General

Title
Advanced chronic kidney disease (CKD): percent of patients referred for surgery for construction of an arteriovenous (AV) fistula on index date.

Source(s)

Measure Domain

Primary Measure Domain
Clinical Quality Measures: Process

Secondary Measure Domain
Does not apply to this measure

Brief Abstract

Description
This measure assesses the percent of patients referred for surgery for construction of an arteriovenous (AV) fistula on index date (i.e., the date patient is first seen by practitioner and identified as having advanced chronic kidney disease [CKD]) among patients with advanced CKD for whom hemodialysis is the chosen mode of renal replacement therapy.

Rationale
Utilizing conventional criteria for the initiation of renal replacement therapy (RRT), such as congestive heart failure, malnutrition, acidosis or uremia, can lead to patients being treated only when they have already suffered irreversible cumulative complications from chronic kidney disease (CKD). It is therefore imperative to properly time the initiation of RRT in order to minimize morbidity and mortality. The role of patient factors such as therapeutic preferences is also considered especially important in timing, initiation, and choice of modality of RRT.

Patients and healthcare professionals should be educated about the need to preserve veins to avoid loss of potential access sites. Repeated venipuncture for vascular access may render arm vein sites unsuitable for construction of a primary arteriovenous (AV) fistula. In addition, subclavian vein catheterization should be avoided for temporary access due to the risk of central venous stenosis.
Evidence for Rationale


Primary Health Components

Advanced chronic kidney disease; arteriovenous fistula; surgery

Denominator Description

The number of adult patients with advanced chronic kidney disease (CKD) not currently receiving renal replacement therapy (RRT) for whom hemodialysis is the chosen mode of RRT

Numerator Description

The number of patients from the denominator referred for surgery for construction of an arteriovenous (AV) fistula on index date (i.e., the date patient is first seen by practitioner and identified as having advanced advanced chronic kidney disease [CKD])

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

A clinical practice guideline or other peer-reviewed synthesis of the clinical research evidence
A formal consensus procedure, involving experts in relevant clinical, methodological, public health and organizational sciences
A systematic review of the clinical research literature (e.g., Cochrane Review)

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

Unspecified

State of Use of the Measure

State of Use

Current routine use
Current Use
not defined yet

Application of the Measure in its Current Use

Measurement Setting
Ambulatory/Office-based Care
Hospital Outpatient

Professionals Involved in Delivery of Health Services
not defined yet

Least Aggregated Level of Services Delivery Addressed
Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size
Unspecified

Target Population Age
Age greater than or equal to 18 years

Target Population Gender
Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim
Better Care

National Quality Strategy Priority
Person- and Family-centered Care
Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories
Data Collection for the Measure

Case Finding Period
Unspecified

Denominator Sampling Frame
Patients associated with provider

Denominator (Index) Event or Characteristic
Clinical Condition
Patient/Individual (Consumer) Characteristic
Therapeutic Intervention

Denominator Time Window
not defined yet

Denominator Inclusions/Exclusions
Inclusions
Adult patients age 18 years and older with chronic kidney disease stage 4 or 5 (glomerular filtration rate [GFR] less than or equal to 30 mL/min/1.73 m²), not currently receiving renal replacement therapy, for whom hemodialysis is the chosen mode of renal replacement therapy (RRT)

Exclusions
Unspecified

Exclusions/Exceptions
not defined yet

Numerator Inclusions/Exclusions
Inclusions
The number of patients from the denominator referred for surgery for construction of an arteriovenous (AV) fistula on index date (i.e., the date patient is first seen by practitioner and identified as having advanced chronic kidney disease [CKD])

**Exclusions**
- Unspecified

**Numerator Search Strategy**
- Episode of care

**Data Source**
- Administrative clinical data
- Laboratory data
- Paper medical record

**Type of Health State**
- Does not apply to this measure

**Instruments Used and/or Associated with the Measure**
- Unspecified

**Computation of the Measure**

**Measure Specifies Disaggregation**
- Does not apply to this measure

**Scoring**
- Rate/Proportion

**Interpretation of Score**
- Desired value is a higher score

**Allowance for Patient or Population Factors**
- Not defined yet

**Standard of Comparison**
- Not defined yet
Identifying Information

Original Title
Number of patients referred for surgery for construction of an AV fistula on index date / number of patients with advanced CKD for whom hemodialysis is the chosen mode of RRT.

Measure Collection Name
Clinical Performance Measures on Appropriate Patient Preparation for Renal Replacement Therapy

Measure Set Name
Timing of Renal Replacement Therapy Recommendations

Submitter
Renal Physicians Association - Medical Specialty Society

Developer
Renal Physicians Association - Medical Specialty Society

Funding Source(s)
Ortho Biotech Products, LP

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There were none disclosed.

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This measure was not adapted from another source.

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Unspecified

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Unspecified

Measure Status
This is the current release of the measure.
The measure developer reaffirmed the currency of this measure in March 2016.

Measure Availability
Source not available electronically.
For more information, contact the Renal Physicians Association (RPA) at 1700 Rockville Pike, Suite 220, Rockville, MD 20852; Phone: 301-468-3515; Fax: 301-468-3511; Web site: www.renalmd.org; E-mail: rpa@renalmd.org

NQMC Status
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The information was reaffirmed by the measure developer on March 11, 2016.

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Production

Source(s)


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