

# Methodological study of quality control procedures for mortality medical coding

U.S. Dept. of Health, Education, and Welfare, Public Health Service, Office of Health Research, Statistics, and Technology, National Center for Health Statistics - Discussion

Description: -

- Mortality -- United States.

Death certificates.

Error analysis (Mathematics)

Nosology.

Death -- Proof and certification.

Death -- Causes -- Classification. methodological study of quality control procedures for mortality medical coding

- no. (PHS) 80-1355.

DHEW publication ;

no. 81.

Vital and health statistics.

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Vital and health statistics : Series 2, Data evaluation and methods research ; no. 81 methodological study of quality control procedures for mortality medical coding

Notes: Includes bibliographical references.

This edition was published in 1980

Evaluation Criteria	+Positive Rating	+/-Satisfactory Rating	-Negative Rating
Study Design	Multiple sources of data were gathered/reviewed in order to identify as many potential deaths as possible	More than one source of data was gathered/reviewed in the identification process for potential deaths	Only one data source was gathered/reviewed in the identification process for potential deaths
Diagnostic Procedures	Diagnostic procedures followed standard international guidelines for ICD assignment	A non-standard protocol was specified and followed	No protocol was specified and followed
Definition of Deaths	One of the internationally accepted definitions of deaths was provided	One of the internationally accepted definitions of deaths was provided	No definition of deaths was provided
Study Reporting	All of the following conditions were met: 1) Thorough description of study design, population, and facility characteristics was provided. 2) Specific procedures for data collection, management, and analysis were reported, and 3) actual counts of internal deaths and deaths by cause were reported	Two of the following conditions were met: 1) Thorough description of study design, population, and facility characteristics was provided. 2) Specific procedures for data collection, management, and analysis were reported, and 3) actual counts of internal deaths and deaths by cause were reported	One or fewer of the following conditions were met: 1) Thorough description of study design, population, and facility characteristics was provided. 2) Specific procedures for data collection, management, and analysis were reported, and 3) actual counts of internal deaths and deaths by cause were reported
Risk of Bias			
Unpublished Data	Multiple sources of data were identified and minimized and/or accounted for in study design or analysis AND authors discussed limitations of data in detail and provided guidance for interpretation of bias.		
Case	Other multiple sources of data were identified and minimized and/or accounted for in study design or analysis OR authors discussed limitations of data in detail and provided guidance for interpretation of bias.		
Selection	Some bias was minimized through study design or analysis and some discussion of limitations of data and/or guidance for the interpretation of biases was provided.		
High	Little to no bias was minimized through design or analysis, and little to no discussion of limitations or biases was provided.		
Very High	No bias was identified or minimized through design or analysis and no discussion of limitations of data or biases therein was provided.		



Filesize: 70.49 MB

Tags: #A #methodological #study #of #quality #control #procedures #for #mortality #medical #coding #(Book, #1980) # [me.stfw.info.cdn.cloudflare.net]

## Evidence

As the number of items or complexity of a task increases, our ability to efficiently perform the task without aid decreases.

## Systematic review of discharge coding accuracy

The premise that retrospective studies using administrative data generally involve such large numbers that formal power calculations are unnecessary seems to be supported by the observation that only one study carried out such a calculation. Care is the product of a complex set of processes, of which volume of activity in any given centre or unit is only one contributor. The relevance or impact of these limitations varies according to the purposes and circumstances of study.

## HTA 101: III. PRIMARY DATA METHODS

An example would be men over 40 years old with type 2 diabetes who began seeking medical care at Phoenix Good Samaritan Hospital between January 1, 1990 and December 31, 1994. Agency for Healthcare Research and Quality; December 2010.

## Relationship Between Methodological Trial Quality and the Effects of Selective Digestive Decontamination on Pneumonia and Mortality in Critically Ill Patients

The following example might illustrate this approach.

**Vital Health Statistics Series 2, No. 81: Methodological Study of Quality Control Procedures for Mortality Medical Coding: Centers for Disease Control and Preventi: 9781249026723: me.stfw.info.cdn.cloudflare.net: Books**

Was the study population clearly and fully described, including a case definition? The findings from these studies were not unequivocal as even within these highly selected groups there was considerable variation in effect depending on procedure type and individual centre performance.

## **Discussion**

Were the outcome measures prespecified, clearly defined, valid, reliable, and assessed consistently across all study participants? In addition, the more attention in the study design to issues that can help determine whether there is a causal relationship between the outcome and the exposure, the higher the quality of the study. As noted above, study attributes that affect bias can be used as criteria for assessing the quality of individual studies. They are not intended to create a list that is simply tallied up to arrive at a summary judgment of quality.

## **Studies using English administrative data (Hospital Episode Statistics) to assess health**

These criteria tend to yield homogeneous patient groups that may not represent the diversity of patients that would receive the interventions in real practice. There was no clear indication that the evidence for the volume and mortality relationship was substantially stronger than the evidence for a no effect relationship in these broader groups.

## **Systematic review of discharge coding accuracy**

The following scenario is another example of how bias can occur. Secondary objective is to investigate factors influencing variation in coding.

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## Related Books

- [Opal fires](#)
- [Violence and fraud in El Salvador - a report on current political events in El Salvador](#)
- [Gyakukaiten no firumu - shichijū nendai no eiga sakkatachi](#)
- [Seeing the Forest and the Trees - Report on Forest Resources Research.](#)
- [Tourettes Syndrome](#)