

# IQR PRO-PM MANDATORY OFFICE HOURS

Review and Q&A

May 29, 2025

# HOUSEKEEPING

- Please add your name and site name in the chat and this will meet the mandatory attendance requirement
- If you have not already done so, please send your site's CCN to [RegistryEngagement@aaos.org](mailto:RegistryEngagement@aaos.org) We must have this in order to submit to CMS
- We will take questions at the end of the presentation, but please type them into the chat as they arise
- FAQ document with 40+ questions answered in previous office hours sessions is in chat— please take a peek to see if we've covered your topic – Additional information is in Appendix at the end of this slide deck
- ALL items presented here, and in the chat, will be emailed out to the group in the next few days

# WHAT YOU NEED TO DO AS A PARTICIPATING SITE



**OPT IN**

Sign a data share agreement to opt-in to AAOS submitting an IQR PRO-PM report on your site's behalf by 3/31/25



**AUTHORIZE**

Grant AAOS vendor access in the HQR Portal (**Vendor ID: V213015**) – [\\*\\*\\*Instructions in Chat\\*\\*\\*](#)



**SUBMIT**

Submit data to AJRR for mandatory fields (e.g., CCN, MBI, Procedure data, PROMS data)

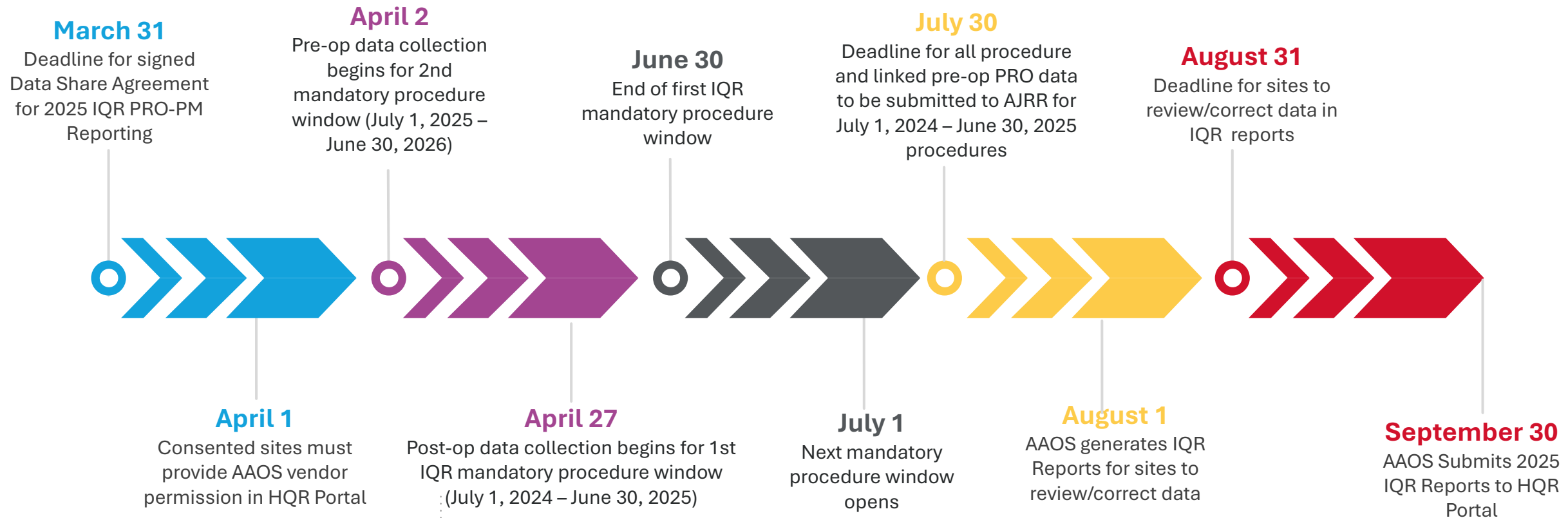


**VALIDATE**

Review IQR Reports and make any necessary changes



# 2025 KEY DEADLINES & TIMELINE





*Instructions to open the file:*

\* Please find your password [here](#)

\* Copy the password and use it to extract the reports

Registry Insights reports will now need a password to be opened after downloading the file to your computer. The registry insights reports password is personalized to each user with access to exportable reports. The new registry insights reports password link and section will allow you to copy your report password to open the recently downloaded excel file.

If you are having any issues with your new report password, please contact [registrysupport@aaos.org](mailto:registrysupport@aaos.org)

## Performance Report

Comprehensive Care for Joint Replacement Report Extract

TJC Data Detail Report

CMS IQR PRO REPORT

# NEXT STEPS FOR PARTICIPATING SITES

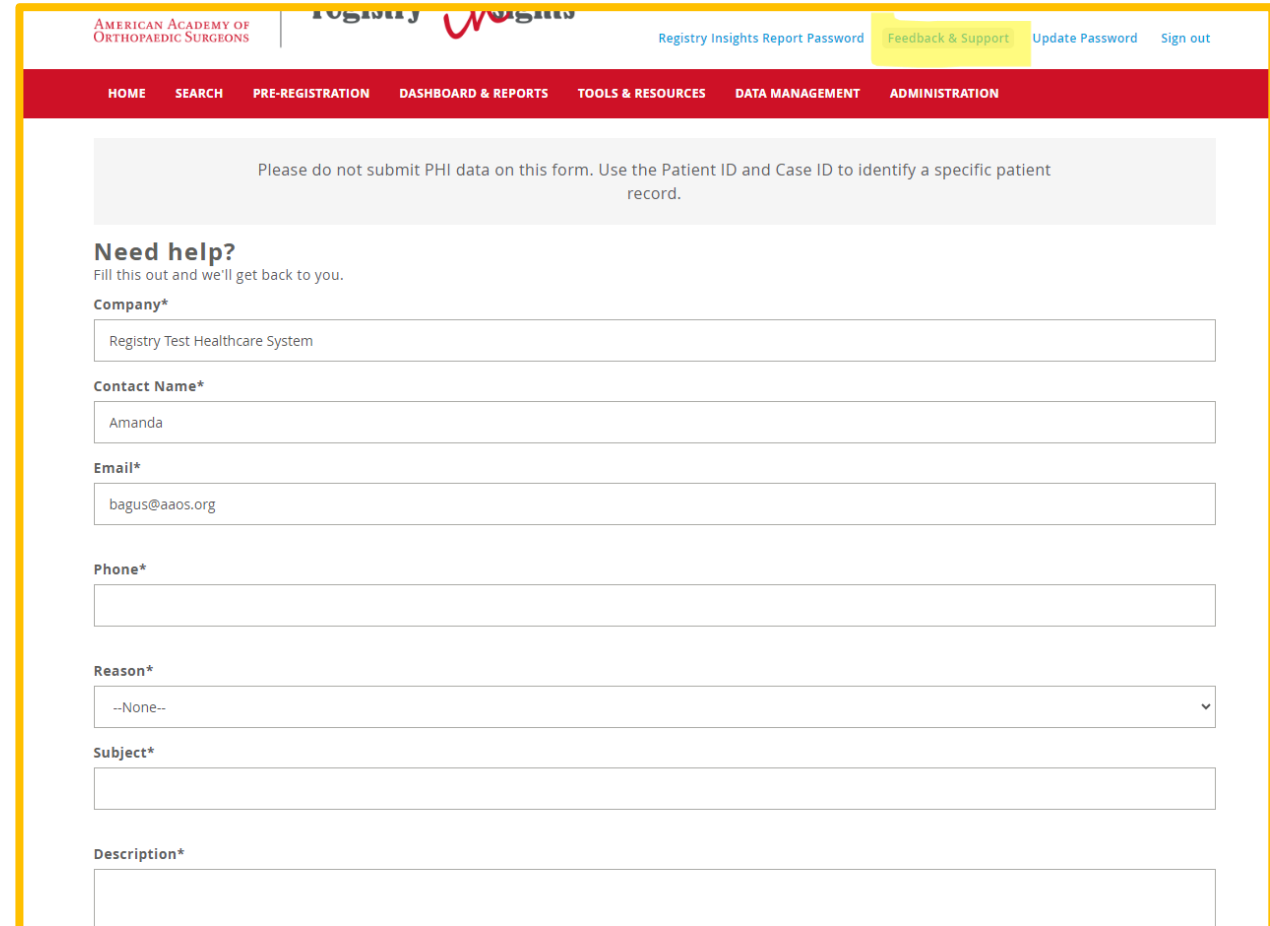
- ✓ Grant AAOS access as a vendor in HQR Portal  
(Vendor ID: V213015)
- ✓ Provide AAOS with provider CCN (this is a mandatory field)
- ✓ Collect and submit data to AJRR
  - Pre-op Patient- or Provider-Reported Risk Variables
  - Pre- and Post-Operative Functional Status Assessments
  - Rows without MBI or PROMs data will be rejected, all other fields will be flagged but still allow the data to pass through

# Q&A AND CONTACT INFORMATION

**Technical Support:** Please submit a help ticket to our Feedback & Support link on the RegistryInsights platform

**Contracts, Invoicing, & Onboarding:**  
[RegistryEngagement@aaos.org](mailto:RegistryEngagement@aaos.org)

**Business Hours:** Monday through Friday, 8 a.m. to 4 p.m. Central Time



The screenshot shows the 'Feedback & Support' form on the AAOS Registry Insights platform. The header includes the AAOS logo, the 'Registry Insights' logo, and navigation links: 'Registry Insights Report Password', 'Feedback & Support' (highlighted), 'Update Password', and 'Sign out'. The main navigation bar contains links: 'HOME', 'SEARCH', 'PRE-REGISTRATION', 'DASHBOARD & REPORTS', 'TOOLS & RESOURCES', 'DATA MANAGEMENT', and 'ADMINISTRATION'. A warning box states: 'Please do not submit PHI data on this form. Use the Patient ID and Case ID to identify a specific patient record.' The form section is titled 'Need help?' with the instruction 'Fill this out and we'll get back to you.' It contains several input fields: 'Company\*' (with 'Registry Test Healthcare System' entered), 'Contact Name\*' (with 'Amanda' entered), 'Email\*' (with 'bagus@aaos.org' entered), 'Phone\*', 'Reason\*' (a dropdown menu with '--None--' selected), 'Subject\*', and 'Description\*'. Each field is followed by a small asterisk indicating it is required.



# AMERICAN JOINT REPLACEMENT REGISTRY

## APPENDIX



# AMERICAN JOINT REPLACEMENT REGISTRY

## WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

# WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

**WHO?**

**Included**

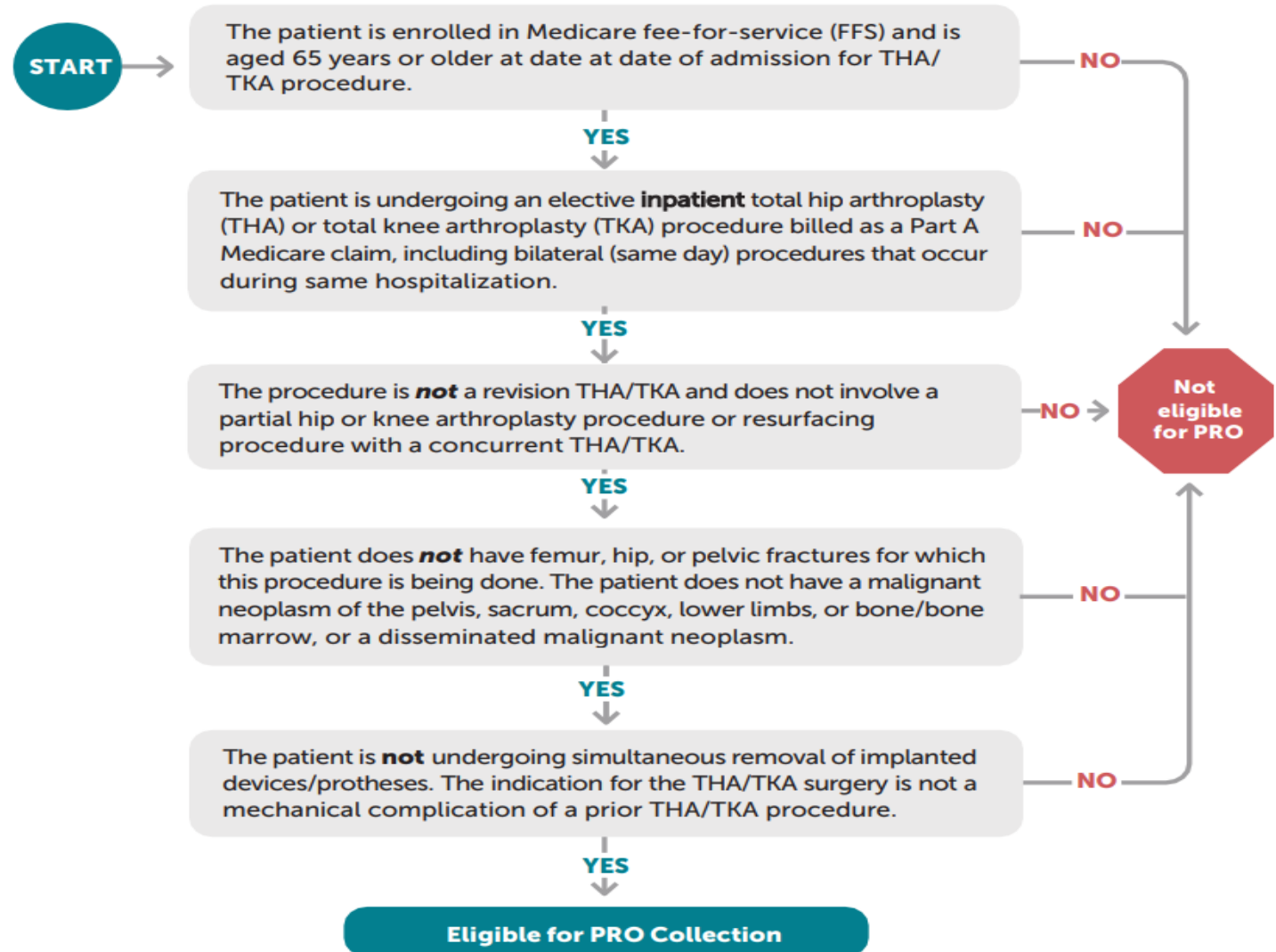
- Age 65 and older
- Enrolled in Medicare fee-for-service
- Primary elective THA/TKA reimbursed as INPATIENT

**Excluded**

- Medicare Advantage Patients
- Revisions/Removals/Mechanical Complications
- Partial/Hemi/Uni-compartmental
- Musculoskeletal Malignancy
- Fractures

# WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

WHO?








# WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

## WHAT?

The listed elements need to be completed for a **minimum of 50%** of eligible patients.



 Data Element Type	 Preoperative Data Elements	 Postoperative Data Elements
Patient-Reported Outcome Measures (PROMs)	THA patients: HOOS, JR TKA patients: KOOS, JR	THA patients: HOOS, JR TKA patients: KOOS, JR
Patient- or Provider-Reported Risk Variables	Mental Health Subscale items from either PROMIS-Global or VR-12	N/A
	Health Literacy (SILS2)	
	BMI or Height/Weight	
	Use of Chronic Narcotics	
	Total Painful Joint Count: Patient-Reported Pain in Non-Operative Lower Extremity Joint	
Matching Variables	Quantified Spinal Pain: Patient-Reported Back Pain, Oswestry Index Question	N/A
	Medicare Provider Number	
	MBI	
	Date of Birth	
	Date of Procedure	
	Procedure Type	
PROM-related Variables	Date of Admission	Date of Admission
	Date of PRO Data Collection	Date of PRO Data Collection
	Mode of Collection	Mode of Collection
	Person Completing the Survey	Person Completing the Survey
	Generic PROM Version	N/A

# WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

## Pre-op Patient- or Provider-Reported Risk Variables

- PROMIS-10 Global **OR** VR-12
- At the moment, what is your back pain?
  - 0 = None, 1 = Very Mild, 2 = Moderate, 3 = Fairly Severe, 4 = Very Severe, 5 = Worst Imaginable
- How comfortable are you filling out medical forms by yourself? (Single Item Literary Screening (SILS)-2)
  - 0 = Not at all, 1 = A little bit, 2 = Somewhat, 3 = Quite a bit, 4 = Extremely
- What amount of pain have you experienced in the last week in your other knee/hip?
  - 0 = None, 1 = Mild, 2 = Moderate, 3 = Severe, 4 = Extreme

## Pre- and Post-Operative Functional Status Assessments

- Knee PROM – [KOOS Jr.](#)
- Hip PROM – [HOOS Jr.](#)



**WHAT?**



# WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

How will hospitals be scored?

CMS will publicly report the percentage of patients who achieve a substantial clinical benefit (SCB).

HOW?

Substantial Clinical Benefit Threshold	
HOOS, JR. - 22 points	KOOS, JR. – 20 points

CMS will factor in all the risk variable data you submitted, as well as your claims data, to create your final “risk-standardized improvement rate” (RSIR).

For example, you achieve a 60% RSIR, that means that, in general, 60% of your patients reported a substantial improvement after their THA/TKA procedure



# WHAT YOU NEED TO DO TO MEET CMS REQUIREMENTS

## WHEN?

Reporting Period	Eligible Elective Procedure Period	Pre-Op Data Collection	Pre-Op Data Submission	Post-Op Data Collection	Post-Op Data Sub
2025 Voluntary Reporting	January 1, 2023– June 30, 2023	October 3, 2022– June 30, 2023	October 2, 2023	October 28, 2023– August 28, 2024	Sept 30, 2024
<b>2026 Voluntary Reporting</b>	<b>July 1, 2023– June 30, 2024</b>	April 2, 2023– June 30, 2024	Sept 30, 2024	<b>April 26, 2024– August 29, 2025</b>	<b>Sept 30, 2025</b>
<b>2027 Mandatory Reporting</b>	<b>July 1, 2024– June 30, 2025</b>	<b>April 2, 2024– June 30, 2025</b>	<b>Sept 30, 2025</b>	April 27, 2025– August 29, 2026	Sept 30, 2026

# CMS IQR PRO-PM | FINANCIAL IMPLICATIONS

What is the financial penalty for not reporting a complete data set for 50% of all eligible patients?

CMS will reduce 25% of the Annual Payment Update (usually 2-4%) for **ALL** the hospital's Medicare Fee-for-Service Part A claims, including non-orthopaedic claims

FOR EXAMPLE:



\$100M Medicare fee-for-service Part A claims

+



APU is 4%

=

↓ \$1M

Lost Revenue

# REPORTING PROCESS

## Site Elects to Report

- Signed DUA was due 3/31/25
- Registry team provides [IQR PRO-PM fact sheet](#) AVAILABLE on website and in Chat

## Data Submission

- **Website & Data Specifications** provide site **required data elements for submission and how to review** dashboard-available extract
- Site submits data quarterly at minimum
- Site reviews dashboard to track PROMs in RegistryInsights

## Reporting

- Two Options:
- **Site downloads extract and submits to CMS in csv format**
- **AAOS submits excel file to CMS through IQR portal once site approves extract**



# AMERICAN JOINT REPLACEMENT REGISTRY

## HOW AAOS SUPPORTS YOU

# HOW AAOS SUPPORTS YOU

## 2 New Procedure Elements

- **Medicare\_MBI\_Number**
  - 11-digit Alphanumeric ID
  - Procedure file submission
- **Chronic\_Narcotics\_Use\_>90**
  - 0 = No, 1 = Yes (use of narcotics for ≥90 days prior to surgery)
  - Procedure file submission

## 1 New PROMs Data Element

- **Person\_Survey\_Status**
  - 0 = Self, 1 = Surrogate
  - PROMs file submission

OR

- **Part of assessments questions if utilizing the registry PRO Tool**

# HOW AAOS SUPPORTS YOU

## 2 New Procedure Layout Data Elements

212	211	HC	Perioperative_Antibiotics	Optional Data	1-3 (1=Yes, 2=No, 3=Not reported or NR)	09.17.2020 Added element
213	212	HD	Pain_Management	Optional Data	1-3 (1=Yes, 2=No, 3=Not reported or NR)	09.17.2020 Added element
214	212	HE	Medicare_HIC_Number	Optional Data	10 or 11 digit alphanumeric account number (e.g., 123456789A); Not Reported or NR	01.08.2024 Added element; <b>Required for IQR PRO-PM</b>
215	213	HF	Chronic_Narcotics_Use_>90	Optional Data	0-1 (0 = No, 1 = Yes); Not Reported or NR	01.08.2024 Added element; <b>Required for IQR PRO-PM</b>
216						

<

>

≡

Info

Change Control

Inclusion Guide

Procedure Layout

PostOp Layout

PROMs Layout

ICD10-PCS Codes

ICD9-PCS Codes

CPT Codes

Procedure Header

The 2024v1 Specifications & Dictionary are available in RI Tools & Resources

## 1 New PROMs Layout Data Element

					9=Sometimes participate in IMPACT SPORTS; 10=Regularly participate in IMPACT SPORTS such as jogging, tennis, skiing, acrobatics, ballet, heavy labor, or backpacking); Not reported or NR	
257	256	IV	Person_Survey_Status	Optional Data	0-1 (0 = Self, 1 = Surrogate); Not Reported or NR	Uses: <b>IQR PRO-PM</b> ; 01.08.2024 Added element
258						

<

>

≡

Info

Change Control

Inclusion Guide

Procedure Layout

PostOp Layout

PROMs Layout

ICD10-PCS Codes

ICD9-PCS Codes

CPT Codes

Procedure Header

PostOp Header





# HOW AAOS SUPPORTS YOU

<b>PROMS_CJRSILS2</b>	Single Item Health Literacy Screening (SILS2) questionnaire	# (0 = Not at all; 1 = A little bit; 2 = Somewhat; 3 = Quite a bit; 4 = Extremely); Not reported or NR
<b>PROMs_CJRPatRepPain</b>	Patient-Reported Pain in Non-operative Lower Extremity Joint	# (0 = None; 1 = Mild; 2 = Moderate; 3 = Severe; 4 = Extreme); Not reported or NR
<b>PROMs_CJRBackPain</b>	Patient-Reported Back Pain (Oswestry Index Question)	# (0 = None; 1 = Very Mild; 2 = Moderate; 3 = Fairly Severe; 4 = Very Severe; 5 = Worst Imaginable); Not reported or NR

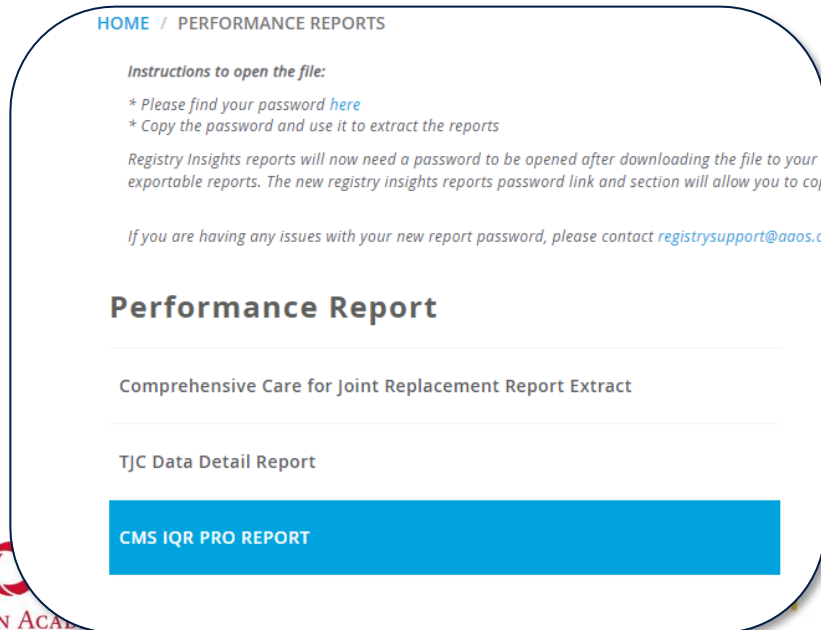
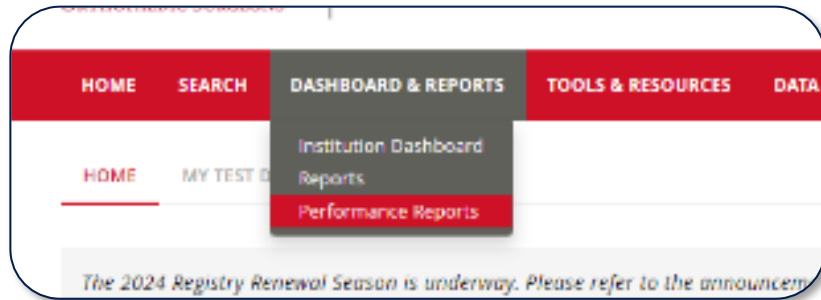
## Low Back Pain, Health Literacy, & Total Painful Joint Count Via

- Submitted via AJRR Procedure & PROMs file layouts submitted by a hospital or an authorized 3<sup>rd</sup> party vendor

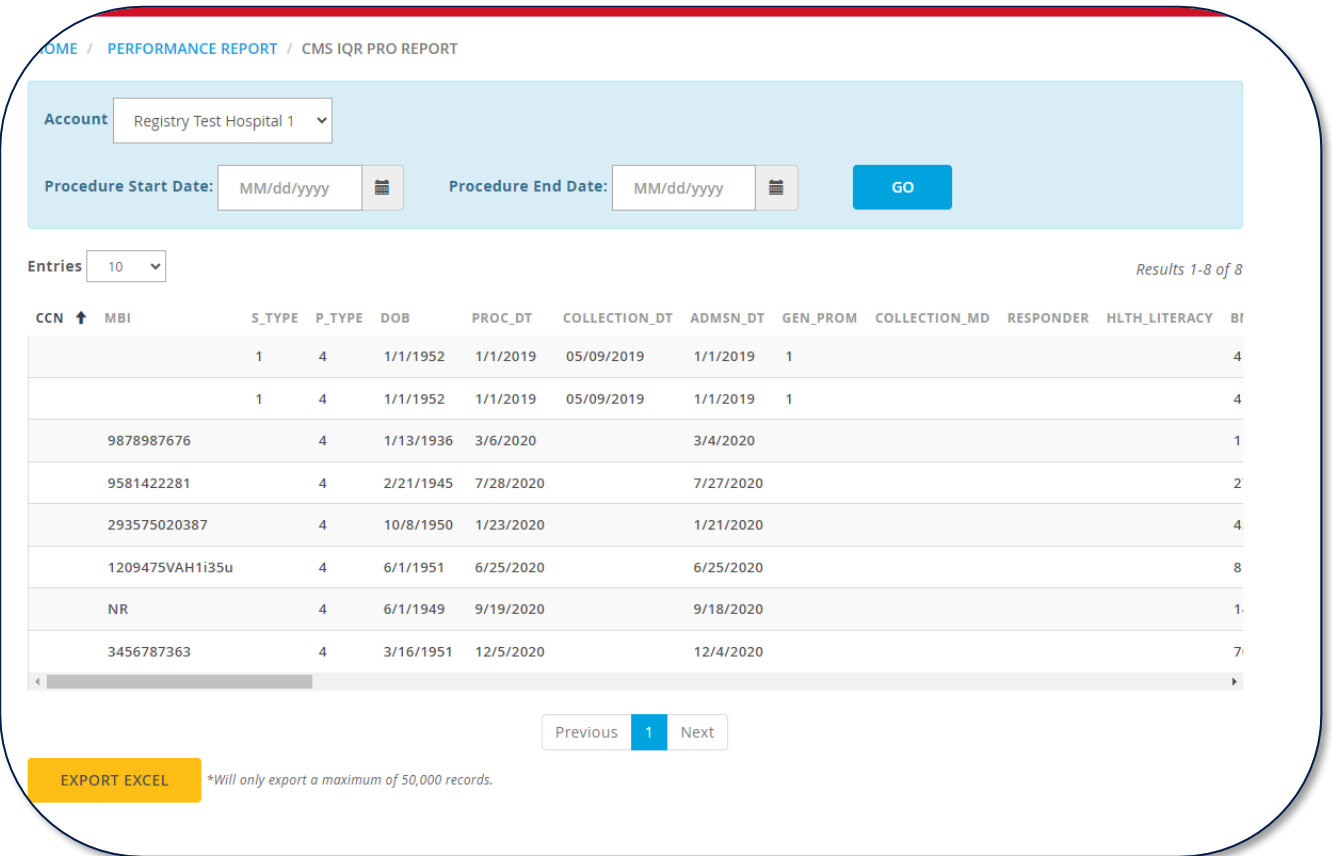
OR

- Via the RegistryInsights PRO Tool
  - Make sure the “CMS Risk Assessment” is listed as a pre-op assessment in your PRO profile
  - To update a PRO Profile, please reach out to our support team
- BMI** is calculated from Height & Weight data elements submitted with the procedure file
- Chronic Narcotics Use** is a new element in the 2024v1 procedure file

# HOW AAOS SUPPORTS YOU



The IQR PROMs Performance Report allows sites to track their PROMs completion and scores for the 65+ primary total hip and knee cases and uses the CMS-required format for submission



# AMERICAN JOINT REPLACEMENT REGISTRY

## ELIGIBILITY CRITERIA FOR PARTICIPATION

# ELIGIBILITY CRITERIA FOR PARTICIPATION

1

AJRR sites must  
opt-in for PRO-PM  
reporting

## ADDENDUM TO THE MASTER REGISTRY PARTICIPATION AGREEMENT BY AND BETWEEN THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS AND PARTICIPANT

### DATA RELEASE CONSENT FORM AUTHORIZING AND DIRECTING THE AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS TO TRANSMIT DATA TO CMS

\_\_\_\_ (“Participant”) and the American Academy of Orthopaedic Surgeons (“AAOS”) acknowledge and agree as follows:




1. Participant has entered into a Participation Agreement with AAOS to provide certain data to AAOS’s Registry Program (“Registries”) and to receive certain comparative reports from AAOS (the “Agreement”).
2. The data provided by Participant to AAOS under the Agreement includes office, physician, and patient-level data (“Data”), which can be used to calculate performance metrics (the “Metrics”). The Participant, in submitting Data, has agreed to comply with the core data element documentation, as described more fully in the Agreement, and as updated from time to time.
3. The Registries maintain the status of Qualified Clinical Data Registries (“QCDR”), which allows AAOS to report measure data for Participants to the U.S. Centers for Medicare & Medicaid Services (“CMS”) for its Merit-Based Incentive Payment System (“MIPS”) and Inpatient Quality Reporting (“IQR”) Program, Total Hip and Knee Replacement Patient-Reported Outcomes Performance Measure (“PRO-PM”) with Participant consent.
4. Participant agrees that it has opted to participate in MIPS and the IQR Program, as selected below, and directs that the Data and any required Metrics needed to participate in either program for eligible physicians that have provided consent shall be extracted, formatted, and submitted by AAOS to CMS, along with de-identified Registries benchmarks or CMS benchmarks, as applicable. Participant agrees that AAOS shall not make final performance measure calculations or calculate incentive payments, if any.
  - Merit-Based Incentive Payment System (“MIPS”)
  - Inpatient Quality Reporting (“IQR”) Program:
    - Total Hip and Knee Replacement Patient-Reported Outcomes Performance Measure (“PRO-PM”)
5. Participant agrees and warrants that the physicians whose data may be provided under the terms of this Addendum are listed in Appendix A (“Eligible Physicians”) and have consented to and opted into participation in MIPS and/or the IQR Program, as applicable, and have authorized Participant to sign this Addendum on their behalf. If an Eligible Physician has not authorized Participant to sign on their behalf, but the Eligible Physician wishes to direct AAOS to submit physician-level Data or Metrics to CMS for MIPS and/or the IQR Program, Participant must notify AAOS immediately, and the Eligible Physician will be required to sign this Addendum directly.
6. Participant represents and warrants that it has entered or will enter into an appropriate agreement or consent with CMS for its participation in MIPS and/or the IQR Program, as may be required. Participant further understands and agrees that CMS is exclusively responsible for its use of the Data and Metrics and the conduct of MIPS and/or the IQR Program, and Participant acknowledges that



# ELIGIBILITY CRITERIA FOR PARTICIPATION

2

Submission of  
required data  
elements

 Data Element Type	 Preoperative Data Elements	 Postoperative Data Elements
Patient-Reported Outcome Measures (PROMs)	THA patients: HOOS, JR TKA patients: KOOS, JR	THA patients: HOOS, JR TKA patients: KOOS, JR
Patient- or Provider-Reported Risk Variables	Mental Health Subscale items from either PROMIS-Global or VR-12	N/A
	Health Literacy (SILS2)	
	BMI or Height/Weight	
	Use of Chronic Narcotics	
	Total Painful Joint Count: Patient-Reported Pain in Non-Operative Lower Extremity Joint	
Matching Variables	Quantified Spinal Pain: Patient-Reported Back Pain, Oswestry Index Question	N/A
	Medicare Provider Number	
	MBI	
	Date of Birth	
	Date of Procedure	
	Procedure Type	
PROM-related Variables	Date of Admission	N/A
	Date of PRO Data Collection	
	Mode of Collection	
	Person Completing the Survey	
	Generic PROM Version	N/A

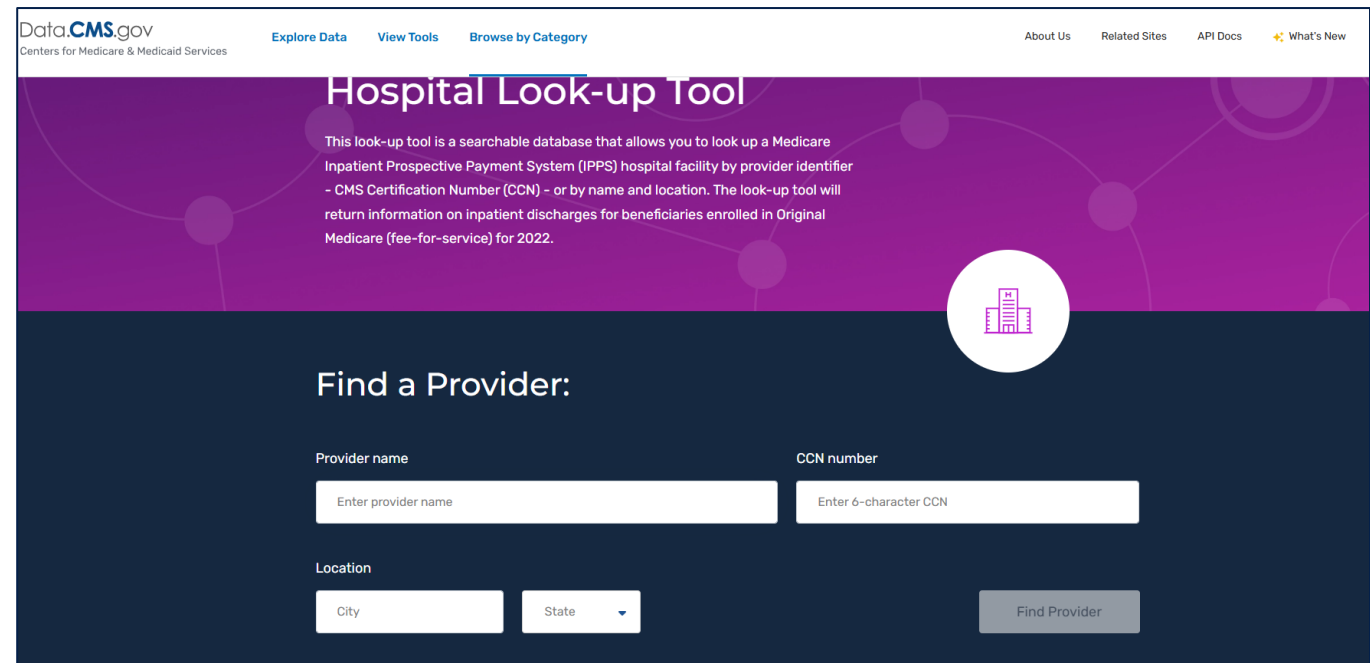
BMI: Body Mass Index; HOOS, JR: Hip dysfunction and Osteoarthritis Outcome Score for Joint Replacement; KOOS, JR: Knee injury and Osteoarthritis Outcome Score for Joint Replacement; PROMIS-Global: Patient-Reported Outcomes Measurement Information System; SILS2: Single Item Literacy Screener; VR-12: Veterans Rand-12; MBI: Medicare Beneficiary Identifier; PROM: Patient-reported Outcome Measure

# ELIGIBILITY CRITERIA FOR PARTICIPATION

3

Provide AAOS with  
your site's CCN  
Number

**CMS Certification Number (CCN):** A CCN formerly called an OSCAR Number, is the six-digit Medicare certification number issued for a facility by CMS.



The screenshot shows the 'Hospital Look-up Tool' interface on the Data.CMS.gov website. The header includes the site name and navigation links like 'Explore Data', 'View Tools', and 'Browse by Category'. The main heading is 'Hospital Look-up Tool'. Below it, a descriptive paragraph explains that the tool is a searchable database for Medicare Inpatient Prospective Payment System (IPPS) hospital facilities, allowing look-up by provider identifier (CCN) or by name and location. It also mentions that the tool returns information on inpatient discharges for beneficiaries enrolled in Original Medicare (fee-for-service) for 2022. The search section, titled 'Find a Provider:', contains three input fields: 'Provider name' (with a placeholder 'Enter provider name'), 'CCN number' (with a placeholder 'Enter 6-character CCN'), and 'Location' (with sub-fields for 'City' and 'State' with a dropdown arrow). A 'Find Provider' button is located at the bottom right of the search area.

# ELIGIBILITY CRITERIA FOR PARTICIPATION

4

Compliance with  
AAOS data  
submission standards

## 2 New Procedure Layout Data Elements

212	211	HC	Perioperative_Antibiotics	Optional Data	1-3 (1=Yes, 2=No, 3=Not reported or NR)	09.17.2020 Added element
213	212	HD	Pain_Management	Optional Data	1-3 (1=Yes, 2=No, 3=Not reported or NR)	09.17.2020 Added element
214	212	HE	Medicare_HIC_Number	Optional Data	10 or 11 digit alphanumeric account number (e.g., 123456789A); Not Reported or NR	01.08.2024 Added element: <b>Required for IQR PRO-PM</b>
215	213	HF	Chronic_Narcotics_Use_>90	Optional Data	0-1 (0 = No, 1 = Yes); Not Reported or NR	01.08.2024 Added element: <b>Required for IQR PRO-PM</b>
216						

< > ≡ Info Change Control Inclusion Guide Procedure Layout PostOp Layout PROMs Layout ICD10-PCS Codes ICD9-PCS Codes CPT Codes Procedure Header PostOp Header PROMs Header +

The 2024v1 Specifications & Dictionary are available in RI Tools & Resources

## 1 New PROMs Layout Data Element

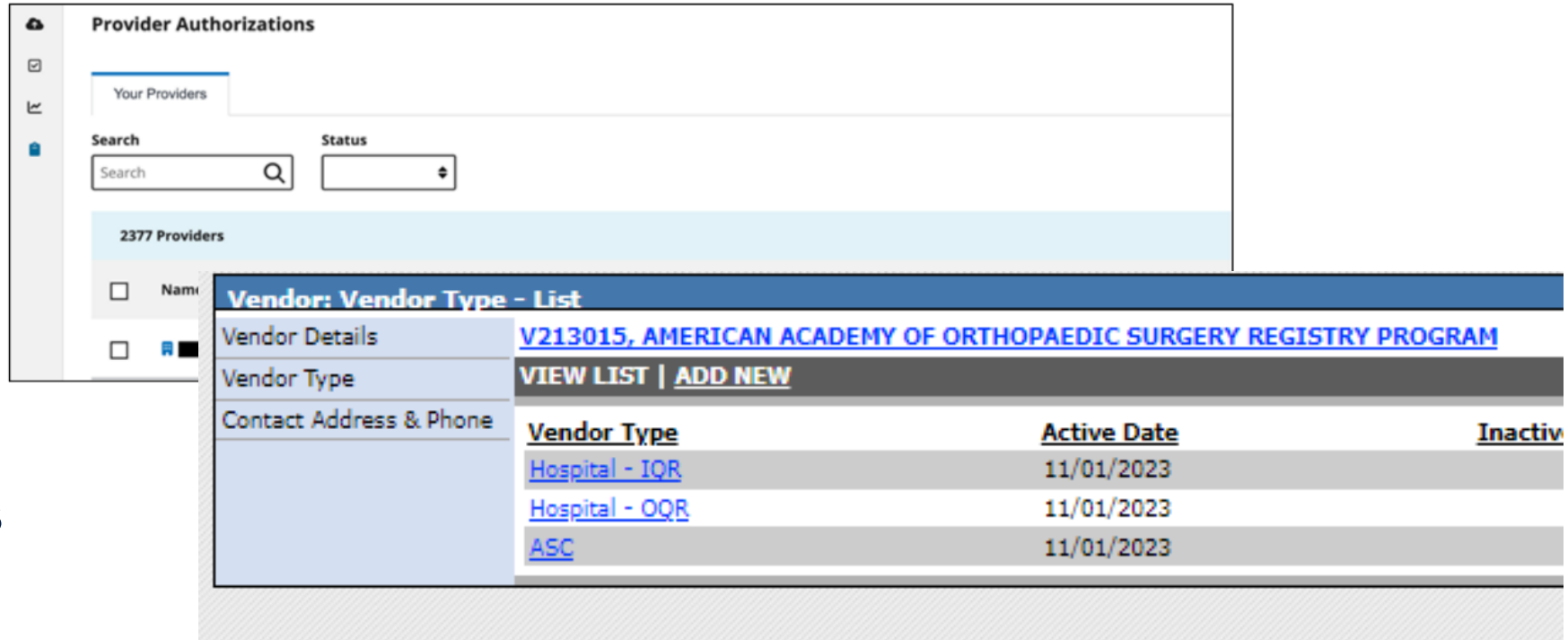
257	256	IV	Person_Survey_Status	Optional Data	9=Sometimes participate in IMPACT SPORTS; 10=Regularly participate in IMPACT SPORTS such as jogging, tennis, skiing, acrobatics, ballet, heavy labor, or backpacking); Not reported or NR	Uses: <b>IQR PRO-PM</b> 01.08.2024 Added element
258					0-1 (0 = Self, 1 = Surrogate); Not Reported or NR	

< > ≡ Info Change Control Inclusion Guide Procedure Layout PostOp Layout PROMs Layout ICD10-PCS Codes ICD9-PCS Codes CPT Codes Procedure Header PostOp Header

# ELIGIBILITY CRITERIA FOR PARTICIPATION

5

Grant AAOS access  
as a vendor in HQR  
Portal




**Provider Authorizations**

Your Providers

Search  Status

2377 Providers

☐ Name

☐ 

**Vendor: Vendor Type - List**

[Vendor Details](#) [V213015, AMERICAN ACADEMY OF ORTHOPAEDIC SURGERY REGISTRY PROGRAM](#)

[Vendor Type](#) [VIEW LIST](#) | [ADD NEW](#)

[Contact Address & Phone](#)

Vendor Type	Active Date	Inactive
<a href="#">Hospital - IQR</a>	11/01/2023	
<a href="#">Hospital - OQR</a>	11/01/2023	
<a href="#">ASC</a>	11/01/2023	

The Vendor ID for AAOS is  
**V213015**



# ELIGIBILITY CRITERIA FOR PARTICIPATION

6

Attendance at  
Mandatory IQR-PRO  
PM Office Hours

## 2025 IQR Office Hours Dates

- Thursday, April 17, 2025
- Thursday, May 29, 2025

# ELIGIBILITY CRITERIA FOR PARTICIPATION

7

Validation of uploaded  
PRO-PM File in HQR  
Portal

< PRO-PM index page

### THA/TKA pre-operative surveys

Search

MBI, procedure type, procedure date, and missing responses

Reset

12 patient surveys

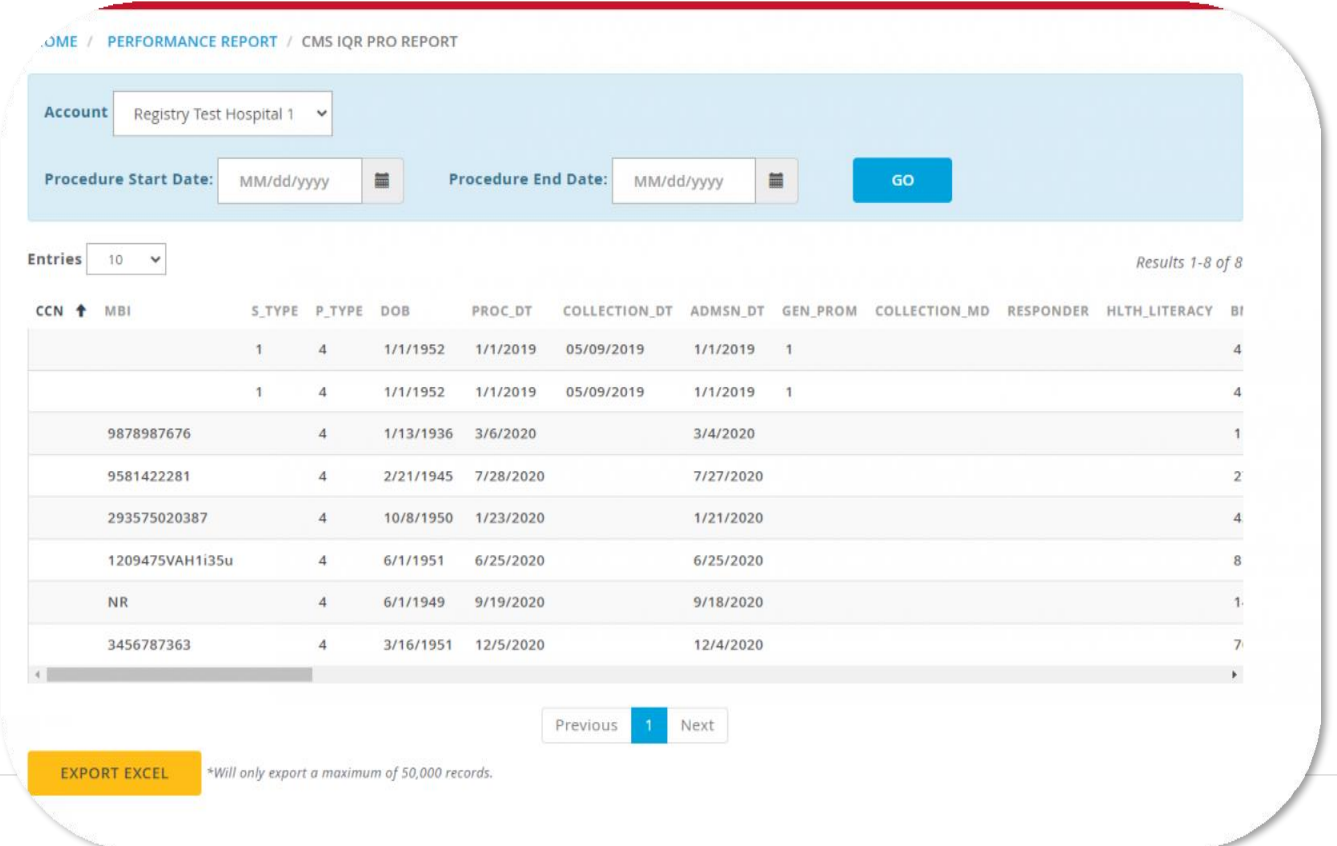
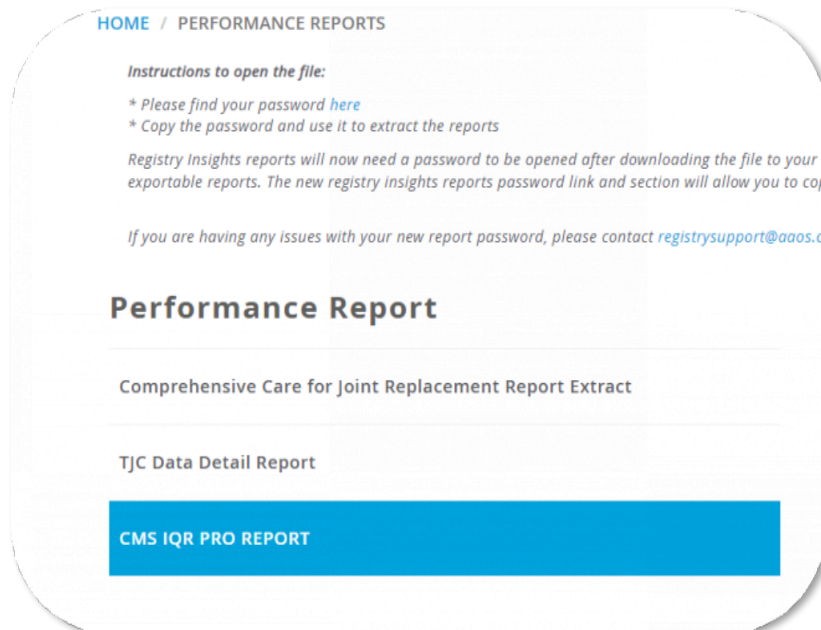
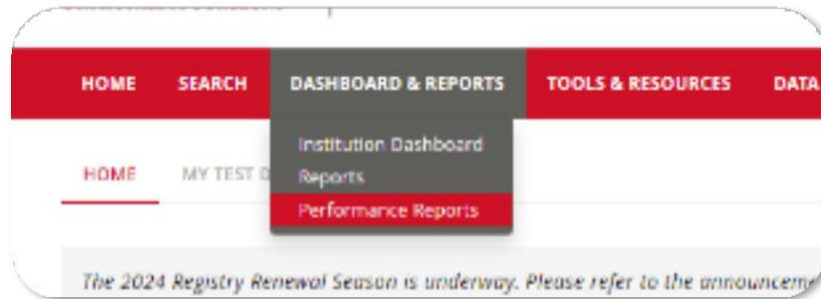
Add patient survey

<input type="checkbox"/>	MBI	Procedure Type	Procedure Date	Missing Responses	Updated	
<input type="checkbox"/>	100000	1 - Left Hip Replacement	02/28/2022	Yes	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100000	2 - Right Hip Replacement	02/28/2022	No	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100002	3 - Left Knee Replacement	02/28/2022	Yes	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100004	4 - Right Knee Replacement	02/28/2022	No	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100000	1 - Left Hip Replacement	02/28/2022	Yes	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100000	2 - Right Hip Replacement	02/28/2022	No	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100002	3 - Left Knee Replacement	02/28/2022	Yes	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100004	4 - Right Knee Replacement	02/28/2022	No	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100000	1 - Left Hip Replacement	02/28/2022	Yes	09/01/22 12:00 AM	⋮
<input type="checkbox"/>	100000	2 - Right Hip Replacement	02/28/2022	No	09/01/22 12:00 AM	⋮

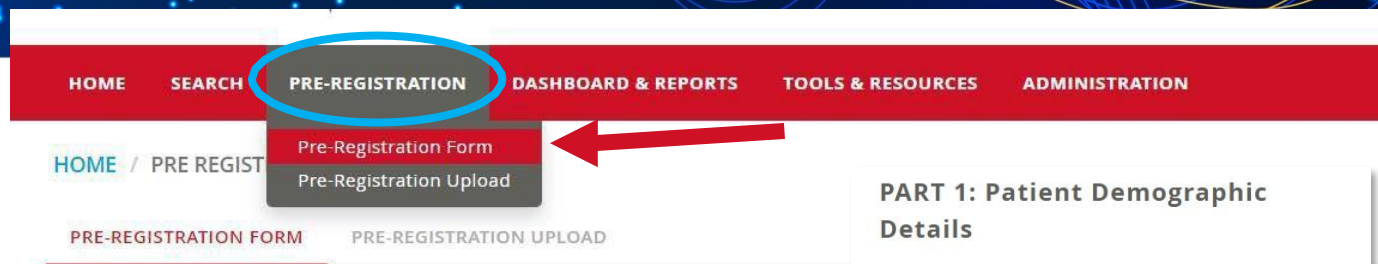
< Previous 1 2 Next >

# CMS IQR PRO-PM | AJRRR REPORT

The IQR PROMs Performance Report allows sites to track their PROMs completion and scores for the 65+ primary total hip and knee cases and uses the CMS-required format for submission



# REGISTRATION FILE PROMS



- Patients can be registered individually or via a bulk pre-registration file upload
- Once registered, PROMs can be collected two ways into the platform:

- Patient accesses PROM assessments via the RegistryInsights kiosk mode
- Manual entry

## PART 1: Patient Demographic Details

Please complete all applicable required and optional fields of the patient demographic section. Required fields on the form are noted with an asterisk (\*) beside the field name. Conditionally required fields are indicated by a cross notation (‡). Note: Primary phone is conditionally required; however, if you are intending to conduct interviews to collect assessment responses via phone, you must provide patient phone number.

If the Patient Social Security Number (SSN) is not available, please select the 'Not Available' option next to the Social Security field. Please note that the Registry only accepts the full, 9-digit SSN. Patient SSN assists the Registry with achieving its mission through the ability to track longitudinal device information.

Social Security\*

☐ Not Available

Medicare Benefit ID (Optional)

Email\*

First Name\*

Middle Name (Optional)

## PART 2: Pre-operative Case Information

Please complete all applicable required and optional fields of the pre-operative case section. Any required field is indicated on the form by an asterisk (\*) beside the field name and any conditionally required field is indicated by a cross notation (‡). Case information is required for all cases to be added to the Registry. Please note that all pre-operative case data requested pertains to **future** procedures.

Institution\*

Select One

Planned Proc Date\*

Procedure site\*

Select One

Laterality\*

Select One

Surgeon\*

Select One

Payer Status (Optional)

Select One

Chronic Narcotic Use Within 90 Days (Optional)

Select One

SUBMIT





Patient Gautam Jaiswal      Laterality Left  
Assessment KOOS JR      Version 1  
Procedure Site Knee      Surgeon  
Interval 1 Year

## General

How was this captured?

– SELECT –

When was this captured?

## Stiffness

The following question concerns the amount of joint stiffness you have experienced during the **last week** in your knee. Stiffness is a sensation of restriction or slowness in the ease with which you move your knee joint.

1. How severe is your knee stiffness after first wakening in the morning?

NONE

MILD

MODERATE

SEVERE

EXTREME

What amount of knee pain have you experienced the **last week** during the following activities?

2. Twisting/pivoting on your knee

NONE

MILD

MODERATE

SEVERE

EXTREME

3. Straightening knee fully

NONE

MILD

MODERATE

SEVERE

EXTREME

4. Going up or down stairs

NONE

MILD

MODERATE

SEVERE

EXTREME

5. Standing upright

NONE

MILD

MODERATE

SEVERE

EXTREME

## Function, daily living

The following questions concern your physical function. By this we mean your ability to move aro activities please indicate the degree of difficulty you have experienced in the **last week** due to yo

6. Rising from sitting

NONE

MILD

MODERATE

SEVERE

EXTREME

7. Bending to floor/pick up an object

NONE

MILD

MODERATE

SEVERE

EXTREME

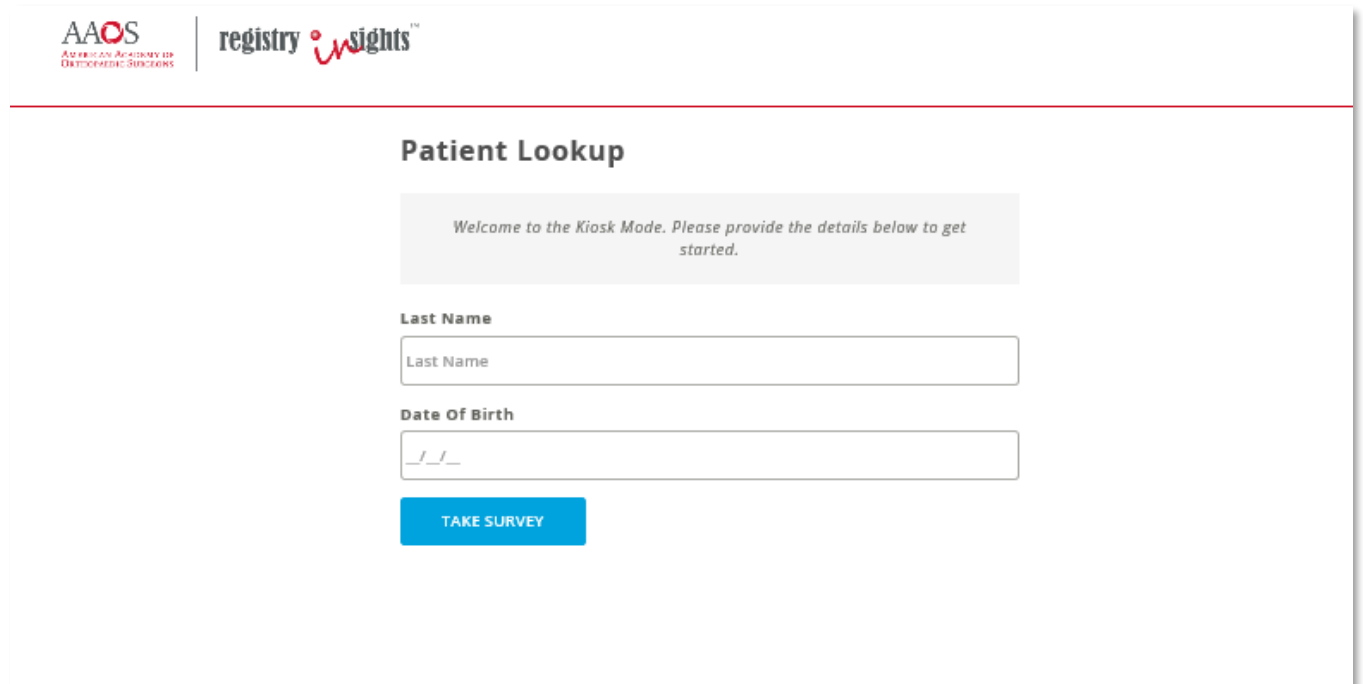
# ACCESS TO PRO INSTRUMENTS | EMAILS & KIOSK MODE

Institutions can setup **automatic generation** of a link to be emailed by the Registry Platform to patients for PROM collection

This link takes them directly to the survey for completion and automatic **upload to the registry**

OR

The **Kiosk Mode** can be pulled up during a clinic or joints class pre-op visit for completion on computer or tablet



The screenshot shows the 'Patient Lookup' interface for the AAOS Registry Insights. At the top, the AAOS logo and 'registry insights' are displayed. Below the title, a grey box contains the text: 'Welcome to the Kiosk Mode. Please provide the details below to get started.' There are two input fields: 'Last Name' with a placeholder 'Last Name' and 'Date Of Birth' with a placeholder '\_\_\_/\_\_\_/\_\_\_'. A blue 'TAKE SURVEY' button is located at the bottom.

# DASHBOARD & REPORTS

[HOME](#)[SEARCH](#)[PRE-REGISTRATION](#)[DASHBOARD & REPORTS](#)[TOOLS & RESOURCES](#)[DATA MANAGEMENT](#)[ADMINISTRATION](#)[HOME](#) / [REPORTS](#)

## Procedure Reports

[Count of Components by Type](#)[Count of Procedures by ICD-10 Procedure Codes](#)[Count of Procedures by CPT Procedure Codes](#)[Procedures With Component Information \(ICD-10\)](#)[Procedures Submitted to Shoulder Arthroplasty \(ICD-10\)](#)[Procedures Submitted to Rotator Cuff \(ICD-10\)](#)[Count of Procedures By Surgeon](#)

## Patient Reported Outcomes Reports

[Assessment Summary](#)[Patient Status Report](#)[All Patients Due For Survey Report](#)[Patient Compliance Report](#)[Assessment Overview](#)