STS Congenital Heart Surgery Database Data Specifications

Itemized list of changes between version 3.0 and version 3.22

This document current as of: Friday, May 24, 2013

30 **On-Demand Files Version Number**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	Automatic
DBTableName	<Blank>	Operations
Definition	<Blank>	The version number of the On-Demand lists in use at the time this data record was created or edited. The value is inserted into the record at the time the record is created or is modified by the user. The version numbers will be specified by the STS.
Harvest	<Blank>	Yes
LongName	<Blank>	On-Demand Files Version Number
ShortName	<Blank>	OnDemandVrsn
VendorDataType	<Blank>	Text

100 **Demographics Table Data Version**

Detail changed:	Changed from:	Changed to:
Definition	Version number of the STS Data Specifications/Dictionary, to which this Demographics record conforms as assigned by the software. It will identify which fields should have data, and what are the valid data for each field. This must be entered into the record automatically by the software at the time the record is created.	Version number of the STS Data Specifications/Dictionary, to which this Demographics record conforms as assigned by the software. This value will determine which fields should have data and what are the valid data for each field. This must be entered into the record automatically by the software at the time the record is created. See Software Specifications document for description of how this value can be modified after the record was created.

110 **Patient National Identification (Social Security Number)**

Detail changed:	Changed from:	Changed to:
DataLength	11	<Blank>
Definition	Indicate the nine-digit Patient's Social Security Number (SSN). Although this is the Social Security Number in the USA, other countries may have a different National Patient Identifier Number. For example in Canada, this would be the Social Insurance Number. This field should be collected in compliance with state/local privacy laws.	Indicate the patient's Social Security Number (SSN). Although this is the Social Security Number in the USA, other countries may have a different National Patient Identifier Number. For example in Canada, this would be the Social Insurance Number. This field should be collected in compliance with state/local privacy laws.

120 **Medical Record Number**

Detail changed:	Changed from:	Changed to:

DataLength	11	25

130 **Health Insurance Claim Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Optional	No

160 **Patient Middle Initial**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Optional	No

170 **Patient Middle Name**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataLength	<Blank>	50
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate the patient's middle name or middle initial as documented in the medical record. Leave "blank" if no middle name. This field should be collected in compliance with state/local privacy laws.
Harvest	<Blank>	Optional
LongName	<Blank>	Patient Middle Name
ShortName	<Blank>	PatMName
VendorDataType	<Blank>	Text

180 **Patient's Region**

Detail changed:	Changed from:	Changed to:
DataLength	2	50

190 **Patient's Postal Code**

Detail changed:	Changed from:	Changed to:
DataLength	10	20

Definition	Indicate the ZIP Code of the patient's residence. Outside the USA, this data may be known by other names such as Postal Code (needing 6 characters). Software should allow sites to collect at least up to 10 characters to allow for Zip+4 values. This field should be collected in compliance with state/local privacy laws.	Indicate the ZIP Code of the patient's residence. Outside the USA, this data may be known by other names such as Postal Code. This field should be collected in compliance with state/local privacy laws.

200 **Patient's Country**

Detail changed:	Changed from:	Changed to:
HarvestCode=ALA - Description	ÅLAND ISLAND	ÅLAND ISLANDS
HarvestCode=ANT	NETHERLANDS ANTILLES	<choice was deleted>
HarvestCode=ATA	ANTARCTICA	<choice was deleted>
HarvestCode=ATF	FRENCH SOUTHERN TERRITORIES	<choice was deleted>
HarvestCode=BES	<blank>	<New choice added> BONAIRE, SAINT EUSTATIUS AND SABA
HarvestCode=BLM - Description	SAINT-BARTHÉLEM	SAINT-BARTHÉLEMY
HarvestCode=BVT	BOUVET ISLAND	<choice was deleted>
HarvestCode=CCK	COCOS (KEELING) ISLANDS	<choice was deleted>
HarvestCode=CUW	<blank>	<New choice added> CURAÇAO
HarvestCode=CXR	CHRISTMAS ISLAND	<choice was deleted>
HarvestCode=FXX	FRANCE, METROPOLITAN	<choice was deleted>
HarvestCode=GGY - Description	GUERNSE	GUERNSEY
HarvestCode=HKG - Description	HONG KONG SPECIAL ADMINISTRATIVE REGION OF CHINA	CHINA, HONG KONG SPECIAL ADMINISTRATIVE REGION
HarvestCode=HMD	HEARD AND MC DONALD ISLANDS	<choice was deleted>
HarvestCode=IOT	BRITISH INDIAN OCEAN TERRITORY	<choice was deleted>
HarvestCode=LBY - Description	LIBYAN ARAB JAMAHIRIYA	LIBYA
HarvestCode=MAC - Description	MACAO SPECIAL ADMINISTRATIVE REGION OF CHINA	CHINA, MACAO SPECIAL ADMINISTRATIVE REGION
HarvestCode=OTH	<blank>	<New choice added> Other
HarvestCode=SGS	SOUTH GEORGIA AND THE SOUTH SANDWICH ISLANDS	<choice was deleted>
HarvestCode=SSD	<blank>	<New choice added> SOUTH SUDAN
HarvestCode=SXM	<blank>	<New choice added> SINT MAARTEN (DUTCH PART)

HarvestCode=TLS - Description	TIMOR-LEST	TIMOR-LESTE
HarvestCode=TMP	EAST TIMOR	<choice was deleted>
HarvestCode=TWN	TAIWAN, PROVINCE OF CHINA	<choice was deleted>
HarvestCode=UMI	UNITED STATES MINOR OUTLYING ISLANDS	<choice was deleted>
HarvestCode=YUG	YUGOSLAVIA	<choice was deleted>
HarvestCode=ZAR	ZAIRE	<choice was deleted>

220 **Birth Region**

Detail changed:	Changed from:	Changed to:
DataLength	2	50
Definition	Indicate the 2-digit abbreviation of the state or province in which the patient was born.	Indicate the region of the country (i.e., state or province) in which the patient was born.

230 **Country of Birth**

Detail changed:	Changed from:	Changed to:
HarvestCode=ALA - Description	ÅLAND ISLAND	ÅLAND ISLANDS
HarvestCode=ANT	NETHERLANDS ANTILLES	<choice was deleted>
HarvestCode=ATA	ANTARCTICA	<choice was deleted>
HarvestCode=ATF	FRENCH SOUTHERN TERRITORIES	<choice was deleted>
HarvestCode=BES	<blank>	<New choice added> BONAIRE, SAINT EUSTATIUS AND SABA
HarvestCode=BLM - Description	SAINT-BARTHÉLEM	SAINT-BARTHÉLEMY
HarvestCode=BVT	BOUVET ISLAND	<choice was deleted>
HarvestCode=CCK	COCOS (KEELING) ISLANDS	<choice was deleted>
HarvestCode=CUW	<blank>	<New choice added> CURAÇAO
HarvestCode=CXR	CHRISTMAS ISLAND	<choice was deleted>
HarvestCode=FXX	FRANCE, METROPOLITAN	<choice was deleted>
HarvestCode=GGY - Description	GUERNSE	GUERNSEY
HarvestCode=HKG - Description	HONG KONG SPECIAL ADMINISTRATIVE REGION OF CHINA	CHINA, HONG KONG SPECIAL ADMINISTRATIVE REGION
HarvestCode=HMD	HEARD AND MC DONALD ISLANDS	<choice was deleted>
HarvestCode=IOT	BRITISH INDIAN OCEAN TERRITORY	<choice was deleted>

HarvestCode=LBY - Description	LIBYAN ARAB JAMAHIRIYA	LIBYA
HarvestCode=MAC - Description	MACAO SPECIAL ADMINISTRATIVE REGION OF CHINA	CHINA, MACAO SPECIAL ADMINISTRATIVE REGION
HarvestCode=OTH	<blank>	<New choice added> Other
HarvestCode=SGS	SOUTH GEORGIA AND THE SOUTH SANDWICH ISLANDS	<choice was deleted>
HarvestCode=SSD	<blank>	<New choice added> SOUTH SUDAN
HarvestCode=SXM	<blank>	<New choice added> SINT MAARTEN (DUTCH PART)
HarvestCode=TLS - Description	TIMOR-LEST	TIMOR-LESTE
HarvestCode=TMP	EAST TIMOR	<choice was deleted>
HarvestCode=TWN	TAIWAN, PROVINCE OF CHINA	<choice was deleted>
HarvestCode=UMI	UNITED STATES MINOR OUTLYING ISLANDS	<choice was deleted>
HarvestCode=YUG	YUGOSLAVIA	<choice was deleted>
HarvestCode=ZAR	ZAIRE	<choice was deleted>

240 **Mother's Name Known**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate whether the name of patient's biological mother at time of patient's birth is known. If the patient is adopted and the name of the patient's biological mother is not known, indicate whether the name of the patient's adopted mother is known.
Harvest	<Blank>	Yes
LongName	<Blank>	Mother's Name Known
ShortName	<Blank>	MatNameKnown
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

250 **Mother's Last Name**

Detail changed:	Changed from:	Changed to:

Definition	Indicate the last name of patient's biological mother at time of patient's birth, if it is known. If the patient is adopted, if the last name of the patient's biological mother is known, please enter the last initial of the patient's biological mother. If the patient is adopted, if the last name of the patient's biological mother is not known, please enter the last name of the patient's adopted mother.	Indicate the last name of patient's biological mother at time of patient's birth, if it is known. If the patient is adopted, if the last name of the patient's biological mother is known, please enter the last initial of the patient's biological mother. If the patient is adopted, if the last name of the patient's biological mother is not known, please enter the last name of the patient's adopted mother. This field should be collected in compliance with state/local privacy laws.
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	MatNameKnown
ParentValue	<Blank>	= "Yes"

260 **Mother's First Name**

Detail changed:	Changed from:	Changed to:
Definition	Indicate the first name of patient's biological mother at time of patient's birth, if it is known. If the patient is adopted, if the first name of the patient's biological mother is known, please enter the first name of the patient's biological mother. If the patient is adopted, if the first name of the patient's biological mother is not known, please enter the first name of the patient's adopted mother.	Indicate the first name of patient's biological mother at time of patient's birth, if it is known. If the patient is adopted, if the first name of the patient's biological mother is known, please enter the first name of the patient's biological mother. If the patient is adopted, if the first name of the patient's biological mother is not known, please enter the first name of the patient's adopted mother. This field should be collected in compliance with state/local privacy laws.
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	MatNameKnown
ParentValue	<Blank>	= "Yes"

270 **Mother's Middle Initial**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Optional	No

280 **Mother's Middle Name**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics

Definition	<Blank>	Indicate the middle name of patient's biological mother at time of patient's birth, if it is known. If the patient is adopted, if the middle name of the patient’s biological mother is known, please enter the middle name of the patient’s biological mother. If the patient is adopted, if the middle name of the patient’s biological mother is not known, please enter the middle name of the patient’s adopted mother. This field should be collected in compliance with state/local privacy laws.
Harvest	<Blank>	Optional
LongName	<Blank>	Mother's Middle Name
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	MatNameKnown
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	MatMName
VendorDataType	<Blank>	Text

290 **Mother’s National Identification (Social Security Number) Known**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate whether the Social Security Number (SSN) of patient's biological mother at time of patient's birth is known. If the patient is adopted and the SSN of the patient’s biological mother is not known, please indicate whether the SSN of the patient’s adopted mother is known. This field should be collected in compliance with state/local privacy laws.
Harvest	<Blank>	Yes
LongName	<Blank>	Mother’s National Identification (Social Security Number) Known
ShortName	<Blank>	MatSSNKnown
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

HarvestCode=3	<blank>	<New choice added> Refused

300 **Mother's National Identification (Social Security Number)**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	MatSSNKnown
ParentValue	<Blank>	= "Yes"

320 **Birth Weight Known**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate whether the patient's birth weight is known.
Harvest	<Blank>	Yes
LongName	<Blank>	Birth Weight Known
ShortName	<Blank>	BirthWtKnown
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

330 **Birth Weight**

Detail changed:	Changed from:	Changed to:
HighValue	10.00	10.000
LowValue	0.10	0.100
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	BirthWtKnown
ParentValue	<Blank>	= "Yes"
VendorDataType	Real	Real, at least 3 decimal places

350 **Premature Birth**

Detail changed:	Changed from:	Changed to:
HarvestCode=3	<blank>	<New choice added> Unknown

360 **Gestational Age At Birth Known**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate whether the patient's gestational age at birth is known.
Harvest	<Blank>	Yes
LongName	<Blank>	Gestational Age At Birth Known
ShortName	<Blank>	GestAgeKnown
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

370 **Gestational Age At Birth In Weeks**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	GestAgeKnown
ParentValue	<Blank>	= "Yes"

380 **Multiple Gestation**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate whether the patient was part of a multiple gestation, such as twins or triplets.
Harvest	<Blank>	Yes
LongName	<Blank>	Multiple Gestation
ShortName	<Blank>	MultGest
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

HarvestCode=3	<blank>	<New choice added> Unknown

381 **Antenatal Diagnosis of Congenital Heart Disease**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Demographics
Definition	<Blank>	Indicate whether a cardiac anomaly was diagnosed antenatally (e.g., fetal ultrasound).
Harvest	<Blank>	Yes
LongName	<Blank>	Antenatal Diagnosis of Congenital Heart Disease
ShortName	<Blank>	AntenatalDiag
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No
HarvestCode=3	<blank>	<New choice added> Unknown

382 **Fundamental Diagnosis**

Detail changed:	Changed from:	Changed to:
HarvestCode=10 - Definition	Small interatrial communication in the region of the foramen ovale characterized by no deficiency of the septum primum and a normal limbus with no deficiency of the septum secundum.	<blank>
HarvestCode=20 - Definition	An ASD confined to the region of the fossa ovalis; its most common etiology is a deficiency of the septum primum, but deficieny of the limbus or septum secundum may also contribute.	<blank>
HarvestCode=30 - Definition	Indicate if the patient has the diagnosis of “ASD, Sinus venosus”. An “ASD, Sinus venosus” is defined as a defect with a vena cava or pulmonary vein (or veins) that overrides the atrial septum or the superior interatrial fold (septum secundum) producing an interatrial or anomalous venoatrial communication. Although the term sinus venosus atrial septal defect is commonly used, the lesion is more properly termed a sinus venosus communication because, while it functions as an interatrial communication, this lesion is not a defect of the true atrial septum.	<blank>
HarvestCode=40 - Definition	Deficiency of the wall (sinus septum) separating the left atrium from the coronary sinus, often allowing blood to shunt from the left atrium to the right atrium via the coronary sinus ostium. May or may not be associated with a persistent left superior vena cava.	<blank>

HarvestCode=50 - Definition	Complete absence of the interatrial septum. "Single atrium" is applied to defects with no associated malformation of the atrioventricular valves. "Common atrium" is applied to defects with associated malformation of the atrioventricular valves.	<blank>
HarvestCode=71 - Definition	A VSD that lies beneath the semilunar valve(s) in the conal or outlet septum.	<blank>
HarvestCode=73 - Definition	A VSD that is confluent with and involves the membranous septum and is bordered by an atrioventricular valve, not including type 3 VSDs.	<blank>
HarvestCode=75 - Definition	A VSD that involves the inlet of the right ventricular septum immediately inferior to the AV valve apparatus.	<blank>
HarvestCode=77 - Definition	A VSD completely surrounded by muscle.	<blank>
HarvestCode=79 - Definition	A rare form of VSD in which the defect is at the membranous septum; the communication is between the left ventricle and right atrium.	<blank>
HarvestCode=80 - Definition	More than one VSD exists. Each individual VSD may be coded separately to specify the individual VSD types.	<blank>
HarvestCode=92 - Definition	A ventricular septal defect, any type, associated with hypoplasia of the aortic arch. (See diagnosis definition 1000 for a definition of hypoplasia of the aortic arch.)	<blank>
HarvestCode=94 - Definition	Indicate if the patient has the diagnosis of “VSD + Coarctation of aorta”. In the event of a VSD occurring in association with Coarctation of aorta, code “VSD + Coarctation of aorta”, and then use additional (secondary) diagnostic codes to describe the VSD and the Coarctation of aorta separately to provide further documentation about the individual VSD and Coarctation of aorta types. {A "VSD" is a "Ventricular Septal Defect" and is also known as an "Interventricular communication". A VSD is defined as "a hole between the ventricular chambers or their remnants". (The VSD is defined on the basis of its margins as seen from the aspect of the morphologically right ventricle. In the setting of double outlet right ventricle, the defect provides the outflow from the morphologically left ventricle. In univentricular atrioventricular connections with functionally single left ventricle with an outflow chamber, the communication is referred to by some as a bulboventricular foramen.)} {A “Coarctation of the aorta” generally indicates a narrowing of the descending thoracic aorta just distal to the left subclavian artery. However, the term may also be accurately used to refer to a region of narrowing anywhere in the thoracic or abdominal aorta.}	<blank>

HarvestCode=100 - Definition	Indicate if the patient has the diagnosis of “AVC (AVSD), Complete (CAVSD)”. An “AVC (AVSD), Complete (CAVSD)” is a “complete atrioventricular canal” or a “complete atrioventricular septal defect” and occurs in a heart with the phenotypic feature of a common atrioventricular junction. An “AVC (AVSD), Complete (CAVSD)” is defined as an AVC with a common AV valve and both a defect in the atrial septum just above the AV valve (ostium primum ASD [a usually crescent-shaped ASD in the inferior (posterior) portion of the atrial septum just above the AV valve]) and a defect in the ventricular septum just below the AV valve. The AV valve is one valve that bridges both the right and left sides of the heart. Balanced AVC is an AVC with two essentially appropriately sized ventricles. Unbalanced AVC is an AVC defect with two ventricles in which one ventricle is inappropriately small. Such a patient may be thought to be a candidate for biventricular repair, or, alternatively, may be managed as having a functionally univentricular heart. AVC lesions with unbalanced ventricles so severe as to preclude biventricular repair should be classified as single ventricles. Rastelli type A: The common superior (anterior) bridging leaflet is effectively split in two at the septum. The left superior (anterior) leaflet is entirely over the left ventricle and the right superior (anterior) leaflet is similarly entirely over the right ventricle. The division of the common superior (anterior) bridging leaflet into left and right components is caused by extensive attachment of the superior (anterior) bridging leaflet to the crest of the ventricular septum by chordae tendineae. Rastelli type B: Rare, involves anomalous papillary muscle attachment from the right side of the ventricular septum to the left side of the common superior (anterior) bridging leaflet. Rastelli type C: Marked bridging of the ventricular septum by the superior (anterior) bridging leaflet, which floats freely (often termed a "free-floater") over the ventricular septum without chordal attachment to the crest of the ventricular septum.	<blank>
HarvestCode=110 - Definition	An AVC with two distinct left and right AV valve orifices but also with both an ASD just above and a VSD just below the AV valves. While these AV valves in the intermediate form do form two separate orifices they remain abnormal valves. The VSD is often restrictive.	<blank>
HarvestCode=120 - Definition	An AVC with an ostium primum ASD (a usually crescent-shaped ASD in the inferior (posterior) portion of the atrial septum just above the AV valve) and varying degrees of malformation of the left AV valve leading to varying degrees of left AV valve regurgitation. No VSD is present.	<blank>

HarvestCode=140 - Definition	Indicate if the patient has the diagnosis of “AP window (aortopulmonary window)”. An “AP window (aortopulmonary window)” is defined as a defect with side-to-side continuity of the lumens of the aorta and pulmonary arterial tree, which is distinguished from common arterial trunk (truncus arteriosus) by the presence of two arterial valves or their atretic remnants. (In other words, an aortopulmonary window is a communication between the main pulmonary artery and ascending aorta in the presence of two separate semilunar [pulmonary and aortic] valves. The presence of two separate semilunar valves distinguishes AP window from truncus arteriosus. Type 1 proximal defect: AP window located just above the sinus of Valsalva, a few millimeters above the semilunar valves, with a superior rim but little inferior rim separating the AP window from the semilunar valves. Type 2 distal defect: AP window located in the uppermost portion of the ascending aorta, with a well-formed inferior rim but little superior rim. Type 3 total defect: AP window involving the majority of the ascending aorta, with little superior and inferior rims. The intermediate type of AP window is similar to the total defect but with adequate superior and inferior rims. In the event of AP window occurring in association with interrupted aortic arch, code “Interrupted aortic arch + AP window (aortopulmonary window)”, and then use additional (secondary) diagnostic codes to describe the interrupted aortic arch and AP window separately to provide further documentation about the individual interrupted arch and AP window types.)	<blank>
HarvestCode=150 - Definition	One pulmonary artery arises from the ascending aorta and the other pulmonary artery arises from the right ventricle. DOES NOT include origin of the right or left pulmonary artery from the innominate artery or the aortic arch via a patent ductus arteriosus or collateral artery.	<blank>
HarvestCode=160 - Definition	Indicate if the patient has the diagnosis of “Truncus arteriosus”. A truncus arteriosus is also known as a common arterial trunk and is defined as a heart in which a single arterial trunk arises from the heart, giving origin to the coronary arteries, the pulmonary arteries, and the systemic arterial circulation. In the majority of instances there is a ventricular septal defect and a single semilunar valve which may contain two, three, four, or more leaflets and is occasionally dysplastic. Often, the infundibular septum is virtually absent superiorly. In most instances the truncal valve overrides the true interventricular septum (and thus both ventricles), but very rarely the truncal valve may override the right ventricle entirely. In such instances, there may be no ventricular septal defect or a very small ventricular septal defect, in which case the left ventricle and mitral valve may be extremely hypoplastic."	<blank>
HarvestCode=170 - Definition	Functional abnormality - insufficiency - of the truncal valve. May be further subdivided into grade of insufficiency (I, II, III, IV or mild, moderate, severe).	<blank>
HarvestCode=180 - Definition	Some, but not all of the pulmonary veins connect to the right atrium or to one or more of its venous tributaries. This definition excludes sinus venosus defects with normally connected but abnormally draining pulmonary veins (the pulmonary veins may drain abnormally into the right atrium via the atrial septal defect).	<blank>

HarvestCode=190 - Definition	The right pulmonary vein(s) connect anomalously to the inferior vena cava or to the right atrium at the insertion of the inferior vena cava. The descending vertical vein resembles a scimitar (Turkish sword) on frontal chest x-ray. Frequently associated with: hypoplasia of the right lung with bronchial anomalies; dextroposition and/or dextrorotation of the heart; hypoplasia of the right pulmonary artery; and anomalous subdiaphragmatic systemic arterial supply to the lower lobe of the right lung directly from the aorta or its main branches.	<blank>
HarvestCode=200 - Definition	All of the pulmonary veins connect anomalously with the right atrium or to one or more of its venous tributaries. None of the pulmonary veins connect normally to the left atrium. In Type 1 (supracardiac) TAPVC, the anomalous connection is at the supracardiac level and can be obstructed or nonobstructed.	<blank>
HarvestCode=210 - Definition	All of the pulmonary veins connect anomalously with the right atrium or to one or more of its venous tributaries. None of the pulmonary veins connect normally to the left atrium. In Type 2 (cardiac) TAPVC, the anomalous connection is to the heart, either to the right atrium directly or to the coronary sinus. Most patients with type 2 TAPVC are nonobstructed.	<blank>
HarvestCode=220 - Definition	All of the pulmonary veins connect anomalously with the right atrium or to one or more of its venous tributaries. None of the pulmonary veins connect normally to the left atrium. In Type 3 (infracardiac) TAPVC, the anomalous connection is at the infracardiac level (below the diaphragm), with the pulmonary venous return entering the right atrium ultimately via the inferior vena cava. In the vast majority of patients infracardiac TAPVC is obstructed.	<blank>
HarvestCode=230 - Definition	All of the pulmonary veins connect anomalously with the right atrium or to one or more of its venous tributaries. None of the pulmonary veins connect normally to the left atrium. In Type 4 (mixed) TAPVC, the anomalous connection is at two or more of the above levels (supracardiac, cardiac, infracardiac) and can be obstructed or nonobstructed.	<blank>
HarvestCode=250 - Definition	In the classic form of cor triatriatum a membrane divides the left atrium (LA) into a posterior accessory chamber that receives the pulmonary veins and an anterior chamber (LA) that communicates with the mitral valve. In differentiating cor triatriatum from supravalvar mitral ring, in cor triatriatum the posterior compartment contains the pulmonary veins while the anterior contains the left atrial appendage and the mitral valve orifice; in supravalvar mitral ring, the anterior compartment contains only the mitral valve orifice. Cor triatriatum dexter (prominent venous valve producing obstruction of the IVC and tricuspid valve) is to be coded as a systemic venous obstruction, not as a form of cor triatriatum.	<blank>

HarvestCode=260 - Definition	Any pathologic narrowing of one or more pulmonary veins. Can be further subdivided by etiology (congenital, acquired-postoperative, acquired-nonpostoperative) and extent of stenosis (diffusely hypoplastic, long segment focal/tubular stenosis, discrete stenosis).	<blank>
HarvestCode=270 - Definition	Anomalies of the systemic venous system (superior vena cava (SVC), inferior vena cava (IVC), brachiocephalic veins (often the innominate vein), azygos vein, coronary sinus, levo-atrial cardinal vein) arising from one or more anomalies of origin, duplication, course, or connection. Examples include abnormal or absent right SVC with LSVC, bilateral SVC, interrupted right or left IVC, azygos continuation of IVC, and anomalies of hepatic drainage. Bilateral SVC may have, among other configurations: 1) RSVC draining to the RA and the LSVC to the LA with completely unroofed coronary sinus, 2) RSVC draining to the RA and LSVC to the coronary sinus which drains (normally) into the RA, or 3) RSVC to the coronary sinus which drains (abnormally) into the LA and LSVC to LA. Anomalies of the inferior vena caval system include, among others: 1) left IVC to LA, 2) biatrial drainage, or 3) interrupted IVC (left or right) with azygos continuation to an LSVC or RSVC.	<blank>
HarvestCode=280 - Definition	Obstruction of the systemic venous system (superior vena cava (SVC), inferior vena cava (IVC), brachiocephalic veins (often the innominate vein), azygos vein, coronary sinus, levo-atrial cardinal vein) arising from congenital or acquired stenosis or occlusion. Cor triatriatum dexter (prominent venous valve producing obstruction of the IVC and tricuspid valve) is to be coded as a systemic venous obstruction, not as a form of cor triatriatum.	<blank>

HarvestCode=290 - Definition	Indicate if the patient has the diagnosis of “TOF”. Only use this diagnosis if it is NOT known if the patient has one of the following four more specific diagnoses: (1). “TOF, Pulmonary stenosis”, (2). “TOF, AVC (AVSD)”, (3). “TOF, Absent pulmonary valve”, (4). “Pulmonary atresia, VSD (Including TOF, PA)”, or (5). “Pulmonary atresia, VSD-MAPCA (pseudotruncus)”.{“TOF” is “Tetralogy of Fallot” and is defined as a group of malformations with biventricular atrioventricular alignments or connections characterized by anterosuperior deviation of the conal or outlet septum or its fibrous remnant, narrowing or atresia of the pulmonary outflow, a ventricular septal defect of the malalignment type, and biventricular origin of the aorta. Hearts with tetralogy of Fallot will always have a ventricular septal defect, narrowing or atresia of the pulmonary outflow, and aortic override; hearts with tetralogy of Fallot will most often have right ventricular hypertrophy.} (An additional, often muscular [Type 4] VSD may be seen with TOF and should be coded separately as a secondary diagnosis as “VSD, Type 4 (Muscular)”. Pulmonary arteries may be diminutive or there may be an absent left or right pulmonary artery; additional coding for pulmonary artery and/or branch pulmonary artery stenoses may be found under RVOT obstruction. Abnormal coronary artery distribution may also be associated with tetralogy of Fallot and may be coded separately under coronary artery anomalies. The presence of associated anomalies such as additional VSD, atrial septal defect, right aortic arch, left superior vena cava, and coronary artery anomalies must be subspecified as an additional or secondary diagnosis under the primary TOF diagnosis. TOF with absent pulmonary valve or TOF with associated complete atrioventricular canal are NOT to be secondary diagnoses under TOF - they are separate entities and should be coded as such. Controversy surrounds the differentiation between TOF and double outlet right ventricle [DORV]; in the nomenclature used here, DORV is defined as a type of ventriculoarterial connection in which both great vessels arise predominantly from the right ventricle. TOF with pulmonary atresia is to be coded under "Pulmonary atresia-VSD.")	<blank>
HarvestCode=300 - Definition	TOF with complete common atrioventricular canal defect is a rare variant of common atrioventricular canal defect with the associated conotruncal abnormality of TOF. The anatomy of the endocardial cushion defect is that of Rastelli type C in almost all cases.	<blank>

HarvestCode=310 - Definition	Indicate if the patient has the diagnosis of “TOF, Absent pulmonary valve”. “TOF, Absent pulmonary valve” is “Tetralogy of Fallot with Absent pulmonary valve” and is defined as a malformation with all of the morphologic characteristics of tetralogy of Fallot (anterosuperior deviation of the conal or outlet septum or its fibrous remnant, narrowing of the pulmonary outflow, a ventricular septal defect of the malalignment type, and biventricular origin of the aorta), in which the ventriculo-arterial junction of the right ventricle with the main pulmonary artery features an atypical valve with rudimentary cusps that lack the anatomical semi-lunar features of normal valve cusps and which functionally do not achieve central coaptation. The physiologic consequence is usually a combination of variable degrees of both stenosis and regurgitation of the pulmonary valve. A developmental accompaniment of this anatomy and physiology is dilatation of the main pulmonary artery and central right and left pulmonary arteries, which when extreme, is associated with abnormal arborization of lobar and segmental pulmonary artery branches and with compression of the trachea and mainstem bronchi. One theory holds that absence of the arterial duct or ductal ligament (which is a nearly constant finding in cases of tetralogy of Fallot with absent pulmonary valve) in combination with pulmonary `valve stenosis and regurgitation, comprise the physiologic conditions which predispose to central pulmonary artery dilatation during fetal development. (Tetralogy of Fallot with Absent Pulmonary Valve Syndrome is a term frequently used to describe the clinical presentation when it features both circulatory alterations and respiratory distress secondary to airway compression.)	<blank>
HarvestCode=320 - Definition	Pulmonary atresia defects which do not readily fall into pulmonary atresia-intact ventricular septum or pulmonary atresia-VSD (with or without MAPCAs) categories. These may include complex lesions in which pulmonary atresia is a secondary diagnosis, for example, complex single ventricle malformations with associated pulmonary atresia.	<blank>
HarvestCode=330 - Definition	Pulmonary atresia (PA) and intact ventricular septum (IVS) is a duct-dependent congenital malformation that forms a spectrum of lesions including atresia of the pulmonary valve, a varying degree of right ventricle and tricuspid valve hypoplasia, and anomalies of the coronary circulation. An RV dependent coronary artery circulation is present when coronary artery fistulas (coronary sinusoids) are associated with a proximal coronary artery stenosis. Associated Ebstein's anomaly of the tricuspid valve can be present; the tricuspid diameter is enlarged and the prognosis is poor.	<blank>

HarvestCode=340 - Definition	Pulmonary atresia (PA) and ventricular septal defect (VSD) is a heterogeneous group of congenital cardiac malformations in which there is lack of luminal continuity and absence of blood flow from either ventricle (in cases with ventriculo-arterial discordance) and the pulmonary artery, in a biventricular heart that has an opening or a hole in the interventricular septum (VSD). The malformation forms a spectrum of lesions including tetralogy of Fallot with pulmonary atresia. Tetralogy of Fallot with PA is a specific type of PA-VSD where the intracardiac malformation is more accurately defined (extreme underdevelopment of the RV infundibulum with marked anterior and leftward displacement of the infundibular septum often fused with the anterior wall of the RV resulting in complete obstruction of blood flow into the pulmonary artery and associated with a large outlet, subaortic ventricular septal defect). In the vast majority of cases of PA-VSD the intracardiac anatomy is that of TOF. The pulmonary circulation in PA-VSD is variable in terms of origin of blood flow, presence or absence of native pulmonary arteries, presence or absence of major aortopulmonary collateral arteries (MAPCA(s)), and distal distribution (pulmonary parenchymal segment arborization) abnormalities. Native pulmonary arteries may be present or absent. If MAPCAs are present this code should not be used; instead, Pulmonary atresia, VSD-MAPCA (pseudotruncus) should be used.	<blank>
HarvestCode=350 - Definition	MAPCA(s) are large and distinct arteries, highly variable in number, that usually arise from the descending thoracic aorta, but uncommonly may originate from the aortic arch or the subclavian, carotid or even the coronary arteries. MAPCA(s) may be associated with present or absent native pulmonary arteries. If present, the native pulmonary arteries may be hypoplastic, and either confluent or nonconfluent. Systemic pulmonary collateral arteries have been categorized into 3 types based on their site of origin and the way they connect to the pulmonary circulation: direct aortopulmonary collaterals, indirect aortopulmonary collaterals, and true bronchial arteries. Only the first two should be considered MAPCA(s). If MAPCA(s) are associated with PA-VSD or TOF, PA this code should be used.	<blank>
HarvestCode=350 - Description	Pulmonary atresia, VSD-MAPCA (pseudotruncus)	Pulmonary atresia, VSD-MAPCA
HarvestCode=360 - Definition	Rarely MAPCA(s) may occur in patents who do not have PA-VSD, but have severe pulmonary stenosis. The intracardiac anatomy in patients who have MAPCA(s) without PA should be specifically coded in each case as well.	<blank>

HarvestCode=370 - Definition	Indicate if the patient has the diagnosis of “Ebstein's anomaly”. Ebstein's anomaly is a malformation of the tricuspid valve and right ventricle that is characterized by a spectrum of several features: (1) incomplete delamination of tricuspid valve leaflets from the myocardium of the right ventricle; (2) downward (apical) displacement of the functional annulus; (3) dilation of the "atrialized" portion of the right ventricle with variable degrees of hypertrophy and thinning of the wall; (4) redundancy, fenestrations, and tethering of the anterior leaflets; and (5) dilation of the right atrioventricular junction (the true tricuspid annulus). These anatomical and functional abnormalities cause tricuspid regurgitation (and rarely tricuspid stenosis) that results in right atrial and right ventricular dilatation and atrial and ventricular arrhythmias. With increasing degrees of anatomic severity of malformation, the fibrous transformation of leaflets from their muscular precursors remains incomplete, with the septal leaflet being most severely involved, the posterior leaflet less severely involved, and the anterior leaflet usually the least severely involved. Associated cardiac anomalies include an interatrial communication, the presence of accessory conduction pathways often associated with Wolff-Parkinson-White syndrome, and dilation of the right atrium and right ventricle in patients with severe Ebstein's anomaly. (Varying degrees of right ventricular outflow tract obstruction may be present, including pulmonary atresia in some cases. Such cases of Ebstein's anomaly with pulmonary atresia should be coded with a Primary Diagnosis of “Ebstein’s anomaly”, and a Secondary Diagnosis of "Pulmonary atresia”.) (Some patients with atrioventricular discordance and ventriculoarterial discordance in situs solitus [congenitally corrected transposition] have an Ebstein-like deformity of the left-sided morphologically tricuspid valve. The nature of the displacement of the septal and posterior leaflets is similar to that in right-sided Ebstein's anomaly in patients with atrioventricular concordance and ventriculoarterial concordance in situs solitus. These patients with “Congenitally corrected TGA” and an Ebstein-like deformity of the left-sided morphologically tricuspid valve should be coded with a Primary Diagnosis of “Congenitally corrected TGA”, and a Secondary Diagnosis of “Ebstein's anomaly”.)	<blank>
HarvestCode=380 - Definition	Non-Ebstein's tricuspid regurgitation may be due to congenital factors (primary annular dilation, prolapse, leaflet underdevelopment, absent papillary muscle/chordae) or acquired (post cardiac surgery or secondary to rheumatic fever, endocarditis, trauma, tumor, cardiomyopathy, iatrogenic or other causes).	<blank>
HarvestCode=390 - Definition	Tricuspid stenosis may be due to congenital factors (valvular hypoplasia, abnormal subvalvar apparatus, double-orifice valve, parachute deformity) or acquired (post cardiac surgery or secondary to carcinoid, rheumatic fever, tumor, systemic disease, iatrogenic, or other causes).	<blank>
HarvestCode=400 - Definition	Tricuspid regurgitation present with tricuspid stenosis may be due to congenital factors or acquired.	<blank>
HarvestCode=410 - Definition	Tricuspid valve pathology not otherwise specified in diagnosis definitions 370, 380, 390 and 400.	<blank>

HarvestCode=420 - Definition	Pulmonary stenosis, Valvar ranges from critical neonatal pulmonic valve stenosis with hypoplasia of the right ventricle to valvar pulmonary stenosis in the infant, child, or adult, usually better tolerated but potentially associated with infundibular stenosis. Pulmonary branch hypoplasia can be associated. Only 10% of neonates with Pulmonary stenosis, Valvar with intact ventricular septum have RV-to-coronary artery fistula(s). An RV dependent coronary artery circulation is present when coronary artery fistulas (coronary sinusoids) are associated with a proximal coronary artery stenosis; this occurs in only 2% of neonates with Pulmonary stenosis, Valvar with IVS.	<blank>
HarvestCode=430 - Definition	Indicate if the patient has the diagnosis of "Pulmonary artery stenosis (hypoplasia), Main (trunk)". "Pulmonary artery stenosis (hypoplasia), Main (trunk)" is defined as a congenital or acquired anomaly with pulmonary trunk (main pulmonary artery) narrowing or hypoplasia. The stenosis or hypoplasia may be isolated or associated with other cardiac lesions. Since the narrowing is distal to the pulmonic valve, it may also be known as supravalvar pulmonary stenosis.	<blank>
HarvestCode=440 - Definition	Indicate if the patient has the diagnosis of "Pulmonary artery stenosis, Branch, Central (within the hilar bifurcation)". "Pulmonary artery stenosis, Branch, Central (within the hilar bifurcation)" is defined as a congenital or acquired anomaly with central pulmonary artery branch (within the hilar bifurcation involving the right or left pulmonary artery, or both) narrowing or hypoplasia. The stenosis or hypoplasia may be isolated or associated with other cardiac lesions. Coarctation of the pulmonary artery is related to abnormal extension of the ductus arteriosus into a pulmonary branch, more frequently the left branch.	<blank>
HarvestCode=450 - Definition	Indicate if the patient has the diagnosis of "Pulmonary artery stenosis, Branch, Peripheral (at or beyond the hilar bifurcation)". "Pulmonary artery stenosis, Branch, Peripheral (at or beyond the hilar bifurcation)" is defined as a congenital or acquired anomaly with peripheral pulmonary artery narrowing or hypoplasia (at or beyond the hilar bifurcation). The stenosis or hypoplasia may be isolated or associated with other cardiac lesions.	<blank>
HarvestCode=470 - Definition	Indicate if the patient has the diagnosis of "Pulmonary artery, Discontinuous". Pulmonary artery, Discontinuous" is defined as a congenital or acquired anomaly with discontinuity between the branch pulmonary arteries or between a branch pulmonary artery and the main pulmonary artery trunk.	<blank>
HarvestCode=490 - Definition	Subvalvar (infundibular) pulmonary stenosis is a narrowing of the outflow tract of the right ventricle below the pulmonic valve. It may be due to a localized fibrous diaphragm just below the valve, an obstructing muscle bundle or to a long narrow fibromuscular channel.	<blank>

HarvestCode=500 - Definition	The double chambered right ventricle is characterized by a low infundibular (subvalvar) stenosis rather than the rare isolated infundibular stenosis that develops more superiorly in the infundibulum, and is often associated with one or several closing VSDs. In some cases, the VSD is already closed. The stenosis creates two chambers in the RV, one inferior including the inlet and trabecular portions of the RV and one superior including the infundibulum.	<blank>
HarvestCode=510 - Definition	Other anomalies of the pulmonary valve may be listed here including but not restricted to absent pulmonary valve.	<blank>
HarvestCode=520	Conduit failure	<choice was deleted>
HarvestCode=530 - Definition	Pulmonary valve insufficiency or regurgitation may be due to congenital factors (primary annular dilation, prolapse, leaflet underdevelopment, etc) or acquired (for example, post cardiac surgery for repair of tetralogy of Fallot, etc.).	<blank>
HarvestCode=540 - Definition	Pulmonary valve insufficiency and pulmonary stenosis beyond the neonatal period, in infancy and childhood, may be secondary to leaflet tissue that has become thickened and myxomatous. Retraction of the commissure attachment frequently creates an associated supravalvar stenosis.	<blank>
HarvestCode=550 - Definition	Subaortic obstruction can be caused by different lesions: subaortic membrane or tunnel, accessory mitral valve tissue, abnormal insertion of the mitral anterior leaflet to the ventricular septum, deviation of the outlet septum (seen in coarctation of the aorta and interrupted aortic arch), or a restrictive bulboventricular foramen in single ventricle complexes. The Shone complex consists of subvalvar aortic stenosis in association with supravalvar mitral ring, parachute mitral valve, and coarctation of aorta. Subvalvar aortic stenosis may be categorized into two types: localized subvalvar aortic stenosis, which consists of a fibrous or fibromuscular ridge, and diffuse tunnel subvalvar aortic stenosis, in which circumferential narrowing commences at the annular level and extends downward for 1-3 cm. Idiopathic hypertrophic subaortic stenosis (IHSS) is also know as hypertrophic obstructive cardiomyopathy (HOCM), and is characterized by a primary hypertrophy of the myocardium. The obstructive forms involve different degrees of dynamic subvalvar aortic obstruction from a thickened ventricular wall and anterior motion of the mitral valve. Definitive nomenclature and therapeutic options for IHSS are listed under cardiomyopathy.	<blank>

HarvestCode=560 - Definition	Valvar aortic stenosis may be congenital or acquired. In its congenital form there are two types: critical (infantile), seen in the newborn in whom systemic perfusion depends on a patent ductus arteriosus, and noncritical, seen in infancy or later. Acquired valvar stenosis may be seen after as a result of rheumatic valvar disease, or from stenotic changes of an aortic valve prosthesis. Congenital valvar stenosis may result: (1) from complete fusion of commissures (acommissural) that results in a dome-shaped valve with a pinpoint opening (seen most commonly in infants with critical aortic valve stenosis); (2) from a unicommissural valve with one defined commissure and eccentric orifice (often with two raphes radiating from the ostium indicating underdeveloped commissures of a tricuspid aortic valve); (3) from a bicuspid aortic valve, with leaflets that can be equal in size or discrepant, and in left-right or anterior-posterior position; and finally (4) from a dysplastic tricuspid valve, which may have a gelatinous appearance with thick rarely equal in size leaflets, often obscuring the commissures. The dysplastic, tricuspid or bicuspid form of aortic valve deformity may not be initially obstructive but may become stenotic later in life due to leaflet thickening and calcification.	<blank>
HarvestCode=570 - Definition	Congenital supravalvar aortic stenosis is described as three forms: an hourglass deformity, a fibrous membrane, and a diffuse narrowing of the ascending aorta. The disease can be inherited as an autosomal dominant trait or part of Williams-Beuren syndrome in association with mental retardation, elfin facies, failure to thrive, and occasionally infantile hypercalcemia. Supravalvar aortic stenosis may involve the coronary artery ostia, and the aortic leaflets may be tethered. The coronary arteries can become tortuous and dilated due to elevated pressures and early atherosclerosis may ensue. Supravalvar aortic stenosis may also be acquired: (1) after a neoaortic reconstruction such as arterial switch, Ross operation, or Norwood procedure; (2) at a suture line from a previous aortotomy or cannulation; and (3) from a narrowed conduit.	<blank>
HarvestCode=590 - Definition	Aortic valve atresia will most often be coded under the Hypoplastic left heart syndrome/complex diagnostic codes since it most often occurs as part of a spectrum of cardiac malformations. However, there is a small subset of patients with aortic valve atresia who have a well-developed left ventricle and mitral valve and a large VSD (nonrestrictive or restrictive). The diagnostic code "Aortic valve atresia" enables users to report those patients with aortic valve atresia and a well-developed systemic ventricle without recourse to either a hypoplastic left heart syndrome/complex diagnosis or a single ventricle diagnosis.	<blank>

HarvestCode=600 - Definition	Congenital aortic regurgitation/insufficiency is rare as an isolated entity. There are rare reports of congenital malformation of the aortic valve that result in aortic insufficiency shortly after birth from an absent or underdeveloped aortic valve cusp. Aortic insufficiency is more commonly seen with other associated cardiac anomalies: (1) in stenotic aortic valves (commonly stenotic congenital bicuspid aortic valves) with some degree of aortic regurgitation due to aortic leaflet abnormality; (2) in association with a VSD (especially in supracristal or conal type I VSD, more commonly seen in Asian populations); (3) secondary to aortic-left ventricular tunnel; (4) secondary to tethering or retraction of aortic valve leaflets in cases of supravalvar aortic stenosis that may involve the aortic valve; and similarly (5) secondary to encroachment on an aortic cusp by a subaortic membrane; or (6) turbulence caused by a stenotic jet can create progressive aortic regurgitation. Aortic insufficiency may also result from: (1) post-procedure such as closed or open valvotomy or aortic valve repair, VSD closure, balloon valvotomy, or diagnostic catheterization; (2) in the neo-aorta post arterial switch, pulmonary autograft (Ross) procedure, homograft placement, Norwood procedure, or Damus-Kaye-Stansel procedure; (3) as a result of endocarditis secondary to perforated or prolapsed leaflets or annular dehiscence; (4) secondary to annulo-aortic ectasia with prolapsed or noncoapting leaflets; (5) secondary to trauma, blunt or penetrating; or (6) as a result of aortitis, bacterial, viral or autoimmune. Aortic regurgitation secondary to prosthetic failure should be coded first as either conduit failure or prosthetic valve failure, as applicable, and secondarily as aortic regurgitation secondary to prosthetic failure (perivalvar or due to structural failure). The underlying fundamental diagnosis that led to the initial conduit or valve prosthesis placement should also be described.	<blank>
HarvestCode=610 - Definition	Aortic insufficiency is often seen in association with stenotic aortic valve, commonly the stenotic congenital bicuspid aortic valve. The degree of aortic regurgitation is due to the severity of the aortic leaflet abnormality.	<blank>
HarvestCode=620 - Definition	This diagnostic subgroup may be used to delineate aortic valve cusp number (unicuspid, bicuspid, tricuspid, more than three cusps), commissural fusion (nromal, partially fused, completely fused), and valve leaflet (normal, thickened, dysplastic, calcified, gelatinous), annulus (normal, hypoplastic, calcified), or sinus description (normal, dilated). Note that any extensive descriptors chosen within those made available by a vendor will be converted, at harvest, to Aortic valve, Other.	<blank>

HarvestCode=630 - Definition	The sinus of Valsalva is defined as that portion of the aortic root between the aortic root annulus and the sinotubular ridge. A congenital sinus of Valsalva aneurysm is a dilation usually of a single sinus of Valsalva. These most commonly originate from the right sinus (65%-85%), less commonly from the noncoronary sinus (10%-30%), and rarely from the left sinus (<5%). A true sinus of Valsalva aneurysm presents above the aortic annulus. The hierarchical coding system distinguishes between congenital versus acquired, ruptured versus nonruptured, sinus of origin, and chamber/site of penetration (right atrium, right ventricle, left atrium, left ventricle, pulmonary artery, pericardium). A nonruptured congenital sinus of Valsalva aneurysm may vary from a mild dilation of a single aortic sinus to an extensive windsock deformity. Rupture of a congenital sinus of Valsalva aneurysm into an adjacent chamber occurs most commonly between the ages of 15-30 years. Rupture may occur spontaneously, after trauma, after strenuous physical exertion, or from acute bacterial endocarditis. Congenital etiology is supported by the frequent association of sinus of Valsalva aneurysms with VSDs. Other disease processes are also associated with sinus of Valsalva aneurysm and include: syphilis, endocarditis, cystic medial necrosis, atherosclerosis, and trauma. Acquired sinus of Valsalva aneurysms more frequently involve multiple sinuses of Valsalva; when present in multiple form they are more appropriately classified as aneurysms of the aortic root.	<blank>
HarvestCode=640 - Definition	The aortico-left ventricular tunnel (LV-to-aorta tunnel) is an abnormal paravalvular (alongside or in the vicinity of a valve) communication between the aorta and left ventricle, commonly divided into 4 types: (1) type I, a simple tunnel with a slit-like opening at the aortic end and no aortic valve distortion; (2) type II, a large extracardiac aortic wall aneurysm of the tunnel with an oval opening at the aortic end, with or without ventricular distortion; (3) type III, intracardiac aneurysm of the septal portion of the tunnel, with or without right ventricular outflow obstruction; and (4) type IV, a combination of types II and III. Further differentiation within these types may be notation of right coronary artery arising from the wall of the tunnel. If a LV-to-aorta tunnel communicates with the right ventricle, many feel that the defect is really a ruptured sinus of Valsalva aneurysm.	<blank>

HarvestCode=650 - Definition	Supravalvar mitral ring is formed by a circumferential ridge of tissue that is attached to the anterior mitral valve leaflet (also known as the aortic leaflet) slightly below its insertion on the annulus and to the atrium slightly above the attachment of the posterior mitral valve leaflet (also known as the mural leaflet). Depending on the diameter of the ring orifice, varying degrees of obstruction exist. The underlying valve is usually abnormal and frequently stenotic or hypoplastic. Supravalvar mitral ring is commonly associated with other stenotic lesions such as parachute or hammock valve (subvalvar stenosis), papillary muscle fusion (subvalvar stenosis), and double orifice mitral valve (valvar stenosis). Differentiation from cor triatriatum focuses on the compartments created by the supravalvar ring. In cor triatriatum the posterior compartment contains the pulmonary veins; the anterior contains the left atrial appendage and the mitral valve orifice. In supravalvar mitral ring, the posterior compartment contains the pulmonary veins and the left atrial appendage; the anterior compartment contains only the mitral valve orifice. When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	<blank>
HarvestCode=660 - Definition	Valvar mitral stenosis may arise from congenital (annular and / or leaflet) or acquired causes, both surgical (after mitral valve repair or replacement or other cardiac surgery) and non-surgical (post rheumatic heart disease, infective endocarditis, ischemia, myxomatomous degeneration, trauma, or cardiomyopathy). Mitral valve annular hypoplasia is distinguished from severe mitral valve hypoplasia and mitral valve atresia, which are typically components of hypoplastic left heart syndrome. When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	<blank>
HarvestCode=670 - Definition	Congenital subvalvar mitral stenosis may be due to obstructive pathology of either the chordae tendineae and / or papillary muscles which support the valve leaflets. When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	<blank>
HarvestCode=680 - Definition	In parachute mitral valve, all chordae are attached to a single papillary muscle originating from the posterior ventricular wall. When the interchordal spaces are partially obliterated valvar stenosis results. This defect also causes valvar insufficiency, most commonly due to a cleft leaflet, a poorly developed anterior leaflet, short chordae, or annular dilatation. This lesion is also part of Shone's anomaly, which consists of the parachute mitral valve, supravalvar mitral ring, subaortic stenosis, and coarctation of the aorta. When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	<blank>
HarvestCode=695 - Definition	Stenotic lesions of the mitral valve not otherwise specified in the diagnosis definitions 650, 660, 670, and 680.	<blank>

HarvestCode=700 - Definition	Mitral regurgitation and mitral stenosis may arise from congenital or acquired causes or after cardiac surgery. Additional details to aid in coding specific components of the diagnosis are available in the individual mitral stenosis or mitral regurgitation field definitions. When coding multiple mitral valve lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	<blank>
HarvestCode=710 - Definition	Mitral regurgitation may arise from congenital (at the annular, leaflet or subvalvar level) or acquired causes both surgical (after mitral valve repair or replacement, subaortic stenosis repair, atrioventricular canal repair, cardiac transplantation, or other cardiac surgery) and non-surgical (post rheumatic heart disease, infective endocarditis, ischemia (with chordal rupture or papillary muscle infarct), myxomatomous degeneration including Barlow's syndrome, trauma, or cardiomyopathy). Congenital lesions at the annular level include annular dilatation or deformation (usually deformation is consequent to associated lesions). At the valve leaflet level, mitral regurgitation may be due to a cleft, hypoplasia or agenesis of leaflet(s), excessive leaflet tissue, or a double orifice valve. At the subvalvar level, mitral regurgitation may be secondary to chordae tendineae anomalies (agenesis, rupture, elongation, or shortening as in funnel valve), or to papillary muscle anomalies (hypoplasia or agenesis, shortening, elongation, single-parachute, or multiple-hammock valve). When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	<blank>
HarvestCode=720 - Definition	Mitral valve pathology not otherwise coded in diagnosis definitions 650 through 710.	<blank>
HarvestCode=730 - Definition	Hypoplastic left heart syndrome (HLHS) is a spectrum of cardiac malformations characterized by a severe underdevelopment of the left heart-aorta complex, consisting of aortic and/or mitral valve atresia, stenosis, or hypoplasia with marked hypoplasia or absence of the left ventricle, and hypoplasia of the ascending aorta and of the aortic arch with coarctation of the aorta. Hypoplastic left heart complex is a subset of patients at the favorable end of the spectrum of HLHS characterized by hypoplasia of the structures of the left heart-aorta complex, consisting of aortic and mitral valve hypoplasia without valve stenosis or atresia, hypoplasia of the left ventricle, hypoplasia of the left ventricular outflow tract, hypoplasia of the ascending aorta and of the aortic arch, with or without coarctation of the aorta.	<blank>

HarvestCode=740 - Definition	Cardiomyopathy is a term applied to a wide spectrum of cardiac diseases in which the predominant feature is poor myocardial function in the absence of any anatomic abnormalities. Cardiomyopathies can be dividied into three relatively easily distinguishable entities: (1) dilated, characterized by ventricular dilatation and systolic dysfunction; (2) hypertrophic, characterized by physiologically inappropriate hypertrophy of the left ventricle; and (3) restrictive, characterized by diastolic dysfunction, with a presentation often identical to constrictive pericarditis. Also included in this diagnostic category are patients with a cardiomyopathy or syndrome confined to the right ventricle, for example: (1) arrhythmogenic right ventricular dysplasia; (2) Uhl's syndrome (hypoplasia of right ventricular myocardium, parchment heart); or (3) spongiform cardiomyopathy.	<blank>
HarvestCode=750 - Definition	Myocardial abnormality in which there is systolic and/or diastolic dysfunction in the presence of structural congenital heart disease without any (or any further) surgically correctable lesions.	<blank>
HarvestCode=760 - Definition	Inflammatory stimulation of the pericardium that results in the accumulation of appreciable amounts of pericardial fluid (also known as effusive pericarditis). The effusion may be idiopathic or acquired (e.g., postoperative, infectious, uremic, neoplastic, traumatic, drug-induced).	<blank>
HarvestCode=770 - Definition	Inflammatory process of the pericardium that leads to either (1) effusive pericarditis with accumulation of appreciable amounts of pericardial fluid or (2) constrictive pericarditis that leads to pericardial thickening and compression of the cardiac chambers, ultimately with an associated significant reduction in cardiac function. Etiologies are varied and include idiopathic or acquired (e.g., postoperative, infectious, uremic, neoplastic, traumatic, drug-induced) pericarditis.	<blank>
HarvestCode=780 - Definition	A structural or functional abnormality of the visceral or parietal pericardium that may, or may not, have a significant impact on cardiac function. Included are absence or partial defects of the pericardium.	<blank>
HarvestCode=790 - Definition	Single morphologically left ventricle (smooth internal walls, lack chordal attachments of AV valves to the rudimentary septal surface) that receives both atrioventricular valves.	<blank>
HarvestCode=800 - Definition	Single morphologically right ventricle (more heavily trabeculated, generally have chordal attachments of AV valve to the septal surfaces) that receives both atrioventricular valves.	<blank>
HarvestCode=810 - Definition	Single ventricle anomalies with mitral atresia. May also be associated with double outlet right ventricle, congenitally corrected transposition, pulmonary atresia, or pulmonary stenosis.	<blank>
HarvestCode=820 - Definition	Single ventricle anomalies with tricuspid atresia. May also be associated with complete transposition of the great arteries, congenitally corrected transposition of the great arteries, pulmonary atresia, pulmonary stenosis, subaortic stenosis, or ventricular septal defect (small or large).	<blank>

HarvestCode=830 - Definition	Single ventricle anomalies with a common atrioventricular (AV) valve and only one completely well developed ventricle. If the common AV valve opens predominantly into the morphologic left ventricle, the defect is termed a left ventricular (LV)–type or LV-dominant AV septal defect. If the common AV valve opens predominantly into the morphologic right ventricle, the defect is termed a right ventricular (RV)–type or RV-dominant AV septal defect.	<blank>
HarvestCode=840 - Definition	Visceral heterotaxy syndrome is literally defined as a pattern of anatomic organization of the thoracic and abdominal organs that is neither the expected usual or normal arrangement (so-called situs solitus) nor complete situs inversus (the unusual or mirror-image arrangement of normal). If asymmetry of the thoracic and abdominal viscera is the usual or normal situation, visceral heterotaxy syndrome includes patients with an unusual degree of thoracic and abdominal visceral symmetry. This broad term includes patients with a wide variety of complex cardiac lesions. One way to impose order on this diverse group of cardiac lesions is to stratify them according to the morphology of the atrial appendages. In atrial appendage isomerism, both atrial appendages are similar rather than displaying their usual distinctive morphology. Right or left atrial appendage isomerism exists when both atria have right or left atrial appendage morphologic characteristics, respectively. Right atrial appendage isomerism is frequently associated with bilaterally trilobed lungs (each with short bronchi) and asplenia. Left atrial appendage isomerism frequently is associated with bilaterally bilobed lungs (each with long bronchi) and polysplenia. Many types of anomalies of systemic venous connection are frequently associated with heterotaxy syndrome.Visceral heterotaxy syndrome is literally defined as a pattern of anatomic organization of the thoracic and abdominal organs that is neither the expected usual or normal arrangement (so-called situs solitus) nor complete situs inversus (the unusual or mirror-image arrangement of normal). If asymmetry of the thoracic and abdominal viscera is the usual or normal situation, visceral heterotaxy syndrome includes patients with an unusual degree of thoracic and abdominal visceral symmetry. This broad term includes patients with a wide variety of complex cardiac lesions. One way to impose order on this diverse group of cardiac lesions is to stratify them according to the morphology of the atrial appendages. In atrial appendage isomerism, both atrial appendages are similar rather than displaying their usual distinctive morphology. Right or left atrial appendage isomerism exists when both atria have right or left atrial appendage morphologic characteristics, respectively. Right atrial appendage isomerism is frequently associated with bilaterally trilobed lungs (each with short bronchi) and asplenia. Left atrial appendage isomerism frequently is associated with bilaterally bilobed lungs (each with long bronchi) and polysplenia. Many types of anomalies of systemic venous connection are frequently associated with heterotaxy syndrome.	<blank>

HarvestCode=850 - Definition	If the single ventricle is of primitive or indeterminate type, other is chosen in coding. It is recognized that a considerable variety of other structural cardiac malformations (e.g., biventricular hearts with straddling atrioventricular valves, pulmonary atresia with intact ventricular septum, some complex forms of double outlet right ventricle) may at times be best managed in a fashion similar to that which is used to treat univentricular hearts. They are not to be coded in this section of the nomenclature, but according to the underlying lesions.	<blank>
HarvestCode=870 - Definition	Indicate if the patient has the diagnosis of "Congenitally corrected TGA". Congenitally corrected transposition is synonymous with the terms 'corrected transposition' and 'discordant atrioventricular connections with discordant ventriculo-arterial connections', and is defined as a spectrum of cardiac malformations where the atrial chambers are joined to morphologically inappropriate ventricles, and the ventricles then support morphologically inappropriate arterial trunks [1]. [1] Jacobs JP, Franklin RCG, Wilkinson JL, Cochrane AD, Karl TR, Aiello VD, Béland MJ, Colan SD, Elliott, MJ, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Tchervenkov CI, Weinberg PM. The nomenclature, definition and classification of discordant atrioventricular connections. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges of the Atrioventricular Junctions and Other Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16 (Supplement 3): 72-84, September 2006.	<blank>
HarvestCode=872 - Definition	Indicate if the patient has the diagnosis of "Congenitally corrected TGA, IVS". "Congenitally corrected TGA, IVS" is "Congenitally corrected transposition with an intact ventricular septum", in other words, "Congenitally corrected transposition with no VSD". (Congenitally corrected transposition is synonymous with the terms 'corrected transposition' and 'discordant atrioventricular connections with discordant ventriculo-arterial connections', and is defined as a spectrum of cardiac malformations where the atrial chambers are joined to morphologically inappropriate ventricles, and the ventricles then support morphologically inappropriate arterial trunks [1]. [1] Jacobs JP, Franklin RCG, Wilkinson JL, Cochrane AD, Karl TR, Aiello VD, Béland MJ, Colan SD, Elliott, MJ, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Tchervenkov CI, Weinberg PM. The nomenclature, definition and classification of discordant atrioventricular connections. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges of the Atrioventricular Junctions and Other Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16 (Supplement 3): 72-84, September 2006.)	<blank>

HarvestCode=874 - Definition	Indicate if the patient has the diagnosis of "Congenitally corrected TGA, IVS-LVOTO". "Congenitally corrected TGA, IVS-LVOTO" is "Congenitally corrected transposition with an intact ventricular septum and left ventricular outflow tract obstruction", in other words, "Congenitally corrected transposition with left ventricular outflow tract obstruction and no VSD". (Congenitally corrected transposition is synonymous with the terms 'corrected transposition' and 'discordant atrioventricular connections with discordant ventriculo-arterial connections', and is defined as a spectrum of cardiac malformations where the atrial chambers are joined to morphologically inappropriate ventricles, and the ventricles then support morphologically inappropriate arterial trunks [1]. [1] Jacobs JP, Franklin RCG, Wilkinson JL, Cochrane AD, Karl TR, Aiello VD, Béland MJ, Colan SD, Elliott, MJ, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Tchervenkov CI, Weinberg PM. The nomenclature, definition and classification of discordant atrioventricular connections. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges of the Atrioventricular Junctions and Other Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16 (Supplement 3): 72-84, September 2006.)	<blank>
HarvestCode=876 - Definition	Indicate if the patient has the diagnosis of "Congenitally corrected TGA, VSD". "Congenitally corrected TGA, VSD" is "Congenitally corrected transposition with a VSD". (Congenitally corrected transposition is synonymous with the terms 'corrected transposition' and 'discordant atrioventricular connections with discordant ventriculo-arterial connections', and is defined as a spectrum of cardiac malformations where the atrial chambers are joined to morphologically inappropriate ventricles, and the ventricles then support morphologically inappropriate arterial trunks [1]. [1] Jacobs JP, Franklin RCG, Wilkinson JL, Cochrane AD, Karl TR, Aiello VD, Béland MJ, Colan SD, Elliott, MJ, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Tchervenkov CI, Weinberg PM. The nomenclature, definition and classification of discordant atrioventricular connections. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges of the Atrioventricular Junctions and Other Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16 (Supplement 3): 72-84, September 2006.)	<blank>

HarvestCode=878 - Definition	Indicate if the patient has the diagnosis of "Congenitally corrected TGA, VSD-LVOTO". "Congenitally corrected TGA, VSD-LVOTO" is "Congenitally corrected transposition with a VSD and left ventricular outflow tract obstruction". (Congenitally corrected transposition is synonymous with the terms 'corrected transposition' and 'discordant atrioventricular connections with discordant ventriculo-arterial connections', and is defined as a spectrum of cardiac malformations where the atrial chambers are joined to morphologically inappropriate ventricles, and the ventricles then support morphologically inappropriate arterial trunks [1]. [1] Jacobs JP, Franklin RCG, Wilkinson JL, Cochrane AD, Karl TR, Aiello VD, Béland MJ, Colan SD, Elliott, MJ, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Tchervenkov CI, Weinberg PM. The nomenclature, definition and classification of discordant atrioventricular connections. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges of the Atrioventricular Junctions and Other Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16 (Supplement 3): 72-84, September 2006.)	<blank>
HarvestCode=880 - Definition	A malformation of the heart in which there is atrioventricular concordance and ventriculoarterial discordance with an intact ventricular septum. There may be d, l, or ambiguous transposition (segmental diagnoses include S,D,D, S,D,L, S,D,A). Also to be included in this diagnostic grouping are those defects with situs inversus, L-loop ventricles and either d or l transposition (segmental diagnosis of I,L,L and I,L,D) and occasionally those defects with ambiguous situs of the atria which behave as physiologically uncorrected transposition and are treated with arterial switch (segmental diagnoses include A,L,L and A,D,D).	<blank>
HarvestCode=890 - Definition	A malformation of the heart in which there is atrioventricular concordance and ventriculoarterial discordance with an intact ventricular septum and associated left ventricular obstruction. There may be d, l, or ambiguous transposition (segmental diagnoses include S,D,D, S,D,L, S,D,A). Also to be included in this diagnostic grouping are those defects with situs inversus, L-loop ventricles and either d or l transposition (segmental diagnosis of I,L,L and I,L,D) and occasionally those defects with ambiguous situs of the atria which behave as physiologically uncorrected transposition and are treated with arterial switch (segmental diagnoses include A,L,L and A,D,D).	<blank>
HarvestCode=900 - Definition	A malformation of the heart in which there is atrioventricular concordance and ventriculoarterial discordance with one or more ventricular septal defects. There may be d, l, or ambiguous transposition (segmental diagnoses include S,D,D, S,D,L, S,D,A). Also to be included in this diagnostic grouping are those defects with situs inversus, L-loop ventricles and either d or l transposition (segmental diagnosis of I,L,L and I,L,D) and occasionally those defects with ambiguous situs of the atria which behave as physiologically uncorrected transposition and are treated with arterial switch (segmental diagnoses include A,L,L and A,D,D).	<blank>

HarvestCode=910 - Definition	A malformation of the heart in which there is atrioventricular concordance and ventriculoarterial discordance with one or more ventricular septal defects and left ventricular outflow tract obstruction. There may be d, l, or ambiguous transposition (segmental diagnoses include S,D,D, S,D,L, S,D,A). Also to be included in this diagnostic grouping are those defects with situs inversus, L-loop ventricles and either d or l transposition (segmental diagnosis of I,L,L and I,L,D) and occasionally those defects with ambiguous situs of the atria which behave as physiologically uncorrected transposition and are treated with arterial switch (segmental diagnoses include A,L,L and A,D,D).	<blank>
HarvestCode=930 - Definition	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In double outlet right ventricle, VSD type, there is an associated subaortic or doubly-committed VSD and no pulmonary outflow tract obstruction. Subaortic VSD's are located beneath the aortic valve. Doubly-committed VSD's lie beneath the leaflets of the aortic and pulmonary valves (juxtaarterial). In the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connection with DORV is to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate sngle ventricle listing.	<blank>
HarvestCode=940 - Definition	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In double outlet right ventricle, TOF type, there is an associated subaortic or doubly-committed VSD and pulmonary outflow tract obstruction. Subaortic VSD's are located beneath the aortic valve. Doubly-committed VSD's lie beneath the leaflets of the aortic and pulmonary valves (juxtaarterial). DORV can occur in association with pulmonary atresia, keeping in mind in coding that in the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles (in this situation DORV is coded as a primary diagnosis). Discordant atrioventricular connection with DORV is to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate Single ventricle listing.	<blank>

HarvestCode=950 - Definition	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In double outlet right ventricle, TGA type, there is an associated subpulmonary VSD. Most frequently, there is no pulmonary outflow tract obstruction (Taussig-Bing heart). The aorta is usually to the right and slightly anterior to or side-by-side with the pulmonary artery. Associated aortic outflow tract stenosis (subaortic, aortic arch obstruction) is commonly associated with the Taussig-Bing heart and if present should be coded as a secondary diagnosis. Rarely, there is associated pulmonary outflow tract obstruction. In the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connection with DORV is to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate single ventricle listing.	<blank>
HarvestCode=960 - Definition	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In double outlet right ventricle, Remote VSD type, there is a remote or noncommitted VSD. The VSD is far removed from both the aortic and pulmonary valves, usually within the inlet septum. Many of these VSD's are in hearts with DORV and common atrioventricular canal/septal defect. In the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connection with DORV is to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate single ventricle listing.	<blank>
HarvestCode=975 - Definition	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In the rare case of double outlet right ventricle with IVS the ventricular septum is intact. In the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connections with DORV are to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate single ventricle listing.	<blank>

HarvestCode=980 - Definition	Double outlet left ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the left ventricle. In the nomenclature developed for DOLV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connection with DOLV is to be coded under congenitally corrected TGA. DOLV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate single ventricle listing.	<blank>
HarvestCode=990 - Definition	Indicate if the patient has the diagnosis of "Coarctation of aorta". A "Coarctation of the aorta" generally indicates a narrowing of the descending thoracic aorta just distal to the left subclavian artery. However, the term may also be accurately used to refer to a region of narrowing anywhere in the thoracic or abdominal aorta.	<blank>
HarvestCode=1000 - Definition	Hypoplasia of the aortic arch is hypoplasia of the proximal or distal transverse arch or the aortic isthmus. The isthmus (arch between the left subclavian and insertion of the patent ductus arteriosus / ligamentum arteriosum) is hypoplastic if its diameter is less than 40% of the diameter of the ascending aorta. The proximal transverse arch (arch between the innominate and left carotid arteries) and distal transverse arch (arch between the left carotid and left subclavian arteries) are hypoplastic if their diameters are less than 60% and 50%, respectively, of the diameter of the ascending aorta.	<blank>
HarvestCode=1010 - Definition	Anomalous aortic origins of the coronary arteries include a spectrum of anatomic variations of the normal coronary artery origins. Coronary artery anomalies of aortic origin to be coded under this diagnostic field include: anomalies of take-off (high take-off), origin (sinus), branching, and number. An anomalous course of the coronary artery vessels is also significant, particularly those coronary arteries that arise or course between the great vessels.	<blank>
HarvestCode=1010 - Description	Coronary artery anomaly, Anomalous aortic origin	Coronary artery anomaly, Anomalous aortic origin of coronary artery (AAOCA)
HarvestCode=1020 - Definition	In patients with anomalous pulmonary origin of the coronary artery, the coronary artery (most commonly the left coronary artery) arises from the pulmonary artery rather than from the aorta. Rarely, the right coronary artery, the circumflex, or both coronary arteries may arise from the pulmonary artery.	<blank>

HarvestCode=1030 - Definition	The most common of coronary artery anomalies, a coronary arteriovenous fistula is a communication between a coronary artery and either a chamber of the heart (coronary-cameral fistula) or any segment of the systemic or pulmonary circulation (coronary arteriovenous fistula). They may be congenital or acquired (traumatic, infectious, iatrogenic) in origin, and are mostly commonly seen singly, but occasionally multiple fistulas are present. Nomenclature schemes have been developed that further categorize the fistulas by vessel of origin and chamber of termination, and one angiographic classification scheme by Sakakibara has surgical implications. Coronary artery fistulas can be associated with other congenital heart anomalies such as tetralogy of Fallot, atrial septal defect, ventricular septal defect, and pulmonary atresia with intact ventricular septum, among others. The major cardiac defect should be listed as the primary diagnosis and the coronary artery fistula should be as an additional secondary diagnoses.	<blank>
HarvestCode=1040 - Definition	Coronary artery aneurysms are defined as dilations of a coronary vessel 1.5 times the adjacent normal coronaries. There are two forms, saccular and fusiform (most common), and both may be single or multiple. These aneurysms may be congenital or acquired (atherosclerotic, Kawasaki, systemic diseases other than Kawasaki, iatrogenic, infectious, or traumatic) in origin.	<blank>
HarvestCode=1050 - Definition	Coronary artery anomalies which may fall within this category include coronary artery bridging and coronary artery stenosis, as well as secondary coronary artery variations seen in congenital heart defects such as tetralogy of Fallot, transposition of the great arteries, and truncus arteriosus (with the exception of variations that can be addressed by a more specific coronary artery anomaly code).	<blank>
HarvestCode=1070 - Definition	Indicate if the patient has the diagnosis of “Interrupted aortic arch”. Interrupted aortic arch is defined as the loss of luminal continuity between the ascending and descending aorta. In most cases blood flow to the descending thoracic aorta is through a PDA, and there is a large VSD. Arch interruption is further defined by site of interruption. In type A, interruption is distal to the left subclavian artery; in type B interruption is between the left carotid and left subclavian arteries; and in type C interruption occurs between the innominate and left carotid arteries.	<blank>

HarvestCode=1080 - Definition	Indicate if the patient has the diagnosis of “Patent ductus arteriosus”. The ductus arteriosus (arterial duct) is an essential feature of fetal circulation, connecting the main pulmonary trunk with the descending aorta, distal to the origin of the left subclavian artery. In most patients it is on the left side. If a right aortic arch is present, it may be on the right or the left; very rarely it is bilateral. When luminal patency of the duct persists post-natally, it is referred to as patent ductus arteriosus (patent arterial duct). The length and diameter may vary considerably from case to case. The media of the ductus consists mainly of smooth muscle that is arranged spirally, and the intima is much thicker than that of the aorta. (A patent ductus arteriosus is a vascular arterial connection between the thoracic aorta and the pulmonary artery. Most commonly a PDA has its origin from the descending thoracic aorta, just distal and opposite the origin of the left subclavian artery. The insertion of the ductus is most commonly into the very proximal left pulmonary artery at its junction with the main pulmonary artery. Origination and insertion sites can be variable, however.)	<blank>
HarvestCode=1090 - Definition	The term vascular ring refers to a group of congenital vascular anomalies that encircle and comperss the esophagus and trachea. The compression may be from a complete anatomic ring (double aortic arch or right aortic arch with a left ligamentum) or from a compressive effect of an aberrant vessel (innominate artery compression syndrome).	<blank>
HarvestCode=1100 - Definition	In pulmonary artery sling, the left pulmonary artery originates from the right pulmonary artery and courses posteriorly between the trachea and esophagus in its route to the left lung hilum, causing a sling-like compression of the trachea.	<blank>
HarvestCode=1110 - Definition	An aneurysm of the aorta is defined as a localized dilation or enlargement of the aorta at any site along its length (from aortic annulus to aortoiliac bifurcation). A true aortic aneurysm involves all layers of the aortic wall. A false aortic aneurysm (pseudoaneurysm) is defined as a dilated segment of the aorta not containing all layers of the aortic wall and may include postoperative or post-procedure false aneurysms at anastomotic sites, traumatic aortic injuries or transections, and infectious processes leading to a contained rupture.	<blank>
HarvestCode=1120 - Definition	Aortic dissection is a separation of the layers of the aortic wall. Extension of the plane of the dissection may progress to free rupture into the pericardium, mediastinum, or pleural space if not contained by the outer layers of the media and adventitia. Dissections may be classified as acute or chronic (if they have been present for more than 14 days).	<blank>
HarvestCode=1130 - Definition	Lung disease arising from any etiology (congenital or acquired) which does not result in death or lung or heart-lung transplant; examples might be non-life threatening asthma or emphysema, benign cysts.	<blank>
HarvestCode=1140 - Definition	Lung disease arising from any etiology (congenital or acquired, including pulmonary parenchymal disease, pulmonary vascular disease, congenital heart disease, neoplastm, etc.) which may result in death or lung or heart-lung transplant.	<blank>

HarvestCode=1150	Pectus	<choice was deleted>
HarvestCode=1160 - Definition	Tracheal stenosis is a reduction in the anatomic luminal diameter of the trachea by more than 50% of the remaining trachea. This stenosis may be congenital or acquired (as in post-intubation or traumatic tracheal stenosis).	<blank>
HarvestCode=1170 - Definition	Included in this diagnostic category would be airway pathology not included under the definition of tracheal stenosis such as tracheomalacia, bronchotracheomalacia, tracheal right upper lobe, bronchomalacia, subglottic stenosis, bronchial stenosis, etc.	<blank>
HarvestCode=1180 - Definition	Any cardiac rhythm other than normal sinus rhythm.	<blank>
HarvestCode=1185 - Definition	Atrioventricular block may be congenital or acquired, and may be of varying degree (first, second, or third degree).	<blank>
HarvestCode=1190 - Definition	Atrioventricular block, when acquired, may be post-surgical, or secondary to myocarditis or other etiologies; the block may be first, second or third degree.	<blank>
HarvestCode=1200 - Definition	Atrioventricular block, when congenital, may be first, second or third degree block.	<blank>
HarvestCode=1220	Arrhythmia, Pacemaker, Indication for replacement	<choice was deleted>
HarvestCode=1250 - Definition	An aneurysm of the right ventricle is defined as a localized dilation or enlargement of the right ventricular wall.	<blank>
HarvestCode=1260 - Definition	An aneurysm of the left ventricle is defined as a localized dilation or enlargement of the left ventricular wall.	<blank>
HarvestCode=1270 - Definition	An aneurysm of the pulmonary artery is defined as a localized dilation or enlargement of the pulmonary artery trunk and its central branches (right and left pulmonary artery).	<blank>
HarvestCode=1280 - Definition	A localized dilation or enlargement of a cardiac vessel or chamber not coded in specific fields available for aortic aneurysm, sinus of Valsalva aneurysm, coronary artery aneurysm, right ventricular aneurysm, left ventricular aneurysm, or pulmonary artery aneurysm.	<blank>
HarvestCode=1290 - Definition	Small size of the right ventricle. This morphological abnormality usually is an integral part of other congenital cardiac anomalies and, therefore, frequently does not need to be coded separately. It should, however, be coded as secondary to an accompanying congenital cardiac anomaly if the right ventricular hypoplasia is not considered an integral and understood part of the primary congenital cardiac diagnosis. It would rarely be coded as a primary and/or isolated diagnosis.	<blank>

HarvestCode=1300 - Definition	Small size of the left ventricle. This morphological abnormality usually is an integral part of other congenital cardiac anomalies and, therefore, frequently does not need to be coded separately. It should, however, be coded as secondary to an accompanying congenital cardiac anomaly if the left ventricular hypoplasia is not considered an integral and understood part of the primary congenital cardiac diagnosis. It would rarely be coded as a primary and/or isolated diagnosis.	<blank>
HarvestCode=1310 - Definition	Inflammation/infection of the mediastinum, the cavity between the lungs which holds the heart, great vessels, trachea, esophagus, thymus, and connective tissues. In the United States mediastinitis occurs most commonly following chest surgery.	<blank>
HarvestCode=1320 - Definition	An infection of the endocardial surface of the heart, which may involve one or more heart valves (native or prosthetic) or septal defects or prosthetic patch material placed at previous surgery.	<blank>
HarvestCode=1330	Prosthetic valve failure	<choice was deleted>
HarvestCode=1340 - Definition	A myocardial infarction is the development of myocardial necrosis caused by a critical imbalance between the oxygen supply and demand of the myocardium. While a myocardial infarction may be caused by any process that causes this imbalance it most commonly results from plaque rupture with thrombus formation in a coronary vessel, resulting in an acute reduction of blood supply to a portion of the myocardium. Myocardial infarction is a usual accompaniment of anomalous left coronary artery from the pulmonary artery (ALCAPA).	<blank>
HarvestCode=1350 - Definition	An abnormal growth of tissue in or on the heart, demonstrating partial or complete lack of structural organization, and no functional coordination with normal cardiac tissue. Commonly, a mass is recognized which is distinct from the normal structural components of the heart. A primary cardiac tumor is one that arises directly from tissues of the heart, (e.g., myxoma, fibroelastoma, rhabdomyoma, fibroma, lipoma, pheochromocytoma, teratoma, hemangioma, mesothesioloma, sarcoma). A secondary cardiac tumor is one that arises from tissues distant from the heart, with subsequent spread to the otherwise normal tissues of the heart, (e.g., renal cell tumor with caval extension from the kidney to the level of the heart or tumor with extension from other organs or areas of the body (hepatic, adrenal, uterine, infradiaphragmatic)). N.B., in the nomenclature system developed, cardiac thrombus and cardiac vegetation are categorized as primary cardiac tumors.	<blank>
HarvestCode=1360 - Definition	An abnormal intrapulmonary connection (fistula) between an artery and vein that occurs in the blood vessels of the lungs. Pulmonary AV fistulas may be seen in association with congenital heart defects; the associated cardiac defect should be coded as well.	<blank>
HarvestCode=1370 - Definition	A pulmonary embolus is a blockage of an artery in the lungs by fat, air, clumped tumor cells, or a blood clot.	<blank>

HarvestCode=1385 - Definition	Pulmonary vascular obstructive disease (PVOD) other than those specifically defined elsewhere (Eisenmenger's pulmonary vascular obstructive disease, primary pulmonary hypertension, persistent fetal circulation). The spectrum includes PVOD arising from (1) pulmonary arterial hypertension, or (2) pulmonary venous hypertension, or (3) portal hypertension, or (4) collage vascular disease, or (5) drug or toxin induced, or (6) diseases of the respiratory system, or (7) chronic thromboembolic disease, among others.	<blank>
HarvestCode=1390 - Definition	"Eisenmenger syndrome" could briefly be described as "Acquired severe pulmonary vascular disease associated with congenital heart disease (Eisenmenger)". Eisenmenger syndrome is an acquired condition. In Eisenmenger-type pulmonary vascular obstructive disease, long-term left-to-right shunting (e.g., through a ventricular or atrial septal defect, patent ductus arteriosus, aortopulmonary window) can lead to chronic pulmonary hypertension with resultant pathological changes in the pulmonary vessels. The vessels become thick-walled, stiff, noncompliant, and may be obstructed. In Eisenmenger syndrome, the long-term left-to-right shunting will reverse and become right to left. Please note that the specific heart defect should be coded as a secondary diagnosis.	<blank>
HarvestCode=1400 - Definition	Primary pulmonary hypertension is a rare disease characterized by elevated pulmonary artery hypertension with no apparent cause. Two forms are included in the nomenclature, a sporadic form and a familial form which can be linked to the BMPR-II gene.	<blank>
HarvestCode=1410 - Definition	Persistence of the blood flow pattern seen in fetal life, in which high pulmonary vascular resistance in the lungs results in decreased blood flow to the lungs. Normally, after birth pulmonary pressure falls with a fall in pulmonary vascular resistance and there is increased perfusion of the lungs. Persistent fetal circulation, also known as persistent pulmonary hypertension of the newborn, can be related to lung or diaphragm malformations or lung immaturity.	<blank>
HarvestCode=1420 - Definition	Aspiration of amniotic fluid stained with meconium before, during, or after birth can lead to pulmonary sequelae including (1) pneumothorax, (2) pneumomediastinum, (3) pneumopericardium, (4) lung infection, and (5) meconium aspiration syndrome (MAS) with persistent pulmonary hypertension.	<blank>
HarvestCode=1430 - Definition	Benign diseases of the mediastinal or visceral pleura.	<blank>
HarvestCode=1440 - Definition	Malignant diseases of the mediastinal or visceral pleura.	<blank>
HarvestCode=1450 - Definition	A collection of air or gas in the pleural space.	<blank>
HarvestCode=1460 - Definition	Abnormal accumulation of fluid in the pleural space.	<blank>
HarvestCode=1470 - Definition	The presence of lymphatic fluid in the pleural space secondary to a leak from the thoracic duct or its branches. Chylothorax is a specific type of pleural effusion.	<blank>

HarvestCode=1480 - Definition	A collection of purulent material in the pleural space, usually secondary to an infection.	<blank>
HarvestCode=1490 - Definition	Any benign disease of the esophagus.	<blank>
HarvestCode=1500 - Definition	Any malignant disease of the esophagus.	<blank>
HarvestCode=1505 - Definition	Any disease of the mediastinum awaiting final benign/malignant pathology determination.	<blank>
HarvestCode=1510 - Definition	Any benign disease of the mediastinum.	<blank>
HarvestCode=1520 - Definition	Any malignant disease of the mediastinum.	<blank>
HarvestCode=1540 - Definition	Paralysis of diaphragm, unilateral or bilateral.	<blank>
HarvestCode=1550 - Definition	Any disease of the diaphragm other than paralysis.	<blank>
HarvestCode=1560 - Definition	Any cardiac diagnosis not specifically delineated in other diagnostic codes.	<blank>
HarvestCode=1570 - Definition	Any thoracic and/or mediastinal disease not specifically delineated in other diagnostic codes.	<blank>
HarvestCode=1580 - Definition	Any peripheral vascular disease (congenital or acquired) or injury (from trauma or iatrogenic); vessels involved may include, but are not limited to femoral artery, femorial vein, iliac artery, brachial artery, etc.	<blank>
HarvestCode=1590	Status post - Transplant, Heart	<choice was deleted>
HarvestCode=1600	Status post - Transplant, lung(s)	<choice was deleted>
HarvestCode=1610	Status post - Transplant, Heart and lung	<choice was deleted>

HarvestCode=2080 - Definition	Shone's syndrome is a syndrome of multilevel hypoplasia and obstruction of left sided cardiovascular structures including more than one of the following lesions: (1) supravalvar ring of the left atrium, (2) a parachute deformity of the mitral valve, (3) subaortic stenosis, and (4) aortic coarctation. The syndrome is based on the original report from Shone [1] that was based on analysis of 8 autopsied cases and described the tendency of these four obstructive, or potentially obstructive, conditions to coexist. Only 2 of the 8 cases exhibited all four conditions, with the other cases exhibiting only two or three of the anomalies [2]. [1] Shone JD, Sellers RD, Anderson RG, Adams P, Lillehei CW, Edwards JE. The developmental complex of "parachute mitral valve", supravalvar ring of left atrium, subaortic stenosis, and coarctation of the aorta. Am J Cardiol 1963; 11: 714–725. [2]. Tchervenkov CI, Jacobs JP, Weinberg PM, Aiello VD, Beland MJ, Colan SD, Elliott MJ, Franklin RC, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G. The nomenclature, definition and classification of hypoplastic left heart syndrome. Cardiology in the Young, 2006; 16(4): 339–368, August 2006. Please note that the term "2080 Shone's syndrome" may be the "Fundamental Diagnosis" of a patient; however, the term "2080 Shone's syndrome" may not be the "Primary Diagnosis" of an operation. The term "2080 Shone's syndrome" may be a "Secondary Diagnosis" of an operation.	<blank>
HarvestCode=2090	Dextrocardia	<choice was deleted>
HarvestCode=2100	Levocardia	<choice was deleted>
HarvestCode=2110	Mesocardia	<choice was deleted>
HarvestCode=2120	Situs inversus	<choice was deleted>
HarvestCode=2160	<blank>	<New choice added> Rib tumor, Benign
HarvestCode=2170	<blank>	<New choice added> Rib tumor, Malignant
HarvestCode=2180	<blank>	<New choice added> Rib tumor, Metastatic
HarvestCode=2190	<blank>	<New choice added> Sternal tumor, Benign
HarvestCode=2200	<blank>	<New choice added> Sternal tumor, Malignant
HarvestCode=2210	<blank>	<New choice added> Sternal tumor, Metastatic
HarvestCode=2220	<blank>	<New choice added> Pectus carinatum
HarvestCode=2230	<blank>	<New choice added> Pectus excavatum
HarvestCode=2240	<blank>	<New choice added> Thoracic outlet syndrome

HarvestCode=2250	<blank>	<New choice added> Kawasaki disease
HarvestCode=2400	<blank>	<New choice added> Trauma, Blunt
HarvestCode=2410	<blank>	<New choice added> Trauma, Penetrating
HarvestCode=7000 - Definition	Normal heart.	<blank>
HarvestCode=7777 - Definition	Any disease (congenital or acquired) not specifically delineated in other diagnostic codes.	<blank>

470 **Last Follow-Up New York Heart Association Classification**

Detail changed:	Changed from:	Changed to:
HarvestCode=5	<blank>	<New choice added> Not assessed

510 **Noncardiac Congenital Anatomic Abnormalities Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

530 **Major Noncardiac Abnormality**

Detail changed:	Changed from:	Changed to:
Definition	Indicate whether the patient has one of the following noncardiac congenital anatomic abnormalities.	Indicate all of the major noncardiac abnormalities the patient has or select None.
LongName	Noncardiac Congenital Anatomic Abnormality	Major Noncardiac Abnormality
HarvestCode=5 - Definition	<blank>	No known major noncardiac abnormality
HarvestCode=10 - Definition	<blank>	Anal atresia, or imperforate anus, is a specific type of what are commonly referred to as anorectal malformations. Atresia of the anal canal occurs with or without a fistulous opening to an ectopic location on the perineum, within the urinary system, or into the vaginal vestibule.
HarvestCode=10 - Description	Anal Atresia (imperforate anus)	Major abnormality of gastrointestinal system, Anal Atresia (imperforate anus)
HarvestCode=20 - Definition	<blank>	A developmental defect of the diaphragm that allows abdominal viscera to herniate into the chest. The volume of herniated contents may be small or large enough to contain most of the gut, spleen, or liver.
HarvestCode=20 - Description	Congenital diaphragmatic hernia (CDH)	Major abnormality of abdominal wall, Congenital diaphragmatic hernia (CDH)
HarvestCode=30 - Definition	<blank>	A congenital defect characterized by a defect in the anterior abdominal wall through which the intestines protrude. There is no sac covering the intestines. The defect is usually located to the right of the umbilicus.
HarvestCode=30 - Description	Gastroschisis	Major abnormality of abdominal wall, Gastroschisis

HarvestCode=40 - Definition	<blank>	A disorder of the enteric nervous system characterized by an absence of ganglion cells in the distal colon resulting in a functional obstruction.
HarvestCode=40 - Description	Hirschsprung's disease (Congenital aganglionic megacolon)	Major abnormality of gastrointestinal system, Hirschsprung's disease (Congenital aganglionic megacolon)
HarvestCode=50 - Definition	<blank>	Abnormal placement and fixation of intestines.
HarvestCode=50 - Description	Intestinal malrotation	Major abnormality of gastrointestinal system, Intestinal malrotation
HarvestCode=60 - Definition	<blank>	A defect in the medial anterior abdominal wall through which intraabdominal contents are extruded. The defect is covered by amnion and peritoneum and usually occurs at the base of the umbilical cord. The abdominal herniation usually includes small bowel and may include large bowel and/or liver.
HarvestCode=60 - Description	Omphalocele	Major abnormality of abdominal wall, Omphalocele
HarvestCode=70 - Definition	<blank>	Presence of any type of patent communication below the larynx connecting the tracheo-bronchial tree to the esophagus. May be associated with other anomalies, including VATER, VACTERL and tracheal clefts. Typically congenital, but may occur due to trauma or pressure necrosis.
HarvestCode=70 - Description	Tracheoesophageal fistula (TEF)	Major abnormality of larynx - trachea - or bronchus, Tracheoesophageal fistula (TEF)
HarvestCode=80	<blank>	<New choice added> Major abnormality of head, Choanal atresia
HarvestCode=90	<blank>	<New choice added> Major abnormality of head, Cleft lip
HarvestCode=100	<blank>	<New choice added> Major abnormality of head, Cleft palate
HarvestCode=110	<blank>	<New choice added> Major abnormality of head
HarvestCode=120	<blank>	<New choice added> Major abnormality of brain, Hydrocephalus
HarvestCode=130	<blank>	<New choice added> Major abnormality of brain, Macrocephaly
HarvestCode=140	<blank>	<New choice added> Major abnormality of brain, Microcephaly
HarvestCode=150	<blank>	<New choice added> Major abnormality of brain
HarvestCode=160	<blank>	<New choice added> Major abnormality of spinal cord, Myelomeningocele
HarvestCode=170	<blank>	<New choice added> Major abnormality of spinal cord, Spina bifida
HarvestCode=180	<blank>	<New choice added> Major abnormality of spinal cord

HarvestCode=190	<blank>	<New choice added> Major abnormality of spine, Scoliosis
HarvestCode=200	<blank>	<New choice added> Major abnormality of spine
HarvestCode=210	<blank>	<New choice added> Major abnormality of larynx - trachea - or bronchus, Laryngomalacia
HarvestCode=220	<blank>	<New choice added> Major abnormality of larynx - trachea - or bronchus, Congenital tracheal stenosis
HarvestCode=230	<blank>	<New choice added> Major abnormality of larynx - trachea - or bronchus, Tracheomalacia
HarvestCode=240	<blank>	<New choice added> Major abnormality of larynx - trachea - or bronchus, Bronchomalacia
HarvestCode=250	<blank>	<New choice added> Major abnormality of larynx - trachea - or bronchus
HarvestCode=260	<blank>	<New choice added> Major abnormality of lung, Congenital lobar emphysema (CLE)
HarvestCode=270	<blank>	<New choice added> Major abnormality of lung, Cystic congenital adenomatous malformation of the lung (CAM)
HarvestCode=280	<blank>	<New choice added> Major abnormality of lung, Cystic fibrosis
HarvestCode=290	<blank>	<New choice added> Major abnormality of lung, Pulmonary lymphangiectasia
HarvestCode=300	<blank>	<New choice added> Major abnormality of lung
HarvestCode=310	<blank>	<New choice added> Major abnormality of gastrointestinal system, Biliary atresia
HarvestCode=320	<blank>	<New choice added> Major abnormality of gastrointestinal system, Duodenal atresia
HarvestCode=330	<blank>	<New choice added> Major abnormality of gastrointestinal system, Duodenal stenosis
HarvestCode=340	<blank>	<New choice added> Major abnormality of gastrointestinal system, Jujenal atresia
HarvestCode=350	<blank>	<New choice added> Major abnormality of gastrointestinal system, Jujenal stenosis
HarvestCode=360	<blank>	<New choice added> Major abnormality of gastrointestinal system, Ileal atresia

HarvestCode=370	<blank>	<New choice added> Major abnormality of gastrointestinal system, Ileal stenosis
HarvestCode=380	<blank>	<New choice added> Major abnormality of gastrointestinal system, Stenosis of large intestine
HarvestCode=390	<blank>	<New choice added> Major abnormality of gastrointestinal system, Atresia of large intestine
HarvestCode=400	<blank>	<New choice added> Major abnormality of gastrointestinal system, Atresia of rectum
HarvestCode=410	<blank>	<New choice added> Major abnormality of gastrointestinal system, Stenosis of rectum
HarvestCode=420	<blank>	<New choice added> Major abnormality of gastrointestinal system
HarvestCode=430	<blank>	<New choice added> Major abnormality of kidney - ureter - or bladder
HarvestCode=990	<blank>	<New choice added> Other

540 **Major Noncardiac Abnormality - Other - Specify**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataLength	<Blank>	100
DataSource	<Blank>	User
DBTableName	<Blank>	NCAA
Definition	<Blank>	Indicate the other major noncardiac abnormality.
Harvest	<Blank>	Yes
LongName	<Blank>	Major Noncardiac Abnormality - Other - Specify
ParentHarvestCodes	<Blank>	990
ParentShortName	<Blank>	NCAA
ParentValue	<Blank>	= "Other"
ShortName	<Blank>	NCAAOthSp
VendorDataType	<Blank>	Text

550 **Chromosomal Abnormalities Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

570 **Chromosomal Abnormality**

Detail changed:	Changed from:	Changed to:
HarvestCode=230	Monosomy X	<choice was deleted>

580 **Chromosomal Abnormality - Other - Specify**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataLength	<Blank>	100
DataSource	<Blank>	User
DBTableName	<Blank>	ChromAbnormalities
Definition	<Blank>	Indicate the other chromosomal abnormalities.
Harvest	<Blank>	Yes
LongName	<Blank>	Chromosomal Abnormality - Other - Specify
ParentHarvestCodes	<Blank>	310
ParentShortName	<Blank>	ChromAb
ParentValue	<Blank>	= "Other chromosomal abnormality"
ShortName	<Blank>	ChromAbOthSp
VendorDataType	<Blank>	Text

590 **Syndromes Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

610 **Syndrome**

Detail changed:	Changed from:	Changed to:
HarvestCode=520	<blank>	<New choice added> von Willebrand disease (vWD)
HarvestCode=530	<blank>	<New choice added> Prune Belly Syndrome
HarvestCode=540	<blank>	<New choice added> Pierre Robin syndrome
HarvestCode=550	<blank>	<New choice added> Sickle cell disease
HarvestCode=560	<blank>	<New choice added> Sickle cell trait
HarvestCode=570	<blank>	<New choice added> Ehlers-Danlos Syndrome

620 **Syndrome - Other - Specify**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataLength	<Blank>	100
DataSource	<Blank>	User
DBTableName	<Blank>	Syndromes
Definition	<Blank>	Indicate the other “Syndrome” or “Syndromic abnormality”.
Harvest	<Blank>	Yes
LongName	<Blank>	Syndrome - Other - Specify
ParentHarvestCodes	<Blank>	510
ParentShortName	<Blank>	Syndrome
ParentValue	<Blank>	= "Other syndromic abnormality"
ShortName	<Blank>	SyndromeOthSp
VendorDataType	<Blank>	Text

640 **Hospital Zip Code**

Detail changed:	Changed from:	Changed to:
DataLength	10	20
Definition	Indicate the ZIP Code of the hospital. Outside the USA, these data may be known by other names such as Postal Code (needing 6 characters). Software should allow sites to collect up to 10 characters to allow for Zip+4 values. This field should be collected in compliance with state/local privacy laws.	Indicate the ZIP Code of the hospital. Outside the USA, these data may be known by other names such as Postal Code. This field should be collected in compliance with state/local privacy laws.

650 **Hospital State**

Detail changed:	Changed from:	Changed to:
DataLength	2	50
Definition	Indicate the abbreviation of the state or province in which the hospital is located.	Indicate the region of the country (i.e., state or province) in which the hospital is located.

680 **Payor - Government Health Insurance - Medicare**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PayorGov
ParentValue	<Blank>	= "Yes"

690 **Medicare Fee For Service**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PayorGovMcare
ParentValue	<Blank>	= "Yes"

695 **Medicare Health Insurance Claim Number**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataLength	<Blank>	25
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the Health Insurance Claim (HIC) number of the primary beneficiary. The HIC number consists of the Social Security number and an alpha-numeric identifier (usually one digit but may be two digits). It is the number found on a patient's Medicare card. This field should be collected in compliance with state/local privacy laws.
Harvest	<Blank>	Optional
LongName	<Blank>	Medicare Health Insurance Claim Number
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PayorGovMcare
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	MHICNumber
VendorDataType	<Blank>	Text

700 **Payor - Government Health Insurance - Medicaid**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PayorGov
ParentValue	<Blank>	= "Yes"

710 **Payor - Government Health Insurance - Military Health Care**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1

ParentShortName	<Blank>	PayorGov
ParentValue	<Blank>	= "Yes"

720 **Payor - Government Health Insurance - State-Specific Plan**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PayorGov
ParentValue	<Blank>	= "Yes"

730 **Payor - Government Health Insurance - Indian Health Service**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PayorGov
ParentValue	<Blank>	= "Yes"

810 **Weight in Kilograms**

Detail changed:	Changed from:	Changed to:
HighValue	200.0	200.000
VendorDataType	Real	Real, at least 3 decimal places

830 **Preoperative Factor Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

850 **Preoperative Factor**

Detail changed:	Changed from:	Changed to:
HarvestCode=510	<blank>	<New choice added> Asthma
HarvestCode=520	<blank>	<New choice added> Bronchopulmonary dysplasia (BPD)
HarvestCode=530	<blank>	<New choice added> ICD (AICD) ([automatic] implantable cardioverter defibrillator) present
HarvestCode=540	<blank>	<New choice added> Pacemaker present
HarvestCode=570	<blank>	<New choice added> Tobacco use
HarvestCode=580	<blank>	<New choice added> Family History of Coronary artery disease

HarvestCode=590	<blank>	<New choice added> Dyslipidemia

860 **Antenatal Diagnosis of Congenital Heart Disease**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

890 **Diagnoses**

Detail changed:	Changed from:	Changed to:
HarvestCode=10 - Definition	Small interatrial communication in the region of the foramen ovale characterized by no deficiency of the septum primum and a normal limbus with no deficiency of the septum secundum.	A small interatrial communication (or potential communication) confined to the region of the oval fossa (fossa ovalis) characterized by no deficiency of the primary atrial septum (septum primum) and a normal limbus with no deficiency of the septum secundum (superior interatrial fold).
HarvestCode=20 - Definition	An ASD confined to the region of the fossa ovalis; its most common etiology is a deficiency of the septum primum, but deficieny of the limbus or septum secundum may also contribute.	A congenital cardiac malformation in which there is an interatrial communication confined to the region of the oval fossa (fossa ovalis), most commonly due to a deficiency of the primary atrial septum (septum primum) but deficiency of the septum secundum (superior interatrial fold) may also contribute.
HarvestCode=30 - Definition	Indicate if the patient has the diagnosis of “ASD, Sinus venosus”. An “ASD, Sinus venosus” is defined as a defect with a vena cava or pulmonary vein (or veins) that overrides the atrial septum or the superior interatrial fold (septum secundum) producing an interatrial or anomalous venoatrial communication. Although the term sinus venosus atrial septal defect is commonly used, the lesion is more properly termed a sinus venosus communication because, while it functions as an interatrial communication, this lesion is not a defect of the true atrial septum.	A congenital cardiac malformation in which there is a caval vein (vena cava) and/or pulmonary vein (or veins) that overrides the atrial septum or the septum secundum (superior interatrial fold) producing an interatrial or anomalous venoatrial communication Although the term sinus venosus atrial septal defect is commonly used, the lesion is more properly termed a sinus venosus communication because, while it functions as an interatrial communication, this lesion is not a defect of the atrial septum.
HarvestCode=40 - Definition	Deficiency of the wall (sinus septum) separating the left atrium from the coronary sinus, often allowing blood to shunt from the left atrium to the right atrium via the coronary sinus ostium. May or may not be associated with a persistent left superior vena cava.	A congenital cardiac malformation in which there is a deficiency of the walls separating the left atrium from the coronary sinus allowing interatrial communication through the coronary sinus ostium.
HarvestCode=350 - Description	Pulmonary atresia, VSD-MAPCA (pseudotruncus)	Pulmonary atresia, VSD-MAPCA
HarvestCode=390 - Definition	Tricuspid stenosis may be due to congenital factors (valvular hypoplasia, abnormal subvalvar apparatus, double-orifice valve, parachute deformity) or acquired (post cardiac surgery or secondary to carcinoid, rheumatic fever, tumor, systemic disease, iatrogenic, or other causes).	Tricuspid stenosis may be due to congenital factors (valvar hypoplasia, abnormal subvalvar apparatus, double-orifice valve, parachute deformity) or acquired (post cardiac surgery or secondary to carcinoid, rheumatic fever, tumor, systemic disease, iatrogenic, or other causes).

HarvestCode=550 - Definition	Subaortic obstruction can be caused by different lesions: subaortic membrane or tunnel, accessory mitral valve tissue, abnormal insertion of the mitral anterior leaflet to the ventricular septum, deviation of the outlet septum (seen in coarctation of the aorta and interrupted aortic arch), or a restrictive bulboventricular foramen in single ventricle complexes. The Shone complex consists of subvalvar aortic stenosis in association with supravalvar mitral ring, parachute mitral valve, and coarctation of aorta. Subvalvar aortic stenosis may be categorized into two types: localized subvalvar aortic stenosis, which consists of a fibrous or fibromuscular ridge, and diffuse tunnel subvalvar aortic stenosis, in which circumferential narrowing commences at the annular level and extends downward for 1-3 cm. Idiopathic hypertrophic subaortic stenosis (IHSS) is also know as hypertrophic obstructive cardiomyopathy (HOCM), and is characterized by a primary hypertrophy of the myocardium. The obstructive forms involve different degrees of dynamic subvalvar aortic obstruction from a thickened ventricular wall and anterior motion of the mitral valve. Definitive nomenclature and therapeutic options for IHSS are listed under cardiomyopathy.	Subaortic obstruction can be caused by different lesions: subaortic membrane or tunnel, accessory mitral valve tissue, abnormal insertion of the mitral anterior leaflet to the ventricular septum, deviation of the outlet septum (seen in coarctation of the aorta and interrupted aortic arch), or a restrictive bulboventricular foramen in single ventricle complexes. The Shone complex consists of subvalvar aortic stenosis in association with supravalvar mitral ring, parachute mitral valve, and coarctation of aorta. Subvalvar aortic stenosis may be categorized into two types: localized subvalvar aortic stenosis, which consists of a fibrous or fibromuscular ridge, and diffuse tunnel subvalvar aortic stenosis, in which circumferential narrowing commences at the annular level and extends downward for 1-3 cm. Idiopathic hypertrophic subaortic stenosis (IHSS) is also known as hypertrophic obstructive cardiomyopathy (HOCM), and is characterized by a primary hypertrophy of the myocardium. The obstructive forms involve different degrees of dynamic subvalvar aortic obstruction from a thickened ventricular wall and anterior motion of the mitral valve. Definitive nomenclature and therapeutic options for IHSS are listed under cardiomyopathy.
HarvestCode=620 - Definition	This diagnostic subgroup may be used to delineate aortic valve cusp number (unicuspid, bicuspid, tricuspid, more than three cusps), commissural fusion (nromal, partially fused, completely fused), and valve leaflet (normal, thickened, dysplastic, calcified, gelatinous), annulus (normal, hypoplastic, calcified), or sinus description (normal, dilated). Note that any extensive descriptors chosen within those made available by a vendor will be converted, at harvest, to Aortic valve, Other.	This diagnostic subgroup may be used to delineate aortic valve cusp number (unicuspid, bicuspid, tricuspid, more than three cusps), commissural fusion (normal, partially fused, completely fused), and valve leaflet (normal, thickened, dysplastic, calcified, gelatinous), annulus (normal, hypoplastic, calcified), or sinus description (normal, dilated). Note that any extensive descriptors chosen within those made available by a vendor will be converted, at harvest, to Aortic valve, Other.
HarvestCode=660 - Definition	Valvar mitral stenosis may arise from congenital (annular and / or leaflet) or acquired causes, both surgical (after mitral valve repair or replacement or other cardiac surgery) and non-surgical (post rheumatic heart disease, infective endocarditis, ischemia, myxomatomous degeneration, trauma, or cardiomyopathy). Mitral valve annular hypoplasia is distinguished from severe mitral valve hypoplasia and mitral valve atresia, which are typically components of hypoplastic left heart syndrome. When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	Valvar mitral stenosis may arise from congenital (annular and / or leaflet) or acquired causes, both surgical (after mitral valve repair or replacement or other cardiac surgery) and non-surgical (post rheumatic heart disease, infective endocarditis, ischemia, myxomatous degeneration, trauma, or cardiomyopathy). Mitral valve annular hypoplasia is distinguished from severe mitral valve hypoplasia and mitral valve atresia, which are typically components of hypoplastic left heart syndrome. When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.

HarvestCode=710 - Definition	Mitral regurgitation may arise from congenital (at the annular, leaflet or subvalvar level) or acquired causes both surgical (after mitral valve repair or replacement, subaortic stenosis repair, atrioventricular canal repair, cardiac transplantation, or other cardiac surgery) and non-surgical (post rheumatic heart disease, infective endocarditis, ischemia (with chordal rupture or papillary muscle infarct), myxomatomous degeneration including Barlow's syndrome, trauma, or cardiomyopathy). Congenital lesions at the annular level include annular dilatation or deformation (usually deformation is consequent to associated lesions). At the valve leaflet level, mitral regurgitation may be due to a cleft, hypoplasia or agenesis of leaflet(s), excessive leaflet tissue, or a double orifice valve. At the subvalvar level, mitral regurgitation may be secondary to chordae tendineae anomalies (agenesis, rupture, elongation, or shortening as in funnel valve), or to papillary muscle anomalies (hypoplasia or agenesis, shortening, elongation, single-parachute, or multiple-hammock valve). When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.	Mitral regurgitation may arise from congenital (at the annular, leaflet or subvalvar level) or acquired causes both surgical (after mitral valve repair or replacement, subaortic stenosis repair, atrioventricular canal repair, cardiac transplantation, or other cardiac surgery) and non-surgical (post rheumatic heart disease, infective endocarditis, ischemia (with chordal rupture or papillary muscle infarct), myxomatous degeneration including Barlow's syndrome, trauma, or cardiomyopathy). Congenital lesions at the annular level include annular dilatation or deformation (usually deformation is consequent to associated lesions). At the valve leaflet level, mitral regurgitation may be due to a cleft, hypoplasia or agenesis of leaflet(s), excessive leaflet tissue, or a double orifice valve. At the subvalvar level, mitral regurgitation may be secondary to chordae tendineae anomalies (agenesis, rupture, elongation, or shortening as in funnel valve), or to papillary muscle anomalies (hypoplasia or agenesis, shortening, elongation, single-parachute, or multiple-hammock valve). When coding multiple mitral valvar lesions the predominant defect causing the functional effect (regurgitation, stenosis, or regurgitation and stenosis) should be listed as the primary defect.
HarvestCode=740 - Definition	Cardiomyopathy is a term applied to a wide spectrum of cardiac diseases in which the predominant feature is poor myocardial function in the absence of any anatomic abnormalities. Cardiomyopathies can be dividied into three relatively easily distinguishable entities: (1) dilated, characterized by ventricular dilatation and systolic dysfunction; (2) hypertrophic, characterized by physiologically inappropriate hypertrophy of the left ventricle; and (3) restrictive, characterized by diastolic dysfunction, with a presentation often identical to constrictive pericarditis. Also included in this diagnostic category are patients with a cardiomyopathy or syndrome confined to the right ventricle, for example: (1) arrhythmogenic right ventricular dysplasia; (2) Uhl's syndrome (hypoplasia of right ventricular myocardium, parchment heart); or (3) spongiform cardiomyopathy.	Cardiomyopathy is a term applied to a wide spectrum of cardiac diseases in which the predominant feature is poor myocardial function in the absence of any anatomic abnormalities. Cardiomyopathies can be divided into three relatively easily distinguishable entities: (1) dilated, characterized by ventricular dilatation and systolic dysfunction; (2) hypertrophic, characterized by physiologically inappropriate hypertrophy of the left ventricle; and (3) restrictive, characterized by diastolic dysfunction, with a presentation often identical to constrictive pericarditis. Also included in this diagnostic category are patients with a cardiomyopathy or syndrome confined to the right ventricle, for example: (1) arrhythmogenic right ventricular dysplasia; (2) Uhl's syndrome (hypoplasia of right ventricular myocardium, parchment heart); or (3) spongiform cardiomyopathy.

HarvestCode=790 - Definition	Single morphologically left ventricle (smooth internal walls, lack chordal attachments of AV valves to the rudimentary septal surface) that receives both atrioventricular valves.	A congenital cardiac malformation in which both atria connect to a single, morphologically left ventricle. The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

HarvestCode=800 - Definition	Single morphologically right ventricle (more heavily trabeculated, generally have chordal attachments of AV valve to the septal surfaces) that receives both atrioventricular valves.	A congenital cardiac malformation in which both atria connect to a single, morphologically right ventricle The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

HarvestCode=810 - Definition	Single ventricle anomalies with mitral atresia. May also be associated with double outlet right ventricle, congenitally corrected transposition, pulmonary atresia, or pulmonary stenosis.	A congenital cardiac malformation in which there is no orifice of mitral valve The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

HarvestCode=820 - Definition	Single ventricle anomalies with tricuspid atresia. May also be associated with complete transposition of the great arteries, congenitally corrected transposition of the great arteries, pulmonary atresia, pulmonary stenosis, subaortic stenosis, or ventricular septal defect (small or large).	A congenital cardiac malformation in which there is no orifice of tricuspid valve. The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

HarvestCode=830 - Definition	Single ventricle anomalies with a common atrioventricular (AV) valve and only one completely well developed ventricle. If the common AV valve opens predominantly into the morphologic left ventricle, the defect is termed a left ventricular (LV)–type or LV-dominant AV septal defect. If the common AV valve opens predominantly into the morphologic right ventricle, the defect is termed a right ventricular (RV)–type or RV-dominant AV septal defect.	Single ventricle anomalies with a common atrioventricular (AV) valve and only one completely well developed ventricle. If the common AV valve opens predominantly into the morphologic left ventricle, the defect is termed a left ventricular (LV)–type or LV-dominant AV septal defect. If the common AV valve opens predominantly into the morphologic right ventricle, the defect is termed a right ventricular (RV)–type or RV-dominant AV septal defect. The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart".

HarvestCode=840 - Definition	Visceral heterotaxy syndrome is literally defined as a pattern of anatomic organization of the thoracic and abdominal organs that is neither the expected usual or normal arrangement (so-called situs solitus) nor complete situs inversus (the unusual or mirror-image arrangement of normal). If asymmetry of the thoracic and abdominal viscera is the usual or normal situation, visceral heterotaxy syndrome includes patients with an unusual degree of thoracic and abdominal visceral symmetry. This broad term includes patients with a wide variety of complex cardiac lesions. One way to impose order on this diverse group of cardiac lesions is to stratify them according to the morphology of the atrial appendages. In atrial appendage isomerism, both atrial appendages are similar rather than displaying their usual distinctive morphology. Right or left atrial appendage isomerism exists when both atria have right or left atrial appendage morphologic characteristics, respectively. Right atrial appendage isomerism is frequently associated with bilaterally trilobed lungs (each with short bronchi) and asplenia. Left atrial appendage isomerism frequently is associated with bilaterally bilobed lungs (each with long bronchi) and polysplenia. Many types of anomalies of systemic venous connection are frequently associated with heterotaxy syndrome.Visceral heterotaxy syndrome is literally defined as a pattern of anatomic organization of the thoracic and abdominal organs that is neither the expected usual or normal arrangement (so-called situs solitus) nor complete situs inversus (the unusual or mirror-image arrangement of normal). If asymmetry of the thoracic and abdominal viscera is the usual or normal situation, visceral heterotaxy syndrome includes patients with an unusual degree of thoracic and abdominal visceral symmetry. This broad term includes patients with a wide variety of complex cardiac lesions. One way to impose order on this diverse group of cardiac lesions is to stratify them according to the morphology of the atrial appendages. In atrial appendage isomerism, both atrial appendages are similar rather than displaying their usual distinctive morphology. Right or left atrial appendage isomerism exists when both atria have right or left atrial appendage morphologic characteristics, respectively. Right atrial appendage isomerism is frequently associated with bilaterally trilobed lungs (each with short bronchi) and asplenia. Left atrial appendage isomerism frequently is associated with bilaterally bilobed lungs (each with long bronchi) and polysplenia. Many types of anomalies of systemic venous connection are frequently associated with heterotaxy syndrome.	"Heterotaxia syndrome" is synonymous with "heterotaxy", "visceral heterotaxy", and "heterotaxy syndrome". Heterotaxy is defined as an abnormality where the internal thoraco-abdominal organs demonstrate abnormal arrangement across the left-right axis of the body. By convention, heterotaxy does not include patients with either the expected usual or normal arrangement of the internal organs along the left-right axis, also known as ‘situs solitus’, nor patients with complete mirror-imaged arrangement of the internal organs along the left-right axis also known as ‘situs inversus’. The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

HarvestCode=850 - Definition	If the single ventricle is of primitive or indeterminate type, other is chosen in coding. It is recognized that a considerable variety of other structural cardiac malformations (e.g., biventricular hearts with straddling atrioventricular valves, pulmonary atresia with intact ventricular septum, some complex forms of double outlet right ventricle) may at times be best managed in a fashion similar to that which is used to treat univentricular hearts. They are not to be coded in this section of the nomenclature, but according to the underlying lesions.	If the single ventricle is of primitive or indeterminate type, other is chosen in coding. It is recognized that a considerable variety of other structural cardiac malformations (e.g., biventricular hearts with straddling atrioventricular valves, pulmonary atresia with intact ventricular septum, some complex forms of double outlet right ventricle) may at times be best managed in a fashion similar to that which is used to treat univentricular hearts. They are not to be coded in this section of the nomenclature, but according to the underlying lesions. The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

HarvestCode=851 - Definition	Indicate if the patient has the diagnosis of “Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)”. In the event of Single Ventricle occurring in association with Total anomalous pulmonary venous connection (TAPVC), code “Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)”, and then use additional (secondary) diagnostic codes to describe the Single Ventricle and the Total anomalous pulmonary venous connection (TAPVC) separately to provide further documentation about the Single Ventricle and Total anomalous pulmonary venous connection (TAPVC) types. {“Total anomalous pulmonary venous connection (TAPVC)” is defined as a heart where all of the pulmonary veins connect anomalously with the right atrium or to one or more of its venous tributaries. None of the pulmonary veins connect normally to the left atrium.} {The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term “single ventricle” as synonymous for the "functionally univentricular heart". (The functionally univentricular heart is defined as a spectrum of cardiac malformations in which entire ventricular mass is functionally univentricular; in other words, whenever only one ventricle is capable, for whatever reason, of supporting either the systemic or the pulmonary circulation.) The consensus of the EACTS and STS Congenital Heart Surgery Database Committees is that the nomenclature proposal for single ventricle hearts would encompass hearts with double inlet atrioventricular connection (both double inlet left ventricle [DILV] and double inlet right ventricle [DIRV]), hearts with absence of one atrioventricular connection (mitral atresia and tricuspid atresia), hearts with a common atrioventricular valve and only one completely well-developed ventricle (unbalanced common atrioventricular canal defect), hearts with only one fully well-developed ventricle and heterotaxia syndrome (single ventricle heterotaxia syndrome), and finally other rare forms of univentricular hearts that do not fit in one of the specified major categories. In the version of the IPCCC derived from the nomenclature of the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and the STS, patients classified in this section of the nomenclature, therefore, include all those who would be coded using the Short List for “Single Ventricle”, specifically: (1) Single ventricle; (2) Single ventricle, DILV; (3) Single ventricle, DIRV; (4) Single ventricle, Heterotaxia syndrome; (5) Single ventricle, Mitral atresia; (6) Single ventricle, Tricuspid atresia; (7) Single ventricle, Unbalanced AV canal. (Despite the recognition that hypoplastic left heart syndrome is a common form of functionally univentricular heart, with a single or dominant ventricle of right ventricular morphology, the EACTS-STS version of the IPCCC includes an entirely separate section for consideration of hypoplastic left heart syndrome. Also, it is recognized that a considerable variety of other structural cardiac malformations, such as pulmonary atresia with intact ventricular septum, biventricular hearts with straddling atrioventricular valves, and some complex forms of double outlet right ventricle (DORV), may at times be best managed in a fashion similar to that which is used to treat other functionally univentricular hearts. Nomenclature for description of those entities, however, is not included in this	Indicate if the patient has the diagnosis of "Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)". In the event of Single Ventricle occurring in association with Total anomalous pulmonary venous connection (TAPVC), code "Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)", and then use additional (secondary) diagnostic codes to describe the Single Ventricle and the Total anomalous pulmonary venous connection (TAPVC) separately to provide further documentation about the Single Ventricle and Total anomalous pulmonary venous connection (TAPVC) types. {"Total anomalous pulmonary venous connection (TAPVC)" is defined as a heart where all of the pulmonary veins connect anomalously with the right atrium or to one or more of its venous tributaries. None of the pulmonary veins connect normally to the left atrium.} The version of the IPCCC derived from the International Congenital Heart Surgery Nomenclature and Database Project of the EACTS and STS uses the term "single ventricle" as synonymous for the "functionally univentricular heart". The term "functionally univentricular heart" describes a spectrum of congenital cardiovascular malformations in which the ventricular mass may not readily lend itself to partitioning that commits one ventricular pump to the systemic circulation, and another to the pulmonary circulation. A heart may be functionally univentricular because of its anatomy or because of the lack of feasibility or lack of advisability of surgically partitioning the ventricular mass. Common lesions in this category typically include double inlet right ventricle (DIRV), double inlet left ventricle (DILV), tricuspid atresia, mitral atresia, and hypoplastic left heart syndrome. Other lesions which sometimes may be considered to be a functionally univentricular heart include complex forms of atrioventricular septal defect, double outlet right ventricle, congenitally corrected transposition, pulmonary atresia with intact ventricular septum, and other cardiovascular malformations. Specific diagnostic codes should be used whenever possible, and not the term "functionally univentricular heart". Reference: Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 - 21, February 2006.

	Single Ventricle section of the EACTS-STS version of the IPCCC.)} [1] [1]. Jacobs JP, Franklin RCG, Jacobs ML, Colan SD, Tchervenkov CI, Maruszewski B, Gaynor JW, Spray TL, Stellin G, Aiello VD, Béland MJ, Krogmann ON, Kurosawa H, Weinberg PM, Elliott MJ, Mavroudis C, Anderson R. Classification of the Functionally Univentricular Heart: Unity from mapped codes. In 2006 Supplement to Cardiology in the Young: Controversies and Challenges in the Management of the Functionally Univentricular Heart, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). Cardiology in the Young, Volume 16, Supplement 1: 9 – 21, February 2006.	
HarvestCode=930 - Definition	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In double outlet right ventricle, VSD type, there is an associated subaortic or doubly-committed VSD and no pulmonary outflow tract obstruction. Subaortic VSD's are located beneath the aortic valve. Doubly-committed VSD's lie beneath the leaflets of the aortic and pulmonary valves (juxtaarterial). In the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connection with DORV is to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate sngle ventricle listing.	Double outlet right ventricle is a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle. In double outlet right ventricle, VSD type, there is an associated subaortic or doubly-committed VSD and no pulmonary outflow tract obstruction. Subaortic VSD's are located beneath the aortic valve. Doubly-committed VSD's lie beneath the leaflets of the aortic and pulmonary valves (juxtaarterial). In the nomenclature developed for DORV, there must be usual atrial arrangements and concordant atrioventricular connections, and normal or near-normal sized ventricles. Discordant atrioventricular connection with DORV is to be coded under congenitally corrected TGA. DORV associated with univentricular atrioventricular connections, atrioventricular valve atresia, or atrial isomerism is to be coded under the appropriate single ventricle listing.
HarvestCode=1010 - Description	Coronary artery anomaly, Anomalous aortic origin of coronary artery from aorta (AAOCA)	Coronary artery anomaly, Anomalous aortic origin of coronary artery (AAOCA)
HarvestCode=1090 - Definition	The term vascular ring refers to a group of congenital vascular anomalies that encircle and comperss the esophagus and trachea. The compression may be from a complete anatomic ring (double aortic arch or right aortic arch with a left ligamentum) or from a compressive effect of an aberrant vessel (innominate artery compression syndrome).	The term vascular ring refers to a group of congenital vascular anomalies that encircle and compress the esophagus and trachea. The compression may be from a complete anatomic ring (double aortic arch or right aortic arch with a left ligamentum) or from a compressive effect of an aberrant vessel (innominate artery compression syndrome).
HarvestCode=1120 - Definition	Aortic dissection is a separation of the layers of the aortic wall. Extension of the plane of the dissection may progress to free rupture into the pericardium, mediastinum, or pleural space if not contained by the outer layers of the media and adventitia. Dissections may be classified as acute or chronic (if they have been present for more than 14 days)..	Aortic dissection is a separation of the layers of the aortic wall. Extension of the plane of the dissection may progress to free rupture into the pericardium, mediastinum, or pleural space if not contained by the outer layers of the media and adventitia. Dissections may be classified as acute or chronic (if they have been present for more than 14 days).
HarvestCode=1140 - Definition	Lung disease arising from any etiology (congenital or acquired, including pulmonary parenchymal disease, pulmonary vascular disease, congenital heart disease, neoplastm, etc.) which may result in death or lung or heart-lung transplant.	Lung disease arising from any etiology (congenital or acquired, including pulmonary parenchymal disease, pulmonary vascular disease, congenital heart disease, neoplasm, etc.) which may result in death or lung or heart-lung transplant.
HarvestCode=1150	Pectus	<choice was deleted>
HarvestCode=1310 - Definition	Inflammation/infection of the mediastinum, the cavity between the lungs which holds the heart, great vessels, trachea, esophagus, thymus, and connective tissues. In the United States mediastinits occurs most commonly following chest surgery.	Inflammation/infection of the mediastinum, the cavity between the lungs which holds the heart, great vessels, trachea, esophagus, thymus, and connective tissues. In the United States mediastinitis occurs most commonly following chest surgery.

HarvestCode=1325 - Definition	Heart disease, usually valvular (e.g., mitral or aortic), following an infection with group A streptococci	Heart disease, usually valvar (e.g., mitral or aortic), following an infection with group A streptococci
HarvestCode=1580 - Definition	Any peripheral vascular disease (congenital or acquired) or injury (from trauma or iatrogenic); vessels involved may include, but are not limited to femoral artery, femorial vein, iliac artery, brachial artery, etc.	Any peripheral vascular disease (congenital or acquired) or injury (from trauma or iatrogenic); vessels involved may include, but are not limited to femoral artery, femoral vein, iliac artery, brachial artery, etc.
HarvestCode=1590 - Definition	Status post - Heart transplantation, any technique, allograft or xenograft.	<blank>
HarvestCode=1600 - Definition	Status post - Lung or lobe transplantation of any type.	<blank>
HarvestCode=1610 - Definition	Status post - Heart and lung (single or double) transplantation.	<blank>
HarvestCode=2150	<blank>	<New choice added> ASD, Postoperative interatrial communication
HarvestCode=2160	<blank>	<New choice added> Rib tumor, Benign
HarvestCode=2170	<blank>	<New choice added> Rib tumor, Malignant
HarvestCode=2180	<blank>	<New choice added> Rib tumor, Metastatic
HarvestCode=2190	<blank>	<New choice added> Sternal tumor, Benign
HarvestCode=2200	<blank>	<New choice added> Sternal tumor, Malignant
HarvestCode=2210	<blank>	<New choice added> Sternal tumor, Metastatic
HarvestCode=2220	<blank>	<New choice added> Pectus carinatum
HarvestCode=2230	<blank>	<New choice added> Pectus excavatum
HarvestCode=2240	<blank>	<New choice added> Thoracic outlet syndrome
HarvestCode=2250	<blank>	<New choice added> Kawasaki disease
HarvestCode=2260	<blank>	<New choice added> Complication of cardiovascular catheterization procedure
HarvestCode=2270	<blank>	<New choice added> Complication of cardiovascular catheterization procedure, Device embolization
HarvestCode=2280	<blank>	<New choice added> Complication of cardiovascular catheterization procedure, Device malfunction
HarvestCode=2290	<blank>	<New choice added> Complication of cardiovascular catheterization procedure, Perforation

HarvestCode=2300	<blank>	<New choice added> Complication of interventional radiology procedure
HarvestCode=2310	<blank>	<New choice added> Complication of interventional radiology procedure, Device embolization
HarvestCode=2320	<blank>	<New choice added> Complication of interventional radiology procedure, Device malfunction
HarvestCode=2330	<blank>	<New choice added> Complication of interventional radiology procedure, Perforation
HarvestCode=2340	<blank>	<New choice added> Foreign body, Intracardiac foreign body
HarvestCode=2350	<blank>	<New choice added> Foreign body, Intravascular foreign body
HarvestCode=2360	<blank>	<New choice added> Open sternum with closed skin
HarvestCode=2370	<blank>	<New choice added> Open sternum with open skin (includes membrane placed to close skin)
HarvestCode=2380	<blank>	<New choice added> Retained sternal wire causing irritation
HarvestCode=2390	<blank>	<New choice added> Syncope
HarvestCode=2400	<blank>	<New choice added> Trauma, Blunt
HarvestCode=2410	<blank>	<New choice added> Trauma, Penetrating
HarvestCode=4010 - Definition	Status post - Suture closure of patent foramen ovale (PFO).	<blank>
HarvestCode=4020 - Definition	Status post - Suture closure of secundum (most frequently), coronary sinus, sinus venosus or common atrium ASD.	<blank>
HarvestCode=4030 - Definition	Status post - Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD.	<blank>
HarvestCode=4040 - Definition	Status post - Closure of any type ASD (including PFO) using a device.	<blank>
HarvestCode=4050 - Definition	Status post - Septation of common (single) atrium using any type patch material.	<blank>
HarvestCode=4060 - Definition	Status post - Creation of an atrial septal defect or enlargement of an existing atrial septal defect using a variety of modalities including balloon septostomy, blade septostomy, or surgical septectomy. Creation may be accomplished with or without use of cardiopulmonary bypass.	<blank>
HarvestCode=4070 - Definition	Status post - Intentional partial closure of any type ASD (partial suture or fenestrated patch closure).	<blank>

HarvestCode=4080 - Definition	Status post - Creation of a fenestration (window) in the septum between the atrial chambers. Usually performed using a hole punch, creating a specifically sized communication in patch material placed on the atrial septum.	<blank>
HarvestCode=4085 - Definition	Status post - Closure of previously created atrial fenestration using any method including device, primary suture, or patch.	<blank>
HarvestCode=4100 - Definition	Status post - Suture closure of any type VSD.	<blank>
HarvestCode=4110 - Definition	Status post - Patch closure (using any type of patch material) of any type VSD.	<blank>
HarvestCode=4120 - Definition	Status post - Closure of any type VSD using a device.	<blank>
HarvestCode=4130 - Definition	Status post - Closure of more than one VSD using any method or combination of methods. Further information regarding each type of VSD closed and method of closure can be provided by additionally listing specifics for each VSD closed. In the case of multiple VSDs in which only one is closed the procedure should be coded as closure of a single VSD. The fundamental diagnosis, in this case, would be “VSD, Multiple” and a secondary diagnosis can be the morphological type of VSD that was closed at the time of surgery.	<blank>
HarvestCode=4140 - Definition	Status post - Creation of a ventricular septal defect or enlargement of an existing ventricular septal defect.	<blank>
HarvestCode=4150 - Definition	Status post - Creation of a fenestration (window) in the septum between the ventricular chambers. Usually performed using a hole punch, creating a specifically sized communication in patch material placed on the ventricular septum.	<blank>
HarvestCode=4170 - Definition	Status post - Repair of complete AV canal (AVSD) using one- or two-patch or other technique, with or without mitral valve cleft repair.	<blank>
HarvestCode=4180 - Definition	Status post - Repair of intermediate AV canal (AVSD) using ASD and VSD patch, or ASD patch and VSD suture, or other technique, with or without mitral valve cleft repair.	<blank>
HarvestCode=4190 - Definition	Status post - Repair of partial AV canal defect (primum ASD), any technique, with or without repair of cleft mitral valve.	<blank>
HarvestCode=4210 - Definition	Status post - Repair of AP window using one- or two-patch technique with cardiopulmonary bypass; or, without cardiopulmonary bypass, using transcatheter device or surgical closure.	<blank>
HarvestCode=4220 - Definition	Status post - Repair of pulmonary artery origin from the ascending aorta by direct reimplantation, autogenous flap, or conduit, with or without use of cardiopulmonary bypass.	<blank>

HarvestCode=4230 - Definition	Status post - Truncus arteriosus repair that most frequently includes patch VSD closure and placement of a conduit from RV to PA. In some cases, a conduit is not placed but an RV to PA connection is made by direct association. Very rarely, there is no VSD to be closed. Truncal valve repair or replacement should be coded separately (Valvuloplasty, Truncal valve; Valve replacement, Truncal valve), as would be the case as well with associated arch anomalies requiring repair (e.g., Interrupted aortic arch repair).	<blank>
HarvestCode=4240 - Definition	Status post - Truncal valve repair, any type.	<blank>
HarvestCode=4250 - Definition	Status post - Replacement of the truncal valve with a prosthetic valve.	<blank>
HarvestCode=4260 - Definition	Status post - PAPVC repair revolves around whether an intracardiac baffle is created to redirect pulmonary venous return to the left atrium or if the anomalous pulmonary vein is translocated and connected to the left atrium directly. If there is an associated ASD and it is closed, that procedure should also be listed.	<blank>
HarvestCode=4270 - Definition	Status post - In scimitar syndrome, PAPVC repair also revolves around whether an intracardiac baffle is created to redirect pulmonary venous return to the left atrium or if the anomalous pulmonary vein is translocated and connected to the left atrium directly. If there is an associated ASD and it is closed, that procedure should also be listed. Occasionally an ASD is created; this procedure also must be listed separately. Concomitant thoracic procedures (e.g., lobectomy, pneumonectomy) should also be included in the procedures listing.	<blank>
HarvestCode=4280 - Definition	Status post - Repair of TAPVC, any type. Issues surrounding TAPVC repair involve how the main pulmonary venous confluence anastomosis is fashioned, whether an associated ASD is closed or left open or enlarged (ASD closure and enlargement may be listed separately), and whether, particularly in mixed type TAPVC repair, an additional anomalous pulmonary vein is repaired surgically.	<blank>
HarvestCode=4290 - Definition	Status post - Repair of cor triatriatum. Surgical decision making revolves around the approach to the membrane creating the cor triatriatum defect, how any associated ASD is closed, and how any associated anomalous pulmonary vein connection is addressed. Both ASD closure and anomalous pulmonary venous connection may be listed as separate procedures.	<blank>
HarvestCode=4300 - Definition	Status post - Repair of pulmonary venous stenosis, whether congenital or acquired. Repair can be accomplished with a variety of approaches: sutureless, patch venoplasty, stent placement, etc.	<blank>
HarvestCode=4310 - Definition	Status post - The atrial baffle procedure code is used primarily for repair of systemic venous anomalies, as in redirection of left superior vena cava drainage to the right atrium.	<blank>

HarvestCode=4330 - Definition	Status post - With the exception of atrial baffle procedures (harvest code 310), anomalous systemic venous connection repair includes a range of surgical approaches, including, among others: ligation of anomalous vessels, reimplantation of anomalous vessels (with or without use of a conduit), or redirection of anomalous systemic venous flow through directly to the pulmonary circulation (bidirectional Glenn to redirect LSVC or RSVC to left or right pulmonary artery, respectively).	<blank>
HarvestCode=4340 - Definition	Status post - Stenosis or obstruction of a systemic vein (most commonly SVC or IVC) may be relieved with patch or conduit placement, excision of the stenotic area with primary reanastomosis or direct reimplantation.	<blank>
HarvestCode=4350 - Definition	Status post - Tetralogy of Fallot repair (assumes VSD closure and relief of pulmonary stenosis at one or more levels), without use of an incision in the infundibulum of the right ventricle for exposure. In most cases this would be a transatrial and transpulmonary artery approach to repair the VSD and relieve the pulmonary stenosis. If the main pulmonary artery incision is extended proximally through the pulmonary annulus, this must be considered "transannular" and thus a ventricular incision, though the length of the incision onto the ventricle itself may be minimal.	<blank>
HarvestCode=4360 - Definition	Status post - Tetralogy of Fallot repair (assumes VSD closure and relief of pulmonary stenosis at one or more levels), with use of a ventriculotomy incision, but without placement of a trans-pulmonary annulus patch. If the main pulmonary artery incision is extended proximally through the pulmonary annulus, this must be considered "transannular" and thus a ventricular incision, though the length of the incision onto the ventricle itself may be minimal.	<blank>
HarvestCode=4370 - Definition	Status post - Tetralogy of Fallot repair (assumes VSD closure and relief of pulmonary stenosis at one or more levels), with use of a ventriculotomy incision and placement of a trans-pulmonary annulus patch. If the main pulmonary artery incision is extended proximally through the pulmonary annulus, this must be considered "transannular" and thus a ventricular incision, though the length of the incision onto the ventricle itself may be minimal.	<blank>
HarvestCode=4380 - Definition	Status post - Tetralogy of Fallot repair (assumes VSD closure and relief of pulmonary stenosis at one or more levels), with placement of a right ventricle-to-pulmonary artery conduit. In this procedure the major components of pulmonary stenosis are relieved with placement of the RV-PA conduit.	<blank>
HarvestCode=4390 - Definition	Status post - Tetralogy of Fallot repair (assumes VSD closure and relief of pulmonary stenosis at one or more levels), with repair of associated AV canal defect. Repair of associated atrial septal defect or atrioventricular valve repair(s) should be listed as additional or secondary procedures under the primary TOF-AVC procedure.	<blank>
HarvestCode=4400 - Definition	Status post - Repair of tetralogy of Fallot with absent pulmonary valve complex. In most cases this repair will involve pulmonary valve replacement (pulmonary or aortic homograft, porcine, other) and reduction pulmonary artery arterioplasty.	<blank>

HarvestCode=4420 - Definition	Status post - For patients with pulmonary atresia with ventricular septal defect without MAPCAs, including those with tetralogy of Fallot with pulmonary atresia, repair may entail either a tetralogy-like repair with transannular patch placement, a VSD closure with placement of an RV-PA conduit, or an intraventricular tunnel VSD closure with transannular patch or RV-PA conduit placement. To assure an accurate count of repairs of pulmonary atresia-VSD without MAPCAs, even if a tetralogy-type repair or Rastelli-type repair is used, the pulmonary atresia-VSD code should be the code used, not Rastelli procedure or tetralogy of Fallot repair with transannular patch.	<blank>
HarvestCode=4430	Status post - Pulmonary atresia - VSD - MAPCA (pseudotruncus) repair	<choice was deleted>
HarvestCode=4440 - Definition	Status post - Anastomosis of aortopulmonary collateral arteries into the left, right, or main pulmonary artery or into a tube graft or other type of confluence. The unifocalization procedure may be done on or off bypass.	<blank>
HarvestCode=4450 - Definition	Status post - Occlusion, or closing off, of MAPCAs. This may be done with a transcatheter occluding device, usually a coil, or by surgical techniques.	<blank>
HarvestCode=4450 - Description	Status post - Occlusion MAPCA(s)	Status post - Occlusion of MAPCA(s)
HarvestCode=4460 - Definition	Status post - Reconstruction of the tricuspid valve may include but not be limited to a wide range of techniques including: leaflet patch extension, artificial chordae placement, papillary muscle transplocation with or without detachment. Annuloplasty techniques that may be done solely or in combination with leaflet, chordae or muscle repair to achieve a competent valve include: eccentric annuloplasty, Kay annular plication, purse-string annuloplasty (including semicircular annuloplasty), sliding annuloplasty, and annuloplasty with ring placement. Do not use this code if tricuspid valve malfunction is secondary to Ebstein's anomaly; instead use the Ebstein's repair procedure code.	<blank>
HarvestCode=4465 - Definition	Status post - To assure an accurate count of repairs of Ebstein's anomaly of the tricuspid valve, this procedure code was included. Repair of Ebstein's anomaly may include, among other techniques, repositioning of the tricuspid valve, plication of the atrialized right ventricle, or right reduction atrioplasty. Often associated ASD's may be closed and arrhythmias addressed with surgical ablation procedures. These procedures should be entered as separate procedure codes.	<blank>
HarvestCode=4470 - Definition	Status post - Replacement of the tricuspid valve with a prosthetic valve.	<blank>
HarvestCode=4480 - Definition	Status post - In a functional single ventricle heart, the tricuspid valve may be closed using a patch, thereby excluding the RV. Tricuspid valve closure may be used for infants with Ebstein's anomaly and severe tricuspid regurgitation or in patients with pulmonary atresia-intact ventricular septum with sinusoids.	<blank>
HarvestCode=4490 - Definition	Status post - Excision of the tricuspid valve without placement of a valve prosthesis.	<blank>

HarvestCode=4500 - Definition	Status post - Other tricuspid valve surgery not specified in procedure codes.	<blank>
HarvestCode=4510 - Definition	Status post - Included in this procedural code would be all RVOT procedures not elsewhere specified in the nomenclature system. These might be, among others: resection of subvalvar pulmonary stenosis (not DCRV type; may be localized fibrous diaphragm or high infundibular stenosis), right ventricular patch augmentation, or reduction pulmonary artery arterioplasty.	<blank>
HarvestCode=4520 - Definition	Status post - Partial biventricular repair; includes intracardiac repair with bidirectional cavopulmonary anastomosis to volume unload a small ventricle or poorly functioning ventricle.	<blank>
HarvestCode=4530 - Definition	Status post - Reconstruction of the main pulmonary artery trunk commonly using patch material. If balloon angioplasty is performed or a stent is placed in the main pulmonary artery intraoperatively, this code may be used in addition to the balloon dilation or stent placement code. If MPA reconstruction is performed with PA debanding, both codes should be listed.	<blank>
HarvestCode=4540 - Definition	Status post - Reconstruction of the right or left branch (or both right and left) pulmonary arteries (within the hilar bifurcation) commonly using patch material. If balloon angioplasty is performed or a stent is placed in the right or left (or both) pulmonary artery intraoperatively, this code may be used in addition to the balloon dilation or stent placement code. If, rarely, branch PA banding (single or bilateral) was performed in the past and reconstruction is performed associated with debanding, both codes should be listed.	<blank>
HarvestCode=4550 - Definition	Status post - Reconstruction of the peripheral right or left branch (or both right and left) pulmonary arteries (at or beyond the hilar bifurcation) commonly using patch material. If balloon angioplasty is performed or a stent is placed in the right or left (or both) peripheral pulmonary artery intraoperatively, this code may be used in addition to the balloon dilation or stent placement code.	<blank>
HarvestCode=4570 - Definition	Status post - Surgical repair of DCRV combines relief of the low infundibular stenosis (via muscle resection) and closure of a VSD when present. A ventriculotomy may be required and is repaired by patch enlargement of the infundibulum. VSD closure and patch enlargement of the infundibulum, if done, should be listed as separate procedure codes.	<blank>
HarvestCode=4580 - Definition	Status post - Conduit reoperation is the code to be used in the event of conduit failure, in whatever position (LV to aorta, LV to PA, RA to RV, RV to aorta, RV to PA, etc.), and from whatever cause (somatic growth, stenosis, insufficiency, infection, etc).	<blank>
HarvestCode=4590 - Definition	Status post - Valvuloplasty of the pulmonic valve may include a range of techniques including but not limited to: valvotomy with or without bypass, commissurotomy, and valvuloplasty.	<blank>

HarvestCode=4600 - Definition	Status post - Replacement of the pulmonic valve with a prosthetic valve. Care must be taken to differentiate between homograft pulmonic valve replacement and placement of a homograft RV-PA conduit.	<blank>
HarvestCode=4610 - Definition	Status post - Placement of a conduit, any type, from RV to PA.	<blank>
HarvestCode=4620 - Definition	Status post - Placement of a conduit, any type, from LV to PA.	<blank>
HarvestCode=4630 - Definition	Status post - Excision of the pulmonary valve without placement of a valve prosthesis.	<blank>
HarvestCode=4640 - Definition	Status post - Closure of a semilunar valve (pulmonic or aortic) by any technique.	<blank>
HarvestCode=4650 - Definition	Status post - Other pulmonic valve surgery not specified in procedure codes.	<blank>
HarvestCode=4660 - Definition	Status post - Valvuloplasty of the aortic valve for stenosis and/or insufficiency including, but not limited to the following techniques: valvotomy (open or closed), commissurotomy, aortic valve suspension, leaflet (left, right or noncoronary) partial resection, reduction, or leaflet shaving, extended valvuloplasty (freeing of leaflets, commissurotomy, and extension of leaflets using autologous or bovine pericardium), or annuloplasty (partial - interrupted or noncircumferential sutures, or complete - circumferential sutures).	<blank>
HarvestCode=4670 - Definition	Status post - Replacement of the aortic valve with a prosthetic valve (mechanical, bioprosthetic, or homograft). Use this code only if type of valve prosthesis is unknown or does not fit into the specific valve replacement codes available. Autograft valve replacement should be coded as a Ross procedure.	<blank>
HarvestCode=4680 - Definition	Status post - Replacement of the aortic valve with a mechanical prosthetic valve.	<blank>
HarvestCode=4690 - Definition	Status post - Replacement of the aortic valve with a bioprosthetic prosthetic valve.	<blank>
HarvestCode=4700 - Definition	Status post - Replacement of the aortic valve with a homograft prosthetic valve.	<blank>
HarvestCode=4715 - Definition	Status post - Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a bioprosthesis (e.g., porcine) in a conduit, often composite.	<blank>
HarvestCode=4720 - Definition	Status post - Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a mechnical prosthesis in a composite conduit.	<blank>
HarvestCode=4730 - Definition	Status post - Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a homograft.	<blank>
HarvestCode=4735 - Definition	Status post - Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) without replacing the aortic valve (using a tube graft).	<blank>

HarvestCode=4740 - Definition	Status post - Replacement of the aortic valve with a pulmonary autograft and replacement of the pulmonary valve with a homograft conduit.	<blank>
HarvestCode=4750 - Definition	Status post - Relief of left ventricular outflow tract obstruction associated with aortic annular hypoplasia, aortic valvar stenosis and/or aortic valvar insufficiency via Konno aortoventriculoplasty. Components of the surgery include a longitudinal incision in the aortic septum, a vertical incision in the outflow tract of the right ventricle to join the septal incision, aortic valve replacement, and patch reconstruction of the outflow tracts of both ventricles.	<blank>
HarvestCode=4760 - Definition	Status post - Relief of left ventricular outflow tract obstruction associated with aortic annular hypoplasia, aortic valvar stenosis and/or aortic valvar insufficiency via Konno aortoventriculoplasty using a pulmonary autograft root for the aortic root replacement.	<blank>
HarvestCode=4770 - Definition	Status post - Techniques included under this procedure code include those designed to effect aortic annular enlargement that are not included in other procedure codes. These include the Manougian and Nicks aortic annular enlargement procedures.	<blank>
HarvestCode=4780 - Definition	Status post - Subvalvar aortic stenosis repair by a range of techniques including excision, excision and myotomy, excision and myomectomy, myotomy, myomectomy, initial placement of apical-aortic conduit (LV to aorta conduit replacement would be coded as conduit reoperation) , Vouhé aortoventriculoplasty (aortic annular incision at commissure of left and right coronary cusps is carried down to the septum and RV infundibulum; septal muscle is resected, incisions are closed, and the aortic annulus is reconstituted), or other aortoventriculoplasty techniques.	<blank>
HarvestCode=4790 - Definition	Status post - Repair of supravalvar aortic stenosis involving all techniques of patch aortoplasty and aortoplasty involving the use of all autologous tissue. In simple patch aortoplasty a diamond-shaped patch may be used, in the Doty technique an extended patch is placed (Y-shaped patch, incision carried into two sinuses), and in the Brom repair the ascending aorta is transected, any fibrous ridge is resected, and the three sinuses are patched separately.	<blank>
HarvestCode=4800 - Definition	Status post - Other aortic valve surgery not specified in other procedure codes.	<blank>

HarvestCode=4810 - Definition	Status post - Sinus of Valsalva aneurysm repair can be organized by site of aneurysm (left, right or noncoronary sinus), type of repair (suture, patch graft, or root repair by tube graft or valved conduit), and approach used (from chamber of origin (aorta) or from chamber of penetration (LV, RV, PA, left or right atrium, etc.). Aortic root replacement procedures in association with sinus of Valsalva aneurysm repairs are usually for associated uncorrectable aortic insufficiency or multiple sinus involvement and the aortic root replacement procedure should also be listed. Additional procedures also performed at the time of sinus of Valsalva aneurysm repair include but are not limited to VSD closure, repair or replacement of aortic valve, and coronary reconstruction; these procedures should also be coded separately from the sinus of Valsalva aneurysm repair.	<blank>
HarvestCode=4820 - Definition	Status post - LV to aorta tunnel repair can be accomplished by suture, patch, or both, and may require reimplantation of the right coronary artery. Associated coronary artery procedures should be coded separately from the LV to aorta tunnel repair.	<blank>
HarvestCode=4830 - Definition	Status post - Repair of mitral valve including, but not limited to: valvotomy (closed or open heart), cleft repair, annuloplasty with or without ring, chordal reconstruction, commissuorotomy, leaflet repair, or papillary muscle repair.	<blank>
HarvestCode=4840 - Definition	Status post - Supravalvar mitral ring repair.	<blank>
HarvestCode=4850 - Definition	Status post - Replacement of mitral valve with prosthetic valve, any kind, in suprannular or annular position.	<blank>
HarvestCode=4860 - Definition	Status post - Other mitral valve surgery not specified in procedure codes.	<blank>
HarvestCode=4870 - Definition	Status post - The Norwood operation is synonymous with the term 'Norwood (Stage 1)' and is defined as an aortopulmonary connection and neoaortic arch construction resulting in univentricular physiology and pulmonary blood flow controlled with a calibrated systemic-to-pulmonary artery shunt, or a right ventricle to pulmonary artery conduit, or rarely, a cavopulmonary connection. When coding the procedure “Norwood procedure”, the primary procedure of the operation should be “Norwood procedure”. The second procedure (Procedure 2 after the Norwood procedure) must then document the source of pulmonary blood flow and be chosen from the following eight choices: 1. Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS) 2. Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery) 3. Shunt, Systemic to pulmonary, Other 4. Conduit placement, RV to PA 5. Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn) 6. Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn) 7. Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)	<blank>

HarvestCode=4880 - Definition	Status post - Performed in patients who have small but adequately sized ventricles to support systemic circulation. These patients usually have small, but not stenotic, aortic and/or mitral valves. Primary biventricular repair has consisted of extensive aortic arch and ascending aorta enlargement with a patch, closure of interventricular and interatrial communications, and conservative approach for left ventricular outflow tract obstruction (which may include mitral stenosis at any level, subaortic stenosis, aortic stenosis, aortic arch hypoplasia, coarctation, or interrupted aortic arch). Concurrent operations (e.g., coarctation repair, aortic valve repair or replacement, etc.) can be coded separately within the database.	<blank>
HarvestCode=4910 - Definition	Status post - Wedge resection of LV muscle, with suturing of cut edges together, to reduce LV volume.	<blank>
HarvestCode=4920 - Definition	Status post - Pericardial drainage can include a range of therapies including, but not limited to: pericardiocentesis, pericardiostomy tube placement, pericardial window creation, and open pericardial drainage (pericardiotomy).	<blank>
HarvestCode=4930 - Definition	Status post - Surgical removal of the pericardium.	<blank>
HarvestCode=4940 - Definition	Status post - Other pericardial procedures that include, but are not limited to: pericardial reconstruction for congenital absence of the pericardium, pericardial biopsy, pericardial mass or cyst excision.	<blank>
HarvestCode=4950 - Definition	Status post - Fontan-type procedure with atrio-pulmonary connection.	<blank>
HarvestCode=4960 - Definition	Status post - Fontan-type procedure with atrio-ventricular connection, either direct or with RA-RV conduit, valved or nonvalved.	<blank>
HarvestCode=4970 - Definition	Status post - Total cavopulmonary connection using an intraatrial lateral tunnel construction, with fenestration.	<blank>
HarvestCode=4980 - Definition	Status post - Total cavopulmonary connection using an intraatrial lateral tunnel construction, with no fenestration.	<blank>
HarvestCode=5000 - Definition	Status post - Total cavopulmonary connection using an external conduit to connect the infradiaphragmatic systemic venous return to the pulmonary artery, with fenestration.	<blank>
HarvestCode=5010 - Definition	Status post - Total cavopulmonary connection using an external conduit to connect the infradiaphragmatic systemic venous return to the pulmonary artery, with no fenestration.	<blank>
HarvestCode=5025 - Definition	Status post - Revision of a previous Fontan procedure to a total cavopulmonary connection.	<blank>
HarvestCode=5030 - Definition	Status post - Other Fontan procedure not specified in procedure codes. May include takedown of a Fontan procedure.	<blank>

HarvestCode=5035 - Definition	Status post - Creation of a prosthetic ventricular septum. Surgical procedure used to septate univentricular hearts with two atrioventricular valves. Additional procedures, such as resection of subpulmonic stenosis, should be listed separately.	<blank>
HarvestCode=5050 - Definition	Status post - Repair of congenitally corrected TGA by concomitant atrial switch (Mustard or Senning) and arterial switch operation. VSD closure is usually performed as well; this should be coded separately.	<blank>
HarvestCode=5060 - Definition	Status post - Repair of congenitally corrected TGA by concomitant atrial switch (Mustard or Senning) and VSD closure to the aortic valve with placement of an RV-to-PA conduit.	<blank>
HarvestCode=5070 - Definition	Status post - Repair of congenitally corrected TGA by VSD closure only.	<blank>
HarvestCode=5080 - Definition	Status post - Repair of congenitally corrected TGA by VSD closure and placement of an LV-to-PA conduit.	<blank>
HarvestCode=5090 - Definition	Status post - Any procedures for correction of CCTGA not otherwised specified in other listed procedure codes.	<blank>
HarvestCode=5110 - Definition	Status post - Arterial switch operation is used for repair of transposition of the great arteries (TGA). The pulmonary artery and aorta are transected and translocated so that the pulmonary artery arises from the right ventricle and the aorta from the left ventricle. Coronary artery transfer is also accomplished.	<blank>
HarvestCode=5120 - Definition	Status post - Arterial switch operation is used for repair of transposition of the great arteries (TGA). The pulmonary artery and aorta are transected and translocated so that the pulmonary artery arises from the right ventricle and the aorta from the left ventricle. Coronary artery transfer is also accomplished. The VSD is closed, usually with a patch.	<blank>
HarvestCode=5123 - Definition	Status post - Concomitant arterial switch operation and repair of the aortic arch in patients with transposition of the great arteries with intact ventricular septum and associated coarctation of the aorta or interrupted aortic arch.	<blank>
HarvestCode=5125 - Definition	Status post - Concomitant arterial switch operation with VSD closure and repair of aortic arch in patients with transposition of the great arteries with VSD and associated coarctation of the aorta or interrupted aortic arch.	<blank>
HarvestCode=5130 - Definition	Status post - Atrial baffle procedure for rerouting of venous flow in TGA effecting a “physiological repair”. The caval flow is directed behind the baffle to the mitral valve, left ventricle and pulmonary artery while the pulmonary venous flow is directed in front of the baffle to the tricuspid valve, right ventricle, and aorta. The Senning procedure uses atrial wall to construct the baffle.	<blank>

HarvestCode=5140 - Definition	Status post - Atrial baffle procedure for rerouting of venous flow in TGA effecting a “physiological repair”. The caval flow is directed behind the baffle to the mitral valve, left ventricle and pulmonary artery while pulmonary venous flow is directed in front of the baffle to the tricuspid valve, right ventricle, and aorta. The Mustard procedure uses patch material to construct the baffle.	<blank>
HarvestCode=5145 - Definition	Status post - Revision of a previous atrial baffle procedure (either Mustard or Senning), for any reason (e.g., obstruction, baffle leak).	<blank>
HarvestCode=5150 - Definition	Status post - Most often used for patients with TGA-VSD and significant LVOTO, the Rastelli operation consists of an LV-to-aorta intraventricular baffle closure of the VSD and placement of an RV-to-PA conduit.	<blank>
HarvestCode=5160 - Definition	Status post - The Lecompte (REV) intraventricular repair is designed for patients with abnormalities of ventriculoarterial connection in whom a standard intraventricular tunnel repair cannot be performed. It is also suitable for patients in whom an arterial switch procedure with tunneling of the VSD to the pulmonary artery cannot be performed because of pulmonary (left ventricular outflow tract) stenosis. A right ventriculotomy incision is made. The infundibular (conal) septum, located between the two semilunar valves, is aggressively resected if its presence interferes with the construction of a tunnel from the VSD to the aorta. The VSD is then tunneled to the aorta. The decision to perform or not to perform the Lecompte maneuver should be made at the beginning of the operation. If the Lecompte maneuver is not performed the pulmonary artery is translocated to the right ventricular outflow tract on the side of the aorta that provides the shortest route. (When the decision to perform the Lecompte maneuver has been made, the great vessels are transected and this maneuver is performed at the beginning of the operation.) The pulmonary artery orifice is then closed. The aorta, if it had been transected during the performance of the Lecompte maneuver, is then reconstructed. A vertical incision is made on the anterior aspect of the main pulmonary artery. The posterior margin of the pulmonary artery is sutured to the superior aspect of the vertical right ventriculotomy incision. A generous patch of autologous pericardium is used to close the inferior portion of the right ventriculotomy and the anterior portion of the pulmonary artery. A monocusp pericardial valve is inserted extemporaneously.	<blank>
HarvestCode=5180 - Definition	Status post - Repair of DORV using a tunnel closure of the VSD to the aortic valve. This also includes the posterior straight tunnel repair of Kawashima	<blank>
HarvestCode=5200 - Definition	Status post - Because of the morphologic variability of DOLV, there are many approaches to repair, including: intraventricular tunnel repair directing the VSD to the pulmonary valve, the REV procedure, or the Rastelli procedure. In the case of DOLV use this code for tunnel closure to the pulmonary valve. If the REV or Rastelli procedures are performed then use those respective codes.	<blank>

HarvestCode=5210 - Definition	Status post - Repair of coarctation of aorta by excision of the coarctation segment and end-to-end circumferential anastomosis of the aorta.	<blank>
HarvestCode=5220 - Definition	Status post - Repair of coarctation of the aorta by excision of the coarctation segment and end-to-end anastomosis of the oblique ends of the aorta, creating an extended anastomosis.	<blank>
HarvestCode=5230 - Definition	Status post - Repair of coarctation of the aorta by ligating, dividing, and opening the subclavian artery, incising the coarctation site, and folding down the subclavian artery onto the incision in the aorta, suturing the subclavian "flap" in place, creating a roof over the area of the previous coarctation.	<blank>
HarvestCode=5240 - Definition	Status post - Repair of coarctation of the aorta by incising the coarctation site with placement of a patch sutured in place longitudinally along the aortotomy edge.	<blank>
HarvestCode=5250 - Definition	Status post - Repair of coarctation of the aorta by resection of the coarctation segment and placement of a prosthetic tubular interposition graft anastomosed circumferentially to the cut ends of the aorta.	<blank>
HarvestCode=5260 - Definition	Status post - Any repair of coarctation not specified in procedure codes. This may include, for example, a combination of two approaches for coarctation repair or extra-anatomic bypass graft, etc.	<blank>
HarvestCode=5275 - Definition	Status post - Coarctation of aorta repair, any technique, and simultaneous VSD repair, any type VSD, any type repair.	<blank>
HarvestCode=5280 - Definition	Status post - Aortic arch repair, any technique.	<blank>
HarvestCode=5285 - Definition	Status post - Aortic arch repair, any technique, and simultaneous VSD repair, any type VSD, any type repair. This includes repair of IAA with VSD.	<blank>
HarvestCode=5290 - Definition	Status post - Coronary artery fistula repair using any technique. If additional technique information may be supplied by another procedure code, please list separately (e.g., bypass graft).	<blank>
HarvestCode=5291 - Definition	Status post - Repair of anomalous origin of the coronary artery (any) from the pulmonary artery, by any technique (ligation, translocation with aortic implantation, Takeuchi operation, bypass graft). If additional technique information may be supplied by another procedure code, please list separately (for example, bypass graft).	<blank>
HarvestCode=5300 - Definition	Status post - Coronary artery bypass graft procedure, any technique (with or without CPB, venous or arterial graft, one or more grafts, etc.), for any coronary artery pathology (coronary arterial fistula, aneurysm, coronary bridging, atresia of left main, acquired coronary artery disease, etc.).	<blank>
HarvestCode=5305 - Description	Status post - Anomalous aortic origin of coronary artery from aorta (AAOCA) repair	Status post - Anomalous aortic origin of coronary artery (AAOCA) repair
HarvestCode=5310 - Definition	Status post - Any coronary artery procedure not specifically listed.	<blank>

HarvestCode=5320 - Definition	Status post - Repair of interrupted aortic arch (any type) by any technique (direct anastomosis, prosthetic graft, etc). Does not include repair of IAA-VSD.	<blank>
HarvestCode=5330 - Definition	Status post - Closure of a PDA by any surgical technique (ligation, division, clip) using any approach (i.e., thoracotomy, thoracoscopic, etc).	<blank>
HarvestCode=5340 - Definition	Status post - Closure of a PDA by device using transcatheter techniques.	<blank>
HarvestCode=5360 - Definition	Status post - Repair of vascular ring (any type, except pulmonary artery sling) by any technique.	<blank>
HarvestCode=5365 - Definition	Status post - Surgical fixation of the aorta to another structure (usually the posterior aspect of the sternum) to relieve compression on another vessel or structure (e.g., trachea).	<blank>
HarvestCode=5370 - Definition	Status post - Pulmonary artery sling repair by any technique.	<blank>
HarvestCode=5380 - Definition	Status post - Aortic aneurysm repair by any technique.	<blank>
HarvestCode=5390 - Definition	Status post - Aortic dissection repair by any technique.	<blank>
HarvestCode=5400 - Definition	Status post - Lung biopsy, any technique.	<blank>
HarvestCode=5420 - Definition	Status post - Included in this procedure code would be any lung procedure other than transplant, such as, but not limited to: pneumonectomy (left or right), lobectomy (any lobe), bilobectomy (two lobes), segmental lung resection (any segment), or wedge resection.	<blank>
HarvestCode=5430	Status post - Pectus repair	<choice was deleted>
HarvestCode=5440 - Definition	Status post - Any tracheal procedure, including but not limited to relief of tracheal stenosis (any means including pericardial graft, autograft insertion, homograft insertion, resection with reanastomosis, rib cartilage insertion, or slide tracheoplasty). Tracheal stent placement or balloon dilation should be coded separately.	<blank>
HarvestCode=5450 - Definition	Status post - Implantation of a permanent pacemaker of any type (e.g., single-chamber, dual-chamber, atrial antitachycardia), with any lead configuration or type (atrial, ventricular, atrial and ventricular, transvenous, epicardial, transmural), by any technique (sternotomy, thoracotomy etc).	<blank>
HarvestCode=5460 - Definition	Status post - Any revision to a previously placed pacemaker system including revisions to leads, generators, pacemaker pockets. This may include explantation of pacemakers or leads as well.	<blank>
HarvestCode=5470 - Definition	Status post - Implantation of an (automatic) implantable cardioverter defibrillator system.	<blank>
HarvestCode=5480 - Definition	Status post - Any revision to a previously placed AICD including revisions to leads, pads, generators, pockets. This may include explantation procedures as well.	<blank>

HarvestCode=5490 - Definition	Status post - Surgical ablation (any type) of any atrial arrhythmia.	<blank>
HarvestCode=5500 - Definition	Status post - Surgical ablation (any type) of any ventricular arrhythmia.	<blank>
HarvestCode=5590 - Definition	Status post - Placement of a tube graft from a branch of the aortic arch to the pulmonary artery with or without bypass, from any approach (thoracotomy, sternotomy).	<blank>
HarvestCode=5600 - Definition	Status post - A direct anastomosis or placement of a tube graft from the aorta to the pulmonary artery with or without bypass, from any approach (thoracotomy, sternotomy).	<blank>
HarvestCode=5600 - Description	Status post - Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery)	Status post - Shunt, Systemic to pulmonary, Central (shunt from aorta)
HarvestCode=5610 - Definition	Status post - Placement of any other systemic-to-pulmonary artery shunt, with or without bypass, from any approach (thoracotomy, sternotomy) that is not otherwise coded. Includes classic Blalock-Taussig systemic-to-pulmonary artery shunt.	<blank>
HarvestCode=5630 - Definition	Status post - Takedown of any shunt.	<blank>
HarvestCode=5640 - Definition	Status post - Placement of a pulmonary artery band, any type.	<blank>
HarvestCode=5650 - Definition	Status post - Debanding of pulmonary artery. Please list separately any pulmonary artery reconstruction required.	<blank>
HarvestCode=5660 - Definition	Status post - In the Damus-Kaye-Stansel procedure the proximal transected main pulmonary artery is connected by varying techniques to the aorta.	<blank>
HarvestCode=5670 - Definition	Status post - Superior vena cava to pulmonary artery anastomosis allowing flow to both pulmonary arteries with an end-to-side superior vena-to-pulmonary artery anastomosis.	<blank>
HarvestCode=5680 - Definition	Status post - Superior vena cava to ipsilateral pulmonary artery anastomosis (i.e., LSVC to LPA, RSVC to RPA).	<blank>
HarvestCode=5690 - Definition	Status post - Bilateral superior vena cava-to-pulmonary artery anastomoses (requires bilateral SVCs).	<blank>

HarvestCode=5700 - Definition	Status post - A HemiFontan is an operation that includes a bidirectional superior vena cava (SVC)-to-pulmonary artery anastomosis and the connection of this “SVC-pulmonary artery amalgamation” to the atrium, with a “dam” between this “SVC-pulmonary artery amalgamation” and the atrium. This operation can be accomplished with a variety of operative strategies including the following two techniques and other techniques that combine elements of both of these approaches: (1) Augmenting both branch pulmonary arteries with a patch and suturing the augmented branch pulmonary arteries to an incision in the medial aspect of the superior vena cava. (With this approach, the pulmonary artery patch forms a roof over the SVC-to-pulmonary artery anastomosis and also forms a “dam” between the SVC-pulmonary artery amalgamation and the right atrium.) (2) Anastomosing both ends of the divided SVC to incisions in the top and bottom of the right pulmonary artery, and using a separate patch to	<blank>
HarvestCode=5710 - Definition	Status post - Any other palliative procedure not specifically listed.	<blank>
HarvestCode=5720 - Definition	Status post - Repair of right ventricular aneurysm, any technique.	<blank>
HarvestCode=5730 - Definition	Status post - Repair of left ventricular aneurysm, any technique.	<blank>
HarvestCode=5740 - Definition	Status post - Repair of pulmonary artery aneurysm, any technique.	<blank>
HarvestCode=5760 - Definition	Status post - Resection of cardiac tumor, any type.	<blank>
HarvestCode=5772 - Definition	Status post - Placement of a conduit from any chamber or vessel to any vessel, valved or valveless, not listed elsewhere.	<blank>
HarvestCode=5774 - Definition	Status post - Placement of a conduit from the right or left ventricle to the aorta.	<blank>
HarvestCode=5780 - Definition	Status post - Repair or occlusion of a pulmonary arteriovenous fistula.	<blank>
HarvestCode=5790 - Definition	Status post - Ligation or division of the pulmonary artery. Most often performed as a secondary procedure.	<blank>
HarvestCode=5802 - Definition	Status post - Acute pulmonary embolism (clot) removal, through catheter or surgery.	<blank>
HarvestCode=5804 - Definition	Status post - Chronic pulmonary embolism (clot) removal, through catheter or surgery.	<blank>
HarvestCode=5810 - Definition	Status post - Pleural drainage procedure via thoracocentesis, tube thoracostomy, or open surgical drainage.	<blank>
HarvestCode=5820 - Definition	Status post - Other pleural procedures not specifically listed; may include pleurodesis (mechanical, talc, antibiotic or other), among others.	<blank>
HarvestCode=5830 - Definition	Status post - Ligation of the thoracic duct; most commonly for persistent chylothorax.	<blank>

HarvestCode=5840 - Definition	Status post - Decortication of the lung by any technique.	<blank>
HarvestCode=5850 - Definition	Status post - Any procedure performed on the esophagus.	<blank>
HarvestCode=5860 - Definition	Status post - Any non-cardiovascular mediastinal procedure not otherwise listed.	<blank>
HarvestCode=5870 - Definition	Status post - Bronchoscopy, rigid or flexible, for diagnostic, biopsy, or treatment purposes (laser, stent, dilation, lavage).	<blank>
HarvestCode=5880 - Definition	Status post - Plication of the diaphragm; most often for diaphragm paralysis due to phrenic nerve injury.	<blank>
HarvestCode=5890 - Definition	Status post - Any diaphragm procedure not specifically listed.	<blank>
HarvestCode=5900 - Definition	Status post - Insertion of intraaortic balloon pump by any technique.	<blank>
HarvestCode=5910 - Definition	Status post - Any ECMO procedure (cannulation, decannulation, etc.).	<blank>
HarvestCode=5920 - Definition	Status post - Any right, left, or biventricular assist device procedure (placement, removal etc.).	<blank>
HarvestCode=5930 - Definition	Status post - Video-assisted thoracoscopic surgery utilized; this code should be used in addition to the specific procedure code (e.g., if PDA ligated using VATS technique, PDA ligation should be primary procedure, VATS should be secondary procedure).	<blank>
HarvestCode=5940 - Definition	Status post - Any procedure using minimally invasive technique; this code should be used in addition to the specific procedure code (e.g., if ASD closed using minimally invasive technique, ASD repair should be primary procedure, minimally invasive procedure should be listed additionally).	<blank>
HarvestCode=5950 - Definition	Status post - Use of cardiopulmonary bypass for noncardiac lesion; this code may be used in addition to the specific procedure code if one is available (e.g., tracheal procedures may be done using CPB - the tracheal procedure should be the primary procedure and use of cardiopulmonary bypass for noncardiac lesion should be listed additionally).	<blank>
HarvestCode=5960 - Definition	Status post - Sternal closure effected after patient has left operating room with sternum open, either because of swelling or electively after complex heart procedures. This procedure should be operative type No CPB Cardiovascular.	<blank>
HarvestCode=5970 - Definition	Status post - Mediastinal exploration, most often for postoperative control of bleeding or tamponade, but may be exploration to assess mediastinal mass, etc.	<blank>
HarvestCode=5980 - Definition	Status post - Drainage of the sternotomy wound.	<blank>
HarvestCode=5990 - Definition	Status post - Any procedure performed through a thoracotomy incision not otherwise listed.	<blank>
HarvestCode=6000 - Definition	Status post - Any procedure involving an incision in the heart that is not otherwise listed.	<blank>

HarvestCode=6010 - Definition	Status post - Any cardiac procedure, bypass or non-bypass, that is not otherwise listed.	<blank>
HarvestCode=6020 - Definition	Status post - Any thoracic and/or mediastinal procedure not otherwise listed.	<blank>
HarvestCode=6030 - Definition	Status post - Any peripheral vascular procedure; may include procedures such as femoral artery repair, iliac artery repair, etc.	<blank>
HarvestCode=6040 - Definition	Status post - Any miscellaneous procedure not otherwise listed.	<blank>
HarvestCode=6050	Status post - Organ procurement	<choice was deleted>
HarvestCode=6140 - Definition	Status post - A “Hybrid Procedure” is defined as a procedure that combines surgical and transcatheter interventional approaches. The term “Hybrid approach” is used somewhat differently than the term “Hybrid Procedure”. A “Hybrid approach” is defined as any of a group of procedures that fit into the general silo of procedures developed from the combined use of surgical and transcatheter interventional techniques. Therefore, not all procedures classified as “Hybrid approach” are truly “Hybrid Procedures”. It should be acknowledged that a Hybrid approach "Stage 2" (Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding, with or without Aortic arch repair) gets its name not because it has any actual hybrid elements, but because it is part of a planned staged approach that is typically commenced with a hybrid procedure.	<blank>
HarvestCode=6150 - Definition	Status post - A “Hybrid Procedure” is defined as a procedure that combines surgical and transcatheter interventional approaches. The term “Hybrid approach” is used somewhat differently than the term “Hybrid Procedure”. A “Hybrid approach” is defined as any of a group of procedures that fit into the general silo of procedures developed from the combined use of surgical and transcatheter interventional techniques. Therefore, not all procedures classified as “Hybrid approach” are truly “Hybrid Procedures”. It should be acknowledged that a Hybrid approach "Stage 2" (Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding, with or without Aortic arch repair) gets its name not because it has any actual hybrid elements, but because it is part of a planned staged approach that is typically commenced with a hybrid procedure.	<blank>
HarvestCode=6160 - Definition	Status post - A “Hybrid Procedure” is defined as a procedure that combines surgical and transcatheter interventional approaches. The term “Hybrid approach” is used somewhat differently than the term “Hybrid Procedure”. A “Hybrid approach” is defined as any of a group of procedures that fit into the general silo of procedures developed from the combined use of surgical and transcatheter interventional techniques. Therefore, not all procedures classified as “Hybrid approach” are truly “Hybrid Procedures”.	<blank>

HarvestCode=6170 - Definition	Status post - A “Hybrid Procedure” is defined as a procedure that combines surgical and transcatheter interventional approaches. The term “Hybrid approach” is used somewhat differently than the term “Hybrid Procedure”. A “Hybrid approach” is defined as any of a group of procedures that fit into the general silo of procedures developed from the combined use of surgical and transcatheter interventional techniques. Therefore, not all procedures classified as “Hybrid approach” are truly “Hybrid Procedures”.	<blank>
HarvestCode=6180 - Definition	Status post - A “Hybrid Procedure” is defined as a procedure that combines surgical and transcatheter interventional approaches. The term “Hybrid approach” is used somewhat differently than the term “Hybrid Procedure”. A “Hybrid approach” is defined as any of a group of procedures that fit into the general silo of procedures developed from the combined use of surgical and transcatheter interventional techniques. Therefore, not all procedures classified as “Hybrid approach” are truly “Hybrid Procedures”.	<blank>
HarvestCode=6490 - Description	Status post - Interventional radiology procedure on cardiac patient	Status post - Radiology procedure on cardiac patient, Therapeutic radiology
HarvestCode=6680	Status post - Cardiovascular electrophysiological catheterization procedure	<choice was deleted>
HarvestCode=6690 - Description	Status post - Cardiovascular electrophysiological catheterization procedure, Therapeutic ablation	Status post - Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation
HarvestCode=6700	<blank>	<New choice added> Status post - Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
HarvestCode=6710	<blank>	<New choice added> Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])
HarvestCode=6720	<blank>	<New choice added> Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
HarvestCode=6730	<blank>	<New choice added> Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)
HarvestCode=6740	<blank>	<New choice added> Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)
HarvestCode=6750	<blank>	<New choice added> Status post - Unifocalization MAPCA(s), Unilateral pulmonary unifocalization

HarvestCode=6755	<blank>	<New choice added> Status post - Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neoaorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
HarvestCode=6760	<blank>	<New choice added> Status post - Hybrid Approach, Transcardiac balloon dilation
HarvestCode=6770	<blank>	<New choice added> Status post - Hybrid Approach, Transcardiac transcatheter device placement
HarvestCode=6780	<blank>	<New choice added> Status post - Fontan, TCPC, Intra/extracardiac conduit, Fenestrated
HarvestCode=6790	<blank>	<New choice added> Status post - Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated
HarvestCode=6800	<blank>	<New choice added> Status post - Muscle flap, Trunk (i.e., intercostal, pectus, or serratus muscle)
HarvestCode=6810	<blank>	<New choice added> Status post - Muscle flap, Trunk (i.e. latissimus dorsi)
HarvestCode=6820	<blank>	<New choice added> Status post - Removal, Sternal wire
HarvestCode=6830	<blank>	<New choice added> Status post - Rib excision, Complete
HarvestCode=6840	<blank>	<New choice added> Status post - Rib excision, Partial
HarvestCode=6850	<blank>	<New choice added> Status post - Sternal fracture - open treatment
HarvestCode=6860	<blank>	<New choice added> Status post - Sternal resection, Radical resection of sternum
HarvestCode=6870	<blank>	<New choice added> Status post - Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy
HarvestCode=6880	<blank>	<New choice added> Status post - Tumor of chest wall - Excision including ribs
HarvestCode=6890	<blank>	<New choice added> Status post - Tumor of chest wall - Excision including ribs, With reconstruction
HarvestCode=6900	<blank>	<New choice added> Status post - Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor
HarvestCode=6910	<blank>	<New choice added> Status post - Tumor of soft tissue of thorax - Excision of subcutaneous tumor
HarvestCode=6920	<blank>	<New choice added> Status post - Tumor of soft tissue of thorax - Radical resection

HarvestCode=6930	<blank>	<New choice added> Status post - Hyoid myotomy and suspension
HarvestCode=6940	<blank>	<New choice added> Status post - Muscle flap, Neck
HarvestCode=6950	<blank>	<New choice added> Status post - Procedure on neck
HarvestCode=6960	<blank>	<New choice added> Status post - Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor
HarvestCode=6970	<blank>	<New choice added> Status post - Tumor of soft tissue of neck - Excision of subcutaneous tumor
HarvestCode=6980	<blank>	<New choice added> Status post - Tumor of soft tissue of neck - Radical resection
HarvestCode=6990	<blank>	<New choice added> Status post - Pectus bar removal
HarvestCode=7005	<blank>	<New choice added> Status post - Pectus bar repositioning
HarvestCode=7010	<blank>	<New choice added> Status post - Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy
HarvestCode=7020	<blank>	<New choice added> Status post - Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy
HarvestCode=7030	<blank>	<New choice added> Status post - Pectus repair, Open repair
HarvestCode=7040	<blank>	<New choice added> Status post - Division of scalenus anticus, With resection of a cervical rib
HarvestCode=7050	<blank>	<New choice added> Status post - Division of scalenus anticus, Without resection of a cervical rib
HarvestCode=7060	<blank>	<New choice added> Status post - Rib excision, Excision of cervical rib
HarvestCode=7070	<blank>	<New choice added> Status post - Rib excision, Excision of cervical rib, With sympathectomy
HarvestCode=7080	<blank>	<New choice added> Status post - Rib excision, Excision of first rib
HarvestCode=7090	<blank>	<New choice added> Status post - Rib excision, Excision of first rib, With sympathectomy
HarvestCode=7100	<blank>	<New choice added> Status post - Procedure on thorax
HarvestCode=7110	<blank>	<New choice added> Status post - Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted

HarvestCode=7120	<blank>	<New choice added> Status post - Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal
HarvestCode=7130	<blank>	<New choice added> Status post - Shunt, Systemic to pulmonary, Central (shunt from aorta), Central shunt with an end-to-side connection between the transected main pulmonary artery and the side of the ascending aorta (i.e. Mee shunt)
HarvestCode=7140	<blank>	<New choice added> Status post - Hepatic vein to azygous vein connection, Direct
HarvestCode=7150	<blank>	<New choice added> Status post - Hepatic vein to azygous vein connection, Interposition graft
HarvestCode=7160	<blank>	<New choice added> Status post - Kawashima operation (superior cavopulmonary connection in setting of interrupted IVC with azygous continuation)
HarvestCode=7170	<blank>	<New choice added> Status post - VAD change out
HarvestCode=7180	<blank>	<New choice added> Status post - Intravascular stent removal
HarvestCode=11777 - Definition	Status post - Any procedure on any organ system not otherwise listed.	<blank>

910 **Procedures Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

930 **Procedures**

Detail changed:	Changed from:	Changed to:
HarvestCode=430	Pulmonary atresia - VSD - MAPCA (pseudotruncus) repair	<choice was deleted>
HarvestCode=450 - Description	Occlusion MAPCA(s)	Occlusion of MAPCA(s)
HarvestCode=460 - Definition	Reconstruction of the tricuspid valve may include but not be limited to a wide range of techniques including: leaflet patch extension, artificial chordae placement, papillary muscle transplocation with or without detachment. Annuloplasty techniques that may be done solely or in combination with leaflet, chordae or muscle repair to achieve a competent valve include: eccentric annuloplasty, Kay annular plication, purse-string annuloplasty (including semicircular annuloplasty), sliding annuloplasty, and annuloplasty with ring placement. Do not use this code if tricuspid valve malfunction is secondary to Ebstein's anomaly; instead use the Ebstein's repair procedure code.	Reconstruction of the tricuspid valve may include but not be limited to a wide range of techniques including: leaflet patch extension, artificial chordae placement, and papillary muscle translocation with or without detachment. Annuloplasty techniques that may be done solely or in combination with leaflet, chordae or muscle repair to achieve a competent valve include: eccentric annuloplasty, Kay annular plication, purse-string annuloplasty (including semicircular annuloplasty), sliding annuloplasty, and annuloplasty with ring placement. Do not use this code if tricuspid valve malfunction is secondary to Ebstein's anomaly; instead use the Ebstein's repair procedure code.
HarvestCode=490 - Definition	Excision of the tricuspid valve without placement of a valve prosthesis.	Excision of the tricuspid valve without placement of a prosthetic valve.

HarvestCode=580 - Definition	Conduit reoperation is the code to be used in the event of conduit failure, in whatever position (LV to aorta, LV to PA, RA to RV, RV to aorta, RV to PA, etc.), and from whatever cause (somatic growth, stenosis, insufficiency, infection, etc).	Conduit reoperation is the code to be used in the event of conduit failure, in whatever position (LV to aorta, LV to PA, RA to RV, RV to aorta, RV to PA, etc.), and from whatever cause (somatic growth, stenosis, insufficiency, infection, etc.).
HarvestCode=630 - Definition	Excision of the pulmonary valve without placement of a valve prosthesis.	Excision of the pulmonary valve without placement of a prosthetic valve.
HarvestCode=720 - Definition	Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a mechnical prosthesis in a composite conduit.	Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a mechanical prosthesis in a composite conduit.
HarvestCode=770 - Definition	Techniques included under this procedure code include those designed to effect aortic annular enlargement that are not included in other procedure codes. These include the Manougian and Nicks aortic annular enlargement procedures.	Techniques included under this procedure code include those designed to effect aortic annular enlargement that are not included in other procedure codes. These include the Manouguian and Nicks aortic annular enlargement procedures.
HarvestCode=870 - Definition	The Norwood operation is synonymous with the term 'Norwood (Stage 1)' and is defined as an aortopulmonary connection and neoaortic arch construction resulting in univentricular physiology and pulmonary blood flow controlled with a calibrated systemic-to-pulmonary artery shunt, or a right ventricle to pulmonary artery conduit, or rarely, a cavopulmonary connection. When coding the procedure “Norwood procedure”, the primary procedure of the operation should be “Norwood procedure”. The second procedure (Procedure 2 after the Norwood procedure) must then document the source of pulmonary blood flow and be chosen from the following eight choices: 1. Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS) 2. Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery) 3. Shunt, Systemic to pulmonary, Other 4. Conduit placement, RV to PA 5. Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn) 6. Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn) 7. Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)	The Norwood operation is synonymous with the term 'Norwood (Stage 1)' and is defined as an aortopulmonary connection and neoaortic arch construction resulting in univentricular physiology and pulmonary blood flow controlled with a calibrated systemic-to-pulmonary artery shunt, or a right ventricle to pulmonary artery conduit, or rarely, a cavopulmonary connection. When coding the procedure “Norwood procedure”, the primary procedure of the operation should be “Norwood procedure”. The second procedure that is coded as part of the Norwood (Stage 1) operation (Procedure 2 after the Norwood procedure) must then document the source of pulmonary blood flow and be chosen from the following eight choices: 1. Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS) 2. Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery) 3. Shunt, Systemic to pulmonary, Other 4. Conduit placement, RV to PA 5. Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn) 6. Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn) 7. Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn) 8. HemiFontan
HarvestCode=950 - Definition	Fontan-type procedure with atrio-pulmonary connection.	The atrio-pulmonary Fontan is a type of Fontan with connection of the atrium to the pulmonary artery. “The Fontan” is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart.
HarvestCode=960 - Definition	Fontan-type procedure with atrio-ventricular connection, either direct or with RA-RV conduit, valved or nonvalved.	The atrio-ventricular Fontan is a type of Fontan with atrio-ventricular connection, either direct or with RA-RV conduit, valved or nonvalved. "The Fontan" is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart.

HarvestCode=970 - Definition	Total cavopulmonary connection using an intraatrial lateral tunnel construction, with fenestration.	The lateral tunnel Fontan is a TCPC type of Fontan Procedure created with anastomosis of SVC and right atrium to the branch pulmonary artery and an intra-atrial baffle to direct IVC flow to pulmonary artery. "The Fontan" is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart. A "TCPC" is a Fontan where both the superior caval vein and the inferior caval vein are connected to the pulmonary circulation through separate connections that are either direct connections or tubular pathways. A fenestration of a Fontan is defined as a communication that is created to allow flow of blood between the systemic and pulmonary venous chambers.
HarvestCode=980 - Definition	Total cavopulmonary connection using an intraatrial lateral tunnel construction, with no fenestration.	The lateral tunnel Fontan is a TCPC type of Fontan Procedure created with anastomosis of SVC and right atrium to the branch pulmonary artery and an intra-atrial baffle to direct IVC flow to pulmonary artery. "The Fontan" is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart. A "TCPC" is a Fontan where both the superior caval vein and the inferior caval vein are connected to the pulmonary circulation through separate connections that are either direct connections or tubular pathways. A fenestration of a Fontan is defined as a communication that is created to allow flow of blood between the systemic and pulmonary venous chambers.
HarvestCode=1000 - Definition	Total cavopulmonary connection using an external conduit to connect the infradiaphragmatic systemic venous return to the pulmonary artery, with fenestration.	The external conduit Fontan is a TCPC type of Fontan operation created with anastomosis of SVC to the branch pulmonary artery a conduit outside of the heart to connect the infradiaphragmatic systemic venous return to the pulmonary artery. "The Fontan" is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart. A "TCPC" is a Fontan where both the superior caval vein and the inferior caval vein are connected to the pulmonary circulation through separate connections that are either direct connections or tubular pathways. A fenestration of a Fontan is defined as a communication that is created to allow flow of blood between the systemic and pulmonary venous chambers.
HarvestCode=1010 - Definition	Total cavopulmonary connection using an external conduit to connect the infradiaphragmatic systemic venous return to the pulmonary artery, with no fenestration.	The external conduit Fontan is a TCPC type of Fontan operation created with anastomosis of SVC to the branch pulmonary artery a conduit outside of the heart to connect the infradiaphragmatic systemic venous return to the pulmonary artery. "The Fontan" is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart. A "TCPC" is a Fontan where both the superior caval vein and the inferior caval vein are connected to the pulmonary circulation through separate connections that are either direct connections or tubular pathways. A fenestration of a Fontan is defined as a communication that is created to allow flow of blood between the systemic and pulmonary venous chambers.

HarvestCode=1025 - Definition	Revision of a previous Fontan procedure to a total cavopulmonary connection.	“Fontan revision or conversion (Re-do Fontan)” is defined as an operation where a previously created Fontan circuit is either modified or taken down and changed into a different type of Fontan. “The Fontan” is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart. A “TCPC” is a Fontan where both the superior caval vein and the inferior caval vein are connected to the pulmonary circulation through separate connections that are either direct connections or tubular pathways.
HarvestCode=1030 - Definition	Other Fontan procedure not specified in procedure codes. May include takedown of a Fontan procedure.	Other Fontan procedure not specified in procedure codes. May include takedown of a Fontan procedure. “The Fontan” is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart.
HarvestCode=1090 - Definition	Any procedures for correction of CCTGA not otherwised specified in other listed procedure codes.	Any procedures for correction of CCTGA not otherwise specified in other listed procedure codes.
HarvestCode=1130 - Definition	Atrial baffle procedure for rerouting of venous flow in TGA effecting a “physiological repair”. The caval flow is directed behind the baffle to the mitral valve, left ventricle and pulmonary artery while the pulmonary venous flow is directed in front of the baffle to the tricuspid valve, right ventricle, and aorta. The Senning procedure uses atrial wall to construct the baffle.	Atrial baffle procedure for rerouting of venous flow in TGA resulting in a “physiological repair”. The caval flow is directed behind the baffle to the mitral valve, left ventricle and pulmonary artery while the pulmonary venous flow is directed in front of the baffle to the tricuspid valve, right ventricle, and aorta. The Senning procedure uses atrial wall to construct the baffle.
HarvestCode=1140 - Definition	Atrial baffle procedure for rerouting of venous flow in TGA effecting a “physiological repair”. The caval flow is directed behind the baffle to the mitral valve, left ventricle and pulmonary artery while pulmonary venous flow is directed in front of the baffle to the tricuspid valve, right ventricle, and aorta. The Mustard procedure uses patch material to construct the baffle.	Atrial baffle procedure for rerouting of venous flow in TGA resulting in a “physiological repair”. The caval flow is directed behind the baffle to the mitral valve, left ventricle and pulmonary artery while pulmonary venous flow is directed in front of the baffle to the tricuspid valve, right ventricle, and aorta. The Mustard procedure uses patch material to construct the baffle.
HarvestCode=1291 - Definition	Repair of anomalous origin of the coronary artery (any) from the pulmonary artery, by any technique (ligation, translocation with aortic implantation, Takeuchi operation, bypass graft). If additional technique information may be supplied by another procedure code, please list separately (for example, bypass graft).	Repair of anomalous origin of the coronary artery (any) from the pulmonary artery, by any technique (ligation, translocation with aortic implantation, Takeuchi operation, or bypass graft). If additional technique information may be supplied by another procedure code, please list separately (for example, bypass graft).
HarvestCode=1320 - Definition	Repair of interrupted aortic arch (any type) by any technique (direct anastomosis, prosthetic graft, etc). Does not include repair of IAA-VSD.	Repair of interrupted aortic arch (any type) by any technique (direct anastomosis, prosthetic graft, etc.). Does not include repair of IAA-VSD.
HarvestCode=1330 - Definition	Closure of a PDA by any surgical technique (ligation, division, clip) using any approach (i.e., thoracotomy, thoracoscopic, etc).	Closure of a PDA by any surgical technique (ligation, division, clip) using any approach (i.e., thoracotomy, thoracoscopic, etc.).
HarvestCode=1430	Pectus repair	<choice was deleted>
HarvestCode=1450 - Definition	Implantation of a permanent pacemaker of any type (e.g., single-chamber, dual-chamber, atrial antitachycardia), with any lead configuration or type (atrial, ventricular, atrial and ventricular, transvenous, epicardial, transmural), by any technique (sternotomy, thoracotomy etc).	Implantation of a permanent pacemaker of any type (e.g., single-chamber, dual-chamber, atrial antitachycardia), with any lead configuration or type (atrial, ventricular, atrial and ventricular, transvenous, epicardial, transmural), by any technique (sternotomy, thoracotomy etc.).
HarvestCode=1540 - Definition	<blank>	Invasive therapeutic procedure involving balloon dilatation of a cardiovascular structure

HarvestCode=1550 - Definition	<blank>	Invasive therapeutic procedure involving implantation of a stent
HarvestCode=1560 - Definition	<blank>	Invasive therapeutic procedure involving implantation of a device
HarvestCode=1580 - Definition	<blank>	Invasive therapeutic procedure involving implantation of a coil
HarvestCode=1600 - Description	Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery)	Shunt, Systemic to pulmonary, Central (shunt from aorta)
HarvestCode=2095 - Definition	<blank>	Revision or replacement of a previously created shunt
HarvestCode=2100 - Definition	<blank>	Subvalvar aortic stenosis repair including excision and myectomy
HarvestCode=2110 - Definition	<blank>	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD plus PAPVC repair, any type
HarvestCode=2120 - Definition	<blank>	An intracardiac baffle is created to redirect pulmonary venous return to the left atrium and SVC sewn to right atrial appendage)
HarvestCode=2200 - Definition	<blank>	Repair of TAPVC, any type plus a systemic to pulmonary shunt creation
HarvestCode=2220 - Definition	<blank>	Truncus arteriosus repair usually includes patch VSD closure and placement of a conduit from RV to PA. In some cases, a conduit is not placed but an RV to PA connection is made by direct association. (Very rarely, there is no VSD) plus repair of interrupted aortic arch
HarvestCode=2230 - Definition	<blank>	Replacement of the common AV valve with a prosthetic valve
HarvestCode=2240 - Definition	<blank>	Aortic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
HarvestCode=2250 - Definition	<blank>	Common AV valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
HarvestCode=2260 - Definition	<blank>	Mitral valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
HarvestCode=2270 - Definition	<blank>	Pulmonic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
HarvestCode=2280 - Definition	<blank>	Tricuspid valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
HarvestCode=2290 - Definition	<blank>	Truncal valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
HarvestCode=2300 - Definition	<blank>	Common AV valve repair, any type

HarvestCode=2310 - Definition	<blank>	Aortic valve repair attempted, converted to valve replacement with a pulmonary autograft and replacement of the pulmonary valve with a homograft conduit during the same operation
HarvestCode=2320 - Definition	<blank>	Aortic valve repair attempted, converted to Konno aortoventriculoplasty using a pulmonary autograft root for the aortic root replacement.
HarvestCode=2340 - Definition	<blank>	“Fontan + Atrioventricular valvuloplasty” is defined as an operation to repair the systemic atrioventricular valve combined with a Fontan operation. Please also code the type of Fontan operation performed as the second procedure of this operation. “The Fontan” is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart.
HarvestCode=2350 - Definition	<blank>	Removal of pacemaker generator and wires
HarvestCode=2360 - Definition	<blank>	Insertion of cannulas for extracorporeal membrane oxygenation
HarvestCode=2370 - Definition	<blank>	Removal of cannulas for extracorporeal membrane oxygenation
HarvestCode=2380 - Definition	<blank>	Insertion of a ventricular assist device
HarvestCode=2390 - Definition	<blank>	Removal of ventricular assist device
HarvestCode=2410 - Definition	<blank>	Invasive therapeutic procedure involving the heart and great vessels
HarvestCode=2420 - Definition	<blank>	Procedural sedation for echocardiogram
HarvestCode=2430 - Definition	<blank>	Procedural sedation for echocardiogram, transthoracic
HarvestCode=2435 - Definition	<blank>	Anesthesia provided by cardiac anesthesiologist for patient with congenital heart disease undergoing a non- cardiovascular, non-thoracic procedure
HarvestCode=2440 - Definition	<blank>	A patient with congenital heart disease undergoing cardiac CT scan
HarvestCode=2450 - Definition	<blank>	A patient with congenital heart disease undergoing cardiac MRI
HarvestCode=2460 - Definition	<blank>	A patient with congenital heart disease undergoing a diagnostic radiology procedure
HarvestCode=2470 - Definition	<blank>	A patient with congenital heart disease undergoing a non-cardiac CT scan
HarvestCode=2480 - Definition	<blank>	A patient with congenital heart disease undergoing non-cardiac MRI
HarvestCode=2490 - Definition	<blank>	A patient with congenital heart disease undergoing a therapeutic radiology procedure
HarvestCode=2490 - Description	Interventional radiology procedure on cardiac patient	Radiology procedure on cardiac patient, Therapeutic radiology

HarvestCode=2500 - Definition	<blank>	Invasive diagnostic procedure involving the heart and great vessels
HarvestCode=2510 - Definition	<blank>	Invasive diagnostic procedure involving pressure and flow assessment of the heart and great vessels
HarvestCode=2520 - Definition	<blank>	Invasive diagnostic procedure involving the heart and great vessels using angiography
HarvestCode=2540 - Definition	<blank>	Invasive diagnostic procedure involving pressure or flow alteration in the cardiovascular system
HarvestCode=2580 - Definition	<blank>	Invasive therapeutic procedure establishing an intracardiac septal communication
HarvestCode=2590 - Definition	<blank>	Invasive therapeutic procedure involving balloon dilatation of a valve
HarvestCode=2630 - Definition	<blank>	Invasive therapeutic procedure involving dilatation of a previously implanted stent
HarvestCode=2640 - Definition	<blank>	Invasive therapeutic procedure establishing interchamber and/or intervessel communication
HarvestCode=2660 - Definition	<blank>	Invasive therapeutic procedure involving deployment/ implantation of a valve
HarvestCode=2680	Cardiovascular electrophysiological catheterization procedure	<choice was deleted>
HarvestCode=2690 - Definition	<blank>	Invasive therapeutic procedure involving Catheter based creation of lesions in the heart with radiofrequency energy, cryotherapy , or ultrasound energy to cure or control arrhythmias
HarvestCode=2690 - Description	Cardiovascular electrophysiological catheterization procedure, Therapeutic ablation	Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation.
HarvestCode=2700	<blank>	<New choice added> Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
HarvestCode=2710	<blank>	<New choice added> Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])
HarvestCode=2720	<blank>	<New choice added> Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
HarvestCode=2730	<blank>	<New choice added> Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)
HarvestCode=2740	<blank>	<New choice added> Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)
HarvestCode=2750	<blank>	<New choice added> Unifocalization MAPCA(s), Unilateral pulmonary unifocalization

HarvestCode=2755	<blank>	<New choice added> Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neoaorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
HarvestCode=2760	<blank>	<New choice added> Hybrid Approach, Transcardiac balloon dilation
HarvestCode=2770	<blank>	<New choice added> Hybrid Approach, Transcardiac transcatheter device placement
HarvestCode=2780	<blank>	<New choice added> Fontan, TCPC, Intra/extracardiac conduit, Fenestrated
HarvestCode=2790	<blank>	<New choice added> Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated
HarvestCode=2800	<blank>	<New choice added> Muscle flap, Trunk (i.e. intercostal, pectus, or serratus muscle)
HarvestCode=2810	<blank>	<New choice added> Muscle flap, Trunk (i.e. latissimus dorsi)
HarvestCode=2820	<blank>	<New choice added> Removal, Sternal wire
HarvestCode=2830	<blank>	<New choice added> Rib excision, Complete
HarvestCode=2840	<blank>	<New choice added> Rib excision, Partial
HarvestCode=2850	<blank>	<New choice added> Sternal fracture - open treatment
HarvestCode=2860	<blank>	<New choice added> Sternal resection, Radical resection of sternum
HarvestCode=2870	<blank>	<New choice added> Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy
HarvestCode=2880	<blank>	<New choice added> Tumor of chest wall - Excision including ribs
HarvestCode=2890	<blank>	<New choice added> Tumor of chest wall - Excision including ribs, With reconstruction
HarvestCode=2900	<blank>	<New choice added> Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor
HarvestCode=2910	<blank>	<New choice added> Tumor of soft tissue of thorax - Excision of subcutaneous tumor
HarvestCode=2920	<blank>	<New choice added> Tumor of soft tissue of thorax - Radical resection
HarvestCode=2930	<blank>	<New choice added> Hyoid myotomy and suspension

HarvestCode=2940	<blank>	<New choice added> Muscle flap, Neck
HarvestCode=2950	<blank>	<New choice added> Procedure on neck
HarvestCode=2960	<blank>	<New choice added> Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor
HarvestCode=2970	<blank>	<New choice added> Tumor of soft tissue of neck - Excision of subcutaneous tumor
HarvestCode=2980	<blank>	<New choice added> Tumor of soft tissue of neck - Radical resection
HarvestCode=2990	<blank>	<New choice added> Pectus bar removal
HarvestCode=3000	<blank>	<New choice added> Pectus bar repositioning
HarvestCode=3010	<blank>	<New choice added> Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy
HarvestCode=3020	<blank>	<New choice added> Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy
HarvestCode=3030	<blank>	<New choice added> Pectus repair, Open repair
HarvestCode=3040	<blank>	<New choice added> Division of scalenus anticus, With resection of a cervical rib
HarvestCode=3050	<blank>	<New choice added> Division of scalenus anticus, Without resection of a cervical rib
HarvestCode=3060	<blank>	<New choice added> Rib excision, Excision of cervical rib
HarvestCode=3070	<blank>	<New choice added> Rib excision, Excision of cervical rib, With sympathectomy
HarvestCode=3080	<blank>	<New choice added> Rib excision, Excision of first rib
HarvestCode=3090	<blank>	<New choice added> Rib excision, Excision of first rib, With sympathectomy
HarvestCode=3100	<blank>	<New choice added> Procedure on thorax
HarvestCode=3110	<blank>	<New choice added> Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted
HarvestCode=3120	<blank>	<New choice added> Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal

HarvestCode=3130	<blank>	<New choice added> Shunt, Systemic to pulmonary, Central (shunt from aorta), Central shunt with an end-to-side connection between the transected main pulmonary artery and the side of the ascending aorta (i.e. Mee shunt)
HarvestCode=3140	<blank>	<New choice added> Hepatic vein to azygous vein connection, Direct
HarvestCode=3150	<blank>	<New choice added> Hepatic vein to azygous vein connection, Interposition graft
HarvestCode=3160	<blank>	<New choice added> Kawashima operation (superior cavopulmonary connection in setting of interrupted IVC with azygous continuation)
HarvestCode=3170	<blank>	<New choice added> VAD change out
HarvestCode=3180	<blank>	<New choice added> Intravascular stent removal
HarvestCode=7800	<blank>	<New choice added> Operation canceled before skin incision
HarvestCode=7810	<blank>	<New choice added> Operation aborted after skin incision

940 **Primary Procedure Indicator**

Detail changed:	Changed from:	Changed to:
Definition	Indicate whether this is considered the PRIMARY procedure performed during this surgical procedure.	Indicate whether this procedure is considered the PRIMARY Procedure performed during this operation. Note that the primary procedure is determined at the data warehouse using the methodology published in the Journal of Thoracic and Cardiovascular Surgery ("An empirically based tool for analyzing mortality associated with congenital heart surgery" Sean M. O'Brien, David R. Clarke, Jeffrey P. Jacobs, Marshall L. Jacobs, Francois G. Lacour-Gayet, Christian Pizarro, Karl F. Welke, Bohdan Maruszewski, Zdzislaw Tobota, Weldon J. Miller, Leslie Hamilton, Eric D. Peterson, Constantine Mavroudis and Fred H. Edwards J Thorac Cardiovasc Surg 2009;138:1139-1153 DOI: 10.1016/j.jtcvs.2009.03.071). If the above methodology does not return a primary procedure, this field will be used to designate primary procedure.

949 **Procedure-Specific Factors - Procedure-Specific Factors - Primary Procedure**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate which, if any, of the following "benchmark operations" was the primary procedure for this operation.

Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Procedure-Specific Factors - Primary Procedure
ShortName	<Blank>	PSFPrimProc
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=10	<blank>	<New choice added> None of the listed procedures
HarvestCode=100	<blank>	<New choice added> VSD repair, Primary closure
HarvestCode=110	<blank>	<New choice added> VSD repair, Patch
HarvestCode=120	<blank>	<New choice added> VSD repair, Device
HarvestCode=170	<blank>	<New choice added> AVC (AVSD) repair, Complete (CAVSD)
HarvestCode=230	<blank>	<New choice added> Truncus arteriosus repair
HarvestCode=350	<blank>	<New choice added> TOF repair, No ventriculotomy
HarvestCode=360	<blank>	<New choice added> TOF repair, Ventriculotomy, Nontransanular patch
HarvestCode=370	<blank>	<New choice added> TOF repair, Ventriculotomy, Transanular patch
HarvestCode=380	<blank>	<New choice added> TOF repair, RV-PA conduit
HarvestCode=390	<blank>	<New choice added> TOF - AVC (AVSD) repair
HarvestCode=400	<blank>	<New choice added> TOF - Absent pulmonary valve repair
HarvestCode=420	<blank>	<New choice added> Pulmonary atresia - VSD (including TOF, PA) repair
HarvestCode=870	<blank>	<New choice added> Norwood procedure
HarvestCode=950	<blank>	<New choice added> Fontan, Atrio-pulmonary connection
HarvestCode=960	<blank>	<New choice added> Fontan, Atrio-ventricular connection
HarvestCode=970	<blank>	<New choice added> Fontan, TCPC, Lateral tunnel, Fenestrated
HarvestCode=980	<blank>	<New choice added> Fontan, TCPC, Lateral tunnel, Nonfenestrated
HarvestCode=1000	<blank>	<New choice added> Fontan, TCPC, External conduit, Fenestrated

HarvestCode=1010	<blank>	<New choice added> Fontan, TCPC, External conduit, Nonfenestrated
HarvestCode=1025	<blank>	<New choice added> Fontan revision or conversion (Re-do Fontan)
HarvestCode=1030	<blank>	<New choice added> Fontan, Other
HarvestCode=1110	<blank>	<New choice added> Arterial switch operation (ASO)
HarvestCode=1120	<blank>	<New choice added> Arterial switch operation (ASO) and VSD repair
HarvestCode=1123	<blank>	<New choice added> Arterial switch procedure + Aortic arch repair
HarvestCode=1125	<blank>	<New choice added> Arterial switch procedure and VSD repair + Aortic arch repair
HarvestCode=1670	<blank>	<New choice added> Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)
HarvestCode=1680	<blank>	<New choice added> Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)
HarvestCode=1690	<blank>	<New choice added> Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)
HarvestCode=1700	<blank>	<New choice added> HemiFontan
HarvestCode=2130	<blank>	<New choice added> Superior Cavopulmonary anastomosis(es) + PA reconstruction
HarvestCode=2220	<blank>	<New choice added> Truncus + Interrupted aortic arch repair (IAA) repair
HarvestCode=2330	<blank>	<New choice added> Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty
HarvestCode=2340	<blank>	<New choice added> Fontan + Atrioventricular valvuloplasty
HarvestCode=2700	<blank>	<New choice added> Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
HarvestCode=2710	<blank>	<New choice added> Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])
HarvestCode=2720	<blank>	<New choice added> Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])

HarvestCode=2780	<blank>	<New choice added> Fontan, TCPC, Intra/extracardiac conduit, Fenestrated
HarvestCode=2790	<blank>	<New choice added> Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated

950 **Procedure-Specific Factors - Apical VSD**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Apical VSD was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Apical VSD
ParentHarvestCodes	<Blank>	100|110|120|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "VSD repair, Primary closure", "VSD repair, Patch", "VSD repair, Device", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFApicalVSD
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

951 **Procedure-Specific Factors - Straddling AV valve**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Straddling AV valve was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Straddling AV valve
ParentHarvestCodes	<Blank>	100|110|120|1120|1125
ParentShortName	<Blank>	PSFPrimProc

ParentValue	<Blank>	= "VSD repair, Primary closure", "VSD repair, Patch", "VSD repair, Device", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFStradAVVal
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

952 **Procedure-Specific Factors - Major coronary crossing RVOT - Coronary anomaly restricting RVOT enlargement, (LAD from RCA etc.)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Major coronary crossing RVOT - Coronary anomaly restricting RVOT enlargement, (LAD from RCA etc.) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Major coronary crossing RVOT - Coronary anomaly restricting RVOT enlargement, (LAD from RCA etc.)
ParentHarvestCodes	<Blank>	390|350|360|370|380|400|2700|2710|2720|420
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair", "TOF repair, No ventriculotomy", "TOF repair, Ventriculotomy, Nontransanular patch", "TOF repair, Ventriculotomy, Transanular patch", "TOF repair, RV-PA conduit", "TOF - Absent pulmonary valve repair", "Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])" or "Pulmonary atresia - VSD (including TOF, PA) repair"
ShortName	<Blank>	PSFMajCorRVOT
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

953 **Procedure-Specific Factors - VSD, Multiple, Repair**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether VSD, Multiple, Repair was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - VSD, Multiple, Repair
ParentHarvestCodes	<Blank>	390|350|360|370|380|400|2700|2710|2720|420
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair", "TOF repair, No ventriculotomy", "TOF repair, Ventriculotomy, Nontransanular patch", "TOF repair, Ventriculotomy, Transanular patch", "TOF repair, RV-PA conduit", "TOF - Absent pulmonary valve repair", "Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])" or "Pulmonary atresia - VSD (including TOF, PA) repair"
ShortName	<Blank>	PSFVSDMultRep
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

954 **Procedure-Specific Factors - Restrictive VSD**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Restrictive VSD was a factor.
Harvest	<Blank>	Yes

LongName	<Blank>	Procedure-Specific Factors - Restrictive VSD
ParentHarvestCodes	<Blank>	390|350|360|370|380|400|2700|2710|2720|420
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair", "TOF repair, No ventriculotomy", "TOF repair, Ventriculotomy, Nontransanular patch", "TOF repair, Ventriculotomy, Transanular patch", "TOF repair, RV-PA conduit", "TOF - Absent pulmonary valve repair", "Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])" or "Pulmonary atresia - VSD (including TOF, PA) repair"
ShortName	<Blank>	PSFRestrictVSD
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

955 **Procedure-Specific Factors - Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed)
ParentHarvestCodes	<Blank>	390|350|360|370|380|400|2700|2710|2720|420|1670|1680|1690|1700|2330|2130|950|960|970|980|1000|1010|2780|2790|1030|2340|1025
ParentShortName	<Blank>	PSFPrimProc

ParentValue	<Blank>	= "TOF - AVC (AVSD) repair", "TOF repair, No ventriculotomy", "TOF repair, Ventriculotomy, Nontransanular patch", "TOF repair, Ventriculotomy, Transanular patch", "TOF repair, RV-PA conduit", "TOF - Absent pulmonary valve repair", "Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])", "Pulmonary atresia - VSD (including TOF, PA) repair", "Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)", "Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)", "Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)", "HemiFontan", "Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty", "Superior Cavopulmonary anastomosis(es) + PA reconstruction", "Fontan, Atrio-pulmonary connection", "Fontan, Atrio-ventricular connection", "Fontan, TCPC, Lateral tunnel, Fenestrated", "Fontan, TCPC, Lateral tunnel, Nonfenestrated", "Fontan, TCPC, External conduit, Fenestrated", "Fontan, TCPC, External conduit, Nonfenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Fenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated", "Fontan, Other", "Fontan + Atrioventricular valvuloplasty" or "Fontan revision or conversion (Re-do Fontan)"
ShortName	<Blank>	PSFHypoBrPulmArt
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

956 **Procedure-Specific Factors - AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation)

ParentHarvestCodes	<Blank>	390|170|1670|1680|1690|1700|2330|2130|950|960|970|980|1000|1010|2780|2790|1030|2340|1025|870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair", "AVC (AVSD) repair, Complete (CAVSD)", "Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)", "Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)", "Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)", "HemiFontan", "Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty", "Superior Cavopulmonary anastomosis(es) + PA reconstruction", "Fontan, Atrio-pulmonary connection", "Fontan, Atrio-ventricular connection", "Fontan, TCPC, Lateral tunnel, Fenestrated", "Fontan, TCPC, Lateral tunnel, Nonfenestrated", "Fontan, TCPC, External conduit, Fenestrated", "Fontan, TCPC, External conduit, Nonfenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Fenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated", "Fontan, Other", "Fontan + Atrioventricular valvuloplasty", "Fontan revision or conversion (Re-do Fontan)" or "Norwood procedure"
ShortName	<Blank>	PSFAVRegurg34
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

957 **Procedure-Specific Factors - Double orifice left atrioventricular valve**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Double orifice left atrioventricular valve was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Double orifice left atrioventricular valve
ParentHarvestCodes	<Blank>	390|170
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFDoubOrif
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

958 **Procedure-Specific Factors - Single papillary muscle in the left ventricle and/or parachute left atrioventricular valve**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Single papillary muscle in the left ventricle and/or parachute left atrioventricular valve was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Single papillary muscle in the left ventricle and/or parachute left atrioventricular valve
ParentHarvestCodes	<Blank>	390|170
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFSingPap
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

959 **Procedure-Specific Factors - Hypoplastic posterior mural leaflet**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Hypoplastic posterior mural leaflet was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Hypoplastic posterior mural leaflet
ParentHarvestCodes	<Blank>	390|170

ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFHypoPostMLeaf
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

960 **Procedure-Specific Factors - Atrioventricular septal defect with ventricular imbalance: dominant left ventricle, hypoplastic right ventricle**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Atrioventricular septal defect with ventricular imbalance: dominant left ventricle and hypoplastic right ventricle was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Atrioventricular septal defect with ventricular imbalance: dominant left ventricle, hypoplastic right ventricle
ParentHarvestCodes	<Blank>	390|170
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFASDDomLeft
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

961 **Procedure-Specific Factors - Atrioventricular septal defect with ventricular imbalance: dominant right ventricle, hypoplastic left ventricle**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate whether Atrioventricular septal defect with ventricular imbalance: dominant right ventricle and hypoplastic left ventricle was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Atrioventricular septal defect with ventricular imbalance: dominant right ventricle, hypoplastic left ventricle
ParentHarvestCodes	<Blank>	390|170
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFASDDomRight
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

962 **Procedure-Specific Factors - Common atrioventricular valve with unbalanced commitment of valve to left ventricle**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Common atrioventricular valve with unbalanced commitment of valve to left ventricle was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Common atrioventricular valve with unbalanced commitment of valve to left ventricle
ParentHarvestCodes	<Blank>	390|170
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFCAVLeft
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

963 **Procedure-Specific Factors - Common atrioventricular valve with unbalanced commitment of valve to right ventricle**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Common atrioventricular valve with unbalanced commitment of valve to right ventricle was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Common atrioventricular valve with unbalanced commitment of valve to right ventricle
ParentHarvestCodes	<Blank>	390|170
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "TOF - AVC (AVSD) repair" or "AVC (AVSD) repair, Complete (CAVSD)"
ShortName	<Blank>	PSFCAVRight
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

964 **Procedure-Specific Factors - Moderate to severe systemic ventricular dysfunction**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Moderate to severe systemic ventricular dysfunction was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Moderate to severe systemic ventricular dysfunction
ParentHarvestCodes	<Blank>	1670|1680|1690|1700|2330|2130|950|960|970|980|1000|1010|2780|2790|1030|2340|1025
ParentShortName	<Blank>	PSFPrimProc

ParentValue	<Blank>	= "Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)", "Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)", "Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)", "HemiFontan", "Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty", "Superior Cavopulmonary anastomosis(es) + PA reconstruction", "Fontan, Atrio-pulmonary connection", "Fontan, Atrio-ventricular connection", "Fontan, TCPC, Lateral tunnel, Fenestrated", "Fontan, TCPC, Lateral tunnel, Nonfenestrated", "Fontan, TCPC, External conduit, Fenestrated", "Fontan, TCPC, External conduit, Nonfenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Fenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated", "Fontan, Other", "Fontan + Atrioventricular valvuloplasty" or "Fontan revision or conversion (Re-do Fontan)"
ShortName	<Blank>	PSFModSevSVD
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

965 **Procedure-Specific Factors - Systemic ventricular outflow tract obstruction (subaortic obstruction)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Systemic ventricular outflow tract obstruction (subaortic obstruction) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Systemic ventricular outflow tract obstruction (subaortic obstruction)
ParentHarvestCodes	<Blank>	1670|1680|1690|1700|2330|2130|950|960|970|980|1000|1010|2780|2790|1030|2340|1025
ParentShortName	<Blank>	PSFPrimProc

ParentValue	<Blank>	= "Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)", "Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)", "Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)", "HemiFontan", "Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty", "Superior Cavopulmonary anastomosis(es) + PA reconstruction", "Fontan, Atrio-pulmonary connection", "Fontan, Atrio-ventricular connection", "Fontan, TCPC, Lateral tunnel, Fenestrated", "Fontan, TCPC, Lateral tunnel, Nonfenestrated", "Fontan, TCPC, External conduit, Fenestrated", "Fontan, TCPC, External conduit, Nonfenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Fenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated", "Fontan, Other", "Fontan + Atrioventricular valvuloplasty" or "Fontan revision or conversion (Re-do Fontan)"
ShortName	<Blank>	PSFSysVentObs
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

966 **Procedure-Specific Factors - Ventricular dominance**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate ventricular dominance.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Ventricular dominance
ParentHarvestCodes	<Blank>	1670|1680|1690|1700|2330|2130|950|960|970|980|1000|1010|2780|2790|1030|2340|1025|870
ParentShortName	<Blank>	PSFPrimProc

ParentValue	<Blank>	= "Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)", "Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)", "Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)", "HemiFontan", "Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty", "Superior Cavopulmonary anastomosis(es) + PA reconstruction", "Fontan, Atrio-pulmonary connection", "Fontan, Atrio-ventricular connection", "Fontan, TCPC, Lateral tunnel, Fenestrated", "Fontan, TCPC, Lateral tunnel, Nonfenestrated", "Fontan, TCPC, External conduit, Fenestrated", "Fontan, TCPC, External conduit, Nonfenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Fenestrated", "Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated", "Fontan, Other", "Fontan + Atrioventricular valvuloplasty", "Fontan revision or conversion (Re-do Fontan)" or "Norwood procedure"
ShortName	<Blank>	PSFVentDom
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Left ventricular dominance
HarvestCode=2	<blank>	<New choice added> Right ventricular dominance
HarvestCode=3	<blank>	<New choice added> Balanced
HarvestCode=4	<blank>	<New choice added> Indeterminate ventricular dominance

970 **Procedure-Specific Factors - Posterior coronary loop: circumflex coming off the RCA**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Posterior coronary loop: circumflex coming off the RCA was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Posterior coronary loop: circumflex coming off the RCA
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFPostLoopCirc

VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

971 **Procedure-Specific Factors - Posterior Coronary Loop: left trunk coming off the RCA**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Posterior Coronary Loop: left trunk coming off the RCA was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Posterior Coronary Loop: left trunk coming off the RCA
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFPostLoopLeftTrunc
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

972 **Procedure-Specific Factors - Double Coronary Loops**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Double Coronary Loops (inverted origin of right and left coronary arteries) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Double Coronary Loops
ParentHarvestCodes	<Blank>	1110|1123|1120|1125

ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFDoubleLoops
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

973 **Procedure-Specific Factors - Single Coronary Ostium**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Single coronary ostium was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Single Coronary Ostium
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFSingOst
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

974 **Procedure-Specific Factors - Intramural coronary**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Intramural coronary was a factor.

Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Intramural coronary
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFIntramuralCor
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

975 **Procedure-Specific Factors - Large infundibular coronary artery from LAD**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Large infundibular coronary artery from LAD was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Large infundibular coronary artery from LAD
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFLgInfundArt
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

976 **Procedure-Specific Factors - Malaligned commissures**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Malaligned commissures was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Malaligned commissures
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFMalComm
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

977 **Procedure-Specific Factors - Take down of a commissure**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Take down of a commissure was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Take down of a commissure
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFTakeDownComm
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

978 **Procedure-Specific Factors - Aorto-pulmonary diameter mismatch**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Aorto-pulmonary diameter mismatch was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Aorto-pulmonary diameter mismatch
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFAortoPulMis
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

979 **Procedure-Specific Factors - Side by side vessels**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Side by side vessels was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Side by side vessels
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc

ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFSideBySide
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

980 **Procedure-Specific Factors - Posterior native aorta**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Posterior native aorta was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Posterior native aorta
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFPostNatAorta
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

981 **Procedure-Specific Factors - Subaortic obstruction/ conal septum malalignment**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Subaortic obstruction / conal septum malalignment was a factor.
Harvest	<Blank>	Yes

LongName	<Blank>	Procedure-Specific Factors - Subaortic obstruction/ conal septum malalignment
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFSubAObs
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

982 **Procedure-Specific Factors - Bicuspid native aortic valve (Bicuspid neopulmonary valve)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Bicuspid native aortic valve (Bicuspid neopulmonary valve) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Bicuspid native aortic valve (Bicuspid neopulmonary valve)
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFBicusNatAortic
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

983 **Procedure-Specific Factors - Bicuspid native pulmonary valve (Bicuspid neoaortic valve)**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Bicuspid native pulmonary valve (Bicuspid neoaortic valve) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Bicuspid native pulmonary valve (Bicuspid neoaortic valve)
ParentHarvestCodes	<Blank>	1110|1123|1120|1125
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Arterial switch operation (ASO)", "Arterial switch procedure + Aortic arch repair", "Arterial switch operation (ASO) and VSD repair" or "Arterial switch procedure and VSD repair + Aortic arch repair"
ShortName	<Blank>	PSFBicusNatPulm
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

984 **Procedure-Specific Factors - Truncus type 3 (PA Branches from PDA or descending aorta)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Truncus type 3 (PA Branches from PDA or descending aorta) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Truncus type 3 (PA Branches from PDA or descending aorta)
ParentHarvestCodes	<Blank>	230|2220
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Truncus arteriosus repair" or "Truncus + Interrupted aortic arch repair (IAA) repair"
ShortName	<Blank>	PSFTruncType3
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

985 **Procedure-Specific Factors - Abnormal coronary**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Abnormal coronary was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Abnormal coronary
ParentHarvestCodes	<Blank>	230|2220
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Truncus arteriosus repair" or "Truncus + Interrupted aortic arch repair (IAA) repair"
ShortName	<Blank>	PSFAbnormalCor
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

986 **Procedure-Specific Factors - Truncal valve regurgitation (moderate to severe)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Truncal valve regurgitation (moderate to severe) was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Truncal valve regurgitation (moderate to severe)
ParentHarvestCodes	<Blank>	230|2220
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Truncus arteriosus repair" or "Truncus + Interrupted aortic arch repair (IAA) repair"
ShortName	<Blank>	PSFTruncValRegurg

VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

987 **Procedure-Specific Factors - Source of pulmonary blood flow: Shunt - systemic artery-to-pulmonary artery**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Source of pulmonary blood flow: Shunt - systemic artery-to-pulmonary artery was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Source of pulmonary blood flow: Shunt - systemic artery-to-pulmonary artery
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFSrcPulFloShuntSys
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

988 **Procedure-Specific Factors - Source of pulmonary blood flow: Shunt - ventricle-to-pulmonary artery**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Source of pulmonary blood flow: Shunt - ventricle-to-pulmonary artery was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Source of pulmonary blood flow: Shunt - ventricle-to-pulmonary artery
ParentHarvestCodes	<Blank>	870

ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFSrcPulFloShuntVent
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

989 **Procedure-Specific Factors - Source of pulmonary blood flow: Superior caval vein-to-pulmonary artery**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Source of pulmonary blood flow: Superior caval vein-to-pulmonary artery was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Source of pulmonary blood flow: Superior caval vein-to-pulmonary artery
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFSrcPulFloSuper
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

990 **Procedure-Specific Factors - Ascending aorta < 2 mm**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Ascending aorta < 2 mm was a factor.
Harvest	<Blank>	Yes

LongName	<Blank>	Procedure-Specific Factors - Ascending aorta < 2 mm
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFAscAortaLT2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

991 **Procedure-Specific Factors - Aortic atresia**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Aortic atresia was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Aortic atresia
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFAortAtresia
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

992 **Procedure-Specific Factors - Aortic stenosis**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Aortic stenosis was a factor.

Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Aortic stenosis
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFAortSten
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

993 **Procedure-Specific Factors - Mitral atresia**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Mitral atresia was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Mitral atresia
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFMitralAtresia
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

994 **Procedure-Specific Factors - Mitral stenosis**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate whether Mitral stenosis was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Mitral stenosis
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFMitralSten
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

995 **Procedure-Specific Factors - Sinusoids**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the presence of sinusoids was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Sinusoids
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFSinusoids
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

996 **Procedure-Specific Factors - Intact atrial septum**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User

DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Intact atrial septum was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Intact atrial septum
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFIntactAtrSep
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

997 **Procedure-Specific Factors - Obstructed pulmonary venous return with severely restrictive ASD**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Obstructed pulmonary venous return with severely restrictive ASD was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Obstructed pulmonary venous return with severely restrictive ASD
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFObsPulVenRet
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

998 **Procedure-Specific Factors - Aberrant right subclavian artery**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether Aberrant right subclavian artery was a factor.
Harvest	<Blank>	Yes
LongName	<Blank>	Procedure-Specific Factors - Aberrant right subclavian artery
ParentHarvestCodes	<Blank>	870
ParentShortName	<Blank>	PSFPrimProc
ParentValue	<Blank>	= "Norwood procedure"
ShortName	<Blank>	PSFAberrantRtSubclav
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1001 **Status**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the clinical status of the patient prior to entering the operating room.
Harvest	<Blank>	Yes
LongName	<Blank>	Status
ShortName	<Blank>	Status
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Elective
HarvestCode=2	<blank>	<New choice added> Urgent
HarvestCode=3	<blank>	<New choice added> Emergent
HarvestCode=4	<blank>	<New choice added> Salvage

1005 **Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether cerebral oximetry was monitored.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used
ShortName	<Blank>	NIRSCerUsed
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1006 **Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used - Preoperatively**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether cerebral oximetry was monitored during the preoperative period.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used - Preoperatively
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NIRSCerUsed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NIRSCerPre
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1007 **Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used - Intraoperatively**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether cerebral oximetry was monitored during the intraoperative period.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used - Intraoperatively
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NIRSCerUsed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NIRSCerIntra
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1008 **Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used - Postoperatively**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether cerebral oximetry was monitored during the postoperative period.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used - Postoperatively
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NIRSCerUsed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NIRSCerPost
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

1009 **Near Infrared Spectroscopy (NIRS) Somatic Metrics Used**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether somatic oximetry was monitored.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Somatic Metrics Used
ShortName	<Blank>	NIRSSomUsed
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1010 **Near Infrared Spectroscopy (NIRS) Somatic Metrics Used - Preoperatively**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether somatic oximetry was monitored during the preoperative period.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Somatic Metrics Used - Preoperatively
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NIRSSomUsed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NIRSSomPre
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1011 **Near Infrared Spectroscopy (NIRS) Somatic Metrics Used - Intraoperatively**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether somatic oximetry was monitored during the intraoperative period.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Somatic Metrics Used - Intraoperatively
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NIRSSomUsed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NIRSSomIntra
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1012 **Near Infrared Spectroscopy (NIRS) Somatic Metrics Used - Postoperatively**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether somatic oximetry was monitored during the postoperative period.
Harvest	<Blank>	Yes
LongName	<Blank>	Near Infrared Spectroscopy (NIRS) Somatic Metrics Used - Postoperatively
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NIRSSomUsed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NIRSSomPost
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

1013 **Time Patient Entered the OR**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	<Blank>
ParentShortName	OpType	<Blank>
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	<Blank>

1014 **Skin Incision Start Time**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	<Blank>
ParentShortName	OpType	<Blank>
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	<Blank>

1015 **Endotracheal Intubation was Performed**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	<Blank>
ParentShortName	OpType	<Blank>
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	<Blank>

1019 **Re-Intubated After Initial Postoperative Extubation**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1
ParentShortName	OpType	Intubate
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "Yes"

1021 **Time of Skin Closure**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	<Blank>
ParentShortName	OpType	<Blank>
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	<Blank>

1022 **Time Patient Exited the OR**

Detail changed:	Changed from:	Changed to:

ParentHarvestCodes	<>8	<Blank>
ParentShortName	OpType	<Blank>
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	<Blank>

1023 **Procedure Extended Through Midnight**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	<Blank>
ParentShortName	OpType	<Blank>
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	<Blank>

1030 **Surgeon**

Detail changed:	Changed from:	Changed to:
Definition	Indicate the name of the primary surgeon performing this surgical procedure. This field must have controlled data entry where a user selects the surgeon name from a user list. This will remove variation in spelling, abbreviations and punctuation within the field. Note: Surgeon name is encrypted at the data warehouse. Punctuation, abbreviations and spacing differences can not be corrected at the warehouse.	Indicate the name of the primary surgeon performing this surgical procedure. The name, NPI and signature of all surgeons contributing data to the database must be on file with the STS for data files to be accepted.
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1031 **Surgeon National Provider Identifier**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1032 **Taxpayer Identification Number**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1033 **Assisting Surgeon**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

1034 **Assisting Surgeon National Provider Identifier**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1035 **Resident Surgeon**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1036 **Resident Surgeon Identifier**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1040 **Consultant Attending**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1050 **Consultant Attending Identifier**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1060 **Referring Cardiologist**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1070 **Referring Physician**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1080 **Reoperation Within This Admission**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1090 **Number of Prior Cardiothoracic Operations**

Detail changed:	Changed from:	Changed to:
HighValue	20	200
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1100 **Number of Prior CPB Cardiothoracic Operations**

Detail changed:	Changed from:	Changed to:
HighValue	20	50
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1140 **CPB Blood Prime**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the CPB circuit was primed with blood other than the patient's own blood.
Harvest	<Blank>	Yes
LongName	<Blank>	CPB Blood Prime
ParentHarvestCodes	<Blank>	1|6
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "VAD Operation Done With CPB"
ShortName	<Blank>	CPBPrimed
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

1170 **Circulatory Arrest Time**

Detail changed:	Changed from:	Changed to:
HighValue	100	200

1190 **Lowest Core Temperature - Bladder**

Detail changed:	Changed from:	Changed to:
HighValue	37	37.0
LowValue	1	1.0
VendorDataType	Integer	Real

1210 **Lowest Core Temperature - Esophageal**

Detail changed:	Changed from:	Changed to:
HighValue	37	37.0
LowValue	1	1.0
VendorDataType	Integer	Real

1230 **Lowest Core Temperature - Nasopharyngeal**

Detail changed:	Changed from:	Changed to:
HighValue	37	37.0
LowValue	1	1.0
VendorDataType	Integer	Real

1250 **Lowest Core Temperature - Rectal**

Detail changed:	Changed from:	Changed to:
HighValue	37	37.0
LowValue	1	1.0
VendorDataType	Integer	Real

1270 **Lowest Core Temperature - Tympanic**

Detail changed:	Changed from:	Changed to:
HighValue	37	37.0
LowValue	1	1.0

VendorDataType	Integer	Real

1290 **Lowest Core Temperature - Other**

Detail changed:	Changed from:	Changed to:
HighValue	37	37.0
LowValue	1	1.0
VendorDataType	Integer	Real

1430 **Arterial Blood Gas Management During Cooling**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	1|6
ParentShortName	CPerfUtil	OpType
ParentValue	= "Yes"	= "CPB" or "VAD Operation Done With CPB"

1440 **Hematocrit Prior to Circulatory Arrest or Cerebral Perfusion**

Detail changed:	Changed from:	Changed to:
HighValue	70	70.0
LowValue	5	5.0
ParentHarvestCodes	1	1|6
ParentShortName	CPerfUtil	OpType
ParentValue	= "Yes"	= "CPB" or "VAD Operation Done With CPB"
UsualRangeHigh	45	45.0
UsualRangeLow	15	15.0
VendorDataType	Integer	Real

1450 **Cardioplegia Delivery**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the delivery method of cardioplegia if used.
Harvest	<Blank>	Yes
LongName	<Blank>	Cardioplegia Delivery
ParentHarvestCodes	<Blank>	1|6
ParentShortName	<Blank>	OpType

ParentValue	<Blank>	= "CPB" or "VAD Operation Done With CPB"
ShortName	<Blank>	CplegiaDeliv
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> None
HarvestCode=2	<blank>	<New choice added> Antegrade
HarvestCode=3	<blank>	<New choice added> Retrograde
HarvestCode=4	<blank>	<New choice added> Both

1460 **Cardioplegia Type**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of cardioplegia used.
Harvest	<Blank>	Yes
LongName	<Blank>	Cardioplegia Type
ParentHarvestCodes	<Blank>	2|3|4
ParentShortName	<Blank>	CplegiaDeliv
ParentValue	<Blank>	= "Antegrade", "Retrograde" or "Both"
ShortName	<Blank>	CplegiaType
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Blood
HarvestCode=2	<blank>	<New choice added> Crystalloid
HarvestCode=3	<blank>	<New choice added> Both
HarvestCode=4	<blank>	<New choice added> Other

1470 **Cardioplegia Solution**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User

DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the cardioplegia solution used during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Cardioplegia Solution
ParentHarvestCodes	<Blank>	2|3|4
ParentShortName	<Blank>	CplegiaDeliv
ParentValue	<Blank>	= "Antegrade", "Retrograde" or "Both"
ShortName	<Blank>	CplegiaSolution
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> del Nido
HarvestCode=2	<blank>	<New choice added> Custodiol/Bretchneider (HTK)
HarvestCode=3	<blank>	<New choice added> Buckberg
HarvestCode=4	<blank>	<New choice added> Plegisol/St. Thomas
HarvestCode=5	<blank>	<New choice added> University of Wisconsin
HarvestCode=6	<blank>	<New choice added> Celsior
HarvestCode=7	<blank>	<New choice added> Roe's Solution
HarvestCode=8	<blank>	<New choice added> Microplegia with potassium
HarvestCode=9	<blank>	<New choice added> Microplegia with Adenocaine
HarvestCode=90	<blank>	<New choice added> Other

1480 **Cardioplegia Administered**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1490 **Cardioplegia Number Of Doses**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	CplegiaAdmin	CplegiaDeliv

ParentValue	= "Yes"	= "Antegrade", "Retrograde" or "Both"

1500 **Cardioplegia Delivery Ratio - Blood Solution**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1510 **Cardioplegia Delivery Ratio - Cardioplegia Solution**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1520 **Initial Delivery Route Of Cardioplegia - Antegrade Aortic Root**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1530 **Initial Delivery Route Of Cardioplegia - Antegrade Right Coronary Ostia**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1540 **Initial Delivery Route Of Cardioplegia - Antegrade Left Coronary Ostia**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1550 **Initial Delivery Route Of Cardioplegia - Retrograde Coronary Sinus**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1560 **Subsequent Delivery Route Of Cardioplegia - Antegrade Aortic Root**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1570 **Subsequent Delivery Route Of Cardioplegia - Antegrade Right Coronary Ostia**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1580 **Subsequent Delivery Route Of Cardioplegia - Antegrade Left Coronary Ostia**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1590 **Subsequent Delivery Route Of Cardioplegia - Retrograde Coronary Sinus**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1600 **Longest Myocardial Ischemic Interval**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1610 **Cardioplegia Solution**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1620 **Lowest Hematocrit On CPB**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1640 **Hematocrit - First after initiating CPB**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the first hematocrit measured after initiating CPB.

Harvest	<Blank>	Yes
HighValue	<Blank>	70.0
LongName	<Blank>	Hematocrit - First after initiating CPB
LowValue	<Blank>	5.0
ParentHarvestCodes	<Blank>	1|6
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "VAD Operation Done With CPB"
ShortName	<Blank>	HCTFirst
UsualRangeHigh	<Blank>	45.0
UsualRangeLow	<Blank>	15.0
VendorDataType	<Blank>	Real

1650 **Hematocrit - Last Measured During CPB**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the last hematocrit measured during CPB.
Harvest	<Blank>	Yes
HighValue	<Blank>	70.0
LongName	<Blank>	Hematocrit - Last Measured During CPB
LowValue	<Blank>	5.0
ParentHarvestCodes	<Blank>	1|6
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "VAD Operation Done With CPB"
ShortName	<Blank>	HCTLast
UsualRangeHigh	<Blank>	45.0
UsualRangeLow	<Blank>	15.0
VendorDataType	<Blank>	Real

1660 **Hematocrit - Post-CPB and Post-Protamine**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes

DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the hematocrit measured post-CPB following protamine administration.
Harvest	<Blank>	Yes
HighValue	<Blank>	70.0
LongName	<Blank>	Hematocrit - Post-CPB and Post-Protamine
LowValue	<Blank>	5.0
ParentHarvestCodes	<Blank>	1|6
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "VAD Operation Done With CPB"
ShortName	<Blank>	HCTPost
UsualRangeHigh	<Blank>	45.0
UsualRangeLow	<Blank>	15.0
VendorDataType	<Blank>	Real

1670 **Ultrafiltration Performed After CPB**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether ultrafiltration was performed after CPB.
Harvest	<Blank>	Yes
LongName	<Blank>	Ultrafiltration Performed After CPB
ParentHarvestCodes	<Blank>	1|6
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "VAD Operation Done With CPB"
ShortName	<Blank>	Ultrafiltration
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> No
HarvestCode=2	<blank>	<New choice added> Yes, Modified Ultrafiltration (MUF)

HarvestCode=3	<blank>	<New choice added> Yes, Conventional Ultrafiltration (CUF)
HarvestCode=4	<blank>	<New choice added> Yes, MUF and CUF

1770 **Pulmonary Vascular Resistance Measured**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

1780 **Pulmonary Vascular Resistance**

Detail changed:	Changed from:	Changed to:
HighValue	100	100.0
LowValue	0 0	0.0
UsualRangeHigh	3	3.0
UsualRangeLow	1	1.0

1790 **Pulmonary Vascular Resistance Index**

Detail changed:	Changed from:	Changed to:
HighValue	100	100.0
LowValue	0	0.0
ParentHarvestCodes	1|>=40	1|<40
UsualRangeHigh	3	3.0
UsualRangeLow	1	1.0
VendorDataType	Integer	Real

1880 **Intraoperative Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1890 **Intraoperative - Cerebral Metrics - Oximeter Provided First Indication**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1900 **Intraoperative - Pre-Induction Baseline Cerebral Regional Oxygen Saturation - Left**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1910 **Intraoperative - Pre-Induction Baseline Cerebral Regional Oxygen Saturation - Right**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1920 **Intraoperative - Pre-Induction Baseline Cerebral Regional Oxygen Saturation - Center**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1930 **Intraoperative - Cumulative Cerebral Saturation Below Threshold - Left**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1940 **Intraoperative - Cumulative Cerebral Saturation Below Threshold - Right**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1950 **Intraoperative - Cumulative Cerebral Saturation Below Threshold - Center**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1960 **Intraoperative - Skin Closure Cerebral Regional Oxygen Saturation - Left**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1970 **Intraoperative - Skin Closure Cerebral Regional Oxygen Saturation - Right**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

1980 **Intraoperative - Skin Closure Cerebral Regional Oxygen Saturation - Center**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

1990 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - >90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2000 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 81-90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2010 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 71-80**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2020 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 61-70**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2030 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 51-60**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2040 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 41-50**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2050 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 31-40**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2060 **Intraoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - <=30**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2070 **Intraoperative Near Infrared Spectroscopy (NIRS) Somatic Metrics Used**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2080 **Intraoperative - Somatic Metrics - Somatic Oximeter provided First Indication**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2090 **Intraoperative - Somatic Sensor Location**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2100 **Intraoperative - Pre-Induction Baseline Somatic Regional Oxygen Saturation**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2110 **Intraoperative - Cumulative Somatic Saturation Below Threshold**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2120 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - >90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2130 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 81-90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2140 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 71-80**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2150 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 61-70**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2160 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 51-60**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2170 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 41-50**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2180 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 31-40**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2190 **Intraoperative - Somatic Regional Oxygen Saturation Percentile Ranges - <=30**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

2200 **Postoperative Near Infrared Spectroscopy (NIRS) Cerebral Metrics Used**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2210 **Postoperative - Cerebral Metrics - Cerebral Oximeter Provided First Indication**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2220 **Postoperative - Cumulative Cerebral Saturation Below Threshold - Left**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2230 **Postoperative - Cumulative Cerebral Saturation Below Threshold - Right**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2240 **Postoperative - Cumulative Cerebral Saturation Below Threshold - Center**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2250 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - >90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2260 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 81-90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2270 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 71-80**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2280 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 61-70**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2290 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 51-60**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2300 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 41-50**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2310 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - 31-40**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2320 **Postoperative - Cerebral Regional Oxygen Saturation Percentile Ranges - <=30**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2330 **Postoperative Near Infrared Spectroscopy (NIRS) Somatic Metrics Used**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2340 **Postoperative - Somatic Metrics - Somatic Oximeter Provided First Indication**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2350 **Postoperative - Somatic Sensor Location**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2360 **Postoperative - Cumulative Somatic Saturation Below Threshold**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2370 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - >90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2380 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 81-90**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2390 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 71-80**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2400 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 61-70**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2410 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 51-60**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

2420 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 41-50**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2430 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - 31-40**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2440 **Postoperative - Somatic Regional Oxygen Saturation Percentile Ranges - <=30**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2450 **Intraop Blood Products**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

2480 **Intraop Blood Products - RBC Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2490 **Intraop Blood Products - RBC Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2500 **Intraop Blood Products - RBC Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected

Harvest	Yes	No

2520 **Intraop Blood Products - FFP Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2530 **Intraop Blood Products - FFP Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2540 **Intraop Blood Products - FFP Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2560 **Intraop Blood Products - Cryo Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2570 **Intraop Blood Products - Cryo Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2580 **Intraop Blood Products - Cryo Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2600 **Intraop Blood Products - Platelets Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2610 **Intraop Blood Products - Platelets Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2620 **Intraop Blood Products - Platelets Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2640 **Intraop Blood Products - Whole Blood Fresh**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the whole blood was transfused within 48 hours of donation.
Harvest	<Blank>	Yes
LongName	<Blank>	Intraop Blood Products - Whole Blood Fresh
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IBdWB
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IBdWBFresh
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

2650 **Intraop Blood Products - Whole Blood Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2660 **Intraop Blood Products - Whole Blood Units**

Detail changed:	Changed from:	Changed to:

			Field no longer being collected
	Harvest	Yes	No

2670 **Intraop Blood Products - Whole Blood Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2690 **Intraop Blood Products - Factor VIIa Total Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2700 **Intraop Medications - Aprotinin**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

2710 **Intraop Medications - Aprotinin - Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2720 **Intraop Medications - Epsilon Amino-Caproic Acid**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

2730 **Intraop Medications - Epsilon Amino-Caproic Acid - Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2740 **Intraop Medications - Desmopressin**

Detail changed:	Changed from:	Changed to:

ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

2750 **Intraop Medications - Desmopressin (DDAVP) - Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2760 **Intraop Medications - Tranexamic Acid**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

2770 **Intraop Medications - Tranexamic Acid - Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2780 **CAB**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	>6574	1|2
ParentShortName	AgeDays	OpType
ParentValue	>6574	= "CPB" or "No CPB Cardiovascular"

2790 **Dist Anast - Art #**

Detail changed:	Changed from:	Changed to:
Definition	Indicate the total number of distal anastomoses with arterial conduits, whether IMA, GEPA, radial artery, etc.	Indicate the total number of distal anastomoses with arterial conduits, whether IMA, radial artery, etc.

2810 **Dist Anast - Vein Harvest Technique**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2820 **Saphenous Vein Harvest Time**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2830 **Anastomotic Device Used**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2840 **Anastomotic Device**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2860 **IMA Harvest Technique**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2870 **IMA Dist Anast #**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2880 **Radial Artery Used**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2890 **Radial Dist Anast #**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2900 **Radial Dist Anast Harvest Technique**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

2910 **Radial Artery Harvest Time**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2920 **GEPA Dist Anast #**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2930 **Other Arterial Distal Anastomoses #**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2940 **Valve**

Detail changed:	Changed from:	Changed to:
Definition	Indicate whether a surgical procedure was done on the Aortic, Mitral, Tricuspid or Pulmonic valves.	Indicate whether a surgical procedure was done on the Aortic, Mitral, Tricuspid, Pulmonic, common AV valve or truncal valves.
ParentHarvestCodes	>6574	1|2
ParentShortName	AgeDays	OpType
ParentValue	>6574	= "CPB" or "No CPB Cardiovascular"

2950 **VS-Aortic Proc-Procedure**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2960 **VS-Mitral Proc-Procedure**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2970 **VS-Mitral Repair Attempt**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2980 **VS-Tricuspid Proc-Procedure**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

2990 **VS-Pulmonic Proc-Procedure**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3000 **VS-Aortic Proc-Aortic Annular enlargement**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3010 **VS-Aortic Proc-Imp-Type**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3020 **VS-Aortic Proc-Imp**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3030 **VS-Aortic Proc-Imp-Size**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3040 **VS-Mitral Proc-Imp-Type**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

3050 **VS-Mitral Proc-Imp**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3060 **VS-Mitral Proc-Imp-Size**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3070 **VS-Tricuspid Proc-Imp-Type**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3080 **VS-Tricuspid Proc-Imp**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3090 **VS-Tricuspid Proc-Imp-Size**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3100 **VS-Pulmonic Proc-Imp-Type**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3110 **VS-Pulmonic Proc-Imp**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3120 **VS-Pulmonic Proc-Imp-Size**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3130 **Valve Implant List Version Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3140 **Valve Device Explanted And/Or Implanted**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a valve device of any type was explanted and/or implanted during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Device Explanted And/Or Implanted
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	OpValve
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValExImp
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> No
HarvestCode=2	<blank>	<New choice added> Yes, Explanted
HarvestCode=3	<blank>	<New choice added> Yes, Implanted
HarvestCode=4	<blank>	<New choice added> Yes, Explanted and Implanted

3150 **Valve Explant Type #1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User

DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the first valve or device explanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Explant Type #1
ParentHarvestCodes	<Blank>	2|4
ParentShortName	<Blank>	ValExImp
ParentValue	<Blank>	= "Yes, Explanted" or "Yes, Explanted and Implanted"
ShortName	<Blank>	ValExType1
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Mechanical
HarvestCode=2	<blank>	<New choice added> Bioprosthetic
HarvestCode=3	<blank>	<New choice added> Homograft/Allograft
HarvestCode=4	<blank>	<New choice added> Autograft
HarvestCode=5	<blank>	<New choice added> Annuloplasty band/ring
HarvestCode=6	<blank>	<New choice added> Mitral clip
HarvestCode=7	<blank>	<New choice added> Surgeon fashioned
HarvestCode=9	<blank>	<New choice added> Other

3160 **Second Valve Explanted or Device Removed**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a second valve or device was explanted
Harvest	<Blank>	Yes
LongName	<Blank>	Second Valve Explanted or Device Removed
ParentHarvestCodes	<Blank>	2|4
ParentShortName	<Blank>	ValExImp
ParentValue	<Blank>	= "Yes, Explanted" or "Yes, Explanted and Implanted"

ShortName	<Blank>	ValEx2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3170 **Valve Explant Type #2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the second valve or device explanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Explant Type #2
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValEx2
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValExType2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Mechanical
HarvestCode=2	<blank>	<New choice added> Bioprosthetic
HarvestCode=3	<blank>	<New choice added> Homograft/Allograft
HarvestCode=4	<blank>	<New choice added> Autograft
HarvestCode=5	<blank>	<New choice added> Annuloplasty band/ring
HarvestCode=6	<blank>	<New choice added> Mitral clip
HarvestCode=7	<blank>	<New choice added> Surgeon fashioned
HarvestCode=9	<blank>	<New choice added> Other

3180 **Third Valve Explanted or Device Removed**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a third valve or device was explanted
Harvest	<Blank>	Yes
LongName	<Blank>	Third Valve Explanted or Device Removed
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValEx2
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValEx3
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3190 **Valve Explant Type #3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the third valve or device explanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Explant Type #3
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValEx3
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValExType3
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Mechanical
HarvestCode=2	<blank>	<New choice added> Bioprosthetic
HarvestCode=3	<blank>	<New choice added> Homograft/Allograft

HarvestCode=4	<blank>	<New choice added> Autograft
HarvestCode=5	<blank>	<New choice added> Annuloplasty band/ring
HarvestCode=6	<blank>	<New choice added> Mitral clip
HarvestCode=7	<blank>	<New choice added> Surgeon fashioned
HarvestCode=9	<blank>	<New choice added> Other

3200 **Fourth Valve Explanted or Device Removed**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a fourth valve or device was explanted
Harvest	<Blank>	Yes
LongName	<Blank>	Fourth Valve Explanted or Device Removed
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValEx3
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValEx4
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3210 **Valve Explant Type #4**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the fourth valve or device explanted
Harvest	<Blank>	Yes

LongName	<Blank>	Valve Explant Type #4
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValEx4
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValExType4
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Mechanical
HarvestCode=2	<blank>	<New choice added> Bioprosthetic
HarvestCode=3	<blank>	<New choice added> Homograft/Allograft
HarvestCode=4	<blank>	<New choice added> Autograft
HarvestCode=5	<blank>	<New choice added> Annuloplasty band/ring
HarvestCode=6	<blank>	<New choice added> Mitral clip
HarvestCode=7	<blank>	<New choice added> Surgeon fashioned
HarvestCode=9	<blank>	<New choice added> Other

3220 **Valve Implant Location #1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the location of the first valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Location #1
ParentHarvestCodes	<Blank>	3|4
ParentShortName	<Blank>	ValExImp
ParentValue	<Blank>	= "Yes, Implanted" or "Yes, Explanted and Implanted"
ShortName	<Blank>	ValImpLoc1
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Aortic
HarvestCode=2	<blank>	<New choice added> Mitral
HarvestCode=3	<blank>	<New choice added> Tricuspid
HarvestCode=4	<blank>	<New choice added> Pulmonic
HarvestCode=5	<blank>	<New choice added> Common AV
HarvestCode=6	<blank>	<New choice added> Truncal

3230 **Valve Implant Type #1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the first valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Type #1
ParentHarvestCodes	<Blank>	3|4
ParentShortName	<Blank>	ValExImp
ParentValue	<Blank>	= "Yes, Implanted" or "Yes, Explanted and Implanted"
ShortName	<Blank>	ValImpType1
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Surgeon fashioned
HarvestCode=2	<blank>	<New choice added> Autograft
HarvestCode=3	<blank>	<New choice added> Commercially supplied device

3240 **Valve Implant Surgeon Fashoned Material #1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate the material used to fashion the first valve or device
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Surgeon Fashoned Material #1
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImpType1
ParentValue	<Blank>	= "Surgeon fashioned"
ShortName	<Blank>	ValImpSFMat1
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> PTFE (Gore-Tex)
HarvestCode=2	<blank>	<New choice added> Pericardium
HarvestCode=9	<blank>	<New choice added> Other

3250 **Valve Implant Commercial Device Model Number #1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the name of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size. Note that the model number is different from the serial number.
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Commercial Device Model Number #1
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType1
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComMod1
VendorDataType	<Blank>	Text (categorical values specified by STS)

3260 **Valve Implant Commercial Device Size #1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User

DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the size of the first implanted valve or device
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Valve Implant Commercial Device Size #1
LowValue	<Blank>	5
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType1
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComSz1
UsualRangeHigh	<Blank>	40
UsualRangeLow	<Blank>	10
VendorDataType	<Blank>	Integer

3270 **Second Valve Implant**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a second valve or device was implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Second Valve Implant
ParentHarvestCodes	<Blank>	3|4
ParentShortName	<Blank>	ValExImp
ParentValue	<Blank>	= "Yes, Implanted" or "Yes, Explanted and Implanted"
ShortName	<Blank>	ValImp2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3280 **Valve Implant Location #2**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the location of the second valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Location #2
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp2
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImpLoc2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Aortic
HarvestCode=2	<blank>	<New choice added> Mitral
HarvestCode=3	<blank>	<New choice added> Tricuspid
HarvestCode=4	<blank>	<New choice added> Pulmonic
HarvestCode=5	<blank>	<New choice added> Common AV
HarvestCode=6	<blank>	<New choice added> Truncal

3290 **Valve Implant Type #2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the second valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Type #2
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp2
ParentValue	<Blank>	= "Yes"

ShortName	<Blank>	ValImpType2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Surgeon fashioned
HarvestCode=2	<blank>	<New choice added> Autograft
HarvestCode=3	<blank>	<New choice added> Commercially supplied device

3300 **Valve Implant Surgeon Fashoned Material #2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the material used to fashion the second valve or device
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Surgeon Fashoned Material #2
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImpType2
ParentValue	<Blank>	= "Surgeon fashioned"
ShortName	<Blank>	ValImpSFMat2
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> PTFE (Gore-Tex)
HarvestCode=2	<blank>	<New choice added> Pericardium
HarvestCode=9	<blank>	<New choice added> Other

3310 **Valve Implant Commercial Device Model Number #2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the name of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.

Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Commercial Device Model Number #2
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType2
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComMod2
VendorDataType	<Blank>	Text (categorical values specified by STS)

3320 **Valve Implant Commercial Device Size #2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the size of the second implanted valve or device
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Valve Implant Commercial Device Size #2
LowValue	<Blank>	5
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType2
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComSz2
UsualRangeHigh	<Blank>	40
UsualRangeLow	<Blank>	10
VendorDataType	<Blank>	Integer

3330 **Third Valve Implant**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a third valve or device was implanted
Harvest	<Blank>	Yes

LongName	<Blank>	Third Valve Implant
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp2
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImp3
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3340 **Valve Implant Location #3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the location of the third valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Location #3
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp3
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImpLoc3
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Aortic
HarvestCode=2	<blank>	<New choice added> Mitral
HarvestCode=3	<blank>	<New choice added> Tricuspid
HarvestCode=4	<blank>	<New choice added> Pulmonic
HarvestCode=5	<blank>	<New choice added> Common AV
HarvestCode=6	<blank>	<New choice added> Truncal

3350 **Valve Implant Type #3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the third valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Type #3
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp3
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImpType3
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Surgeon fashioned
HarvestCode=2	<blank>	<New choice added> Autograft
HarvestCode=3	<blank>	<New choice added> Commercially supplied device

3360 **Valve Implant Surgeon Fashoned Material #3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the material used to fashion the third valve or device
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Surgeon Fashoned Material #3
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImpType3
ParentValue	<Blank>	= "Surgeon fashioned"
ShortName	<Blank>	ValImpSFMat3
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> PTFE (Gore-Tex)
HarvestCode=2	<blank>	<New choice added> Pericardium
HarvestCode=9	<blank>	<New choice added> Other

3370 **Valve Implant Commercial Device Model Number #3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the name of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Commercial Device Model Number #3
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType3
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComMod3
VendorDataType	<Blank>	Text (categorical values specified by STS)

3380 **Valve Implant Commercial Device Size #3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the size of the third implanted valve or device
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Valve Implant Commercial Device Size #3
LowValue	<Blank>	5
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType3
ParentValue	<Blank>	= "Commercially supplied device"

ShortName	<Blank>	ValImpComSz3
UsualRangeHigh	<Blank>	40
UsualRangeLow	<Blank>	10
VendorDataType	<Blank>	Integer

3390 **Fourth Valve Implant**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a fourth valve or device was implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Fourth Valve Implant
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp3
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImp4
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3400 **Valve Implant Location #4**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the location of the fourth valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Location #4
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp4

ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImpLoc4
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Aortic
HarvestCode=2	<blank>	<New choice added> Mitral
HarvestCode=3	<blank>	<New choice added> Tricuspid
HarvestCode=4	<blank>	<New choice added> Pulmonic
HarvestCode=5	<blank>	<New choice added> Common AV
HarvestCode=6	<blank>	<New choice added> Truncal

3410 **Valve Implant Type #4**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the type of the fourth valve or device implanted
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Type #4
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImp4
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	ValImpType4
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Surgeon fashioned
HarvestCode=2	<blank>	<New choice added> Autograft
HarvestCode=3	<blank>	<New choice added> Commercially supplied device

3420 **Valve Implant Surgeon Fashoned Material #4**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the material used to fashion the fourth valve or device
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Surgeon Fashoned Material #4
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ValImpType4
ParentValue	<Blank>	= "Surgeon fashioned"
ShortName	<Blank>	ValImpSFMat4
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> PTFE (Gore-Tex)
HarvestCode=2	<blank>	<New choice added> Pericardium
HarvestCode=9	<blank>	<New choice added> Other

3430 **Valve Implant Commercial Device Model Number #4**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the name of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.
Harvest	<Blank>	Yes
LongName	<Blank>	Valve Implant Commercial Device Model Number #4
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType4
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComMod4
VendorDataType	<Blank>	Text (categorical values specified by STS)

3440 **Valve Implant Commercial Device Size #4**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the size of the fourth implanted valve or device
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Valve Implant Commercial Device Size #4
LowValue	<Blank>	5
ParentHarvestCodes	<Blank>	3
ParentShortName	<Blank>	ValImpType4
ParentValue	<Blank>	= "Commercially supplied device"
ShortName	<Blank>	ValImpComSz4
UsualRangeHigh	<Blank>	40
UsualRangeLow	<Blank>	10
VendorDataType	<Blank>	Integer

3450 **VAD**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3460 **VAD Explanted And/Or Implanted**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a ventricular assist device (VAD) was explanted and/or implanted during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	VAD Explanted And/Or Implanted
ParentHarvestCodes	<Blank>	1|2|3|4|6|7|777
ParentShortName	<Blank>	OpType

ParentValue	<Blank>	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"
ShortName	<Blank>	VADExImp
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> No
HarvestCode=2	<blank>	<New choice added> Yes, explanted
HarvestCode=3	<blank>	<New choice added> Yes, implanted
HarvestCode=4	<blank>	<New choice added> Yes, explanted and implanted

3470 **VAD Product Type List Version Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3480 **VAD-Previous VAD**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3490 **Previous VAD Facility**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3500 **VAD-Indication for VAD**

Detail changed:	Changed from:	Changed to:
Definition	Indicate the reason the patient is receiving the initial ventricular assist device (VAD).	Indicate the reason the patient is receiving the ventricular assist device (VAD).
LongName	VAD-Indication for Initial VAD	VAD-Indication for VAD
ParentHarvestCodes	1	3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted" or "Yes, explanted and implanted"

3510 **VAD-Intubated Pre-VAD**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3520 **VAD-Hemodynamics Pre-VAD-PCWP**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3530 **VAD-Hemodynamics Pre-VAD-CVP**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3540 **VAD-Hemodynamics Pre-VAD-CI**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3550 **VAD-Hemodynamics Pre-VAD-RVEF**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3560 **VAD-Implant Type**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted" or "Yes, explanted and implanted"

3570 **VAD-Product Type**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	Is Not Missing	3|4
ParentShortName	VImpTy	VADExImp
ParentValue	Is Not Missing	= "Yes, implanted" or "Yes, explanted and implanted"

HarvestCode=1	HeartQuest VAD	<choice was deleted>
HarvestCode=2	Lion Heart	<choice was deleted>
HarvestCode=3	Novacor LVAS	<choice was deleted>
HarvestCode=4	Heartsaver VAD	<choice was deleted>
HarvestCode=5	Jarvik 2000	<choice was deleted>
HarvestCode=6	DeBakey VAD	<choice was deleted>
HarvestCode=7	TandemHeart pVAD	<choice was deleted>
HarvestCode=8	AB-180 iVAD	<choice was deleted>
HarvestCode=9	CardioWest TAH	<choice was deleted>
HarvestCode=10	Thoratec IVAD	<choice was deleted>
HarvestCode=11	HeartMate VE	<choice was deleted>
HarvestCode=12	HeartMate IP LVAS	<choice was deleted>
HarvestCode=13	HeartMate SNAP-VE	<choice was deleted>
HarvestCode=14	HeartMate XVE	<choice was deleted>
HarvestCode=15	HeartMate II	<choice was deleted>
HarvestCode=16	HeartMate III	<choice was deleted>
HarvestCode=17	BVS5000i	<choice was deleted>
HarvestCode=18	AbioCor	<choice was deleted>
HarvestCode=19	Incor	<choice was deleted>
HarvestCode=20	Excor	<choice was deleted>
HarvestCode=21	Other	<choice was deleted>
HarvestCode=22	Abiomed AB5000	<choice was deleted>
HarvestCode=23	Abiomed Impella	<choice was deleted>
HarvestCode=24	VentrAssist	<choice was deleted>
HarvestCode=25	Circulite LVAD	<choice was deleted>
HarvestCode=26	HeartWare - HVAD	<choice was deleted>
HarvestCode=27	Terumo - DuraHeart LVAD	<choice was deleted>
HarvestCode=28	WorldHeart - Levacor LVAD	<choice was deleted>
HarvestCode=29	Levitronix - CentriMag	<choice was deleted>

3580 **VAD-Implant Date**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

3590 **VAD-Explant**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3600 **VAD-Explant Date**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3610 **VAD-Explant Reason**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|4
ParentShortName	VExp	VADExImp
ParentValue	= "Yes"	= "Yes, explanted" or "Yes, explanted and implanted"

3620 **VAD-Cardiac Transplant Date**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3630 **VAD-Initial VAD Cannulation/Attach Site - LVAD Inflow**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3640 **VAD-Implant #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3650 **VAD-Initial VAD Cannulation/Attach Site - RVAD Inflow**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected

Harvest	Yes	No

3660 **VAD-Implant Type #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3670 **VAD-Product Type #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3680 **VAD-Implant Date #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3690 **VAD-Explant #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3700 **VAD-Explant Date #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3710 **VAD-Explant Reason #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3720 **VAD-Cardiac Transplant Date #2**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3730 **VAD- #2 VAD Cannulation/Attach Site - LVAD Inflow**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3740 **VAD- #2 VAD Cannulation/Attach Site - RVAD Inflow**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3750 **VAD-Implant #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3760 **VAD-Implant Type #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3770 **VAD-Product Type #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3780 **VAD-Implant Date #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3790 **VAD-Explant #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3800 **VAD-Explant Date #3**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

3810 **VAD-Explant Reason #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3820 **VAD-Cardiac Transplant Date #3**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3830 **VAD- #3 VAD Cannulation/Attach Site - LVAD Inflow**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3840 **VAD- #3 VAD Cannulation/Attach Site - RVAD Inflow**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3850 **VAD-Primary VAD Comp-Intracranial Bleed**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3860 **VAD-Primary VAD Comp-Embolic Stroke**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3870 **VAD-Primary VAD Comp-Driveline and/or cannula Infection**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3880 **VAD-Primary VAD Comp-Pump Pocket Infection**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3890 **VAD-Primary VAD Comp-VAD Endocarditis**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3900 **VAD-Primary VAD Comp-Device Malfunction**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3910 **VAD-Primary VAD Comp-Bowel Obstruction**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	1	2|3|4
ParentShortName	VAD	VADExImp
ParentValue	= "Yes"	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"

3920 **VAD-Primary VAD Comp-Hemolysis**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes

DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate if the patient was diagnosed with hemolysis post VAD insertion by documentation in the medical record.
Harvest	<Blank>	Yes
LongName	<Blank>	VAD-Primary VAD Comp-Hemolysis
ParentHarvestCodes	<Blank>	2|3|4
ParentShortName	<Blank>	VADExImp
ParentValue	<Blank>	= "Yes, implanted", "Yes, explanted" or "Yes, implanted and explanted"
ShortName	<Blank>	PVCmpHemo
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

3940 **Postop Blood Products**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<>8	1|2|3|4|6|7|777
ParentValue	<>"Non-cardiac, Non-thoracic procedure on cardiac patient with cardiac anesthesia"	= "CPB", "No CPB Cardiovascular", "ECMO", "Thoracic", "VAD Operation Done With CPB", "VAD Operation Done Without CPB." or "Other"

3960 **Postop Blood Products - RBC Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3970 **Postop Blood Products - RBC Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

3980 **Postop Blood Products - RBC Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4000 **Postop Blood Products - FFP Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4010 **Postop Blood Products - FFP Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4020 **Postop Blood Products - FFP Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4040 **Postop Blood Products - Cryoprecipitate Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4050 **Postop Blood Products - Cryoprecipitate Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4060 **Postop Blood Products - Cryoprecipitate Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4080 **Postop Blood Products - Platelets Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4090 **Postop Blood Products - Platelets Units**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4100 **Postop Blood Products - Platelets Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4120 **Postop Blood Products - Whole Blood Fresh**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the whole blood was transfused within 48 hours of donation.
Harvest	<Blank>	Yes
LongName	<Blank>	Postop Blood Products - Whole Blood Fresh
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	BdWB
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	BdWBFresh
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4130 **Postop Blood Products - Whole Blood Donor Exposures**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4140 **Postop Blood Products - Whole Blood Units**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

4150 **Postop Blood Products - Whole Blood Milliliters**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4170 **Postop Blood Products - Factor VIIa Total Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4180 **Complications Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

4200 **Complication**

Detail changed:	Changed from:	Changed to:

Definition	A complication is an event or occurrence that is associated with a disease or a healthcare intervention, is a departure from the desired course of events, and may cause, or be associated with, suboptimal outcome. A complication does not necessarily represent a breech in the standard of care that constitutes medical negligence or medical malpractice. An operative or procedural complication is any complication, regardless of cause, occurring (1) within 30 days after surgery or intervention in or out of the hospital, or (2) after 30 days during the same hospitalization subsequent to the operation or intervention. Operative and procedural complications include both intraoperative/intraprocedural complications and postoperative/postprocedural complications in this time interval. An adverse event is a complication that is associated with a healthcare intervention and is associated with suboptimal outcome. Adverse events represent a subset of complications. Not all medical errors result in an adverse event; the administration of an incorrect dose of a medication is a medical error, but it does not always result in an adverse event. Similarly, not all adverse events are the result of medical error. A child may develop pneumonia after an atrial septal defect repair despite intra- and peri-operative management that is free of error. Complications of the underlying disease state, which are not related to a medical intervention, are not adverse events. For example, a patient who presents for medical care with metastatic lung cancer has already developed a complication (Metastatic spread) of the primary lung cancer without any healthcare intervention. Furthermore, complications not associated with suboptimal outcome or harm are not adverse events and are known as no harm events. The patient who receives an incorrect dose of a medication without harm has experienced a no harm event, but not an adverse event.	Assign complication to the operation that is most closely associated with the complication. A complication is an event or occurrence that is associated with a disease or a healthcare intervention, is a departure from the desired course of events, and may cause, or be associated with, suboptimal outcome. A complication does not necessarily represent a breech in the standard of care that constitutes medical negligence or medical malpractice. An operative or procedural complication is any complication, regardless of cause, occurring (1) within 30 days after surgery or intervention in or out of the hospital, or (2) after 30 days during the same hospitalization subsequent to the operation or intervention. Operative and procedural complications include both intraoperative/intraprocedural complications and postoperative/postprocedural complications in this time interval. An adverse event is a complication that is associated with a healthcare intervention and is associated with suboptimal outcome. Adverse events represent a subset of complications. Not all medical errors result in an adverse event; the administration of an incorrect dose of a medication is a medical error, but it does not always result in an adverse event. Similarly, not all adverse events are the result of medical error. A child may develop pneumonia after an atrial septal defect repair despite intra- and peri-operative management that is free of error. Complications of the underlying disease state, which are not related to a medical intervention, are not adverse events. For example, a patient who presents for medical care with metastatic lung cancer has already developed a complication (Metastatic spread) of the primary lung cancer without any healthcare intervention. Furthermore, complications not associated with suboptimal outcome or harm are not adverse events and are known as no harm events. The patient who receives an incorrect dose of a medication without harm has experienced a no harm event, but not an adverse event.
HarvestCode=22 - Definition	Any additional unplanned cardiac operation occurring (1) within 30 days after surgery or intervention in or out of the hospital, or (2) after 30 days during the same hospitalization subsequent to the operation or intervention. A cardiac operation is defined as any operation that is of the operation type of “CPB” or “No CPB Cardiovascular”. The following operations will always be coded as “Planned Reoperation”: (1) Delayed Sternal Closure, (2) ECMO Decannulation, (3) VAD Decannulation, (4) Removal of Broviac catheter. The following operations will always be coded as “Unplanned Reoperation”: (1) Mediastinal exploration for bleeding, (2) Mediastinal exploration for infection, (3) Mediastinal exploration for hemodynamic instability, (4) Emergent mediastinal exploration for initiation of ECMO or VAD, (5) Reoperation for residual or recurrent lesion.	Any additional unplanned cardiac operation occurring (1) within 30 days after surgery or intervention in or out of the hospital, or (2) after 30 days during the same hospitalization subsequent to the operation or intervention. A cardiac operation is defined as any operation that is of the operation type of "CPB" or "No CPB Cardiovascular". The following operations will always be coded as "Planned Reoperation": (1) Delayed Sternal Closure, (2) ECMO Decannulation, (3) VAD Decannulation, (4) Removal of Broviac catheter. The following operations will always be coded as "Unplanned Reoperation": (1) Mediastinal exploration for infection, (2) Mediastinal exploration for hemodynamic instability, (3) Emergent mediastinal exploration for initiation of ECMO or VAD, (4) Reoperation for residual or recurrent lesion. Mediastinal exploration for bleeding is always coded separately as "Bleeding, Requiring reoperation".
HarvestCode=30 - Definition	A cardiac arrest is the cessation of effective cardiac mechanical function. This complication should be selected if the cardiac arrest developed after OR Entry Date and Time.	A cardiac arrest is the cessation of effective cardiac mechanical function. This complication should be selected if the cardiac arrest developed after OR Entry Date and Time. Do not select this complication for patients under hospice care or DNR.

HarvestCode=30 - Description	Cardiac arrest, Timing = Cardiac arrest (MI) during or following procedure (Perioperative/Periprocedural = Intraoperative/Intraprocedural and/or Postoperative/Postprocedural)	Unexpected cardiac arrest, Timing = Cardiac arrest (MI) during or following procedure (Perioperative/Periprocedural = Intraoperative/Intraprocedural and/or Postoperative/Postprocedural)
HarvestCode=71	Arrhythmia	<choice was deleted>
HarvestCode=80 - Definition	Low cardiac output state characterized by some of the following: tachycardia, oliguria, decreased skin perfusion, need for increased inotropic support (10% above baseline at admission), metabolic acidosis, widened Arterial - Venous oxygen saturation, need to open the chest, or need for mechanical support. If the cardiac dysfunction is of a severity that results in inotrope dependence, mechanical circulatory support, or listing for cardiac transplantation, please also code as "Cardiac failure (severe cardiac dysfunction)". A patient will be considered to have “inotrope dependence” if they cannot be weaned from inotropic support (10% above baseline at admission) after any period of 48 consecutive hours that occurs after the time of OR Exit Date and Time, and either (1) within 30 days after surgery in or out of the hospital, and (2) after 30 days during the same hospitalization subsequent to the operation	Low cardiac output state characterized by some of the following: tachycardia, oliguria, decreased skin perfusion, need for increased inotropic support (10% above baseline at admission), metabolic acidosis, widened Arterial - Venous oxygen saturation, need to open the chest, or need for mechanical support. If the cardiac dysfunction is of a severity that results in inotrope dependence, mechanical circulatory support, or listing for cardiac transplantation, please also code as "Cardiac failure (severe cardiac dysfunction)". A patient will be considered to have “inotrope dependence” if they cannot be weaned from inotropic support (10% above baseline at admission) after any period of 48 consecutive hours that occurs after the time of OR Exit Date and Time, and either (1) within 30 days after surgery in or out of the hospital, and (2) after 30 days during the same hospitalization subsequent to the operation. If patient meets criteria for severe cardiac dysfunction, only code "severe".
HarvestCode=190 - Description	Pneumothorax, Requiring intervention	Pneumothorax, Requiring drainage or evacuation
HarvestCode=200 - Definition	Abnormal accumulation of fluid in the pleural space, Requiring drainage, By any technique. If the pleural effusion is known to be a chylothorax, please only code "Chylothorax".	Abnormal accumulation of fluid in the pleural space, Requiring drainage, By any technique. If the pleural effusion is known to be a chylothorax, please also code "Chylothorax".
HarvestCode=370 - Definition	Multi-System Organ Failure (MSOF) is a condition where more than one organ system has failed (for example, respiratory failure requiring mechanical ventilation combined with renal failure requiring dialysis). Please code the individual organ system failures as well. If MSOF is associated with sepsis as well, please also code: "Sepsis, Multi-system Organ Failure". Multi-System Organ Failure (MSOF) is synonymous with Multi-Organ Dysfunction Syndrome (MODS).	Multi-System Organ Failure (MSOF) is a condition where more than one organ system has failed (for example, respiratory failure requiring mechanical ventilation combined with renal failure requiring dialysis). Please code the individual organ system failures as well. If MSOF is associated with sepsis as well, please also code: "Sepsis, Multi-system Organ Failure". Multi-System Organ Failure (MSOF) is synonymous with Multi-Organ Dysfunction Syndrome (MODS). Only code this complication if the patient has failure of two or more than two organs. Do not code MSOF if only failing organs are the heart and lungs.
HarvestCode=384 - Definition	Low cardiac output state characterized by some of the following: tachycardia, oliguria, decreased skin perfusion, need for increased inotropic support (10% above baseline at admission), metabolic acidosis, widened Arterial - Venous oxygen saturation, need to open the chest, or need for mechanical support. This complication should be selected if the cardiac dysfunction is of a severity that results in inotrope dependence, mechanical circulatory support, or listing for cardiac transplantation. A patient will be considered to have “inotrope dependence” if they cannot be weaned from inotropic support (10% above baseline at admission) after any period of 48 consecutive hours that occurs after the time of OR Exit Date and Time and either (1) within 30 days after surgery in or out of the hospital, and (2) after 30 days during the same hospitalization subsequent to the operation.	Low cardiac output state characterized by some of the following: tachycardia, oliguria, decreased skin perfusion, need for increased inotropic support (10% above baseline at admission), metabolic acidosis, widened Arterial - Venous oxygen saturation, need to open the chest, or need for mechanical support. This complication should be selected if the cardiac dysfunction is of a severity that results in inotrope dependence, mechanical circulatory support, or listing for cardiac transplantation. A patient will be considered to have “inotrope dependence” if they cannot be weaned from inotropic support (10% above baseline at admission) after any period of 48 consecutive hours that occurs after the time of OR Exit Date and Time and either (1) within 30 days after surgery in or out of the hospital, and (2) after 30 days during the same hospitalization subsequent to the operation. If patient meets criteria for severe cardiac dysfunction, only code "severe".

HarvestCode=430	<blank>	<New choice added> Anesthesia-related complication
HarvestCode=440	<blank>	<New choice added> Subdural bleed
HarvestCode=450	<blank>	<New choice added> Intraventricular Hemorrhage (IVH) >2
HarvestCode=460	<blank>	<New choice added> Complication of cardiovascular catheterization procedure

4210 Reoperation After This Operation Within This Admission

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4245 VAD-Discharge Status

Detail changed:	Changed from:	Changed to:
Definition	Indicate the VAD status at discharge from the hospital.	Indicate whether the patient had a VAD in place at discharge from the hospital.
ParentHarvestCodes	1	<Blank>
ParentShortName	VAD	<Blank>
ParentValue	= "Yes"	<Blank>
HarvestCode=1 - Description	With VAD	Discharged with a VAD
HarvestCode=2	Without VAD	<choice was deleted>
HarvestCode=3 - Description	Expired in Hospital Where Initial VAD Was Implanted	Expired in Hospital
HarvestCode=4	<blank>	<New choice added> VAD removed prior to discharge
HarvestCode=5	<blank>	<New choice added> No VAD used during this admission

4290 Primary Readmission Reason

Detail changed:	Changed from:	Changed to:
HarvestCode=2 - Description	Arrhythmias/Heart Block	Arrhythmia
HarvestCode=3 - Definition	<blank>	Physician documentation or report of insufficient cardiac output leading to fluid retention, rales, jugular venous distention, hepatic congestion or pulmonary edema. Low ejection fraction without clinical evidence of heart failure does not qualify as heart failure.
HarvestCode=6 - Definition	<blank>	Abnormal accumulation of fluid in the pericardial space requiring drainage

HarvestCode=7 - Definition	<blank>	Complication related to the respiratory system, includes airway issues
HarvestCode=25 - Definition	<blank>	Complication related to ventricular assist device
HarvestCode=26 - Definition	<blank>	Complication involving development of a blood clot possibly leading to vascular obstruction
HarvestCode=27 - Definition	<blank>	Complication involving migration of blood clot or other matter possibly leading to vascular obstruction
HarvestCode=28 - Definition	<blank>	Complication involving life threatening bleeding
HarvestCode=29 - Definition	<blank>	Complication involving narrowing of lumen resulting in flow disruption
HarvestCode=30 - Definition	<blank>	Rejection refers to the organ recipient's immune system recognizing a transplanted organ as foreign and mounting a response to it via cellular and/or humoral (antibody-mediated) mechanisms. Routine endomyocardial biopsy remains the criterion standard for monitoring for such rejection.
HarvestCode=31 - Definition	<blank>	Insufficient oxygen delivery to meet the demand of myocardial tissue may result in pain, wall motion abnormality and EKG changes. Untreated ischemia may progress to infarction.
HarvestCode=33 - Definition	<blank>	Newly recognized and/or newly acquired deficit of neurologic function leading to inpatient referral, therapy, or intervention not otherwise practiced for a similar unaffected patient,
HarvestCode=34 - Definition	<blank>	Complication related to infection, includes infection of wound(s), bloodstream infection or other infectious conditions
HarvestCode=35 - Definition	<blank>	Complication related to a device
HarvestCode=36 - Definition	<blank>	Complication related to residual or recurrent cardiac abnormality
HarvestCode=37 - Definition	<blank>	Current weight or rate of weight gain is significantly lower than that of other children of similar age and gender
HarvestCode=38 - Definition	<blank>	Unlisted complication related to the cardiovascular system
HarvestCode=998 - Definition	<blank>	Example: Shunt thrombosis in a patient who has had a Norwood procedure.
HarvestCode=999 - Definition	<blank>	Example: Orthopedic procedure in a patient who has had a Norwood procedure.

4310 **Mortality - 30-Day Status - Method Of Verification**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate the primary method used to verify the patient's 30-day mortality status.
Harvest	<Blank>	Yes
LongName	<Blank>	Mortality - 30-Day Status - Method Of Verification
ShortName	<Blank>	Mt30StatMeth
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Evidence of life or death in the medical record
HarvestCode=2	<blank>	<New choice added> Contact with patient or family
HarvestCode=3	<blank>	<New choice added> Contact with medical provider
HarvestCode=4	<blank>	<New choice added> Office visit to provider greater than or equal to 30 days after procedure.
HarvestCode=5	<blank>	<New choice added> Social Security Death Master File
HarvestCode=9	<blank>	<New choice added> Other

4330 **Mortality - Operative Death**

Detail changed:	Changed from:	Changed to:
Definition	Operative Mortality: Includes both (1) all deaths occurring during the hospitalization in which the operation was performed, even if after 30 days; and (2) those deaths occurring after discharge from the hospital, but within 30 days of the procedure. In the event of transfers from the institution performing the surgery to another institution, whether chronic or acute care, additional rules regarding the definition of operative mortality are available in the document "What is Operative Mortality? Defining Death in a Surgical Registry Database".	Operative Mortality includes: (1) all deaths, regardless of cause, occurring during the hospitalization in which the operation was performed, even if after 30 days (including patients transferred to other acute care facilities); and (2) all deaths, regardless of cause, occurring after discharge from the hospital, but before the end of the thirtieth postoperative day.

4331 **Eligibility For CHSS Study**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate patient's eligibility for the Congenital Heart Surgeon Society (CHSS) study.
Harvest	<Blank>	Yes
LongName	<Blank>	Eligibility For CHSS Study

ShortName	<Blank>	CHSSElig
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Patient is eligible and enrolled
HarvestCode=2	<blank>	<New choice added> Patient is eligible, but declined enrollment
HarvestCode=3	<blank>	<New choice added> Patient is eligible, but not invited to participate
HarvestCode=4	<blank>	<New choice added> Patient is eligible, but institution is not a CHSS participant.
HarvestCode=5	<blank>	<New choice added> Patient is eligible, but not enrolled for other reason
HarvestCode=6	<blank>	<New choice added> Patient is not eligible for CHSS study

4340 **Patient's care discussed at preoperative multidisciplinary planning conference**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether this patient's care was discussed at a preoperative multidisciplinary planning conference to plan pediatric and congenital heart surgery cases. A preoperative multidisciplinary planning conference involves attendance by multiple members of the healthcare team, with recommended participation including but not limited to: cardiology, cardiac surgery, anesthesia, and critical care.
Harvest	<Blank>	Yes
LongName	<Blank>	Patient's care discussed at preoperative multidisciplinary planning conference
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	CareDiscussed
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4350 **Reason why patient's care was not discussed**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the reason why the patient's case was not discussed at a preoperative multidisciplinary planning conference.
Harvest	<Blank>	Yes
LongName	<Blank>	Reason why patient's care was not discussed
ParentHarvestCodes	<Blank>	2
ParentShortName	<Blank>	CareDiscussed
ParentValue	<Blank>	= "No"
ShortName	<Blank>	CareDiscussedRsn
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Urgent / emergent / salvage case
HarvestCode=2	<blank>	<New choice added> Neonate admitted between conferences
HarvestCode=3	<blank>	<New choice added> Program does not routinely discuss all cases
HarvestCode=4	<blank>	<New choice added> Program does not have regular conferences
HarvestCode=5	<blank>	<New choice added> Other

4370 **Transesophageal Echocardiography (TEE) available for case**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether intraoperative transesophageal echocardiography (TEE) was available for this case (or epicardial echocardiography if TEE contraindicated or not informative). Availability is defined as the presence and availability of equipment and staff to perform the study. Reporting of compliance will be as the fraction of all Cardiac Operations with availability (as opposed to use) of TEE and/or epicardial echocardiography.
Harvest	<Blank>	Yes

LongName	<Blank>	Transesophageal Echocardiography (TEE) available for case
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	TEEAvail
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4380 **Intraoperative transesophageal echocardiography (TEE) performance**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether TEE / epicardial echocardiography was performed for this case. If available, TEE may not be performed due to surgeon preference, size of patient, not indicated, etc.
Harvest	<Blank>	Yes
LongName	<Blank>	Intraoperative transesophageal echocardiography (TEE) performance
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	TEEAvail
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	TEEEpicEchoPerf
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4400 **Preoperative antibiotic prophylaxis given**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User

DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a preoperative antibiotic prophylaxis was given to this patient. Measure is satisfied for each Cardiac Operation, when there is documentation that the patient has received prophylactic antibiotic(s) within the hour immediately preceding surgical incision (two hours if receiving vancomycin). To satisfy this measure, the field named “Skin Incision Start Time” must be
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis given
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	PreopAntiProph
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4410 **Preoperative antibiotic prophylaxis - Cephalosporin**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the preoperative antibiotic prophylaxis included Cephalosporin.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis - Cephalosporin
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopAntiProph
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopAntiProphCeph
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4420 **Preoperative antibiotic prophylaxis - Penicillin or related medication**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the preoperative antibiotic prophylaxis included penicillin or related medications (i.e., Oxacillin, Nafcillin, Ampicillin, etc.)
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis - Penicillin or related medication
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopAntiProph
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopAntiProphPen
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4430 **Preoperative antibiotic prophylaxis - Aminoglycoside**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the preoperative antibiotic prophylaxis included Aminoglycoside.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis - Aminoglycoside
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopAntiProph
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopAntiProphAmino
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

4440 **Preoperative antibiotic prophylaxis - Vancomycin**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the preoperative antibiotic prophylaxis included Vancomycin.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis - Vancomycin
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopAntiProph
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopAntiProphVan
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4450 **Preoperative antibiotic prophylaxis - Other**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the preoperative antibiotic prophylaxis included any other class of antibiotic.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis - Other
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopAntiProph
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopAntiProphOth
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4470 **Preoperative antibiotic prophylaxis - Time started**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the time when the antibiotic infusion started.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative antibiotic prophylaxis - Time started
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopAntiProph
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopAntiProphTime
VendorDataFormat	<Blank>	hh:mm
VendorDataType	<Blank>	Time - hh:mm (24-hour clock)

4480 **Conventional preprocedure time-out.**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a conventional preprocedural “time-out”, which includes identification of patient, operative site, procedure, and history of any allergies, was performed.
Harvest	<Blank>	Yes
LongName	<Blank>	Conventional preprocedure time-out.
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	ConvTimeOut
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4490 **Surgeon shares essential elements of operative plan**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a preprocedural briefing was performed wherein the surgeon shares with all members of the operating room team the essential elements of the operative plan; including diagnosis, planned procedure, outline of essentials of anesthesia and bypass strategies, antibiotic prophylaxis, availability of blood products, anticipated or planned implants or device applications, and anticipated challenges.
Harvest	<Blank>	Yes
LongName	<Blank>	Surgeon shares essential elements of operative plan
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	PreProcBrief
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4500 **Postprocedure debriefing**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate whether a postprocedural debriefing was performed wherein the surgeon succinctly reviews with all members of the operating room team the essential elements of the operative plan, identifying both the successful components and the opportunities for improvement. This debriefing should take place prior to the patient leaving the operating room or its equivalent, and may be followed by a more in-depth dialogue involving team members at a later time. (The actual debriefing in the operating room is intentionally and importantly brief, in recognition of the fact that periods of transition may be times of instability or vulnerability for the patient.)
Harvest	<Blank>	Yes
LongName	<Blank>	Postprocedure debriefing
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	PostProcDebrief
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4510 **Hand-off protocol at the time of transfer to the Intensive Care Unit**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a briefing and execution of a hand-off protocol (checklist) was performed at the time of transfer (arrival) to the Intensive Care Unit at the end of the operation, involving ALL of the following: the anesthesiologist, surgeon, physician staff of the Intensive Care Unit (including critical care and cardiology) and nursing.
Harvest	<Blank>	Yes
LongName	<Blank>	Hand-off protocol at the time of transfer to the Intensive Care Unit
ParentHarvestCodes	<Blank>	1|2
ParentShortName	<Blank>	OpType
ParentValue	<Blank>	= "CPB" or "No CPB Cardiovascular"
ShortName	<Blank>	HandoffProtocol

VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes - All required team members present
HarvestCode=2	<blank>	<New choice added> Yes - Not all required team members present
HarvestCode=3	<blank>	<New choice added> No

4520 **Hand-off protocol - Anesthesiologist**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the anesthesiologist or designee attended the hand-off protocol at the time of transfer to the Intensive Care Uniti at the end of the operation.
Harvest	<Blank>	Yes
LongName	<Blank>	Hand-off protocol - Anesthesiologist
ParentHarvestCodes	<Blank>	2
ParentShortName	<Blank>	HandoffProtocol
ParentValue	<Blank>	= "Yes - Not all required team members present"
ShortName	<Blank>	HandoffAnesth
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Attended hand-off protocol
HarvestCode=2	<blank>	<New choice added> Did not attend hand-off protocol

4530 **Hand-off protocol - Surgeon**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the surgeon or designee attended the hand-off protocol at the time of transfer to the Intensive Care Uniti at the end of the operation.
Harvest	<Blank>	Yes
LongName	<Blank>	Hand-off protocol - Surgeon

ParentHarvestCodes	<Blank>	2
ParentShortName	<Blank>	HandoffProtocol
ParentValue	<Blank>	= "Yes - Not all required team members present"
ShortName	<Blank>	HandoffSurg
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Attended hand-off protocol
HarvestCode=2	<blank>	<New choice added> Did not attend hand-off protocol

4540 **Hand-off protocol - Physician staff of the Intensive Care Unit**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the physician staff of the Intensive Care Unit or designee attended the hand-off protocol at the time of transfer to the Intensive Care Uniti at the end of the operation.
Harvest	<Blank>	Yes
LongName	<Blank>	Hand-off protocol - Physician staff of the Intensive Care Unit
ParentHarvestCodes	<Blank>	2
ParentShortName	<Blank>	HandoffProtocol
ParentValue	<Blank>	= "Yes - Not all required team members present"
ShortName	<Blank>	HandoffPhysStaff
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Attended hand-off protocol
HarvestCode=2	<blank>	<New choice added> Did not attend hand-off protocol

4550 **Hand-off protocol - Nursing**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate whether a nurse or designee attended the hand-off protocol at the time of transfer to the Intensive Care Uniti at the end of the operation.
Harvest	<Blank>	Yes
LongName	<Blank>	Hand-off protocol - Nursing
ParentHarvestCodes	<Blank>	2
ParentShortName	<Blank>	HandoffProtocol
ParentValue	<Blank>	= "Yes - Not all required team members present"
ShortName	<Blank>	HandoffNursing
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Attended hand-off protocol
HarvestCode=2	<blank>	<New choice added> Did not attend hand-off protocol

4560 **Patient died or had major postoperative complication(s)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient died before hospital discharge and/or had any of these major postoperative complication(s): a. New postoperative renal failure requiring dialysis b. New postoperative neurological deficit persisting at discharge c. Arrhythmia necessitating permanent pacemaker insertion d. Paralyzed diaphragm e. Need for postoperative mechanical circulatory support f. Unplanned reoperation and/or interventional cardiovascular catheterization procedure The detailed definitions for the six postoperative complications are the definitions used in the current version of the STS Congenital Heart Surgery Database. These detailed definitions for these six postoperative complications may be found in the following manuscript: Jacobs JP et al. Quality measures for congenital and pediatric cardiac surgery. World Journal for Pediatric and Congenital Heart Surgery 2012;3:32-47
Harvest	<Blank>	Yes
LongName	<Blank>	Patient died or had major postoperative complication(s)

ShortName	<Blank>	PostOpComp
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4570 **Patient management and outcomes reviewed**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient's management and outcomes were reviewed as a part of a regularly scheduled Quality Assurance and Quality Improvement Cardiac Care Conference (i.e., Morbidity and Mortality conference).
Harvest	<Blank>	Yes
LongName	<Blank>	Patient management and outcomes reviewed
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PostOpComp
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PostOpReview
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Reviewed at conference
HarvestCode=2	<blank>	<New choice added> Scheduled to be reviewed at next conference
HarvestCode=3	<blank>	<New choice added> Not reviewed and not scheduled to be reviewed
HarvestCode=4	<blank>	<New choice added> Program does not have regularly scheduled conferences

4580 **Patient management and outcomes reviewed - date**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate the date this patient's management and outcome was reviewed as a part of a regularly scheduled Quality Assurance and Quality Improvement Cardiac Care Conference (i.e., Morbidity and Mortality conference).
Harvest	<Blank>	Yes
LongName	<Blank>	Patient management and outcomes reviewed - date
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PostOpReview
ParentValue	<Blank>	= "Reviewed at conference"
ShortName	<Blank>	PostOpReviewDate
VendorDataType	<Blank>	Date - mm/dd/yyyy

4590 **Primary Anesthesiologist Attending Name**

Detail changed:	Changed from:	Changed to:
Definition	Indicate the name of the primary anesthesiologist (attending physician present at induction of anesthesia).	Indicate the name of the primary anesthesiologist (attending physician present at induction of anesthesia). The name, NPI and signature of all anesthesiologists contributing data to the database must be on file with the STS for data files to be accepted.

4600 **Primary Anesthesiologist National Provider Identifier**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	Lookup
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the individual-level National Provider Identifier (NPI) of the anesthesiologist performing the procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Primary Anesthesiologist National Provider Identifier
ShortName	<Blank>	PrimAnesNPI
VendorDataType	<Blank>	Text

4620 **Secondary Anesthesiologist AttendingName**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4640 **Mid-Level Provider (CRNA, AA) Present**

Detail changed:	Changed from:	Changed to:
Definition	Indicate whether a Certified Registered Nurse Anesthetist (CRNA) was present during this procedure.	Indicate whether a Certified Registered Nurse Anesthetist (CRNA) or Anesthesia Assistant (AA) participated in the patient care during all or part of this procedure.
LongName	Certified Registered Nurse Anesthetist Present	Mid-Level Provider (CRNA, AA) Present

4650 **Certified Registered Nurse Anesthetist Name**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4660 **Non-CV Physician**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4670 **Preoperative Medications Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

4690 **Preoperative Medication**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

4700 **Preoperative Medication Category**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	PreopMeds
Definition	<Blank>	Indicate the categories of preoperative medication(s) given to the patient prior to the period of anesthetic care.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative Medication Category
ShortName	<Blank>	PreopMedCat

VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=5	<blank>	<New choice added> None
HarvestCode=10	<blank>	<New choice added> Amiodarone
HarvestCode=20	<blank>	<New choice added> Angiotensin Converting Enzyme (ACE) Inhibitors
HarvestCode=30	<blank>	<New choice added> Anti-reflux Medications (H2 antagonists, PPI, propulsives)
HarvestCode=40	<blank>	<New choice added> Anti-seizure Medications
HarvestCode=50	<blank>	<New choice added> Aspirin
HarvestCode=60	<blank>	<New choice added> Benzodiazepines
HarvestCode=70	<blank>	<New choice added> Beta blockers
HarvestCode=80	<blank>	<New choice added> Birth Control (Oral, Intramuscular)
HarvestCode=90	<blank>	<New choice added> Calcium Channel Blockers
HarvestCode=100	<blank>	<New choice added> Calcium Chloride Infusion
HarvestCode=110	<blank>	<New choice added> Coumadin
HarvestCode=120	<blank>	<New choice added> Digoxin
HarvestCode=130	<blank>	<New choice added> Direct Thrombin Inhibitors (e.g., argatroban)
HarvestCode=140	<blank>	<New choice added> Diuretics
HarvestCode=150	<blank>	<New choice added> Dobutamine
HarvestCode=160	<blank>	<New choice added> Dopamine
HarvestCode=170	<blank>	<New choice added> Endothelin Antagonist (e.g., Bosentan)
HarvestCode=180	<blank>	<New choice added> Epinephrine
HarvestCode=190	<blank>	<New choice added> Heparin
HarvestCode=200	<blank>	<New choice added> Inhaled Bronchodilators

HarvestCode=210	<blank>	<New choice added> Insulin
HarvestCode=220	<blank>	<New choice added> Low Molecular Weight Heparin
HarvestCode=230	<blank>	<New choice added> Milrinone
HarvestCode=240	<blank>	<New choice added> Narcotics
HarvestCode=250	<blank>	<New choice added> Nitric Oxide
HarvestCode=260	<blank>	<New choice added> Nitroglycerin
HarvestCode=270	<blank>	<New choice added> Nitroprusside
HarvestCode=280	<blank>	<New choice added> Norepinephrine
HarvestCode=290	<blank>	<New choice added> PDE-5 Inhibitors (e.g., Sildenafil)
HarvestCode=300	<blank>	<New choice added> Platelet Inhibitors other than Aspirin (e.g., Plavix)
HarvestCode=310	<blank>	<New choice added> Prostacyclin (e.g., Flolan, Remodulin)
HarvestCode=320	<blank>	<New choice added> Prostaglandin
HarvestCode=330	<blank>	<New choice added> Psychiatric Medications (including ADHD and antidepressants)
HarvestCode=340	<blank>	<New choice added> Statins
HarvestCode=350	<blank>	<New choice added> Steroids (oral/intravenous)
HarvestCode=360	<blank>	<New choice added> Thyroid Hormone
HarvestCode=370	<blank>	<New choice added> Transplant Rejection Inhibition Meds (other than steroids)
HarvestCode=380	<blank>	<New choice added> Vasopressin
HarvestCode=700	<blank>	<New choice added> Anti-arrhythmics Not Otherwise Listed
HarvestCode=710	<blank>	<New choice added> Inotropes Not Otherwise Listed
HarvestCode=720	<blank>	<New choice added> Vasoconstrictors Not Otherwise Listed
HarvestCode=730	<blank>	<New choice added> Vasodilators Not Otherwise Listed

HarvestCode=900	<blank>	<New choice added> Other

4741 **Preoperative Sedation Drug - Dexmedetomidine**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient received Dexmedetomidine as a preoperative sedation.
Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative Sedation Drug - Dexmedetomidine
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	PreopSed
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PreopSedDrugDex
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4820 **Preoperative Oxygen Saturation**

Detail changed:	Changed from:	Changed to:
HighValue	100	100.0
LowValue	1	1.0
UsualRangeHigh	100	100.0
UsualRangeLow	60	60.0
VendorDataType	Integer	Real

4830 **Preoperative Oxygen Supplementation**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient received preoperative oxygen supplementation.

Harvest	<Blank>	Yes
LongName	<Blank>	Preoperative Oxygen Supplementation
ShortName	<Blank>	PreopOxygen
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

4930 **Arterial Line Type - Umbilical**

Detail changed:	Changed from:	Changed to:
Definition	Indicate whether a central arterial line type was used during this procedure.	Indicate whether an umbilical arterial line type was used during this procedure.
LongName	Arterial Line Type - Central	Arterial Line Type - Umbilical

5100 **Ultrasound Guidance Used For Line Placement**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether real-time ultrasound imaging was used for line placement (i.e., Sonosite or equivalent).
Harvest	<Blank>	Yes
LongName	<Blank>	Ultrasound Guidance Used For Line Placement
ShortName	<Blank>	UltraGuide
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> None
HarvestCode=2	<blank>	<New choice added> Yes - arterial line only
HarvestCode=3	<blank>	<New choice added> Yes - central venous line only
HarvestCode=4	<blank>	<New choice added> Yes - arterial and central venous lines

5120 **Neurologic Monitoring Type**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5130 **Neurologic Monitoring - Bispectral Index**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the neurologic monitoring performed during this procedure included Bispectral Index (BIS).
Harvest	<Blank>	Yes
LongName	<Blank>	Neurologic Monitoring - Bispectral Index
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NeuroMonitor
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NeuroMonBIS
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5140 **Neurologic Monitoring - Transcranial Doppler**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the neurologic monitoring performed during this procedure included Transcranial Doppler (TCD).
Harvest	<Blank>	Yes
LongName	<Blank>	Neurologic Monitoring - Transcranial Doppler
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NeuroMonitor
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NeuroMonTCD
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

5141 **Neurologic Monitoring - NIRS (Cerebral)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the neurologic (cerebral) monitoring performed during this procedure included Near Infrared Spectroscopy (NIRS).
Harvest	<Blank>	Yes
LongName	<Blank>	Neurologic Monitoring - NIRS (Cerebral)
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NeuroMonitor
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NeuroMonNIRS
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5150 **Neurologic Monitoring - Other**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the neurologic monitoring performed during this procedure included some other method.
Harvest	<Blank>	Yes
LongName	<Blank>	Neurologic Monitoring - Other
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	NeuroMonitor
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	NeuroMonOth
VendorDataType	<Blank>	Text (categorical values specified by STS)

HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5170 **Lowest Intraoperative Temperature Monitoring Site**

Detail changed:	Changed from:	Changed to:
Definition	Indicate the site where the patient's temperature was being recorded intraoperatively.	Indicate the site where the patient's lowest temperature was being recorded intraoperatively.
LongName	Intraoperative Temperature Site	Lowest Intraoperative Temperature Monitoring Site
HarvestCode=7	<blank>	<New choice added> Tympanic
HarvestCode=9	<blank>	<New choice added> Other

5210 **Primary Induction Agent - Inhalation**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5220 **Induction Agent - Inhalation - Sevoflurane**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether sevoflurane was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Inhalation - Sevoflurane
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeInh
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentInhalSevo
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5230 **Induction Agent - Inhalation - Isoflurane**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether isoflurane was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Inhalation - Isoflurane
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeInh
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentInhalIso
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5250 **Primary Induction Agent - Intravenous**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5260 **Induction Agent - Intravenous - Sodium Thiopental**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether sodium thiopental was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Sodium Thiopental
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV

ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVSodT
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5270 **Induction Agent - Intravenous - Ketamine**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether ketamine was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Ketamine
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVKet
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5280 **Induction Agent - Intravenous - Etomidate**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether etomidate was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Etomidate
ParentHarvestCodes	<Blank>	1

ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVEtom
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5290 **Induction Agent - Intravenous - Propofol**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether propofol was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Propofol
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVProp
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5300 **Induction Agent - Intravenous - Fentanyl**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether fentanyl was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Fentanyl

ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVFent
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5310 **Induction Agent - Intravenous - Midazolam**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether intravenous midazolam was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Midazolam
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVMid
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5320 **Induction Agent - Intravenous - Dexmedetomidine**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether dexmedetomidine was used for induction of anesthesia.
Harvest	<Blank>	Yes

LongName	<Blank>	Induction Agent - Intravenous - Dexmedetomidine
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVDex
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5330 **Induction Agent - Intravenous - Sufentanil**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether sufentanil was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Sufentanil
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVSuf
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5340 **Induction Agent - Intravenous - Remifentanil**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether remifentanil was used for induction of anesthesia.

Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intravenous - Remifentanil
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIV
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIVRem
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5360 **Primary Induction Agent - Intramuscular**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5370 **Induction Agent - Intramuscular - Ketamine**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether ketamine was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intramuscular - Ketamine
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIM
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIMKet
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5380 **Induction Agent - Intramuscular - Midazolam**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether intramuscular midazolam was used for induction of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Induction Agent - Intramuscular - Midazolam
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	IndTypeIM
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	IndAgentIMMid
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5390 **Primary Maintenance Agent**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5410 **Regional Anesthetic Site**

Detail changed:	Changed from:	Changed to:
HarvestCode=9	<blank>	<New choice added> Other

5530 **Intercostal Nerve Infiltration By Surgeon or Anesthesia**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether intercostal nerve infiltration was performed by the surgeon or anesthesiologist
Harvest	<Blank>	Yes

LongName	<Blank>	Intercostal Nerve Infiltration By Surgeon or Anesthesia
ShortName	<Blank>	IntNerveInf
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5540 **Regional Field Block by Surgeon or Anesthesia**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether a regional field block was performed by the surgeon or anesthesiologist
Harvest	<Blank>	Yes
LongName	<Blank>	Regional Field Block by Surgeon or Anesthesia
ShortName	<Blank>	RegFieldBlock
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5550 **Airway In-situ (ETT or Tracheostomy)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether an Endotracheal Tube (ETT) or tracheostomy was in place prior to arrival in the procedure area.
Harvest	<Blank>	Yes
LongName	<Blank>	Airway In-situ (ETT or Tracheostomy)
ShortName	<Blank>	AirwayInsitu
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

5560 **Airway Type**

Detail changed:	Changed from:	Changed to:
HarvestCode=7	<blank>	<New choice added> Simple face mask

5580 **Airway Size - Endotracheal Intubation**

Detail changed:	Changed from:	Changed to:
HarvestCode=95	<blank>	<New choice added> Other
HarvestCode=96	<blank>	<New choice added> Airway size not listed (DLETT, Tracheotomy)

5600 **Airway Site**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	<Blank>	5|6
ParentShortName	<Blank>	AirwayType
ParentValue	<Blank>	= "Endotracheal intubation" or "Tracheostomy"

5610 **Endobronchial Isolation (DLETT, Bronchial Blocker)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether endobronchial isolation was employed using a double lumen ETT or bronchial blocker.
Harvest	<Blank>	Yes
LongName	<Blank>	Endobronchial Isolation (DLETT, Bronchial Blocker)
ShortName	<Blank>	EndobroncIso
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5620 **ICU-Type Ventilator Used Intraop**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether an ICU-type ventilator was used during the procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	ICU-Type Ventilator Used Intraop
ShortName	<Blank>	ICUTypeVent
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5640 **Packed Red Blood Cells (PRBC)**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5650 **Packed Red Blood Cells (PRBC) - Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5660 **Packed Red Blood Cells (PRBC) - Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the number of units of red blood cells (PRBC) transfused during this operation. This includes blood products used for priming or during cardiopulmonary bypass. Any part of a unit counts as a whole unit. Enter zero if no red blood cells were transfused.
Harvest	<Blank>	Yes
HighValue	<Blank>	99
LongName	<Blank>	Packed Red Blood Cells (PRBC) - Units
LowValue	<Blank>	0

ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PRBCUnits
VendorDataType	<Blank>	Integer

5670 **Platelets**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5680 **Platelets - Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5690 **Platelets Pheresis Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the number of units of platelet pheresis for this procedure. Any part of a unit counts as a whole unit. Enter zero if no platelet pheresis units were transfused.
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Platelets Pheresis Units
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PlateletsPheresis
VendorDataType	<Blank>	Integer

5700 **Random Donor Platelet Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the number of random donor platelet units the patient received during this procedure. Any part of a unit counts as a whole unit. Enter zero if no random donor platelets were transfused.
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Random Donor Platelet Units
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	PlateletsDonor
VendorDataType	<Blank>	Integer

5710 **Fresh Frozen Plasma (FFP)**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5720 **Fresh Frozen Plasma (FFP) - Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5730 **Fresh Frozen Plasma (FFP) - Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate the number of units of fresh frozen plasma (FFP) transfused during this operation. This includes blood products used for priming or during cardiopulmonary bypass. Any part of a unit counts as a whole unit. Enter zero if no FFP were transfused.
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Fresh Frozen Plasma (FFP) - Units
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	FFPUnits
VendorDataType	<Blank>	Integer

5740 **Cryoprecipitate**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5750 **Cryoprecipitate - Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5760 **Cryoprecipitate - Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the number of units of cryoprecipitate transfused during this operation. This includes blood products used for priming or during cardiopulmonary bypass. Any part of a unit counts as a whole unit. Enter zero if no cryoprecipitate was transfused.
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Cryoprecipitate - Units

LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	CryoUnits
VendorDataType	<Blank>	Integer

5770 **Whole Blood**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5780 **Whole Blood - Number**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5790 **Whole Blood - Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the number of units of whole blood transfused during this operation. This includes blood products used for priming or during cardiopulmonary bypass. Any part of a unit counts as a whole unit. Enter zero if no whole blood was transfused.
Harvest	<Blank>	Yes
HighValue	<Blank>	50
LongName	<Blank>	Whole Blood - Units
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	WholeBldUnits
VendorDataType	<Blank>	Integer

5800 Autologous Transfusion

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient was transfused with any autologous blood products that had been collected prior to surgery (e.g. self-donated).
Harvest	<Blank>	Yes
LongName	<Blank>	Autologous Transfusion
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AutologousTrans
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5810 Cell Saver/Salvage

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether cell saver/salvage blood was transfused during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Cell Saver/Salvage
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	CellSavSal
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes

HarvestCode=2	<blank>	<New choice added> No

5820 **Directed Donor Units**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient recevied any directed donor transfusions during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Directed Donor Units
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	Transfusion
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	DirDonorUnits
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

5830 **Factor VIIa**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5840 **Factor VIIa Dose**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

5850 **Factor VIIa (Novoseven) mcg/kg - Dose 1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations

Definition	<Blank>	Indicate the first dose in micrograms per kilogram of Factor VIIa given during this procedure. Enter zero if none given.
Harvest	<Blank>	Yes
HighValue	<Blank>	200
LongName	<Blank>	Factor VIIa (Novoseven) mcg/kg - Dose 1
LowValue	<Blank>	0
ShortName	<Blank>	ProcoagFactorVIIa1
VendorDataType	<Blank>	Integer

5860 **Factor VIIa (Novoseven) mcg/kg - Dose 2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the second dose in micrograms per kilogram of Factor VIIa given during this procedure. Enter zero if no second dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	200
LongName	<Blank>	Factor VIIa (Novoseven) mcg/kg - Dose 2
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagFactorVIIa1
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagFactorVIIa2
VendorDataType	<Blank>	Integer

5870 **Factor VIIa (Novoseven) mcg/kg - Dose 3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the third dose in micrograms per kilogram of Factor VIIa given during this procedure. Enter zero if no third dose given.
Harvest	<Blank>	Yes

HighValue	<Blank>	200
LongName	<Blank>	Factor VIIa (Novoseven) mcg/kg - Dose 3
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagFactorVIIa2
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagFactorVIIa3
VendorDataType	<Blank>	Integer

5880 **Prothrombin Concentrate units/kg - Dose 1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the first dose in units per kilogram of prothrombin concentrate given during this procedure. Enter zero if no dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	100
LongName	<Blank>	Prothrombin Concentrate units/kg - Dose 1
LowValue	<Blank>	0
ShortName	<Blank>	ProcoagProthrom1
VendorDataType	<Blank>	Integer

5890 **Prothrombin Concentrate units/kg - Dose 2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the second dose in units per kilogram of prothrombin concentrate given during this procedure. Enter zero if no second dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	100
LongName	<Blank>	Prothrombin Concentrate units/kg - Dose 2

LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagProthrom1
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagProthrom2
VendorDataType	<Blank>	Integer

5900 **Prothrombin Concentrate units/kg - Dose 3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the third dose in units per kilogram of prothrombin concentrate given during this procedure. Enter zero if no third dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	100
LongName	<Blank>	Prothrombin Concentrate units/kg - Dose 3
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagProthrom2
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagProthrom3
VendorDataType	<Blank>	Integer

5910 **Fibrinogen Concentrate mg/kg - Dose 1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the first dose in mg per kilogram of fibrinogen concentrate given during this procedure. Enter zero if no dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	100

LongName	<Blank>	Fibrinogen Concentrate mg/kg - Dose 1
LowValue	<Blank>	0
ShortName	<Blank>	ProcoagFibrin1
VendorDataType	<Blank>	Integer

5920 **Fibrinogen Concentrate mg/kg - Dose 2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the second dose in mg per kilogram of fibrinogen concentrate given during this procedure. Enter zero if no second dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	100
LongName	<Blank>	Fibrinogen Concentrate mg/kg - Dose 2
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagFibrin1
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagFibrin2
VendorDataType	<Blank>	Integer

5930 **Fibrinogen Concentrate mg/kg - Dose 3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the third dose in mg per kilogram of fibrinogen concentrate given during this procedure. Enter zero if no third dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	100
LongName	<Blank>	Fibrinogen Concentrate mg/kg - Dose 3
LowValue	<Blank>	0

ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagFibrin2
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagFibrin3
VendorDataType	<Blank>	Integer

5940 **Antithrombin 3 Concentrate units - Dose 1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the first dose in units of antithrombin 3 concentrate given during this procedure. Enter zero if no dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	5000
LongName	<Blank>	Antithrombin 3 Concentrate units - Dose 1
LowValue	<Blank>	0
ShortName	<Blank>	ProcoagAntithrom1
VendorDataType	<Blank>	Integer

5950 **Antithrombin 3 Concentrate units - Dose 2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the second dose in units of antithrombin 3 concentrate given during this procedure. Enter zero if no second dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	5000
LongName	<Blank>	Antithrombin 3 Concentrate units - Dose 2
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagAntithrom1

ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagAntithrom2
VendorDataType	<Blank>	Integer

5960 **Antithrombin 3 Concentrate units - Dose 3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the third dose in units of antithrombin 3 concentrate given during this procedure. Enter zero if no third dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	5000
LongName	<Blank>	Antithrombin 3 Concentrate units - Dose 3
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagAntithrom2
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagAntithrom3
VendorDataType	<Blank>	Integer

5970 **Desmopressin (DDAVP) mcg/kg - Dose 1**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the first dose in micrograms per kilogram of desmopressin (DDAVP) given during this procedure. Enter zero if no dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	6
LongName	<Blank>	Desmopressin (DDAVP) mcg/kg - Dose 1
LowValue	<Blank>	0
ShortName	<Blank>	ProcoagDesmo1

VendorDataType	<Blank>	Integer

5980 **Desmopressin (DDAVP) mcg/kg - Dose 2**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the second dose in micrograms per kilogram of desmopressin (DDAVP) given during this procedure. Enter zero if no second dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	6
LongName	<Blank>	Desmopressin (DDAVP) mcg/kg - Dose 2
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagDesmo1
ParentValue	<Blank>	>0
ShortName	<Blank>	ProcoagDesmo2
VendorDataType	<Blank>	Integer

5990 **Desmopressin (DDAVP) mcg/kg - Dose 3**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the third dose in micrograms per kilogram of desmopressin (DDAVP) given during this procedure. Enter zero if no third dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	6
LongName	<Blank>	Desmopressin (DDAVP) mcg/kg - Dose 3
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	>0
ParentShortName	<Blank>	ProcoagDesmo2
ParentValue	<Blank>	>0

ShortName	<Blank>	ProcoagDesmo3
VendorDataType	<Blank>	Integer

6000 **Epsilon Aminocaproic Acid (Amicar) Used**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether EACA was used.
Harvest	<Blank>	Yes
LongName	<Blank>	Epsilon Aminocaproic Acid (Amicar) Used
ShortName	<Blank>	AntifibEpUse
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

6010 **Epsilon Aminocaproic Acid (Amicar) Load mg/kg**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the loading dose in mg/kg of epsilon aminocaproic acid (Amicar) given during this procedure. Enter zero if no loading dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	300
LongName	<Blank>	Epsilon Aminocaproic Acid (Amicar) Load mg/kg
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibEpUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibEpLoad
VendorDataType	<Blank>	Integer

6020 **Epsilon Aminocaproic Acid (Amicar) Pump Prime mg/kg**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the pump priming dose in mg/kg of epsilon aminocaproic acid (Amicar) given during this procedure. Enter zero if no pump priming dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	300
LongName	<Blank>	Epsilon Aminocaproic Acid (Amicar) Pump Prime mg/kg
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibEpUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibEpPrime
VendorDataType	<Blank>	Integer

6030 **Epsilon Aminocaproic Acid (Amicar) Infusion Rate mg/kg/hr**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the infusion rate in mg/kg/hour of epsilon aminocaproic acid (Amicar) given during this procedure. Enter zero if no infusion initiated.
Harvest	<Blank>	Yes
HighValue	<Blank>	200
LongName	<Blank>	Epsilon Aminocaproic Acid (Amicar) Infusion Rate mg/kg/hr
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibEpUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibEpInfRate

VendorDataType	<Blank>	Integer

6040 **Tranexamic Acid Used**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether tranexamic acid was used during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Tranexamic Acid Used
ShortName	<Blank>	AntifibTranexUse
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

6050 **Tranexamic Acid Load mg/kg**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the loading dose in mg/kg of tranexamic acid given during this procedure. Enter zero if no loading dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	30
LongName	<Blank>	Tranexamic Acid Load mg/kg
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibTranexUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibTranexLoad
VendorDataType	<Blank>	Integer

6060 **Tranexamic Acid Pump Prime mg/kg**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the pump priming dose in mg/kg of tranexamic acid given during this procedure. Enter zero if no pump priming dose given.
Harvest	<Blank>	Yes
HighValue	<Blank>	30
LongName	<Blank>	Tranexamic Acid Pump Prime mg/kg
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibTranexUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibTranexPrime
VendorDataType	<Blank>	Integer

6070 **Tranexamic Acid Infusion Rate mg/kg/hr**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the infusion rate in mg/kg/hour of tranexamic acid given during this procedure. Enter zero if no infusion initiated.
Harvest	<Blank>	Yes
HighValue	<Blank>	30
LongName	<Blank>	Tranexamic Acid Infusion Rate mg/kg/hr
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibTranexUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibTranexInfRate
VendorDataType	<Blank>	Integer

6080 **Trasylol (Aprotinin) Used**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether trasylol (aprotinin) was given to the patient during this procedure.
Harvest	<Blank>	Yes
LongName	<Blank>	Trasylol (Aprotinin) Used
ShortName	<Blank>	AntifibTrasylUse
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

6090 **Trasylol (Aprotinin) Load cc/kg**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the loading dose of trasylol (aprotinin) in cc/kg used during this procedure. Enter zero if no loading dose was used.
Harvest	<Blank>	Yes
HighValue	<Blank>	10
LongName	<Blank>	Trasylol (Aprotinin) Load cc/kg
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibTrasylUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibTrasylLoad
VendorDataType	<Blank>	Integer

6100 **Trasylol (Aprotinin) Pump Prime cc/kg**

Detail changed:	Changed from:	Changed to:

Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the pump priming dose of trasylol (aprotinin) in cc/kg used during this procedure. Enter zero if no pump priming dose was used.
Harvest	<Blank>	Yes
HighValue	<Blank>	10
LongName	<Blank>	Trasylol (Aprotinin) Pump Prime cc/kg
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibTrasylUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibTrasylPrime
VendorDataType	<Blank>	Integer

6110 **Trasylol (Aprotinin) Infusion Rate cc/kg/hr**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the infusion rate of trasylol (aprotinin) in cc/kg/hour used during this procedure. Enter zero if no infusion initiated.
Harvest	<Blank>	Yes
HighValue	<Blank>	10
LongName	<Blank>	Trasylol (Aprotinin) Infusion Rate cc/kg/hr
LowValue	<Blank>	0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	AntifibTrasylUse
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	AntifibTrasylInfRate
VendorDataType	<Blank>	Integer

6120 Intraoperative Pharmacology Table Unique Record Identifier

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

6140 IntraOperative Pharmacology (Including CPB)

Detail changed:	Changed from:	Changed to:
LongName	IntraOperative Pharmacology	IntraOperative Pharmacology (Including CPB)
HarvestCode=30	Alfentanil infusion	<choice was deleted>
HarvestCode=40	Aminocaproic Acid (Amicar)	<choice was deleted>
HarvestCode=50 - Description	Amiodarone bolus/infusion	Amiodarone
HarvestCode=60	Aprotinin (Trasylol)	<choice was deleted>
HarvestCode=120 - Description	Esmolol bolus/infusion	Esmolol
HarvestCode=130	Fentanyl bolus/infusion	<choice was deleted>
HarvestCode=140 - Description	Furosemide bolus/infusion	Furosemide
HarvestCode=150 - Description	Insulin bolus/infusion	Insulin
HarvestCode=160 - Description	Intraoperative Steroids (Hydrocortisone/Methylprednisolone/Dexamethasone)	Steroids IV / CPB (Hydrocortisone/Methylprednisolone/Dexamethasone)
HarvestCode=180 - Description	Levophed (Norepinephrine) infusion	Norepinephrine (Levophed) infusion
HarvestCode=190 - Description	Magnesium Sulfate bolus	Magnesium Sulfate
HarvestCode=200	Midazolam bolus/infusion	<choice was deleted>
HarvestCode=210 - Description	Milrinone bolus/infusion	Milrinone
HarvestCode=220	Morphine bolus/infusion	<choice was deleted>
HarvestCode=290 - Description	Phentolamine (Regitine) Bolus/Infusion	Phentolamine (Regitine)
HarvestCode=330	Remifentanil infusion	<choice was deleted>
HarvestCode=340 - Description	Thyroid Hormone bolus/infusion	Thyroid Hormone
HarvestCode=350	Tranexamic Acid infusion	<choice was deleted>
HarvestCode=400	<blank>	<New choice added> Sodium Bicarbonate bolus
HarvestCode=410	<blank>	<New choice added> Tromethamine (THAM) bolus

HarvestCode=420	<blank>	<New choice added> Bronchodilators - Inhaled
HarvestCode=430	<blank>	<New choice added> Narcotic
HarvestCode=440	<blank>	<New choice added> Benzodiazepine
HarvestCode=450	<blank>	<New choice added> 5-HT3 Agents (e.g., Ondansetron)
HarvestCode=460	<blank>	<New choice added> Isoflurane
HarvestCode=470	<blank>	<New choice added> Sevoflurane
HarvestCode=480	<blank>	<New choice added> Desflurane
HarvestCode=490	<blank>	<New choice added> Ketamine
HarvestCode=500	<blank>	<New choice added> Procainamide
HarvestCode=510	<blank>	<New choice added> Fenoldopam Infusion

6150 **ICU Pharmacology Table Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

6170 **ICU/PACU Arrival Pharmacology**

Detail changed:	Changed from:	Changed to:
LongName	ICU/PACU Pharmacology	ICU/PACU Arrival Pharmacology
HarvestCode=110	Fentanyl infusion	<choice was deleted>
HarvestCode=140	Midazolam (Versed) infusion	<choice was deleted>
HarvestCode=160	Morphine infusion	<choice was deleted>
HarvestCode=340	<blank>	<New choice added> Esmolol infusion
HarvestCode=350	<blank>	<New choice added> Local anesthetic infusion via catheter (On-Q, pleural catheters)
HarvestCode=360	<blank>	<New choice added> Narcotic infusion
HarvestCode=370	<blank>	<New choice added> Benzodiazepine infusion
HarvestCode=380	<blank>	<New choice added> Procainamide bolus/infusion

HarvestCode=390	<blank>	<New choice added> Fenoldopam Infusion

6200 **Mechanical Circulatory Support (ECMO/VAD)**

Detail changed:	Changed from:	Changed to:
LongName	Mechanical Circulatory Support	Mechanical Circulatory Support (ECMO/VAD)

6210 **Arterial Blood Gas**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6211 **ICU/PACU Arrival Labs**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether lab tests were drawn upon arrival to PACU or ICU.
Harvest	<Blank>	Yes
LongName	<Blank>	ICU/PACU Arrival Labs
ShortName	<Blank>	ICUPACULabs
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

6220 **pH**

Detail changed:	Changed from:	Changed to:
HighValue	7.60	8.00
LowValue	6.90	6.00
ParentShortName	ABG	ICUPACULabs

6230 **pCO2**

Detail changed:	Changed from:	Changed to:
HighValue	100	150
ParentShortName	ABG	ICUPACULabs

6240 **pO2**

Detail changed:	Changed from:	Changed to:
ParentShortName	ABG	ICUPACULabs

6250 **Base Excess**

Detail changed:	Changed from:	Changed to:
HighValue	10	30
LowValue	-20	-30
ParentShortName	ABG	ICUPACULabs

6260 **Lactate**

Detail changed:	Changed from:	Changed to:
HighValue	20.0	30.0
ParentShortName	ABG	ICUPACULabs
UsualRangeHigh	7.0	10.0

6270 **Hematocrit**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate the hematocrit level from the first ABG obtained.
Harvest	<Blank>	Yes
HighValue	<Blank>	70.0
LongName	<Blank>	Hematocrit
LowValue	<Blank>	5.0
ParentHarvestCodes	<Blank>	1
ParentShortName	<Blank>	ICUPACULabs
ParentValue	<Blank>	= "Yes"
ShortName	<Blank>	Hematocrit
UsualRangeHigh	<Blank>	45.0
UsualRangeLow	<Blank>	15.0
VendorDataType	<Blank>	Real

6280 **Initial Pulse Oximeter**

Detail changed:	Changed from:	Changed to:
HighValue	100	100.0
LowValue	50	50.0
UsualRangeHigh	100	100.0
UsualRangeLow	70	70.0

6290 **Temperature ICU/PACU Arrival**

Detail changed:	Changed from:	Changed to:
HighValue	39.0	41.0
LowValue	32.0	30.0

6300 **Temperature Measurement Site**

Detail changed:	Changed from:	Changed to:
ParentHarvestCodes	Is Not Missing	Not null
ParentValue	Not null	Is Not Missing
HarvestCode=9	<blank>	<New choice added> Other

6340 **Disposition Under Anesthesia**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate patient disposition after completion of anesthetic management.
Harvest	<Blank>	Yes
LongName	<Blank>	Disposition Under Anesthesia
ShortName	<Blank>	DispUnderAnes
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Discharge home as planned after PACU/Recovery
HarvestCode=2	<blank>	<New choice added> Admit to hospital floor as planned
HarvestCode=3	<blank>	<New choice added> Admit to ICU as planned

HarvestCode=4	<blank>	<New choice added> Unplanned admission to hospital or ICU
HarvestCode=8	<blank>	<New choice added> Other location not listed above
HarvestCode=9	<blank>	<New choice added> Patient expired while under anesthetic management

6350 **Peri-Anesthetic Demise (Within 24 Hours of Last Anesthesia End Time)**

Detail changed:	Changed from:	Changed to:
Core	<Blank>	Yes
DataSource	<Blank>	User
DBTableName	<Blank>	Operations
Definition	<Blank>	Indicate whether the patient died within 24 hours of end of anesthesia.
Harvest	<Blank>	Yes
LongName	<Blank>	Peri-Anesthetic Demise (Within 24 Hours of Last Anesthesia End Time)
ShortName	<Blank>	PeriAnesDemise
VendorDataType	<Blank>	Text (categorical values specified by STS)
HarvestCode=1	<blank>	<New choice added> Yes
HarvestCode=2	<blank>	<New choice added> No

6360 **Anesthesia Adverse Events Unique Record Identifier**

Detail changed:	Changed from:	Changed to:
VendorDataType	Integer	Text

6380 **Anesthesia Adverse Event**

Detail changed:	Changed from:	Changed to:
HarvestCode=20 - Definition	Indicate whether the patient experienced a dental injury such as lip or gum laceration or tooth injury.	Indicate whether the patient experienced an oral / nasal injury such as lip or gum laceration or tooth injury.
HarvestCode=20 - Description	Dental Injury	Oral / Nasal Injury - Bleeding
HarvestCode=140 - Description	Hematoma	Hematoma requiring relocation of catheter placement
HarvestCode=280 - Definition	Indicate whether the patient experienced a cardiac arrest not related to the procedure.	Indicate whether the patient experienced a cardiac arrest related to anesthesia care.
HarvestCode=280 - Description	Cardiac Arrest - Unrelated To Surgery	Cardiac Arrest related to anesthesia care

HarvestCode=290 - Description	Esophageal Bleeding / Rupture	TEE-related esophageal bleeding/rupture
HarvestCode=310 - Description	Airway Compromise	TEE-related airway compromise
HarvestCode=330 - Description	Patient Transfer Event	Complications during patient transfer
HarvestCode=340 - Description	Neurologic Injury	Peripheral Nerve Injury due to positioning
HarvestCode=350	<blank>	<New choice added> Arterial Line Placement - Extremity ischemia
HarvestCode=370	<blank>	<New choice added> Anesthesia Equipment Malfunction/Failure
HarvestCode=380	<blank>	<New choice added> Intravenous Infliltration
HarvestCode=390	<blank>	<New choice added> Integument Injury (skin breakdown or dehiscence, pressure ulcer or alopecia)
HarvestCode=400	<blank>	<New choice added> Bronchospasm
HarvestCode=410	<blank>	<New choice added> Hemoptysis
HarvestCode=420	<blank>	<New choice added> Post-operative Nausea/Vomiting requiring admission
HarvestCode=430	<blank>	<New choice added> Vomiting or Aspiration on Induction/Emergence
HarvestCode=440	<blank>	<New choice added> Emergence Delirium Requiring Medication
HarvestCode=450	<blank>	<New choice added> Laryngospasm requiring medication
HarvestCode=470	<blank>	<New choice added> Unplanned need to remain intubated post-procedure due to anesthesia factors
HarvestCode=480	<blank>	<New choice added> Ocular Injury (corneal abrasion or injury)
HarvestCode=490	<blank>	<New choice added> Cardiac arrest unrelated to anesthesia care
HarvestCode=500	<blank>	<New choice added> Pulmonary Hypertensive Crisis unrelated to surgical manipulation
HarvestCode=510	<blank>	<New choice added> Hypercyanotic Episode (“Tet Spell”) unrelated to surgical manipulation
HarvestCode=900	<blank>	<New choice added> Other

6390 **Current Or Recent Cigarette Smoker**

Detail changed:	Changed from:	Changed to:

		Field no longer being collected
Harvest	Yes	No

6400 **RF-Family History CAD**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6410 **RF-Last Hematocrit**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6420 **RF-Last WBC Count**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6430 **RF-Diabetes**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6440 **RF-Diabetes-Control**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6450 **RF-Last A1c Level**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6460 **Dyslipidemia**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6470 **RF-Last Creat Lvl**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6480 **RF-Renal Fail-Dialysis**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6490 **RF-Hypertension**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6500 **RF-Infect Endocard**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6510 **RF-Infect Endocard Type**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6520 **RF-Chronic Lung Dis**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6530 **RF-Immunosuppressive Rx**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6540 **RF - Peripheral Arterial Disease**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6550 **RF-Cerebrovascular Dis**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6560 **RF-Coma**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6570 **RF-CVA**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6580 **RF-CVA-When**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6590 **RF-CVD TIA**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6600 **RF-CVD NonInvas >75%**

Detail changed:	Changed from:	Changed to:
		Field no longer being collected
Harvest	Yes	No

6610 **RF-CVD Prior Carotid Surgery**

Detail changed:	Changed from:	Changed to:

			Field no longer being collected
Harvest	Yes		No