



Quality Measure Tip Sheet: Urinary Tract Infection—Long Stay

Quality Measure Overview

- This measure reports the percentage of residents who have had a urinary tract infection (UTI) within the last **30 days**.

Exclusion:

- This measure will not be triggered if the target assessment was an admission, a prospective payment system 5-day assessment, or a readmission/return assessment.



MDS Coding Requirements

In the Minimum Data Set (MDS):

- Include a look-back period of 30 days.
- Code only if all of the following are met:
 - Physician, certified nurse practitioner, physician assistant, or clinical nurse specialist diagnosed a UTI in the last 30 days.
 - Documented signs and symptoms of a UTI such as fever, burning, frequent urination, pain or tenderness in the flank, confusion, mental status change, or pyuria exist.
 - Current medication or treatment of a UTI has occurred in the last 30 days.
 - Significant laboratory findings exist. (Attending physician should determine level of significant laboratory findings and whether culture should be obtained or not.)

Ask These Questions ...

- Was the MDS coded as per the *Resident Assessment Instrument* requirements?
- Does the facility have established criteria for testing (such as the McGeer Criteria available on the Centers for Disease Control and Prevention website), and are the nurses aware of the criteria?
- Does the resident need to be placed on a hydration program?
- Is water accessible at all times and offered to dementia residents?
- Are chronic conditions treated?
- Are staff members monitored for proficiency in perineal-/catheter-care and handwashing?
- If a catheter has been inserted, was the diagnosis appropriate?

For guidance on quality measures, reach out to Health Services Advisory Group (HSAG).

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