

# SECTION O: SPECIAL TREATMENTS, PROCEDURES, AND PROGRAMS

Intent: The intent of the items in this section is to identify any special treatments, procedures, and programs that the patient received during the stay, including total parenteral nutrition and influenza vaccination status.

## O0100: Special Treatments, Procedures, and Programs

O0100. Special Treatments, Procedures, and Programs	
↓	Check if treatment applies at admission
<input type="checkbox"/>	N. Total Parenteral Nutrition

### Item Rationale

- The treatment listed in O0100, Special Treatments, Procedures, and Programs can affect the patient's ability to perform self-care and mobility activities.

### Steps for Assessment

- Review the patient's medical record to determine whether or not the patient received total parenteral nutrition at the time of admission.

### Coding Instructions

*Complete only at the time of admission*

- Check O0100N, Total Parenteral Nutrition (TPN), if the patient receives parenteral/intravenous (IV) feeding.

### Examples

- Mrs. C had a stroke following bowel surgery, and has been unable to eat or ingest adequate nutrients since her bowel surgery. Mrs. C receives total parenteral nutrition (TPN) using a peripherally inserted central catheter (PICC line) that infuses her nutrients, 24 hours daily.

Coding: Check box for O0100N. Total Parenteral Nutrition.

Rationale: Mrs. C's treatment plan includes TPN.

- Mr. Z. was involved in a severe motor vehicle accident that resulted in multiple fractures and internal injuries including his jaw and stomach, leaving him unable to eat. Mr. Z receives TPN using a central venous catheter that infuses his nutrients 24 hours per day.

Coding: Check box for O0100N. Total Parenteral Nutrition.

Rationale: Mr. Z's treatment plan includes TPN.

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## O0250: Influenza Vaccine

<b>O0250. Influenza Vaccine - Refer to current version of IRF-PAI Training Manual for current influenza vaccination season and reporting period.</b>	
Enter Code <input type="checkbox"/>	<b>A. Did the patient receive the influenza vaccine in this facility for this year's influenza vaccination season?</b> 0. <b>No</b> → Skip to O0250C. If influenza vaccine not received, state reason 1. <b>Yes</b> → Continue to O0250B. Date influenza vaccine received
	<b>B. Date influenza vaccine received</b> → Complete date and skip to Z0400A. Signature of Persons Completing the Assessment <div style="display: flex; justify-content: space-around; align-items: center;"> <div style="text-align: center;"> <input type="text"/> <input type="text"/>              M M           </div> <div style="text-align: center;"> <input type="text"/> <input type="text"/>              D D           </div> <div style="text-align: center;"> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>              Y Y Y Y           </div> </div>
Enter Code <input type="checkbox"/>	<b>C. If influenza vaccine not received, state reason:</b> 1. Patient not in this facility during this year's influenza vaccination season 2. Received outside of this facility 3. Not eligible - medical contraindication 4. Offered and declined 5. Not offered 6. Inability to obtain influenza vaccine due to a declared shortage 9. None of the above

### Item Rationale

- When infected with influenza, older adults and persons with underlying health problems are at increased risk for complications and are more likely than the general population to require hospitalization.
- An institutional influenza A outbreak can result in up to 60 percent of the population becoming ill, with 25 percent of those affected developing complications severe enough to result in hospitalization or death.
- Influenza-associated mortality results not only from pneumonia, but also from subsequent events arising from cardiovascular, cerebrovascular, and other chronic or immunocompromising diseases that can be exacerbated by influenza.
- As of 2014, the Centers for Disease Control and Prevention's (CDC's) Advisory Committee on Immunization Practices (ACIP) continues to recommend annual influenza vaccinations for all persons aged 6 months and older in the United States.<sup>1</sup>

<sup>1</sup> Grohskopf LA, Olsen SJ, Sokolow LZ, Bresee JS, Cox NJ, Broder KR, Karron RA, Walter EB. Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices (ACIP) – United States, 2014-2015 Influenza Season. Recommendations and Reports. Morbidity and Mortality Weekly Report (MMWR), August 15, 2014, 63(32); 691-697.  
<http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6332a3.htm>

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## Steps for Assessment

1. Review the patient's medical record to determine whether an influenza vaccine was received in the IRF for this year's influenza vaccination season. If the patient's vaccination status is known, proceed to coding O0250A.
2. If the patient did not receive the influenza vaccine in the IRF, ask the patient if he or she received an influenza vaccine outside of the facility for this year's influenza vaccination season. Please also review (when available) the patient's medical record from previous setting(s) (e.g., short-stay acute-care hospital medical records). If the patient's influenza vaccination status is still unknown, proceed to the next step.
3. If the patient is unable to answer, then ask the same question of the responsible party, legal guardian, or primary care physician. If vaccination status is still unknown, proceed to the next step.
4. If vaccination status cannot be determined, please refer to the standards of clinical practice to determine whether or not to administer the vaccine to the patient and proceed to coding O0250A.

### DEFINITION

#### VACCINATION SEASON

The influenza vaccination season is defined as beginning October 1 of the current year, or when the influenza vaccine becomes available (whichever comes first), through March 31 of the following year.

## Coding Instructions for O0250A

*Complete only at the time of discharge*

- Code 0, No, if the patient did not receive the influenza vaccine in this facility (IRF) during this year's influenza vaccination season. Proceed to O0250C. If influenza vaccine was not received, state reason.
- Code 1, Yes, if the patient received the influenza vaccine in this facility (IRF) during this year's influenza vaccination season. Continue to O0250B. Date Vaccine Received.

## Coding Instructions for O0250B

- Enter the date that the vaccine was received by the patient in your IRF. Do not leave any boxes blank.
- If the month contains only a single digit, fill in the first box of the month with a "0." If the day contains only a single digit, then fill the first box of the day with the "0."
  - For example, January 7, 2017, should be entered as 01-07-2017.
  - October 6, 2016, should be entered as 10-06-2016.
- A full 8-character date is required. If the date is unknown or the information is not available, a single dash "-" needs to be entered in the first box.

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## Coding Instructions for O0250C

- Code 1, Patient not in facility during this year's influenza vaccination season, if the patient was not in the facility during this year's influenza vaccination season.
- Code 2, Received outside of this facility, if the patient received an influenza vaccination in another setting (e.g., physician office, health fair, grocery store/pharmacy, hospital, fire station, etc.) during this year's influenza vaccination season.
- Code 3, Not eligible—medical contraindication, if the influenza vaccination was not received because of medical contraindications, including, but not limited to: allergic reaction to eggs or other vaccine component(s), previous adverse reaction to influenza vaccine, a physician order not to immunize, moderate to severe illness with or without fever, and/or history of Guillain-Barré Syndrome within 6 weeks of previous influenza vaccination. However, the patient should be vaccinated if contraindications end.
- Code 4, Offered and declined, if the patient or responsible party or legal guardian has been informed of what is being offered and chooses not to accept the influenza vaccine.
- Code 5, Not offered, if the patient or responsible party or legal guardian was not offered the influenza vaccine.
- Code 6, Inability to obtain vaccine due to a declared shortage, if the influenza vaccine was unavailable at the facility due to declared vaccine shortage. However, the patient should be vaccinated once the facility receives the vaccine. The annual supply of inactivated influenza vaccine and the timing of its distribution cannot be guaranteed in any year.
- Code 9, None of the above, if none of the listed reasons describe why the influenza vaccine was not administered. This code is also used if the answer is unknown.

## Coding Tips and Special Populations

- Information about current influenza season can be obtained by accessing the CDC Seasonal Influenza Web site: <http://www.cdc.gov/flu>.
- Facilities should follow current ACIP recommendations to inform standards of practice and applicable patients.
- Annual influenza vaccination of all persons aged 6 months or older continues to be recommended.

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## Examples

1. Mrs. J received the influenza vaccine in this IRF during this year's influenza vaccination season, on October 2, 2015.

Coding: O0250A would be coded 1, Yes; O0250B would be coded 10-02-2015; and O0250C would be skipped.

Rationale: Mrs. J received the vaccine in the facility on October 2, 2015, during this year's influenza vaccination season.

2. Ms. A received the influenza vaccine in the IRF on February 5, 2015 during this year's influenza season. This patient transferred to an acute-care facility on February 10 because of a medical emergency. The patient was then readmitted to the same IRF on February 20. The patient did not receive the influenza vaccination during the second IRF stay because she had already received it during the previous IRF stay. The patient is discharged home on March 1, 2015.

Coding: February 5 to February 10 stay IRF-PAI: O0250A would be coded 1, Yes; O0250B would be coded 02-05-2015; and O0250C would be skipped.

February 20 to March 1 stay IRF-PAI: O0250A would be coded 1, Yes; O0250B would be coded 02-05-2015; and O0250C would be skipped.

Rationale: Ms. A received the vaccine in the facility on February 5, 2015, during this year's influenza vaccination season. This date is reported on both assessments.

3. Mr. R did not receive the influenza vaccine in the IRF during this year's influenza vaccination season because of his known allergy to egg protein.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 3, Not eligible - medical contraindication.

Rationale: Allergy to egg protein is a medical contraindication to receiving the influenza vaccine; therefore, Mr. R did not receive the vaccine.

4. Mrs. T received the influenza vaccine at her doctor's office during this year's influenza vaccination season. Her doctor provided documentation of Mrs. T's receipt of the vaccine to the IRF in order to place the documentation in Mrs. T's medical record. He also provided documentation that Mrs. T was explained the benefits and risks for the vaccine prior to administration.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 2, Received outside of this facility.

Rationale: Mrs. T received the influenza vaccine at her doctor's office during this year's influenza vaccination season.

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5. Ms. M was hospitalized at the IRF after a severe traumatic brain injury on May 05, 2015 and discharged on June 02, 2015. She did not receive the influenza vaccine during this hospitalization.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 1, Patient not in facility during this year's influenza vaccination season.

Rationale: Ms. M did not receive the influenza vaccine as she was not in the facility during the influenza vaccination season (October 1 to March 31).

6. Mr. N was offered the influenza vaccine during his IRF hospitalization beginning in February 2015. Mr. N refused the influenza vaccine asserting that whenever he has received it in the past it always gave him the flu. Despite the staff providing education that the the influenza vaccine does not cause the flu, Mr. N still refused to take it.

Coding: O0250A would be coded 0, No; O0250B is skipped, and O0250C would be coded 4. Offered and declined.

Rationale: Mr. N did not receive the influenza vaccine. Despite the staff providing education that the the influenza vaccine does not cause the flu, Mr. N still refused to take it.

7. Mr. L was admitted to the IRF for intensive rehabilitation following a stroke. His family requests that he receive an influenza vaccine during his hospitalization. The nurse explains that there is currently a declared shortage of influenza vaccine and that Mr. L will receive a dose when the facility obtains more vaccine. Mr. L is discharged prior to the IRF receiving additional doses of the influenza vaccine. He is encouraged to ask his primary care physician about receiving the vaccine following discharge from the IRF.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 6, Inability to obtain vaccine due to a declared shortage.

Rationale: Mr. L did not receive the influenza vaccine because there was no influenza vaccine available at this time.

8. Mrs. T was admitted on Friday evening to the IRF during this year's influenza vaccination season. Mrs. T's acute-care medical records had been checked and there was no record of her having received the influenza vaccine. The patient and her family decided that Mrs. T was to be discharged and transferred to another IRF facility on the following Tuesday. The patient had never been offered an influenza vaccination.

Coding: O0250A would be coded 0, No; O0250B would be skipped; and O0250C would be coded 5, Not Offered.

Rationale: Mrs. T did not receive the influenza vaccine because she was never offered the influenza vaccine during her IRF stay.