6,695		
Sentember 2018	7 307	1 500	5.888		~





# **Module 10** Content Synchronization



#### **Content Synchronization Overview**

- Allows you to synchronize or apply changes to content such as new concepts and PHI terminology within your local database.
- MPOG recommends performing 'Content Synchronization' on a monthly basis.
- You may also be advised by the Coordinating Center to perform 'Content Synchronization' to pull over specific content to continue mapping new variables or update diagnostics.
- The MPOG Quality Improvement Coordinators will notify you when 'Content Synchronization' is required outside of the monthly recommendation.



### Accessing Content Synchronization

🤹 MPOG Application Suite	– 🗆 X
MULTICENTER PERIOPER OUTCOMES GROUP	Edit Connections About Connection: import manager
Case Viewer	Concept Browser
Variable Mapping	STS Import Disabled due to insufficient rights or missing connection.
NSQIP Import Disabled due to insufficient rights or missing connection.	PHI Scrubber
Data Diagnostics	Case Validation
Transfer to MPOG Central	Batch MRN Lookup
Content Synchronization	Research Data Cleaning Disabled due to insufficient rights or missing connection.
Location Mapping	Provider Contacts
Import Manager Assistant	Case Viewer V2 (Beta)

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### **Content Synchronization**

• A notification ball will appear on the "Content Synchronization" button if any new content is available





• This window will open in 'Content Synchronization.' Using the default settings seen below, select 'Synchronize Content.'

S MPOG A	pplication Suite
	MULTICENTER PERIOPERATIVE       Edit Connections         OUTCOMES GROUP       About
l í	Content Synchronization
	MPOG Content
	MPOG will occasionally update the content it provides, such as new concepts and PHI terms. To make sure the content of your database is up to date, click on the button below.
Disabled o	Items to retrieve:
	<ul> <li>MPOG Diagnostic Metadata</li> <li>MPOG Lab Variables</li> <li>MPOG Concepts</li> <li>MPOG Location Tags</li> <li>MPOG Enumerations</li> <li>MPOG PHI Dictionary</li> </ul>
Trai	Synchronize Content
Con	tent Synchronization Research Data Cleaning Disabled due to insufficient rights or missing connection.
L I	ocation Mapping Provider Contacts



- Once you have selected 'Synchronize Content,' retrieving content will begin and systematic downloading of new content will occur.
- Once the content retrieval process has completed, you will notice a 'finished' comment in the 'Retrieving Content' window, indicating 'Content Synchronization' was successful.

M Retrieving Co	ntent			
Please wait until this process completes.				
Concepts	Finished!			
Lab Variables	Finished			
PHI Dictionary	Finished			
Enumerations	Finished			
Diagnostics	Finished			
	Close			





# Module 11 Provider Contacts Tool


#### Provider Contacts Overview

- Allows ASPIRE sites to update provider information for the purpose of sending feedback emails.
- If opting out of ASPIRE and the feedback emails, the Provider Contacts tool does not need to be populated.
- The Provider Contacts tool cannot be populated until data has been submitted to MPOG Central. There will be no case information available until a site has successfully transferred to the Coordinating Center.



### **Accessing Provider Contacts**



 Can access via the MPOG Suite or this link <u>https://www.aspirecqi.org/A</u> <u>ppSuite//UserManagement/I</u> <u>ndex/</u>



MULTICENTER PERIOPERATIVE OUTCOMES GROUP
Login to MPOG
Log in with your username and password below.
Lusername
A Password
<b>⊖</b> Login
Forgot your password?
Powered By C careevolution
An audit trail of all user activity is maintained for this system as it provides access to protected health
information. Authorized access is limited only to those with a need to know for the purposes of patient
care, billing, medical records review, or quality assurance.

- Clicking on the link will open the login screen.
- An additional level of access is needed to populate the User Management Tool.
- If your ASPIRE username and password does not work at this point, please contact the coordinating center (<u>support@mpog.zendesk.com</u>) to obtain access.



- The AIMs Staff ID, First Case Date, Last Case Date, Case Count, Mapped Staff Role, and Staff Role columns of the User Management Tool (Provider Contacts) will be auto-populated based upon case information in the MPOG database.
- The technical team lead at your site should be able to assist with pulling the corresponding names for the AIMS Staff IDs listed.

Provider Contac	vider Contact Information User Management Tool													
Institution													Excel /	CSV Import Batch Activation
Show 10 v entries at a time	e Export -									Search: Ser	d Feedback?: All 🗸	Role: Attending/Resident/Fellow/CRNA -	Show all AIMS_	Staff_IDs •
□ ↓† Send Feedback?	↓↑ AIMS Staff ID	1 First Case Date	ل≣ً Last Case Date	<b>↓</b> ↑ Case Count	$\downarrow \uparrow $ Mapped Staff Role	<b>↓</b> ↑ Staff Role	1 First Name	1 Last Name	1 Email Address	↓† NPI	↓↑ TIN (Op	t.) 🛛 👫 Specialty Dashboards	J↑ MOCA4	↓↑ Account Status
Yes		5/4/2018	10/31/2020	885	Anesthesia Resident	Anesthesia Resident					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		3/19/2018	10/31/2020	1752	CRNA	CRNA					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		5/7/2018	10/31/2020	912	Anesthesia Resident	Anesthesia Resident					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		7/26/2017	10/31/2020	1935	Anesthesia Attending	Anesthesia Attending					Click to Edit	Pediatric, Obstetric, Cardiac	Yes 🕄	Activated
Yes		7/1/2016	10/31/2020	3823	Anesthesia Attending	Anesthesia Attending					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		1/6/2004	10/31/2020	8859	Anesthesia Attending	Anesthesia Attending					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		12/13/2004	10/31/2020	5244	CRNA	CRNA					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		7/2/2014	10/31/2020	3938	Anesthesia Attending	Anesthesia Attending					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		6/15/2016	10/31/2020	5502	Anesthesia Attending	Anesthesia Attending					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		5/3/2017	10/31/2020	1252	Anesthesia Resident	Anesthesia Resident					Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated

Showing 21 to 30 of 1,385 entries (filtered from 1,413 total entries)





#### Mass Import

• To send the technical lead a list of the AIMS Staff IDs to obtain the corresponding first and last names, it may be useful to **export** the current list from the Provider Contacts tool. To do so, click on *'Export,'* and then *'Import Template Format' (CSV or Excel)*.



*The "All Columns" options will export all columns in the provider contact tool and should be used to obtain information only. The 'all columns' format will not work when trying to import first/last names and NPI numbers into the provider contacts tool.

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#### Mass Import

- Update the template with the provider information and save to your computer.
- Open the saved document using the "Excel/CSV Import" button. Select the format you wish to use for import. The
  import tool will only accept files using one of these two templates. Errors will result from using a modified version
  of either of these templates

		Excel	/ CSV li	mport	Batch Ac	tivation
NA 🕶	Show	w all AIMS	S_Staff_	IDs 🕶		

• Return to the Excel/CSV Import page, select 'Browse' and locate the file on your computer and click 'Open.'



• The Provider Contacts tool will begin to update information from the selected file and will notify of any errors. Correct any errors as needed and then click 'Submit.'

Contact: support@mpog.zendesk.com



OUTCOMES GRO

#### Some sites have a single AIMS variable for anesthesia providers that is then mapped to the MPOG staff role concept: Staff Level – Unable to Determine Anesthesia Provider.

- In these instances, MPOG will display 'Unknown' in the 'Mapped Staff Role' column and rely on the site to populate the actual staff role in the seventh column.
- This column allows for provider feedback to include comparisons by role.



# • If the 'Staff Role' and the 'Mapped Staff Role' columns match and are indicative of the providers' actual roles in the clinical setting, no additional entry is required for the 'Staff Role' column.

• If the 'Mapped Staff Role' column is displaying <u>incorrectly</u> for a provider, you can update the 'Staff Role' directly within the user management tool (i.e. if the mapped staff role displaying for a CRNA is "Attending") you can update it to read "CRNA" under the staff role column.



### Managing Feedback Email Recipients

- An 'Active' provider is defined as one who receives feedback emails.
- To update a provider's status to Active or Inactive, click the selection box on left hand side.
- A prompt will then show in the bottom left corner where you can click Yes or No to update provider status





• You can change the status for multiple providers by selecting multiple rows or select all rows by clicking the top box next to "Send Feedback"

Show 10 ~ entries at a time	e Export -									Search:	Send Feed	Iback?: All - Ro	ole: Attending/Resident/Fellow/CRNA -	Show all AIMS	S_Staff_IDs ◄
□ ↓† Send Feedback?	1 AIMS Staff ID	1 First Case Date	<b>↓F</b> Last Case Date	Case Count	Mapped Staff Role	1 Staff Role	First Name	11 Last Name	Email Address	41	NPI	ITIN (Opt.)	Specialty Dashboards	IT MOCA4	Account Status
Yes		5/4/2018	10/31/2020	885	Anesthesia Resident	Anesthesia Resident						Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		3/19/2018	10/31/2020	1752	CRNA	CRNA						Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		5/7/2018	10/31/2020	912	Anesthesia Resident	Anesthesia Resident						Click to Edit	Pediatric, Obstetric, Cardiac	No	Activated
Yes		7/26/2017	10/31/2020	1935	Anesthesia Attending	Anesthesia Attending						Click to Edit	Pediatric, Obstetric, Cardiac	Yes	Activated
Yes		7/26/2017	10/31/2020	1935	Anesthesia Attending	Anesthesia Attending						Click to Edit	Pediatric, Obstetric, Cardiac	Yes 🛈	Activated



Further details regarding Account Status are shown for each provider in the last column:

- *Activated:* Activation email has been sent and provider has successfully set up their account.
- Not Activated: Activation email has not been sent
- Activation Email Sent: Activation email send successfully. Provider has yet to click on the activation link to set up his or her account.
- Activation Email Expired: To resent an activation email, click 'Activation Email Expired" in the last column and follow the prompt





Cancel

Activation email expired

Contact: support@mpog.zendesk.com

www.aspirecqi.org says

Are you sure you want to resend an activation email to

• Information regarding a provider's MOCA 4 Status is also available through the user management tool by clicking the information icon within the MOCA column







		OUTCOMES GROUP
	Excel /	CSV Import Batch Activation
NA -	Show all AIMS	_Staff_IDs
	↓↑ MOCA4	La Account Status
	No	Account does not exist 🎎
	No	Account does not exist 🎎
	No	Account does not exist 🎎
	No	Account does not exist 🔍 🖂

- To send an activation email to all providers who have yet to receive one and to those who have let their activation email expire, you can use the Batch Activation button in the top right corner
- Click 'Send' when prompted



#### Multiple AIMS Staff IDs

- Sites who convert from MPOG's Legacy Production method to Import Manager may see 2 AIMS Staff IDs listed for each provider in the provider contacts tool.
- To manage the AIMS Staff IDs affiliated with Import Manager only, select 'Hide old AIMS_Staff_IDs' in the dropdown menu seen below.

Search:	Send Feedback?: All	Staff Rol	e: All 🗸 🛛	Show	all AIMS_	Staff_IDs ▾	
.11	Email Address	IT NPI	Lt TI	Show	all AIMS	_Staff_IDs	count Status
Cli	ick to Edit	Click to Edit	Click	Hide	old AIMS	_Staff_IDs	nt does not exist 🎎
Cli	ick to Edit	Click to Edit	Click	to Edit	No	Acco	unt does not exist 🎎





## Module 12 ASPIRE Dashboard



### Accessing Your Dashboard

- Access your institution's ASPIRE dashboard through the MPOG website <u>https://mpog.org/</u>
- Click "Dashboard Login" in the upper right corner



				9	(m. Dashboard (Retired)	Dashboard Login
About	Join	Research	Quality	Tools	Downloads	Events / News



	MULTICENTER PERIOPERATIVE OUTCOMES GROUP	
Logi	in to MPOG with your username and password below.	
4	Username	-
٩,	Password	5
	🔒 Login	
@ For	got your password?	

- You will be directed to the login screen below.
- Type in your user name and password.
- If you forgot your username or password, click on 'Forgot your password?' located below the login button near the bottom of the screen and follow the prompts.



 Once you have logged into your account, you will be directed to your Site Selected Dashboard. Measures displayed here are those that are included in your institution's monthly provider feedback emails.





 To view performance on all measures MPOG offers, select the 'Dashboards' drop down and select 'All Measures'. Other selections include Pediatric, Obstetric and Cardiac specific measure dashboards





- To review a performance summary for any measure, select the measure of interest via the measure summary drop down or by simply clicking any measure 'card'.
- Each measure displays the institutional performance (or individual performance depending on login permissions) and the targeted performance threshold.



Contact: <a href="mailto:support@mpog.zendesk.com">support@mpog.zendesk.com</a>

OUTCOM

ES

### **Measure Summary**: includes overall performance, case counts, trend over time, breakdown of primary case attribution and breakdown by location.



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To review the full measure specification, click on the "More Details" located after the measure description





Each measure summary has an anonymized institution comparison graph for benchmarking purposes across all MPOG sites. If your institution is in Michigan, there will be an additional graph comparing sites across the state.





### By selecting the 'Providers List' drop down, you can see individual performance for all anesthesia providers within your institution for a particular measure.

Dashboards Measure Summary Provider List Case List   P-02: Avoiding Monitoring Gaps Providers   More Info   e percentage of cases that avoid blood pressure monitoring gaps >10 minutes								
rovider	▲ Role	Score	Cases Passed	🗧 Cases Flagged	Cases Included	Search:	Å	
	CRNA	83%	5	1	6	0%		
	CRNA	90%	432	48	480	1%		
	CRNA	97%	383	12	395	0%		
	Attending	96%	408	16	424	0%		
	CRNA	99%	328	4	332	0%		
	CRNA	99%	545	3	548	0%		
	Resident	97%	119	4	123	0%		
	CRNA	97%	653	21	674	1%		
	Resident	92%	132	12	144	0%		
	Resident	97%	119	4	123	0%		
	Attending	97%	932	31	963	1%		
	Attending	97%	263	7	270	0%		
	CRNA	97%	437	15	452	0%		
	CRNA	99%	624	4	628	0%		
	Resident	90%	175	20	195	1%		



- You can sort by Provider, Role, Score, Cases Passed, Cases Flagged, Cases Included, and % Institutional Fails by clicking the column header
- To quickly search for an individual provider, enter their name or AIMS staff ID in the search filter on the right.

						Search:
Provider	* Role	Score	Cases Passed	Cases Flagged	Cases Included	% of Institution Flags
27020	CRNA	83%	5	1	6	0%
59351	CRNA	90%	432	48	480	1%



• By selecting the 'Case Lists' tab, all failed, passed, and excluded will appear for the specific measure. You can sort the column headers by clicking the arrows next to the title of each column.

	▲ Dashboards ▼ Measure Summary ▼ Provid	ler List 👻 Case List 💌		Meridith Bailey 🔻
Entity University of Michigan Health System	<b>BP-02: Avoiding Monitor</b> The percentage of cases that avoid blood pressure	monitoring gaps >10 minutes		Summary Providers
Past 12 Months	Case Report Download			
Additional Filters + Location + Patient Age	Show 10 🖌 entries			✓ Passed ✓ Flagged ✓ Excluded Search:
+ Patient Gender + Patient Race/Ethnicity	View Measure Date of Operating Case Result Service Room S	urgical Procedure	Primary Anesthesia Anesthesia Reason	Attributable Attributable CRNA/Resident Case ID
+ Surgical Service	View Excluded S	urgical ervice - (Actual)Delivery lot (Actual)Delivery pecified	Labor Epidural: Yes	
	View Case Passed C	ibstetrics / ynecology (Actual)BILATERAL DIAGNOSTIC LAPAROSCOPY	00840 BP Count: 33	
	View Case Excluded N	urgical ervice - (Actual)vaginal delivery lot ecified	01967 Labor Epidural: Yes	
	View Case Passed T	rauma (Actual)EXPLORATORY LAPAROTOMY	00790 BP Count: 46	
	View Case Passed T	ransplant (Actual)LEFT KIDNEY TRANSPLANT - CADAVERIC DONOR	BP Count: 111	

#### Click on 'View Case' from the grid above to display intraoperative case information and details in 'Case Viewer'

MPC	OG / ASPIRE Application Suite	
✓ N	MB01 Details	
Is Va ASA Card Extu NME Prov Train Extu NME	Idid Case         Yes         Included           Class         ASA Class 3         Included           Glass         ASA Class 3         Included           Glass         Earliest extubation at 4.59 PM         Included           Ider Signed in at Extubation         Yes         Included           Ider Signed in at Extubation         Yes         Included           Ider Signed in at Extubation         Yes         Failed           Ider Signed in at Extubation at 4.59 PM         Failed         Failed           Ider Signed in at 4.59 PM         Failed         Failed	AS PR PS PR AE
Intra	op Notes	
me	Note	Sp02 %   98   91   100   99   99   99   98   98   98   98
:58	Anesthesia Machine Checked	BP Dias Non-invasive     BP Sys Non-invasive     EKG Pulse Rate     EKG Pulse Rate     Sp02 Pulse Rate
1:58	Equipment verified	Ventilator
5:00	Existing Site - Right PICC Double Lumen #1 Standard, placed by Unknown.	
5:13	Patient identified, chart reviewed, status unchanged from preoperative	> Neuromuscular blockade
5:13	NPO status confirmed to be solids > 8 hours and clear liquids > 3 hours	Prophylaxis
5:13	Pt transported from SICU to CT-1 under full monitoring. 9LO2, HDS.	> Medications
5:14	Anesthesia Start	Fluids
5:14	NIBP Cuff placed on L upper arm	> Physiologic
5:19	Patient In Room	
5:25	Preop antibiotic delayed / NOT administered: Patient already on scheduled antibiotics	
5:25	PRIOR to Induction/Initiation of Anesthesia a VERIFICATION was conducted with active participation of ANES, Nursing, and the Surgeon/Proceduralist using the Pre-Induction Verification Checklist	



- If preferred, you may copy the MPOG Case ID from the web Case Viewer (see below) and paste into Case Viewer accessible through the MPOG application suite. This will allow you to review cases in greater detail
- Once you have opened MPOG Case Viewer and searched by 'Patient or Case ID,' you may retrieve the MRN from Case Viewer to insert into the institution electronic health record to facilitate case review.





- For ACQRs and QI Champions: You may need to view the dashboard from the perspective of a specific provider in order to better answer questions
- To navigate to a specific provider's view, use 'Find a Provider' at the bottom of the entity dropdown box

	n Dashboards	<ul> <li>Measure Summary</li> </ul>	🔹 Provider List 👻
ity Ispital A e Period st 12 Months ditional Filters	Your Groups Hospital A Hospital B Hospital C Hospital D		
ocation Patient Age Patient Gender Patient Race/Ethnicity Surgical Service	Hospital E Hospital F Hospital G Hospital H Hospital J Hospital K Hospital L Hospital M Hospital N Hospital O Hospital P		
	Hospital Q Hospital R Hospital S Hospital T Other Find a Provider	Hospital A JOHN DOE Hospital B JOHN DOE Hospital C John Doe John Doe	





# Module 13 Measure Case Report



#### Measure Case Report Overview

- Allows users to create a passed/failed/excluded case report for a specific date range and/or specific measures.
- Each report contains case information pertinent to each measure selected.
- The purpose of this tool is to provide an organized document with all information necessary for case reviewers to use when investigating why a provider failed, passed or was excluded from a particular measure/case.



#### Accessing Measure Case Report



 This application can be accessed through the following link: <u>Measure</u> <u>Case Report</u> or on the MPOG website under Apps > Case Report



Last Updated: 3/19/2020

#### Login using your ASPIRE account information

	MULTICENTER PERIOPERATIVE OUTCOMES GROUP
Login to AS Hello Welcome to A below.	PIRE SPIRE, Log in with your username and password
User Name	
Password	<b>■ Login</b>
	Forgot your password?



#### 1. Select your institution from the dropdown menu

Measure Case Report

Institution:	University of Michigan Health System -

1. Select the date range you are interested in reviewing

Date Range:	From	03/01/2018	То	03/31/2018



Check All Measures	Passed	Failed	Excluded
AKI01: Acute Kidney Injury	Passed	Failed	Excluded
BP01: Low MAP Prevention	Passed	Failed	Excluded
BP02: Avoiding Monitoring Gaps	Passed	Failed	Excluded
CARD01: Avoiding Myocardial Infarction	Passed	Failed	Excluded
CARD01QCDR: Avoiding Myocardial Infarction	Passed	Failed	Excluded
□ CARD02: Avoiding Myocardial Infarction (Trop. ≤ 0.6)	Passed	Failed	Excluded
FLUID01C: Minimizing Colloid Use (Cardiac)	Passed	Failed	Excluded
FLUID01NC: Minimizing Colloid Use (Non-Cardiac)	Passed	Failed	Excluded
GLU01: High Glucose Treated	Passed	Failed	Excluded
GLU02: Low Glucose Treated	Passed	Failed	Excluded
MED01: Avoiding Medication Overdose	Passed	Failed	Excluded
NMB01: Train of Four Taken	Passed	Failed	Excluded
NMB02: Reversal Administered	Passed	Failed	Excluded
PONV01: Avoiding PONV	Passed	Failed	Excluded
PONV02: Avoiding PONV (Peds)	Passed	Failed	Excluded
PUL01: Tidal Volume Under 10 mL/kg	Passed	Failed	Excluded
PUL02: Tidal Volume Under 8 mL/kg	Passed	Failed	Excluded
TEMP01: Thermoregulation Vigilance - Active Warming	Passed	Failed	Excluded
$\hfill\square$ TEMP02: Thermoregulation Monitoring - Core Temperature	Passed	Failed	Excluded
TEMP03: Perioperative Temperature Management	Passed	Failed	Excluded
TOC02: Postoperative Transfer of Care to PACU	Passed	Failed	Excluded
TOC03: Postoperative Transfer of Care to ICU	Passed	Failed	Excluded
TRAN01: Transfusion Management Vigilance	Passed	Failed	Excluded
TRAN02: Post Transfusion Monitoring	Passed	Failed	Excluded

- Select the box next to each measure you wish to include in your report.
- For each measure of interest, select the boxes next to "passed", "failed" and/or "excluded" to determine what types of results you would like included.
- *To include all passed, failed and excluded cases and/or to include all measures in your report, select the top box over each column (i.e. "Check all measures")



Measure:

• Once you have selected the measures of interest, click "Generate Report" located at the bottom:

#### Generate Report

 An approximate processing time will then display. Choosing multiple measures for the report will increase processing time. Once report is ready, click "download report"

Report is ready!		
Measure Case Re the download but	eport is ready to downloa on below.	d. Please click
	Download Report	


MPOG_Case_ID	Date of Service	Operating Room	Surgical Service
aa69545c-8b35-e811-8ef3-00215a9b0a8c		Room 17-L	Unknown Concept
c169545c-8b35-e811-8ef3-00215a9b0a8c		M-OR 19	Cardiac
b469545c-8b35-e811-8ef3-00215a9b0a8c		ANAISYS-02	Trauma
5fd07631-c234-e811-8ef3-00215a9b0a8c		ANAISYS-02	Radiology - Unspecified
f7cf7631-c234-e811-8ef3-00215a9b0a8c		U-OR 34	Orthopedics
c5cf7631-c234-e811-8ef3-00215a9b0a8c		IRMT01	Radiology - Unspecified
dacf7631-c234-e811-8ef3-00215a9b0a8c		M-OR 12	Otolaryngology
b269545c-8b35-e811-8ef3-00215a9b0a8c		Room 26-L	Unknown Concept
a869545c-8b35-e811-8ef3-00215a9b0a8c		Room 15-L	Unknown Concept
59d07631-c234-e811-8ef3-00215a9b0a8c		K-OR 03	Ophthalmology
d0d07631-c234-e811-8ef3-00215a9b0a8c		U-OR 28	Trauma
4fd07631-c234-e811-8ef3-00215a9b0a8c		U-OR 34	Orthopedics
d0cf7631-c234-e811-8ef3-00215a9b0a8c		U-MPU F	Unknown Concept
bfd07631-c234-e811-8ef3-00215a9b0a8c		IRUHN1	Radiology - Unspecified
4ed07631-c234-e811-8ef3-00215a9b0a8c		M-OR 09	Ophthalmology
41d07631-7734-e811-8et* 00215a9b0a8c		U-MPU I	Unknown Concept
→ <b>BP01</b> GLU02 → ⊕			E 4

- Measure case reports are exported in an excel spreadsheet. Each measure included in the report is separated by tabs in the bottom right hand corner.
- Once saved on your computer, the report is ready to import into the Batch MRN lookup tool which matches MRNs to MPOG Case IDs allowing the case reviewer to quickly compare data to the source system.
- *Step by step instructions for this process are located in Module 14: Batch MRN
   Lookup Tool

Contact: support@mpog.zendesk.com



# Module 14 Batch MRN Lookup



### Batch MRN Lookup Overview

- Used to retrieve the MRN associated with an MPOG Case ID for multiple cases at a time. There are two methods for adding a column of MRNs to an existing measure case report:
  - **1. Spreadsheet method**: Upload a saved Excel document that has an MPOG Case ID column the saved Case Grids into the Batch MRN Lookup Tool. For more information about how to export cases from the <u>Measure Case Report</u>, see Module 13 of the MPOG Training Manual.
  - 2. List Method: Copy MPOG IDs and paste them into the designated field in the Batch MRN Lookup Tool.



### Accessing Batch MRN Lookup



MULTICENTER PERIOPERATIVE OUTCOMES GROUP

Last Updated: 3/19/2020

### Spreadsheet Method

🚭 Batch MRN Lookup	_		×
Batch MRN Lookup			
Use MPOG provided spreadsh	eet		
Spreadsheet location			
		Bro	wse
O Provide list of MPOG case IDs			
MPOG case IDs			
Save to location			
Save to location		Bro	wse
Start			

- First, locate the file that was exported from the measure case report tool (and saved to your computer) by selecting 'Browse'
- Next, simply double click on the file to load it into the 'Spreadsheet location'. Click 'Start.'

*Note the spreadsheet you are uploading cannot be opened on your computer at the same time as upload



Follow the prompt and enter a password with at least 8 characters for encryption purposes. Click 'Go' to continue.



Please provide a password for encryption (minimum 8 characters)

Choose a unique password that has a mix of lower and upper case letters and numbers. Do not reuse passwords from other files or accounts.

Go

Once a password is set and the MRN column has been successfully added to that file, you will receive a notification. Click 'OK'

Process Complete	×
MRNs added to spreadsheet located at H:\U of M Docs\UniversityofMichigan1_BP02.xlsx	
ОК	



- Go to the folder where the spreadsheet is saved and open in Excel.
- Upon opening, you will be prompted to enter the password you previously entered to view the modified Case Grid. Enter your password and click 'OK.'
- A new column titled MRN will appear to the left of the MPOG Case ID column in your existing spreadsheet. The encrypted file will automatically save

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### Case ID List Method

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Batch MRN Lookup			
O Use MPOG provided spreadshe	et		
Spreadsheet location		Bro	wse
Provide list of MPOG case IDs -			$\overline{}$
MPOG case IDs			
Save to location			
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Start			

- Select the second radio dial: 'Provide list of MPOG case IDs'
- Copy and Paste all MPOG Case IDs into the text box and click 'Browse' to select a location for the new spreadsheet to be saved. Click 'Start'

*You will be prompted to set a password similar to spreadsheet mode.



- After clicking 'Go' you will receive a message saying the process is complete. Go to the saved file and open
- Enter your password when prompted and the MPOG Case IDs you submitted with their associated MRNs will be visible. Again, the encrypted file will automatically save.

Process Complete

 $\times$ 

MRNs added to spreadsheet located at H:\U of M Docs\New.xlsx





Contact: support@mpog.zendesk.com



# Module 15 Import Manager Assistant



### Import Manager Assistant Overview

IM Assistant provides organized information file processing errors and their current location within the import manager file pipeline.





• Note: Site technical teams supporting the MPOG project will want to download the application suite to access IM Assistant.





### Import Manager Assistant

Log Viewer Overview Check File Columns Parse File Data Handoff Settings

- Log Viewer: This tab displays the various import manager logs and the handoff queue.
- **Overview**: This tab contains a color-coded grid representing the current status of import manager.
  - *Check File Columns*: This tab enables the user to see which rows in an imported file have the incorrect number of columns.
  - *Parse File Data*: This tab enables the user to view the contents of an imported file.
  - *Handoff Settings*: This tab contains the current settings for handoff for this instance.



Log Viewer	Module All	81	٣	Target Date Range	Select a date 15	to Select a date 15	Had Erro	r 🗸 Yes 🖌 No	Executio	n Date Range	Select a date 1	5 to Select	a date 15	
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	Log Entry ID	Instance	File Name			Start	E	nd	Error	File Size (Byte	) Is MultiDate			
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- Import Log
  - Displays the list of files that have been imported, including those with errors.
  - Files with recent errors are likely still present in the folder designated for the Import Utility and will continue to be retried until they are removed or corrected.
- Consume Log
  - Displays the list of Modules and Target Dates that have been consumed, including those with errors.
  - Errors that have been resolved will still show in the log, but any recent errors may indicate missing data and require attention.

🔹 Import Manager A	ssistant										– 0 X
Log Viewer	Module All		v	Target Date Rang	Select a date 15 to Select	ct a date 15 Had Erro	or ✔ Yes 🗌 No 🛛 Exe	ecution Date Range Selec	t a date 15	to Select a	date 15
Overview	Import Log	Consume Log	Handoff Log	Handoff Queue							
	Log Entry ID	Instance	File Name			Start	End	Module	Target Date	Pull Date	Error
Check File Columns	94342	MPOG_MAS	PeriopAdminist	rations_V1_EpicCla	rity_11232020_20210210.csv	5/24/2021 9:49:43 AM	5/24/2021 9:49:43 AM	PeriopAdministrations	Unknown	2/10/2021	The conversion of a varchar data type to a datetime data type resulted in an ou $\wedge$
	94343	MPOG_MAS	PeriopAdminist	rations_V1_EpicCla	rity_11232020_20210414.csv	5/24/2021 9:49:43 AM	5/24/2021 9:49:43 AM	PeriopAdministrations	Unknown	4/14/2021	The conversion of a varchar data type to a datetime data type resulted in an ou
Parse File Data	94305	MPOG_MAS	Cases_V1_Centr	icity_20141018_20	191215.csv	5/24/2021 9:43:05 AM	5/24/2021 9:43:05 AM	Cases	10/18/2014	12/15/2019	File contains invalid number of columns

6

- Handoff Log
  - Displays the modules (and corresponding Target Dates) that have been exported to the MPOG_MAS database(s).
  - Errors that have been resolved will still show in the log, but any recent errors may indicate missing data and require attention.
- Handoff Queue
  - Displays any modules (and corresponding Target Dates) currently queued to be exported to the MPOG_MAS database(s).
  - The assigned Priority helps indicate why the item was queued:
    - Priority 10 = New Data
    - Priority 20 = Re-Imported Data
    - Priority 30 = New Mappings
    - Priority 50 = Missing from MPOG_MAS, Reason Unknown
    - Priority 60 = Missing from MPOG_MAS, Reason Unknown (Patient Level Data)



Contact: support@mpog.zendesk.com

• The filters at the top of the window allow the user to filter by a variety of criteria.

Module All 🗸 Target Date Range Select a date 15 to Select a date 15 Had Error 🖌 Yes 🖌 No Execution Date Range Select a date 15 to Select a date 15

- *Module*: refers to the type of data.
- *Target date range*: filters the data based on case date of service.
- *Error filtering*: allows the user to view log records with or without errors. Please keep in mind that an error that has occurred may have since been resolved.
- *Execution date range:* filters the data based on date file processing occurred



- The Log Viewer is limited to the most recent 10,000 rows from each log; however, exporting the logs as a spreadsheet has no row limit and will display all rows.
- To export the logs, click the "Export as a spreadsheet" button at the bottom of the Import Manager Assistant window.

Export as a spreadsheet

 Please include this log when contacting MPOG support about any errors encountered during the Import/Consume/Handoff processes.



### Overview

 Provides a color-coded grid representing the current status of files that were imported. The main grid shows the status broken down by module or "data type" (viewed in rows) and date of service month/year (viewed in columns). Each box represents one month of data.





Contact: support@mpog.zendesk.com

Module	Data Included
Cases	Date of Service Operating Room Admission Type Surgical Service Procedure Text Diagnosis Text Organizations (used to determine which MPOG_MAS database to use)
Diagnoses	Hospital Discharge Diagnosis and Professional Fee Diagnosis Codes
HospitalMortality	Date of Death (in hospital only)
Labs	Formal Labs and Point-of-care Labs
Patients	Patient Name MRN Gender Ethnicity Race
	(continued on next slide)



Module	Data Included
Payers	Insurance and other payer data
PeriopAdministrations	Fluids and Medications
PeriopObservations	Preoperative Notes Intraoperative Notes Monitor Data
Procedures	Professional Fee Procedure Codes Hospital Discharge Procedure Codes
StaffTracking	Staff sign ins/outs and role (eg attending)



### The color of each box indicates the data status within each month:

- Green- indicates data that has successfully completed all Import Manager steps. If every day of the month has successfully completed processing, display green
- Yellow- indicates data that has successfully completed some steps, but still has further steps to complete. If there are not any errors but data is still being processed for one or more days, display yellow.
- Red- indicates one or more errors. If there are any errors for any day that month, display the month as red.
- Grey- indicates missing data. If there are not any errors, no data is being processed, but there are one or more days without any data, display grey.
- Green/Grey- indicates that there is partial missing data. Some days may be green and some may be grey.



### Clicking on any box will show the status of that module per day of that month.



MULTICENTER PERIOPERATIVE OUTCOMES GROUP

- Select any day of the month to reveal the breakdown by source system.
- The source system information will tell you from where the data was extracted from (electronic health record, billing software, etc.).
- You can also see more details about where/what errors may have occurred.
- The status column will show where the data currently is in the transfer process.





MULTICENTER P

**OUTCOMES GROUP** 

Log Viewer	Module All		~	Target Date Range	Select a date 15 to	Select a date 15	5 Had Erro	or 🖌 Yes 🖌 No	Execution	n Date Range Select a da	te 15 to Select a	a date 15
Overview	Import Log	C <mark>on</mark> sume Log	Handoff Log	Handoff Queue								
	Log Entry ID	Instance	File Name			Start		End	Error	File Size (Bytes) Is MultiD	Date	
eck File Columns	37766	MPOG_MAS	StaffTracking_V	1_EpicClarity_091020	018_20190910.csv	9/10/2019	8:12:23 AM	9/10/2019 8:12:23 AN	(none)	118,462 True		
	37765	MPOG_MAS	StaffTracking_V	1_EpicClarity_061220	019_20190910.csv	9/10/2019	8:12:23 AM	9/10/2019 8:12:23 AM	1 (none)	130,097 True		
Parse File Data	37764	MPOG_MAS	Procedures_V1	EpicClarity_2019061	2_20190910.csv	9/10/2019	8:12:23 AM	9/10/2019 8:12:23 AM	1 (none)	7,588,584 False		
	37763	MPOG_MAS	Procedures_V1	EpicClarity_2018091	10_20190910.csv	9/10/2019	8:12:23 AM	9/10/2019 8:12:23 AM	(none)	8,202,235 False		
and off Settings	37762	MPOG_MAS	PeriopObservat	ions_V1_EpicClarity_	09102018_20190910.cs	9/10/2019	8:12:22 AM	9/10/2019 8:12:23 AM	1 (none)	22,821,590 True		
andon octango	37761	MPOG_MAS	PeriopObservat	ionDetails_V1_EpicC	larity_09102018_201909	Сору	Ctrl+C	9/10/2019 8:12:22 AM	1 (none)	5,978 True		
	37760	MPOG_MAS	PeriopObservat	ionDetails_V1_EpicC	larity_06122019_201909	910.csv 9/10/2019	8:12:22 AM	9/10/2019 8:12:22 AM	1 (none)	14,986 True		
	37759	MPOG_MAS	PeriopAdminist	rations_V1_EpicClari	ty_09102018_20190910	.csv 9/10/2019	8:12:22 AM	9/10/2019 8:12:22 AM	(none)	698,103 True		
	37758	MPOG_MAS	Diagnoses_V1_	picClarity_2019061	2_20190910.csv	9/10/2019	8:12:20 AM	9/10/2019 8:12:22 AN	(none)	12,734,287 False		
	37757	MPOG_MAS	Diagnoses_V1_	picClarity_2018091	0_20190910.csv	9/10/2019	8:12:18 AM	9/10/2019 8:12:20 AM	1 (none)	13,831,066 False		
	37756	MPOG_MAS	StaffTracking_V	1_EpicClarity_090620	019_20190910.csv	9/10/2019	7:42:55 AM	9/10/2019 7:42:55 AM	1 (none)	119,527 True		
	37755	MPOG_MAS	StaffTracking_V	1_EpicClarity_08112	019_20190910.csv	0.40/2010	7 10 55 111	0/10/2010 7 12 55 11		4.440 T		
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	37754 37753 37752 37751	MPOG_MAS MPOG_MAS MPOG_MAS MPOG_MAS	StaffTracking_V StaffTracking_V StaffTracking_V StaffTracking_V	1_Centricity_201909 1_Centricity_201908 1_Centricity_201906 1_Centricity_201809	11_20190910.csv 12_20190910.csv 12_20190910.csv 10_20190910.csv	File na	mes og ther	m from tl	he <b>L</b>	. <b>og Viewer</b>	tab. To	do so,
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Viewer	Instance:	MPOG_N	1AS (ID: 0) ~	File Name: PeriopAdmini	strations_V1_Cer	ntricity_20190617_20190709.csv						Parse File Data
	AdminID	CaseID	Phaseof_Care_	ID Phaseof_Care_Name	AdminType_ID	AdminType_Name	UnitID	UnitName	RouteID	RouteName	DoseStart_Time	DoseEnd_Time
erview					6730	Milrinone Load	MG	MG	IV	IV	2019-06-17 12:20:22.000	
					6741	Milrinone Infusion	MCG/KG/MIN	MCG/KG/MIN			2019-06-17 12:20:35.000	2019-06-17 12:25:37.0
le Columns					39462	Norepinephrine (Levophed) (bolus)	MCG	MCG	IV	IV	2019-06-17 12:19:00.000	
					39462	Norepinephrine (Levophed) (bolus)	MCG	MCG	IV	IV	2019-06-17 12:21:17.000	
Eila Data					21064	Diphenhydramine 50 mg	MG	MG	IVP	IVP	2019-06-17 12:23:01.000	
rile Data					39449	Famotidine (Pepcid)	MG	MG	IV	IV	2019-06-17 12:23:08.000	
					3416	Epinephrine	MCG	MCG	IV	IV	2019-06-17 12:24:51.000	
ff Settings					21090	Hydrocortisone 100 mg	MG	MG	IVP	IVP	2019-06-17 12:23:16.000	
					5858	Calcium Chloride MG IV	MG	MG	IV	IV	2019-06-17 12:25:24.000	
					6741	Milrinone Infusion	MCG/KG/MIN	MCG/KG/MIN			2019-06-17 12:25:37.000	2019-06-17 13:00:47.0
					7370	Sodium Bicarbonate	MEQ	MEQ	IV	IV	2019-06-17 12:25:44.000	
					3416	Epinephrine	MCG	MCG	IV	IV	2019-06-17 12:32:23.000	
					6045	Epinephrine	MCG/KG/MIN	MCG/KG/MIN			2019-06-17 12:34:08.000	2019-06-17 13:00:44.0
					3416	Epinephrine	MCG	MCG	IV	IV	2019-06-17 12:33:00.000	
					3416	Epinephrine	MCG	MCG	IV	IV	2019-06-17 12:35:00.000	
					6934	Protamine	MG	MG	IV	IV	2019-06-17 12:39:19.000	
					6752	Norepinephrine	MCG/KG/MIN	MCG/KG/MIN			2019-06-17 12:41:31.000	2019-06-17 13:17:54.0
					5858	Calcium Chloride MG IV	MG	MG	IV	IV	2019-06-17 12:50:41.000	
					6934	Protamine	MG	MG	IV	IV	2019-06-17 12:54:52.000	
					5858	Calcium Chloride MG IV	MG	MG	IV	IV	2019-06-17 12:57:29.000	
					6135	Insulin, Regular Bolus	UNITS	UNITS	IV	IV	2019-06-17 12:57:34.000	
					6045	Epinephrine	MCG/KG/MIN	MCG/KG/MIN			2019-06-17 13:00:44.000	2019-06-17 15:47:27.0
					6741	Milrinone Infusion	MCG/KG/MIN	MCG/KG/MIN			2019-06-17 13:00:47.000	2019-06-17 15:47:27.0
			_		6752	Noroninanbrina	MCG/VG/MINI	MCG/KG/MIN			2010 06 17 12 17 54 000	2010.06.17 13:31:11.0
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						C	MG	MG	IV	IV.	2010-05-17 15:46:22 000	
					46681	Sugammadex	MO	INIC			2013-00-17 13.40.33.000	
					46681 3207	Fentanyl	MCG	MCG	IVP	IVP	2019-06-17 12:19:16.000	

Log Viewer Destination Database Lab Linking B	ng Tolerance in Minutes	
Overview		
Parse File Data		
Handoff Settings		
	<ul> <li><b>Hand State</b> Description</li> <li>Lab linking refers to which labs are included in a given target date.</li> <li>CaseLinked should be used if all labs for the patients that had a case that day were pulled.</li> <li>DateLinked should be used if all labs taken that day are included in the file.</li> <li>Billing tolerance in minutes adjusts how close timing of a billing code and a case start time can be to be considered a match.</li> <li>Do NOT change these values without consulting MPOG staff</li> </ul>	
d. 5/24/2021	Contact: support@mpog zendesk.com	19



## **Module 16** MOCA_® Part IV Attestation Guide



### MOCA Part IV Provider Feedback Program

- Eligible providers enrolled in the MOCA[®] Part IV MPOG Provider Feedback program can attest to reviewing their failed cases in order to earn MOCA[®] Part IV credit.
- Through the MPOG Quality emails, providers can click on a MOCA[®] link that will direct them to the attestation page.
- Each month, providers must attest to reviewing the auto-populated failed cases for each of their selected MOCA[®] measures



### MOCA Part IV Provider Feedback Program

- To earn the full five (5) points per measure, providers review and attest to 12 feedback emails and show improvement or maintain performance above threshold for each measure.
- A maximum of 25 points can be earned upon completion of one 12-month period.



### MOCA Part IV Provider Feedback Program

- MPOG will communicate the number of points received as well as final scores to the individual before attesting to the American Board of Anesthesiology (ABA) on the provider's behalf.
- For more information on MOCA[®] Part IV, please visit the MOCA page on the MPOG website <u>https://mpog.org/quality/moca/</u>



### **MOCA** Part IV Enrollment



THE AME



and attest to

18-months to

About Join Research Quality Tools Downloads Events Frontiers must already participate in the oos provider e-main recuback program through their institution.

### FEES

Enrollment fee of \$250 must be paid upon enrollment. This fee is non-refundable and is used to cover administrative costs to maintain the MPOG MOCA program.

### CHOOSE 5 MEASURES

Providers can select a maximum of five measures and will receive five points per measure. To receive the fu

### Enroll at https://mpog.org/moca/ ANESTI

The provider attestation will begin the month following enrollment*

### CERTIFICATION

Once the provider has completed 12 attestations, MPOG will calculate the total number of points to be awar and send the information to the ABA. The certification will added to the provider's report in their ABA portal.

*The attestation window has been expanded due to COVID-19 for any provider that had an attestation period ending between May 2020 through December 2020. Impacted providers will receive an automatic 4 month extension to complete the 12 attestations in 22 months rather than 18 months







Contact: support@mpog.zendesk.com

### **Getting Started**

• Begin the MOCA[®] Attestation process by clicking the link in the upper right hand corner your MPOG Provider Feedback Email:





Hello John Doe,

Below is your new MPOG Quality performance report. For a case-by-case breakdown of each measure's result, click on the graph's label and you will be taken to our reporting website (login required).

If you have any questions, please read our <u>FAQ</u> or send them to <u>QIChampion@mpog.org</u>. Thank you for your participation in MPOG Quality.

Sincerely, The MPOG Team

Your Performance vs All Other Attendings

12/1/2017 to 12/31/2017



• After being directed to the MPOG/ASPIRE Login page, enter your User Name and Password





### Once you have logged into MPOG, you will be directed to your personal Attestation MOCA[®] Part IV ASPIRE Provider Feedback Activity.

- From here, you can review the auto-populated failed cases for each selected measure for a specific month.
- The MPOG Quality Measures you selected for MOCA[®] credit will display (see next slide for example)




#### January 2018 Attestation MOCA Part 4 ASPIRE Provider Feedback Activity

					• Y	our initial score is from January 2018	
✓ Measure #1: /	Avoiding Monitoring Gaps (BP02)				Your Initial Score: 95.53%	Your Current Score: 95.53%	
Last Month's Faile	ed Cases:					Vew measure specification	
Case Viewer	MPOG Case ID	Date of Service	Procedure	Attending(s)	CRNA/Resident(x)		
Open			(Actual/UNKNOWN BONE MARROW BIOPS UNKNOWN SPINAL TAP				
_							
♥ Measure #2:	Train of Four Taken (NMB01)				Your Initial Score: 94,34%	Your Current Score: 94.34%	
Last Month's Faile	ed Cases:					Vew measure specification	
Case Viewer	MPOG Case ID	Date of Service	Procedure	Attending(x)	CRM	UResident(s)	
Open			(Actual)RIGHT LAPAROSCOPIC APPENDECTOMY				
_							
✓ Measure #3:1	Reversal Administered (NMB02)				Your Initial Score: 100.00%	Your Current Score: 100.00%	
Last Month's Faile	ed Cases: N/A					Vex measure specification	
♥ Measure #4: 1	Thermoregulation Vigilance - Active Warming	(TEMP01)			Your Initial Score: 98.26%	Your Current Score: 98.26%	
Last Month's Faile	ed Cases: N/A					Vew measure specification	
♥ Measure #5:1	Thermoregulation Monitoring - Core Temperat	ture (TEMP02)			Your Initial Score: 94.14%	Your Current Score: 94.14%	
Last Month's Faile	ed Cases:					Vew measure specification	
Case Viewer	MPOG Case ID	Date of Service	Procedure	Attending(s)	CRNA	Resident(s)	
Open			(Actual/BILATERAL BOTOX INJECTION				
Open			(Actual/BILATERAL BOTOX INJECTIO BILATERAL PHENOL INJECTION				

Attention: To earn 5 points per measure, the provider must review failed cases and complete the attestation form once per month for 12 months. In addition to reviewing cases, providers must maintain quality measure performance above threshold or show improvement between the 1st and 12th performance. feedback email. Providers can earn 5 points per measures for 5 measures, for a total of 25 points.

By clicking the acknowledgment button below, I attest that I have reviewed this month's failed cases.

Yes, I've reviewed my failed cases.



• To open the case(s) listed under each measure, click the **Open** button to view case details. You will also notice your performance measurement for the selected measure in the top right corner for each measure.





ASA Status: 3E
82.3 kg, 172.7 cm (IBW: 68.47)
Admission Type: Inpatient
Operating Room:

University of Michigan Health System
Anes Duration:
Procedure: RIGHT LAPAROSCOPIC APPENDECTOMY
Diagnosis: appendicitis



Time	Note	✓ Cardiovascular
10:02	Patient in Facility	45 MA 15 15 15 15 15 15 15 15 15 15 15 15 15
06:47	Assigned PreOp	
07:16	Equipment verified	250
07:54	Room Ready	You will be directed to MPOG Case Viewer
08:03	Anesthesia Start	
08:13	Patient identified, chart reviewed, status unchanged from preoperative evaluation	which allows you to further investigate case
08:13	Pre-Anesthesia evaluation completed and discussed with Attending	specific details.
08:13	NPO status confirmed to be solids > 8 hours and clear liquids > 3 hours	
08:13	Patient In Room	0 5m02.16   97   97   99   97   96   98   99   98   100   100   100   99   99
08.18	PRIOR to Induction/Initiation of Anesthesia a VERIFICATION was conducted with active participation of ANES, OR Nursing, and the Surgeon/Proceduralist using the Pre-Induction	07:30 07:45 08:00 08:15 08:30 08:45 09:00 09:15 09:30 09:45 10:00 10:15 * BP Dias Non-invasive * BP Sys Non-invasive — EKC Pulse Rate — End Tidal CO2 (mmHg) — SpO2 Pulse Rate
	Verification Checklist	> Ventilator
08:19	Standard monitors placed, vitals checked	> Neuromuscular blockade
08:19	Existing Site - Left Antecubital 22 g, placed by Unknown in ED.	> Prophylaxis
08:21	Mask ventilation Grade 1: Ventilated by mask	
08:24	Eyes taped shut	> Medications
08:26	Anesthesia Induction End	> Fluids
08:30	Orally intubated using Direct laryngoscopy: MacIntosh #3: Grade 1 - Full view of Vocal Cords.	> Physiologic

 By clicking on the arrow to the left of the following terms (Cardiovascular, Ventilator, Neuromuscular blockade, Prophylaxis, Medications, and Fluids), you can view additional timed details associated with each term, such as dosages, settings, measurements, vital signs, etc. for each variable.

7:30 07:45	08:00	0	8:15	08:30	C	8:45	09:00		09:15	09:30		09:45	10:0
Peak inspiratory pressure	AS	P	R 2	20	13	PS	18	19	20	20	13	17	14
Positive End Expiratory	-	-0.1	-0.1	2.6	4.1	3.9	4.2	3.9	4.1	3.9	5.8	4.1	4
Respiratory Rate Actual		0	0	18	12	12	12	12	12	12	12	12	15
Sevoflurane Exp %			0	2.7	1.1								
Sevoflurane Insp %			0	4.6	1.2								
SpO2 %		97	97	99	97	96	98	99	98	100	100	100	99
SpO2 Pulse Rate		89	87	110	83	71	75	69	75	70	67	73	71
Temp 1–Unspecified Site					38	37.9	37.8	37.9	38	37.9	37.9	37.8	37.8
Oxygen Insp %		21	21	93	25	21	22	21	22	32	33	32	32
Tidal Volume actual		107	107	331	512	487	491	493	502	490	339	514	502
TOF (subjective assessm					0 / 4				4 / 4	4	/ 4		
TOF ratio (acceleromyog													



Time	Note	1	<b>∨</b> C	ardiovas	cular	
13:31	Patient in Facility					
08:23	Assigned PreOp					
08:45	Anesthesia Machine Checked		250			
08:45	Equipment verified		200			
09:14	Room Ready		150			
09:14	Pre-Anesthesia evaluation completed and discussed with Attending					
09:14	NPO status confirmed to be > 6 hours for solids; > 4 hours for breast milk; and > 2 hours for clear liquids		100			
09:14	Patient identified, chart reviewed, status unchanged from preoperative evaluation		50			
09:14	Anesthesia Start		0	SnO2 9	6	
09:14	Existing Site - Right Single Lumen Standard.		0	8:55	09:00	0
09:19	Patient In Room					
09:22	PRIOR to Induction/Initiation of Anesthesia a VERIFICATION was conducted with active participation of ANES, OR Nursing, and the Surgeon/Proceduralist using the Pre-Induction Verification Checklist		> Ve	entilator		
09:24	Anesthesia Induction End		> N	euromu	scular bloc	kade
09:26	2 L/Min O2 administered via nasal cannula		<b>≫</b> M	edicatio	ns	
09:26	EtCO2 sampling catheter applied	22	> FI	uide		
09:26	Skin temperature probe checked and value noted	Note D	Detail	hysiolog Temperati	ic ure probe <u>loc</u>	ation /
09:27	Preop antibiotic delayed / NOT administered: Not indicated by surgeon	1				
09:28	Patient positioned Left lateral decubitus	T				

• If you notice a red triangle in the intraoperative notes section of MPOG Case Viewer, you can hover over the area to display specific note details.



robe location / type: Skin

09:05

#### • To the right of each measure you will find a link to the MPOG Measure Specification. Simply click 'View measure specification' as shown below to view complete measure specification details.





#### After you have reviewed failed cased for the month, you will click the acknowledgment button below, attesting that you have reviewed the month's failed cases

Yes, I've reviewed my failed cases.



- To earn the full five (5) points per measure, providers must review and attest to 12 feedback emails.
- A maximum of 25 points can be earned upon completion of 12 feedback attestations in a 18 month period.
- MPOG will communicate the number of points received as well as final scores to the individual before attesting to the American Board of Anesthesiology (ABA) on the provider's behalf.





# Module 17 NSQIP Import Tool



### NSQIP Import Tool

- Allows the site to merge the surgical data abstracted for NSQIP with the MPOG anesthesia data.
- Log into the NSQIP website at <a href="https://www.acsdataplatform.com/login">https://www.acsdataplatform.com/login</a>



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DASHBOARD	Compare site level case information against aggregated programmatic data.	Click on "Data Downloads Report"	
🔒 Home Page	Workflow Report Review case completion and follow up status for selected timeframes.	· · ·	
PLATFORM			
C Patients	Patient Follow Up Report Track patient follow up and generate call lists, patient letters, and requests for medical records.		
🗢 Upload	Data Download Report		
Form Management	Download all case data for selected parameters.		
Notifications			
ANALYTICS			
C Operational Reports			
RESOURCES			
Library			
C Resource Portal			
C Risk Calculator			
ACCOUNT			
L My Account			~





#### **NSQIP-Pediatrics** Export

Configurable Report	Predefined Report	Click on "Fi →"Export"	e" in the left hand corner → "Microsoft Excel Export"
Filters	ort	Visualization to image Visualization to PDF Table Table (without value tormatting) To PDF To Microsoft PowerPoint Microsoft® Exc[hr] Export	Main Tab Status: Download Complete Repeat Group Status: Download Complete

Contact: <a href="mailto:support@mpog.zendesk.com">support@mpog.zendesk.com</a>

**OUTCOMES GROUP** 

new sites *		
		ACS NSQIP Adult Registry
Operational Reports Data Download Report onfigurable Report Predefined Report	Select "All pages" in the Export dropdown, then click Export	
Data Download Postop Occurrence repeat group Fitters 3 ¥ ×	Concurrent Procedures Repeat Group Other Procedures Repeat Group Unplanned Return to OR Repeat Group Patient Contact Management Repeat Group Main Tab Status; Download Complete Repeat Group Status: Download Complete	Readmission Repeat Group 🛛 🦉 🔯 📃
Type to search filters Q	Repeat Group Status, Download Complete	
Type to search titlets Q Main Data CASE_ID Type to search in titl (All) 43 values	PATIENT_DIS SCHEDULED FACILITY_DI FACILITY_NA CREATED_DT FORM_STATUS Access Case cpt inout same_c Export to Excel	day_el trans payor_stat admit_date admit_date.P op X
Type to search titlets       Main Data       CASE_ID       Type to search in list       [All] 43 values         PATIENT_DISPLAY_ID       Type to search in list	PATIENT_DIS       SCHEDULED       FACILITY_DI       FACILITY_NA       CREATED_D1       FORM_STATUS       Access Case       cpt       inout       same_d         Export to Excel       Export to Excel       Export to Excel       Filter setting         Export markings       Export charts as image       include tables       Export created date       None         Export title       Formatting ►       Merge cross table header rows       Export tables first       Exclude text area       Export         Printing settings ►       Printing settings ►       Export       Export       Export       Export	day_el trans payor_stat admit_date admit_date.P op_ v 10.12.14.86 gs © Row © TextBox t property control

After clicking on the link shown in Step 5, the following prompt will display at the bottom of the screen. Click on 'Save.' Save the file in a secure location that you can access again.





#### • Open the MPOG Application Suite and run the NSQIP Import Tool.



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### Under the Import tab, click the 'Browse' button. Select the .xlsx file downloaded previously. Click 'OK.'

🍪 NSQIP Import	- 🗆	×	
Status Import	 		
NSQIP XLSX file:	 Bro	owse	
	(	ОК	
		N A	
	 $\langle \rangle \rangle$		
			ERIOPERA

The application will now insert the NSQIP data into the local database and automatically perform patient matching to existing MPOG patients. Matched data will be sent to the central repository when the patient data is next uploaded.

🧐 NSQI	IP Import	t					_		2	×
Status	Import									
Import S	Status									
Month	•	NS	QIP Case	Count	% Patient Matched	Last Imp	orted			
January 3	2003	205			4.39	9/6/2017	7 2:21:35	PM		$\sim$
February	/ 2003	172			5.81	9/6/2017	7 2:21:39	PM		
March 2	003	160			6.25	9/6/2017	7 2:21:40	PM		
April 200	03	75			5.33	9/6/2017	7 2:21:44	PM		
May 200	)3	165			6.67	9/6/2017	7 2:21:45	PM		
June 200	)3	95			2.11	9/6/2017	7 2:21:23	PM		
July 200	3	172			7.56	9/6/2017	7 2:21:46	PM		$\sim$
Import H	History									
Import [	Date		Status	Messa	ge					
9/6/2017	7 2:22:05	PM	Success							^
9/6/2017	7 2:22:05	PM	Success							
9/6/2017	7 2:22:05	PM	Success							
9/6/2017	7 2:22:05	PM	Success							
9/6/2017	7 2:21:57	PM	Success							_
9/6/2017	7 2:21:57	PM	Success							$\sim$
<									>	



## To check historical import status, click on the 'Status' tab within the NSQIP Import application.

M NSQIP Import							x		
Status Import									
Import Status									
Month NSQIP Case C	ount %	6 Patient Ma	atched	Last Imported					
Import History									
Import Date	Status	Message	File Lo	cation					
5/23/2016 4:25:23 PM	Success		D:\alec	dat\Desktop\Case	e_Form.cs\	/			



### Recommended Import Schedule Options

- There are 46 cycles of 8 days each during which NSQIP data is entered.
- However, changes can be made to a NSQIP record up to 90 days after the date of service.
- After 90 days, the record is "locked" from modification.
- For this reason, MPOG recommends importing on either a monthly or quarterly basis using the schedule on the next slide



#### **Monthly Import Schedule**

#### **Quarterly Import Schedule**

Month	Extract Date Ranges
January	September of the previous year
February	October of the previous year
March	November of the previous year
April	December of the previous year
May	January of the previous year
June	February of the previous year
July	March of the same year
August	April of the same year
September	May of the same year
October	June of the same year
November	July of the same year
December	August of the same year

Month	Extract Date Ranges
January	Q3 of previous year (Jul 1 – Sep 30)
April	Q4 of previous year (Oct 1- Dec 31)
July	Q1 of same year (Jan 1- Mar 31)
October	Q2 of same year (Apr 1-Jun 30)





## Module 18: MQUARK Audit Tool



### MQUARK Audit Tool

- Allows sites to collect additional data for research or quality purposes
- In the phase one release of the application, the Coordinating Center will be responsible for building forms used for all quality audits.
- If you are interested in conducting an audit for a particular ASPIRE measure or research project, please contact the Coordinating Center (<u>mpog-quality@med.umich.edu</u>).



#### **Considerations Prior to Conducting an Audit**

- Notify administration of the unit you plan to conduct the audit on and complete any necessary paperwork for compliance.
- Obtain a tablet or electronic device to conduct the audits with. The audit tool is compatible with both Apple and Android products.



### How to Conduct an Audit



- To receive MQUARK login permissions, email the Coordinating Center: <u>support@mpog.zendesk.com</u>
- Once access has been granted, the MQUARK audit tool can be found in the 'Apps' tab on the website or via the following link: <u>https://mquark.mpog.org</u>



• Upon login to MQUARK, ensure your institution name is listed in the top left hand corner. To begin a new audit, click '+ New Patient' for the audit you are interested in.

UNIVERSITY OF MICHIGAN			
ICU HANDOFF			
Q Preview + New Patient	8 In Progress	5 Complete	Link to MPOG
PACU HANDOFF			
Q Preview + New Patient	2 In Progress	5 Complete	3 Link to MPOG



• The selected audit form is then displayed and an anonymized patient ID will be assigned.



Contact: <a href="mailto:support@mpog.zendesk.com">support@mpog.zendesk.com</a>

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- While observing the handoff, select 'YES' as the listed topics are addressed.
- Once the handoff is complete, select 'NO' for items that were not discussed and select 'NA' if an item does not apply to that particular patient.
- As each line item is completed it will turn green to outline which items were completed.

7. Medications			
	Yes	No	NA
Preoperative Meds	0	•	
Sedations medications. Reversal administered? (if applicable)	•	•	•
Muscle relaxants: Time Given. Reversal administered? (if applicable)	•	•	•
Pain Management	$\bigcirc$	$\bigcirc$	
PONV Hx & Meds Administered	0		



 A comments section is available at the end of the audit and is optional if you wish to note any other pertinent information regarding the audit. <u>Do NOT include any</u> <u>PHI in the comment section</u>.

4. COMMENTS: ***DO NOT INCLUDE AN	( PHI ***		



ACU F	IANDOFF FO	RM	
1. Dat	e of Procedure	[Required]	
		*	
2. Pat	ient Age [Requi	red]	
3. Pat	ient Gender	equired]	
Se	elect	•	
4. Pro	cedure Type		
	-		

- Once the handoff is complete, enter the required patient specific information: date of procedure, patient age and patient gender.
- In order to link an audit to an MPOG Case ID you must complete these fields.
- Procedure type is an optional field and is helpful when returning to review the audit.
- Click 'save' to finish the audit



- This will bring you back to the home page where you will see a running tally of 'Complete' or 'In Progress' tab increase.
- The 'Complete' tab tally will have increased if all items in the audit were addressed (minus procedure type). If any items are missing, your audit is sent to the 'In Progress' tab. By clicking this tab, you may edit the additional information necessary to complete.





 Clicking on the 'Complete' tab will bring up a comprehensive list of audits organized by date that have had all questions completed. The 'Progress' tab will show a list of audits that do not have all fields completed. Both tabs have the option to edit the audit form answers if necessary.

UNIVER: CU HAN	SITY OF N IDOFF	MICHIGAN											
ΤΟΤΑΙ	L RECORI	DS FOUNDS:5	5										< Back
×								2018-02-07	[2]				
ID	ļž	Gender	.↓†	Age	.↓†	Date of Procedure	ļţ	Created By	ļţ	Created Date	11		11
22		Male		65		02/07/2018		KJBUCREK		02/07/2018		Edit Delete L	ink
23		Male		56		02/07/2018		MERIDITH		02/07/2018		Edit Delete L	ink
Show	ing 1 to 2	of 2 entries											
+ 2018-02-06 [2]													
+	+ 2018-01-31 [1]												



## **Auditing Tips**

- Review the audit form and how to grade providers prior to observation day to familiarize yourself with the items you are listening for.
- If you know the patient specific information for cases you plan to audit ahead of time (age, gender, procedure type), it may be helpful to start a form for each patient. This will save the forms in the 'In Progress' tab where you can quickly access at the time of audit.
- While conducting an audit, wear similar scrubs/clothing to blend in with the clinical team. Follow the team into the patient room, discretely listen to the handoff that takes place and exit the room once the handoff is complete.
- When entering any patient room or bay, follow hand washing protocols of washing in and washing out.



### Linking Audits to MPOG Case IDs

- After uploading data to the MPOG Central Database, you can link the completed audits to an MPOG Case ID. Based on the minimal case data that is provided at the end of each audit form (date of procedure, patient age and patient gender), MPOG is able to provide potential cases for linking.
- To link a handoff audit click "Link to MPOG


• Locate the case that you audited by patient information and click "Link"

HAND	DOF	F											
OTAL	REC	ORDS FO	DUN	DS:15									
													Back
×							2	2018-02-19 [	2]				
ID ↓	1	Gender	ĴŢ	Age	↓↑	Date of Procedure	.↓↑	Created By	.↓↑	Created Date	11		ļ†
63		Male		5				MERIDITH		02/19/2018		Edit Delete	Link
68		Male		66				MERIDITH		02/19/2018		Edit Delete	Link
Showin	ng 1 t	to 2 of 2 en	tries	;									
+							:	2018-02-18	1]				
+							2	2018-02-08	[1]				
+							2	2018-02-07	6]				
+							2	2018-02-06	[3]				
+							:	2018-02-01	1]				
+								2018-01-31 [	1]				

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• A list of cases that were audited on that date with the same case data (age and gender) will populate. Find the correct Procedure and click "Link"

CU HANDOFF					
TOTAL RECORDS F	OUND:1				Back
Patient ID					
68					
Date of Procedure					
Age					
66					
Gender					
Male					
Date of Procedure	Age	Gender	MPOG Case ID	Procedure Text	
12/22/2017 9:30:00 AM	66	М	9045a443-c8e7-e711- bece-00215a9b0a8c	EP ICD IMPLANTATION	Link



• The Procedure will then turn green, confirming that your audit has been successfully linked to the MPOG Case ID. Click "Back" to return to the linking page

IVERSITY OF MICH	IIGAN HEA	LTH SYSTEM					
OTAL RECORDS F	OUND:1						_
							Back
68							
Date of Procedure							
Age 66							
Gender							
Male							
Date of Procedure	Age	Gender	MPOG Case ID	Procedure Text			
	66	м	9045a443-c8e7-e711- bece-00215a9b0a8c	EP ICD IMPLANTATION			
					2	M	Ρ

• Once the audit is successfully linked to an MPOG Case ID, the link button will turn green. Click 'Back' to return to the home page

IVERSITY	OF MICHIGAN	HEALTH SY	STEM				
J HANDO	FF						
TOTAL RE	CORDS FOUND	DS:18					
							< Back
+				:	2018-02-20 [2]		
×					2018-02-19 [3]		
ID 🛓	Gender 1	Age ↓↑	Date of Procedure	11	Created By	Created Date	۱ţ
63	Male	5			MERIDITH	02/19/2018	Edit Delete Link
68	Male	66			MERIDITH	02/19/2018	
							Edit Delete Link
75	Male	24			ANIKS	02/19/2018	Edit Delete Link
Showing 1	l to 3 of 3 entries						
+					2018-02-18 [1]		
+				:	2018-02-08 [1]		
+				:	2018-02-07 [6]		
+				1	2018-02-06 [3]		
+					2018-02-01 [1]		
+					2018-01-31 [1]		



• As more audits are linked to MPOG Case IDs you will see the "Link to MPOG" tally increase on the home page.

PACU HANDOFF		
Q Preview + Enroll New Patient	1 In Progress	2 Complete 2 Link to MPOG

• MPOG is currently working on creating an analytics page within MQUARK that will transfer directly to the ASPIRE dashboard allowing each site to see a visual representation of the quality of their handoff process



Contact: support@mpog.zendesk.com

#### PACU Audit: Handoff Assessment

- When conducting a PACU handoff audit, please use the following slides as a guide when determining if an element of handoff was discussed.
- It is expected that monitors are placed and patient is stabilized prior to starting the handoff process.
- MPOG recommends auditors focus on more extensive cases first as more audit elements may apply to those cases



# All Stop

 Identify which providers should be present for the PACU handover (i.e. PACU nurse, anesthesia provider, surgical representative...). Once all have arrived, acknowledge that everyone stops and directs attention to the provider leading the handoff.



# Background

- Introductions: Following pt. stabilization, Anesthesia/Surgical/PACU team introduces themselves
  - Anesthesia provider must give name and contact info
  - Identify contact info for primary service.
- Identification of Patient: Check patient ID band. Verify Name and DOB.
- Discussion of Procedure Performed: What procedure(s) did the patient undergo?
  - Surgical course may be discussed by surgical resident or attending.
- Pertinent PMH/PSH: Discuss past medical/surgical history
- Allergies: Discuss allergies. Verbalize "no allergies" if there are none.
- Contact Precautions: Discuss if applicable



## Anesthetic Management

- Type of Anesthetic: General, MAC, Regional, Sedation.
  - If sedation case, do not need to discuss airway management.
  - Do not need to mention specific medication
- Airway Management: State airway type if applicable (ETT vs LMA). If airway was difficult provide details.
- Anesthetic Complications or primary concerns
  - If no complications verbalize "No other complications"
- Discuss variations from baseline vital signs if applicable



#### Medications

- Preoperative Meds: Discuss medications that were given to patient in pre-op area and relevant home meds that should be given postoperatively.
- Sedation Medications: Discuss if applicable OR verbalize "None given"
  - State which medications were administered.
  - Administering reversal medications (flumazenil or narcan) is rare. If given, the provider must communicate time of last dose and patient response.



#### Medications

- Antibiotics Administered: Discuss antibiotics given
- Muscle Relaxants: Discuss if applicable OR verbalize "None given"
  - Medication administered and time last dose was given
  - If muscle relaxant given, provider must verbalize if the patient was reversed and the reversal agent administered.
- Pain Management: Discuss pain medications given intra-op and pain management plan.
  - Must include specific medication and last dose administered.
- PONV Hx and Meds Administered: Discuss anti-emetics given and any history of PONV if applicable.



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#### Fluids

- Vascular Access: Discuss line access (Type, location, gauge, status)
  - Marking "NA" is acceptable if the patient's only line access is peripheral IV
- Fluids/Blood Administered: Discuss amount of fluids and intraop blood products (if applicable)
- Intraoperative Labs: Discuss if applicable.
- If no intra-op labs were drawn, provider should verbalize "No intraop labs drawn intraop"



## Expectations/Plans

- Post-operative plans: identify patient disposition (discharge to home, floor, etc).
- Allow Opportunity for Questions: Anesthesia provider asks if PACU team has any questions.





# Module 19 STS Import Tool



## STS Import Tool

- To use the STS import tool:
  - First use your STS vendor application to extract a harvest file containing MRNs (or SSNs if MRNs are not available).
  - The instructions for different vendors in subsequent slides.
  - Once you have a harvest file, use the MPOG Application Suite to input this data into your local MPOG database.
  - The data can then be PHI scrubbed and transferred to the central repository.



#### **STS Harvest Schedule**

Adult Cardiac Surg	ery Database	- 2020			
	Harvest Submission Window Start	Harvest Window End	Includes procedures performed through this date:	Report Posting	Comments
Harvest 1	Week of January 20	2/28/2020 Opt Out: 3/2/2020	1/1/2017 -12/31/2019	TBD	MIPS Star Rating
Harvest 2 and 3	Continuous	9/4/2020 Opt Out: 9/8/2020	6/30/2020	End of October 2020	Star Rating
Harvest 4	Continuous	11/20/2020 Opt Out: 11/24/2020	9/30/2020	End of January 2021	

General Thoracic Surgery Database - 2020							
	Harvest Submission Window Start	Harvest Window End	Includes procedures performed through this date:	Report Posting	Comments		
	Week of	3/6/2020			MIPS		
Spring	February 10	Opt Out: 3/9/2020	12/31/2019	TBD	Star Rating		
		9/25/2020	7/1/2017	End of			
Fall	Continuous	Opt Out: 9/29/2020	6/30/2020	December 2020	Star Rating		

Includes Harvest Harvest procedures Submission Window performed Posting Window End through this	Congenital Heart S	urgery Datab	ase - 2020	)		
Start date:		Harvest Submission Window Start	Harvest Window End	Includes procedures performed through this date:	Report Posting	Comments
Spring/FallContinuousTBD7/1/2016- 6/30/2020TBDStar Ratin	Spring/Fall	Continuous	TBD	7/1/2016- 6/30/2020	TBD	Star Rating



#### STS Harvest Schedule

• Latest STS Harvest schedule available here



## Vendor Application Instructions: ARMUS

- 1. File  $\rightarrow$  Export  $\rightarrow$  Select All
- Pick Date Range: Chose Chose field within Diagnoses and Procedures → Date of Surgery → add date range as filter
- 3. Fieldname Format: Short Name
- 4. Choice Format: Choose Harvest (codified values)
- 5. Field Export Order: Automatic
- 6. Export as a .dat file

Export Fields Export Population				
Data Version: 2.3		Options:		
번" - Defined in another Version		Delimiter	Bar (1)	
H A Database Administration	Select All	Delimiter	Dar (1)	
		Custom Delimiter		
⊕ C. Admission	Deselect All			
D. Pre-Operative Evaluation		Fieldname Format	Short Name	
E. Diagnosis (Category of Disease) and Procedures	Select Core			_
E. Procedures		Data Format		
⊭ F. Post-Operative Events	Select Non-Core	Date Format		
🗄 Follow-Up				
🖻 G. Discharge	Select Harvest	Date lime Format		
⊕ H. Quality Measures	Select Harvest		<b></b>	
SIS Temporary Fields	Coloret New Unevent	Choice Format	lext	
	Select Non-Harvest			
	Colort VCCOL Lines of	Field Export Order	Alphabetic	
	Select VCSQI Harvest			



Contact: support@mpog.zendesk.com

## Vendor Application Instructions: ARMUS





## Vendor Application Instructions: ARMUS



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## Vendor Application Instructions: LumedX

 Select from the drop down which STS version you would like to pull data for, then click the "play" button

× Registry Export Inter	ace: STS Thoracic 2.3.4	
File Edit View Hel	p	
🕨 II 🔳 🚺 STSThr2		
l ables	Rows	
Options		
dle		



## Vendor Application Instructions: LumedX

2. Enter your 5-digit participant ID into the box that pops up.

	LX Registry Export Inte	face: STS Thoracic 2.3.4	
	File Edit View H	dp	
ID into	Tables	Rows	
	- Options	STS Thoracic 2.3.4	
	Initializing		<i>li</i>
Contact: supp	ort@mpog.zendes		R PERIOPERATIVE

## Vendor Application Instructions: LumedX

3. Specify the date range that you would like to extract data for, then click OK

X Registry Export Interface	: STS Thoracic 2.3.4	
File Edit View Help		
STSThr23	*	
ables	Rows	
	Specify Date Range	
	Start Date: 1 / 1 /2015 -	
	End Date:   6730/2016	
	DK Cancel	
Ontions		
opions		
Participant ID:		
ntializing		



- Once you have your harvest file ready, open the MPOG Application Suite.
- 2. Open the STS Import application.



11

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3. The first screen will show you the import status (which months of data have been imported and what percentage of those STS records have been patient-matched locally). Click on the import tab to start an import of a harvest file

M STS Import					X
Status Import					
Import Status					
Month	STS Case Count	% Patient Matched	Last Imported		
January 2012	104	100.00	12/15/2016 2:39:19 PM		
February 2012	85	98.82	12/15/2016 2:39:19 PM		
March 2012	88	98.86	12/15/2016 2:39:17 PM		
April 2012	70	98.57	12/15/2016 2:38:57 PM		
May 2012	91	100.00	12/15/2016 2:39:19 PM		
Import History	-77	00.63	10/1E/2016 2.20.10 DM		
Import Date	Status M	Message			
10/26/2016 5:01:	10/26/2016 5:01:17 PM Success				
10/26/2016 4:12:	52 PM Success				
10/26/2016 4:07:	04 PM Success				Ξ
10/13/2016 1:53:	03 PM Success				
•				)	•



4. Locate your STS harvest file using the "browse" button, then select if you are going to match on MRN or SSN (MRN preferred). Use the external matching CSV file option only in MRNs or SSNs are not populated directly within the harvest file

👪 STS Import		- 🗆 🗙				
Status Import						
Please generate a harvest file using your STS software, including MRNs for patient matching purposes. Once a harvest file is generated, use this application to insert the STS data into your local MPOG database.						
Harvest file location:		Browse				
Match on:	MRN © SSN					
Use external matching csv file						
External matching file location:		Browse				
		ОК				



5. Click OK to start the import process. The process will import the STS data into the local MPOG database, perform patient matching, and set any PHI scrubber flags and transfer flags appropriately. After the process is complete, please run the PHI scrubber on "cases waiting for PHI scrub"

M PHI Scrubber	-	
PHI Scrubber Configuration PHI Scrubber S	ample Testing	
Case Set: O PHI scrub all cases (Including O Cases Waiting for PHI scrub	g previous cases already PHI scrubbed)	
<ul> <li>Specific Case: Enter MPOG</li> </ul>	_Case_ID here	
Date Range:  From: Select a date (optional) To: Select a date	15	
Start PHI Scrubbing Pause PHI Scrub	bbing Stop PHI Scrubbing	
Progress: 0% (0 of 0 cases completed)	Estimated Time Remaining:	
	process not started	



6. To transfer the scrubbed STS records, please use the transfer application. Select "cases awaiting re-upload" and leave "use stored modularity only" option checked

MPOG Uploader	- <b>- x</b>				
Database Selection					
Production					
rodución					
Case Selection					
There are 45256 cases that need to be PHI scrubbed.					
Cases awaiting upload 714051					
Cases awaiting initial upload	0				
Cases awaiting re-upload	/14051				
An cases (including those arready uploaded)	/19541				
Specify Data Panga					
Specily Date Kange					
From Select a date 15 To Select a date 15					
Blinded Record Index					
Note: You must be running a BRI service in order to use this.					
Create/undate the blinded record index for this natient					
Undate BBI only (Do not unload case data)					
Table Selection (applicable to cases being re-uploaded	only)				
Select All					
Billing Lab Values Physiologic					
Case Info Medications Preop					
Input Outputs Mortality Registry Data	a 🔰				
Intraop Notes Outcomes Sites					
Use Stored Modularity Unly					
Start Transfer					



#### **Contact Info**

 For questions, please contact <u>support@mpog.zendesk.com</u> for any technical assistance with the STS import application



Contact: support@mpog.zendesk.com