

PROGRAM MEASURES & DEFINITIONS

Updated 1/10/24: This document is updated annually, although the measures within the Get With The Guidelines® program may change more frequently. For the most current list of measures, log into your Get With The Guidelines user account or contact your American Heart Association Quality Consultant.

Introduction:

Get With The Guidelines® (GWTG)-Atrial Fibrillation (AFib) is an offering in the American Heart Association's quality improvement portfolio. The program is designed to assist hospital care teams in consistently providing the latest evidence-based treatment for their inpatient Atrial Fibrillation/Atrial Flutter (AF) patients. In addition, the tool can be used to monitor and report on ablation patients, including procedures in the outpatient setting.

Additionally, teams can optimize their quality improvement activities utilizing the creative reporting capabilities of the platform. Super User accounts are available for staff to monitor the performance of all affiliated sites allowing for high-level quality initiatives across systems. The American Heart Association supports the Get With The Guidelines platforms with a knowledgeable team of quality improvement consultants. An added value to our customers is ongoing virtual education featuring guideline-driven care, current hot topics, model-sharing, expert consultant panels and more!

AFib Achievement Measures:

- **Angiotensin-Converting-Enzyme Inhibitors (ACEI)/Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Nepriylsin Inhibitor (ARNI) prescribed prior to discharge (when Left ventricular ejection fraction (LVEF) <40):** Percentage of patients with a diagnosis of atrial fibrillation (AF) or atrial flutter with heart failure (HF) with an Left ventricular ejection fraction LVEF ≤ 40 who were prescribed an Angiotensin-Converting-Enzyme Inhibitors (ACEI)/Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Nepriylsin Inhibitor (ARNI) prior to discharge. AHAAF1
- **Beta blocker prescribed prior to discharge (when LVEF ≤ 40):** Percentage of patients, age ≥ 18 years, with a diagnosis of AF or atrial flutter with an LVEF ≤ 40 who were prescribed a beta blocker prior to discharge. AHAAF2.
- **CHA2DS2-VASc Risk score documented prior to discharge:** Percent of patients, age ≥ 18 years, with nonvalvular and bioprosthetic valve atrial fibrillation or atrial flutter for whom assessment of thromboembolic risk factors using the CHA2DS2-VASc risk score criteria has been documented in the medical record. AHAAF3.
- **FDA-Approved approved anticoagulation prescribed prior to discharge:** Percent of patients, age ≥ 18 years, with nonvalvular atrial fibrillation or atrial flutter who were prescribed warfarin or another FDA-approved anticoagulant drug for the prevention of thromboembolism. AHAAF4
- **Prothrombin Time/International Normalized Ratio (PT/INR) Planned follow-Up documented prior to discharge for warfarin treatment:** Percentage of patients, age ≥ 18 years, with nonvalvular, valvular or bioprosthetic valve AF or atrial flutter who have been prescribed warfarin and who have a PT/INR follow-up scheduled prior to hospital discharge. AHAAF5
- **Statin at discharge in AF patients with coronary artery disease (CAD), cvatype/TIA, peripheral vascular disease (PVD), or diabetes:** Percent of patients with either CAD, cvatype/TIA, PVD or diabetes who were prescribed a statin at hospital discharge. AHAAF6

AFib Quality Measures:

- **Mineralcorticoid Receptor Antagonist (MRA) at discharge:** Percent of atrial fibrillation or atrial flutter patients with left ventricular systolic dysfunction (LVSD) with no contraindications or documented intolerance who were prescribed aldosterone antagonist at discharge. AHAAF7
- **Anticoagulation therapy education:** Percent of atrial fibrillation or atrial flutter patients or their caregivers who were given education and/or educational materials during the hospital stay addressing anticoagulation therapy. AHAAF8
- **Atrial Fibrillation Patient Education:** Percent of atrial fibrillation or atrial flutter patients or their caregivers who were given education and/or educational materials during the hospital stay addressing all of the following: risk factors, stroke risk, management, medication adherence, follow-up, when to call provider. AHAAF9
- **Direct-acting oral anticoagulant at discharge for non-valvular atrial fibrillation or atrial flutter patients:** Percent of eligible nonvalvular* atrial fibrillation or atrial flutter patients discharged on a direct-acting oral anticoagulant (DOAC)*. Nonvalvular AF is AF in the absence of moderate-to-severe mitral stenosis or a mechanical heart valve. AHAAF63
- **Discharge heart rate ≤ 110 bpm:** Percent atrial fibrillation or atrial flutter patients who have a documented resting heart rate of ≤ 110 bpm closest to hospital discharge. AHAAF10
- **Inappropriate prescription of antiarrhythmic Drugs to Patients With Permanent Atrial Fibrillation Prior to Discharge for Rhythm Control:** Percentage of patients, age ≥ 18 years, with permanent AF who were inappropriately prescribed an antiarrhythmic medication prior to discharge for rhythm control. AHAAF11

PROGRAM MEASURES & DEFINITIONS

- **Inappropriate prescription of antiplatelet and oral anticoagulation therapy prior to discharge for patients who do not have coronary artery disease and/or vascular disease:** Percentage of patients, age ≥ 18 years, with AF who do not currently have coronary artery disease and/or vascular disease who were inappropriately prescribed both an antiplatelet and an oral anticoagulant prior to discharge. AHAAF12
- **Inappropriate prescription of a direct thrombin or factor xa inhibitor prior to discharge in patients with atrial fibrillation with a mechanical heart valve:** Percentage of patients, age ≥ 18 years, with a mechanical heart valve and with a diagnosis of AF who were inappropriately prescribed a direct thrombin or factor Xa inhibitor prior to discharge. AHAAF13
- **Inappropriate prescription of dofetilide or sotalol prior to discharge in patients with atrial fibrillation and end-stage kidney disease or on dialysis:** Percentage of patients, age ≥ 18 years, with AF who also have end-stage kidney disease ($\text{CrCl} < 15 \text{ mL/min}$) or are on dialysis and who were prescribed dofetilide or sotalol prior to discharge. AHAAF14
- **Inappropriate prescription of nondihydropyridine calcium channel antagonist prior to Discharge in patients with reduced ejection fraction:** Percentage of patients, age ≥ 18 y, with reduced ejection fraction (< 40) and a diagnosis of AF who were inappropriately prescribed nondihydropyridine calcium channel antagonist prior to discharge. AHAAF15
- **Smoking cessation:** Percent of patients with a history of smoking cigarettes who are given smoking cessation advice or counseling during hospital stay. For purposes of this measure, a smoker is defined as someone who has smoked cigarettes anytime during the year prior to hospital arrival. AHAAF16
- **Warfarin at discharge for valvular atrial fibrillation or atrial flutter patients:** Percent of eligible valvular atrial fibrillation or atrial flutter patients discharged on warfarin. AHAAF17

AFib Reporting Measures:

- **Antiarrhythmic at discharge*:** Percent of atrial fibrillation or atrial flutter patients who were prescribed an antiarrhythmic at hospital discharge. For purposes of this reporting measure, antiarrhythmic includes: amiodarone, dofetilide, dronedarone, flecainide, propafenone, sotalol, quinidine or other antiarrhythmic. AHAAF18
- **Anticoagulation during hospitalization:** Percent of atrial fibrillation or atrial flutter patients who received anticoagulation therapy during their hospitalization. AHAAF19
- **Appropriate prescription of antiplatelet (including aspirin) and oral anticoagulation therapy prior to discharge in patients with atrial fibrillation and coronary artery and/or vascular disease:** Percent of atrial fibrillation or atrial flutter patients with coronary artery and/or vascular disease discharged on BOTH an antiplatelet (including aspirin) and an anticoagulant at hospital discharge. AHAAF20
- **Aspirin at discharge:** Percent of atrial fibrillation or atrial flutter patients who were prescribed aspirin at hospital discharge. AHAAF21
- **Digoxin at discharge:** Percent of atrial fibrillation or atrial flutter patients prescribed digoxin at hospital discharge. AHAAF22
- **Discharge heart rate < 80 bpm:** Percent atrial fibrillation or atrial flutter patients with left ventricular systolic dysfunction who have a documented resting heart rate of < 80 bpm closest to hospital discharge. AHAAF23
- **Health-related social needs assessment:** Percentage of patients with a diagnosis of atrial fibrillation or atrial flutter discharged from your facility who had documentation of a standardized health-related social needs form or assessment completed during admission. AHAAF24
- **Inappropriate prescription of antiplatelet therapy (including aspirin) in patients with atrial fibrillation (CHADS2VAsC score 0-1 if male or 0-2 if female) and no evidence of coronary artery disease or vascular disease:** Percent of atrial fibrillation or atrial flutter patients with CHA2DS2-VAsC score of 0-1 if male or 0-2 if female, who do not currently have coronary artery and/or vascular disease and who are prescribed antiplatelet therapy or aspirin at hospital discharge. AHAAF25
- **Post-discharge follow-up appointment for patients with atrial fibrillation:** Percentage of patients with atrial fibrillation who have a post-discharge appointment with a specific provider (primary care and/or specialist) scheduled and documented including provider name, location, date, and time for follow-up visit, or provider name, location and date for home-health visit. AHAAF59
- **QT interval measured after initiation or increase and sustained treatment with dofetilide or sotalol:** Percent of patients that had dofetilide or sotalol newly initiated or dose increased during hospitalization, sustained for five or more doses and were prescribed dofetilide or sotalol at discharge that had QT Interval measured prior to discharge and after initiation. AHAAF26
- **Screening for obstructive sleepapnea:** Percent of atrial fibrillation or atrial flutter patients who were screened for obstructive sleep apnea. AHAAF27
- **Shared decision-making regarding anticoagulation prescription prior to discharge:** Percentage of patients, age ≥ 18 years, with AF or atrial flutter who were educated on the benefits and risks of anticoagulation and the specific type of anticoagulation therapy recommended by the physician, and who were consulted during the decision-making process about whether to prescribe and/or which anticoagulant to prescribe prior to discharge. AHAAF58

AFib Descriptive Measures:

- **Age:** A histogram of patients grouped by age. AHAAF58
- **Anticoagulation medication at discharge (all patients):** A histogram of all patients grouped by specific anticoagulation medication prescribed at hospital discharge. AHAAF29
- **Anticoagulation medication at discharge (eligible patients):** A histogram of eligible patients grouped by specific anticoagulation medication prescribed at hospital discharge. AHAAF30

PROGRAM MEASURES & DEFINITIONS

- **Atrial fibrillation type:** A histogram of patients grouped by atrial flutter. AHAAF31
- **Atrial flutter type:** A histogram of patients grouped by atrial fibrillation. AHAAF32
- **Co-morbidities (all patients):** A histogram of comorbidities among all patients with atrial fibrillation or atrial flutter. AHAAF33
- **Diagnosis:** A histogram of patients grouped by diagnosis. AHAAF34
- **Identified areas of unmet social needs:** Patients with atrial fibrillation or atrial flutter who were assessed for health-related social needs grouped by unmet social needs identified. AHAAF35
- **Length of stay:** A histogram of patients grouped by length of stay. AHAAF36
- **Post-discharge follow-up interval:** Patients with a follow-up appointment scheduled for after discharge grouped by time to follow up (≤ 14 days; 15-30 days; 31-45 days; 46-60 days; 61-90 days; >90 days and unknown). AHAAF61
- **Race/Hispanic Ethnicity:** A histogram of patients grouped by race and Hispanic ethnicity. AHAAF37
- **Rhythm Control/Rate Control Strategy Planned/Intended:** A histogram of patients for whom a rhythm control/rate control strategy plan was documented prior to hospital discharge. AHAAF38
- **Sex:** A histogram of patients grouped by gender. AHAAF39
- **Specialty of post-discharge follow-up provider:** Patients with a follow-up appointment scheduled for after discharge grouped by specialty of provider. AHAAF60

AFib Composite and Defect-Free Measures:

- **Atrial fibrillation composite score:** Proportion of performance opportunities that were met among eligible opportunities for all six individual atrial fibrillation measures.
- **Defect-free care for atrial fibrillation:** Percentage of patients who received "perfect care" based upon their eligibility for each of the six component atrial fibrillation measures.

AFib Ablation Reporting Measures:

- **Ablation procedure rate:** Percent of patients with a diagnosis of atrial fibrillation or atrial flutter with an ablation procedure (documented on ablation tab). AHAAF40
- **Cardiac tamponade and/or pericardiocentesis following ablation:** Percent of patients with cardiac tamponade and/or pericardiocentesis occurring within 30 days following ablation procedure. AHAAF41
- **In-hospital survival rate - ablation:** Percent of patients who underwent ablation procedure and survived to discharge. AHAAF42
- **Sinus rhythm at discharge:** Percent of patients discharged in sinus rhythm following ablation procedure. AHAAF43
- **Sinus rhythm maintained following ablation; post discharge:** Percent of patients who maintained sinus rhythm after hospital discharge following ablation procedure. AHAAF44
- **Survival at 180 days following ablation procedure:** Percent of patients who are alive at 180 days post-ablation procedure. AHAAF45

AFIB Ablation Descriptive Measures:

- **Ablation anticoagulation strategy:** Distribution of the anticoagulation strategies used in ablation procedures. AHAAF46
- **Ablation procedure types:** Distribution of the types of ablation procedures performed. AHAAF47
- **Age- ablation patients:** Patients undergoing ablation procedure during this episode of care grouped by age. AHAAF48
- **Antiarrhythmic drugs – post discharge:** Distribution of antiarrhythmic drug(s) being taken by patients who underwent ablation procedure 180 days following hospital discharge. AHAAF49
- **Comorbidities - ablation patients:** Distribution of comorbidities among patients who undergo ablation procedure during this episode of care. AHAAF50
- **Complications following ablation:** Distribution of complications occurring during or post-procedure among patients who undergo ablation procedure during this episode of care. AHAAF51
- **Energy sources:** Distribution of energy sources used during ablation procedure. AHAAF52
- **Indications for ablation:** Distribution of indications for the procedure for patients who undergo ablation procedure during this episode of care. AHAAF53
- **Modified EHRA symptom score:** Distribution by the modified European Heart Rhythm Association (EHRA) symptom score for patients who underwent ablation procedure during this episode of care. AHAAF54
- **Procedure and fluoroscopy times:** Average procedure, ablation, and fluoroscopy times, and average fluoroscopy dose for ablation procedure. AHAAF55
- **Sex -ablation patients:** Patients undergoing ablation procedure during this episode of care grouped by gender. AHAAF56
- **Trans-Septal approaches for ablation procedures:** Distribution of trans-septal approaches used in ablation procedures. AHAAF57

PROGRAM MEASURES & DEFINITIONS

How Achievement and Quality Measures Are Determined:

Achievement and quality measures provide the basis for evaluating and improving treatment of in-hospital atrial fibrillation patients. Formulating those measures begins with a detailed review of American Heart Association's guidelines for atrial fibrillation.

When evidence for a process or aspect of care is so strong that failure to act on it reduces the likelihood of an optimal patient outcome, an achievement measure may be developed regarding that process or aspect of care. Achievement measure data are continually collected and results are monitored over time to determine when new initiatives or revised processes should be incorporated. As such, achievement measures help speed the translation of strong clinical evidence into practice.

In order for participating hospitals to earn recognition for their achievement in the program, they must adhere to achievement measures.

Quality measures apply to processes and aspects of care that are strongly supported by science. Application of quality measures may not, however, be as universally indicated as achievement measures.

The Get With The Guidelines team follows a strict set of criteria in creating achievement and quality measures. We make every effort to ensure compatibility with existing performance measures from other organizations.

Get With The Guidelines - AFib Awards: Recognition for Your Performance:

Hospitals teams that participate actively and consistently in Get With The Guidelines-AFib are rewarded with public recognition that provides hospitals with a competitive edge in the marketplace by providing patients and stakeholders with tangible evidence of their commitment to improving quality care.

Award-winning hospitals are honored at national recognition events and listed by name in advertisements that appear annually in the journal *Stroke* and in the "Best Hospitals" issue of *U.S. News & World Report*. All award-winning hospitals are provided with customizable marketing materials they can use to announce their achievements locally.