

## Data Abstraction Definitions Coronary Artery Disease (CAD)

DATA ELEMENTS/ VARIABLE NAMES	INSTRUCTIONS (DEFINITIONS, VALID VALUES)	INCLUSIONS/SYNONYMS	EXCLUSIONS
<p>Confirm Diagnosis of Coronary Artery Disease (CAD)</p> <p><b>[CADCONFIRMED]</b></p>	<p>Instruction: Determine if the patient has a documented history of CAD.</p> <p><b>Yes (1):</b> Select this option if the patient has a documented history of CAD anywhere in the office/clinic record.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient has no documented history of CAD anywhere in the office/clinic record.</p> <p style="text-align: center;"><b>If “No” - STOP ABSTRACTION</b></p> <p><b>Skip (2):</b> Select this option if you are unable to find the patient’s medical record.</p>	<p>AMI, angina, arteriosclerotic cardiovascular disease, arteriosclerotic heart disease, ASCVD, ASHD, atherectomy, atherosclerotic cardiovascular disease, atherosclerotic heart disease, CABG, CAD, cardiovascular (heart) disease, CHD, chronic myocardial ischemia, chronic stable angina, coronary arterio-sclerosis, coronary artery bypass graft, coronary artery disease, coronary disease, coronary endarteritis, coronary heart disease, coronary insufficiency, coronary vascular disease, CVD, ischemic heart disease, MI, myocardial infarction (current or history), PCI, percutaneous transluminal coronary angioplasty, post cardiac/coronary injury, PTCA, rotablator, S/P MI, status-post myocardial infarction, stent (coronary), unstable angina</p>	<p>Chest pain, unspecified Chest wall pain</p>

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Antiplatelet Therapy	<p>Instruction: Determine if the patient was prescribed antiplatelet therapy (aspirin, clopidogrel or a combination of aspirin and dipyridamole) <u>at any time during the measurement period.</u></p> <p><b>Yes (1):</b> Select this option if the patient was prescribed antiplatelet therapy.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient was not prescribed antiplatelet therapy or no reason was documented in the office/clinic record.</p> <p><b>Not prescribed for medical reasons (3):</b> Select this option if the patient was not prescribed antiplatelet therapy for medical reasons.</p> <p><b>Not prescribed for patient reasons (4):</b> Select this option if the patient was not prescribed antiplatelet therapy for patient reasons.</p> <p><b>Not prescribed for system reasons (5):</b> Select this option if the patient was not prescribed antiplatelet therapy for system reasons.</p>	<p>See drug list of aspirin and aspirin containing medications in Table 1 and clopidogrel medications in Table 2.</p> <p><b>Not prescribed for medical reasons (3) may include:</b> active bleeding in the previous six months which required hospitalization(s) or transfusion(s), adverse effect, allergy or intolerance, anaphylactic shock, angioneurotic edema due to aspirin, bleeding disorder, other reason documented by the practitioner for not prescribing aspirin or clopidogrel therapy</p>	None
[CADANTIPLA TDRUG]			

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Drug Therapy for Lowering LDL Cholesterol  [CADLCLDRUG]	<p>Instruction: Determine if the patient was prescribed drug therapy for lowering LDL Cholesterol <u>at any time during the measurement period</u>.</p> <p><b>Yes (1):</b> Select this option if the patient was prescribed drug therapy for lowering LDL Cholesterol.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient was not prescribed drug therapy for lowering LDL Cholesterol or no reason was documented in the office/clinic record.</p> <p><b>Not prescribed for medical reasons (3):</b> Select this option if the patient was not prescribed drug therapy for lowering LDL Cholesterol for medical reasons.</p> <p><b>Not prescribed for patient reasons (4):</b> Select this option if the patient was not prescribed drug therapy for lowering LDL Cholesterol for patient reasons.</p> <p><b>Not prescribed for system reasons (5):</b> Select this option if the patient was not prescribed drug therapy for lowering LDL Cholesterol for system reasons.</p>	<p>See drug list of lipid-lowering medications in Table 3.</p> <p><b>Not prescribed for medical reasons (3) may include:</b> LDL-C &lt; 130, adverse effect, anaphylactic shock, angioneurotic edema, other reason documented by the practitioner for not prescribing lipid-lowering therapy</p>	None
Myocardial Infarction (MI)  [CADMI]	<p>Instructions: Determine if the patient has a documented history of an MI (new or old).</p> <p><b>Yes (1):</b> Select this option if the patient has a documented history of an MI.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient does not have a documented history of an MI.</p>	<p>MI, AMI, cardiac infarction, coronary artery embolism, coronary artery occlusion, coronary artery rupture, coronary artery thrombosis, infarction of heart, infarction of myocardium, infarction of ventricle, anterolateral infarction, anterior infarction, anteroapical infarction, anteroseptal infarction, inferolateral infarction, inferoposterior infarction, inferior infarction, diaphragmatic wall infarction, lateral infarction, apical-lateral infarction, basal-lateral infarction, high lateral infarction, posterolateral infarction, posterior infarction, posterobasal infarction, subendocardial infarction, nontransmural infarction, infarction of atrium, infarction of papillary muscle, infarction of septum, thrombotic coronary artery, non-Q-wave MI, transmural myocardial infarction</p>	None

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<p>Beta-Blocker Therapy-Prior MI</p> <p>[CADBLOCKDRUG]</p>	<p>Instruction: Determine if the patient was prescribed beta-blocker therapy <u>at any time during the measurement period</u>.</p> <p><b>Yes (1):</b> Select this option if the patient was prescribed beta-blocker therapy.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient was not prescribed beta-blocker therapy or no reason was documented in the office/clinic record.</p> <p><b>Not prescribed for medical reasons (3):</b> Select this option if the patient was not prescribed beta-blocker therapy for medical reasons.</p> <p><b>Not prescribed for patient reasons (4):</b> Select this option if the patient was not prescribed beta-blocker therapy for patient reasons.</p> <p><b>Not prescribed for system reasons (5):</b> Select this option if the patient was not prescribed beta-blocker therapy for system reasons.</p>	<p>See drug list of beta-blocker medications in Table 4.</p> <p><b>Not prescribed for medical reasons (3) may include:</b> adverse reaction to beta-blockers, asthma, documentation of bradycardia &lt; 50 bpm (without beta-blocker therapy), exercise induced bronchospasm, history of Class IV (congestive) heart failure, history of second or third-degree atrioventricular (AV) block without permanent pacemaker, hypotension, orthostatic hypotension, sick sinus syndrome, SSS, other reason documented by the practitioner for not prescribing beta-blocker therapy</p>	<p>None</p>

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Lipid Profile	<p>Instruction: Determine if a lipid profile was performed <u>during the measurement period</u>.</p> <p><i>Note: The default setting for this element is Skip.</i></p>	Cholesterol analysis, cholesterol panel, cholesterol profile, fasting lipids, lipid analysis, lipid panel, lipids, lipoprotein analysis	None
[CADLIPID]	<p><b>Yes (1):</b> Select this option if a lipid profile was performed.</p> <p><b>No/No reason documented (0):</b> Select this option if a lipid profile was not performed.</p> <p><b>Skip (2):</b> Select this option if you are not abstracting records for this claims-based measure.</p> <p><i>Note: A lipid profile consists of <u>all</u> of the following components:</i></p> <ul style="list-style-type: none"> <li>• Total cholesterol</li> <li>• High-density lipoprotein cholesterol (HDL-C)</li> <li>• Low-density lipoprotein cholesterol (LDL-C)</li> <li>• Triglycerides</li> </ul> <p><i>If LDL-C could not be calculated due to high triglycerides, count as complete lipid profile.</i></p> <p><i>Use the following priority ranking:</i></p> <ul style="list-style-type: none"> <li>• Lab report draw date</li> <li>• Lab report date</li> <li>• Flow sheet documentation</li> <li>• Practitioner notes</li> <li>• Other documentation</li> </ul>		

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LDL Cholesterol Test	Instruction: Determine if the patient had one or more LDL-C tests during the <u>measurement period</u> .	Cholesterol analysis, cholesterol panel, cholesterol profile, fasting lipids, LDL:HDL, LDL:HDL ratio, lipid analysis, lipid panel, lipid profile, lipids, lipoprotein analysis, low density lipoprotein (LDL), LDL-Cholesterol, LDL-C	None
[CADLDLCTEST]	<b>Yes (1):</b> Select this option if the patient had one or more LDL-C tests.		
[CADLDLDATE]	<ul style="list-style-type: none"> <li>Record the most recent date the blood was drawn for LDL Cholesterol in MM/DD/YYYY format.</li> </ul>		
[CADLDLVALUE]	<ul style="list-style-type: none"> <li>Record the most recent LDL-C value [if laboratory unable to calculate LDL-C value due to high triglycerides, record 0 (zero)]</li> </ul>		
[CADLDLCTEST]	<p><b>No/No reason documented (0):</b> Select this option if the patient did not have one or more LDL-C tests.</p> <p>Use the following priority ranking:</p> <ul style="list-style-type: none"> <li>Lab report draw date</li> <li>Lab report date</li> <li>Flow sheet documentation</li> <li>Practitioner notes</li> <li>Other documentation</li> </ul>		
Diabetes	Instructions: Determine if the patient has diabetes.	See drug list of insulin preparations in Table 5 and oral hypoglycemic/antihyperglycemic medications in Table 6.	None
[CADDIABETES]	<p><b>Yes (1):</b> Select this option if the patient has diabetes.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient does not have diabetes.</p>	Diabetes mellitus, diabetes, Type II diabetes, IDDM, insulin dependent diabetes mellitus, NIDDM, non-insulin dependent diabetes mellitus, Type I diabetes	

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<p>Left Ventricular Systolic Dysfunction (LVSD)</p> <p><b>[HFCADLVSD]</b></p>	<p><b>THIS ELEMENT IS SYNCHRONIZED WITH THE LEFT VENTRICULAR SYSTOLIC DYSFUNCTION (LVSD) ELEMENT IN HF</b></p> <p>Instructions: Determine if the patient has LVSD (use most recent result). LVSD is present when left ventricular ejection fraction (LVEF) is less than 40% or documented as moderate to severe.</p> <p><b>Yes (1):</b> Select this option if the patient has LVSD.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient does not have LVSD.</p> <p><i>Note: If multiple diagnostic studies were performed on the same day to measure ejection fraction, use the following hierarchy to determine if LVSD is present:</i></p> <ul style="list-style-type: none"> <li>• cardiac catheterization</li> <li>• echocardiogram</li> <li>• MUGA or other cardiac scan</li> </ul>	<p>Moderate or severe LVSD (see synonyms below)</p>	<p>None</p>
<p><b>LVSD Synonyms– (moderate or severe)</b></p> <p><b>Contractility described as:</b></p> <ul style="list-style-type: none"> <li>• abnormal</li> <li>• compromised</li> <li>• decreased</li> <li>• depressed</li> <li>• impaired</li> <li>• low</li> <li>• poor</li> <li>• reduced</li> <li>• very low</li> </ul> <p><b>Ejection fraction (EF) described as:</b></p> <ul style="list-style-type: none"> <li>• abnormal</li> <li>• compromised</li> <li>• decreased</li> <li>• depressed</li> <li>• impaired</li> <li>• low</li> <li>• poor</li> <li>• reduced</li> <li>• very low</li> </ul> <p><b>Hypokinesia described as:</b></p> <ul style="list-style-type: none"> <li>• diffuse</li> <li>• generalized</li> <li>• global</li> </ul>	<p><b>Left ventricular dysfunction (LVD) described as:</b></p> <ul style="list-style-type: none"> <li>• marked</li> <li>• moderate</li> <li>• moderate-severe</li> <li>• severe</li> <li>• significant</li> <li>• substantial</li> <li>• the severity is not specified</li> <li>• very severe</li> </ul> <p><b>Left ventricular ejection fraction (LVEF) described as:</b></p> <ul style="list-style-type: none"> <li>• abnormal</li> <li>• compromised</li> <li>• decreased</li> <li>• depressed</li> <li>• impaired</li> <li>• low</li> <li>• poor</li> <li>• reduced</li> <li>• very low</li> </ul> <p><b>Left ventricular function (LVF) described as:</b></p> <ul style="list-style-type: none"> <li>• abnormal</li> <li>• compromised</li> <li>• decreased</li> <li>• depressed</li> <li>• impaired</li> <li>• low</li> <li>• poor</li> <li>• reduced</li> </ul>	<p><b>Left ventricular systolic dysfunction (LVSD) described as:</b></p> <ul style="list-style-type: none"> <li>• marked</li> <li>• moderate</li> <li>• moderate-severe</li> <li>• severe</li> <li>• significant</li> <li>• substantial</li> <li>• the severity is not specified</li> <li>• very severe</li> </ul> <p><b>Systolic dysfunction described as:</b></p> <ul style="list-style-type: none"> <li>• marked</li> <li>• moderate</li> <li>• moderate-severe</li> <li>• severe</li> <li>• significant</li> <li>• substantial</li> <li>• the severity is not specified</li> <li>• very severe</li> </ul> <p><b>Systolic function described as:</b></p> <ul style="list-style-type: none"> <li>• abnormal</li> <li>• compromised</li> <li>• decreased</li> <li>• depressed</li> <li>• impaired</li> <li>• low</li> <li>• poor</li> <li>• reduced</li> <li>• very low</li> </ul>	

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<p>ACE Inhibitor or ARB Therapy</p> <p>[CADACEARBDRUG]</p>	<p>Instruction: Determine if the patient was prescribed ACE Inhibitor or ARB therapy <u>at any time during the measurement period</u>.</p> <p><b>Yes (1):</b> Select this option if the patient was prescribed ACE Inhibitor or ARB therapy.</p> <p><b>No/No reason documented (0):</b> Select this option if the patient was not prescribed ACE Inhibitor or ARB therapy or no reason was documented in the office/clinic record.</p> <p><b>Not prescribed for medical reasons (3):</b> Select this option if the patient was not prescribed ACE Inhibitor and ARB therapy for medical reasons.</p> <p><b>Not prescribed for patient reasons (4):</b> Select this option if the patient was not prescribed ACE Inhibitor and ARB therapy for patient reasons.</p> <p><b>Not prescribed for system reasons (5):</b> Select this option if the patient was not prescribed ACE Inhibitor and ARB therapy for system reasons.</p>	<p>See drug list of ACE Inhibitor medications in Table 7 and ARBs in Table 8.</p> <p><b>Not prescribed for medical reasons (3) may include:</b> acute renal failure, adverse reaction to ACE (angiotensin-converting enzyme) inhibitor and ARB (angiotensin receptor blocker), allergy/intolerance to ACE inhibitor and ARB, angioedema , anuria, ARF, bilateral renal artery stenosis, BRAS, chronic renal failure, CRF, hypertrophic obstructive cardiomyopathy, mitral insufficiency, mitral stenosis, moderate or severe aortic stenosis, pregnancy, RAS, renal artery stenosis, renal failure, rheumatic aortic stenosis, rheumatic aortic valve obstruction, subaortic stenosis, other reason documented by the practitioner for not prescribing ACE Inhibitor and not prescribing ARB therapy</p>	<p>None</p>