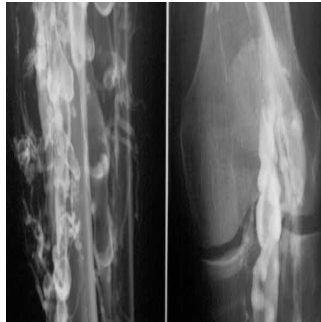

VTE No Measure for Hospital Quality



The rate of Venous Thromboembolism Events (VTE) is a key measure used by the Centres for Medicare and Medicaid Services to assess a hospital's quality performance. A recent study, however, suggests that VTE may not reflect quality at all. Instead, it directly reflects how frequently a hospital conducts imaging tests to diagnose the condition. The more tests, the more often the hospital will find VTEs.

Mila H. Ju, MD, MS, a clinical scholar with the American College of Surgeons (ACS) and a vascular surgery resident at the Northwestern University in Chicago, presented the findings at the 2014 Annual Meeting of the American Surgical Association. She said, "Hospitals may be unfairly deemed a poor performer for the VTE measure outcome if they have increased vigilance for VTE by performing more VTE imaging studies."

VTE is a controversial quality-of-care measure. From 2015, the occurrence of VTE will be tied to financial penalties through the CMS Value-Based Purchasing Initiative, since the CMS deems VTE a 'never event' that will not be reimbursed after certain operations. However, there are several who argue about the validity of this measure as they believe VTE events do not reflect poor hospital care. The same argument was presented in a study from the Surgical Outcomes and Quality Improvement Centre at Northwestern University, where it was found that hospitals with higher rates of VTE performed more imaging studies than other hospitals.

In this new study, Dr. Ju and her colleagues used the ACS National Surgical Quality Improvement Program (NSQIP) data for 208 hospitals from 2009 and 2010. The patients included in the analysis underwent 11 major surgical procedures associated with higher VTE rates. More than thirty patient factors were included for risk adjustment.

The study findings confirmed that VTE events in the first thirty days after surgery occurred more often at hospitals that performed more imaging studies. These findings highlight the need to evaluate the measures used to determine the quality of hospitals. According to Dr. Samuel R. G. Finlayson, MD, MPH, Chair of Surgery at the University of Utah in Salt Lake City, quality in healthcare is much more complicated than that, and VTE rates are not a key determinant to classify a hospital's level of quality.

Hiram C. Polk, MD and Professor of Surgery at the University of Louisville, Kentucky also points out that VTEs occur too infrequently in hospitals to be used as a quality measure. The events occur rarely after major elective surgery, around or below 1 percent. He stated "by focusing on VTE, we are not focusing on the right thing and such measures will not play any role in improving the quality of hospitals because they are the wrong target."

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