



<b>Discipline</b>	:	<b>Cardiology</b>
<b>Indicator 3</b>	:	<b>Readmission within (≤) 1 month for Heart Failure</b>
<b>Dimension of Quality</b>	:	Effectiveness
<b>Rationale</b>	:	<ol style="list-style-type: none"> <li>Heart Failure is a main cause of morbidity in heart disease.</li> <li>Readmission rate is a main KPI of morbidity.</li> </ol> <p>Reference: Clinical Practice Guidelines: Management of Heart Failure 2019 4th Edition; Malaysian Heart Failure Registry (MyHF).</p>
<b>Definition of Terms</b>	:	<p><b>Heart Failure:</b> A clinical syndrome due to any structural or physiological abnormality of the heart resulting in its inability to meet the metabolic demands of the body or its ability to do so only at higher than normal filling pressures.</p> <p><b>Readmission:</b> Admission of a patient that was previously <u>managed and discharge from the same facility</u>. Readmission for other diagnosis that is not directly related to Heart Failure is not included in this indicator.</p>
<b>Criteria</b>	:	<p><b>Inclusion:</b></p> <ol style="list-style-type: none"> <li>All Heart Failure admission.</li> </ol> <p><b>Exclusion:</b></p> <ol style="list-style-type: none"> <li>Severe pulmonary disease or pulmonary arterial hypertension.</li> <li>Readmission of patients for Heart Failure within 1 month that were managed and discharged from another facility for the initial Heart Failure admission.</li> <li>Readmission due to other causes that is not directly related to cardiovascular system (e.g., Uncontrolled DM, infection related).</li> <li>Readmission due to hospital acquired infection from previous admission (e.g., Thrombophlebitis/ Urinary Tract Infection).</li> </ol>
<b>Type of indicator</b>	:	Rate-based outcome indicator
<b>Numerator</b>	:	Number of patients readmitted for within (≤) 1 month of initial Heart Failure admission
<b>Denominator</b>	:	Total number of patients admitted with Heart Failure
<b>Formula</b>	:	$\frac{\text{Numerator}}{\text{Denominator}} \times 100\%$
<b>Standard</b>	:	≤ 20 %
<b>Data Collection &amp; Verification</b>	:	<ol style="list-style-type: none"> <li><b>Where:</b> Data will be collected in the Medical and/ or Cardiology ward/ CCU/ CRW.</li> <li><b>Who:</b> Data will be collected by Officer/ Paramedic/ Nurse in-charge of the department/ unit.</li> <li><b>How to collect:</b> For numerator, data is suggested to be collected on the day of readmission. For denominator, data is from admission &amp; discharge record book/ Hospital Information System (HIS).</li> <li><b>How frequent:</b> PVF to be sent 6 monthly to Quality Unit of hospital.</li> <li><b>Who should verify:</b> PVF must be verified by Head of Department, Head of Quality Unit and Hospital Director.</li> </ol>
<b>Remarks</b>	:	

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