Naloxone Performance Measures (Backgound Information) - January 28, 2019

Outcome Measure	Numerator	Denominator	Comments
Clinical Improvement			
1) % of Patients with initial pulse ox < 94%, increased after EMS initiated care	# of Patients with primary or secondary impression of (suspected) opioid OD with initial pulse ox of 94% or less AND had a final pulse ox of > 94%	# of Patients with primary or secondary impression of (suspected) opioid OD with initial pulse ox of 94% or less	RH: Complex Measure calculation requiring Vital Sign Aggregation at the level of the
(This measure was ranked #1 of the 3 clinical improvement measures)	Distinct eRecord.01 Where Chronologicallty_Last(SpO2) > 94	(eSituation.11 or eSituation.12 = "T40.0X4", "T40.2X4", "T40.4X4", "T40.1X4") and Chronologically_First(SpO2) < 94	patient but feasible.
2) % of patients with GCS of less than 15 improved after EMS initiated care	# of Patients with primary or secondary impression of (suspected) opioid OD with initial GCS less than 15 AND had a final GCS higher than initial Distinct eRecord.01 Where Chronologicallty_Last (GCS_Total) > 15	# of Patients with primary or secondary impression of (suspected) opioid OD with initial GCS less than 15 eSituation.11 or eSituation.12 = "T40.0X4", "T40.2X4", "T40.4X4", "T40.1X4") and Chronologically_First (GCS_Total) < 15	RH: Complex Measure calculation requiring Vital Sign Aggregation at the level of the patient but feasible.
3) % of patients with respiratory rate less than 10 increased to 12 or more after EMS initiated care (Ranked as #2 clinical improvement measures)	# of Patients with primary or secondary impression of (suspected) opioid OD with initial RR less than 10 AND had a final RR equal or greater than 12 Distinct eRecord.01 Where Chronologicallty_Last (RR) > 15	# of Patients with primary or secondary impression of (suspected) opioid OD with initial RR less than 10 eSituation.11 or eSituation.12 = "T40.0X4", "T40.2X4", "T40.4X4", "T40.1X4") and Chronologically_First (RR) < 10)	RH: Complex Measure calculation requiring Vital Sign Aggregation at the level of the patient but feasible.
Identification / Treatment	Numerator	Denominator	Comments

4) % of patients with signs and symptoms of possible opioid OD who did not receive naloxone (under treatment) Probably most important to know when patient was under treated	# of Patients with altered LOC (GCS less than 15), and respiratory depression (RR less than 10), and/or pin point pupils, AND did not receive intervention of naloxone Need to verify language related to pinpoint pupils	# of Patients with altered LOC (GCS less than 15), and respiratory depression (RR less than 10), and/or pin point pupils	Potentially a balancing measure RH: This is possible with the data but assessment data for pupils inconsistent- if denominator is an "and" between the pupils and these other indicators it won't be many patients.
5) % of patients treated with Naloxone as suspected opioid overdose but did not exhibit signs and symptoms (over treatment) Measure added to address naloxone tunnel vision	# of patients who received naloxone AND DID NOT HAVE altered LOC (GCS less than 15), and respiratory depression (RR less than 10), and/or pin point pupils, OR Primary or Secondary Impression of (suspected) opioid OD or (eSituation.11 or eSituation.12 = ("T40.0X4", "T40.2X4", "T40.4X4", "T40.1X4"))	# of patients who received naloxone	
6) % of patients who were treated as suspected naloxone overdose and exhibited signs and symptoms (appropriate treatment) Measure added to balance other 2 measures	# of patients who received naloxone AND had altered LOC (GCS less than 15), and respiratory depression (RR less than 10) and/or pin point pupils; OR Primary or Secondary Impression of (suspected) opioid OD	# of Patients with altered LOC (GCS less than 15), and respiratory depression (RR less than 10), and/or pin point pupils; OR Primary or Secondary Impression of (suspected) opioid OD	
Patient Disposition	Numerator	Denominator	Comments

7) % of patients	# of Patients with primary or	# of Patients with primary or	RH: Easy
treated with	secondary impression of	secondary impression of	
Naloxone refused	(suspected) opioid OD AND	(suspected) opioid OD and	
transport	who received Naloxone	Naloxone was administered	
-	either prior to EMS arrival or	either Prior to EMS arrival	
Could be considered an	by EMS AND signed refusal	or by EMS	
outcome measure since	for ambulance transport	,	
condition must have	1	eSituation.11 or	
improved to be able to		eSituation.12 = "T40.0X4",	
refuse transport.		"T40.2X4", "T40.4X4",	
1		"T40.1X4")	
NEW QUESTION- Do		,	
protocols allow refusals of			
suspected opioid OD due to			
the potential of deterioration			
since duration of naloxone is			
shorter than most opioids?			
% of patients transported to	# of Patients with primary or	# of Patients with primary or	Possible
hospital by ambulance	secondary impression of	secondary impression of	dispositions
	(suspected) opioid OD AND	(suspected) opioid OD	include
Determined to be more of	who were transported to		refused,
Informational metric and	hospital by ambulance	eSituation.11 or	transported,
recommended we do not		eSituation. $12 = \text{``T40.0X4''},$	deceased (?)
include		"T40.2X4", "T40.4X4",	RH: Easy
		"T40.1X4")	

Supporting Measure	Numerator	Denominator	Comments
8) % of patients received	# where artificial assisted	# of Patients with	RH: Easy
airway support prior to	airway ventilation	primary or secondary	
administration of Naloxone	intervention preceded	impression of (suspected	
	Naloxone intervention) opioid OD	
This measure was determined to			
be not as important as time to		eSituation.11 or	
initiate assisted airway measure		eSituation.12 =	
		"T40.0X4", "T40.2X4",	
		"T40.4X4", "T40.1X4")	
% of patients received Naloxone	# with At-Scene time to	# of Patients with	DV: On-scene
within x (7) minutes from the time	assisted airway	primary or secondary	versus at-patient
EMS arrived on scene	intervention = 5 min or	impression of (suspected	because not all
	less) opioid OD	agencies
9) % of patients received			capture at-
artificial assisted airway		eSituation.11 or	patient time. At-
ventilation within 5		eSituation.12 =	scene captured
minutes from first		"T40.0X4", "T40.2X4",	by CAD which
responding EMS unit at		"T40.4X4", "T40.1X4")	automatically
scene time.			imports into
			ePCR. Five
This measure was ranked as #1 of			minutes chosen
Support measures			based on theory
			that on average

			it takes EMS 2-3 minutes to access patient once on scene and then allows up to 2 more minutes to begin ventilations.
% of patients receive Naloxone via	# receive Naloxone via	# of Patients with	RH: Easy Does it matter if
IN route during care	IN	primary impression of	they started
in violate during care		(suspected) opioid OD	with IN?
Why focus on route? Some		(caspected) opicia ob	RH: Easy
providers do not have IV as		eSituation.11 or	
option. Group recommends not		eSituation.12 =	
including this one.		"T40.0X4", "T40.2X4",	
		"T40.4X4", "T40.1X4")	
10) % of patients who exhibit	# of patients who receive	# of patients who receive	
adverse effects (agitation,	naloxone AND exhibit	naloxone	
vomiting, aspiration) after	adverse effects (agitation,		
administration of Naloxone.	vomiting, aspiration) after administration of		
Naioxone.	Naloxone		
This measure was added to capture	Naioxone		
occurrences of when treatment			
overshoots the goal of improving			
hypoxia and mental status (rather			
than full reversal with adverse			
reactions and need to re-medicate)			
Ranked as #2 support measure			

Performance Measures Team

Dr. Peter Taillac, Lead (performance measure development)

Richard Hale, Technical Lead (pseudocode development)

Debbie Vass (performance measure development)

Dr. Ken Williams, PI

Dr. John Lyng, Co-Inv.

Dia Gainor (performance measure development)

Mary Hedges

Zoe Renfro