# Society of Thoracic Surgeons

Adult Cardiac
User Group Call

July 15, 2020

STS National Database™
Trusted. Transformed. Real-Time.

# Agenda

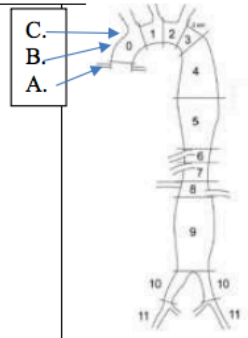
- Welcome and Introductions
- STS Updates
- IQVIA Updates
- User Feedback
  - Include Ticket Number/Case Number

# STS Updates

- Harvest 1 2020 Report Update
  - In Progress, No Official Release Date
- ACSD v4.20.2
  - Training Manual Posted
  - Worksheets Posted
  - Add'l Aorta Worksheets Coming Soon – hopefully by the end of the week.
  - Identified Issues

**Aorta Devices**

**Location :**




| | |
|---|---|
| X. | No additional devices inserted (only for locations 2 – 15) |
| A. | Below sinotubular junction |
| B. | Sinotubular junction to mid ascending |
| C. | Mid ascending to distal ascending |
| D. | Zone 1 (between innominate and left carotid) |
| E. | Zone 2 (between left carotid and left subclavian) |
| F. | Zone 3 (first 2 cm. distal to left subclavian) |
| G. | Zone 4 (end of zone 3 to mid descending aorta ~ T6) |
| H. | Zone 5 (mid descending aorta to celiac) |
| I. | Zone 6 (celiac to superior mesenteric) |
| J. | Zone 7 (superior mesenteric to renals) |
| K. | Zone 8 (renal to infra-renal abdominal aorta) |
| L. | Zone 9 (infrarenal abdominal aorta) |
| M. | Zone 10 (common iliac) |
| N. | Zone 11 (external iliacs) |

(Refer to Data Specifications for Harvest Codes)

**For devices other than aortic valves and aortic valve composite grafts:**

| | |
|---|---|
| **Implant Method:** | 1=Open Surgical 2= Endovascular |
| **Outcome:** | 1= Unsucessfully implanted/maldeployed 2= Implanted/deployed and removed 3= Successfully implanted/deployed |
| **Model Number:** | Enter device model number |
| **UDI:** | Enter unique device identifier (not serial number) |

| Location (Letter) | Implant Method | Outcome | Model Number | UDI |
|---|---|---|---|---|
| ADevLoc01 (5450) | ADevDelMeth01 (5455) | ADevOut01 (5460) | ADevModel01 (5465) | ADev |
| ADevLoc02 (5475) | ADevDelMeth02 (5480) | ADevOut02 (5485) | ADevModel02 (5490) | ADev |
| ADevLoc03 (5500) | ADevDelMeth03 (5505) | ADevOut03 (5510) | ADevModel03 (5515) | ADev |
| ADevLoc04 (5525) | ADevDelMeth04 (5530) | ADevOut04 (5535) | ADevModel04 (5540) | ADev |

You will have to type in the Model Number for Aorta Devices

STS Adult Cardiac Surgery Database — Version 4.20.2

*Long Name:* Aorta Device - Model Number #01 *SeqNo:* 5465

*Short Name:* **ADevModel01** *Core:* Yes

*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #01.

*Data Source:* User *Format:* Text

ParentShortName: ADevIns

ParentLongName: Aorta Device Inserted

ParentHarvestCodes: 1

ParentValues: = "Yes"

We will provide you with a cheat-sheet in the coming weeks.

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| | |
|---|---|
| | Gelweave Plexus Graft |
| 463 | 7300##ADP - Vascutek Terumo Gelweave Vascular Prosthesis |
| 464 | 7320## - Vascutek Gelweave Trifucate Arch Graft |
| 465 | 7350##ST - Vascutek Gelweave Pre-curved Graft |
| 466 | 8300AB### - Edwards Intuity Elite Valve |
| 467 | 8300KITB### - Edwards Intuity Elite Valve System |
| 468 | 9600CM## - Edward Sapien |

## Gelweave™ Valsalva

- Aortic graft design for valve sparing or Bentall procedures
- Closely matches aortic root anatomy[6]
- Mimics natural response of the sinuses of Valsalva[7]
- Potential for,
  - increased valve leaflet longevity[8]
  - reduced tension on the coronary arteries[9]

The Model Number Will Look Something Like This.

| BORE SIZE mm | MAXIMUM SKIRT DIAMETER mm | USABLE LENGTH cm | SKIRT LENGTH mm | COLLA LENGT mm | CATALOGUE NUMBER |
|---|---|---|---|---|---|
| 16 | 21 | 15 | 16 | 10 | 730016ADP |
| 18 | 24 | 15 | 18 | 10 | 730018ADP |
| 20 | 26 | 15 | 20 | 10 | 730020ADP |
| 22 | 28 | 15 | 22 | 10 | 730022ADP |
| 24 | 32 | 15 | 24 | 10 | 730024ADP |
| 26 | 34 | 15 | 26 | 10 | 730026ADP |
| 28 | 36 | 15 | 28 | 10 | 730028ADP |
| 30 | 38 | 15 | 30 | 10 | 730030ADP |
| 32 | 42 | 15 | 32 | 10 | 730032ADP |
| 34 | 44 | 15 | 34 | 10 | 730034ADP |

## R. Readmission

(If Status at Hospital Discharge = Discharged alive, last know status = alive or Discharged alive, died after discharge ↓)

Readmit : ++ ☐ Yes ☐ No ☐ Unknown (If Yes ↓)

Readmit (7140)

Readmit Date: __ __ / __ __ / __ __ __ __ (mm/dd/yyyy)

ReadmitDt (7145)

Readmit Primary Reason:

*Long Name:* Readmission *SeqNo:* 7140

*Short Name:* **Readmit** *Core:* Yes

*Section Name:* Readmission *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate whether the patient was readmitted to the hospital within 30 days of discharge from hospitalization for this surgery. Code yes for inpatient admission to an acute care facility. Do not capture ED or outpatient visits or admission to a skilled facility or nursing home.

*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DischMortStat

ParentLongName: Status at Hospital Discharge

ParentHarvestCodes: 3|4|5

ParentValues: = "Discharged Alive, last known status alive (other than Hospice)", "Discharged Alive, died after discharge" or "Discharged to Hospice"

Harvest Codes:

| Code: | Value: |
|---|---|
| 1 | Yes |
| 2 | No |
| 3 | Unknown |

Hospice will also allow the readmission field to be open. It's in the Data Specs but was missed on the DCF.

| | |
|---|---|
| CardRef (7015) | |
| Substance Use Screening and Counseling Performed (NQF 2597):<br>SubsUseScrnCounPerf (7016) | ☐ Yes ☐ No ☐ Not Applicable |
| **Medications Prescribed at Discharge** | |

This should read 2597

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**SEQ. #:** 7016
**Long Name:** Substance Use Screening and Counseling Performed (NQF 2595)
**Short Name:** SubsUseScrnCounPerf
**Definition:** Indicate if substance use screening and appropriate counseling was performed. This is NQF measure 2595. Patients require screening on tobacco use, alcohol use, and illicit/non-prescription drug use. Patient must be screened for all three. If the patient screens positive for any listed substance use, appropriate counseling is required to choose yes for this field.

**Intent/Clarification: This is NQF measure 2597**. Indicate patients who were screened by a healthcare provider, nurse, or an allied healthcare provider at least once within the last 24 months for tobacco use, unhealthy alcohol use, non-medical prescription drug use, and illicit drug use AND who received an intervention for all positive screening results. Time frame 24 months prior to episode of care until discharge of episode of care.

Patient must be screened for all three. If the patient screens positive for any listed substance use, appropriate counseling is required to code YES for this field.

- Tobacco use component: Patients who are screened for tobacco use and who received tobacco cessation intervention if identified as a tobacco user. Counseling should be provided to users of Cigarettes, Pipe, Cigars, Smokeless Cans, Other tobacco products (e-cigs, orbs, strips, sticks, hookah, etc.)
- Unhealthy alcohol use component: Patients who were screened for unhealthy alcohol use (as determined by each facility) using a systematic screening method (as determined by each facility) and who received brief counseling if identified as an unhealthy alcohol user.
- Drug use component (nonmedical prescription drug use and illicit drug use): Patients who were screened for nonmedical prescription drug use and illicit drug use using a systematic screening method(as determined by each facility) and who received brief counseling if identified as a nonmedical prescription drug user or illicit drug user.

If the patient is medically, mentally, or emotionally inappropriate for a referral, select "Not Applicable".

If the patient screens negative for all three and no counseling is indicated, code Yes.

# IQVIA Update
# Melanie Bent & Jannette Hanna

# IQVIA Upcoming August Release

## Data Quality Report

- STS-3423 – DQR populates all warning messages but no response when selecting on individual warnings
- STS-2976 – DQR warning message indicating data on Atrial Fibrillation Procedures is missing, updated logic to not appear when disabled
- STS-3241 – Harvest Summary Report – warning message descriptions and logic updated for urgemergrsn for 2.81 and 2.9

## ACSD Dashboard Report

- STS-2290 – Dashboard Report displaying incorrect core temp source pointing to TYMPANIC instead of NASOPHARYNGEAL

# IQVIA Upcoming August Release

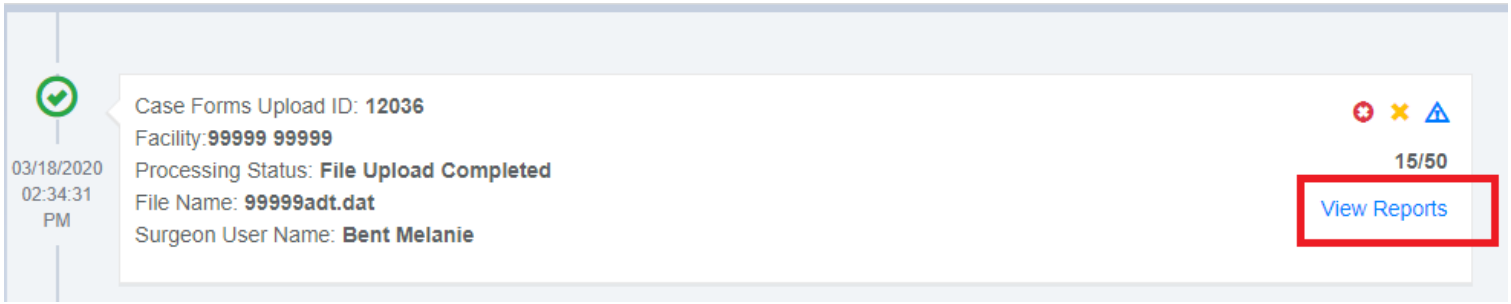
## Missing Variable Report

- STS-2486 – MVR Report Update - To support the 4.20.2 data version upgrade – we are updating the report to include 4.20.2 variables
- STS-3162 – MVR displays 6/81 for number of cases for variable (DISCHDT) but only 3 cases appear in the case list
- STS-3186 – MVR requiring discharge date for expired patients
- STS-3226 – MVR is displaying 200% and 400% missing data fields

# DQR Critical Summary Report

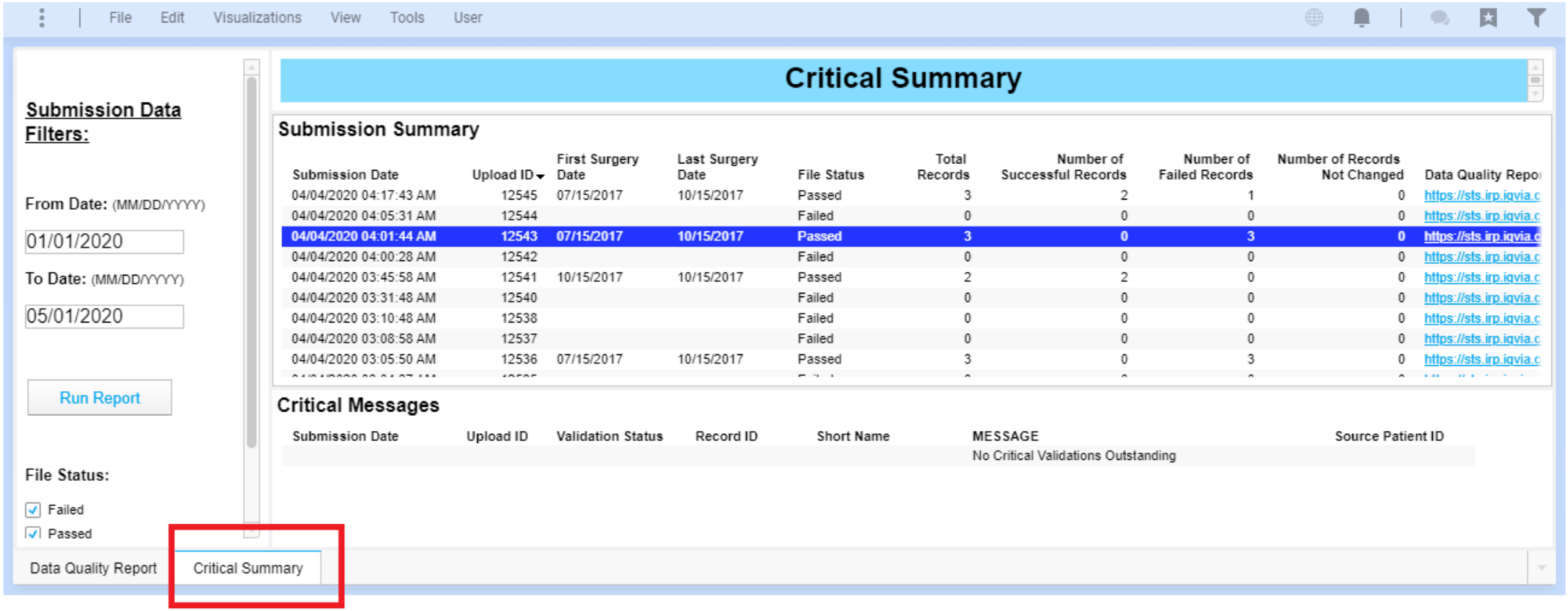
# DQR Critical Summary Report

- Access the Critical Summary Report from any existing Data Quality Report
- From the Uploader Card entry, select the View Reports Link



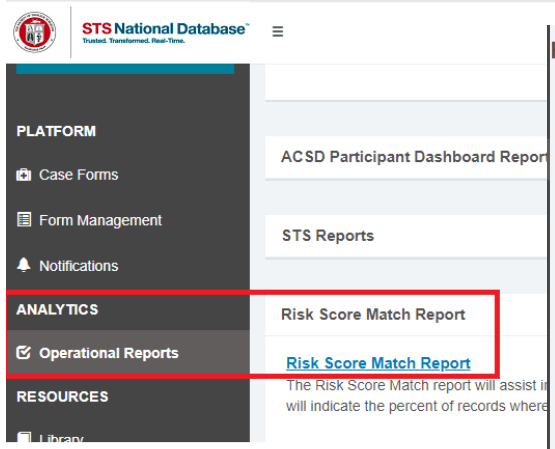

- Once the DQR opens, the new critical summary report tab will be available on the lower left corner

# IQVIA Update – DQR Critical Summary



# Future Report
# ACSD Risk Score Match Report

# IQVIA Update – ACSD Risk Score Match Report (August)




## Risk Score Match Report

Risk Score Match Report

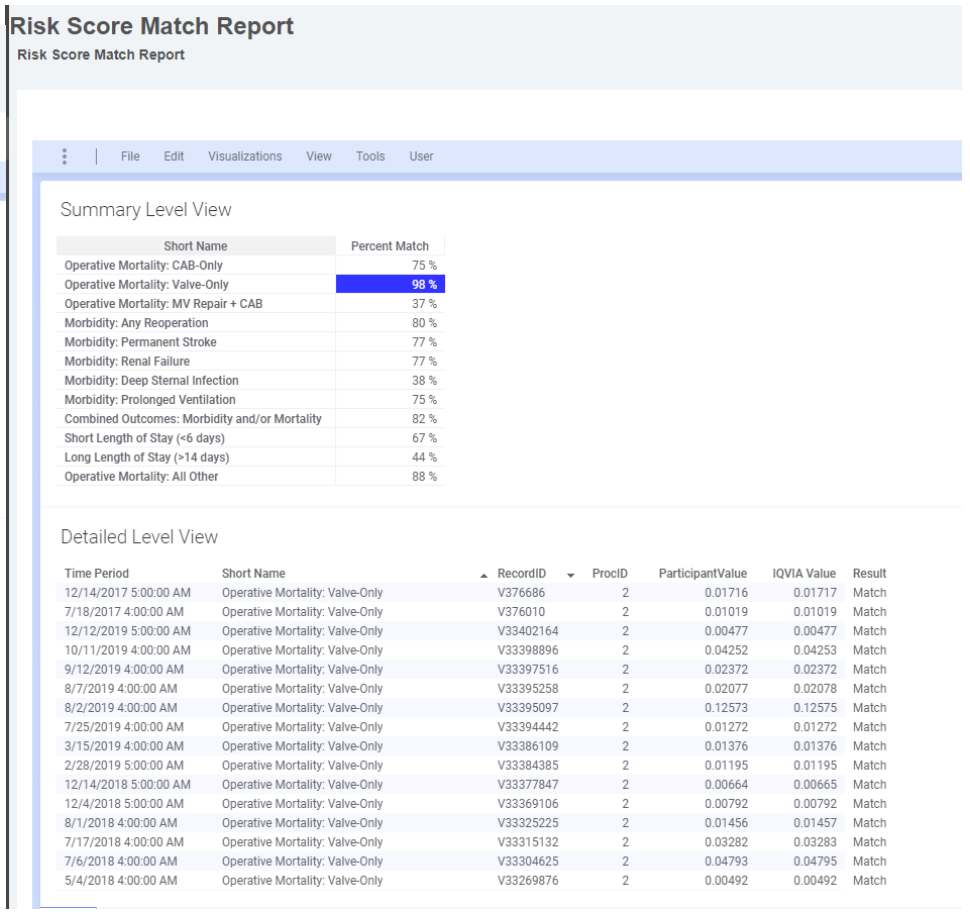
File Edit Visualizations View Tools User

### Summary Level View

| Short Name | Percent Match |
|---|---|
| Operative Mortality: CAB-Only | 75 % |
| Operative Mortality: Valve-Only | 98 % |
| Operative Mortality: MV Repair + CAB | 37 % |
| Morbidity: Any Reoperation | 80 % |
| Morbidity: Permanent Stroke | 77 % |
| Morbidity: Renal Failure | 77 % |
| Morbidity: Deep Sternal Infection | 38 % |
| Morbidity: Prolonged Ventilation | 75 % |
| Combined Outcomes: Morbidity and/or Mortality | 82 % |
| Short Length of Stay (<6 days) | 67 % |
| Long Length of Stay (>14 days) | 44 % |
| Operative Mortality: All Other | 88 % |

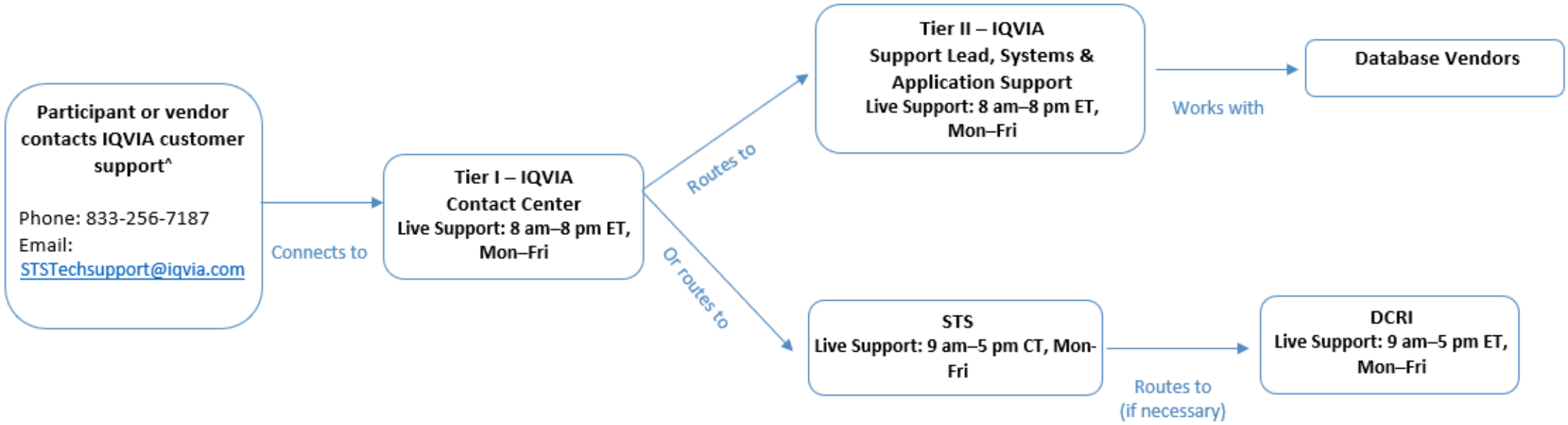
### Detailed Level View

| Time Period | Short Name | RecordID | ProcID | ParticipantValue | IQVIA Value | Result |
|---|---|---|---|---|---|---|
| 5/20/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123484 | 1 | 0.01021 | 0.01022 | Match |
| 5/20/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123483 | 1 | 0.00898 | 0.00899 | Match |
| 5/18/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123481 | 1 | 0.00417 | 0.00417 | Match |
| 5/17/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123477 | 1 | 0.03772 | 0.03773 | Match |
| 5/17/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123476 | 1 | 0.00773 | 0.00773 | Match |
| 5/16/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123475 | 1 | 0.00798 | 0.00889 | No Match |
| 5/15/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123468 | 1 | 0.30764 | 0.30765 | Match |
| 5/14/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123466 | 1 | 0.03595 | 0.04170 | No Match |
| 5/13/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123465 | 1 | 0.06402 | 0.06404 | Match |
| 5/8/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123460 | 1 | 0.00805 | 0.00805 | Match |
| 6/3/2020 4:00:00 AM | Operative Mortality: CAB-Only | V1234569 | 1 | | 0.01086 | No Match |
| 6/3/2020 4:00:00 AM | Operative Mortality: CAB-Only | V1234567 | 1 | | 0.01086 | No Match |
| 10/15/2017 4:00:00 AM | Operative Mortality: CAB-Only | V1234563 | 1 | | 0.01086 | No Match |
| 5/2/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123446 | 1 | 0.00610 | 0.00610 | Match |
| 4/29/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123444 | 1 | 0.04883 | 0.04884 | Match |
| 4/18/2019 4:00:00 AM | Operative Mortality: CAB-Only | V123443 | 1 | 0.01316 | 0.01316 | Match |



# STS/IQVIA Support Plan

# IQVIA's Support Plan




^ Inquiries received outside live support hours will require a 24-hour turnaround window (i.e., one business day) for responses.

# Resources

- STS National Database Webpage
- STSTechSupport@IQVIA.com (Uploader, DQR, Missing Variable, Dashboard, Password and Login )
- Phone Support: 1-833-256-7187
- STS National Database Feedback Form
- Resource Documents
  - Contact Information
  - Webinar Information
  - FAQ Document
  - Go-Live Checklist
  - Tiered-level Support Document
  - *Training Videos*
  - *Link to IQVIA*
  - ckrohn@sts.org

# Open Discussion

Please use the Q&A Function.

We will answer as many questions as possible.

We encourage your feedback and want to hear from you!

# Thank you for joining!

## Next ACSD Webinars

**August 5, 2020**
- ACSD Monthly Webinar @ 2pmCT

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