Complete Summary

TITLE

Pediatric acute gastroenteritis: percentage of patients aged 1 month to 5 years of age with a diagnosis of acute gastroenteritis whose parent/caregiver received education on diet and when to contact the physician.

SOURCE(S)

American Academy of Pediatrics, American Academy of Family Physicians, Physician Consortium for Performance Improvement®. Pediatric acute gastroenteritis physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2005 May. 7 p. [1 reference]

Measure Domain

PRIMARY MEASURE DOMAIN

Process

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

This measure is used to assess the percentage of pediatric acute gastroenteritis patients whose parent/caregiver received education on diet and when to contact the physician.

RATIONALE

According to the American Academy of Pediatrics (AAP) and the U.S. Centers for Disease Control and Prevention (CDC), as soon as dehydration is corrected, feeding should begin.

Breastfed infants should continue nursing on demand. Formula-fed infants should continue their usual formula immediately upon rehydration in amounts sufficient

to satisfy energy and nutrient requirements. Children receiving solid foods should continue to receive their usual diet during episodes of diarrhea.

Caregivers should be encouraged to return for medical attention if they have any concerns, if they are not sure that rehydration is proceeding well, or if new or worsening symptoms develop.

Successful home management of dehydration associated with acute gastroenteritis is dependent upon the parent/caregiver receiving proper education. Instructions regarding the frequency of administration of appropriate oral hydration solutions (ORS), continuation of regular diet, and when the parent/caregiver should contact the physician are all topics that should be covered prior to discharging the child home with the parent/caregiver.

PRIMARY CLINICAL COMPONENT

Pediatric acute gastroenteritis; parent/caregiver education; diet; when to contact the physician

DENOMINATOR DESCRIPTION

All patients aged 1 month to 5 years of age with the diagnosis of acute gastroenteritis seen in the ambulatory setting*

*Ambulatory setting is defined as seen in the physician office or emergency department and discharged home.

NUMERATOR DESCRIPTION

All patients whose parent/caregiver received education on diet and when to contact the physician

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

 A clinical practice guideline or other peer-reviewed synthesis of the clinical evidence

NATIONAL GUIDELINE CLEARINGHOUSE LINK

 Managing acute gastroenteritis among children: oral rehydration, maintenance, and nutritional therapy.

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Use of this measure to improve performance

EVIDENCE SUPPORTING NEED FOR THE MEASURE

Northrup RS, Flanigan TP. Gastroenteritis. Pediatr Rev1994 Dec;15(12):461-72. [10 references] PubMed

Practice parameter: the management of acute gastroenteritis in young children. American Academy of Pediatrics, Provisional Committee on Quality Improvement, Subcommittee on Acute Gastroenteritis. Pediatrics1996 Mar;97(3):424-35. PubMed

Snyder JD. Use and misuse of oral therapy for diarrhea: comparison of US practices with American Academy of Pediatrics recommendations. Pediatrics1991 Jan;87(1):28-33. PubMed

State of Use of the Measure

STATE OF USE

Pilot testing

CURRENT USE

Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Emergency Medical Services Hospitals Physician Group Practices/Clinics

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Advanced Practice Nurses Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Individual Clinicians

TARGET POPULATION AGE

Age 1 month to 5 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

Getting Better

IOM DOMAIN

Effectiveness

Data Collection for the Measure

CASE FINDING

Users of care only

DESCRIPTION OF CASE FINDING

All patients aged 1 month to 5 years of age with the diagnosis of acute gastroenteritis

DENOMINATOR SAMPLING FRAME

Patients associated with provider

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

All patients aged 1 month to 5 years of age with the diagnosis of acute gastroenteritis seen in the ambulatory setting*

*Ambulatory setting is defined as seen in the physician office or emergency department and discharged home.

Exclusions

None

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Clinical Condition Encounter

DENOMINATOR TIME WINDOW

Time window is a single point in time

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

All patients whose parent/caregiver received education on diet and when to contact the physician

Exclusions

None

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Encounter or point in time

DATA SOURCE

Administrative data Medical record

LEVEL OF DETERMINATION OF QUALITY

Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Rate

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Unspecified

STANDARD OF COMPARISON

Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

Acute gastroenteritis: education.

MEASURE COLLECTION

The Physician Consortium for Performance Improvement® Measurement Sets

MEASURE SET NAME

Pediatric Acute Gastroenteritis Physician Performance Measurement Set

SUBMITTER

American Medical Association on behalf of the American Academy of Pediatrics, the American Academy of Family Physicians, and the Physician Consortium for Performance Improvement®

DEVELOPER

American Academy of Family Physicians American Academy of Pediatrics Physician Consortium for Performance Improvement®

FUNDING SOURCE(S)

Unspecified

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

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FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

Conflicts, if any, are disclosed in accordance with the Physician Consortium for Performance Improvement® conflict of interest policy.

ADAPTATION

Measure was not adapted from another source.

RELEASE DATE

2005 May

MEASURE STATUS

This is the current release of the measure.

SOURCE(S)

American Academy of Pediatrics, American Academy of Family Physicians, Physician Consortium for Performance Improvement®. Pediatric acute gastroenteritis physician performance measurement set. Chicago (IL): American Medical Association (AMA); 2005 May. 7 p. [1 reference]

MEASURE AVAILABILITY

The individual measure, "Acute Gastroenteritis: Education," is published in the "Clinical Performance Measures: Pediatric Acute Gastroenteritis." This document and technical specifications are available in Portable Document Format (PDF) from the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement® Web site: www.physicianconsortium.org.

For further information, please contact AMA staff by e-mail at cgi@ama-assn.org.

NQMC STATUS

This NQMC summary was completed by ECRI Institute on December 6, 2006. The information was verified by the measure developer on October 23, 2006.

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