



دائرة الصحة  
DEPARTMENT OF HEALTH

**JAWDA Quarterly KPI  
Guidelines for Pediatrics Health  
Service Providers**

**Issued: 2022**

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### Executive Summary

The Department of Health– Abu Dhabi (DOH) is the regulatory body of the healthcare sector in the Emirate of Abu Dhabi and ensures excellence in healthcare for the community by monitoring the health status of its population.

The Emirate of Abu Dhabi is experiencing a substantial growth in the number of hospitals, centers and clinics. This is ranging from school clinics and mobile units to internationally renowned specialist and tertiary academic centers. Although, access and quality of care has improved dramatically over the last couple of decades, mirroring the economic upturn and population boom of Emirate of Abu Dhabi, however challenges remain in addressing further improvements.

The main challenges that are presented with increasingly dynamic population include an aging population with increased expectation for treatment, utilization of technology and diverse workforce leading to increased complexity of healthcare provision in Abu Dhabi. All of this results in an increased and inherent risk to quality and patient safety.

DOH has developed dynamic and comprehensive quality framework in order to bring about improvements across the health sector. This guidance relates to the quality indicators that DOH is mandating the quarterly reporting against by the operating general and specialist hospitals in Abu Dhabi.

The guidance sets out the full definition and method of calculation for patient safety and clinical effectiveness indicators. For enquiries about this guidance, please contact [jawda@doh.gov.ae](mailto:jawda@doh.gov.ae)

This document is subject for review and therefore it is advisable to utilize online versions available on the DOH at all times.

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### **About this Guidance**

The guidance sets out the definitions and reporting frequency of Jawda Pediatric Healthcare performance indicators (PED). The Department of Health (DoH), in consultation with local pediatrics healthcare expertise has developed Pediatric Healthcare performance indicators (PED) that are aimed for assessing the degree to which a provider competently and safely delivers the appropriate clinical services to the patient within the optimal period.

The Jawda KPIs in this guidance include measures to monitor morbidity in pediatrics patients receiving pediatrics healthcare services.

### **Who is this guidance for?**

All DoH licensed healthcare facilities providing pediatrics healthcare in the Emirate of Abu Dhabi.

### **How do I follow this guidance?**

Each provider will nominate one member of staff to coordinate, collect, monitor and report pediatrics health services quality indicators data as per communicated dates. The nominated healthcare facility lead must in the first instance e-mail their contact details (if different from previous submission) to [JAWDA@doh.gov.ae](mailto:JAWDA@doh.gov.ae) and submit the required quarterly quality performance indicators through Jawda online portal.

### **What are the Regulation related to this guidance?**

- Legislation establishing the Health Sector
- As per DoH [Policy for Quality and Patient Safety](#) issued January 15<sup>th</sup> 2017, this guidance applies to all DOH Licensed Hospitals providing pediatric health services in the Emirate of Abu Dhabi in accordance with the requirements set out in this Standard.

## Jawda Pediatric Healthcare Quality Performance Indicators

Type: Quality Indicator    Indicator Number:

PED001

<b>KPI Description (title):</b>	Pediatric 30-Day All-Cause Readmission Rate
<b>Domain</b>	Effectiveness of Care
<b>Sub-Domain</b>	Readmission
<b>Definition:</b>	Percentage of patients less than 18 years who were re- admitted to a hospital for any condition, including a different condition than the reason for their index hospital admission.
<b>Calculation:</b>	<p><b>Numerator:</b></p> <p>Number of pediatric inpatients who were readmitted to an acute care hospital including children’s hospital within 30 days of discharge from index hospitalization. (If a patient has more than one readmission <i>within 30 days</i> of discharge from the index admission, only the first is considered as readmission).</p> <p><b>Numerator exclusions:</b></p> <p>Presence of at least one of the following:</p> <ul style="list-style-type: none"> <li>• Readmission was for a planned procedure / planned treatment protocol</li> <li>• Readmission with the following admittance status: <ul style="list-style-type: none"> <li>○ Elective</li> <li>○ Transfer admission from acute care</li> </ul> </li> <li>• Admission was for obstetric care, including labor and delivery (Code series O00-O9A, Pregnancy, childbirth and the puerperium Chapter)</li> <li>• Neonates (zero to twenty eight days inclusive)</li> <li>• Admission with a principal diagnosis of mental illness (F01-F99 series)</li> <li>• Admission with a principal diagnosis or treatment of malignancy or status of chemotherapy (Malignant neoplasms (C00-C96), In situ neoplasms (D00-D09), Z51.11 Encounter for antineoplastic chemotherapy, &amp; Z51.12 Encounter for antineoplastic immunotherapy)</li> <li>• Admission for palliative care (ICD-10-CM: Z51.5)</li> </ul> <p><b>Denominator</b></p> <p>Total number of pediatric inpatients less than 18 years old discharged (All medical and surgical discharges) from acute care hospitals including children’s hospital during the reporting period.</p>

## Jawda Pediatric Healthcare Quality Performance Indicators

	<p><b>Denominator exclusions:</b></p> <ul style="list-style-type: none"> <li>• The patient was 18 years old or older at the time of discharge.</li> <li>• Neonates (zero to twenty eight days inclusive)</li> <li>• Episodes with a discharge of death</li> <li>• Patients who were discharged/left against medical advice (AMA)</li> <li>• Patients who were transferred to another acute care facility during the index hospitalization</li> <li>• Records with an unavailable discharge date or time.</li> <li>• Readmissions within 30 days from the index discharge</li> <li>• Admission was for obstetric care, including labor and delivery (Code series O00-O9A, Pregnancy, childbirth and the puerperium Chapter)</li> <li>• Admission with a principal diagnosis of mental illness (F01-F99 series)</li> <li>• Admission with a principal diagnosis or treatment of malignancy or status of chemotherapy (Malignant neoplasms (C00-C96), In situ neoplasms (D00-D09), Z51.11 Encounter for antineoplastic chemotherapy, &amp; Z51.12 Encounter for antineoplastic immunotherapy)</li> <li>• Admission for palliative care (ICD-10-CM: Z51.5)</li> <li>• Admission with documentation that treatment suggestion was not followed by the patient (i.e. refusal of tracheostomy or BiPAP) (Z91.19 Patient's non-compliance with other medical treatment and regimen)</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
<b>Unit of Measure:</b>	Rate per 100 pediatric discharges (All-cause)
<b>International comparison if available</b>	Center of Excellence for Pediatric Quality Measurement (CEPQM) <a href="https://www.ahrq.gov/sites/default/files/wysiwyg/pqmp/measures/acute/chipra-0129-fullreport.pdf">https://www.ahrq.gov/sites/default/files/wysiwyg/pqmp/measures/acute/chipra-0129-fullreport.pdf</a>
<b>Desired direction:</b>	Lower is better
<b>Notes for all providers</b>	
<b>Data sources and guidance:</b>	Hospital patient data source

## Jawda Pediatric Healthcare Quality Performance Indicators

Type: Quality Indicator

Indicator Number:

PED002

<b>KPI Description (title):</b>	Pediatric 30-Day Lower Respiratory Infection (LRI) Readmission Rate
<b>Domain</b>	Effectiveness of Care
<b>Sub-Domain</b>	Readmission
<b>Definition:</b>	Percentage of patients less than 18 years of age who had an unplanned readmission within 30 days of discharge from the index hospitalization for lower respiratory infections (LRI).
<b>Calculation:</b>	<p><b>Numerator</b>                      Number of pediatric patients less than 18 years of age with unplanned Readmission to an acute care hospital including children’s hospital within 30 days of discharge from index hospitalization for LRI. (If a patient has more than one unplanned admissions <i>within 30 days</i> of discharge from the index admission, only the first is considered as readmission).</p> <p><b>Numerator Exclusions</b>                      Presence of at least one of the following:</p> <ul style="list-style-type: none"> <li>• Readmission was for a planned procedure / planned treatment protocol</li> <li>• Readmission with the following admittance status:                             <ul style="list-style-type: none"> <li>○ Elective</li> <li>○ Transfer admission from acute care</li> </ul> </li> <li>• Neonates (zero to twenty eight days inclusive)</li> <li>• Admission was for obstetric care, including labor and delivery (Code series O00-O9A, Pregnancy, childbirth and the puerperium Chapter)</li> <li>• Neonates (zero to twenty eight days inclusive)</li> <li>• Admission with a principal diagnosis of mental illness (F01-F99 series)</li> <li>• Admission with a principal diagnosis or treatment of malignancy or status of chemotherapy (Malignant neoplasms (C00-C96), In situ neoplasms (D00-D09), Z51.11 Encounter for antineoplastic chemotherapy, &amp; Z51.12 Encounter for antineoplastic immunotherapy)</li> <li>• Admission for palliative care (ICD-10-CM: Z51.5)</li> </ul> <p><b>Denominator</b>                      Total number of pediatric patients less than 18 years of age discharged from acute care hospital including children’s hospital with a principal discharge diagnosis of bronchiolitis, influenza, or community-acquired pneumonia (CAP) or secondary diagnosis code for one of these LRIs plus a principal ICD-10-CM diagnosis code for asthma, respiratory failure, or sepsis/bacteremia during the reporting period.</p> <p>ICD-10 CM codes: J21.0, J21.1, J21.8, J21.9, J09.X1, J09.X2, J10.00, J10.01, J10.08, J10.1, J11.00, J11.08, J11.1, J12.0, J12.1, J12.2, J12.3, J12.81, J12.89, J12.9, J13, J14, J15.0, J15.1, J15.20, J15.211, J15.212, J15.29, J15.3, J15.4,</p>

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	<p>J15.5, J15.6, J15.7, J15.8, J15.9, J16.0, J16.8, J17, J18.0, J18.1, J18.2, J18.8, J18.9, A01.03, A02.22, A21.2, A22.1, A24.1, A37.00, A37.01, A37.10, A37.11, A37.80, A37.81, A37.90, A37.91, A42.0, A43.0, A54.84, B01.2, B05.2, B06.81, B25.0, B37.1, B38.0, B38.1, B38.2, B39.0, B39.1, B39.2, B44.0, B44.1, B58.3, B59, B77.81, U07.1</p> <p><b>Asthma:</b> J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.990, J45.991, J45.998.</p> <p><b>Respiratory Failure:</b> J96.00, J96.01, J96.02, J96.10, J96.11, J96.12, J96.20, J96.21, J96.22, J96.90, J96.91, J96.92.</p> <p><b>Denominator Exclusions:</b></p> <ul style="list-style-type: none"> <li>• The patient was 18 years old or older at the time of discharge. <ul style="list-style-type: none"> <li>• Neonates (zero to twenty eight days inclusive)</li> </ul> </li> <li>• Episodes with a discharge of death</li> <li>• Patients who were discharged/left against medical advice (AMA)</li> <li>• Patients having a principal diagnosis of LRI or secondary diagnosis of LRI plus a principal ICD-10-CM diagnosis code for asthma, respiratory failure, or sepsis/bacteremia during the index hospitalization and subsequently transferred to another acute care facility.</li> <li>• Records with an unavailable discharge date or time.</li> <li>• Readmissions within 30 days from the index discharge</li> <li>• Admission was for obstetric care, including labor and delivery (Code series O00-O9A, Pregnancy, childbirth and the puerperium Chapter)</li> <li>• Admission with a principal diagnosis of mental illness (F01-F99 series)</li> <li>• Admission with a principal diagnosis or treatment of malignancy or status of chemotherapy (Malignant neoplasms (C00-C96), In situ neoplasms (D00-D09), Z51.11 Encounter for antineoplastic chemotherapy, &amp; Z51.12 Encounter for antineoplastic immunotherapy)</li> <li>• Admission for palliative care (ICD-10-CM: Z51.5)</li> <li>• Admission with documentation that treatment suggestion was not followed by the patient (i.e. refusal of tracheostomy or BiPAP) (Z91.19 Patient's non-compliance with other medical treatment and regimen)</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
<b>Unit of Measure:</b>	Rate per 100 LRI discharges
<b>International comparison if available</b>	Center of Excellence for Pediatric Quality Measurement (CEPQM) <a href="https://www.ahrq.gov/sites/default/files/wysiwyg/pqmp/measure/acute/chipra-131-fullreport.pdf">https://www.ahrq.gov/sites/default/files/wysiwyg/pqmp/measure/acute/chipra-131-fullreport.pdf</a>
<b>Desired direction:</b>	Lower is better
<b>Notes for all providers</b>	
<b>Data sources and guidance:</b>	Hospital patient data source



## Jawda Pediatric Healthcare Quality Performance Indicators

Type: Quality Indicator      Indicator Number: PED003

<b>KPI Description (title):</b>	Pediatric Central line-associated Bloodstream Infections (CLABSI)
<b>Domain</b>	Patient Safety
<b>Sub-Domain</b>	Adverse Events (AE) and Sentinel events
<b>Definition:</b>	<p>Central line-associated bloodstream infection (CLABSI):</p> <p>A laboratory confirmed bloodstream infection where</p> <ul style="list-style-type: none"> <li>• An eligible BSI organism is identified and</li> <li>• An eligible central line is present on the Laboratory Confirmed Bloodstream Infection (LCBI) date of event (DOE) or the day before</li> <li>• For all inpatients less than 18 years of age</li> </ul> <p><i>Eligible Central Line: A Central Line (CL) that has been in place for more than two consecutive calendar days (on or after CL day 3), following the first access of the central line, in an inpatient location, during the current admission. Such lines remain eligible for CLABSI events until the day after removal from the body or patient discharge whichever comes first.</i></p>
<b>Calculation:</b>	<p><b>Numerator</b></p> <p>Numerator: Each CLABSI that is identified during the period selected for surveillance in all inpatients less than 18 years of age.</p> <p><b>ICD 10 CM code: T80.211A</b></p> <p>Must meet one of the following Laboratory-Confirmed Bloodstream Infection (LCBI) criteria:</p> <p><u>LCBI 1:</u>            Patient of any age has a recognized bacterial or fungal pathogen, not included on the NHSN common commensal list:</p> <ol style="list-style-type: none"> <li>1. Identified from one or more blood specimens obtained by a culture</li> </ol> <p>OR</p> <ol style="list-style-type: none"> <li>2. Identified to the genus or species level by non-culture based microbiologic testing (NCT) methods.</li> </ol> <p style="text-align: center;">AND</p> <p>Organism(s) identified in blood is not related to an infection at another site.</p> <p><u>LCBI2:</u>            Patient of any age has at least one of the following signs or symptoms: fever (&gt;38.0oC), chills, or hypotension</p> <p style="text-align: center;">AND</p> <p>Organism(s) identified in blood is not related to an infection at another site</p> <p style="text-align: center;">AND</p>

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	<p>The same NHSN common commensal is identified by a culture, from two or more blood specimens collected on separate occasions.</p> <p><u>LCBI3:</u>          Patient ≤ 1 year of age has at least one of the following signs or symptoms:          fever (&gt;38.0oC), hypothermia (&lt;36.0oC), apnea, or bradycardia          AND          Organism(s) identified in blood is not related to an infection at another site          AND          The same NHSN common commensal is identified by a culture, from two or more blood specimens collected on separate occasions</p> <p><b>Numerator Exclusions:</b></p> <ul style="list-style-type: none"> <li>• Extracorporeal life support (ECMO Z92.81) or Ventricular Assist Device (VAD) for more than 2 days and is still in place on the BSI date of event or the day before.</li> <li>• Observed or suspected patient injection into the vascular access line</li> <li>• Epidermolysis bullosa (EB) or Munchausen Syndrome by Proxy (MSBP) diagnosis during the current admission. (Q81.0, Q81.1, Q81.2, Q81.8, Q81.9, L12.30, L12.31, L12.35, &amp; L51.2, F68.10, F68.11, F68.12, &amp; F68.13)</li> <li>• Pus at the vascular access site - T80.212A, T80.219A</li> <li>• Group B Streptococcus identified from blood, with a date of event during the first 6 days of life (B95.1)</li> <li>• Repeated infection for the same type during 14 days from Date of Event</li> </ul> <p><b>Denominator:</b>          Number of all central line days for all patients (in all inpatient settings) less than 18 years of age during the reporting period.</p> <ul style="list-style-type: none"> <li>• It is not required for a BSI to be associated with a specific device when more than one line is present.</li> <li>• Only one central line per patient is counted per calendar day regardless of the number of central lines present.              All central lines on inpatient units should be included in device day counts regardless of access.</li> </ul> <p><b>Denominator exclusions:</b></p> <ul style="list-style-type: none"> <li>• Exclude NICU population who are less than 28 days</li> <li>• MBI-LCBI</li> <li>• Secondary bloodstream infections</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
<b>Unit of Measure:</b>	Rate per 1000 central line days
<b>International comparison if available</b>	<a href="https://www.cdc.gov/nhsn/pdfs/pscmanual/4psc_clabscurrent.pdf">https://www.cdc.gov/nhsn/pdfs/pscmanual/4psc_clabscurrent.pdf</a>

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<b>Desired direction:</b>	Lower is better
<b>Notes for all providers</b>	
<b>Data sources and guidance:</b>	<ul style="list-style-type: none"><li>• Captured by infection control team</li><li>• Patient's records</li><li>• Lab reports</li><li>• Hospital internal mortality and morbidity</li></ul>

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Type: Quality Indicator

Indicator Number:

PED004

<b>KPI Description (title):</b>	Pediatric Postoperative Sepsis Rate
<b>Domain</b>	Patient Safety
<b>Sub-Domain</b>	Complication
<b>Definition:</b>	Postoperative sepsis cases (secondary diagnosis) per 1,000 surgery discharges for patients less than 18 years of age (inpatients).
<b>Calculation:</b>	<p><b>Numerator:</b> Discharges, among cases meeting the inclusion and exclusion rules for the denominator, with any secondary ICD-10-CM diagnosis codes for sepsis (Appendix).</p> <p><b>Denominator:</b> Surgical discharges for patients less than 18 years of age with any-listed procedure codes for an operating room procedure. All CPT procedures: 10021-69990</p> <p><b>Denominator exclusions:</b></p> <ul style="list-style-type: none"> <li>• Principal ICD-10-CM diagnosis code (or secondary diagnosis present on admission / prior to surgery) for sepsis (Appendix)</li> <li>• Principal ICD-10-CM diagnosis code for infection</li> <li>• Neonates (zero to twenty eight days inclusive)</li> <li>• Principal ICD-10-CM diagnosis code for pregnancy, childbirth and puerperium Code series O00-O9A</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
<b>Unit of Measure:</b>	Rate per 1000 surgical discharges
<b>International comparison if available</b>	AHRQ Pediatric Quality Indicator 10 (PDI 10) Postoperative Sepsis Rate; July 2020 <a href="https://www.qualityindicators.ahrq.gov/Downloads/Modules/PDI/V2020/TechSpecs/PDI_10_Postoperative_Sepsis_Rate.pdf">https://www.qualityindicators.ahrq.gov/Downloads/Modules/PDI/V2020/TechSpecs/PDI_10_Postoperative_Sepsis_Rate.pdf</a>
<b>Desired direction:</b>	Lower is better
<b>Notes for all providers</b>	
<b>Data sources and guidance:</b>	<ul style="list-style-type: none"> <li>• Captured by infection control team</li> <li>• Patient's records</li> <li>• Lab reports</li> <li>• Hospital internal mortality and morbidity</li> </ul>



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	63707, 63709, 63710, 63740, 63741, 63744, 63746, 64999 (if used for spine procedure) <ul style="list-style-type: none"> <li>• Neonates (zero to twenty eight days inclusive)</li> <li>• Neonate with birth weight less than 500 grams</li> <li>• Principal ICD-10-CM diagnosis code for pregnancy, childbirth and puerperium Code series O00-O9A</li> </ul>
<b>Reporting Frequency:</b>	Quarterly
<b>Unit of Measure:</b>	Rate per 1000 surgical and medical discharges
<b>International comparison if available</b>	AHRQ Pediatric Quality Indicator 01 (PDI 01) Accidental Puncture or Laceration Rate; July 2020 <a href="https://www.qualityindicators.ahrq.gov/Downloads/Modules/PDI/V2020/TechSpecs/PDI_01_Accidental_Puncture_or_Laceration_Rate.pdf">https://www.qualityindicators.ahrq.gov/Downloads/Modules/PDI/V2020/TechSpecs/PDI_01_Accidental_Puncture_or_Laceration_Rate.pdf</a>
<b>Desired direction:</b>	Lower is better
<b>Notes for all providers</b>	
<b>Data sources and guidance:</b>	<ul style="list-style-type: none"> <li>• Patient's records</li> <li>• Hospital internal mortality and morbidity</li> </ul>

### Appendix

#### Sepsis Diagnosis Codes:

A021 Salmonella Sepsis A4150 Gram-Negative Sepsis, Unspecified  
A4150 Gram-Negative Sepsis, Unspecified  
A227 Anthrax Sepsis A4151 Sepsis due to Escherichia coli [E. coli]  
A4151 Sepsis due to Escherichia coli [E. coli]  
A267 Erysipelothrix Sepsis A4152 Sepsis due to pseudomonas  
A4152 Sepsis due to pseudomonas  
A327 Listerial Sepsis A4153 Sepsis due to serratia  
A4153 Sepsis due to serratia  
A400 Sepsis due to streptococcus, group A A4159 Other gram-negative Sepsis  
A4159 Other gram-negative Sepsis  
A401 Sepsis due to streptococcus, group B A4181 Sepsis due to enterococcus  
A4181 Sepsis due to enterococcus  
A403 Sepsis due to streptococcus pneumoniae A4189 Other specified Sepsis  
A4189 Other specified Sepsis  
A408 Other streptococcal Sepsis A419 Sepsis, Unspecified organism  
A419 Sepsis, Unspecified organism  
A409 Streptococcal Sepsis, Unspecified A427 Actinomycotic Sepsis  
A427 Actinomycotic Sepsis  
A4101 Sepsis due to methicillin susceptible staphylococcus aureus  
A5486 Gonococcal Sepsis  
A4102 Sepsis due to methicillin resistant staphylococcus aureus  
B377 Candidal Sepsis  
A411 Sepsis due to Other specified staphylococcus  
R6520 Severe Sepsis without septic shock  
A412 Sepsis due to Unspecified staphylococcus  
R6521 Severe Sepsis with septic shock  
A413 Sepsis due to hemophilus influenzae  
T8112XA Postprocedural septic shock, initial encounter  
A414 Sepsis due to anaerobes  
T8144XA Sepsis following a procedure, initial encounter

### **Accidental puncture or laceration during a procedure diagnosis codes:**

D7811 Accidental puncture and laceration of the spleen during a procedure on the spleen  
H9531 Accidental puncture and laceration of the ear and mastoid process during a procedure on the ear and mastoid process  
D7812 Accidental puncture and laceration of the spleen during other procedure  
H9532 Accidental puncture and laceration of the ear and mastoid process during other procedure  
E3611 Accidental puncture and laceration of an endocrine system organ or structure during an endocrine system procedure  
I9751 Accidental puncture and laceration of a circulatory system organ or structure during a circulatory system procedure  
E3612 Accidental puncture and laceration of an endocrine system organ or structure during Other procedure  
I9752 Accidental puncture and laceration of a circulatory system organ or structure during other procedure  
G9748 Accidental puncture and laceration of other nervous system organ or structure during a nervous system procedure  
J9571 Accidental puncture and laceration of a respiratory system organ or structure during a respiratory system procedure  
G9749 Accidental puncture and laceration of Other nervous system organ or structure during Other procedure  
J9572 Accidental puncture and laceration of a respiratory system organ or structure during Other procedure  
H59211 Accidental puncture and laceration of right eye and adnexa during an ophthalmic procedure  
K9171 Accidental puncture and laceration of a digestive system organ or structure during a digestive system procedure  
H59212 Accidental puncture and laceration of left eye and adnexa during an ophthalmic procedure  
K9172 Accidental puncture and laceration of a digestive system organ or structure during Other procedure  
H59213 Accidental puncture and laceration of eye and adnexa during an ophthalmic procedure, bilateral  
L7611 Accidental puncture and laceration of skin and subcutaneous tissue during a dermatologic procedure



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H59219 Accidental puncture and laceration of unspecified eye and adnexa during an ophthalmic procedure  
L7612 Accidental puncture and laceration of skin and subcutaneous tissue during other procedure  
H59221 Accidental puncture and laceration of right eye and adnexa during other procedure  
M96820 Accidental puncture and laceration of a musculoskeletal structure during a musculoskeletal system procedure  
H59222 Accidental puncture and laceration of left eye and adnexa during other procedure  
M96821 Accidental puncture and laceration of a musculoskeletal structure during other procedure  
H59223 Accidental puncture and laceration of eye and adnexa during other procedure, bilateral  
N9971 Accidental puncture and laceration of a genitourinary system organ or structure during a genitourinary system procedure  
H59229 Accidental puncture and laceration of unspecified eye and adnexa during other procedure  
N9972 Accidental puncture and laceration of a genitourinary system organ or structure during other procedure

<b>Summary of changes Sep 2022</b>	
KPI P002 & P004	Review the codes