

# HAB HIV Core Clinical Performance Measures: Adult/Adolescent Clients Group 2



<b>Performance Measure:</b> Oral Exam		<b>OPR-Related Measure:</b> Yes <a href="http://www.hrsa.gov/performance/measure.htm">www.hrsa.gov/performance/measure.htm</a>			
Percent of clients with HIV infection who received an oral exam by a dentist at least once during the measurement year					
<b>Numerator:</b>	Number of clients who had an oral exam by a dentist during the measurement year, based on patient self report or other documentation				
<b>Denominator:</b>	Number of clients with HIV infection who had a medical visit with a provider with prescribing privileges <sup>1</sup> at least once in the measurement year				
<b>Patient Exclusions:</b>	None				
<b>Data Element:</b>	1. Is the client HIV-infected? (Y/N) a. If yes, did the client receive an oral exam by a dentist during the measurement year?(Y/N)				
<b>Data Sources:</b>	<ul style="list-style-type: none"> <li>• Ryan White Program Data Report, Section 3, Item 33c may provide data useful in establishing a baseline for this performance measure<sup>2</sup></li> <li>• Electronic Medical Record/Electronic Health Record</li> <li>• CAREWare, Lab Tracker or other electronic data base</li> <li>• HIVQUAL reports on this measure for grantee under review</li> <li>• Medical record data abstraction by grantee of a sample of records</li> </ul>				
<b>National Goals, Targets, or Benchmarks for Comparison</b>	IHI Goal: 75% <sup>3</sup> National HIVQUAL Data: <sup>4</sup>				
		2003	2004	2005	2006
	Top 10%	66.7%	78.5%	66.7%	77.4%
	Top 25%	46.7%	62.2%	53.6%	56.4%
	Mean*	34.6%	39.7%	37.3%	39.4%
	*from HAB data base				
<b>Outcome Measures for Consideration:</b>	Rates of dental disease and oral pathology.				
<b>Basis for Selection and Placement in Group 2:</b>					
<p>Oral health care is an important component of the management of patients with HIV infection. A poorly functioning dentition can adversely affect the quality of life, complicate the management of medical conditions, and create or exacerbate nutritional and psychosocial problems.<sup>5</sup> When the oral cavity is compromised by the presence of pain or discomfort, maintaining adherence to complicated antiretroviral therapy regimens becomes more difficult.<sup>6</sup></p> <p>There is limited evidence on the risks of oral procedures among persons with HIV/AIDS. Evidence for the utility of selected oral lesions as markers for seroconversion is limited to a single study of a single oral condition—candidiasis.<sup>7</sup> In the later stages of HIV disease, greater numbers of oral lesions and aggressive</p>					

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periodontal breakdown are more likely; therefore, oral health care visits should be scheduled more frequently.<sup>8</sup>

Measure reflects important aspect of care that impacts HIV-related morbidity and focuses on treatment decisions that affect a sizable population. Completing an oral health exam at least every 12 months is not specified in the PHS guidelines but is accepted as good practice.

### **US Public Health Guidelines:**

Primary health care providers should make an initial dental referral for every HIV/AIDS patient under their care. Oral health care providers should examine all patients on a semiannual basis for dental prophylaxis and other appropriate preventive care. As HIV-related medications may affect dental treatment and cause adverse effects, the patient's oral health care provider should review all medications being used by the patient and should understand the potential for these medications to affect oral health care.<sup>9</sup>

### References/Notes:

<sup>1</sup>A "provider with prescribing privileges" is a health care professional who is certified in their jurisdiction to prescribe ARV therapy.

<sup>2</sup>RDR does not provide number of dental exams, preventive, curative treatments and/or surgeries. It only provides information on the number of clients and number of visits in the "Oral health care" service category.

<sup>3</sup>IHI Measure reads, "Percent of Patients Receiving an Annual Dental Exam"

(<http://www.ihf.org/IHI/Topics/HIVAIDS/HIVDiseaseGeneral/Measures/PercentofPatientsReceivinganAnnualDentalExam.htm>)

<sup>4</sup><http://www.hivguidelines.org/admin/files/qoc/hivqual/proj%20info/HQNatlAggScrs3Yrs.pdf>

<sup>5</sup>US DHHS Oral Health in America: A Report of the Surgeon General

<http://www2.nidcr.nih.gov/sgr/sgrohweb/welcome.htm>

<sup>6</sup>[http://www.hivguidelines.org/public\\_html/center/clinical-guidelines/oral\\_care\\_guidelines/oral\\_health\\_book/oral\\_health\\_supp\\_pages/oral\\_health\\_chap1.htm#references](http://www.hivguidelines.org/public_html/center/clinical-guidelines/oral_care_guidelines/oral_health_book/oral_health_supp_pages/oral_health_chap1.htm#references)

<sup>7</sup><http://www.ahrq.gov/clinic/epcsums/denthivsum.htm>

<sup>8</sup>[http://www.hivguidelines.org/public\\_html/center/clinical-guidelines/adult\\_hiv\\_guidelines/supplemental\\_pages/oral\\_health\\_adults/pdf/adults\\_oral\\_health.pdf](http://www.hivguidelines.org/public_html/center/clinical-guidelines/adult_hiv_guidelines/supplemental_pages/oral_health_adults/pdf/adults_oral_health.pdf)

<sup>9</sup>New York State Dept of Health AIDS Institute *Oral Health Care for People With HIV Infection*

<http://www.hivguidelines.org/Content.aspx?pageID=263>