

CLINICAL PERFORMANCE INDICATOR #6.5

BLOOD GLUCOSE LEVEL IN SEIZURE PATIENTS

OBJECTIVE Identify hypoglycemia as a likely cause of seizure

DEFINITIONS

% Compliance Percentage of patients assessed by EMS providers found to meet criteria for a

primary clinical impression of seizure that then receive blood glucose level

assessment

BGL Assessment Determination of the patient's blood glucose level regardless of the resultant

BGL value [from RescueNet with D-stick as an intervention or a value entered in

vital signs

Seizure Patient Any patient who is treated by EMS for seizure or remains post-ictal during EMS

assessment. This set of patients is defined by the primary clinical impressions of "Seizure – Other Convulsions", "Seizure Febrile" and "Seizure Postictal

State".

Performance Objective Assessment of blood glucose level in seizure patients as defined above

REPORTING

Indicator Items Total number of seizure patients defined as a primary clinical impression of

"Seizure - Other Convulsions", "Seizure Febrile" or "Seizure Postictal State".

[from RescueNet] (Denominator, D)

Total number of seizure patients in which a blood glucose level was assessed as

indicated by the intervention data field(s) or vital signs data field [from

RescueNet] (Numerator, N)

% meeting performance objective criteria

FORMULA N/D X 100 = %

EXCLUDED CASES

Patients that do not meet the Clinical Impression definition for "Seizure –

Other Convulsions", "Seizure Febrile" or "Seizure Postictal State".

DATA SOURCE(S) COGNOS report from RescueNet

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#6.5

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REPORTING CRITERIA

Reporting Period Quarterly; Due to OMD PI at least 2 business days prior to the EMS/OMD PI

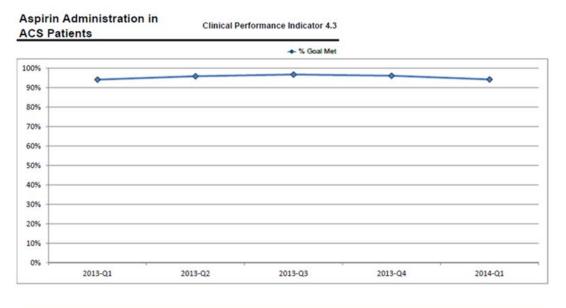
meeting at which Performance Measures will be discussed

Visual Format Line Chart (single chart); Y axis = % Compliance; X axis = quarter/year; Include

the 5 most recent quarters of data; Include raw data in non-PDF format (e.g.

Excel) (See chart layout and design example below)

Chart Legend Include total number seizure patients for each quarter



Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2013	2013-Q1	439	413	94,08%
2013	2013-Q2	601	576	95.84%
2013	2013-Q3	607	587	96.71%
2013	2013-Q4	613	589	98.08%
2014	2014-Q1	498	469	94.18%

Austin-Travis County EMS

TYPE OF MEASURE Process

PERFORMANCEIMPROVEMENT

Performance measures are reviewed periodically by the Agency and OMD
Performance Improvement staff. Clinical performance is overseen by the

System Clinical Performance Improvement Committee and its Subcommittees.

REFERENCES None

DOCUMENTAll clinical performance measures and revisions to these measures are reviewed and approved by the System Clinical Performance Improvement Committee.

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