

**Centers for Medicare & Medicaid Services (CMS)
PPS Exempt Cancer Quality Reporting (PCHQR)
Program
Measure Exception Form**

This exception must be renewed at least annually.

Specify the calendar year for Measure exception request(s).

* Indicates required fields

* **Measure Exception Information** (The exception(s) you are requesting must be selected.)

Select all that apply

<input type="checkbox"/> Surgical Site Infection (SSI) Select this option if the hospital performed a combined total of 9 or fewer colon surgeries and abdominal hysterectomies in the calendar year prior to the reporting year.	Calendar Year prior to Reporting Year <input style="width: 80px;" type="text"/> Number of Procedures Performed <input style="width: 80px;" type="text"/> Exclusion Requested for Calendar Year <input style="width: 80px;" type="text"/>
<input type="checkbox"/> Other (Please Describe) If additional space is required, please attach additional documentation <div style="border: 1px solid black; height: 150px; width: 100%;"></div>	Calendar Year prior to Reporting Year <input style="width: 80px;" type="text"/> Number of Procedures Performed <input style="width: 80px;" type="text"/> Exclusion Requested for Calendar Year <input style="width: 80px;" type="text"/>

Specified colon and abdominal hysterectomy surgical procedures:

Only hospitals that performed 9 or fewer of any of the specified colon surgeries **and** abdominal hysterectomies combined in the calendar year prior to the reporting year. The **NHSN Operative Procedure Category Mappings to International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) Codes** (Table 1 extract) is located on the *NHSN* website.

