

Removal, Dislodgement, Disruption or Dysfunction

If any removal, dislodgement, disruption or dysfunction occurred as a result of a fall, do **NOT** use the coding below; instead, code the event as part of the Fall-related coding (see #14)

Add “X” at the end of Code if there was an unplanned treatment or intervention necessitated by the safety event

Code	Critical Event	Critical Event Definition
1 <i>E</i> <i>T</i>	Airway <i>Endotracheal tube</i> <i>Tracheostomy</i>	Use letters below with Code #1 to describe the type of artificial airway <i>e.g. 1E= dislodgement of an endotracheal tube which did <u>not</u> require any intervention</i>
2 <i>N</i> <i>O</i> <i>P</i>	Feeding Tube <i>Nasal</i> <i>Oral</i> <i>Percutaneous</i>	Use letters below with Code #2 to describe location of feeding tube tube from nose to stomach or small bowel (e.g. gastric or post-pyloric tube) tube from mouth to stomach or small bowel (e.g. gastric or post-pyloric tube) tube from abdominal wall to stomach or small bowel (e.g. PEG, PEJ) <i>e.g. 2PX = removal of a percutaneous feeding tube which required replacement</i>
3	Chest Tube	includes all tubes in pleural space (e.g. chest tubes, pig-tail catheters)
4 <i>A</i> <i>V</i> <i>D</i> <i>E</i> <i>P</i> <i>fA</i> <i>fV</i> <i>fD</i>	Vascular Access <i>Arterial</i> <i>Central Venous</i> <i>Dialysis</i> <i>ECMO Cannulae</i> <i>Pulmonary Artery</i> <i>femoral Arterial</i> <i>femoral Venous</i> <i>femoral Dialysis</i>	Use letters below with Code #4 to describe location of catheter includes radial, pedal and other locations; excludes femoral and pulmonary artery (coded separately) includes PICC (i.e. peripherally inserted central venous catheter); excludes peripheral intravenous (not coded) & femoral (coded separately) includes tunneled and non-tunneled catheter in any location except femoral (coded separately); excludes dialysis fistula or graft includes venous and arterial cannulae pulmonary artery catheter or Swan-Ganz catheter catheter in femoral artery, not for dialysis catheter in femoral vein, not for dialysis includes tunneled and non-tunneled femoral catheter for dialysis; excludes dialysis fistula or graft <i>e.g. 4V = removal of a subclavian central venous catheter that did <u>not</u> require replacement</i> <i>e.g. 4fAX= removal of a femoral arterial line that required replacement</i>
5	Cardiac Devices	includes temporary pace-maker wire, ventricular assist device, and intra-aortic balloon pump
6	Wound or Dressing	includes disruption or <i>new</i> bleeding at site of skin graft, tissue flap, temporary surgical closure, wound vacuum, and other dressing (e.g., dressing at insertion site of a catheter, tube or drain)



Cardiovascular / Hemodynamic Stability

Add “X” at the end of Code if there was an unplanned treatment or intervention necessitated by the safety event

Code	Critical Event	Critical Event Definition
7	Hypotension	<i>change in mean arterial pressure to <55 mmHg</i>
8	Hypertension	<i>change in mean arterial pressure to >140 mmHg</i>
9	Desaturation	<i>change in peripheral oxygen saturation to <85%</i>
10	Cardiac Arrest	need for chest compressions/CPR & <u>not</u> resulting in death (death coded separately)
11	New Arrhythmia	excludes sinus tachycardia, premature ventricular contractions, and pre-existing arrhythmia that did not worsen during treatment (e.g., atrial fibrillation, including paroxysmal atrial fibrillation).
<i>e.g. 9X = change in O2 saturation to <85% that required an increase in FiO2</i>		
12	Death	Do NOT use this code if death occurred due to a fall, (see below # 14)

Other Event: *considered to be clinically important by clinicians and not listed elsewhere*

Add “X” at the end of Code if there was an unplanned treatment or intervention necessitated by the safety event

13	Other Event (Include blank text field)	Use blank text field to describe event; may include removal of foley/suprapubic catheter, fecal management system, etc.
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Code 14 – Fall

Do **NOT** use “X” to denote any unplanned treatment or intervention; use “Classification of Fall-Related Injury” below

Definition of Fall*: An *unplanned descent* to the floor (or extension of the floor, e.g., equipment or wall) *with or without patient injury*, including if it results from physiological (e.g., syncope) or environmental (e.g. slip) reasons, and including assisted falls (i.e. when staff attempts to minimize impact of fall).

Falls are further categorized by: (1) whether they are **assisted** or **unassisted**, **AND** (2) classification of **fall-related injury**

Code	Critical Event	Critical Event Definition
<i>A</i>	<i>Assisted</i>	Staff assists in lowering patient to the floor (or equipment or wall)
<i>U</i>	<i>Unassisted</i>	Staff does not assist in lowering patient to the floor (or equipment or wall)

Classification of Fall-Related Injury*

<i>i</i>	<i>None</i>	no injury (no signs or symptoms) based on post-fall evaluation
<i>ii</i>	<i>Minor</i>	dressing, ice, cleaning of wound, limb elevation, topical medication, bruise/abrasion
<i>iii</i>	<i>Moderate</i>	suturing, application of steri-strips/skin glue, splinting or muscle/joint strain
<i>iv</i>	<i>Major</i>	surgery, casting, traction, internal injury (including head injury), bone fracture, receipt of blood products, or removal/dislodgement/disruption/dysfunction of any airway, tube, vascular access device or cardiac device
<i>v</i>	<i>Death</i>	death due to injuries (not due to physiologic events causing fall)
<i>e.g. 14Ai would describe an assisted fall that resulted in no injury</i>		

**Preventing Falls in Hospitals: A Toolkit for Improving Quality of Care. January 2013. AHRQ, Rockville, MD.*

