1. Severe headache
2. Vomiting
3. Age ≥ 65 y/o
4. Basilar skull fracture signs
5. Focal neurologic deficit
6. Coagulopathy
7. Thrombocytopenic
8. Anticoagulant
9. Dangerous mechanism (ejection MVC, pedestrian fall > 5 stairs, other)

**Head CT Indications:**
One indication from Group I or Combination from Group II

**NOTE:** If LOC is unclear, then document “Unclear LOC”, which will meet the measure.

**Group II**
LOC or Post-traumatic Amnesia
And one or more of the following:
1. Any headache
2. Age ≥ 60 y/o
3. Intoxication
4. Short term memory deficit
5. Any physical evidence trauma above clavicles
6. Post trauma seizure

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**Antibiotics should not be prescribed for these ICD-10 diagnoses:**
1. Acute nasopharyngitis/common cold
2. Acute laryngopharyngitis
3. Acute upper respiratory infection

**EXCLUSIONS:**
1. Underlying Lung Disease (COPD, Bronchiectasis, CF, other... but not simple asthma)
2. Immunocompromised (Cancer, HIV, other)
3. Suspect Bacterial Compromised (Patient appears toxic, suspect possible bacterial infection)
4. Alternate Infection Exists (Otitis Media, UTI, other)
5. Patient already on antibiotic in previous 30 days
6. Admitted Patient

**IMPORTANT:** Rationale for Complicated Bronchitis needs to be in the chart: If there is no rationale in the chart for “Complicated Bronchitis”, then the chart will fall out.

**CVC Placement (All Ages Included)**
Needs following documented:
1. Maximal barrier technique
   - Cap/Mask (physician)
   - Sterile gown (physician)
   - Sterile gloves (physician)
   - Sterile full body drape (patient)
2. Hand Hygiene (Ideal is soap and water or alcohol based product)
3. Patient skin prepped
4. If ultrasound used, sterile cover needs to be documented.
   The statement "Maximal barrier technique followed, hand hygiene followed, patient proper skin prep performed, and sterile cover used for ultrasound probe." would meet this measure. This statement or its elements should ideally be part of the procedure note.

**EXCLUSION:**
CVC Insertion emergent and delay for full prep contraindicated.

**Initiation of 3 Hour Sepsis Bundle (≥ 18 y/o)**
1. All patients with severe sepsis or septic shock.
2. 4 elements of 3 hour bundle ordered
   - Lactic acid/lactate
   - 2 blood cultures
   - IV fluid bolus
   - IV antibiotics
   For the IV fluid bolus, realize this differs slightly from hospital core measure SEP-1. Any fluid bolus meets the measure, but required for severe sepsis in addition to septic shock. (SEP-1 does not require bolus for severe sepsis, only for septic shock, and requires 30cc/kg bolus.)

**Ultrasound Localization of Pregnancy in Patients (14-50 y/o) With Vaginal Bleeding or Abdominal Pain**
Requires localization of pregnancy by ultrasound

**EXCLUSIONS:**
1. Pregnancy previously localized in office/other ER visit/other documented location
2. Pain not felt to be pregnancy related (Ex. Epigastric pain likely GERD)

**Rhogam, Rh-Negative Pregnant Patients (14-50 y/o) With VB or Blunt Abd Trauma**
Rh negative pts with risk of fetal blood exposure (blunt abd trauma, vaginal bleeding, ectopic) need Rhogam

**EXCLUSIONS:**
1. Rhogam < 12 weeks
2. Patient refusal

**Pain Management Long Bone Fracture (≥ 2 y/o)**
1. Included patients: Any fracture of the 6 long bones arm/leg (humerus, ulna, radius, femur, tibia, fibula).
2. Any documented pain medication given, prescribed or recommended (including ibuprofen, acetaminophen) meets the measure.
3. All fractures from hip fractures to minor avulsion fractures count
4. Not a timed measure, simply whether pain medication addressed.