

**SPECIALTY SOCIETIES—with Applicable Measures Developed or under Development**

<p>Internal Medicine</p>	<p>Applicable measures have been submitted to the National Quality Forum (NQF). The measures are currently in the public comment phase of the NQF process (e.g., Heart Disease: Coronary Artery Disease - percentage of patients who were prescribed a lipid-lowering therapy (based on current ATP III guidelines)).</p> <p>The Ambulatory care Quality Alliance (AQA) starter set of measures are applicable and ready (e.g., Hypertension: percentage of patient visits during which either systolic blood pressure &gt;140 mm Hg or diastolic blood pressure &gt;90 mmHg with documented plan of care for hypertension).</p>
<p>Internal Medicine – Cardiology</p>	<p>The Coronary Artery Disease (CAD) and Heart Failure (HF) measures are applicable and ready (e.g., Heart Failure (HF): percentage of patients who also have LSVD who were prescribed ACE Inhibitor or ARB therapy; percentage of patients who also have LSVD who were prescribed beta-blocker therapy).</p> <p>The specialty society is also developing additional measures.</p>
<p>Radiology</p>	<p>The American College of Radiology has appropriateness criteria for various diagnosis procedures (e.g., chest x-ray, computed tomography (CT) for detection of pulmonary embolism in adults). Measures on appropriateness of tests and appropriate communication of results are under development.</p>
<p>Surgery – Ophthalmology</p>	<p>The specialty society has readily available practice guidelines and summary benchmarks, which outline the process of care elements that are important for quality of eye care (e.g., appropriate management of primary angle open glaucoma; appropriate post-op care for filtering surgery patients; complete post-op examination post cataract surgery).</p> <p>Further, the Academy helped initiate a NCOA performance measure for glaucoma screening consistent with Medicare's new benefit, which was incorporated into HEDIS 2006, and also has contributed to the development of the diabetes eye exam HEDIS measure, which is also part of the AQA's starter set of ambulatory care measures.</p>

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<p>Family Practice</p>	<p>Applicable measures have been submitted to the NQF. The measures are currently in the public comment phase of the NQF process (e.g., percentage of patients who received an influenza immunization; percentage of patients who received a pneumococcal immunization; percentage of patients with diabetes with one or more A1C test(s) conducted during the measurement year).</p> <p>The AQA starter set of measures are applicable and ready (e.g., Hypertension: percentage of patient visits during which either systolic blood pressure &gt; 140 mm Hg or diastolic blood pressure &gt; 90 mm Hg, with documented plan of care).</p>
<p>Surgery – Orthopedic</p>	<p>Some Surgical Infection Prevention (SIP) and Surgical Care Improvement Project (SCIP) measures are directed for this specialty (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p> <p>Additional measures include the appropriate diagnosis and treatment of back pain.</p> <p>The specialty society is identifying and developing quality measures, e.g., the society has recently submitted 10 measures to NQF.</p>
<p>Surgery – General</p>	<p>The AV Fistula measure (Fistula First) could be refined for this specialty (e.g., the percentage of patients who have an autogenous arteriovenous fistula for dialysis vascular access).</p> <p>Most SIP/SCIP measures are directed for this specialty (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p>
<p>Internal Medicine – Hema-Oncology</p>	<p>Patient experience of care measures are applicable, ready, and are currently being used in the cancer demonstration program (e.g., percentage of patients reporting pain; percentage of patients reporting nausea/vomiting; percentage of patients reporting fatigue).</p> <p>The specialty society is in the initial stages of developing measures that are related to their practice guidelines.</p>

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Emergency Medicine	The majority of the current hospital measures are applicable to emergency room physicians (e.g., aspirin and beta blocker treatment at arrival for acute myocardial infarction).
Internal Medicine – Gastroenterology	Applicable measures include appropriate attention to patient monitoring before, during and after the procedure when using conscious sedation measures; the percentage of patients who had appropriate screening for colorectal screening.
Internal Medicine – Pulmonology	Chronic Obstructive Pulmonary Disease (COPD) measures are applicable (e.g., percentage of patients with COPD who had a spirometry evaluation documented; percentage of patients with systemic corticosteroids for acute exacerbation).
Anesthesiology	<p>Some SCIP measures are applicable (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p> <p>Additional measures include the appropriate evaluation of the patient – pre, during, and post procedure.</p>
Internal Medicine – Neurology	Applicable measures include the appropriate treatment of ischemic stroke; stroke rehabilitation; diagnosis of dementia.
Psychiatry	Applicable depressive measures have been submitted to the NOF. The measures are currently in the public comment phase of the NOF process (e.g., Effective Acute Phase Treatment: percentage of patients who were diagnosed with a new episode of depression and treated with antidepressant medication and remained on an antidepressant for at least 180 days).

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<p>General Practice</p>	<p>Applicable measures have been submitted to the NQF. The measures are currently in the public comment phase of the NQF process (e.g., percentage of patients who received an influenza immunization; percentage of patients who received a pneumococcal immunization; percentage of patients with diabetes with one or more A1C test(s) conducted during the measurement year).</p> <p>The AQA starter set of measures are applicable and ready (e.g., Hypertension: percentage of patient visits during which either systolic blood pressure &gt; 140 mm Hg or diastolic blood pressure &gt; 90 mm Hg, with documented plan of care).</p>
<p>Pathology</p>	<p>Practice guidelines are available but appear to be limited to interpretation. Measures on appropriateness of tests and appropriate communication of results are under development.</p>
<p>Internal Medicine – Nephrology</p>	<p>ESRD and DOQI measures currently measure at the facility level but could be readily refined to measure at the physician level (e.g., Regular Measurement of the Delivered Dose of Hemodialysis: the delivered dose of hemodialysis should be measured at least once a month in all adult and pediatric hemodialysis patients).</p>
<p>Physical Medicine and Rehabilitation</p>	<p>Applicable measures include stroke rehabilitation and the prevention of complications.</p>
<p>Internal Medicine – Rheumatology</p>	<p>Applicable measures have been submitted to the NQF. The measures are currently in the public comment phase of the NQF process (e.g., Osteoarthritis: Functional Assessment - percentage of patients diagnosed with symptomatic osteoarthritis that were assessed for function and pain annually).</p>
<p>Surgery – Neurological</p>	<p>Some of the SIP/SCIP measures could be refined for this specialty (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p>

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Surgery – Vascular	<p>The AV Fistula measure (Fistula First) could be refined for this specialty (e.g., the percentage of patients who have an autogenous arteriovenous fistula for dialysis vascular access).</p> <p>Some SIP/SCIP measures are applicable (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p>
Surgery – Thoracic/Cardiac	<p>The NQF endorsed Society of Thoracic Surgeons (STS) cardiac surgery measures are applicable (e.g., percentage of patients undergoing isolated coronary artery bypass graft (CABG) who received an internal mammary artery graft).</p> <p>Some SIP/SCIP measures are also applicable (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p>
Obstetrics/ Gynecology	<p>Applicable measures have been submitted to the NQF (e.g., rate of mammography screening; rate of cervical cancer screening).</p>
Surgery – Plastic & Reconstructive	<p>Some SIP/SCIP measures are applicable (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).</p>
Internal Medicine – Endocrinology/ Diabetes/ Metabolism	<p>The NQF endorsed diabetes measures are applicable and ready (e.g., percentage of patients with diabetes with one or more A1C test(s) conducted during the measurement year).</p>
Critical Care	<p>Applicable measures include the prevention of intra-vascular catheter-related infections; treatment of intra-vascular catheter-related infections; appropriate weaning from mechanical ventilatory support.</p>
Internal Medicine – Geriatric Medicine	<p>The AQA starter set of measures are applicable and ready (e.g., percentage of patients who received an influenza immunization; percentage of patients who received a pneumococcal immunization).</p> <p>Appropriate Assessing Care of Vulnerable Elders (ACOVE) measures for vulnerable elderly (e.g., detecting and treating conditions such as dementia, depression, and functional impairments that are underdetected in the elderly) may also be applicable.</p>

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Surgery – Colorectal	Some SIP/SCIP measures are applicable (e.g., prophylactic antibiotic received within one hour prior to surgical incision; surgical patients with recommended thromboembolism prophylaxis).
Nuclear Medicine	Applicable measures regarding the appropriate use of cardiac radionuclide imaging; appropriate protocols; appropriate patient preparation.
Preventive Medicine	Applicable measures have been submitted to NOF (e.g., percentage of patients who received an influenza immunization; percentage of patients who received a pneumococcal immunization; rate of mammography screening; rate of cervical cancer screening).