

No.01-a Patient Satisfaction (Outpatients): Satisfied

No.01-b Patient Satisfaction (Outpatients): Satisfied or Somewhat Satisfied

**【Calculation Method】**

Numerator	a	Number of outpatients from the denominator who responded "satisfied"
	b	Number of outpatients from the denominator who responded "satisfied" or "somewhat satisfied"
Denominator		Valid responses to the question: "How do you rate this hospital overall?" from the outpatient satisfaction survey. • Total responses across the five levels: dissatisfied/somewhat dissatisfied/neutral/somewhat satisfied/satisfied.

No.02-a Patient Satisfaction (Inpatients): Satisfied

No.02-b Patient Satisfaction (Inpatients): Satisfied or Somewhat Satisfied

**【Calculation Method】**

Numerator	a	Number of inpatients from the denominator who responded "satisfied"
	b	Number of inpatients from the denominator who responded "satisfied" or "somewhat satisfied"
Denominator		Valid responses to the question: "How do you rate this hospital overall?" from the inpatient satisfaction survey. • Total responses across the five levels: dissatisfied/somewhat dissatisfied/neutral/somewhat satisfied/satisfied.

No.03-a Rate of Falls among Inpatients

No.03-b Rate of Injuries from Falls among Inpatients (Injury Level 2 and above)

No.03-c Rate of Injuries from Falls among Inpatients (Injury Level 4 and above)

No.03-d Rate of Falls among Inpatients Aged 65 and over

**【Calculation Method】**

Numerator	a	Number of falls among inpatients
	b	Number of falls resulting in injuries Level 2 and above among inpatients
	c	Number of falls resulting in injuries Level 4 and above among inpatients
	d	Number of falls among inpatients aged 65 and over
Denominator	a	Total inpatient days (patient-days)
	b	

	c	
	d	Total inpatient days for those aged 65 and over (patient-days)

**【Injury Levels from Falls】**

Level		Description
1	None	No injury to the patient
2	Mild	Required bandaging, ice, wound cleaning, limb elevation, or topical medication; resulted in bruises or abrasions
3	Moderate	Required sutures, staples, skin adhesive, splinting, or resulted in muscle or joint strains
4	Severe	Required surgery, casting, traction; resulted in fractures or necessitated medical examination for nerve or internal injuries
5	Fatal	Patient died as a result of fall-related injuries
6	UTD	Unable to determine from records

No.04 Pressure Ulcer Incidence Rate

**【Calculation Method】**

Numerator	Number of newly developed in-hospital pressure ulcer patients with damage of d2 (injury to the dermis) or higher
Denominator	Total inpatient days, excluding same-day admission/discharge patients, patients with pre-existing pressure ulcers, or patients with new in-hospital pressure ulcers identified before the survey period (person-days)

**【Revised DESIGN-R® 2020 Depth Classification by the Japanese Society of Pressure Ulcers】**

Depth (Severity)	Description
d0	No skin damage or redness
d1	Persistent redness
d2	Damage to the dermis
D3	Damage extending to the subcutaneous tissue
D4	Damage extending beyond the subcutaneous tissue
D5	Damage reaching joint or body cavities
DTI	Suspected deep tissue injury (DTI)
U	Unstageable due to necrotic tissue covering

No.05-a Incidence Rate of New Pressure Ulcers

No.05-b Incidence Rate of New Medical Device-Related Pressure Injuries (MDRPI)

No.05-c Rate of Community-Acquired Pressure Ulcers

**【Calculation Method】**

Numerator	a	Number of patients with newly developed in-hospital pressure ulcers of d2 (damage to the dermis) or higher during the survey period
	b	Number of new Medical Device-Related Pressure Injury (MDRPI) patients during the survey month
	c	Number of patients with pressure ulcers recorded within 24 hours of admission
Denominator	a	Number of inpatients at 0:00 on the first day of the survey + newly admitted patients during the survey period
	b	
	c	Number of newly admitted patients during the survey period

**【Revised DESIGN-R® 2020 by the Japanese Society of Pressure Ulcers - Depth**

**Classification】**

Depth (Severity)	Description
d0	No skin damage or redness
d1	Persistent redness
d2	Damage to the dermis
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D5	Damage reaching joint or body cavities
DTI	Suspected deep tissue injury (DTI)
U	Unstageable due to necrotic tissue covering

No.06 Referral-In Rate

**【Calculation Method】**

Numerator	Number of patients referred in + emergency transported patients
Denominator	Number of first-visit patients

No.07 Referral-Out Rate

**【Calculation Method】**

Numerator	Number of patients referred out to other institutions
Denominator	Number of first-visit + follow-up patients

No.08 Incidence Rate of Symptomatic Urinary Tract Infections

**【Calculation Method】**

Numerator	Total number of cases from the denominator, meeting the definition of catheter-associated symptomatic urinary tract infections (CAUTI)
Denominator	Total number of catheterization days among inpatients

## No.09 Emergency Call Response Rate for Ambulances and Hotlines

**【Calculation Method】**

Numerator	Number of patients arriving by ambulance
Denominator	Number of ambulance requests received
Exclusion	Patients transferred from other hospitals

## No.10 Prophylactic Antibiotic Administration Rate within 1 Hour after the Start of Designated Surgeries

**【Calculation Method】**

Numerator	Number of surgeries where prophylactic antibiotics were initiated within 1 hour before surgery
Denominator	Total number of designated surgeries listed below <ul style="list-style-type: none"> <li>• Coronary artery bypass surgery</li> <li>• Other cardiac surgeries</li> <li>• Hip hemiarthroplasty</li> <li>• Knee arthroplasty</li> <li>• Vascular surgery</li> <li>• Colorectal surgery</li> <li>• Hysterectomy</li> </ul>
Exclusions	<ul style="list-style-type: none"> <li>• Patients under 18 years old at admission</li> <li>• Patients with a length of stay of 120 days or more</li> <li>• Patients who underwent cesarean section</li> <li>• Patients involved in clinical trials</li> <li>• Patients with documented infections prior to surgery</li> <li>• Surgeries performed with general/spinal/epidural anesthesia within 3 days prior to or after the main procedure (4 days for coronary artery bypass or other cardiac surgeries) with days counted from anesthesia start/end dates</li> <li>• Outpatient surgeries</li> </ul>

## No.11 Prophylactic Antibiotic Discontinuation Rate within 24 Hours after Designated Surgeries (48 Hours for Cardiac Surgery)

**【Calculation Method】**

Numerator	Number of surgeries where prophylactic antibiotics were discontinued within 24 hours postoperatively (or within 48 hours for coronary artery bypass surgery or other cardiac surgeries)
Denominator	Number of the following designated surgeries: <ul style="list-style-type: none"> <li>• Coronary artery bypass surgery</li> <li>• Other cardiac surgeries</li> <li>• Colorectal surgery</li> <li>• Hysterectomy</li> </ul>
Exclusions	<ul style="list-style-type: none"> <li>• Patients under 18 years old</li> <li>• Patients with a hospital stay longer than 120 days</li> <li>• Patients undergoing cesarean section</li> <li>• Patients participating in clinical trials or research studies</li> <li>• Patients with documented preoperative infections</li> <li>• Surgeries or procedures performed under general, spinal, or epidural anesthesia within 3 days before and after the main procedure (4 days for coronary artery bypass graft or other cardiac surgeries), with days counted from anesthesia start/end dates</li> <li>• Documented reasons for extended postoperative antibiotic use</li> <li>• Patients who died in the operating room or recovery room</li> </ul>

No.12 Appropriate Selection Rate of Prophylactic Antibiotics for Designated Surgeries

**【Calculation Method】**

Numerator	Number of surgeries where appropriate prophylactic antibiotics were selected for each procedure
Denominator	Total number of the following designated surgeries: <ul style="list-style-type: none"> <li>• Coronary artery bypass surgery</li> <li>• Other heart surgeries</li> <li>• Hip hemiarthroplasty</li> <li>• Knee arthroplasty</li> <li>• Vascular surgery</li> <li>• Colon surgery</li> <li>• Hysterectomy</li> </ul>
Exclusions	<ul style="list-style-type: none"> <li>• Patients under 18 years of age</li> <li>• Patients with a hospital stay of 120 days or more</li> <li>• Patients undergoing cesarean section</li> </ul>

	<ul style="list-style-type: none"> <li>• Patients enrolled in clinical trials</li> <li>• Patients with documented preoperative infections</li> <li>• Surgeries/procedures performed under general, spinal, or epidural anesthesia within 3 days before and after the main procedure (or 4 days for coronary artery bypass and other heart surgeries), based on anesthesia start/end dates</li> <li>• Patients who died in the operating room or recovery room</li> </ul>
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No.13-a Glycemic Control in Diabetic Patients (HbA1c <7.0%)

No.13-b Glycemic Control in Diabetic Patients Aged 65 and Over (HbA1c <8.0%)

**【Calculation Method】**

Numerator	a	Number of outpatients whose final HbA1c (NGSP) is below 7.0%
	b	Number of outpatients aged 65 and over whose final HbA1c (NGSP) is below 8.0%.
Denominator	a	Number of outpatients undergoing pharmacological treatment for diabetes (prescribed diabetes medication for at least 90 days over the past year)
	b	Number of outpatients aged 65 and over undergoing pharmacological treatment for diabetes (prescribed diabetes medication for at least 90 days over the past year)
Exclusions	Patients receiving only exercise or diet therapy	

No.14 Rate of Unplanned Readmission within 4 Weeks of Discharge

**【Calculation Method】**

Numerator	Number of unplanned readmissions within 4 weeks of discharge from the denominator.
Denominator	Total number of discharged cases

No.15 Rate of Unplanned Readmission within 7 Days of Discharge

**【Calculation Method】**

Numerator	Number of unplanned readmissions within 7 days of discharge from the denominator.
Denominator	Total number of discharged cases

No.16 Rate of Antiplatelet and Anticoagulant Therapy in Stroke Patients (Including TIA) by Day 2 of Admission

**【Calculation Method】**

Numerator	Number of cases from the denominator receiving antiplatelet therapy or certain anticoagulant therapy (e.g., Ozagrel sodium) by Day 2 of admission
Denominator	Number of cases admitted with a diagnosis of stroke or TIA in patients aged 18 and over

No.17 Rate of Antiplatelet Prescription for Patients Hospitalized with Stroke (Including TIA)

**【Calculation Method】**

Numerator	Number of cases from the denominator prescribed antiplatelet medication
Denominator	Number of cases admitted with a diagnosis of stroke or TIA for patients aged 18 and older

No.18 Rate of Statin Prescription for Stroke Patients

**【Calculation Method】**

Numerator	Number of cases from the denominator where statins were administered
Denominator	Total number of cases admitted for stroke

No.19 Rate of Anticoagulant Therapy in Stroke Patients with Atrial Fibrillation (Including TIA)

**【Calculation Method】**

Numerator	Number of cases receiving anticoagulants among the denominator
Denominator	Number of cases aged 18 and older hospitalized for stroke or TIA, diagnosed with atrial fibrillation

No.20 Rate of Early Rehabilitation Therapy in Patients Hospitalized for Stroke

**【Calculation Method】**

Numerator	Number of cases from the denominator receiving rehabilitation within 3 days of admission
Denominator	Number of cases aged 18 and older hospitalized for stroke

No.21 Composite Measures for Surgery

**【Calculation Method】**

Numerator	Sum of the numerators from Indicators No. 10, 11, and 12
Denominator	Sum of the denominators from indicators No. 10, 11, and 12

No.22 Composite Measures for Stroke

**【Calculation Method】**

Numerator	Sum of the numerators for Indicators No. 16, 17, 18, 19, and 20
Denominator	Sum of the denominators for Indicators No. 16, 17, 18, 19, and 20

No.23-a Incident and Accident Reports per 100 Beds in 1 Month

No.23-b Proportion of Reports Submitted by Physicians

**【Calculation Method】**

Numerator	a	Monthly number of incident/accident reports during the survey period for inpatients multiplied by 100
	b	Total number of incident/accident reports submitted by physicians from the denominator
Denominator	a	Licensed bed count
	b	Total number of incident/accident reports during the survey period per month for inpatients

No.24 Influenza Vaccination Rate Among Staff

**【Calculation Method】**

Numerator	Number of staff who received the influenza vaccine from the denominator
Denominator	Total number of staff.

No.25 Rate of Nutritional Management for Patients with Diabetes and Chronic Kidney Disease

**【Calculation Method】**

Numerator	Number of cases from the denominator that qualify for special diet reimbursement
Denominator	Inpatient cases aged 18 and older with diabetes and chronic kidney disease, where treatment for these conditions is not the primary goal

No.26-a Rate of Blood Cultures Performed During Carbapenem, Fluoroquinolone, and Anti-MRSA Agents Use

No.26-b Rate of Cultures Performed Prior to Carbapenem, Fluoroquinolone, and Anti-MRSA Agents

**【Calculation Method】**

Numerator	a	Number of patients from the denominator who had blood cultures on the first day of administration
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	b	Number of patients from the denominator who had cultures performed before the first day of administration
Denominator	a	Number of inpatient cases that started treatment with carbapenem injectables or quinolone injectables (excluding oral vancomycin)
	b	Number of inpatient cases that started treatment with carbapenem injectables, quinolone injectables, or anti-MRSA agents (excluding oral vancomycin)

No.26-c Rate of Two or More Blood Culture Sets on the Same Day

No.26-d Rate of Two or More Blood Culture Sets on the Same Day (Under 28 Days)

No.26-e Rate of Two or More Blood Culture Sets on the Same Day (28 Days to Under 2 Years)

No.26-f Rate of Two or More Blood Culture Sets on the Same Day (2 to Under 6 Years)

No.26-g Rate of Two or More Blood Culture Sets on the Same Day (6 Years and Older)

**【Calculation Method】**

Numerator		Number of days (patient-days) with two or more blood culture orders on the same day
Denominator	c	Number of days (patient-days) with blood culture orders
	d	Number of days (patient-days) with blood culture orders (for patients under 28 days)
	e	Number of days (patient- days) with blood culture orders (for patients 28 days to under 2 years)
	f	Number of days (patient-days) with blood culture orders (for patients 2 to under 6 years)
	g	Number of days (patient-days) with blood culture orders (for patients 6 years and older).

No.27-a Rate of Community Collaboration for Stroke Patients

No.27-b Rate of Community Collaboration for Femoral Neck Fracture Patients

**【Calculation Method】**

Numerator		Number of cases from the denominator that qualify for community collaboration reimbursement
Denominator	a	Cases hospitalized for stroke
	b	Cases hospitalized for femoral neck fracture who underwent surgery for the fracture

No.28 Rate of Physical Restraint in Patients Aged 18 and Older

**【Calculation Method】**

Numerator	Total number of patients from the denominator subjected to physical restraint (device days)
Denominator	Total number of inpatient days for patients aged 18 and older (patient days)

**【Physical Restraint Methods】**

1	Tying the torso or limbs to a wheelchair, chair, or bed to prevent wandering
2	Tying the torso and limbs to the bed to prevent falls
3	Surrounding the bed with rails to prevent self-extraction
4	Tying limbs to prevent removal of IV or feeding tubes
5	Using mittens to limit hand function to prevent tube removal or skin scratching
6	Applying Y-shaped restraints, waist belts, or wheelchair tables to prevent slipping or standing
7	Using chairs that restrict standing abilities for those who can stand
8	Dressing in onesies to limit undressing or diaper removal
9	Tying the torso or limbs to the bed to prevent disruptive behavior towards others

No.29-a Rate of Early Surgery for Femoral Neck Fractures

No.29-b Rate of Early Surgery for Femoral Intertrochanteric Fractures

**【Calculation Method】**

Numerator	Number of cases from the denominator that underwent surgery within 2 days of admission	
Denominator	a	Cases hospitalized for femoral neck fractures that underwent surgery
	b	Cases hospitalized for femoral intertrochanteric fractures that underwent surgery

No.30 Rate of Acute Prophylactic Antiemetics Administration after Cancer Chemotherapy with Cisplatin

**【Calculation Method】**

Numerator	Number of cases receiving all three agents (5HT3 receptor antagonists, NK1 receptor antagonists, and dexamethasone) on the day prior to or the day of treatment as stated in the denominator
Denominator	Number of days for patients aged 18 and older receiving cisplatin-containing chemotherapy during hospitalization

No.31 Rate of Therapeutic Drug Monitoring for Anti-MRSA Administration

**【Calculation Method】**

Numerator	Number of cases from the denominator in which blood monitoring was performed
Denominator	Number of cases administered anti-MRSA drugs that should have undergone TDM

No.32 Rate of Implementation of Medication Management Guidance

**【Calculation Method】**

Numerator	Number of cases from the denominator that received medication management guidance
Denominator	Total number of hospitalized cases

No.33 Rate of Early Nutritional Intervention for Critically Ill Patients Requiring Intensive Care

**【Calculation Method】**

Numerator	Number of cases from the denominator that received nutritional intervention within three days of ICU admission
Denominator	Patients aged 18 and older who were continuously admitted to the intensive care unit for more than 3 days

No.34 Rate of Acid Suppressants (PPI/H2RA) Prescription at Discharge for Patients on Aspirin

**【Calculation Method】**

Numerator	Number of cases from the denominator prescribed acid suppressants (PPI/H2RA) at discharge.
Denominator	Patients aged 18 and older who were prescribed aspirin at discharge