



## **Beta-Blockers for Acute Myocardial Infarction**

### **Question:**

**How are heart failure patients with AMI handled in the CMS/JCAHO beta blocker measures?**

### **Answer:**

In the 'Beta Blocker on Arrival' measure (AMI-6), patients with documented heart failure on arrival or within 24 hours of arrival are automatically excluded from the measure, regardless of whether they received a beta blocker, via any route. Terminology considered synonymous with heart failure is extensive (see 'Contraindication to Beta Blocker on Arrival' definition for more details):

- **biventricular failure**
- **cardiac decompensation**
- **cardiac failure**
- **congestive heart failure (CHF)**
- **edema described as alveolar, diffuse interstitial, diffuse interstitial pulmonary, interstitial, pulmonary, or pulmonary interstitial**
- **edema of the lungs**
- **edema not described as pulmonary in nature, if referenced as chest x-ray finding (e.g., "CXR shows mild edema")**
- **fluid overload**
- **heart failure described as left, right, or unspecified**
- **perihilar congestion**
- **pulmonary congestion**
- **pump failure**
- **vascular congestion**
- **venous congestion**
- **ventricular failure**
- **volume overload**
- **wet lungs**

Please note that chest x-ray reports are excluded sources in data collection – but MD/NP/PA references to chest x-ray findings are acceptable.

AMI patients with heart failure are not automatically excluded from the Beta Blocker at Discharge measure (AMI-5). If an MD/NP/PA documents that he/she did not prescribe beta blockers at discharge because of the patient's heart failure, the case will be excluded.



**Question:**

**Will the CMS/JCAHO measure be changed as a result of the findings from the COMMIT/CCS-2 study?**

**Answer:**

We are aware of this study and CMS, JCAHO, ACC, AHA and AHRQ are working together to address these findings. See CMS, JCAHO, ACC, AHA and AHRQ Practice Advisory *“Commitment to Respond to COMMIT/CCS-2 Trial Results Beta Blocker Use for Myocardial Infarction (MI) Within 24 Hours of Hospital Arrival”* dated April 27, 2005.