

#	Measure	Numerator	Denominator	IOM Quality Domain	Donabedian Framework	Diagnosis Category	Measure Level*	Required Data Elements	Notes /Reference
* (A) Individual Clinician or Group of Clinicians (e.g. nurses, residents, attendings, fellows); (B) Facility (ED); (C) System-Wide Measure									
<b>Emergency Department Flow</b>									
4.1	Door to Provider	Time interval between patient presentation and the first time the patient is seen by a provider, excluding triage personnel, who can initiate a diagnostic evaluation or therapeutic plan for all patients <18 years of age (from NQF definition)	Include all visits by patients <18 years of age;  Exclusion: Left Without Being Seen patients	Timely, Patient-Centered	Outcome	General	B, C	Unique visit identifier Patient arrival time Provider evaluation time Triage status	-This measure has the same operational definition as the National Quality Forum Measure "Door to Provider" -Report as median time in minutes -Patient presentation is the first arrival time stamp recorded -Definition of provider who can initiate a diagnostic evaluation or therapeutic plan includes attending, fellow, resident or advanced practice nurse -NQF also stratifies measure by Facility Evaluation and Management Code -Measure may be stratified by validated triage score (e.g. ESI)
4.2	Total Length of Stay	Time from arrival to departure for all patients <18 years of age	Include all visits by patients <18 years of age;  Exclusions: Left Without Being Seen, Left Without Treatment and Left Against Medical Advice	Effective, Timely, Efficient, Patient-Centered	Outcome	General	A, B, C	Unique visit identifier Patient arrival time Patient left ED time Patient disposition	-This measure has the same operational definition as the National Quality Forum Measure "Time from ED Arrival to ED Departure" -Report as median time in minutes -Patient presentation is the first arrival time stamp recorded -Departure time is defined as the time the patient leaves the ED and not the time a discharge order was written. -Stratify by admitted, discharged and transferred
4.3	Left Without Being Seen	Number of visits where a patient <18 years of age left without being seen by a provider, excluding triage personnel, who can initiate a diagnostic and therapeutic plan	Number of visits by patients <18 years of age	Effective, Safe, Patient-Centered	Outcome	General	A, B, C	Unique visit identifier Patient disposition	-This measure has the same operational definition as the National Quality Forum Measure "Left Without Being Seen" -Definition of provider who can initiate a diagnostic evaluation or therapeutic plan includes attending, fellow, resident or advanced practice nurse -Stratify by validated triage score (although many patients may have not completed a formal triage process)
4.4	Laboratory Test Turn Around Time	Time interval between laboratory test ordered and result available to provider for complete blood count, basic chemistry panel (sodium, potassium, chloride, bicarb, BUN, creatinine and glucose), urinalysis, urine pregnancy test and rapid streptococcal antigen of throat respectively.		Timely	Process	Cross-cutting (diagnostic test)	B	Unique visit identifier Test order time Test complete time Test name/type	-Include all laboratory tests performed (complete blood count, basic chemistry panel, urinalysis, urine pregnancy test and rapid streptococcal antigen of throat) on patients <18 years of age -Report as median time in minutes -Point of care testing is included
4.5	Diagnostic Imaging Test Turn Around Time: time to attending radiologist reading	Time interval between imaging test ordered and radiologist reading available to ED provider for CT scans, ultrasound or MRI		Timely	Process	Cross-cutting (diagnostic test)	B	Unique visit identifier Test order time Test complete time Test name/type	-Include all CT scans, ultrasounds or MRIs performed on patients < 18 years of age -Report as median time in minutes -First documented reading by radiology attending, fellow or resident counted
4.6	Plain film imaging turnaround time: time to image available to ED staff	Time interval between plain film order and image available for viewing by ED staff		Timely	Outcome	Cross-cutting (diagnostic test)	B	Unique visit identifier Test order time Test complete time Test name/type	-Include all plain films performed on patients < 18 years of age -Report as median time in minutes