IAC
INTERSOCIETAL ACCREDITATION COMMISSION
CARDIAC ELECTROPHYSIOLOGY

Quality Improvement Assessment Questions

Cardiac Electrophysiology: Testing and Ablation

Answer the questions below by reviewing the images and final report for a given case study. It is recommended that any discrepancies noted in the analysis be reviewed and shared with medical, nursing and technical staff members. The analysis is provided to assist the facility in furthering its ongoing Quality Improvement (QI) process.

When you select a response marked with in the online tool, you will have the option to enter explanatory text.

I. Test appropriateness

With the clinical information provided, was the procedure ordered for an appropriate indication? Part C, 2.1.1C

- O Appropriate/usually appropriate
- O May be appropriate
- O Rarely appropriate/usually not appropriate

Comments:

II. Safety and procedural outcomes

1. Was a "Time-Out" for proper patient and procedure identification performed and documented? Part B, 1.2.3B — O Yes O No
2. Was a "Fire Safety Evaluation" performed and documented? Part B, 1.2.5B — O Yes O No
3. Did the physician procedural report document complication/adverse outcome(s)? Part B, 1.6.3.9B — O Yes O No
4. Did the physician procedural report contain one or more internal inconsistencies? Part B, 1.6.3B — O Yes O No
5. Was fluoroscopic exposure documented, when applicable (e.g., fluoroscopy time, radiation dose, dose-area product)? Part B, 1.6.1.3B xii — O Yes O No O N/A
6. Was this an ablation procedure performed for atrial fibrillation? (MIPS Quality Specialty-Specific Measure Set #392 / NQF Measure #2474) — O Yes O No
7. If your answer to #6 was "Yes", what category best describes the patient? (MIPS Quality Specialty-Specific Measure Set #392 / NQF Measure #2474)
   - O Female 18-64 years of age
   - O Male 18-64 years of age
   - O Female 65 years of age and older
   - O Male 65 years of age and older
   - O N/A (Less than 18 years of age)
8. As a result of this procedure did the patient experience cardiac tamponade? (MIPS Quality Specialty-Specific Measure Set #392 / NQF Measure #2474) — O Yes O No
9. As a result of this procedure did the patient undergo a pericardiocentesis? (MIPS Quality Specialty-Specific Measure Set #392 / NQF Measure #2474) — O Yes O No

Comments:

III. Interpretive quality review

1. Did the physician procedural report include all positive and negative findings? Part B, 1.6.3.9B — O Yes O No

2. Did the physician procedural report accurately discuss the baseline arrhythmia/rhythm? Part B, 1.6.3.6B and Part B, 1.6.3.7B i — O Yes O No
3. Did the physician procedural report accurately describe the origin of the baseline arrhythmia? Part B, 1.6.3.6Bv — O Yes O No
4. Did the physician procedural report accurately describe the post-procedure arrhythmia/rhythm? Part B, 1.6.3.6Bx — O Yes O No
5. Are all clinically significant findings report within the physician procedural report? — O Yes O No

Was there variability between the original interpretation and the over read/peer review interpretation? — O Yes O No

Could the interpretive quality of this procedure have been improved? — O Yes O No

Comments:

IV. Report completeness and timeliness

1. Did the physician procedural report include an indication for the study? Part B, 1.6.3B — O Yes O No
2. Did the physician procedural report include a summary of baseline diagnostic measures? Part B, 1.6.3.3B — O Yes O No
3. Did the physician procedural report include a summary of catheter ablation results? Part B, 1.6.3.7B — O Yes O No
4. Was the study interpreted within the required time? Part B, 1.5.3B — O Yes O No
5. Was the final report generated within the required time? Part B, 1.5.3B — O Yes O No

Was the report complete? Part B, 1.6B — O Yes O No

Was the final report completed in a timely manner? Part B, 1.5.3B — O Yes O No

Comments: