

Patient Care Cervical Cancer Screening

OntarioMD i4C Dashboard Indicator

For more information regarding OntarioMD Indicators or the EMR i4C Dashboard Specification, please refer to:

<https://www.ontariomd.ca/emr-certification/emr-specification/ontariomd-indicator-library>

1. VERSION HISTORY

INDICATOR VERSION	PUBLICATION DATE	REMARKS
1.0	2019-02-18	<ul style="list-style-type: none"> Initial release
2.0	2019-07-09	<ul style="list-style-type: none"> Add a new optional Patient List column to display latest Q011A tracking code submitted for billing, independent of when the last screening was captured in the EMR Added Indicator ID, Indicator Segment ID and Display Indicator Segment properties Changed format and content of Indicator User Help Changed format of Source property Indicator Segment IDs re-sequenced to provide consistency across indicators Indicator Segment Query Criteria clarifies that query result from a segment should produce a count of patients
2.1	2020-06-15	<ul style="list-style-type: none"> Indicator Segment Query Notes updated to provide clarification in distinguishing between codes /text used to identify procedures and codes/text to identify diagnoses within screening exclusions criteria. Layout of definition file changed to improve readability of indicator segment properties Description and User Help content now contained in separate document. Description and User Help attributes in definition now contain wording to confirm content is kept separately

2. INDICATOR DEFINITION

2.1 Indicator Properties

PROPERTY	VALUE
Indicator ID	PHC-CAN-003
Indicator Name	Patient Care Cervical Cancer Screening
Indicator Version	2.1
Date Published	2020-06-15
Description	Indicator description is part of the User Help content, now maintained in a separate document within the i4C Dashboard Indicator Library.
Source	HQO
Source Description	Based on the HQO indicator framework version published in October 2015.
Status	Active
Category	Preventive Health Care
Subcategory	Cancer
Indicator Order	3
Indicator Graphic Type	Pie or Bar Chart
Indicator Graphic Notes	
Indicator User Help	User Help content is now maintained in a separate document within the i4C Dashboard Indicator Library.

PROPERTY	VALUE
Indicator Segment Query Notes	<p>Active Patients are patients identified as 'Active' in the Patient Status data element (DE01.016) within <i>Patient Demographics</i>.</p> <p>Female Patients are patients identified as 'F' or "Female" in the Gender data element (DE01.006) within <i>Patient Demographics</i>.</p> <p>Patient Age can be calculated based on the difference between the current date and the patient's date of birth captured in the Date of Birth data element (DE01.007) within <i>Patient Demographics</i>.</p> <p>Pap Exclusion is any of the following documented in the EMR:</p> <ul style="list-style-type: none"> • A Q140A Service Code that has been billed for the patient; • A coded ICD-9 diagnosis of V45.77 (Acquired absence of organ, genital organs) captured in Diagnosis/Problem within <i>Ongoing Health (DE06.004)</i> or <i>Past Medical & Surgical (DE07.004)</i>; • A text entry of 'Cervical Ca' captured in Diagnosis/Problem within <i>Ongoing Health (DE06.004)</i> or <i>Past Medical & Surgical (DE07.004)</i>; • A coded ICD-9 procedure of 68.3 (Subtotal Abdominal Hysterectomy), 68.4 (Total Abdominal Hysterectomy), 68.5 (Vaginal Hysterectomy), 68.6 (Radical Abdominal Hysterectomy), 68.7 (Radical Vaginal Hysterectomy), 68.8 (Pelvic evisceration), or 68.9 (Other and unspecified hysterectomy) captured in procedure (DE07.006) within <i>Past Medical & Surgical</i>; • A text entry of 'hysterectomy', 'hysterosal', 'TVH', 'TABH', or 'TAH' captured in procedure (DE07.006) within <i>Past Medical & Surgical</i>; • Any additional documentation method representing best practice workflow(s) identified and supported across practices within a specific EMR. <p>ICD-9 and ICD-10 are hierarchical coding systems built on general categories and (optional) specific subcategories. A dot separator is used to separate category from subcategory in representing a code. Some EMR offerings omit the dot separator in representing codes in data capture and EMR data searches. For these EMRs, vendors will omit the dot separator in searches and queries.</p> <p>Pap Test is any of the following documented in the EMR:</p> <ul style="list-style-type: none"> • A Q011A Tracking Code that has been billed for the patient; • A report received from a sending facility identifying a Pap test has been completed either by report name, report categorization or report content; • A pap test captured in the Procedure data element (DE07.006) within <i>Past Medical & Surgical</i>; • Any additional documentation method representing best practice workflow(s) identified and supported across practices within a specific EMR.
Patient List Notes	<p>Patient Name is a combination of First Name (DE01.003) and Last Name (DE01.002) data items from <i>Patient Demographics</i>. Names maybe displayed either as separate columns or concatenated into one column.</p>

PROPERTY	VALUE
	<p>Unique Patient Identifier is any data item from <i>Patient Demographics</i> that can be used by a physician or clinic to uniquely identify a patient when displayed. Examples include Health Card Number (<i>DE01.008</i>) or Chart Number (<i>DE01.012</i>).</p> <p>Patient Date of Birth is captured into <i>Patient Demographics</i> as Date of Birth (<i>DE01.007</i>).</p> <p>Patient Age is calculated data item representing the difference between the current date and Date of Birth (<i>DE01.007</i>) from <i>Patient Demographics</i>. Age should be displayed in years.</p> <p>Patient Phone Number is the preferred phone number for contacting a patient and may include Residence Phone (<i>DE02.007</i>), Cell Phone (<i>DE02.008</i>) or Work Phone (<i>DE02.009</i>) from <i>Patient Address</i>.</p> <p>Patient Enrollment Status represents whether the patient is currently enrolled, was enrolled but has been terminated, or has never been enrolled, and is captured into <i>Patient Demographics</i> as Enrollment Status (<i>DE01.019</i>).</p> <p>Patient Enrollment Status Date represents the date when a patient has been most recently enrolled or terminated by the clinic. If the patient is currently enrolled, then the date displayed will be the Enrollment Date (<i>DE01.020</i>) from <i>Patient Demographics</i>. If the patient is currently terminated, then the date displayed will be the Enrollment Termination Date (<i>DE01.021</i>) from <i>Patient Demographics</i>. If the patient has never been enrolled, then the date will be displayed as a null or blank value.</p> <p>Latest Pap Test represents the result and/or date from the latest documented pap test. This may also include a column displaying how the test was documented (e.g., billing code, screening report, past medical history procedure, etc.)</p> <p>Latest Tracking Code is a date representing the last time a Q011A tracking code has been billed for the patient (independent of the <i>latest Pap test</i>, which may be identified by criteria other than tracking code).</p> <p>Latest Pap Exclusion Service Code is a date representing the last time a Q140A Service Code has been billed for the patient.</p> <p>Last Seen Date is a date representing the last time a patient was seen by the physician or another clinician within the clinic. This may be based on <i>Appointment Date/Time</i> (<i>DE15.001</i>), where appointments with status of 'No Show', 'Cancelled', or 'Deleted' are excluded, or this may be based on any additional documentation supported by the EMR to track when a patient has last been seen (e.g., encounter notes).</p> <p>Next Appointment Date is a date representing the next time a patient is scheduled to be seen by the physician or another clinician within the clinic. This may be based on <i>Appointment Date/Time</i> (<i>DE15.001</i>).</p>

2.2 Indicator Segment Properties

Indicator Segment ID	Indicator Segment Label	Display Indicator Segment	Indicator Segment Query Criteria	Patient List Criteria
1	Screening up to date	Yes	<p>COUNT OF:</p> <p>Active patients, female, age 21-69 inclusive</p> <p>AND WITHOUT a documented pap exclusion</p> <p>AND WITH a documented pap test in the last 36 months inclusive</p>	<p>Mandatory</p> <p>Patient Name</p> <p>Unique Patient Identifier</p> <p>Patient Date of Birth</p> <p>Optional</p> <p>Patient Age</p> <p>Patient Phone Number</p> <p>Patient Enrollment Status</p> <p>Patient Enrollment Status Date</p> <p>Latest Pap Test</p> <p>Latest Tracking Code</p> <p>Last Seen Date</p> <p>Next Appointment Date</p>
2	Screening Overdue	Yes	<p>COUNT OF:</p> <p>Active patients, female, age 21-69 inclusive</p> <p>AND WITHOUT a documented pap exclusion</p> <p>AND WITHOUT a documented pap test in the last 36 months inclusive</p>	<p>Mandatory</p> <p>Patient Name</p> <p>Unique Patient Identifier</p> <p>Patient Date of Birth</p> <p>Optional</p> <p>Patient Age</p> <p>Patient Phone Number</p> <p>Patient Enrollment Status</p> <p>Patient Enrollment Status Date</p> <p>Latest Pap Test</p> <p>Latest Tracking Code</p> <p>Last Seen Date</p> <p>Next Appointment Date</p>

Indicator Segment ID	Indicator Segment Label	Display Indicator Segment	Indicator Segment Query Criteria	Patient List Criteria
3	Excluded	Yes	COUNT OF: Active patients, female, age 21-69 inclusive AND WITH a documented pap exclusion	Mandatory Patient Name Unique Patient Identifier Patient Date of Birth Optional Patient Age Patient Phone Number Patient Enrollment Status Patient Enrollment Status Date Latest Pap Test Latest Tracking Code Last Seen Date Next Appointment Date Latest Pap Exclusion Service Code