



TOPS FAQ Document

The ASPS-TOPS registry is a membership benefit and is only available to active ASPS member surgeons who practice in the United States.

1) What should be entered into the TOPS system?

All of your procedures should be entered into TOPS. Procedures include, but are not limited to activities requiring any type of anesthesia (general, conscious sedation, epidural, spinal, MAC, block, local, tumescent or topical). Procedures also include botox and collagen injections, treatment of spider veins, nevus excision, tattoo removal, and skin care such as chemical peels and laser treatments.

2) I would like a reference guide for all the forms. Where can I access one?

The **Data Point Definitions** located on the TOPS Home page is a web document that provides the coding instructions for each form and form field.



Blank Case Report Forms (CRF) for TOPS can be printed or downloaded by clicking **News & Announcements** from the TOPS Home page.

3) What do I use for the Medical Record number?

You may use what ever number or combination of numbers and letters you need in order to trace back to patients. As true medical record numbers assigned to patient record vary between types of surgical facilities, it is suggested you may want to create your own 'unique patient identifier' to be used for the Medical Record number. This field in TOPS will accept alpha and numeric characters, or a combination of the two.

4) Are all the fields on the worksheet required fields?

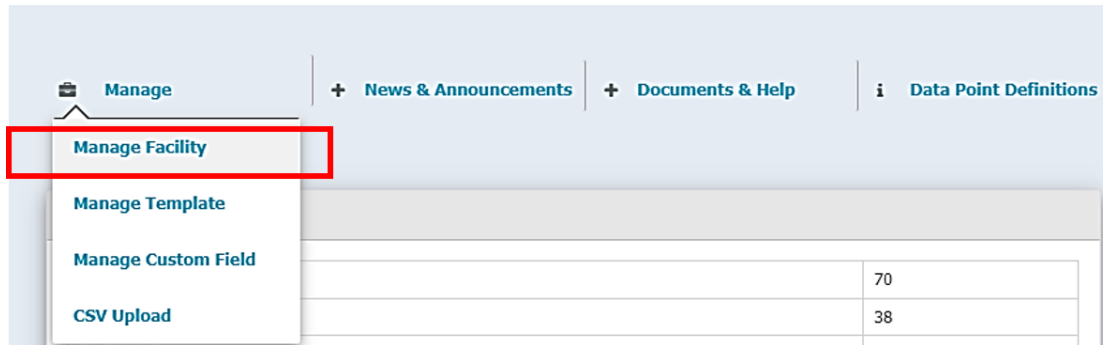
No. The fields that are preceded by an asterisk are the required fields, as well as a combination of other fields conditionally required dependent on answers to other questions. While not all fields are required, in order to ensure a rich data base for benchmarking reports, it is strongly encouraged that you complete all fields.

5) What does it mean when a field is disabled and grayed out?

When a field is grayed out it means that the question does not apply and you may skip over it. A grayed out field will not accept any information. This is a system form control that is designed to help prevent errors.

6) How do I add a new facility to my Facility dropdown list on the Procedures form?

If you need to add a Facility that does not appear on the drop-down menu then you may add one by clicking on the “Manage” link on the TOPS Home page:



Click on the “Manage Facility” link and enter the facility information that you would like to appear within the drop-down menu within the form. After clicking on the Save button your facility information will be saved.

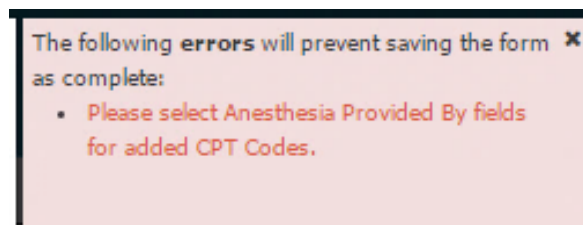
8) How do I enter a bilateral procedure?

Bilateral procedures are recorded by checking the box labeled “bilateral procedure”. When this box is checked, the system will automatically deactivate the # of times data field. This was implemented to ensure consistent coding for bilateral procedures.

9) I don't have all of the data for all of the questions I am being asked.

You are welcome to save the form as incomplete and return to the form at a later date to complete or correct the data.

- If the system asks you to correct any errors, go into the errors and warnings box and look at any bright red text. Bright red text denotes an error that will prevent you from saving the form as completed unless corrected:



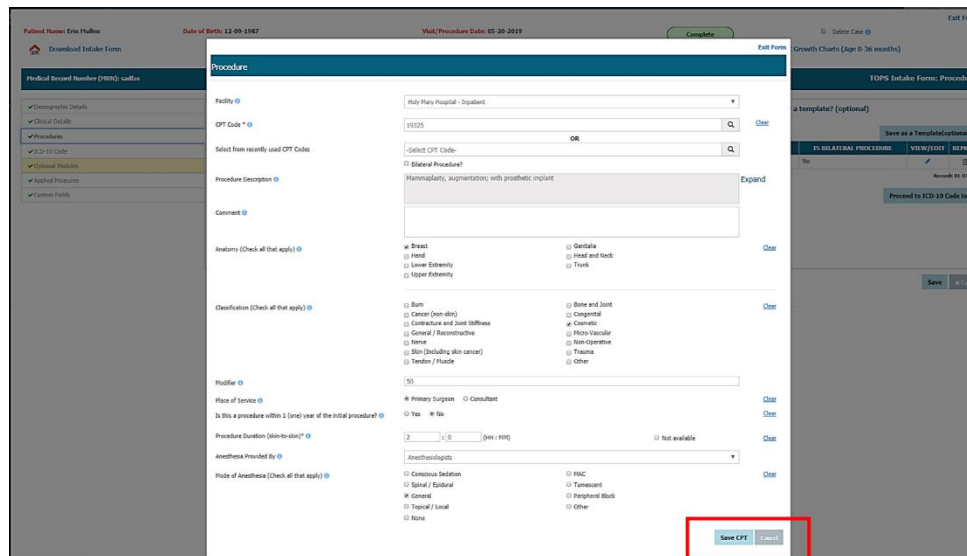
- The Errors and Warnings appear for all mandatory data fields on the form.

12) a) I've entered a CPT code and saved it and the Procedure Duration, Anesthesia Provided By, Mode of Anesthesia fields remain pre-populated with the information I just entered for the first CPT code. Do I have to fill in more information for the pre-populated fields?

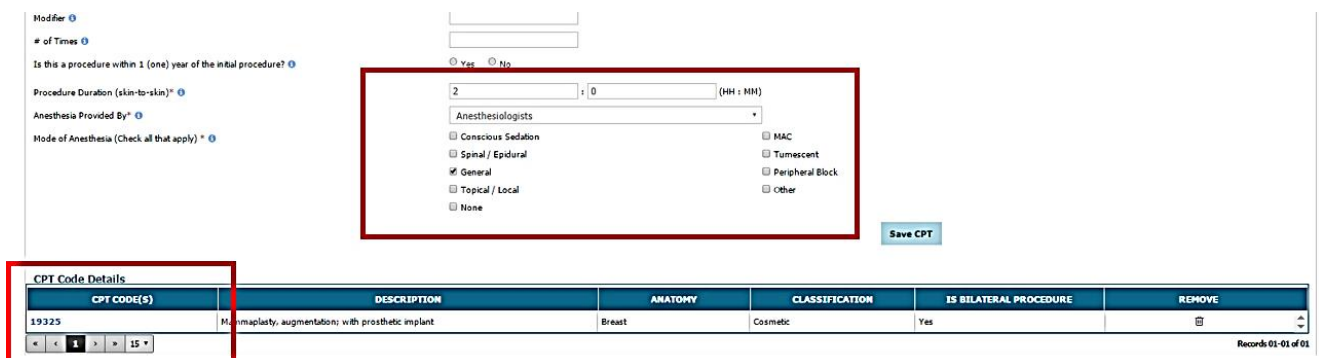
This is called a Repeat Group. This feature allows you to fill out multiple codes for the same procedure, one at a time. If you do not have more than one CPT-code, you do not have to continue to fill in additional data fields or delete the repeating information.

b) How do I enter multiple CPT codes?

- To enter multiple codes for a case, in the Procedures tab, select your first CPT code from the CPT search engine and complete the rest of the required data fields for the code. After you finish entering your fields for the CPT-code, click the **Save CPT** button:



- After you click the **Save CPT** button, your first CPT code will appear in the CPT Code Details tab at the bottom of the screen and the Procedure Duration, Anesthesia Provided By, Mode of Anesthesia data fields will remain pre-populated with the information you just entered for the first CPT code.



- Now go back to the CPT search engine and select your next CPT code. Complete the data fields that were not pre-populated (if you need to edit the pre-populated fields you can). After you finish entering the fields for the second CPT-code, click the **Save CPT** button again:

Diagnosis

Provider*

Facility

CPT Code *

Procedure Description

Comment

Anatomy (Check all that apply) * Breast Hand Lower Extremity Upper Extremity Genitalia Head and Neck Trunk

Classification (Check all that apply) * Burn Cancer (non-skin) Contracture and Joint Stiffness General / Reconstructive Nerve Skin (Including skin cancer) Tendon / Muscle Bone and Joint Congenital Cosmetic Micro-Vascular Non-Operative Trauma Other

Modifier

of Times

Is this a procedure within 1 (one) year of the initial procedure? Yes No

Procedure Duration (skin-to-skin)* : (HH : MM)

Anesthesia Provided By*

Mode of Anesthesia (Check all that apply) * Conscious Sedation Spinal / Epidural General Topical / Local None MAC Tumescant Peripheral Block Other

CPT CODE(S)	DESCRIPTION	ANATOMY	CLASSIFICATION	IS BILATERAL PROCEDURE	REMOVE
19325	Mammoplasty, augmentations with prosthetic implant	Breast	Cosmetic	Yes	<input type="button" value="X"/>

- Both CPT codes you saved should now appear at the bottom of the screen in the CPT Code Details. Repeat these steps as needed and then click on the Proceed to ICD-10 Code tab button. You do not need to delete the information that was prepopulated in the Procedure Duration, Anesthesia Provided By, Mode of Anesthesia fields prior to proceeding to the ICD-10 Code tab:

CPT Code Details

CPT CODE(S)	DESCRIPTION	ANATOMY	CLASSIFICATION	IS BILATERAL PROCEDURE	REMOVE
19316	Mastopexy	Breast	Cosmetic	No	<input type="button" value="X"/>
19325	Mammoplasty, augmentations with prosthetic implant	Breast	Cosmetic	Yes	<input type="button" value="X"/>

- Once you proceed to the **ICD-10 Code tab**, repeat the same steps if you need to save multiple ICD-10 codes. Entering an actual ICD-10 code is not mandatory in TOPS, but you are required to enter and save at least one Diagnosis Description in order to save your case as completed:

- After you submit your case, you will return to the 'My Cases' page. Search for the case you just submitted. Under the Visit/Procedure Date column, the case will be tagged as having 'Multiple Codes' and if you drag your cursor over the blue eye-drop icon next to the procedure date, you will be able to review the multiple CPT codes that were submitted for the case:

MEDICAL RECORD NUMBER (MRN)	NAME	BIRTH DATE	VISIT/PROCEDURE DATE	PROCEDURE FORM STATUS	OUTCOMES POST OP	OUTCOMES FORM STATUS	ACTION
911911	Test MultipleCPTcodes	2/11/1971	1/25/2017 - Multiple Codes	Complete	N/A	Enter Outcome Form	Add Follow Up Add New Case
50050	radio button	2/2/2000	CPT Code(s): 19325, 19316	Not	N/A	Enter Outcome Form	Add Follow Up Add New Case
332211	betty white	2/2/1922	1/10/2017 - Multiple Codes	Incomplete	N/A	Enter Outcome Form	Add Follow Up Add New Case

13) How are Patient Safety Credits rewarded?

TOPS participants who submit their case information into the TOPS program may be awarded 1 Patient safety (PS) credits per month, for a maximum of 7 PS credits during one calendar year. The following criteria must be met to be awarded PS credits:

PS Credit Eligibility

- To be eligible to earn 1 PS Credit:
 - A minimum of 8 completed cases must be entered during a one month period. A completed case includes both the Procedures and Outcomes forms.

Converting *Eligible PS credits* into *Awarded PS credits*:

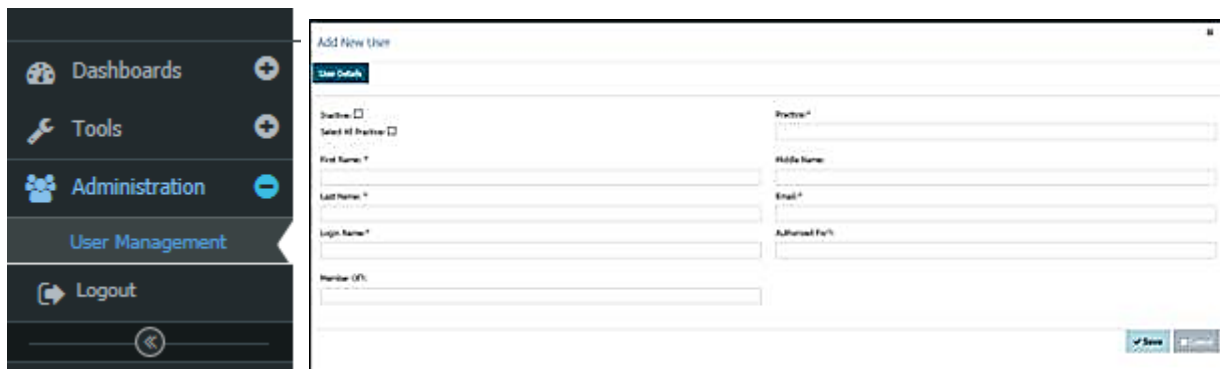
- PS credits are awarded after the TOPS participant completes the following steps:
 1. Selects and runs either an Outcomes or Risk Factors report.
 2. Reviews the selected report and click on the button labeled “I have reviewed this Report” below the report that indicates he/she has reviewed the report.

Both steps are required to convert eligible PS credits into earned PS Credits.

- On a monthly basis, a report indicating the amount of PS Credits earned will be sent from TOPS to the individual participant’s ASPS PS Credit record.

15) How do I update my user information?

- You can manage your user information and add new users for TOPS from the [PSRN Dashboard](#) by clicking on “Administration” > “User Management” in the side bar located on the left hand side of the page within the dashboard:



- If logging in as a practice admin (physician) user, from “Administration” > “User Management” the practice admin can edit designated users added, in addition to resetting the passwords for designated users if required:



For any additional questions you have about TOPS, please contact Christopher Simmons, Manager, Registry & Data Analytics, at csimmons@plasticsurgery.org