

# STS Adult Cardiac Surgery Database Data Specifications

Version 4.20.2

This document current as of: 4/10/2020 8:03:03 PM

**Note:** - ALL fields defined in these specifications with "Core: Yes" are to be collected by all sites.

- A data record must be created for each admission to the hospital.

- Fields indicated with a gray background are no longer being collected.

STS Adult Cardiac Surgery Database Version 4.20.2

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<i>Long Name:</i>	Software Vendor Identifier	<i>SeqNo:</i>	5
<i>Short Name:</i>	<b>VendorID</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Name (assigned by STS) given to identify software vendor (up to 8 characters). Vendors should use standard name identification across sites. Changes to Vendor Name Identification must be approved by the STS.		
<i>Data Source:</i>	Automatic	<i>Format:</i>	Text

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<i>Long Name:</i>	Software Version	<i>SeqNo:</i>	10
<i>Short Name:</i>	<b>SoftVrsn</b>	<i>Core:</i>	No
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Vendor's software product name and version number identifying the software which created this record. Vendor controls the value in this field. Version passing certification/harvest testing will be noted at warehouse.		
<i>Data Source:</i>	Automatic	<i>Format:</i>	Text

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<i>Long Name:</i>	STS Data Version	<i>SeqNo:</i>	15
<i>Short Name:</i>	<b>DataVrsn</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Version number of the STS Data Specifications/Dictionary, to which each record conforms. 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.		
<i>Data Source:</i>	Automatic	<i>Format:</i>	Text

<i>Long Name:</i>	On-Demand Files Version Number	<i>SeqNo:</i>	20
<i>Short Name:</i>	<b>OnDemandVrsn</b>	<i>Core:</i>	No
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	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.		
<i>Data Source:</i>	Automatic	<i>Format:</i>	Text

<i>Long Name:</i>	Participant ID	<i>SeqNo:</i>	25
<i>Short Name:</i>	<b>ParticID</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Participant ID is a unique number assigned to each database participant by the STS. A database participant is defined as one entity that signs a Participation Agreement with the STS, submits one data file to the harvest, and gets back one report on their data. The participant ID must be entered into each record. Each participant's data if submitted to harvest must be in one data file. If one participant keeps their data in more than one file (e.g. at two sites), then the participant must combine them back into one file for harvest submission. If two or more participants share a single purchased software, and enter cases into one database, then the data must be extracted into two different files, one for each participant ID, with each record having the correct participant ID number.		
<i>Data Source:</i>	User or Automatic	<i>Format:</i>	Text - Length exactly 5
<i>Low Value:</i>	10000	<i>High Value:</i>	39999

<i>Long Name:</i>	Record ID	<i>SeqNo:</i>	30
<i>Short Name:</i>	<b>RecordID</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	An arbitrary, unique value generated by the software that permanently identifies each record in the participant's database (note that unlike the PatID value, this does not identify the individual patient). The value of the identifier is a combination of a code assigned to the software developer by the STS, and a value generated by the software to create a unique value. Once assigned to a record, this value can never be changed or reused. The data warehouse will use this value to communicate issues about individual records with the participant. It may also be used by the data warehouse to link this record to other clinical data.		
<i>Data Source:</i>	Automatic	<i>Format:</i>	Text

<i>Long Name:</i>	Cost Link	<i>SeqNo:</i>	35
<i>Short Name:</i>	<b>CostLink</b>	<i>Core:</i>	No
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	A participant specified alpha-numeric code that can be used to link this record's clinical data with the participant's cost information for this patient admission. This information may be used in the future to perform procedure cost analysis (for which the actual cost data would have to be harvested separately). The value in this field must not be the patient's Medical Record Number, Social Security Number or any other patient identifying value.		
<i>Data Source:</i>	User	<i>Format:</i>	Text

<i>Long Name:</i>	Patient ID	<i>SeqNo:</i>	40
<i>Short Name:</i>	<b>PatID</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Administrative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	An arbitrary value (not a recognizable ID like Social Security Number or Medical Record Number) that uniquely and permanently identifies each patient. The value of the identifier is a combination of a code assigned to the software developer by the STS, and a value generated by the software to create a unique value. Once assigned to a patient, this can never be changed or reused. If a patient is admitted to the hospital more than once, each record for that patient will have the same value in this field.		
<i>Data Source:</i>	Automatic	<i>Format:</i>	Text

*Long Name:* Patient Participating In STS-Related Clinical Trial *SeqNo:* 45  
*Short Name:* **ClinTrial** *Core:* Yes  
*Section Name:* Administrative *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate which, if any, STS-related clinical trial in which the patient is participating. The STS will assign a code to each clinical trial as they begin collecting data.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 1 None
- 2 Trial 1
- 3 Trial 2
- 4 Trial 3
- 5 Trial 4
- 6 Trial 5
- 7 Trial 6

*Long Name:* Patient Participating In STS-Related Clinical Trial - Patient ID *SeqNo:* 46  
*Short Name:* **ClinTrialPatID** *Core:* Yes  
*Section Name:* Administrative *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the patient identifier used to identify the patient in the clinical trial.  
*Data Source:* User *Format:* Text

ParentShortName: ClinTrial

ParentLongName: Patient Participating In STS-Related Clinical Trial

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "None" And Is Not Missing

*Long Name:* Patient Last Name *SeqNo:* 50  
*Short Name:* **PatLName** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName:* Adultdata1  
*Definition:* Indicate the patient's last name documented in the medical record. This field should be collected in compliance with state/local privacy laws.  
*Data Source:* User *Format:* Text

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*Long Name:* Patient First Name *SeqNo:* 55  
*Short Name:* **PatFName** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's first name documented in the medical record. This field should be collected in compliance with state/local privacy laws.  
*Data Source:* User *Format:* Text

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*Long Name:* Patient Middle Name *SeqNo:* 60  
*Short Name:* **PatMName** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's middle name as documented in the medical record. Leave "blank" if no middle name. This field should be collected in compliance with state/local privacy laws.  
*Data Source:* User *Format:* Text

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*Long Name:* Date of Birth *SeqNo:* 65  
*Short Name:* **DOB** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's date of birth using 4-digit format for year. This field should be collected in compliance with state/local privacy laws.  
*Data Source:* User *Format:* Date mm/dd/yyyy

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*Long Name:* Patient Age *SeqNo:* 70  
*Short Name:* **Age** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's age in years, at time of surgery. This should be calculated from the date of birth and the date of surgery, according to the convention used in the USA (the number of birthdate anniversaries reached by the date of surgery). If age is less than 18, the data record will be accepted into the database, but will not be included in the national analysis and report.  
*Data Source:* User or Calculated *Format:* Integer  
Low Value: 1      High Value: 110      UsualRangeLow: 18      UsualRangeHigh: 100

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*Long Name:* Sex *SeqNo:* 75  
*Short Name:* **Gender** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's sex at birth as either male or female.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Male
  - 2 Female
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*Long Name:* National Identification (Social Security Number) Known *SeqNo:* 76  
*Short Name:* **SSNKknown** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient's National Identification Number is known or if the patient refused to provide this information.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Refused
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*Long Name:* National ID Number *SeqNo:* 80  
*Short Name:* **SSN** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1

*Definition:* Indicate the patient's National Identification Number. 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.

*Data Source:* User *Format:* Text

ParentShortName: SSNKnown

ParentLongName: National Identification (Social Security Number) Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Medical Record Number *SeqNo:* 85  
*Short Name:* **MedRecN** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1

*Definition:* Indicate the patient's medical record number at the hospital where surgery occurred. This field should be collected in compliance with state/local privacy laws.

*Data Source:* User *Format:* Text

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*Long Name:* Patient's Permanent Street Address *SeqNo:* 90  
*Short Name:* **PatAddr** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1

*Definition:* Indicate the patient's permanent address. This should be collected in compliance with state/local privacy laws.

*Data Source:* User *Format:* Text

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*Long Name:* Patient's Permanent City *SeqNo:* 95  
*Short Name:* **PatCity** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's permanent city.  
This should be collected in compliance with state/local privacy laws.  
*Data Source:* User *Format:* Text

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*Long Name:* Patient's Permanent Region *SeqNo:* 100  
*Short Name:* **PatRegion** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's permanent region (i.e. state or province) in which the patient resides.  
*Data Source:* User *Format:* Text

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*Long Name:* ZIP Code *SeqNo:* 105  
*Short Name:* **PatZIP** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Optional  
*DBTableName* Adultdata1  
*Definition:* Indicate the ZIP Code of the patient's local 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.  
*Data Source:* User *Format:* Text

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<i>Long Name:</i>	Country	<i>SeqNo:</i>	115
<i>Short Name:</i>	<b>PatientCountry</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Demographics	<i>Harvest:</i>	Optional
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the patient's country of residence at time of admission.		
	This field should be collected in compliance with state/local privacy laws.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

237	United States Of America
1	Afghanistan
11	Argentina
14	Australia
17	Bahamas
25	Bermuda
31	Brazil
40	Canada
46	China
53	Costa Rica
88	Greece
92	Guam
93	Guatemala
105	India
109	Ireland
111	Israel
112	Italy
113	Jamaica
114	Japan
116	Jordan
143	Mexico
166	State of Palestine
173	Peru
176	Poland
178	Puerto Rico
184	Russian Federation
196	Saudi Arabia
300	Scotland
201	Singapore
215	Switzerland
225	Trinidad And Tobago
227	Turkey
231	Uganda

- 233 United Arab Emirates
- 234 United Kingdom Of Great Britain And Northern Ireland
- 235 United Republic Of Tanzania
- 236 United States Minor Outlying Islands
- 238 United States Virgin Islands
- 242 Venezuela (Bolivarian Republic Of)
- 246 Yemen
- 2 Åland Island
- 999 Other

*Long Name:* Permanent Address *SeqNo:* 120

*Short Name:* **PermAddr** *Core:* No

*Section Name:* Demographics *Harvest:* No

*DBTableName* Adultdata1

*Definition:* Indicate whether the patient considers the given address to be their permanent address.

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

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

*Long Name:* Race Documented *SeqNo:* 150

*Short Name:* **RaceDocumented** *Core:* Yes

*Section Name:* Demographics *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether race is documented

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

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Patient declined to disclose

*Long Name:* Race - Multi-Select *SeqNo:* 151  
*Short Name:* **RaceMulti** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's race(s) selecting all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: RaceDocumented

ParentLongName: Race Documented

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 White
- 2 Black/African American
- 3 Asian
- 4 Am Indian/Alaskan
- 5 Hawaiian/Pacific Islander
- 6 Other

*Long Name:* Race - White *SeqNo:* 155  
*Short Name:* **RaceCaucasian** *Core:* No  
*Section Name:* Demographics *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient's race, as determined by the patient or family, includes White. "White" refers to a person having origins in any of the original peoples of Europe, the Middle East, or North Africa. It includes people who indicated their race(s) as "White" or reported entries such as Irish, German, Italian, Lebanese, Arab, Moroccan, or Caucasian. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RaceDocumented

ParentLongName: Race Documented

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

<i>Long Name:</i>	Race - Black / African American	<i>SeqNo:</i>	160
<i>Short Name:</i>	<b>RaceBlack</b>	<i>Core:</i>	No
<i>Section Name:</i>	Demographics	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient's race, as determined by the patient or family, includes Black / African American. "Black or African American" refers to a person having origins in any of the Black racial groups of Africa. It includes people who indicated their race(s) as "Black, African Am., or Negro" or reported entries such as African American, Kenyan, Nigerian, or Haitian. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	RaceDocumented		
ParentLongName:	Race Documented		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Race - Asian	<i>SeqNo:</i>	165
<i>Short Name:</i>	<b>RaceAsian</b>	<i>Core:</i>	No
<i>Section Name:</i>	Demographics	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient's race, as determined by the patient or family, includes Asian. "Asian" refers to a person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam. It includes people who indicated their race(s) as "Asian" or reported entries such as "Asian Indian", "Chinese", "Filipino", "Korean", "Japanese", "Vietnamese", and "Other Asian" or provided other detailed Asian responses. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	RaceDocumented		
ParentLongName:	Race Documented		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Race - American Indian / Alaskan Native	<i>SeqNo:</i>	170
<i>Short Name:</i>	<b>RaceNativeAm</b>	<i>Core:</i>	No
<i>Section Name:</i>	Demographics	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient's race, as determined by the patient or family, includes American Indian / Alaskan Native. "American Indian or Alaska Native" refers to a person having origins in any of the original peoples of North and South America (including Central America) and who maintains tribal affiliation or community attachment. This category includes people who indicated their race(s) as "American Indian or Alaska Native" or reported their enrolled or principal tribe, such as Navajo, Blackfeet, Inupiat, Yup'ik, or Central American Indian groups or South American Indian groups. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	RaceDocumented		
ParentLongName:	Race Documented		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Race - Native Hawaiian / Pacific Islander	<i>SeqNo:</i>	175
<i>Short Name:</i>	<b>RacNativePacific</b>	<i>Core:</i>	No
<i>Section Name:</i>	Demographics	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient's race, as determined by the patient or family, includes Native Hawaiian / Pacific Islander. "Native Hawaiian or Other Pacific Islander" refers to a person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands. It includes people who indicated their race(s) as "Pacific Islander" or reported entries such as "Native Hawaiian", "Guamanian or Chamorro", "Samoan", and "Other Pacific Islander" or provided other detailed Pacific Islander responses. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	RaceDocumented		
ParentLongName:	Race Documented		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

*Long Name:* Race - Other *SeqNo:* 180  
*Short Name:* **RaceOther** *Core:* No  
*Section Name:* Demographics *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient's race, as determined by the patient or family, includes any other race. "Some Other Race" includes all other responses not included in the White, Black or African American, American Indian or Alaska Native, Asian, and Native Hawaiian or Other Pacific Islander race categories described above. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RaceDocumented  
 ParentLongName: Race Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Hispanic or Latino or Spanish Ethnicity *SeqNo:* 185  
*Short Name:* **Ethnicity** *Core:* Yes  
*Section Name:* Demographics *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the patient is of Hispanic, Latino or Spanish ethnicity as reported by the patient / family. "Hispanic, Latino or Spanish" refers to a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race. [The 2010 Census Redistricting Data (Public Law 94-171) Summary File]  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No  
     3 Not Documented

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*Long Name:* Hospital Name *SeqNo:* 205  
*Short Name:* **HospName** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the full name of the facility where the procedure was performed. Values should be full, official hospital name as it appears on the contract with the STS, with no abbreviations or variations in spelling for a single hospital. Values should also be in mixed-case.  
*Data Source:* User *Format:* Text (categorical values specified by User)

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*Long Name:* Hospital ZIP Code *SeqNo:* 210  
*Short Name:* **HospZIP** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* 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.  
*Data Source:* Lookup *Format:* Text (categorical values specified by User)

ParentShortName: HospName  
ParentLongName: Hospital Name  
ParentHarvestCodes: Is Not Missing  
ParentValues: Is Not Missing

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*Long Name:* Hospital Region *SeqNo:* 215  
*Short Name:* **HospStat** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the region of the country (i.e., state or province) in which the hospital is located.  
*Data Source:* Lookup *Format:* Text

ParentShortName: HospName  
ParentLongName: Hospital Name  
ParentHarvestCodes: Is Not Missing  
ParentValues: Is Not Missing

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*Long Name:* Hospital National Provider Identifier *SeqNo:* 220  
*Short Name:* **HospNPI** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the hospital's National Provider Identifier (NPI). This number, assigned by the Center for Medicare and Medicaid Services (CMS), is used to uniquely identify facilities for Medicare billing purposes.  
 Non-US participants will have a unique hospital ID number assigned by STS.  
*Data Source:* Lookup *Format:* Text (categorical values specified by User)

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*Long Name:* Hospital CMS Certification Number *SeqNo:* 221  
*Short Name:* **HospCMSCert** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the hospital's CMS certification number  
*Data Source:* User *Format:* Text

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*Long Name:* Primary Payor *SeqNo:* 291  
*Short Name:* **PayorPrim** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the primary insurance payor at time of arrival.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 None / self
- 2 Medicare (includes commercially managed options)
- 3 Medicaid (includes commercially managed options)
- 9 Commercial Health Insurance
- 10 Health Maintenance Organization
- 4 Military
- 11 Non-U.S. Plan



## 13 Other

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*Long Name:* Commercially Managed Medicare Plan - Primary *SeqNo:* 292  
*Short Name:* **ComMngMedPlnPrim** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient's primary payor is a commercially managed Medicare plan.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PayorPrim

ParentLongName: Primary Payor

ParentHarvestCodes: 2

ParentValues: = "Medicare (includes commercially managed options)"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* HICN / MBI Known - Primary *SeqNo:* 293  
*Short Name:* **HICNMBIKnown** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether patient's HICN or MBI is known for primary.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ComMngMedPlnPrim

ParentLongName: Commercially Managed Medicare Plan - Primary

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* HICN / MBI Number Primary *SeqNo:* 294  
*Short Name:* **HICNMBI** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the HICN or MBI number for primary coverage.  
*Data Source:* User *Format:* Text  
 ParentShortName: HICNMBIKnown  
 ParentLongName: HICN / MBI Known - Primary  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Primary Payor Medicare Fee Part B *SeqNo:* 295  
*Short Name:* **PrimMCareFFS** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient is covered by Part B.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PayorPrim  
 ParentLongName: Primary Payor  
 ParentHarvestCodes: 2  
 ParentValues: = "Medicare (includes commercially managed options)"  
 Harvest Codes:  

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Secondary (Supplemental) Payor *SeqNo:* 298  
*Short Name:* **PayorSecond** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate which if any secondary insurance payor the patient had at time of arrival.

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

ParentShortName: PayorPrim

ParentLongName: Primary Payor

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "None / self" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 None / self
  - 2 Medicare (includes commercially managed options)
  - 3 Medicaid (includes commercially managed options)
  - 9 Commercial Health Insurance
  - 10 Health Maintenance Organization
  - 4 Military
  - 11 Non-U.S. Plan
  - 13 Other
- 

*Long Name:* Commercially Managed Medicare Plan Secondary *SeqNo:* 299  
*Short Name:* **ComMngMedPlnSec** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the patient's secondary payor is a commercially managed Medicare plan.

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

ParentShortName: PayorSecond

ParentLongName: Secondary (Supplemental) Payor

ParentHarvestCodes: 2

ParentValues: = "Medicare (includes commercially managed options)"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* HICN / MBI Known - Secondary *SeqNo:* 300  
*Short Name:* **HICNMBIKnownSec** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether patient's HICN or MBI is known for secondary.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ComMngMedPlnSec  
*ParentLongName:* Commercially Managed Medicare Plan Secondary  
*ParentHarvestCodes:* 2  
*ParentValues:* = "No"

*Harvest Codes:*  

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* HICN / MBI Number - Secondary *SeqNo:* 301  
*Short Name:* **HICNMBINumberSec** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate patient's HICN or MBI number for secondary.  
*Data Source:* User *Format:* Text

*ParentShortName:* HICNMBIKnownSec  
*ParentLongName:* HICN / MBI Known - Secondary  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Secondary Payor Medicare Part B *SeqNo:* 302  
*Short Name:* **SecondMCareFFS** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient is covered by Part B.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: PayorSecond  
ParentLongName: Secondary (Supplemental) Payor  
ParentHarvestCodes: 2  
ParentValues: = "Medicare (includes commercially managed options)"  
Harvest Codes:  
    Code: Value:  
        1 Yes  
        2 No

---

*Long Name:* Admit Date *SeqNo:* 305  
*Short Name:* **AdmitDt** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Date of Admission. For those patients who originally enter the hospital in an out-patient capacity (i.e., catheterization), the admit date is the date the patient's status changes to in-patient. In the event admission date comes after date of surgery, use date of surgery.  
*Data Source:* User *Format:* Date mm/dd/yyyy

---

*Long Name:* Date of Surgery *SeqNo:* 310  
*Short Name:* **SurgDt** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date of index cardiac surgical procedure. Index cardiac surgical procedure is defined as the initial major cardiac surgical procedure of the hospitalization.  
*Data Source:* User *Format:* Date mm/dd/yyyy

---

---

*Long Name:* Admit Source *SeqNo:* 320  
*Short Name:* **AdmitSrc** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the source of admission for the patient to your facility.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Elective Admission	
2	Emergency Department	The patient came to the facility for this episode of care via the emergency department (excludes transfers from other facilities).
3	Transfer in from another hospital / acute care facility	The patient was transferred from another acute care facility (even if he/she was transferred to the emergency department) for this episode of care.
4	Other	The patient came to the facility for this episode of care by any other means. This includes transfers from non-acute care facilities.

---

*Long Name:* Other Hospital Performs Cardiac Surgery *SeqNo:* 325  
*Short Name:* **OthHosCS** *Core:* Yes  
*Section Name:* Hospitalization *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* The transferring hospital has the necessary personnel and facilities to have been able to perform cardiac surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AdmitSrc

ParentLongName: Admit Source

ParentHarvestCodes: 3

ParentValues: = "Transfer in from another hospital / acute care facility"

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* Height (cm) *SeqNo:* 330  
*Short Name:* **HeightCm** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the height of the patient in centimeters closest to time of OR entry for index procedure.  
*Data Source:* User *Format:* Real  
Low Value: 20.0 High Value: 251.0 UsualRangeLow: 122.0 UsualRangeHigh: 213.0

---

*Long Name:* Weight (kg) *SeqNo:* 335  
*Short Name:* **WeightKg** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the weight of the patient in kilograms closest to time of OR entry for index procedure.  
*Data Source:* User *Format:* Real  
Low Value: 10.0 High Value: 250.0 UsualRangeLow: 30.0 UsualRangeHigh: 181.8

---

*Long Name:* Calculated BMI *SeqNo:* 336  
*Short Name:* **CalculatedBMI** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* System calculated BMI  
*Data Source:* Calculated *Format:* Real  
Low Value: 0.0 High Value: 200.0 UsualRangeLow: 18.0 UsualRangeHigh: 50.0

---

---

*Long Name:* RF-Family History of Premature CAD *SeqNo:* 355  
*Short Name:* **FHCAD** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* Indicate if the patient has any direct blood relatives (parents, siblings, children) who have had any of the following at age <55 y for male relatives or <65 y for female relatives:
 

- Angina
- Acute MI
- Sudden cardiac death without obvious cause
- CABG surgery
- PCI

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

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

---

*Long Name:* RF-Diabetes *SeqNo:* 360  
*Short Name:* **Diabetes** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* History of diabetes diagnosed and/or treated by a healthcare provider.

Hemoglobin A1c  $\geq 6.5\%$  is indicative of diabetes. Please refer your healthcare providers to the 2017 ADA Standards of Medical Care in Diabetes.

2017 American Diabetes Association Standards of Medicare Care in Diabetes - 2017. Diabetes Care. 40 (Suppl.1) :S13.

[https://professional.diabetes.org/sites/professional.diabetes.org/files/media/dc\\_40\\_s1\\_final.pdf](https://professional.diabetes.org/sites/professional.diabetes.org/files/media/dc_40_s1_final.pdf).

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

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

---



*Long Name:* RF-Diabetes-Control *SeqNo:* 365  
*Short Name:* **DiabCtrl** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the patient's diabetes control method at home.  
 Choose the most aggressive therapy from the order below
 

- Insulin: insulin treatment (includes any combination with insulin)
- Other subcutaneous medications (e.g., GLP-1 agonist)
- Oral: treatment with oral agent (includes oral agent with or without diet treatment)
- Diet only: Treatment with diet only
- None: no treatment for diabetes
- Other: other adjunctive treatment, non-oral/insulin/diet
- Unknown

2017 American Diabetes Association Standards of Medicare Care in Diabetes - 2017. Diabetes Care. 40 (Suppl.1) :S13.

[https://professional.diabetes.org/sites/professional.diabetes.org/files/media/dc\\_40\\_s1\\_final.pdf](https://professional.diabetes.org/sites/professional.diabetes.org/files/media/dc_40_s1_final.pdf).

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

*ParentShortName:* Diabetes

*ParentLongName:* RF-Diabetes

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes and Value Definitions:*

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	No treatment for diabetes.
2	Diet only	Treatment with diet only
3	Oral	Treatment with oral agent (includes oral agent with or without diet treatment)
4	Insulin	Insulin treatment (includes any combination with insulin)
6	Other SubQ	Other subcutaneous medications (such as GLP-1 agonists; Byetta,Bydureon,Victoza,Symmlin)
5	Other	Other adjunctive treatment, non-oral/insulin/diet
7	Unknown	

<i>Long Name:</i>	RF-Dyslipidemia	<i>SeqNo:</i>	370
<i>Short Name:</i>	<b>Dyslip</b>	<i>Core:</i>	No
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate if the patient has a history of dyslipidemia that was diagnosed and/or treated by a physician. NCEP criteria include documentation of the following: <ul style="list-style-type: none"> <li>● Total cholesterol &gt;200 mg/dL (5.18 mmol/L); or</li> <li>● LDL <math>\geq</math>130 mg/dL (3.37 mmol/L);</li> <li>● HDL &lt;40 mg/dL (1.04 mmol/L) in men and &lt;50 mg/dL (1.30 mmol/L) in women;</li> <li>● Currently receiving antilipidemic treatment</li> </ul>		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	
	3	Unknown	

<i>Long Name:</i>	RF-Renal Fail-Dialysis	<i>SeqNo:</i>	375
<i>Short Name:</i>	<b>Dialysis</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient is currently (prior to surgery) undergoing dialysis on a routine basis.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	
	3	Unknown	

---

*Long Name:* RF-Hypertension *SeqNo:* 380  
*Short Name:* **Hypertn** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the patient has a current diagnosis of hypertension defined by any 1 of the following:
 

- History of hypertension diagnosed and treated with medication, diet, and/or exercise
- Currently undergoing pharmacological therapy for treatment of hypertension

 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APhA/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. J Am Coll Cardiol 2018;71:e127-e248.

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

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* RF- Endocarditis *SeqNo:* 385  
*Short Name:* **InfEndo** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient has a history of endocarditis. Endocarditis must meet the current CDC definition (see Training Manual).

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

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* RF-Infect Endocard Type *SeqNo:* 390  
*Short Name:* **InfEndTy** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the type of endocarditis the patient has. If the patient is currently being treated for endocarditis, the disease is considered active. If no antibiotic medication (other than prophylactic medication) is being given at the time of surgery and the cultures are negative, then the infection is considered treated.

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

ParentShortName: InfEndo

ParentLongName: RF- Endocarditis

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Treated

2 Active

*Long Name:* RF-Infect Endocard Culture *SeqNo:* 395  
*Short Name:* **InfEndCult** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate culture results (may use cultures obtained in the OR).

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

ParentShortName: InfEndo

ParentLongName: RF- Endocarditis

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

Code: Value:

1 Culture negative

3 Strep species

11 MRSA

12 MSSA

4 Coagulase negative staph

5 Enterococcus species

9 Gram negative species

10 Polymicrobial

13 Mycobacterium (chimera)

6 Fungal

7 Other

Definition:

Culture negative

Streptococcus species

Methicillian resistant staphylococcus aureus (MRSA)

Methicillian sensitive staphylococcus aureus (MSSA)

Coagulase negative staphylococcus

Enterococcus species

Gram negative species

Polymicrobial

Mycobacterium (chimera)

Fungal

Other

8	Unknown	Unknown
<i>Long Name:</i>	RF-Tobacco Use	<i>SeqNo:</i> 400
<i>Short Name:</i>	<b>TobaccoUse</b>	<i>Core:</i> Yes
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i> Yes
<i>DBTableName</i>	Adultdata2	
<i>Definition:</i>	Indicate current (within 30 days prior to admission) or previous use of any tobacco product, including Cigarettes, Pipe, Cigars, Smokeless Cans, Other tobacco products (orbs, strips, sticks, hookah, etc.).	
<i>Data Source:</i>	User	<i>Format:</i> Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Never smoker
- 2 Current every day smoker
- 3 Current some day smoker
- 4 Smoker, current status (frequency) unknown
- 5 Former smoker
- 6 Smoking status unknown

<i>Long Name:</i>	RF-Chronic Lung Disease	<i>SeqNo:</i> 405
<i>Short Name:</i>	<b>ChrLungD</b>	<i>Core:</i> Yes
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i> Yes
<i>DBTableName</i>	Adultdata2	
<i>Definition:</i>	Indicate whether the patient has chronic lung disease, and the severity level according to the following classification:	
	No;	
	Mild: FEV1 60% to 75% of predicted, or on chronic inhaled or oral bronchodilator therapy.	
	Moderate: FEV1 50% to 59% of predicted, or on chronic oral/systemic steroid therapy aimed at lung disease.	
	Severe: FEV1 < 50% or Room Air pO2 < 60 or pCO2 > 50.	
	CLD present, severity not documented.	
	Unknown	
<i>Data Source:</i>	User	<i>Format:</i> Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 No

- 
- 2 Mild
  - 3 Moderate
  - 4 Severe
  - 5 Lung disease documented,  
severity unknown
  - 6 Unknown
- 

*Long Name:* RF-Chronic Lung Disease - Type *SeqNo:* 410  
*Short Name:* **ChrLungDType** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the type of chronic lung disease.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ChrLungD

ParentLongName: RF-Chronic Lung Disease

ParentHarvestCodes: 2|3|4

ParentValues: = "Mild", "Moderate" or "Severe"

Harvest Codes:

Code: Value:

- 1 Obstructive
  - 2 Reactive
  - 3 Interstitial Fibrosis
  - 7 Restrictive
  - 4 Other
  - 5 Multiple
  - 6 Not Documented
- 

*Long Name:* RF-Pulmonary Function Test *SeqNo:* 415  
*Short Name:* **PFT** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether pulmonary function tests were performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* RF-Forced Expiratory Volume Predicted *SeqNo:* 420  
*Short Name:* **FEV1** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the FEV1 % predicted from the most recent pulmonary function test prior to procedure.  
Choose the highest value reported for % predicted, with or without a bronchodilator.  
*Data Source:* User *Format:* Integer  
Low Value: 1 High Value: 200  
ParentShortName: PFT  
ParentLongName: RF-Pulmonary Function Test  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* DLCO Test Performed *SeqNo:* 425  
*Short Name:* **DLCO** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a lung diffusion test (DLCO) was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: PFT  
ParentLongName: RF-Pulmonary Function Test  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

---

*Long Name:* DLCO Predicted *SeqNo:* 430  
*Short Name:* **DLCOPred** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the % predicted DLCO value obtained for the patient. Choose the value that represents the lowest % predicted whether or not it is the simple DLCO or the DLCO/VA.  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 200  
 ParentShortName: DLCO  
 ParentLongName: DLCO Test Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* RF-Arterial Blood Gas *SeqNo:* 435  
*Short Name:* **ABG** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a room-air arterial blood gas was performed prior to surgery. Answer no if the only available arterial blood gasses were drawn while patient was receiving supplemental oxygen.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:  
 1 Yes  
 2 No

---

*Long Name:* RF-Carbon Dioxide Level *SeqNo:* 440  
*Short Name:* **PCO2** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate PCO2 on most recent room air blood gas prior to procedure.  
*Data Source:* User *Format:* Real  
 Low Value: 15.0 High Value: 150.0  
 ParentShortName: ABG  
 ParentLongName: RF-Arterial Blood Gas  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"



---

*Long Name:* RF-Oxygen Level *SeqNo:* 445  
*Short Name:* **PO2** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate PO2 result on most recent room air arterial blood gas prior to procedure.  
*Data Source:* User *Format:* Real  
 Low Value: 30.0 High Value: 600.0  
 ParentShortName: ABG  
 ParentLongName: RF-Arterial Blood Gas  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* RF-Home Oxygen *SeqNo:* 450  
*Short Name:* **HmO2** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether supplemental oxygen at home is prescribed and used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:  
 3 Yes, PRN  
 4 Yes, oxygen dependent  
 2 No  
 5 Unknown

---

*Long Name:* RF-Inhaled Medication or Oral Bronchodilator Therapy *SeqNo:* 455  
*Short Name:* **BDTx** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether oral and/or inhaled bronchodilator or inhaled (not oral or IV) steroid medications were in use by the patient routinely prior to this procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:  
 1 Yes  
 2 No

---

 3 Unknown
 

---

*Long Name:* RF-Sleep Apnea *SeqNo:* 460  
*Short Name:* **SlpApn** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient has a diagnosis of sleep apnea (may be described as obstructive sleep apnea or OSA).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

1 Yes  
 2 No  
 3 Unknown

---

*Long Name:* RF-Pneumonia *SeqNo:* 465  
*Short Name:* **Pneumonia** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient has a recent (within 30 days) or remote (more than 30 days) history of pneumonia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes and Value Definitions:

Code: Value:Definition:

2	Recent	Within 1 month of procedure
3	Remote	More than 1 month prior to procedure
1	No	
4	Unknown	

---

*Long Name:* RF-Illicit Drug Use within One Year *SeqNo:* 470  
*Short Name:* **IVDrugAb** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there is documented history of use of illicit drugs, such as heroin, cocaine, or methamphetamine, or abuse of a controlled substance within the last year.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 
- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* RF-Intravenous Drug Use within One Year *SeqNo:* 471  
*Short Name:* **IVDrugUse1Yr** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Intravenous Drug Use within one year of surgery.

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

ParentShortName: IVDrugAb

ParentLongName: RF-Illicit Drug Use within One Year

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* RF-Drug use within 30 days of procedure? *SeqNo:* 472  
*Short Name:* **DrugUse30D** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the patient has used illicit drugs within 30 days prior to the procedure

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

ParentShortName: IVDrugAb

ParentLongName: RF-Illicit Drug Use within One Year

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
-

<i>Long Name:</i>	RF-Depression	<i>SeqNo:</i>	475
<i>Short Name:</i>	<b>Depression</b>	<i>Core:</i>	No
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether there is a current or previous history of depression or documentation of a depressed mood or affect.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	
	3	Unknown	

<i>Long Name:</i>	RF-Alcohol Use	<i>SeqNo:</i>	480
<i>Short Name:</i>	<b>Alcohol</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Specify alcohol consumption history.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

**Harvest Codes:**

	<u>Code:</u>	<u>Value:</u>
	1	<= 1 drink/week
	2	2-7 drinks/week
	3	>= 8 drinks/week
	4	None
	5	Unknown

<i>Long Name:</i>	RF-Liver Disease	<i>SeqNo:</i>	485
<i>Short Name:</i>	<b>LiverDis</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Risk Factors	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient has a history of hepatitis B, hepatitis C, drug induced hepatitis, auto-immune hepatitis, cirrhosis, portal hypertension, esophageal varices, liver transplant, or congestive hepatopathy. Exclude NASH in the absence of cirrhosis.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

**Harvest Codes:**

	<u>Code:</u>	<u>Value:</u>
	1	Yes

- 2 No
- 3 Unknown

*Long Name:* RF-Liver Cirrhosis *SeqNo:* 486  
*Short Name:* **LiverCirrhosis** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate if the patient has a history of liver cirrhosis.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

*Long Name:* RF-Liver Disease - Child Pugh Class *SeqNo:* 488  
*Short Name:* **LiverChildPugh** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the Child Pugh Class, if known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: LiverCirrhosis

ParentLongName: RF-Liver Cirrhosis

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 A
- 2 B
- 3 C
- 4 Unknown

*Long Name:* RF-Liver Disease - Listed for Liver Transplant *SeqNo:* 489  
*Short Name:* **LiverTransList** *Core:* No  
*Section Name:* Risk Factors *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient is listed for liver transplant.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LiverDis  
 ParentLongName: RF-Liver Disease  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* RF-Liver Disease - Status Post Liver Transplant *SeqNo:* 490  
*Short Name:* **LiverStatusPost** *Core:* No  
*Section Name:* Risk Factors *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has received a liver transplant prior to this operation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LiverDis  
 ParentLongName: RF-Liver Disease  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* Immunocompromised Present *SeqNo:* 492  
*Short Name:* **ImmSupp** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether immunocompromise is present due to immunosuppressive medication therapy within 30 days preceding the operative procedure or existing medical condition (see training manual).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

---

*Long Name:* Mediastinal Radiation *SeqNo:* 495  
*Short Name:* **MediastRad** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient has a history of radiation therapy to the mediastinum or chest.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

---

*Long Name:* Cancer Within 5 Years *SeqNo:* 500  
*Short Name:* **Cancer** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a history of cancer diagnosed within 5 years of procedure. Do not capture low grade skin cancers such as basal cell or squamous cell carcinoma.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

*Long Name:* Peripheral Artery Disease *SeqNo:* 505  
*Short Name:* **PVD** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a documented history of peripheral arterial disease (includes upper and lower extremity, renal, mesenteric, and abdominal aortic systems). This can include:  
 1. Claudication , either with exertion or at rest,  
 2. Amputation for arterial vascular insufficiency,  
 3. Vascular reconstruction, bypass surgery, or percutaneous intervention to the extremities (excluding dialysis fistulas and vein stripping),  
 4. Documented abdominal aortic aneurysm with or without repair.  
 5. Documented subclavian artery stenosis.  
 Peripheral arterial disease excludes disease in the carotid, cerebrovascular arteries or thoracic aorta.  
 PVD does not include DVT, pulmonary artery aneurysm, Raynaud's Disease or AVM.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |
| 3            | Unknown       |

*Long Name:* RF-Thoracic Aorta Disease *SeqNo:* 510  
*Short Name:* **ThAoDisease** *Core:* No  
*Section Name:* Risk Factors *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a history of disease of the thoracic or thoracoabdominal aorta. Abdominal aortic disease without thoracic involvement is captured in peripheral artery disease.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |
| 3            | Unknown       |



*Long Name:* Unresponsive State *SeqNo:* 512  
*Short Name:* **UnrespStat** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a history of non-medically induced, unresponsive state within 24 hours of the time of surgery. Patient experienced complete mental unresponsiveness and no evidence of psychological or physiologically appropriate responses to stimulation, includes patients who experience sudden cardiac death.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Syncope *SeqNo:* 515  
*Short Name:* **Syncope** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a sudden loss of consciousness with loss of postural tone, not related to anesthesia, with spontaneous recovery and believed to be related to cardiac condition. Capture events occurring within the past one year as reported by patient or observer. Patient may experience syncope when supine.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

*Long Name:* RF-Chest Wall Deformity *SeqNo:* 521  
*Short Name:* **ChestWallDef** *Core:* No  
*Section Name:* Risk Factors *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a chest wall deformity.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes

2	No
3	Unknown

*Long Name:* Cerebrovascular Disease *SeqNo:* 525  
*Short Name:* **CVD** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* Indicate whether the patient has a current or previous history of any of the following:  
a. Stroke: Stroke is an acute episode of focal or global neurological dysfunction caused by brain, spinal cord, or retinal vascular injury as a result of hemorrhage or infarction, where the neurological dysfunction lasts for greater than 24 hours.  
B. TIA: is defined as a transient episode of focal neurological dysfunction caused by brain, spinal cord, or retinal ischemia, without acute infarction, where the neurological dysfunction resolves within 24 hours.  
C. Noninvasive or invasive arterial imaging test demonstrating  $\geq 50\%$  stenosis of any of the major extracranial or intracranial vessels to the brain  
D. Vertebral artery and internal carotid and intercranial consistent with atherosclerotic disease with document presence as CVD. External carotid disease is excluded.  
E. Previous cervical or cerebral artery revascularization surgery or percutaneous intervention F. Brain/cerebral aneurysm. G. Occlusion of vertebral artery, internal carotid artery, and intercranial due to dissection.  
This does not include chronic (nonvascular) neurological diseases or other acute neurological insults such as metabolic and anoxic ischemic encephalopathy. Subdural hematoma or AVM is not cerebral vascular disease.

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

Harvest Codes:

Code: Value:  
1 Yes  
2 No  
3 Unknown

---

*Long Name:* Prior CVA *SeqNo:* 530  
*Short Name:* **CVA** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient has a history of stroke. Stroke is an acute episode of focal or global neurological dysfunction caused by brain, spinal cord, or retinal vascular injury as a result of hemorrhage or infarction, where the neurological dysfunction lasts for greater than 24 hours.

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

ParentShortName: CVD

ParentLongName: Cerebrovascular Disease

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* Prior CVA-When *SeqNo:* 535  
*Short Name:* **CVAWhen** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate when the CVA events occurred. Those events occurring within 30 days prior to the surgical procedure are considered recent, while all others are considered remote.

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

ParentShortName: CVA

ParentLongName: Prior CVA

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 <= 30 days
  - 4 > 30 days
-

---

*Long Name:* CVD TIA *SeqNo:* 540  
*Short Name:* **CVDTIA** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient has a history of a Transient Ischemic Attack (TIA). Transient ischemic attack (TIA) is defined as a transient episode of focal neurological dysfunction caused by brain, spinal cord, or retinal ischemia, without acute infarction, where the neurological dysfunction resolves within 24 hours.

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

ParentShortName: CVD

ParentLongName: Cerebrovascular Disease

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* CVD Carotid Stenosis *SeqNo:* 545  
*Short Name:* **CVDCarSten** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate which carotid artery was determined from any diagnostic test to be  $\geq 50\%$  stenotic.

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

ParentShortName: CVD

ParentLongName: Cerebrovascular Disease

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Right
  - 3 Left
  - 4 Both
  - 1 None
  - 5 Not documented
-

---

*Long Name:* CVD Carotid Stenosis - Right *SeqNo:* 550  
*Short Name:* **CVDStenRt** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* Indicate the severity of stenosis reported on the right carotid artery.

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

ParentShortName: CVDCarSten

ParentLongName: CVD Carotid Stenosis

ParentHarvestCodes: 2|4

ParentValues: = "Right" or "Both"

Harvest Codes:

Code: Value:

3 50% to 79%

1 80% to 99%

2 100 %

4 Not documented

---

*Long Name:* CVD Carotid Stenosis - Left *SeqNo:* 555  
*Short Name:* **CVDStenLft** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* Indicate the severity of stenosis reported on the left carotid artery.

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

ParentShortName: CVDCarSten

ParentLongName: CVD Carotid Stenosis

ParentHarvestCodes: 3|4

ParentValues: = "Left" or "Both"

Harvest Codes:

Code: Value:

3 50% to 79%

1 80% to 99%

2 100%

4 Not documented

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---

*Long Name:* CVD Prior Carotid Surgery *SeqNo:* 560  
*Short Name:* **CVDPCarSurg** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a history of previous carotid artery surgery and/or stenting.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CVD  
 ParentLongName: Cerebrovascular Disease  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

*Long Name:* WBC Count *SeqNo:* 565  
*Short Name:* **WBC** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the pre-operative White Blood Cell (WBC) count closest to the date and time prior to surgery but prior to anesthetic management (induction area or operating room).  
*Data Source:* User *Format:* Real  
 Low Value: 0.10      High Value: 99.99      UsualRangeLow: 2.00      UsualRangeHigh: 40.00

---

*Long Name:* Hemoglobin *SeqNo:* 570  
*Short Name:* **RFHemoglobin** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the pre-operative Hemoglobin level at the date and time closest to surgery but prior to anesthetic management (induction area or operating room). Capture only measured hemoglobin levels, not calculated values.  
*Data Source:* User *Format:* Real  
 Low Value: 1.00      High Value: 50.00      UsualRangeLow: 6.00      UsualRangeHigh: 20.00

---

---

*Long Name:* Hematocrit *SeqNo:* 575  
*Short Name:* **Hct** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the pre-operative Hematocrit level at the date and time closest to surgery but prior to anesthetic management (induction area or operating room). Capture only measured hematocrit levels, not calculated values.  
*Data Source:* User *Format:* Real  
Low Value: 1.00    High Value: 99.99    UsualRangeLow: 20.00    UsualRangeHigh: 53.00

---

*Long Name:* Platelet Count *SeqNo:* 580  
*Short Name:* **Platelets** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the platelet count closest to the date and time prior to surgery but prior to anesthetic management (induction area or operating room).  
*Data Source:* User *Format:* Integer  
Low Value: 1000    High Value: 900000    UsualRangeLow: 150000    UsualRangeHigh: 600000

---

*Long Name:* Total Albumin *SeqNo:* 585  
*Short Name:* **TotAlbumin** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total albumin closest to the date and time prior to surgery but prior to anesthetic management (induction area or operating room).  
*Data Source:* User *Format:* Real  
Low Value: 1.00    High Value: 10.00    UsualRangeLow: 3.50    UsualRangeHigh: 5.00

---

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*Long Name:* Last A1C Level *SeqNo:* 590  
*Short Name:* **A1cLvl** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the pre-operative HbA1c level closest to the date and time prior surgery but prior to anesthetic management (induction area or operating room).  
*Data Source:* User *Format:* Real  
Low Value: 1.00 High Value: 20.00 UsualRangeLow: 4.00 UsualRangeHigh: 13.00

---

*Long Name:* BNP *SeqNo:* 595  
*Short Name:* **BNP** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the BNP value.  
*Data Source:* User *Format:* Real  
Low Value: 5.0 High Value: 70000.0

---

*Long Name:* Sodium *SeqNo:* 600  
*Short Name:* **Sodium** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the Sodium closest to the date and time prior to surgery but prior to anesthetic management (induction area or operating room). If liver disease is present, then Sodium is required for Meld score calculation.  
*Data Source:* User *Format:* Real  
Low Value: 30.0 High Value: 200.0 UsualRangeLow: 130.0 UsualRangeHigh: 145.0

---



---

*Long Name:* Last Creatinine Level *SeqNo:* 605  
*Short Name:* **CreatLst** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the creatinine level closest to the date and time prior surgery but prior to anesthetic management (induction area or operating room).  
  
A creatinine level should be collected on all patients, even if they have no prior history of renal disease. A creatinine value is a high predictor of a patient's outcome and is used in the predicted risk models.  
  
*Data Source:* User *Format:* Real  
Low Value: 0.10      High Value: 30.00      UsualRangeLow: 0.10      UsualRangeHigh: 12.00

---

*Long Name:* Total Bilirubin *SeqNo:* 610  
*Short Name:* **TotBlrbn** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total Bilirubin closest to the date and time prior to surgery but prior to anesthetic management (induction area or operating room).  
  
*Data Source:* User *Format:* Real  
Low Value: 0.10      High Value: 50.00      UsualRangeLow: 0.20      UsualRangeHigh: 1.30

---

*Long Name:* INR *SeqNo:* 615  
*Short Name:* **INR** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the International Normalized Ratio (INR) closest to the date and time prior to surgery but prior to anesthetic management (induction area or operating room).  
  
*Data Source:* User *Format:* Real  
Low Value: 0.50      High Value: 30.00      UsualRangeLow: 0.90      UsualRangeHigh: 1.30

---

---

*Long Name:* HIT Antibodies *SeqNo:* 620  
*Short Name:* **HITAnti** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether Heparin Induced Thrombocytopenia (HIT) is confirmed by antibody testing.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Yes	Positive antibody testing
2	No	Negative antibody testing
3	Not Applicable	Antibody testing not performed

---

*Long Name:* MELD Score *SeqNo:* 625  
*Short Name:* **MELDScr** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* MELD score value calculated by software to indicate severity of liver disease.  
*Data Source:* Calculated *Format:* Real  
Low Value: 0.00      High Value: 150.00

---

*Long Name:* Five Meter Walk Test Done *SeqNo:* 645  
*Short Name:* **FiveMWalkTest** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the five meter walk test was done.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Yes	
2	No	
3	Non-ambulatory patient	Physically or medically unable to perform the test.

---

---

*Long Name:* Five Meter Walk Time 1 *SeqNo:* 650  
*Short Name:* **FiveMWalk1** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the time in seconds it takes the patient to walk 5 meters for the first of three tests.  
*Data Source:* User *Format:* Real  
 Low Value: 1.00 High Value: 100.00 UsualRangeLow: 2.00 UsualRangeHigh: 20.00  
 ParentShortName: FiveMWalkTest  
 ParentLongName: Five Meter Walk Test Done  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Five Meter Walk Time 2 *SeqNo:* 655  
*Short Name:* **FiveMWalk2** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the time in seconds it takes the patient to walk 5 meters for the second of three tests.  
*Data Source:* User *Format:* Real  
 Low Value: 1.00 High Value: 100.00 UsualRangeLow: 2.00 UsualRangeHigh: 20.00  
 ParentShortName: FiveMWalkTest  
 ParentLongName: Five Meter Walk Test Done  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Five Meter Walk Time 3 *SeqNo:* 660  
*Short Name:* **FiveMWalk3** *Core:* Yes  
*Section Name:* Risk Factors *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the time in seconds it takes the patient to walk 5 meters for the third of three tests.  
*Data Source:* User *Format:* Real  
 Low Value: 1.00 High Value: 100.00 UsualRangeLow: 2.00 UsualRangeHigh: 20.00  
 ParentShortName: FiveMWalkTest  
 ParentLongName: Five Meter Walk Test Done  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* RF - Six Minute Walk Test Done *SeqNo:* 661  
*Short Name:* **SixMWalkDone** *Core:* No  
*Section Name:* Risk Factors *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a six-minute walk test was done.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

1 Yes  
2 No

*Long Name:* RF - Six Minute Walk Test Distance *SeqNo:* 662  
*Short Name:* **SixMWalkDist** *Core:* No  
*Section Name:* Risk Factors *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the distance in feet the patient walked during the six-minute walk test.  
*Data Source:* User *Format:* Integer

Low Value: 1 High Value: 3000

ParentShortName: SixMWalkDone

ParentLongName: RF - Six Minute Walk Test Done

ParentHarvestCodes: 1

ParentValues: = "Yes"

*Long Name:* Prev Cardiac Interventions *SeqNo:* 665  
*Short Name:* **PrCVInt** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has undergone any previous cardiovascular intervention, either surgical or non-surgical, which may include those done during the current admission.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

1 Yes  
2 No  
3 Unknown

---

*Long Name:* Prev CAB *SeqNo:* 670  
*Short Name:* **PrCAB** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a previous Coronary Bypass Graft prior to the current admission.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrCVInt

ParentLongName: Prev Cardiac Interventions

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prev Valve *SeqNo:* 675  
*Short Name:* **PrValve** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a previous surgical replacement and/or surgical repair of a cardiac valve. This may also include percutaneous or transcatheter valve procedures.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrCVInt

ParentLongName: Prev Cardiac Interventions

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prev Valve Procedure 1 *SeqNo:* 695  
*Short Name:* **PrValveProc1** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the first previous valve procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrValve

ParentLongName: Prev Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Aortic valve balloon  
valvotomy/valvuloplasty
- 3 Aortic valve repair, surgical
- 4 Aortic valve replacement,  
surgical
- 5 Aortic valve replacement,  
transcatheter
- 6 Mitral valve balloon  
valvotomy/valvuloplasty
- 7 Mitral valve commissurotomy,  
surgical
- 8 Mitral valve repair,  
percutaneous
- 9 Mitral valve repair, surgical
- 10 Mitral valve replacement,  
surgical
- 11 Mitral valve replacement,  
transcatheter
- 12 Tricuspid valve balloon  
valvotomy/valvuloplasty
- 13 Tricuspid valve repair,  
percutaneous
- 14 Tricuspid valve repair, surgical
- 15 Tricuspid valve replacement,  
surgical
- 16 Tricuspid valve replacement,  
transcatheter
- 17 Tricuspid valvectomy
- 18 Pulmonary valve balloon  
valvotomy/valvuloplasty
- 19 Pulmonary valve repair,  
surgical
- 20 Pulmonary valve replacement,

- 
- surgical
  - 21 Pulmonary valve replacement,  
transcatheter
  - 22 Pulmonary valvectomy
  - 23 Other valve procedure
- 

*Long Name:* Prev Valve Procedure 2 *SeqNo:* 700  
*Short Name:* **PrValveProc2** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the second previous valve procedure or select "No additional valve procedures"  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrValve

ParentLongName: Prev Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 No additional valve procedure(s)
- 2 Aortic valve balloon valvotomy/valvuloplasty
- 3 Aortic valve repair, surgical
- 4 Aortic valve replacement, surgical
- 5 Aortic valve replacement, transcatheter
- 6 Mitral valve balloon valvotomy/valvuloplasty
- 7 Mitral valve commissurotomy, surgical
- 8 Mitral valve repair, percutaneous
- 9 Mitral valve repair, surgical
- 10 Mitral valve replacement, surgical
- 11 Mitral valve replacement, transcatheter
- 12 Tricuspid valve balloon valvotomy/valvuloplasty
- 13 Tricuspid valve repair, percutaneous
- 14 Tricuspid valve repair, surgical
- 15 Tricuspid valve replacement, surgical

- 
- 16 Tricuspid valve replacement, transcatheter
  - 17 Tricuspid valvectomy
  - 18 Pulmonary valve balloon valvotomy/valvuloplasty
  - 19 Pulmonary valve repair, surgical
  - 20 Pulmonary valve replacement, surgical
  - 21 Pulmonary valve replacement, transcatheter
  - 22 Pulmonary valvectomy
  - 23 Other valve procedure
- 

*Long Name:* Prev Valve Procedure 3 *SeqNo:* 705  
*Short Name:* **PrValveProc3** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the third previous valve procedure or select "No additional valve procedures"  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrValveProc2

ParentLongName: Prev Valve Procedure 2

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional valve procedure(s)" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional valve procedure(s)
- 2 Aortic valve balloon valvotomy/valvuloplasty
- 3 Aortic valve repair, surgical
- 4 Aortic valve replacement, surgical
- 5 Aortic valve replacement, transcatheter
- 6 Mitral valve balloon valvotomy/valvuloplasty
- 7 Mitral valve commissurotomy, surgical
- 8 Mitral valve repair, percutaneous
- 9 Mitral valve repair, surgical
- 10 Mitral valve replacement, surgical
- 11 Mitral valve replacement,



- transcatheter
- 12 Tricuspid valve balloon  
valvotomy/valvuloplasty
- 13 Tricuspid valve repair,  
percutaneous
- 14 Tricuspid valve repair, surgical
- 15 Tricuspid valve replacement,  
surgical
- 16 Tricuspid valve replacement,  
transcatheter
- 17 Tricuspid valvectomy
- 18 Pulmonary valve balloon  
valvotomy/valvuloplasty
- 19 Pulmonary valve repair,  
surgical
- 20 Pulmonary valve replacement,  
surgical
- 21 Pulmonary valve replacement,  
transcatheter
- 22 Pulmonary valvectomy
- 23 Other valve procedure

---

*Long Name:* Prev Valve Procedure 4 *SeqNo:* 710  
*Short Name:* **PrValveProc4** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the fourth previous valve procedure or select "No additional valve procedures"  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrValveProc3

ParentLongName: Prev Valve Procedure 3

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional valve procedure(s)" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional valve  
procedure(s)
- 2 Aortic valve balloon  
valvotomy/valvuloplasty
- 3 Aortic valve repair, surgical
- 4 Aortic valve replacement,  
surgical
- 5 Aortic valve replacement,  
transcatheter
- 6 Mitral valve balloon  
valvotomy/valvuloplasty

- 7 Mitral valve commissurotomy, surgical
- 8 Mitral valve repair, percutaneous
- 9 Mitral valve repair, surgical
- 10 Mitral valve replacement, surgical
- 11 Mitral valve replacement, transcatheter
- 12 Tricuspid valve balloon valvotomy/valvuloplasty
- 13 Tricuspid valve repair, percutaneous
- 14 Tricuspid valve repair, surgical
- 15 Tricuspid valve replacement, surgical
- 16 Tricuspid valve replacement, transcatheter
- 17 Tricuspid valvectomy
- 18 Pulmonary valve balloon valvotomy/valvuloplasty
- 19 Pulmonary valve repair, surgical
- 20 Pulmonary valve replacement, surgical
- 21 Pulmonary valve replacement, transcatheter
- 22 Pulmonary valvectomy
- 23 Other valve procedure

*Long Name:* Prev Valve Procedure 5 *SeqNo:* 715  
*Short Name:* **PrValveProc5** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the fifth previous valve procedure or select "No additional valve procedures"

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

ParentShortName: PrValveProc4

ParentLongName: Prev Valve Procedure 4

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional valve procedure(s)" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional valve procedure(s)
- 2 Aortic valve balloon

- 
- valvotomy/valvuloplasty
  - 3 Aortic valve repair, surgical
  - 4 Aortic valve replacement, surgical
  - 5 Aortic valve replacement, transcatheter
  - 6 Mitral valve balloon valvotomy/valvuloplasty
  - 7 Mitral valve commissurotomy, surgical
  - 8 Mitral valve repair, percutaneous
  - 9 Mitral valve repair, surgical
  - 10 Mitral valve replacement, surgical
  - 11 Mitral valve replacement, transcatheter
  - 12 Tricuspid valve balloon valvotomy/valvuloplasty
  - 13 Tricuspid valve repair, percutaneous
  - 14 Tricuspid valve repair, surgical
  - 15 Tricuspid valve replacement, surgical
  - 16 Tricuspid valve replacement, transcatheter
  - 17 Tricuspid valvectomy
  - 18 Pulmonary valve balloon valvotomy/valvuloplasty
  - 19 Pulmonary valve repair, surgical
  - 20 Pulmonary valve replacement, surgical
  - 21 Pulmonary valve replacement, transcatheter
  - 22 Pulmonary valvectomy
  - 23 Other valve procedure
-

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*Long Name:* Previous PCI *SeqNo:* 775  
*Short Name:* **POCPCI** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether a previous Percutaneous Coronary Intervention (PCI) was performed any time prior to this surgical procedure.  
 Percutaneous coronary intervention (PCI) is the placement of an angioplasty guide wire, balloon, or other device (e.g. stent, atherectomy, brachytherapy, or thrombectomy catheter) into a native coronary artery or coronary artery bypass graft for the purpose of mechanical coronary revascularization.

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

ParentShortName: PrCVInt

ParentLongName: Prev Cardiac Interventions

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Previous PCI-Within This Episode of Care *SeqNo:* 780  
*Short Name:* **POCPCIWhen** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the previous Percutaneous Cardiac Intervention (PCI) was performed within this episode of care. Episode of care is defined as continuous inpatient hospitalization which includes transfer from one acute care hospital to another.

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

ParentShortName: POCPCI

ParentLongName: Previous PCI

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes, at this facility

2 Yes, at some other acute care facility

3 No

*Long Name:* Previous PCI-Indication For Surgery *SeqNo:* 785  
*Short Name:* **POCPCIIndSurg** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Select the indication for surgery following the Percutaneous Cardiac Intervention (PCI).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POCPCIWhen

ParentLongName: Previous PCI-Within This Episode of Care

ParentHarvestCodes: 1|2

ParentValues: = "Yes, at this facility" or "Yes, at some other acute care facility"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	PCI Complication	Complication during PCI necessitating surgical intervention such as dissection or acute occlusion
5	PCI Failure with Clinical Deterioration	PCI failed to yield expected and/or desired results, patient condition deteriorated.
4	PCI for STEMI, Multivessel disease	STEMI with primary PCI (of culprit lesion) and multivessel disease requiring CABG.
2	PCI Failure without Clinical Deterioration	PCI failed to yield expected and/or desired results, patient condition did not deteriorate.
3	PCI/Surgery Staged Procedure (not STEMI)	PCI and surgical procedures performed in a staged fashion in a patient not experiencing STEMI
9	Other	Other indication for surgery not described above

*Long Name:* Previous PCI-Stent *SeqNo:* 790  
*Short Name:* **POCPCISt** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether an intracoronary stent was used during any of the previous Percutaneous Cardiac Interventions (PCI).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POCPCI

ParentLongName: Previous PCI

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

<i>Long Name:</i>	Previous PCI-Stent Type	<i>SeqNo:</i>	795
<i>Short Name:</i>	<b>POCPCIS<sup>t</sup>Ty</b>	<i>Core:</i>	No
<i>Section Name:</i>	Previous Cardiac Interventions	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate type of intracoronary stent placed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	POCPCIS <sup>t</sup>		
<i>ParentLongName:</i>	Previous PCI-Stent		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Bare metal	
	2	Drug-eluting	
	4	Bioresorbable	
	5	Multiple types	
	3	Unknown	

<i>Long Name:</i>	Previous PCI-Interval	<i>SeqNo:</i>	800
<i>Short Name:</i>	<b>POCPCI<sup>in</sup></b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Previous Cardiac Interventions	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the interval of time between the most recent PCI and the current surgical procedure		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	POCPCI		
<i>ParentLongName:</i>	Previous PCI		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	<= 6 Hours	
	2	> 6 Hours	

*Long Name:* Previous Other Cardiac *SeqNo:* 805  
*Short Name:* **POC** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the patient had any other previous cardiac intervention.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrCVInt

ParentLongName: Prev Cardiac Interventions

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Previous Other Cardiac Intervention 1 *SeqNo:* 810  
*Short Name:* **POCInt1** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the first other cardiac intervention that was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POC

ParentLongName: Previous Other Cardiac

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Ablation, catheter, atrial arrhythmia
- 3 Ablation, catheter, other or unknown
- 4 Ablation, catheter, ventricular arrhythmia
- 5 Ablation, surgical, atrial arrhythmia
- 6 Ablation, surgical, other or unknown
- 7 Aneurysmectomy, LV
- 8 Aortic procedure, arch
- 9 Aortic procedure, ascending
- 10 Aortic procedure, descending

- 
- 11 Aortic procedure, root
  - 12 Aortic procedure,  
thoracoabdominal
  - 13 Aortic Procedure, TEVAR
  - 14 Aortic root procedure, valve  
sparing
  - 15 Atrial appendage obliteration,  
left, surgical
  - 16 Atrial appendage obliteration,  
left, transcatheter
  - 19 Cardiac Tumor
  - 20 Cardioversion(s)
  - 21 Closure device, atrial septal  
defect
  - 22 Closure device, ventricular  
septal defect
  - 23 Congenital cardiac repair,  
surgical
  - 37 ECMO
  - 24 Implantable Cardioverter  
Defibrillator (ICD) with or  
without pacer
  - 39 Myectomy (not congenital)
  - 25 Permanent Pacemaker
  - 38 Pericardial window /  
Pericardiocentesis
  - 26 Pericardiectomy
  - 27 Pulmonary  
Thromboemblectomy
  - 28 Total Artificial Heart (TAH)
  - 29 Transmyocardial Laser  
Revascularization (TMR)
  - 30 Transplant heart & lung
  - 31 Transplant, heart
  - 32 Transplant, lung(s)
  - 33 Ventricular Assist Device  
(VAD), BiVAD
  - 34 Ventricular Assist Device  
(VAD), left
  - 35 Ventricular Assist Device  
(VAD), right
  - 36 Other Cardiac Intervention  
(not listed)
-



*Long Name:* Previous Other Cardiac Intervention 2 *SeqNo:* 815  
*Short Name:* **POCInt2** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the second other cardiac intervention that was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POC

ParentLongName: Previous Other Cardiac

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 No additional interventions
- 2 Ablation, catheter, atrial arrhythmia
- 3 Ablation, catheter, other or unknown
- 4 Ablation, catheter, ventricular arrhythmia
- 5 Ablation, surgical, atrial arrhythmia
- 6 Ablation, surgical, other or unknown
- 7 Aneurysmectomy, LV
- 8 Aortic procedure, arch
- 9 Aortic procedure, ascending
- 10 Aortic procedure, descending
- 11 Aortic procedure, root
- 12 Aortic procedure, thoracoabdominal
- 13 Aortic Procedure, TEVAR
- 14 Aortic root procedure, valve sparing
- 15 Atrial appendage obliteration, left, surgical
- 16 Atrial appendage obliteration, left, transcatheter
- 19 Cardiac Tumor
- 20 Cardioversion(s)
- 21 Closure device, atrial septal defect
- 22 Closure device, ventricular septal defect
- 23 Congenital cardiac repair, surgical

- 37 ECMO
- 24 Implantable Cardioverter  
Defibrillator (ICD) with or  
without pacemaker
- 39 Myectomy (not congenital)
- 25 Permanent Pacemaker
- 38 Pericardial window /  
Pericardiocentesis
- 26 Pericardiectomy
- 27 Pulmonary  
Thromboembolectomy
- 28 Total Artificial Heart (TAH)
- 29 Transmyocardial Laser  
Revascularization (TMR)
- 30 Transplant heart & lung
- 31 Transplant, heart
- 32 Transplant, lung(s)
- 33 Ventricular Assist Device  
(VAD), BiVAD
- 34 Ventricular Assist Device  
(VAD), left
- 35 Ventricular Assist Device  
(VAD), right
- 36 Other Cardiac Intervention  
(not listed)

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<i>Long Name:</i>	Previous Other Cardiac Intervention 3	<i>SeqNo:</i>	820
<i>Short Name:</i>	<b>POCInt3</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Previous Cardiac Interventions	<i>Harvest:</i>	Yes

*DBTableName* Adultdata2

*Definition:* Indicate the third other cardiac intervention that was performed.

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

ParentShortName: POCInt2

ParentLongName: Previous Other Cardiac Intervention 2

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional interventions" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional interventions
- 2 Ablation, catheter, atrial  
arrhythmia
- 3 Ablation, catheter, other or  
unknown
- 4 Ablation, catheter, ventricular  
arrhythmia

- 
- 5 Ablation, surgical, atrial arrhythmia
  - 6 Ablation, surgical, other or unknown
  - 7 Aneurysmectomy, LV
  - 8 Aortic procedure, arch
  - 9 Aortic procedure, ascending
  - 10 Aortic procedure, descending
  - 11 Aortic procedure, root
  - 12 Aortic procedure, thoracoabdominal
  - 13 Aortic Procedure, TEVAR
  - 14 Aortic root procedure, valve sparing
  - 15 Atrial appendage obliteration, left, surgical
  - 16 Atrial appendage obliteration, left, transcatheter
  - 19 Cardiac Tumor
  - 20 Cardioversion(s)
  - 21 Closure device, atrial septal defect
  - 22 Closure device, ventricular septal defect
  - 23 Congenital cardiac repair, surgical
  - 37 ECMO
  - 24 Implantable Cardioverter Defibrillator (ICD) with or without pacer
  - 39 Myectomy (not congenital)
  - 25 Permanent Pacemaker
  - 38 Pericardial window / Pericardiocentesis
  - 26 Pericardiectomy
  - 27 Pulmonary Thromboembolectomy
  - 28 Total Artificial Heart (TAH)
  - 29 Transmyocardial Laser Revascularization (TMR)
  - 30 Transplant heart & lung
  - 31 Transplant, heart
  - 32 Transplant, lung(s)
  - 33 Ventricular Assist Device (VAD), BiVAD
  - 34 Ventricular Assist Device (VAD), left
  - 35 Ventricular Assist Device

(VAD), right  
36 Other Cardiac Intervention  
(not listed)

*Long Name:* Previous Other Cardiac Intervention 4 *SeqNo:* 825  
*Short Name:* **POCInt4** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the fourth other cardiac intervention that was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POCInt3

ParentLongName: Previous Other Cardiac Intervention 3

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional interventions" And Is Not Missing

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	No additional interventions	
2	Ablation, catheter, atrial arrhythmia	
3	Ablation, catheter, other or unknown	
4	Ablation, catheter, ventricular arrhythmia	
5	Ablation, surgical, atrial arrhythmia	
6	Ablation, surgical, other or unknown	
7	Aneurysmectomy, LV	
8	Aortic procedure, arch	
9	Aortic procedure, ascending	
10	Aortic procedure, descending	
11	Aortic procedure, root	
12	Aortic procedure, thoracoabdominal	
13	Aortic Procedure, TEVAR	
14	Aortic root procedure, valve sparing	
15	Atrial appendage obliteration, left, surgical	
16	Atrial appendage obliteration, left, transcatheter	
19	Cardiac Tumor	
20	Cardioversion(s)	
21	Closure device, atrial septal defect	

- 
- 22 Closure device, ventricular septal defect
  - 23 Congenital cardiac repair, surgical
  - 37 ECMO
  - 24 Implantable Cardioverter Defibrillator (ICD) with or without pacer
  - 39 Myectomy (not congenital)
  - 25 Permanent Pacemaker
  - 38 Pericardial window / Pericardiocentesis
  - 26 Pericardiectomy
  - 27 Pulmonary Thromboembolectomy
  - 28 Total Artificial Heart (TAH)
  - 29 Transmyocardial Laser Revascularization (TMR)
  - 30 Transplant heart & lung
  - 31 Transplant, heart
  - 32 Transplant, lung(s)
  - 33 Ventricular Assist Device (VAD), BiVAD
  - 34 Ventricular Assist Device (VAD), left
  - 35 Ventricular Assist Device (VAD), right
  - 36 Other Cardiac Intervention (not listed)
- 

*Long Name:* Previous Other Cardiac Intervention 5 *SeqNo:* 830

*Short Name:* **POCInt5** *Core:* Yes

*Section Name:* Previous Cardiac Interventions *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate the fifth other cardiac intervention that was performed.

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

ParentShortName: POCInt4

ParentLongName: Previous Other Cardiac Intervention 4

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional interventions" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional interventions
- 2 Ablation, catheter, atrial arrhythmia

- 3 Ablation, catheter, other or unknown
- 4 Ablation, catheter, ventricular arrhythmia
- 5 Ablation, surgical, atrial arrhythmia
- 6 Ablation, surgical, other or unknown
- 7 Aneurysmectomy, LV
- 8 Aortic procedure, arch
- 9 Aortic procedure, ascending
- 10 Aortic procedure, descending
- 11 Aortic procedure, root
- 12 Aortic procedure, thoracoabdominal
- 13 Aortic Procedure, TEVAR
- 14 Aortic root procedure, valve sparing
- 15 Atrial appendage obliteration, left, surgical
- 16 Atrial appendage obliteration, left, transcatheter
- 19 Cardiac Tumor
- 20 Cardioversion(s)
- 21 Closure device, atrial septal defect
- 22 Closure device, ventricular septal defect
- 23 Congenital cardiac repair, surgical
- 37 ECMO
- 24 Implantable Cardioverter Defibrillator (ICD) with or without pacer
- 39 Myectomy (not congenital)
- 25 Permanent Pacemaker
- 38 Pericardial window / Pericardiocentesis
- 26 Pericardiectomy
- 27 Pulmonary Thromboemblectomy
- 28 Total Artificial Heart (TAH)
- 29 Transmyocardial Laser Revascularization (TMR)
- 30 Transplant heart & lung
- 31 Transplant, heart
- 32 Transplant, lung(s)
- 33 Ventricular Assist Device

- 
- (VAD), BiVAD
  - 34 Ventricular Assist Device  
(VAD), left
  - 35 Ventricular Assist Device  
(VAD), right
  - 36 Other Cardiac Intervention  
(not listed)
- 

*Long Name:* Previous Other Cardiac Intervention 6 *SeqNo:* 835

*Short Name:* **POCInt6** *Core:* Yes

*Section Name:* Previous Cardiac Interventions *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate the sixth other cardiac intervention that was performed.

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

ParentShortName: POCInt5

ParentLongName: Previous Other Cardiac Intervention 5

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional interventions" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional interventions
- 2 Ablation, catheter, atrial  
arrhythmia
- 3 Ablation, catheter, other or  
unknown
- 4 Ablation, catheter, ventricular  
arrhythmia
- 5 Ablation, surgical, atrial  
arrhythmia
- 6 Ablation, surgical, other or  
unknown
- 7 Aneurysmectomy, LV
- 8 Aortic procedure, arch
- 9 Aortic procedure, ascending
- 10 Aortic procedure, descending
- 11 Aortic procedure, root
- 12 Aortic procedure,  
thoracoabdominal
- 13 Aortic Procedure, TEVAR
- 14 Aortic root procedure, valve  
sparing
- 15 Atrial appendage obliteration,  
left, surgical
- 16 Atrial appendage obliteration,  
left, transcatheter

- 
- 19 Cardiac Tumor
  - 20 Cardioversion(s)
  - 21 Closure device, atrial septal defect
  - 22 Closure device, ventricular septal defect
  - 23 Congenital cardiac repair, surgical
  - 37 ECMO
  - 24 Implantable Cardioverter Defibrillator (ICD) with or without pacer
  - 39 Myectomy (not congenital)
  - 25 Permanent Pacemaker
  - 38 Pericardial window / Pericardiocentesis
  - 26 Pericardiectomy
  - 27 Pulmonary Thromboembolectomy
  - 28 Total Artificial Heart (TAH)
  - 29 Transmyocardial Laser Revascularization (TMR)
  - 30 Transplant heart & lung
  - 31 Transplant, heart
  - 32 Transplant, lung(s)
  - 33 Ventricular Assist Device (VAD), BiVAD
  - 34 Ventricular Assist Device (VAD), left
  - 35 Ventricular Assist Device (VAD), right
  - 36 Other Cardiac Intervention (not listed)
-



*Long Name:* Previous Other Cardiac Intervention 7 *SeqNo:* 840  
*Short Name:* **POCInt7** *Core:* Yes  
*Section Name:* Previous Cardiac Interventions *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the seventh other cardiac intervention that was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POCInt6

ParentLongName: Previous Other Cardiac Intervention 6

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional interventions" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional interventions
- 2 Ablation, catheter, atrial arrhythmia
- 3 Ablation, catheter, other or unknown
- 4 Ablation, catheter, ventricular arrhythmia
- 5 Ablation, surgical, atrial arrhythmia
- 6 Ablation, surgical, other or unknown
- 7 Aneurysmectomy, LV
- 8 Aortic procedure, arch
- 9 Aortic procedure, ascending
- 10 Aortic procedure, descending
- 11 Aortic procedure, root
- 12 Aortic procedure, thoracoabdominal
- 13 Aortic Procedure, TEVAR
- 14 Aortic root procedure, valve sparing
- 15 Atrial appendage obliteration, Left, surgical
- 16 Atrial appendage obliteration, Left, transcatheter
- 19 Cardiac Tumor
- 20 Cardioversion(s)
- 21 Closure device, atrial septal defect
- 22 Closure device, ventricular septal defect
- 23 Congenital cardiac repair, surgical

- 
- 37 ECMO
  - 24 Implantable Cardioverter  
Defibrillator (ICD) with or  
without pacemaker
  - 39 Myectomy (not congenital)
  - 25 Permanent Pacemaker
  - 38 Pericardial window /  
Pericardiocentesis
  - 26 Pericardiectomy
  - 27 Pulmonary  
Thromboembolectomy
  - 28 Total Artificial Heart (TAH)
  - 29 Transmyocardial Laser  
Revascularization (TMR)
  - 30 Transplant heart & lung
  - 31 Transplant, heart
  - 32 Transplant, lung(s)
  - 33 Ventricular Assist Device  
(VAD), BiVAD
  - 34 Ventricular Assist Device  
(VAD), left
  - 35 Ventricular Assist Device  
(VAD), right
  - 36 Other Cardiac Intervention  
(not listed)
- 

<i>Long Name:</i>	Prior MI	<i>SeqNo:</i>	885
<i>Short Name:</i>	<b>PrevMI</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Preoperative Cardiac Status	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate if the patient has had at least one documented previous myocardial infarction at any time prior to this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

---

*Long Name:* MI-When *SeqNo:* 890  
*Short Name:* **MIWhen** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the time period between the last documented myocardial infarction and surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrevMI

ParentLongName: Prior MI

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- |   |                    |
|---|--------------------|
| 1 | <=6 Hrs            |
| 2 | >6 Hrs but <24 Hrs |
| 3 | 1 to 7 Days        |
| 4 | 8 to 21 Days       |
| 5 | >21 Days           |

---

*Long Name:* Primary Coronary Symptom for Surgery *SeqNo:* 895  
*Short Name:* **CardSympTimeOfAdm** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the patient's worse symptom prior to surgery from Admission to OR Entry  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes and Value Definitions:

Code: Value:

- |   |                         |
|---|-------------------------|
| 1 | No Coronary Symptoms    |
| 2 | Stable Angina           |
| 5 | ST Elevation MI (STEMI) |

Definition:

No Coronary Symptoms, no angina.

Angina without a change in frequency or pattern for the prior 6 weeks. Angina is controlled by rest and/or oral or transcutaneous medications.

The patient presented with a ST elevation myocardial infarction (STEMI) or its equivalent as documented in the medical record. STEMI's are characterized by the presence of both criteria:

- a. ECG evidence of STEMI: New or presumed new ST-segment elevation or new left bundle branch block not documented to be resolved within 20 minutes. ST-segment elevation is defined by new or presumed new sustained ST-segment elevation at the J-point in two contiguous electrocardiogram (ECG) leads with the cut-off points:  $\geq 0.2$  mV in men or  $\geq 0.15$  mV in women in leads V2-V3 and/or  $\geq 0.1$  mV in other leads and lasting greater than or equal to 20 minutes. If no exact ST-elevation

measurement is recorded in the medical chart, physician's written documentation of ST-elevation or Q waves is acceptable. If only one ECG is performed, then the assumption that the ST elevation persisted at least the required 20 minutes is acceptable. Left bundle branch block (LBBB) refers to new or presumed new LBBB on the initial ECG.  
 b. Cardiac biomarkers (creatinine kinase-myocardial band, Troponin T or I) exceed the upper limit of normal according to the individual hospital's laboratory parameters a clinical presentation which is consistent or suggestive of ischemia.

Note: For purposes of the Registry, ST elevation in the posterior chest leads (V7 through V9), or ST depression that is maximal in V1-3, without ST-segment elevation in other leads, demonstrating posterobasal myocardial infarction, is considered a STEMI equivalent and qualifies the patient for reperfusion therapy.

6 Angina equivalent

3 Unstable Angina

There are three principal presentations of unstable angina: 1. Rest angina (occurring at rest and prolonged, usually >20 minutes); 2. New-onset angina (within the past 2 months, of at least Canadian Cardiovascular Society Class III severity); or 3. Increasing angina (previously diagnosed angina that has become distinctly more frequent, longer in duration, or increased by 1 or more Canadian Cardiovascular Society class to at least CCS III severity).

4 Non-ST Elevation MI (Non-STEMI)

The patient was hospitalized for a non-ST elevation myocardial infarction (STEMI) as documented in the medical record. Non-STEMIs are characterized by the presence of both criteria:

- a. Cardiac biomarkers (creatinine kinase-myocardial band, Troponin T or I) exceed the upper limit of normal according to the individual hospital's laboratory parameters with a clinical presentation which is consistent or suggestive of ischemia. ECG changes and/or ischemic symptoms may or may not be present.
- b. Absence of ECG changes diagnostic of a STEMI (see STEMI).

7 Other

Presentation/symptom not listed above.

<i>Long Name:</i>	Cardiac Symptoms - At Time Of Surgery	<i>SeqNo:</i>	900
<i>Short Name:</i>	<b>CardSympTimeOfSurg</b>	<i>Core:</i>	No
<i>Section Name:</i>	Preoperative Cardiac Status	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the patient's cardiac symptoms at the time of this procedure.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	No Symptoms	No Symptoms, no angina.

2	Stable Angina	Angina without a change in frequency or pattern for the prior 6 weeks. Angina is controlled by rest and/or oral or transcutaneous medications.
3	Unstable Angina	There are three principal presentations of unstable angina: 1. Rest angina (occurring at rest and prolonged, usually >20 minutes); 2. New-onset angina (within the past 2 months, of at least Canadian Cardiovascular Society Class III severity); or 3. Increasing angina (previously diagnosed angina that has become distinctly more frequent, longer in duration, or increased by 1 or more Canadian Cardiovascular Society class to at least CCS III severity).
4	Non-ST Elevation MI (Non-STEMI)	The patient was hospitalized for a non-ST elevation myocardial infarction (STEMI) as documented in the medical record. Non-STEMIs are characterized by the presence of both criteria:  a. Cardiac biomarkers (creatinine kinase-myocardial band, Troponin T or I) exceed the upper limit of normal according to the individual hospital's laboratory parameters with a clinical presentation which is consistent or suggestive of ischemia. ECG changes and/or ischemic symptoms may or may not be present. b. Absence of ECG changes diagnostic of a STEMI (see STEMI).
5	ST Elevation MI (STEMI)	The patient presented with a ST elevation myocardial infarction (STEMI) or its equivalent as documented in the medical record. STEMI's are characterized by the presence of both criteria:  a. ECG evidence of STEMI: New or presumed new ST-segment elevation or new left bundle branch block not documented to be resolved within 20 minutes. ST-segment elevation is defined by new or presumed new sustained ST-segment elevation at the J-point in two contiguous electrocardiogram (ECG) leads with the cut-off points: $\geq 0.2$ mV in men or $\geq 0.15$ mV in women in leads V2-V3 and/or $\geq 0.1$ mV in other leads and lasting greater than or equal to 20 minutes. If no exact ST-elevation measurement is recorded in the medical chart, physician's written documentation of ST-elevation or Q waves is acceptable. If only one ECG is performed, then the assumption that the ST elevation persisted at least the required 20 minutes is acceptable. Left bundle branch block (LBBB) refers to new or presumed new LBBB on the initial ECG. b. Cardiac biomarkers (creatinine kinase-myocardial band, Troponin T or I) exceed the upper limit of normal according to the individual hospital's laboratory parameters a clinical presentation which is consistent or suggestive of ischemia.
	6 Angina equivalent	Note: For purposes of the Registry, ST elevation in the posterior chest leads (V7 through V9), or ST depression that is maximal in V1-3, without ST-segment elevation in other leads, demonstrating posterobasal myocardial infarction, is considered a STEMI equivalent and qualifies the patient for reperfusion therapy.
7	Other	Presentation/symptom not listed above.

---

*Long Name:* Heart Failure *SeqNo:* 911  
*Short Name:* **HeartFail** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there is physician documentation that the patient has a history of heart failure.  
 Capture either right or left heart failure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

---

*Long Name:* Heart Failure Timing *SeqNo:* 912  
*Short Name:* **HeartFailTmg** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether heart failure is acute, chronic or both (acute on chronic)  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: HeartFail

ParentLongName: Heart Failure

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes and Value Definitions:

Code: Value:

- 1 Acute
- 2 Chronic
- 3 Both

Definition:

New onset or worsening heart failure within 2 weeks prior to this procedure

More than 2 weeks prior to this procedure

Worsening heart failure within 2 weeks in a patient with a known history of heart failure

*Long Name:* Heart Failure Type *SeqNo:* 913  
*Short Name:* **HeartFailType** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the type of heart failure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: HeartFail

ParentLongName: Heart Failure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Systolic
- 2 Diastolic
- 3 Both
- 4 Unavailable

*Long Name:* Classification-NYHA *SeqNo:* 915  
*Short Name:* **ClassNYH** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the patient's worst dyspnea or functional class, coded as the New York Heart Association (NYHA) classification documented by a MD/Provider within the past 2 weeks.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes and Value Definitions:

Code: Value:

1 Class I

Definition:

Patient has cardiac disease but without resulting limitations of ordinary physical activity. Ordinary physical activity (e.g., walking several blocks or climbing stairs) does not cause undue fatigue, palpitation, or dyspnea.

2 Class II

Patient has cardiac disease resulting in slight limitation of ordinary physical activity. Patient is comfortable at rest. Ordinary physical activity such as walking more than two blocks or climbing more than one flight of stairs results in limiting symptoms (e.g., fatigue, palpitation, or dyspnea).

3 Class III

Patient has cardiac disease resulting in marked limitation of physical activity. Patient is comfortable at rest. Less than ordinary physical activity (e.g., walking one to two level blocks or climbing one flight of stairs) causes fatigue, palpitation, or dyspnea.

4 Class IV

Patient has cardiac disease resulting in inability to perform any physical activity without discomfort. Symptoms may be present

even at rest or minimal exertion. If any physical activity is undertaken, discomfort is increased.

5 Not documented

---

*Long Name:* Cardiogenic Shock *SeqNo:* 930  
*Short Name:* **CarShock** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate if the patient developed cardiogenic shock prior to induction.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 3 Yes - At the time of the procedure
- 4 Yes, not at the time of the procedure but within prior 24 hours
- 2 No

---

*Long Name:* Resuscitation *SeqNo:* 935  
*Short Name:* **Resusc** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the patient required cardiopulmonary resuscitation before induction of anesthesia. Capture resuscitation timeframe: within 1 hour or 1-24 hours pre-op.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 3 Yes - Within 1 hour of the start of the procedure
- 4 Yes - More than 1 hour but less than 24 hours of the start of the procedure
- 2 No



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*Long Name:* Cardiac Arrhythmia *SeqNo:* 945  
*Short Name:* **Arrhythmia** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a history of a cardiac rhythm disturbance prior to the induction of anesthesia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Cardiac Arrhythmia - Permanently Paced Rhythm *SeqNo:* 947  
*Short Name:* **ArrhythPPaced** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a permanently paced rhythm, evidenced by pacemaker activity during heart rhythm evaluation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Cardiac Arrhythmia - VTach / VFib *SeqNo:* 950  
*Short Name:* **ArrhythVV** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was VTach or VFib.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	
2	Remote (> 30 days preop)	More than 30 days prior to procedure.
3	Recent (<= 30 days preop)	Within 30 days of this procedure.

*Long Name:* Cardiac Arrhythmia - Sick Sinus Syndrome *SeqNo:* 955  
*Short Name:* **ArrhythSSS** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was sick sinus syndrome.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	
2	Remote (> 30 days preop)	More than 30 days prior to procedure.
3	Recent (<= 30 days preop)	Within 30 days of this procedure.

*Long Name:* Cardiac Arrhythmia - AFlutter *SeqNo:* 960  
*Short Name:* **ArrhythAFlutter** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was atrial flutter.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	
2	Remote (> 30 days preop)	More than 30 days prior to procedure.
3	Recent (<= 30 days preop)	Within 30 days of this procedure.

*Long Name:* Cardiac Arrhythmia - Atrial Fibrillation *SeqNo:* 961  
*Short Name:* **ArrhythAtrFib** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was atrial fibrillation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	
2	Remote (> 30 days preop)	More than 30 days prior to procedure.
3	Recent (<= 30 days preop)	Within 30 days of this procedure.

*Long Name:* Cardiac Arrhythmia - Second Degree Heart Block *SeqNo:* 965  
*Short Name:* **ArrhythSecond** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was second degree heart block.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	
2	Remote (> 30 days preop)	More than 30 days prior to procedure.
3	Recent (<= 30 days preop)	Within 30 days of this procedure.

*Long Name:* Cardiac Arrhythmia - Third Degree Heart Block *SeqNo:* 970  
*Short Name:* **ArrhythThird** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was third degree heart block.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Arrhythmia

ParentLongName: Cardiac Arrhythmia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	
2	Remote (> 30 days preop)	More than 30 days prior to procedure.
3	Recent (<= 30 days preop)	Within 30 days of this procedure.

---

*Long Name:* Atrial Fibrillation - Type *SeqNo:* 971  
*Short Name:* **ArrhythAFib** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether arrhythmia was atrial fibrillation and if so, which type.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArrhythAtrFib  
 ParentLongName: Cardiac Arrhythmia - Atrial Fibrillation  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Remote (> 30 days preop)" or "Recent (<= 30 days preop)"  
 Harvest Codes:  
     Code: Value:  
         2 Paroxysmal  
         4 Persistent

---

*Long Name:* Patient in A-fib at OR Entry *SeqNo:* 972  
*Short Name:* **AFibRecOREntry** *Core:* Yes  
*Section Name:* Preoperative Cardiac Status *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient was in A-fib at the time of OR entry.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArrhythAtrFib  
 ParentLongName: Cardiac Arrhythmia - Atrial Fibrillation  
 ParentHarvestCodes: 3  
 ParentValues: = "Recent (<= 30 days preop)"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

---

*Long Name:* Meds-ACE Inhibitors or ARB Within 48 Hours *SeqNo:* 1020  
*Short Name:* **MedACEI48** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the patient received ACE Inhibitors or ARB within 48 hours prior to OR Entry.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 4 Unknown
- 

*Long Name:* Meds- Amiodarone Prior To Surgery *SeqNo:* 1025  
*Short Name:* **MedAmiodarone** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether and when the patient received Amiodarone therapy prior to surgery. Dronedarone (Multaq) may be coded as Amiodarone  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes, on home therapy
  - 2 Yes, therapy started this admission
  - 3 No
  - 4 Unknown
- 

*Long Name:* Meds-Beta Blockers Within 24 Hours *SeqNo:* 1030  
*Short Name:* **MedBeta** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether or not the patient received beta blockers within 24 hours preceding incision time, or if beta blocker was contraindicated.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes

- 
- 2 No
  - 3 Contraindicated
- 

*Long Name:* Meds-Beta Blocker Therapy For More Than 2 Weeks Prior To Surgery *SeqNo:* 1035  
*Short Name:* **MedBetaTher** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received beta blocker therapy for at least 2 weeks prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 4 Unknown
- 

*Long Name:* Meds-Calcium Channel Blocker Therapy For More Than 2 Weeks Prior To Surgery *SeqNo:* 1040  
*Short Name:* **MedCCChanTher** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received calcium channel blocker therapy for at least 2 weeks prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 4 Unknown
-

---

*Long Name:* Meds-Long-Acting Nitrate Therapy For More Than 2 Weeks Prior To Surgery *SeqNo:* 1045  
*Short Name:* **MedLongActNit** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received long-acting nitrate therapy for at least 2 weeks prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 4 Unknown
- 

*Long Name:* Meds-Nitrates-I.V. Within 24 Hours *SeqNo:* 1050  
*Short Name:* **MedNitIV** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received IV Nitrates within 24 hours preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Meds-Other Antianginal Medication Therapy For More Than 2 Weeks Prior To Surgery *SeqNo:* 1055  
*Short Name:* **MedOthAntiang** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received any other antianginal medication therapy for at least 2 weeks prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No



- 
- 3 Contraindicated
  - 4 Unknown
- 

*Long Name:* Meds-ADP Inhibitors Within Five Days *SeqNo:* 1060  
*Short Name:* **MedADP5Days** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has received ADP Inhibitors within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 4 Unknown
- 

*Long Name:* Meds-ADP Inhibitors Discontinuation *SeqNo:* 1065  
*Short Name:* **MedADPIDis** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of days prior to surgery ADP Inhibitor use was discontinued. If less than 24 hours, enter "0".  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 5  
ParentShortName: MedADP5Days  
ParentLongName: Meds-ADP Inhibitors Within Five Days  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Meds-Aspirin Within Five Days *SeqNo:* 1070  
*Short Name:* **MedASA** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether or not the patient received Aspirin or Ecotrin within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Contraindicated
- 4 Unknown

*Long Name:* Meds-Aspirin Discontinuation *SeqNo:* 1071  
*Short Name:* **MedASADis** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of days prior to surgery Aspirin use was discontinued. If less than 24 hours, enter "0".  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5  
 ParentShortName: MedASA  
 ParentLongName: Meds-Aspirin Within Five Days  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Meds-Aspirin One-Time Dose *SeqNo:* 1072  
*Short Name:* **MedASAOnce** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received a one-time does of Aspirin and is not on daily aspirin.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: MedASA  
 ParentLongName: Meds-Aspirin Within Five Days  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Meds-Glycoprotein IIb/IIIa Inhibitor Within 24 Hours *SeqNo:* 1073  
*Short Name:* **MedGP** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received Glycoprotein IIb/IIIa inhibitors within 24 hours preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Meds-Anticoagulants Within 48 Hours *SeqNo:* 1075  
*Short Name:* **MedACoag** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received IV and/or subq anticoagulants within 48 hours preceding surgery.  
 Do NOT include Coumadin or one-time boluses of Heparin.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Meds-Anticoagulants-Medication Name *SeqNo:* 1080  
*Short Name:* **MedACMN** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the name of the anticoagulant the patient received within 48 hours preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: MedACoag

ParentLongName: Meds-Anticoagulants Within 48 Hours

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes and Value Definitions:

Code: Value:Definition:

- 1 Heparin (Unfractionated)

---

2	Heparin (Low Molecular)	
4	Both	Both unractionated and low molecular heparin.
9	Other	

---

*Long Name:* Meds-Warfarin (Coumadin) Within 5 Days *SeqNo:* 1091  
*Short Name:* **MedCoun5Days** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has received Warfarin (Coumadin) within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

1	Yes
2	No
3	Unknown

---

*Long Name:* Meds-Warfarin (Coumadin) Discontinuation *SeqNo:* 1092  
*Short Name:* **MedCoun5Dis** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of days prior to surgery Warfarin (Coumadin) use was discontinued. If less than 24 hours, enter "0".  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 5  
ParentShortName: MedCoun5Days  
ParentLongName: Meds-Warfarin (Coumadin) Within 5 Days  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Meds-DOAC Within 5 Days *SeqNo:* 1093  
*Short Name:* **MedDOAC** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has received DOAC within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

*Long Name:* Meds-DOAC Discontinuation *SeqNo:* 1094  
*Short Name:* **MedDOAC5Dis** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the number of days prior to surgery DOAC use was discontinued. If less than 24 hours, enter "0".  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5 UsualRangeLow: 1 UsualRangeHigh: 5  
 ParentShortName: MedDOAC  
 ParentLongName: Meds-DOAC Within 5 Days  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Meds-Factor Xa Inhibitors Within 5 Days *SeqNo:* 1101  
*Short Name:* **MedXa5Days** *Core:* No  
*Section Name:* Preoperative Medications *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the patient has received Factor Xa Inhibitors within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

*Long Name:* Meds-Factor Xa Inhibitors Discontinuation *SeqNo:* 1102  
*Short Name:* **MedXa5DDis** *Core:* No  
*Section Name:* Preoperative Medications *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of days prior to surgery Factor Xa Inhibitor use was discontinued. If less than 24 hours, enter "0".  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5  
*ParentShortName:* MedXa5Days  
*ParentLongName:* Meds-Factor Xa Inhibitors Within 5 Days  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Meds-Novel Oral Anticoagulant Within 5 Days *SeqNo:* 1111  
*Short Name:* **MedNOAC5Days** *Core:* No  
*Section Name:* Preoperative Medications *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has received Novel Oral Anticoagulant within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

*Long Name:* Meds-Novel Oral Anticoagulant Discontinuation *SeqNo:* 1112  
*Short Name:* **MedNOACDisc** *Core:* No  
*Section Name:* Preoperative Medications *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of days prior to surgery Novel Oral Anticoagulant use was discontinued. If less than 24 hours, enter "0".  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5  
*ParentShortName:* MedNOAC5Days  
*ParentLongName:* Meds-Novel Oral Anticoagulant Within 5 Days  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Meds-Thrombin Inhibitors Within 5 Days *SeqNo:* 1121  
*Short Name:* **MedThromIn5Days** *Core:* No  
*Section Name:* Preoperative Medications *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has received Thrombin Inhibitors within 5 days preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

<i>Long Name:</i>	Meds-Thrombin Inhibitors Discontinuation	<i>SeqNo:</i>	1122
<i>Short Name:</i>	<b>MedThromInDisc</b>	<i>Core:</i>	No
<i>Section Name:</i>	Preoperative Medications	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the number of days prior to surgery Thrombin Inhibitor use was discontinued. If less than 24 hours, enter "0".		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	0	High Value:	5
ParentShortName:	MedThromIn5Days		
ParentLongName:	Meds-Thrombin Inhibitors Within 5 Days		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

<i>Long Name:</i>	Meds-Thrombolytics Within 24 Hours	<i>SeqNo:</i>	1125
<i>Short Name:</i>	<b>MedThrom</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Preoperative Medications	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient received thrombolytics within 24 hours preoperatively.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

<i>Long Name:</i>	Meds-Inotropes Within 48 Hours	<i>SeqNo:</i>	1130
<i>Short Name:</i>	<b>MedInotr</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Preoperative Medications	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient received IV inotropic agents within 48 hours preceding surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No



---

*Long Name:* Meds-Lipid Lowering Within 24 Hours *SeqNo:* 1135  
*Short Name:* **MedLipid** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether or not the patient received lipid lowering medication within 24 hours preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 4 Unknown
- 

*Long Name:* Meds-Lipid Lowering-Medication Type *SeqNo:* 1141  
*Short Name:* **MedLipType** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the type of lipid lowering medication the patient received within 24 hours preceding surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: MedLipid

ParentLongName: Meds-Lipid Lowering Within 24 Hours

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 Statin
  - 2 Statin + Other
  - 3 Non-statin/Other
-

*Long Name:* Meds-Steroids Within 24 Hours *SeqNo:* 1143  
*Short Name:* **MedSter** *Core:* Yes  
*Section Name:* Preoperative Medications *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient was taking steroids within 24 hours of surgery. This does not include a one-time dose related to prophylaxis therapy (i.e. IV dye exposure for cath procedure or surgery pre-induction period). Non-systemic medications are not included in this category (i.e., nasal sprays, topical creams).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Contraindicated
- 4 Unknown

*Long Name:* Cardiac Catheterization Performed *SeqNo:* 1145  
*Short Name:* **CarCathPer** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether cardiac catheterization and/or CT angio was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Cardiac Catheterization Date *SeqNo:* 1150  
*Short Name:* **CarCathDt** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the date cardiac catheterization was performed.  
*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: CarCathPer

ParentLongName: Cardiac Catheterization Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Coronary Anatomy/Disease Known *SeqNo:* 1155  
*Short Name:* **CorAnatDisKnown** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether coronary artery anatomy and/or disease is documented and available prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* Dominance *SeqNo:* 1160  
*Short Name:* **Dominance** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether coronary artery dominance is documented prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CorAnatDisKnown

ParentLongName: Coronary Anatomy/Disease Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 Left
  - 2 Right
  - 3 Co-dominant
  - 4 Not documented
-

<i>Long Name:</i>	Source(s) Used To Quantify Stenosis	<i>SeqNo:</i>	1165
<i>Short Name:</i>	<b>StenSource</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate source or sources used to quantify coronary artery stenosis.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CorAnatDisKnown		
<i>ParentLongName:</i>	Coronary Anatomy/Disease Known		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Angiogram	
	2	CT	
	3	IVUS	
	4	Progress/OP Note	
	5	Other	
	6	Multiple	

<i>Long Name:</i>	Number of Diseased Vessels	<i>SeqNo:</i>	1170
<i>Short Name:</i>	<b>NumDisV</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the number of diseased major native coronary vessel systems. A vessel that has ever been considered diseased, should always be considered diseased. See TM for time frame and source document priority.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CorAnatDisKnown		
<i>ParentLongName:</i>	Coronary Anatomy/Disease Known		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes and Value Definitions:</i>			
	<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
	1	None	No significant coronary obstructive disease.
	2	One	
	3	Two	
	4	Three	

---

*Long Name:* Left Main Stenosis >= 50% Known *SeqNo:* 1174  
*Short Name:* **StenLeftMain** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if main stenosis greater or equal to 50% is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: NumDisV  
 ParentLongName: Number of Diseased Vessels  
 ParentHarvestCodes: 2|3|4  
 ParentValues: = "One", "Two" or "Three"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No  
         3 N/A

---

*Long Name:* Left Main Stenosis Location Known *SeqNo:* 1176  
*Short Name:* **StenLeftMainLctnKn** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the location of the stenosis within a native artery is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: StenLeftMain  
 ParentLongName: Left Main Stenosis >= 50% Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

---

*Long Name:* Left Main Stenosis Location *SeqNo:* 1177  
*Short Name:* **StenLeftMainLctn** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* If Left Main stenosis is  $\geq 50\%$ , identify if the stenosis is within a native artery stenosis, stenotic graft, stenotic stent. If more than one is applicable, then choose all that apply for vessels with equal to or greater than 50% stenosis.

*Data Source:* User *Format:* Multi-Select

ParentShortName: StenLeftMainLctnKn

ParentLongName: Left Main Stenosis Location Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Artery Stenosis
  - 2 Stenotic Graft
  - 3 Stenotic Stent
- 

*Long Name:* LAD distribution stenosis  $\geq 50\%$  Known *SeqNo:* 1178  
*Short Name:* **LADDistSten** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the LAD distribution has equal to or greater than 50% stenosis

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

ParentShortName: NumDisV

ParentLongName: Number of Diseased Vessels

ParentHarvestCodes: 2|3|4

ParentValues: = "One", "Two" or "Three"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 N/A
-

---

*Long Name:* LAD Distribution Stenosis Percentage *SeqNo:* 1179  
*Short Name:* **LADDistStenPercent** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's LAD distribution stenosis percentage range.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* LADDistSten  
*ParentLongName:* LAD distribution stenosis >= 50% Known  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	50 - 69%
2	>=70%

---

*Long Name:* LAD distribution stenosis - current revascularization - Location Known *SeqNo:* 1180  
*Short Name:* **LADDistStenCurRevLock** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the location of the current LAD revascularization is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* LADDistSten  
*ParentLongName:* LAD distribution stenosis >= 50% Known  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* LAD distribution stenosis - current revascularization *SeqNo:* 1181  
*Short Name:* **LADDistStenCurRev** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* If LAD distribution stenosis is  $\geq 50\%$ , identify if the stenosis is within a native artery stenosis, stenotic graft, stenotic stent. If more than one is applicable, then choose all that apply for vessels with equal to or greater than 50% stenosis.

*Data Source:* User *Format:* Multi-Select

ParentShortName: LADDistStenCurRevLock

ParentLongName: LAD distribution stenosis - current revascularization - Location Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Artery Stenosis
  - 2 Stenotic Graft
  - 3 Stenotic Stent
- 

*Long Name:* Ramus stenosis  $\geq 50\%$  known *SeqNo:* 1182  
*Short Name:* **RamusSten** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the Ramus has equal to or greater than 50% stenosis.

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

ParentShortName: NumDisV

ParentLongName: Number of Diseased Vessels

ParentHarvestCodes: 2|3|4

ParentValues: = "One", "Two" or "Three"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 N/A
-



---

*Long Name:* Ramus Stenosis Percentage *SeqNo:* 1183  
*Short Name:* **RamusStenPercent** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's Ramus stenosis percentage range.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RamusSten  
 ParentLongName: Ramus stenosis >= 50% known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	50 - 69%
2	>=70%

---

*Long Name:* Ramus stenosis - current revascularization - Location Known *SeqNo:* 1184  
*Short Name:* **RamusStenCurRevLocK** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the location of the current Ramus revascularization is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RamusSten  
 ParentLongName: Ramus stenosis >= 50% known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* Ramus stenosis - current revascularization *SeqNo:* 1185  
*Short Name:* **RamusStenCurRev** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* If Ramus stenosis is  $\geq 50\%$ , identify if the stenosis is within a native artery stenosis, stenotic graft, stenotic stent. If more than one is applicable, then choose all that apply for vessels with equal to or greater than 50% stenosis.

*Data Source:* User *Format:* Multi-Select

ParentShortName: RamusStenCurRevLocK

ParentLongName: Ramus stenosis - current revascularization - Location Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Artery Stenosis
  - 2 Stenotic Graft
  - 3 Stenotic Stent
- 

*Long Name:* Circumflex distribution stenosis  $\geq 50\%$  known *SeqNo:* 1186  
*Short Name:* **CircDistSten** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the Circumflex distribution has equal to or greater than 50% stenosis.

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

ParentShortName: NumDisV

ParentLongName: Number of Diseased Vessels

ParentHarvestCodes: 2|3|4

ParentValues: = "One", "Two" or "Three"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 N/A
-

---

*Long Name:* Circumflex Distribution Stenosis Percentage *SeqNo:* 1187  
*Short Name:* **CircDistStenPercent** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's Circumflex distribution stenosis percentage range.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CircDistSten  
 ParentLongName: Circumflex distribution stenosis >= 50% known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	50 - 69%
2	>=70%

---

*Long Name:* Circumflex distribution stenosis - current revascularization - Location *SeqNo:* 1188  
 Known  
*Short Name:* **CircDistStenCurRevLock** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the location of the current Circumflex revascularization is known  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CircDistSten  
 ParentLongName: Circumflex distribution stenosis >= 50% known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Circumflex distribution stenosis - current revascularization *SeqNo:* 1189  
*Short Name:* **CircDistStenCurRev** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* If Circumflex distribution stenosis is  $\geq 50\%$ , identify if the stenosis is within a native artery stenosis, stenotic graft, stenotic stent. If more than one is applicable, then choose all that apply for vessels with equal to or greater than 50% stenosis.

*Data Source:* User *Format:* Multi-Select

ParentShortName: CircDistStenCurRevLocK

ParentLongName: Circumflex distribution stenosis - current revascularization - Location Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Artery Stenosis
- 2 Stenotic Graft
- 3 Stenotic Stent

*Long Name:* RCA distribution stenosis  $\geq 50\%$  known *SeqNo:* 1190  
*Short Name:* **RCADistSten** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate if the RCA distribution has equal to or greater than 50% stenosis.

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

ParentShortName: NumDisV

ParentLongName: Number of Diseased Vessels

ParentHarvestCodes: 2|3|4

ParentValues: = "One", "Two" or "Three"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 N/A

---

*Long Name:* RCA Distribution Stenosis Percentage *SeqNo:* 1191  
*Short Name:* **RCADistStenPercent** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's Right Coronary Artery (RCA) distribution stenosis percentage range.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RCADistSten

ParentLongName: RCA distribution stenosis >= 50% known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 50 - 69%

2 >=70%

---

*Long Name:* RCA distribution stenosis - current revascularization - Location Known *SeqNo:* 1192  
*Short Name:* **RCADistStenCurRevLock** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the location of the current RCA revascularization is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RCADistSten

ParentLongName: RCA distribution stenosis >= 50% known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* RCA distribution stenosis - current revascularization *SeqNo:* 1193  
*Short Name:* **RCADistStenCurRev** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* If RCA distribution stenosis is  $\geq 50\%$ , identify if the stenosis is within a native artery stenosis, stenotic graft, stenotic stent. If more than one is applicable, then choose all that apply for vessels with equal to or greater than 50% stenosis.

*Data Source:* User *Format:* Multi-Select

ParentShortName: RCADistStenCurRevLock

ParentLongName: RCA distribution stenosis - current revascularization - Location Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u>          |
|--------------|------------------------|
| 1            | Native Artery Stenosis |
| 2            | Stenotic Graft         |
| 3            | Stenotic Stent         |

*Long Name:* Percent Native Artery Stenosis Known *SeqNo:* 1450  
*Short Name:* **PctStenKnown** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName:* Adultdata2

*Definition:* Indicate whether the percent stenosis of native coronary stenosis is known.

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

ParentShortName: NumDisV

ParentLongName: Number of Diseased Vessels

ParentHarvestCodes: 2|3|4

ParentValues: = "One", "Two" or "Three"

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |

*Long Name:* Graft(s) Present *SeqNo:* 1451  
*Short Name:* **GraftsPrsnt** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether one or more coronary artery bypass grafts are present prior to this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: NumDisV  
 ParentLongName: Number of Diseased Vessels  
 ParentHarvestCodes: 2|3|4  
 ParentValues: = "One", "Two" or "Three"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Stent(s) Present *SeqNo:* 1452  
*Short Name:* **StentPrsnt** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether one or more intracoronary stents are present prior to this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: NumDisV  
 ParentLongName: Number of Diseased Vessels  
 ParentHarvestCodes: 2|3|4  
 ParentValues: = "One", "Two" or "Three"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Fractional Flow Reserve (FFR) Performed *SeqNo:* 1453  
*Short Name:* **FFRPerf** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Fractional Flow Reserve (FFR) was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: NumDisV  
 ParentLongName: Number of Diseased Vessels  
 ParentHarvestCodes: 2|3|4  
 ParentValues: = "One", "Two" or "Three"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Instantaneous Wave-Free Ration (iFR) Performed *SeqNo:* 1454  
*Short Name:* **IFRPerf** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Instantaneous wave-free ration (iFR) was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: NumDisV  
 ParentLongName: Number of Diseased Vessels  
 ParentHarvestCodes: 2|3|4  
 ParentValues: = "One", "Two" or "Three"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



*Long Name:* Percent Stenosis - Left Main *SeqNo:* 1455  
*Short Name:* **PctStenLMain** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
*ParentShortName:* PctStenKnown  
*ParentLongName:* Percent Native Artery Stenosis Known  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Graft Stenosis - Left Main *SeqNo:* 1456  
*Short Name:* **GraftStenLMain** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
*ParentShortName:* GraftsPrsnt  
*ParentLongName:* Graft(s) Present  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*  

<u>Code:</u>	<u>Value:</u>
1	Patent
2	Stenosis >=50%
3	100% occlusion
4	Not documented

*Long Name:* Stent Stenosis - Left Main *SeqNo:* 1457  
*Short Name:* **StntStenLMain** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: StentPrsnt  
 ParentLongName: Stent(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Patent  
         2 Stenosis >=50%  
         3 Not documented

*Long Name:* Fractional Flow Reserve (FFR) - Left Main *SeqNo:* 1458  
*Short Name:* **FFRLMain** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00      High Value: 1.00  
 ParentShortName: FFRPerf  
 ParentLongName: Fractional Flow Reserve (FFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Left Main *SeqNo:* 1459  
*Short Name:* **IFRLMain** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Proximal LAD *SeqNo:* 1460  
*Short Name:* **PctStenProxLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Proximal LAD *SeqNo:* 1461  
*Short Name:* **GraftStenProxLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Proximal LAD *SeqNo:* 1462  
*Short Name:* **StntStenProxLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Proximal LAD *SeqNo:* 1463  
*Short Name:* **FFRProxLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Proximal LAD *SeqNo:* 1464  
*Short Name:* **IFRProxLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Mid LAD *SeqNo:* 1465  
*Short Name:* **PctStenMidLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Mid LAD *SeqNo:* 1467  
*Short Name:* **GraftStenMidLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Mid LAD *SeqNo:* 1468  
*Short Name:* **StntStenMidLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Mid LAD *SeqNo:* 1469  
*Short Name:* **FFRMidLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Mid LAD *SeqNo:* 1470  
*Short Name:* **IFRMidLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Distal LAD *SeqNo:* 1471  
*Short Name:* **PctStenDistLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Distal LAD *SeqNo:* 1472  
*Short Name:* **GraftStenDistLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Distal LAD *SeqNo:* 1473  
*Short Name:* **StntStenDistLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Distal LAD *SeqNo:* 1474  
*Short Name:* **FFRDistLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"



*Long Name:* Instantaneous Wave-Free Ration (iFR) - Distal LAD *SeqNo:* 1475  
*Short Name:* **IFRDistLAD** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Diagonal 1 *SeqNo:* 1476  
*Short Name:* **PctStenDiag1** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Diagonal 1 *SeqNo:* 1477  
*Short Name:* **GraftStenDiag1** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Diagonal 1 *SeqNo:* 1478  
*Short Name:* **StntStenDiag1** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Patent  
        2 Stenosis >=50%  
        3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Diagonal 1 *SeqNo:* 1479  
*Short Name:* **FFRDiag1** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00      High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

<i>Long Name:</i>	Instantaneous Wave-Free Ration (iFR) - Diagonal 1	<i>SeqNo:</i>	1480
<i>Short Name:</i>	<b>IFRDiag1</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the iFR in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Real
Low Value:	0.00	High Value:	1.00
ParentShortName:	IFRPerf		
ParentLongName:	Instantaneous Wave-Free Ration (iFR) Performed		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
<hr/>			
<i>Long Name:</i>	Percent Stenosis - Diagonal 2	<i>SeqNo:</i>	1481
<i>Short Name:</i>	<b>PctStenDiag2</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent stenosis in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	0	High Value:	100
ParentShortName:	PctStenKnown		
ParentLongName:	Percent Native Artery Stenosis Known		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
<hr/>			
<i>Long Name:</i>	Graft Stenosis - Diagonal 2	<i>SeqNo:</i>	1482
<i>Short Name:</i>	<b>GraftStenDiag2</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent stenosis in this graft at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	GraftsPrsnt		
ParentLongName:	Graft(s) Present		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Diagonal 2 *SeqNo:* 1483  
*Short Name:* **StntStenDiag2** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Diagonal 2 *SeqNo:* 1484  
*Short Name:* **FFRDiag2** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Diagonal 2 *SeqNo:* 1485  
*Short Name:* **IFRDiag2** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Diagonal 3 *SeqNo:* 1486  
*Short Name:* **PctStenDiag3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Diagonal 3 *SeqNo:* 1487  
*Short Name:* **GraftStenDiag3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Diagonal 3 *SeqNo:* 1488  
*Short Name:* **StntStenDiag3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Diagonal 3 *SeqNo:* 1489  
*Short Name:* **FFRDiag3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Diagonal 3 *SeqNo:* 1490  
*Short Name:* **IFRDiag3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Circumflex *SeqNo:* 1491  
*Short Name:* **PctStenCircflx** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Circumflex *SeqNo:* 1492  
*Short Name:* **GraftStenCircflx** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Circumflex *SeqNo:* 1493  
*Short Name:* **StntStenCircflx** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Patent  
        2 Stenosis >=50%  
        3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Circumflex *SeqNo:* 1494  
*Short Name:* **FFRCircflx** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00      High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"



*Long Name:* Instantaneous Wave-Free Ration (iFR) - Circumflex *SeqNo:* 1495  
*Short Name:* **IFRCircflx** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Obtuse Marginal 1 *SeqNo:* 1496  
*Short Name:* **PctStenOM1** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Obtuse Marginal 1 *SeqNo:* 1497  
*Short Name:* **GraftStenOM1** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		
<hr/>			
<i>Long Name:</i>	Stent Stenosis - Obtuse Marginal 1	<i>SeqNo:</i>	1498
<i>Short Name:</i>	<b>StntStenOM1</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	StentPrsnt		
ParentLongName:	Stent(s) Present		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Patent	
	2	Stenosis >=50%	
	3	Not documented	
<hr/>			
<i>Long Name:</i>	Fractional Flow Reserve (FFR) - Obtuse Marginal 1	<i>SeqNo:</i>	1499
<i>Short Name:</i>	<b>FFFROM1</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the FFR in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Real
Low Value:	0.00	High Value:	1.00
ParentShortName:	FFRPerf		
ParentLongName:	Fractional Flow Reserve (FFR) Performed		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

<i>Long Name:</i>	Instantaneous Wave-Free Ration (iFR) - Obtuse Marginal 1	<i>SeqNo:</i>	1500
<i>Short Name:</i>	<b>IFROM1</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the iFR in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Real
Low Value:	0.00	High Value:	1.00
ParentShortName:	IFRPerf		
ParentLongName:	Instantaneous Wave-Free Ration (iFR) Performed		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
<hr/>			
<i>Long Name:</i>	Percent Stenosis - Obtuse Marginal 2	<i>SeqNo:</i>	1501
<i>Short Name:</i>	<b>PctStenOM2</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent stenosis in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	0	High Value:	100
ParentShortName:	PctStenKnown		
ParentLongName:	Percent Native Artery Stenosis Known		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
<hr/>			
<i>Long Name:</i>	Graft Stenosis - Obtuse Marginal 2	<i>SeqNo:</i>	1502
<i>Short Name:</i>	<b>GraftStenOM2</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent stenosis in this graft at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	GraftsPrsnt		
ParentLongName:	Graft(s) Present		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		
<hr/>			
<i>Long Name:</i>	Stent Stenosis - Obtuse Marginal 2	<i>SeqNo:</i>	1503
<i>Short Name:</i>	<b>StntStenOM2</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	StentPrsnt		
ParentLongName:	Stent(s) Present		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Patent	
	2	Stenosis >=50%	
	3	Not documented	
<hr/>			
<i>Long Name:</i>	Fractional Flow Reserve (FFR) - Obtuse Marginal 2	<i>SeqNo:</i>	1504
<i>Short Name:</i>	<b>FFROM2</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the FFR in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Real
Low Value:	0.00	High Value:	1.00
ParentShortName:	FFRPerf		
ParentLongName:	Fractional Flow Reserve (FFR) Performed		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Obtuse Marginal 2 *SeqNo:* 1505  
*Short Name:* **IFROM2** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Obtuse Marginal 3 *SeqNo:* 1506  
*Short Name:* **PctStenOM3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Obtuse Marginal 3 *SeqNo:* 1507  
*Short Name:* **GraftStenOM3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		
<hr/>			
<i>Long Name:</i>	Stent Stenosis - Obtuse Marginal 3	<i>SeqNo:</i>	1508
<i>Short Name:</i>	<b>StntStenOM3</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	StentPrsnt		
ParentLongName:	Stent(s) Present		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Patent	
	2	Stenosis >=50%	
	3	Not documented	
<hr/>			
<i>Long Name:</i>	Fractional Flow Reserve (FFR) - Obtuse Marginal 3	<i>SeqNo:</i>	1509
<i>Short Name:</i>	<b>FFROM3</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the FFR in this vessel at the time of this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Real
Low Value:	0.00	High Value:	1.00
ParentShortName:	FFRPerf		
ParentLongName:	Fractional Flow Reserve (FFR) Performed		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Obtuse Marginal 3 *SeqNo:* 1510  
*Short Name:* **IFROM3** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Ramus *SeqNo:* 1511  
*Short Name:* **PctStenRamus** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Ramus *SeqNo:* 1512  
*Short Name:* **GraftStenRamus** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Ramus *SeqNo:* 1513  
*Short Name:* **StntStenRamus** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Patent  
        2 Stenosis >=50%  
        3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Ramus *SeqNo:* 1514  
*Short Name:* **FFRRamus** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00      High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"



*Long Name:* Instantaneous Wave-Free Ration (iFR) - Ramus *SeqNo:* 1515  
*Short Name:* **IFRRamus** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - RCA *SeqNo:* 1516  
*Short Name:* **PctStenRCA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - RCA *SeqNo:* 1517  
*Short Name:* **GraftStenRCA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - RCA *SeqNo:* 1518  
*Short Name:* **StntStenRCA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - RCA *SeqNo:* 1519  
*Short Name:* **FFRRCa** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - RCA *SeqNo:* 1520  
*Short Name:* **IFRRCA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Acute Marginal (AM) *SeqNo:* 1521  
*Short Name:* **PctStenAM** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Acute Marginal (AM) *SeqNo:* 1522  
*Short Name:* **GraftStenAM** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Acute Marginal (AM) *SeqNo:* 1523  
*Short Name:* **StntStenAM** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Acute Marginal (AM) *SeqNo:* 1524  
*Short Name:* **FFRAM** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Acute Marginal (AM) *SeqNo:* 1525  
*Short Name:* **IFRAM** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Posterior Descending (PDA) *SeqNo:* 1526  
*Short Name:* **PctStenPDA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Posterior Descending (PDA) *SeqNo:* 1527  
*Short Name:* **GraftStenPDA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Posterior Descending (PDA) *SeqNo:* 1528  
*Short Name:* **StntStenPDA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Posterior Descending (PDA) *SeqNo:* 1529  
*Short Name:* **FFRPDA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

*Long Name:* Instantaneous Wave-Free Ration (iFR) - Posterior Descending (PDA) *SeqNo:* 1530  
*Short Name:* **IFRPDA** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Percent Stenosis - Posterolateral (PLB) *SeqNo:* 1531  
*Short Name:* **PctStenPLB** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 100  
 ParentShortName: PctStenKnown  
 ParentLongName: Percent Native Artery Stenosis Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Graft Stenosis - Posterolateral (PLB) *SeqNo:* 1532  
*Short Name:* **GraftStenPLB** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent stenosis in this graft at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: GraftsPrsnt  
 ParentLongName: Graft(s) Present  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:

1	Patent		
2	Stenosis >=50%		
3	100% occlusion		
4	Not documented		

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*Long Name:* Stent Stenosis - Posterolateral (PLB) *SeqNo:* 1533  
*Short Name:* **StntStenPLB** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest percent of stent stenosis in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: StentPrsnt  
ParentLongName: Stent(s) Present  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Patent  
2 Stenosis >=50%  
3 Not documented

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*Long Name:* Fractional Flow Reserve (FFR) - Posterolateral (PLB) *SeqNo:* 1534  
*Short Name:* **FFRPLB** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the FFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 1.00  
ParentShortName: FFRPerf  
ParentLongName: Fractional Flow Reserve (FFR) Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"



*Long Name:* Instantaneous Wave-Free Ration (iFR) - Posterolateral (PLB) *SeqNo:* 1535  
*Short Name:* **IFRPLB** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the iFR in this vessel at the time of this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1.00  
 ParentShortName: IFRPerf  
 ParentLongName: Instantaneous Wave-Free Ration (iFR) Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Syntax Score Known *SeqNo:* 1536  
*Short Name:* **SyntaxScrKnown** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a syntax score is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* Syntax Score *SeqNo:* 1537  
*Short Name:* **SyntaxScr** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate syntax score documented prior to this surgery.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 100.00  
 ParentShortName: SyntaxScrKnown  
 ParentLongName: Syntax Score Known  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

<i>Long Name:</i>	Stress Test Performed	<i>SeqNo:</i>	1538
<i>Short Name:</i>	<b>StressTst</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether a stress test was performed prior to this surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Stress Test Result	<i>SeqNo:</i>	1539
<i>Short Name:</i>	<b>StrsTstRes</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the results of the stress test.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	StressTst		
<i>ParentLongName:</i>	Stress Test Performed		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Negative (normal)	
	2	Positive (abnormal)	
	3	Not documented	

<i>Long Name:</i>	Hemo Data-EF Done	<i>SeqNo:</i>	1540
<i>Short Name:</i>	<b>HDEFD</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the Ejection Fraction was measured. See TM for time frame and source document priority.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Hemo Data-EF *SeqNo:* 1545  
*Short Name:* **HDEF** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the Ejection Fraction (percentage of the blood emptied from the left ventricle at the end of the contraction). See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
Low Value: 1.0 High Value: 99.0 UsualRangeLow: 5.0 UsualRangeHigh: 90.0  
ParentShortName: HDEFD  
ParentLongName: Hemo Data-EF Done  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Hemo Data-Dimensions Available *SeqNo:* 1555  
*Short Name:* **DimAvail** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether intracardiac dimensions are available. See TM for time-frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

1 Yes

2 No

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---

*Long Name:* Hemo Data-LV End Systolic Dimension *SeqNo:* 1560  
*Short Name:* **LVSD** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate LV End -Systolic Dimension in mm.  
 LV end systolic dimension is the same as left ventricular internal dimension in end systole (LVIDs)  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 90.0 UsualRangeLow: 25.0 UsualRangeHigh: 50.0  
 ParentShortName: DimAvail  
 ParentLongName: Hemo Data-Dimensions Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Hemo Data-LV End-Diastolic Dimension *SeqNo:* 1565  
*Short Name:* **LVEDD** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the Left Ventricular End-Diastolic Dimension in mm. LV end diastolic dimension is the same as left ventricular internal dimension in end diastole (LVIDs)  
*Data Source:* User *Format:* Real  
 Low Value: 20.0 High Value: 100.0 UsualRangeLow: 45.0 UsualRangeHigh: 75.0  
 ParentShortName: DimAvail  
 ParentLongName: Hemo Data-Dimensions Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Hemo-PA Systolic Pressure Measured *SeqNo:* 1570  
*Short Name:* **PASYSMeas** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the PA systolic pressure was measured. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 
- 1 Yes
  - 2 No
- 

*Long Name:* Hemo-PA Systolic Pressure *SeqNo:* 1575  
*Short Name:* **PASYS** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Capture PA systolic pressure recorded. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
 Low Value: 10.0    High Value: 150.0    UsualRangeLow: 15.0    UsualRangeHigh: 40.0  
*ParentShortName:* PASYSMeas  
*ParentLongName:* Hemo-PA Systolic Pressure Measured  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Aortic Valve Regurgitation *SeqNo:* 1585  
*Short Name:* **AorticValveRegurg** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there is evidence of Aortic valve insufficiency/regurgitation prior to surgery.  
 See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Aortic Valve Regurgitation Degree *SeqNo:* 1590  
*Short Name:* **VDInsufA** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the degree of aortic valve insufficiency/regurgitation. See TM for time frame and source document priority.

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

ParentShortName: AorticValveRegurg

ParentLongName: Aortic Valve Regurgitation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Trivial/Trace
- 2 Mild
- 3 Moderate
- 4 Severe
- 5 Not documented

*Long Name:* VD-Aortic Valve Eccentric Jet *SeqNo:* 1591  
*Short Name:* **VDAVEccJet** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether aortic valve regurgitation is an eccentric jet.

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

ParentShortName: VDInsufA

ParentLongName: Aortic Valve Regurgitation Degree

ParentHarvestCodes: 1|2|3|4|5

ParentValues: = "Trivial/Trace", "Mild", "Moderate", "Severe" or "Not documented"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Not documented

---

*Long Name:* VD-Stenosis-Aortic *SeqNo:* 1600  
*Short Name:* **VDStenA** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Aortic Stenosis is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Aortic Valve Stenosis Degree *SeqNo:* 1601  
*Short Name:* **AVStenosis** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of aortic valve stenosis prior to surgery. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDStenA

ParentLongName: VD-Stenosis-Aortic

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Mild
2	Moderate
3	Severe
4	Not Documented

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*Long Name:* VD-Aortic Hemodynamic Data Available *SeqNo:* 1605  
*Short Name:* **AoHemoDatAvail** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether aortic valve hemodynamic measurements are available. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VDStenA  
ParentLongName: VD-Stenosis-Aortic  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* VD-Aortic Valve Area *SeqNo:* 1610  
*Short Name:* **VDAoVA** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the aortic valve area (in cm squared). See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
Low Value: 0.2 High Value: 5.0  
ParentShortName: AoHemoDatAvail  
ParentLongName: VD-Aortic Hemodynamic Data Available  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---



*Long Name:* VD-Aortic Gradient-Mean *SeqNo:* 1615  
*Short Name:* **VDGradA** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the MEAN gradient (in mmHg) across the aortic valve. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 200.0  
*ParentShortName:* AoHemoDatAvail  
*ParentLongName:* VD-Aortic Hemodynamic Data Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* VD - Aortic Jet Velocity (Vmax) *SeqNo:* 1616  
*Short Name:* **VDVMax** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the maximum aortic jet velocity in m/s. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 8.0  
*ParentShortName:* AoHemoDatAvail  
*ParentLongName:* VD-Aortic Hemodynamic Data Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* VD-Aortic *SeqNo:* 1617  
*Short Name:* **VDAort** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Aortic Valve disease is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VD-Aortic Valve Disease Primary Etiology *SeqNo:* 1646  
*Short Name:* **VDAoPrimEt** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the primary etiology of aortic valve disease.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDAoort

ParentLongName: VD-Aortic

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Bicuspid valve disease
- 34 Unicuspid valve disease
- 35 Quadricuspid valve disease
- 2 Congenital (other than Bicuspid, Unicuspid, or Quadricuspid)
- 3 Degenerative- Calcified
- 4 Degenerative- Leaflet prolapse with or without annular dilatation
- 5 Degenerative- Pure annular dilatation without leaflet prolapse
- 6 Degenerative - Commissural Rupture
- 7 Degenerative - Extensive Fenestration
- 8 Degenerative - Leaflet perforation / hole
- 9 Endocarditis, native valve with root abscess
- 10 Endocarditis, native valve without root abscess
- 36 Endocarditis, prosthetic valve with root abscess
- 37 Endocarditis, prosthetic valve without root abscess
- 11 LV Outflow Tract Pathology, HOCM
- 12 LV Outflow Tract Pathology, Sub-aortic membrane
- 13 LV Outflow Tract Pathology, Sub-aortic tunnel

- 
- 14 LV Outflow Tract Pathology, Other
  - 15 Primary Aortic Disease, Aortic Dissection
  - 16 Primary Aortic Disease, Atherosclerotic Aneurysm
  - 17 Primary Aortic Disease, Ehler-Danlos Syndrome
  - 18 Primary Aortic Disease, Hypertensive Aneurysm
  - 19 Primary Aortic Disease, Idiopathic Root dilatation
  - 20 Primary Aortic Disease, Inflammatory
  - 21 Primary Aortic Disease, Loews-Dietz Syndrome
  - 22 Primary Aortic Disease, Marfan Syndrome
  - 23 Primary Aortic Disease, Other Connective tissue disorder
  - 38 Radiation induced heart disease
  - 24 Reoperation - Failure of previous AV repair or replacement
  - 25 Rheumatic
  - 26 Supravalvular Aortic Stenosis
  - 27 Trauma
  - 28 Carcinoid
  - 29 Tumor, Myxoma
  - 30 Tumor, Papillary Fibroelastoma
  - 31 Tumor, Other
  - 32 Mixed Etiology
  - 33 Not documented
-

<i>Long Name:</i>	VD-Aortic Valve Disease Sievers Class	<i>SeqNo:</i>	1647
<i>Short Name:</i>	<b>VDAoSievers</b>	<i>Core:</i>	No
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the documented Sievers class		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	VDAoPrimEt		
<i>ParentLongName:</i>	VD-Aortic Valve Disease Primary Etiology		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Bicuspid valve disease"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	0	No raphe	
	1	One raphe	
	2	Two raphe	
	4	Not documented	

<i>Long Name:</i>	Mitral Valve Regurgitation	<i>SeqNo:</i>	1679
<i>Short Name:</i>	<b>MVRegurg</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Hemodynamics/Cath/Echo	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether there is evidence of Mitral valve insufficiency/regurgitation prior to surgery. See TM for time frame and source document priority.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

*Long Name:* VD-Regurgitation-Mitral *SeqNo:* 1680  
*Short Name:* **VDInsufM** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the degree of mitral valve insufficiency/regurgitation. See TM for time frame and source document priority.

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

ParentShortName: MVRegurg

ParentLongName: Mitral Valve Regurgitation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Trivial/Trace
- 2 Mild
- 3 Moderate
- 4 Severe
- 5 Not documented

*Long Name:* VD-Mitral Valve Eccentric Jet *SeqNo:* 1684  
*Short Name:* **VDMVEccJet** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether mitral valve regurgitation is an eccentric jet.

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

ParentShortName: VDInsufM

ParentLongName: VD-Regurgitation-Mitral

ParentHarvestCodes: 1|2|3|4|5

ParentValues: = "Trivial/Trace", "Mild", "Moderate", "Severe" or "Not documented"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Not documented

---

*Long Name:* VD-Stenosis-Mitral *SeqNo:* 1690  
*Short Name:* **VDStenM** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Mitral Stenosis is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Mitral Valve Stenosis Degree *SeqNo:* 1691  
*Short Name:* **MVStenDeg** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of mitral valve stenosis prior to surgery. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDStenM

ParentLongName: VD-Stenosis-Mitral

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 Mild
  - 2 Moderate
  - 3 Severe
  - 4 Not Documented
-

---

*Long Name:* VD-Mitral Hemodynamic Data Available *SeqNo:* 1695  
*Short Name:* **MiHemoDatAvail** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether mitral valve hemodynamic measurements are available. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VDStenM  
ParentLongName: VD-Stenosis-Mitral  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Mitral - Valve Area *SeqNo:* 1700  
*Short Name:* **VDMVA** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the Mitral Valve Area (in cm squared). See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
Low Value: 0.6 High Value: 6.0  
ParentShortName: MiHemoDatAvail  
ParentLongName: VD-Mitral Hemodynamic Data Available  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* Mitral - Mean Gradient *SeqNo:* 1705  
*Short Name:* **VDGradM** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the mean gradient (in mm Hg) across the mitral valve. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 30.0  
ParentShortName: MiHemoDatAvail  
ParentLongName: VD-Mitral Hemodynamic Data Available  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* VD-Mitral *SeqNo:* 1710  
*Short Name:* **VDMit** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Mitral valve disease is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* VD-Mitral Valve Disease *SeqNo:* 1711  
*Short Name:* **VDMitDis** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Mitral valve disease is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDMit

ParentLongName: VD-Mitral

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 Carpentier Class I - Normal
-



- Leaflet Mobility
- 2 Carpentier Class II - Increased Leaflet Mobility
- 3 Carpentier Class III A - Restricted Leaflet Mobility (systole and diastole)
- 4 Carpentier Class III B - Restricted Leaflet Mobility (systole only)
- 5 Mixed Lesion (Type II and Type III A)
- 6 Acute Papillary muscle rupture
- 7 Reoperative-Failure of previous MV repair or replacement
- 8 Other / Unknown / Not Available

*Long Name:* VD-Mitral Valve Disease - Carpentier Classification - Class I - Type *SeqNo:* 1712

*Short Name:* **VDMitDisClsITy** *Core:* Yes

*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate type of Carpentier Class I Mitral Valve Disease.

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

ParentShortName: VDMitDis

ParentLongName: VD-Mitral Valve Disease

ParentHarvestCodes: 1

ParentValues: = "Carpentier Class I - Normal Leaflet Mobility"

Harvest Codes:

Code: Value:

- 1 Pure Annular Dilatation
- 2 Endocarditis, Native Valve
- 3 Other / Unknown / Not Available

*Long Name:* VD-Mitral Valve Disease - Carpentier Classification - Class II - Type *SeqNo:* 1713  
*Short Name:* **VDMitDisClsIITy** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the type of Carpentier Class II Mitral Valve Disease.

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

ParentShortName: VDMitDis

ParentLongName: VD-Mitral Valve Disease

ParentHarvestCodes: 2

ParentValues: = "Carpentier Class II - Increased Leaflet Mobility"

Harvest Codes:

Code: Value:

- 1 Myxomatous degenerative prolapse/flail
- 2 Endocarditis
- 3 Other / Unknown / Not Available

*Long Name:* VD-Mitral Valve Disease - Carpentier Classification - Class II - Myomatous *SeqNo:* 1714  
*Short Name:* **VDMitDisClsIIMyo** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* If the patient has myomatous degenerative prolapse/flail, indicate if the anterior, posterior or both leaflets are involved.

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

ParentShortName: VDMitDisClsIITy

ParentLongName: VD-Mitral Valve Disease - Carpentier Classification - Class II - Type

ParentHarvestCodes: 1

ParentValues: = "Myxomatous degenerative prolapse/flail"

Harvest Codes:

Code: Value:

- 1 Posterior Leaflet
- 2 Anterior Leaflet
- 3 Both

*Long Name:* VD-Mitral Valve Disease - Carpentier Classification - Class III A - Type *SeqNo:* 1715  
*Short Name:* **VDMitDisClsIIIA** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the type of Carpentier Class IIIA Mitral Valve Disease.

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

ParentShortName: VDMitDis

ParentLongName: VD-Mitral Valve Disease

ParentHarvestCodes: 3

ParentValues: = "Carpentier Class III A - Restricted Leaflet Mobility (systole and diastole)"

Harvest Codes:

Code: Value:

- 1 Rheumatic
- 2 Tumor (Carcinoid or Other)
- 3 Radiation Induced Heart Disease
- 4 MAC
- 5 Congenital
- 6 Other / Unknown / Not Available

*Long Name:* VD-Mitral Valve Disease - Carpentier Classification - Class III B - Type *SeqNo:* 1716  
*Short Name:* **VDMitDisClsIIIB** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the type of Carpentier Class IIIB Mitral Valve Disease.

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

ParentShortName: VDMitDis

ParentLongName: VD-Mitral Valve Disease

ParentHarvestCodes: 4

ParentValues: = "Carpentier Class III B - Restricted Leaflet Mobility (systole only)"

Harvest Codes:

Code: Value:

- 1 Ischemic (acute/chronic)
- 2 Non-ischemic Cardiomyopathy
- 3 HCM
- 4 Other / Unknown / Not Available

*Long Name:* VD-Mitral Valve Disease - Mixed Lesion - Type *SeqNo:* 1717  
*Short Name:* **VDMitDisMixedTy** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of mixed lesion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDMitDis

ParentLongName: VD-Mitral Valve Disease

ParentHarvestCodes: 5

ParentValues: = "Mixed Lesion (Type II and Type III A)"

Harvest Codes:

Code: Value:

- 1 Mixed leaflet lesion  
(prolapse/flail and restriction)
- 2 Congenital
- 3 MAC
- 4 Other / Unknown / Not  
Available

*Long Name:* VD-Mitral Valve Disease Primary Etiology *SeqNo:* 1731  
*Short Name:* **VDMiPrimEt** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the primary etiology of Mitral valve disease.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDMit

ParentLongName: VD-Mitral

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Myxomatous degeneration /  
prolapse
- 2 Rheumatic
- 3 Ischemic - acute, post  
infarction (MI <= 21 days)
- 4 Ischemic - chronic (MI > 21  
days)
- 5 Non-ischemic Cardiomyopathy
- 6 Endocarditis
- 7 Hypertrophic Obstructive

	Cardiomyopathy (HOCM)
8	Tumor, Carcinoid
9	Tumor, Myxoma
10	Tumor, Papillary fibroelastoma
11	Tumor, Other
12	Carcinoid
13	Trauma
14	Congenital
15	Pure annular dilatation
16	Reoperation - Failure of previous MV repair or replacement
17	Mixed Etiology
18	Not documented

*Long Name:* VD-Mitral Valve Primary Lesion *SeqNo:* 1746  
*Short Name:* **VDMiPrimLes** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the primary mitral valve lesion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDMit

ParentLongName: VD-Mitral

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Leaflet prolapse, posterior
2	Leaflet prolapse, bileaflet
3	Leaflet prolapse, anterior
4	Leaflet prolapse, unspecified
5	Elongated/ruptured chord(s) / Flail
6	Annular dilatation
7	Leaflet calcification
8	Leaflet perforation / hole
9	Mitral annular calcification
10	Papillary muscle elongation
11	Papillary muscle rupture
12	Leaflet thickening
13	Leaflet retraction
14	Chordal tethering
15	Chordal

	thickening/retraction/fusion
16	Commissural fusion
17	Mixed lesion
18	Not documented

*Long Name:* Tricuspid Valve Regurgitation *SeqNo:* 1774  
*Short Name:* **TricuspidVRegurg** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there is evidence of Tricuspid valve insufficiency/regurgitation prior to surgery. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* VD-Tricuspid Regurgitation *SeqNo:* 1775  
*Short Name:* **VDInsufT** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of tricuspid valve insufficiency/regurgitation. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* TricuspidVRegurg  
*ParentLongName:* Tricuspid Valve Regurgitation  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Trivial/Trace
2	Mild
3	Moderate
4	Severe
5	Not documented

---

*Long Name:* VD-Tricuspid Valve Stenosis *SeqNo:* 1776  
*Short Name:* **VDStenT** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Tricuspid Valve Stenosis is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Tricuspid Valve Stenosis Degree *SeqNo:* 1777  
*Short Name:* **TricuspidValveSten** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of tricuspid valve stenosis.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDStenT

ParentLongName: VD-Tricuspid Valve Stenosis

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Mild
2	Moderate
3	Severe
4	Not Documented

---

*Long Name:* VD-Tricuspid Valve Disease *SeqNo:* 1778  
*Short Name:* **VDTr** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Tricuspid Valve disease is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes

---

 2 No
 

---

*Long Name:* VD-Tricuspid Annular Measurement Available *SeqNo:* 1779  
*Short Name:* **VDTrAnnMeas** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a tricuspid annular diameter measurement is available. See TM for time frame and source document priority.

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

ParentShortName: VDTr

ParentLongName: VD-Tricuspid Valve Disease

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* VD-Tricuspid Annulus Size (Diameter) *SeqNo:* 1780  
*Short Name:* **VDTrAnnSize** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate tricuspid annular diameter in cm. See TM for time frame and source document priority.

*Data Source:* User *Format:* Real

Low Value: 1.5 High Value: 10.0

ParentShortName: VDTrAnnMeas

ParentLongName: VD-Tricuspid Annular Measurement Available

ParentHarvestCodes: 1

ParentValues: = "Yes"

---



*Long Name:* VD-Tricuspid Valve Disease Primary Etiology *SeqNo:* 1811  
*Short Name:* **VDTrPrimEt** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the primary etiology of tricuspid valve disease.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VDTr

ParentLongName: VD-Tricuspid Valve Disease

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Functional / secondary
- 2 Endocarditis, Native Valve
- 13 Endocarditis, Prosthetic Valve
- 3 Carcinoid
- 4 Congenital
- 5 Degenerative
- 6 Pacing wire/catheter induced dysfunction
- 7 Rheumatic
- 8 Tumor
- 14 Radiation induced heart disease
- 9 Trauma
- 10 Reoperation - Failure of previous TV repair or replacement
- 11 Mixed Etiology
- 12 Not Documented

*Long Name:* Pulmonic Valve Regurgitation *SeqNo:* 1812  
*Short Name:* **PulmonicValveRegurg** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there is evidence of Pulmonic valve insufficiency/regurgitation prior to surgery. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 1 Yes

---

 2 No
 

---

*Long Name:* Pulmonic Valve Regurgitation Degree *SeqNo:* 1820  
*Short Name:* **VDInsuffP** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of pulmonic valve insufficiency/regurgitation. See TM for time frame and source document priority

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

ParentShortName: PulmonicValveRegurg

ParentLongName: Pulmonic Valve Regurgitation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Trivial/Trace
  - 2 Mild
  - 3 Moderate
  - 4 Severe
  - 5 Not documented
- 

*Long Name:* VD-Pulmonic Valve Stenosis *SeqNo:* 1822  
*Short Name:* **VDStenP** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Pulmonic Stenosis is present.

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

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* Pulmonic Valve Stenosis Degree *SeqNo:* 1823  
*Short Name:* **PulmValveSten** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the degree of pulmonic valve stenosis prior to surgery. See TM for time frame and source document priority.

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

ParentShortName: VDStenP

ParentLongName: VD-Pulmonic Valve Stenosis

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Mild
  - 2 Moderate
  - 3 Severe
  - 4 Not Documented
- 

*Long Name:* VD-Pulmonic Hemodynamic Data Available *SeqNo:* 1824  
*Short Name:* **PuHemoDatAvail** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether pulmonary valve gradient is available.

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

ParentShortName: VDStenP

ParentLongName: VD-Pulmonic Valve Stenosis

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* VD-Pulmonic Gradient-Highest Mean *SeqNo:* 1825  
*Short Name:* **VDGradP** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the mean gradient (in mm Hg) across the pulmonic valve. See TM for time frame and source document priority.  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 200.0  
 ParentShortName: PuHemoDatAvail  
 ParentLongName: VD-Pulmonic Hemodynamic Data Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* VD-Pulmonic Valve Disease *SeqNo:* 1828  
*Short Name:* **VDPulm** *Core:* Yes  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether Pulmonic Valve disease is present.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

1 Yes  
2 No

*Long Name:* VD-Pulmonic-RVEDD Known *SeqNo:* 1830  
*Short Name:* **RVEDDKnown** *Core:* No  
*Section Name:* Hemodynamics/Cath/Echo *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the Right Ventricular End-Diastolic Dimension (RVEDD) is available.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VDPulm  
 ParentLongName: VD-Pulmonic Valve Disease  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
Code: Value:  
 1 Yes

2 No	
<i>Long Name:</i>	VD-Pulmonic-RVEDD Indexed To BSA <span style="float: right;"><i>SeqNo:</i> 1835</span>
<i>Short Name:</i>	<b>RVEDD</b> <span style="float: right;"><i>Core:</i> No</span>
<i>Section Name:</i>	Hemodynamics/Cath/Echo <span style="float: right;"><i>Harvest:</i> No</span>
<i>DBTableName</i>	Adultdata2
<i>Definition:</i>	Indicate (in cm squared) the RVEDD indexed to BSA.
<i>Data Source:</i>	User <span style="float: right;"><i>Format:</i> Real</span>
Low Value:	0.5 <span style="margin-left: 100px;">High Value: 5.0</span>
ParentShortName:	RVEDDKnown
ParentLongName:	VD-Pulmonic-RVEDD Known
ParentHarvestCodes:	1
ParentValues:	= "Yes"

<i>Long Name:</i>	VD-Pulmonic Valve Disease Etiology <span style="float: right;"><i>SeqNo:</i> 1855</span>
<i>Short Name:</i>	<b>VDPuEt</b> <span style="float: right;"><i>Core:</i> Yes</span>
<i>Section Name:</i>	Hemodynamics/Cath/Echo <span style="float: right;"><i>Harvest:</i> Yes</span>
<i>DBTableName</i>	Adultdata2
<i>Definition:</i>	Indicate the primary etiology of pulmonic valve disease.
<i>Data Source:</i>	User <span style="float: right;"><i>Format:</i> Text (categorical values specified by STS)</span>
ParentShortName:	VDPulm
ParentLongName:	VD-Pulmonic Valve Disease
ParentHarvestCodes:	1
ParentValues:	= "Yes"

- Harvest Codes:
- | <u>Code:</u> | <u>Value:</u>  |
|--------------|--|
| 1            | Acquired   |
| 10           | Radiation induced heart disease                            |
| 2            | Congenital, s/p Tetralogy of Fallot (TOF) repair           |
| 3            | Congenital, no prior Tetralogy of Fallot (TOF) repair      |
| 7            | Reoperation - Failure of previous PV repair or replacement |
| 11           | Endocarditis   |
| 12           | Endocarditis, Prosthetic Valve                             |
| 8            | Mixed Etiology   |
| 5            | Other  |

## 9 Not Documented

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*Long Name:* Surgeon *SeqNo:* 1955  
*Short Name:* **Surgeon** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the name of the surgeon responsible for the patient's care.  
  
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.  
*Data Source:* User *Format:* Text (categorical values specified by User)

---

*Long Name:* Surgeon's National Provider Identifier *SeqNo:* 1960  
*Short Name:* **SurgNPI** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the individual-level National Provider Identifier of the surgeon performing the procedure.  
For Non-US surgeons a unique identifier will be assigned by STS.  
*Data Source:* Lookup *Format:* Text (categorical values specified by User)

---

*Long Name:* Taxpayer Identification Number *SeqNo:* 1965  
*Short Name:* **TIN** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Taxpayer Identification Number for the Taxpayer holder of record for the Surgeon's  
National Provider Identifier that performed the procedure. This may be an individual TIN or a  
group TIN depending on billing. This information is vital for MIPS reporting.  
This field will be blank for Non-US participants  
*Data Source:* Lookup *Format:* Text (categorical values specified by User)

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*Long Name:* STS Risk Calculator Score Discussed *SeqNo:* 1966  
*Short Name:* **RiskDiscussed** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the STS Risk Calculator score was discussed with the patient/family prior to surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes, STS risk calculator score was calculated and discussed with the patient/family prior to surgery as documented in the medical record
- 2 No, STS risk calculator score was available for the scheduled procedure but not discussed with the patient/family prior to surgery or discussion was not documented.
- 3 NA, not applicable (emergent or salvage case, or no risk model available for this procedure)

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*Long Name:* Incidence *SeqNo:* 1970  
*Short Name:* **Incidenc** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if this is the patient's:  
 -first surgery  
 -first re-op surgery  
 -second re-op surgery  
 -third re-op surgery  
 -fourth or more re-op surgery.  
 -NA - not a cardiovascular surgery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 First cardiovascular surgery
- 2 First re-op cardiovascular surgery

- 
- 3 Second re-op cardiovascular surgery
  - 4 Third re-op cardiovascular surgery
  - 5 Fourth or more re-op cardiovascular surgery
  - 6 NA - Not a cardiovascular surgery
- 

*Long Name:* Status *SeqNo:* 1975  
*Short Name:* **Status** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the clinical status of the patient prior to entering the operating room.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Elective	The patient's cardiac function has been stable in the days or weeks prior to the operation. The procedure could be deferred without increased risk of compromised cardiac outcome.
2	Urgent	Procedure required during same hospitalization in order to minimize chance of further clinical deterioration. Examples include but are not limited to: Worsening, sudden chest pain, CHF, acute myocardial infarction (AMI), anatomy, IABP, unstable angina (USA) with intravenous (IV) nitroglycerin (NTG) or rest angina.
3	Emergent	Patients requiring emergency operations will have ongoing, refractory (difficult, complicated, and/or unmanageable) unrelenting cardiac compromise, with or without hemodynamic instability, and not responsive to any form of therapy except cardiac surgery. An emergency operation is one in which there should be no delay in providing operative intervention.
4	Emergent Salvage	The patient is undergoing CPR en route to the OR or prior to anesthesia induction or has ongoing ECMO to maintain life.

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*Long Name:* Urgent, Emergent or Emergent Salvage Reason *SeqNo:* 1990

*Short Name:* **UrgEmergRsn** *Core:* Yes

*Section Name:* Operative *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Choose one reason from the list below that best describes why this operation was considered urgent, emergent, or emergent/salvage.

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

ParentShortName: Status

ParentLongName: Status

ParentHarvestCodes: 2|3|4

ParentValues: = "Urgent", "Emergent" or "Emergent Salvage"

Harvest Codes:

Code: Value:

- |    |   |
|----|---|
| 1  | AMI   |
| 2  | Anatomy   |
| 3  | Aortic Aneurysm   |
| 4  | Aortic Dissection   |
| 5  | CHF   |
| 6  | Device Failure  |
| 7  | Diagnostic/Interventional<br>Procedure Complication                     |
| 8  | Endocarditis  |
| 28 | Failed Transcatheter Valve<br>Therapy - Acute, annular<br>disruption    |
| 29 | Failed Transcatheter Valve<br>Therapy - Acute, device<br>malposition    |
| 30 | Failed Transcatheter Valve<br>Therapy - Subacute, device<br>dysfunction |
| 10 | IABP  |
| 11 | Infected Device   |
| 12 | Intracardiac mass or thrombus   |
| 13 | Ongoing Ischemia  |
| 14 | PCI Incomplete without<br>clinical deterioration                        |
| 15 | PCI or attempted PCI with<br>clinical deterioration                     |
| 16 | Pulmonary Edema   |
| 17 | Pulmonary Embolus   |
| 18 | Rest Angina   |
| 19 | Shock Circulatory Support   |
| 20 | Shock No Circulatory Support  |

- 21 Syncope
- 22 Transplant
- 23 Trauma
- 24 USA
- 25 Valve Dysfunction
- 26 Worsening CP
- 27 Other

*Long Name:* Previously Attempted Case Canceled *SeqNo:* 1995

*Short Name:* **PCancCase** *Core:* No

*Section Name:* Operative *Harvest:* No

*DBTableName* Adultdata1

*Definition:* Indicate whether this case was previously attempted during this admission and canceled or aborted after patient entered the operating room.

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

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* Previously Attempted Canceled Case Date *SeqNo:* 2000

*Short Name:* **PCancCaseDt** *Core:* No

*Section Name:* Operative *Harvest:* No

*DBTableName* Adultdata1

*Definition:* Enter date previously attempted case was canceled.

*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: PCancCase

ParentLongName: Previously Attempted Case Canceled

ParentHarvestCodes: 1

ParentValues: = "Yes"

<i>Long Name:</i>	Previously Attempted Canceled Case Timing	<i>SeqNo:</i>	2005
<i>Short Name:</i>	<b>PCancCaseTmg</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate at what point previously attempted case was canceled or aborted.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	PCancCase		
<i>ParentLongName:</i>	Previously Attempted Case Canceled		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Prior to Induction of Anesthesia	
	2	After Induction, Prior to Incision	
	3	After Incision Made	

<i>Long Name:</i>	Previously Attempted Canceled Case Reason	<i>SeqNo:</i>	2010
<i>Short Name:</i>	<b>PCancCaseRsn</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the reason why the previously attempted case was canceled or aborted.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	PCancCase		
<i>ParentLongName:</i>	Previously Attempted Case Canceled		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes and Value Definitions:</i>			
	<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
	1	Anesthesiology event	Includes airway, line insertion and medication issues encountered during induction
	2	Cardiac arrest	Patient deterioration unrelated to induction
	3	Equipment/supply issue	Device malfunction or supply issue including devices and blood products
	6	Access issue	
	4	Unanticipated tumor	
	7	Donor organ unacceptable	
	8	Abnormal labs	
	5	Other	

*Long Name:* Previously Attempted Canceled Case Procedure - CABG *SeqNo:* 2015  
*Short Name:* **PCancCaseCAB** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included coronary artery bypass grafting.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PCancCase  
 ParentLongName: Previously Attempted Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Previously Attempted Canceled Case Procedure - Mechanical Assist Device *SeqNo:* 2020  
*Short Name:* **PCancCaseMech** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included implanting or explanting a mechanical assist device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PCancCase  
 ParentLongName: Previously Attempted Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Previously Attempted Canceled Case Procedure - Other Non-Cardiac *SeqNo:* 2025  
*Short Name:* **PCancCaseONC** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included any other non-cardiac procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PCancCase  
 ParentLongName: Previously Attempted Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Previously Attempted Canceled Case Procedure - Valve, Surgical *SeqNo:* 2030  
*Short Name:* **PCancCaseValSur** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included a surgical valve procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PCancCase  
 ParentLongName: Previously Attempted Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Previously Attempted Canceled Case Procedure - Valve, Transcatheter *SeqNo:* 2035  
*Short Name:* **PCancCaseValTrans** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included a transcatheter valve procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PCancCase  
 ParentLongName: Previously Attempted Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Previously Attempted Canceled Case Procedure - Other Cardiac *SeqNo:* 2040  
*Short Name:* **PCancCaseOC** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included any other cardiac procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PCancCase  
 ParentLongName: Previously Attempted Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Current Case Canceled *SeqNo:* 2050  
*Short Name:* **CCancCase** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the current case was canceled or aborted after patient entered the operating room.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* Current Case Canceled Timing *SeqNo:* 2055  
*Short Name:* **CCancCaseTmg** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate at what point the current case was canceled or aborted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CCancCase

ParentLongName: Current Case Canceled

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Prior to Induction of Anesthesia
2	After Induction, Prior to Incision
3	After Incision Made

<i>Long Name:</i>	Current Case Canceled Reason	<i>SeqNo:</i>	2060
<i>Short Name:</i>	<b>CCancCaseRsn</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the reason why the current case was canceled or aborted.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	CCancCase		
ParentLongName:	Current Case Canceled		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
<b>Harvest Codes and Value Definitions:</b>			
<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>	
1	Anesthesiology event	Includes airway, line insertion and medication issues encountered during induction	
2	Cardiac arrest	Patient deterioration unrelated to induction	
3	Equipment/supply issue	Device malfunction or supply issue including devices and blood products	
6	Access issue		
4	Unanticipated tumor		
7	Donor organ unacceptable		
8	Abnormal labs		
5	Other		

<i>Long Name:</i>	Current Case Canceled Procedure - CABG	<i>SeqNo:</i>	2065
<i>Short Name:</i>	<b>CCancCaseCAB</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the plan for the current procedure included coronary artery bypass grafting.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	CCancCase		
ParentLongName:	Current Case Canceled		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		
<b>Harvest Codes:</b>			
<u>Code:</u>	<u>Value:</u>		
1	Yes		
2	No		



*Long Name:* Current Case Canceled Procedure - Mechanical Assist Device *SeqNo:* 2075  
*Short Name:* **CCancCaseMech** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the current procedure included implanting or explanting a mechanical assist device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CCancCase  
 ParentLongName: Current Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Current Case Canceled Procedure - Other Non-cardiac *SeqNo:* 2080  
*Short Name:* **CCancCaseONC** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the current procedure included any other non-cardiac procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CCancCase  
 ParentLongName: Current Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Current Case Canceled Procedure - Valve, Surgical *SeqNo:* 2085  
*Short Name:* **CCancCaseValSur** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included a surgical valve procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CCancCase  
 ParentLongName: Current Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Current Case Canceled Procedure - Valve, Transcatheter *SeqNo:* 2090  
*Short Name:* **CCancCaseValTrans** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the plan for the previously attempted procedure included a transcatheter valve procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CCancCase  
 ParentLongName: Current Case Canceled  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

<i>Long Name:</i>	Current Case Canceled Procedure - Other Cardiac	<i>SeqNo:</i>	2095
<i>Short Name:</i>	<b>CCancCaseOC</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the plan for the current procedure included any other cardiac procedure.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CCancCase		
<i>ParentLongName:</i>	Current Case Canceled		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u> <u>Value:</u>		
	1 Yes		
	2 No		

<i>Long Name:</i>	Operative Approach	<i>SeqNo:</i>	2100
<i>Short Name:</i>	<b>OPApp</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the initial operative approach.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Full conventional sternotomy
2	Partial sternotomy
8	Sub-xiphoid
19	Thoracotomy
14	Thoracoabdominal incision
15	Percutaneous
16	Port access
17	Other

---

*Long Name:* Operative Approach Converted *SeqNo:* 2105  
*Short Name:* **ApproachCon** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the operative approach was converted during the procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:  
 4 Yes  
 3 No

---

*Long Name:* Robot Used *SeqNo:* 2110  
*Short Name:* **Robotic** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a robot was used during any part of the surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:  
 1 Yes  
 2 No

---

*Long Name:* Robot Use Time Frame *SeqNo:* 2115  
*Short Name:* **RobotTim** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the time frame of robotic use.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Robotic

ParentLongName: Robot Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:  
 1 Used for entire operation  
 2 Used for part of the operation

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---

*Long Name:* CAB *SeqNo:* 2120  
*Short Name:* **OpCAB** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether coronary artery bypass grafting was done.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 3 Yes, planned
  - 4 Yes, unplanned due to surgical complication
  - 5 Yes, unplanned due to unsuspected disease or anatomy
  - 2 No
- 

*Long Name:* Aorta Procedure Performed *SeqNo:* 2123  
*Short Name:* **AortProc** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a procedure was performed on the aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 3 Yes, planned
  - 4 Yes, unplanned due to surgical complication
  - 5 Yes, unplanned due to unsuspected disease or anatomy
  - 2 No
-

---

*Long Name:* Surgeon Input for Aortic Surgery Data Abstraction *SeqNo:* 2124  
*Short Name:* **AortProcSurgInput** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the surgeon provided input for the aortic surgery data abstraction.

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Valve *SeqNo:* 2129  
*Short Name:* **OpValve** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether a surgical procedure was done on the Aortic, Mitral, Tricuspid or Pulmonic valves.

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

Harvest Codes:

Code: Value:

1 Yes

2 No

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---

*Long Name:* Valve Prosthesis Explant *SeqNo:* 2130  
*Short Name:* **ValExp** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a prosthetic valve or annuloplasty was explanted during this procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpValve  
ParentLongName: Valve  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* VS-Aortic Valve *SeqNo:* 2131  
*Short Name:* **VSAV** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether an aortic valve procedure was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpValve  
ParentLongName: Valve  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
3 Yes, planned  
4 Yes, unplanned due to surgical complication  
5 Yes, unplanned due to unsuspected disease or anatomy  
2 No

---

---

*Long Name:* AV-Aorta Procedure Performed *SeqNo:* 2132  
*Short Name:* **AVAortaProcPerf** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a patient who underwent a procedure on the aortic valve also had a procedure on the thoracic aorta during this same procedure or during a planned hybrid/staged procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VSAV  
ParentLongName: VS-Aortic Valve  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* VS-Mitral Valve *SeqNo:* 2133  
*Short Name:* **VSMV** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a mitral valve procedure was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpValve  
ParentLongName: Valve  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
3 Yes, planned  
4 Yes, unplanned due to surgical complication  
5 Yes, unplanned due to unsuspected disease or anatomy  
2 No

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*Long Name:* VS-Tricuspid Valve *SeqNo:* 2134  
*Short Name:* **VSTV** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether a tricuspid valve procedure was performed.

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

ParentShortName: OpValve

ParentLongName: Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Yes, planned
  - 4 Yes, unplanned due to surgical complication
  - 5 Yes, unplanned due to unsuspected disease or anatomy
  - 2 No
- 

*Long Name:* VS-Pulmonic Valve *SeqNo:* 2135  
*Short Name:* **VSPV** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether a pulmonic valve procedure was performed.

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

ParentShortName: OpValve

ParentLongName: Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Yes, planned
  - 4 Yes, unplanned due to surgical complication
  - 5 Yes, unplanned due to unsuspected disease or anatomy
  - 2 No
-

*Long Name:* Surgeon Input for Valve Surgery Data Abstraction *SeqNo:* 2136  
*Short Name:* **OpValSurgInput** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether the surgeon provided input for the valve surgery data abstraction.

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

ParentShortName: OpValve

ParentLongName: Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Mechanical Assist Device / Ventricular Assist Device *SeqNo:* 2137  
*Short Name:* **MechVentAssistDevice** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate if a patient had a mechanical assist device or ventricular assist device present on admission, or implanted, or explanted during this admission.

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

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Other Cardiac Procedure, except Afib *SeqNo:* 2140  
*Short Name:* **OpOCard** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether another cardiac procedure was done (other than CABG or Valve or Aorta or Afib procedures).

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

Harvest Codes:

Code: Value:

3 Yes, planned

4 Yes, unplanned due to

- surgical complication
- 5 Yes, unplanned due to unsuspected disease or anatomy
- 2 No

---

*Long Name:* Atrial Fibrillation Procedure Performed *SeqNo:* 2145  
*Short Name:* **AFibProc** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether an atrial fibrillation procedure was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* Surgeon Input for Other Cardiac Afib Data Abstraction *SeqNo:* 2146  
*Short Name:* **AFibProcSurgInput** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the surgeon provided input for the other cardiac Afib procedure data abstraction.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AFibProc

ParentLongName: Atrial Fibrillation Procedure Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* Other Cardiac Congenital Except Unicuspid, Bicuspid, or Quadricuspid Valve *SeqNo:* 2150  
*Short Name:* **OCarCong** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had a congenital defect repair either in conjunction with, or as the primary surgical procedure. Do not include ASD - Secumidium, PFO, Unicuspid, Bicuspid, Qudracuspid Valve here as these are captured elsewhere.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Other Non Card *SeqNo:* 2155  
*Short Name:* **OpONCard** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a non-cardiac procedure was done.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* CPT-1 Code # 1 *SeqNo:* 2195  
*Short Name:* **CPT1Code1** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the first CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5

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*Long Name:* CPT-1 Code # 2 *SeqNo:* 2200  
*Short Name:* **CPT1Code2** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the second CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
ParentShortName: CPT1Code1  
ParentLongName: CPT-1 Code # 1  
ParentHarvestCodes: Is Not Missing  
ParentValues: Is Not Missing

---

*Long Name:* CPT-1 Code # 3 *SeqNo:* 2205  
*Short Name:* **CPT1Code3** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the third CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
ParentShortName: CPT1Code2  
ParentLongName: CPT-1 Code # 2  
ParentHarvestCodes: Is Not Missing  
ParentValues: Is Not Missing

---

*Long Name:* CPT-1 Code # 4 *SeqNo:* 2210  
*Short Name:* **CPT1Code4** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the fourth CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
ParentShortName: CPT1Code3  
ParentLongName: CPT-1 Code # 3  
ParentHarvestCodes: Is Not Missing  
ParentValues: Is Not Missing

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*Long Name:* CPT-1 Code # 5 *SeqNo:* 2215  
*Short Name:* **CPT1Code5** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the fifth CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
*ParentShortName:* CPT1Code4  
*ParentLongName:* CPT-1 Code # 4  
*ParentHarvestCodes:* Is Not Missing  
*ParentValues:* Is Not Missing

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*Long Name:* CPT-1 Code # 6 *SeqNo:* 2220  
*Short Name:* **CPT1Code6** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the sixth CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
*ParentShortName:* CPT1Code5  
*ParentLongName:* CPT-1 Code # 5  
*ParentHarvestCodes:* Is Not Missing  
*ParentValues:* Is Not Missing

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*Long Name:* CPT-1 Code # 7 *SeqNo:* 2225  
*Short Name:* **CPT1Code7** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the seventh CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
 ParentShortName: CPT1Code6  
 ParentLongName: CPT-1 Code # 6  
 ParentHarvestCodes: Is Not Missing  
 ParentValues: Is Not Missing

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*Long Name:* CPT-1 Code # 8 *SeqNo:* 2230  
*Short Name:* **CPT1Code8** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the eighth CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
 ParentShortName: CPT1Code7  
 ParentLongName: CPT-1 Code # 7  
 ParentHarvestCodes: Is Not Missing  
 ParentValues: Is Not Missing

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*Long Name:* CPT-1 Code # 9 *SeqNo:* 2235  
*Short Name:* **CPT1Code9** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the ninth CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
 ParentShortName: CPT1Code8  
 ParentLongName: CPT-1 Code # 8  
 ParentHarvestCodes: Is Not Missing  
 ParentValues: Is Not Missing

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*Long Name:* CPT-1 Code # 10 *SeqNo:* 2240  
*Short Name:* **CPT1Code10** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate, if applicable, the tenth CPT procedure code (CPT-1) pertaining to the surgery for which the data collection form was initiated.  
*Data Source:* User *Format:* Text - Length exactly 5  
*ParentShortName:* CPT1Code9  
*ParentLongName:* CPT-1 Code # 9  
*ParentHarvestCodes:* Is Not Missing  
*ParentValues:* Is Not Missing

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*Long Name:* OR Entry Date And Time *SeqNo:* 2245  
*Short Name:* **OREntryDT** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date and time, to the nearest minute (using 24-hour clock), that the patient entered the operating room. If the procedure was performed in a location other than the OR, record the time when the sterile field, or its equivalent, was set up.  
*Data Source:* User *Format:* Date and time in the format mm/dd/yyyy hh:mm with the time in 24-hour clock

---

*Long Name:* OR Exit Date And Time *SeqNo:* 2250  
*Short Name:* **ORExitDT** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date and time, to the nearest minute (using 24-hour clock), that the patient exits the operating room. If the procedure was performed in a location other than the OR, record the time when the sterile field, or its equivalent, was taken down.  
*Data Source:* User *Format:* Date and time in the format mm/dd/yyyy hh:mm with the time in 24-hour clock

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*Long Name:* General Anesthesia *SeqNo:* 2251  
*Short Name:* **GenAnes** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether general anesthesia was used at any time during this procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Procedural Sedation *SeqNo:* 2252  
*Short Name:* **ProcSed** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the procedure was performed under sedation (also referred to as “moderate sedation” or “conscious sedation”) and not general anesthesia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: GenAnes

ParentLongName: General Anesthesia

ParentHarvestCodes: 2

ParentValues: = "No"

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* Intubation *SeqNo:* 2253  
*Short Name:* **Intubate** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the status of intubation.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

ParentShortName: GenAnes

ParentLongName: General Anesthesia

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes, prior to entering OR for this procedure
  - 2 Yes, in the OR for this procedure
  - 3 No
-

<i>Long Name:</i>	Initial Intubation Date And Time	<i>SeqNo:</i>	2255
<i>Short Name:</i>	<b>IntubateDT</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	<p>Indicate the date (mm/dd/yyyy) and time (hh:mm) (24 hour clock) ventilatory support started. The following guidelines apply:</p> <ol style="list-style-type: none"> <li>1. Capture the intubation closest to the surgical start time. If the patient was intubated upon admission and remained intubated until the surgical start time, capture this intubation's date and time.</li> <li>2. If the patient was admitted intubated (intubated at another institution) and remained continually intubated until the surgical start time, capture the patient's admission date and time.</li> <li>3. If the patient was admitted with a tracheostomy in place without ventilatory support, capture the date and time closest to the surgical start time that ventilatory support was initiated.</li> <li>4. If the patient was admitted with a tracheostomy in place receiving chronic ventilatory support, capture the admission date and time.</li> <li>5. If the intubation date and time is otherwise unknown, enter the date and time the patient entered the operating room.</li> <li>6. Do not alter the previously established date and time that ventilatory support was initiated for scenarios including, but not limited to, interruptions in ventilatory support due to accidental extubation/de-cannulation, elective tube change etc.</li> </ol>		
<i>Data Source:</i>	User	<i>Format:</i>	Date and time in the format mm/dd/yyyy hh:mm with the time in 24-hour clock
<i>ParentShortName:</i>	Intubate		
<i>ParentLongName:</i>	Intubation		
<i>ParentHarvestCodes:</i>	1 2		
<i>ParentValues:</i>	= "Yes, prior to entering OR for this procedure" or "Yes, in the OR for this procedure"		

<i>Long Name:</i>	Skin Incision Start Date And Time	<i>SeqNo:</i>	2265
<i>Short Name:</i>	<b>SISstartDT</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	<p>Indicate the date and time, to the nearest minute (using 24-hour clock), that the first skin incision, or its equivalent, was made.</p>		
<i>Data Source:</i>	User	<i>Format:</i>	Date and time in the format mm/dd/yyyy hh:mm with the time in 24-hour clock

*Long Name:* Skin Incision Stop Date And Time *SeqNo:* 2270  
*Short Name:* **SISStopDT** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date and time, to the nearest minute (using 24-hour clock), that the skin incision was closed, or its equivalent. If the patient leaves the operating room with an open incision, collect the time that the dressings were applied to the incision.  
*Data Source:* User *Format:* Date and time in the format mm/dd/yyyy hh:mm with the time in 24-hour clock

*Long Name:* Anesthesia End Date and Time *SeqNo:* 2275  
*Short Name:* **AnesEndDT** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the anesthesia end time documented in the medical record. The definition of anesthesia end time is when the anesthesiologist is no longer in personal attendance, that is, when the patient is safely placed under post-anesthesia supervision.  
*Data Source:* User *Format:* Date and time in the format mm/dd/yyyy hh:mm with the time in 24-hour clock

*Long Name:* Appropriate Antibiotic Selection *SeqNo:* 2280  
*Short Name:* **AbxSelect** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if there was documentation of an order for a first generation or second generation cephalosporin prophylactic antibiotic, documentation that it was given preoperatively or in the event of a documented allergy an alternate antibiotic choice is ordered and administered.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Yes	
2	No	
3	Exclusion	The reason for not ordering appropriate prophylactic antibiotic is documented in the medical record.

*Long Name:* Appropriate Antibiotic Administration Timing *SeqNo:* 2285  
*Short Name:* **AbxTiming** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether prophylactic antibiotics were initiated/started within one hour of surgical incision or start of procedure if no incision required (two hours if receiving Vancomycin or fluoroquinolone). If no incision is required, then the antibiotic must be started by the start of the procedure.

The surgical incision time is the time of the first incision, regardless of location.

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

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Yes	Given
2	No	Not given, no documented reason
3	Exclusion	Documented contraindication or rationale for not administering antibiotic in medical record

*Long Name:* Appropriate Antibiotic Discontinuation *SeqNo:* 2290  
*Short Name:* **AbxDisc** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the prophylactic antibiotics were ordered to be discontinued OR were discontinued within 48 hours after surgery end time.

Determining the timeframe (within 48 hours) begins at the "surgical end time".

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

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Exclusion

<i>Long Name:</i>	Additional Intraoperative Prophylactic Antibiotic Dose	<i>SeqNo:</i>	2295
<i>Short Name:</i>	<b>AddIntraopPAnti</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether an additional prophylactic antibiotic dose was given in the operating room.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Temperature Measured	<i>SeqNo:</i>	2296
<i>Short Name:</i>	<b>TempMeas</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient's temperature was measured during the procedure.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

**Harvest Codes:**

	<u>Code:</u>	<u>Value:</u>
	1	Yes
	2	No

<i>Long Name:</i>	Lowest Temperature	<i>SeqNo:</i>	2300
<i>Short Name:</i>	<b>LwstTemp</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Record the patient's lowest core temperature in the operating room in degrees centigrade.		
<i>Data Source:</i>	User	<i>Format:</i>	Real

Low Value: 5.0      High Value: 40.0

ParentShortName: TempMeas

ParentLongName: Temperature Measured

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Lowest Temperature Source *SeqNo:* 2305  
*Short Name:* **LwstTempSrc** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the source where the lowest core temperature was measured.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: TempMeas

ParentLongName: Temperature Measured

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Esophageal
  - 2 CPB venous return
  - 3 Bladder
  - 4 Nasopharyngeal
  - 5 Tympanic
  - 6 Rectal
  - 9 Jugular-Venous
  - 10 Oxygenator arterial outlet  
blood (CPB Arterial Blood)
  - 11 Pulmonary Artery
  - 7 Other
  - 8 Unknown
- 

*Long Name:* Lowest Intra-op Hemoglobin *SeqNo:* 2310  
*Short Name:* **LwstIntraHemo** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Enter the lowest measured hemoglobin recorded in the operating room.  
*Data Source:* User *Format:* Real  
Low Value: 1.00    High Value: 50.00    UsualRangeLow: 6.00    UsualRangeHigh: 15.00

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*Long Name:* Lowest Hematocrit *SeqNo:* 2315  
*Short Name:* **LwstHct** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Enter the lowest measured hematocrit recorded in the operating room.  
*Data Source:* User *Format:* Real  
Low Value: 1.00      High Value: 99.99      UsualRangeLow: 17.00      UsualRangeHigh: 40.00

---

*Long Name:* Highest Intra-op Glucose *SeqNo:* 2320  
*Short Name:* **HighIntraGlu** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Enter the highest glucose recorded in the operating room.  
*Data Source:* User *Format:* Integer  
Low Value: 40      High Value: 2000      UsualRangeLow: 80      UsualRangeHigh: 300

---

*Long Name:* Perfusion Strategy *SeqNo:* 2325  
*Short Name:* **CPBUtil** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the level of CPB or coronary perfusion used during the procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

#### Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	None	No CPB or coronary perfusion used during the procedure.
4	Left Heart Bypass	Left heart bypass
2	Combination	With or without CPB and/or with or without coronary perfusion at any time during the procedure (capture conversions from off-pump to on-pump only):  At start of procedure: No CPB/No Coronary Perfusion -> conversion to -> CPB At start of procedure: No CPB/No Coronary Perfusion -> conversion to -> Coronary perfusion At start of procedure: No CPB/No Coronary Perfusion -> conversion to -> Coronary perfusion -> conversion to -> CPB
3	Full	CPB or coronary perfusion was used for the entire procedure



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*Long Name:* CPB Utilization - Combination Plan *SeqNo:* 2330  
*Short Name:* **CPBCmb** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the combination procedure from off-pump to on-pump was a planned or an unplanned conversion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* CPBUtil

*ParentLongName:* Perfusion Strategy

*ParentHarvestCodes:* 2

*ParentValues:* = "Combination"

*Harvest Codes and Value Definitions:*

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Planned	The surgeon intended to treat with any of the combination options described in "CPB utilization".
2	Unplanned	The surgeon did not intend to treat with any of the combination options described in "CPB utilization".

---

*Long Name:* CPB Utilization - Unplanned Combination Reason *SeqNo:* 2335  
*Short Name:* **CPBCmbR** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason that the procedure required the initiation of CPB and/or coronary perfusion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* CPBCmb

*ParentLongName:* CPB Utilization - Combination Plan

*ParentHarvestCodes:* 2

*ParentValues:* = "Unplanned"

*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Exposure/visualization
2	Bleeding
3	Inadequate size and/or diffuse disease of distal vessel
4	Hemodynamic instability (hypotension/arrhythmias)
5	Conduit quality and/or trauma
9	Other

---

*Long Name:* Arterial Cannulation Insertion Site *SeqNo:* 2336  
*Short Name:* **ArtCannInsertSite** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the insertion site for the arterial cannulation. If multiple cannulation occurred, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: CPBUtil

ParentLongName: Perfusion Strategy

ParentHarvestCodes: 4|2|3

ParentValues: = "Left Heart Bypass", "Combination" or "Full"

Harvest Codes:

Code: Value:

- 1 Aortic
- 2 Axillary
- 3 Femoral
- 4 Innominate
- 5 Other

*Long Name:* Cannulation - Arterial Cannulation Site - Aortic *SeqNo:* 2340  
*Short Name:* **CanArtStAort** *Core:* No  
*Section Name:* Operative *Harvest:* No

*DBTableName* Adultdata1

*Definition:* Indicate whether the arterial cannulation site included the aorta.

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

ParentShortName: CPBUtil

ParentLongName: Perfusion Strategy

ParentHarvestCodes: 2|3

ParentValues: = "Combination" or "Full"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Cannulation - Arterial Cannulation Site - Femoral *SeqNo:* 2345  
*Short Name:* **CanArtStFem** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the arterial cannulation site included a femoral artery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Arterial Cannulation Site - Axillary *SeqNo:* 2350  
*Short Name:* **CanArtStAx** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the arterial cannulation site included an axillary artery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Arterial Cannulation Site - Innominate *SeqNo:* 2355  
*Short Name:* **CanArtStInn** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the arterial cannulation site included an innominate artery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Arterial Cannulation Site - Other *SeqNo:* 2360  
*Short Name:* **CanArtStOth** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the arterial cannulation site included any other artery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Venous Cannulation Insertion Site *SeqNo:* 2361  
*Short Name:* **VenCannInsertSite** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the insertion site of the venous cannulation. If multiple cannulations occurred, select all that apply.

*Data Source:* User *Format:* Multi-Select

*ParentShortName:* CPBUtil

*ParentLongName:* Perfusion Strategy

*ParentHarvestCodes:* 4|2|3

*ParentValues:* = "Left Heart Bypass", "Combination" or "Full"

*Harvest Codes:*

Code: Value:

- 1 Femoral
- 2 Pulmonary Vein
- 3 Jugular
- 4 SVC
- 5 Rt. Atrial
- 6 Lt. Atrial
- 7 Other

*Long Name:* Cannulation - Venous Cannulation Site - Femoral *SeqNo:* 2365  
*Short Name:* **CanVenStFem** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included a femoral vein.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* CPBUtil

*ParentLongName:* Perfusion Strategy

*ParentHarvestCodes:* 2|3

*ParentValues:* = "Combination" or "Full"

*Harvest Codes:*

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Cannulation - Venous Cannulation Site - Jugular *SeqNo:* 2370  
*Short Name:* **CanVenStJug** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included a jugular vein.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Venous Cannulation Site - Right Atrial *SeqNo:* 2375  
*Short Name:* **CanVenStRtA** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included the right atrium.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Venous Cannulation Site - Left Atrial *SeqNo:* 2380  
*Short Name:* **CanVenStLfA** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included the left atrium.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Venous Cannulation Site - Pulmonary Vein *SeqNo:* 2385  
*Short Name:* **CanVenStPulm** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included a pulmonary vein.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Cannulation - Venous Cannulation Site - Caval/Bicaval *SeqNo:* 2390  
*Short Name:* **CanVenStBi** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included the superior and/or inferior vena cava.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Cannulation - Venous Cannulation Site - Other *SeqNo:* 2395  
*Short Name:* **CanVenStOth** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the venous (inflow) cannulation site included any other site.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPBUtil  
 ParentLongName: Perfusion Strategy  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Combination" or "Full"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No



---

*Long Name:* Cardiopulmonary Bypass Time *SeqNo:* 2400  
*Short Name:* **PerfusTm** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the total number of minutes that systemic return is diverted into the cardiopulmonary bypass (CPB) circuit and returned to the systemic system. This time period (Cardiopulmonary Bypass Time) includes all periods of cerebral perfusion and sucker bypass. This time period (Cardiopulmonary Bypass Time) excludes any circulatory arrest and modified ultrafiltration periods. If more than one period of CPB is required during the surgical procedure, the sum of all the CPB periods will equal the total number of CPB minutes.

*Data Source:* User *Format:* Integer  
 Low Value: 1 High Value: 1500 UsualRangeLow: 1 UsualRangeHigh: 300  
*ParentShortName:* CPBUtil  
*ParentLongName:* Perfusion Strategy  
*ParentHarvestCodes:* 4|2|3  
*ParentValues:* = "Left Heart Bypass", "Combination" or "Full"

---

*Long Name:* Circulatory Arrest *SeqNo:* 2405  
*Short Name:* **CircArr** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether or not circulatory arrest was utilized during the procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* Lowest Hematocrit during CPB *SeqNo:* 2406  
*Short Name:* **LowestHematocritCPB** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's lowest hematocrit after CPB initiation and prior to CPB discontinuation.  
*Data Source:* User *Format:* Real  
Low Value: 1.00      High Value: 99.99      UsualRangeLow: 18.00      UsualRangeHigh: 55.00  
ParentShortName: CircArr  
ParentLongName: Circulatory Arrest  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Circulatory Arrest Time Without Cerebral Perfusion *SeqNo:* 2410  
*Short Name:* **DHCATm** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of minutes of deep hypothermic circulatory arrest without cerebral perfusion. If more than one period of circulatory arrest is required during this surgical procedure, the sum of these periods is equal to the total duration of circulatory arrest.  
*Data Source:* User *Format:* Integer  
Low Value: 0      High Value: 300  
ParentShortName: CircArr  
ParentLongName: Circulatory Arrest  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* Circulatory Arrest With Cerebral Perfusion *SeqNo:* 2415  
*Short Name:* **CPerfUtil** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether circulatory arrest with cerebral perfusion was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CircArr  
ParentLongName: Circulatory Arrest  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Yes  
        2 No

---

*Long Name:* Cerebral Perfusion Time *SeqNo:* 2420  
*Short Name:* **CPerfTime** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of minutes cerebral perfusion was performed. This would include antegrade and/or retrograde cerebral perfusion strategies.  
*Data Source:* User *Format:* Integer  
Low Value: 1      High Value: 999  
ParentShortName: CPerfUtil  
ParentLongName: Circulatory Arrest With Cerebral Perfusion  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

---

*Long Name:* Cerebral Perfusion Type *SeqNo:* 2425  
*Short Name:* **CPerfTyp** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate type of cerebral perfusion utilized.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CPerfUtil  
 ParentLongName: Circulatory Arrest With Cerebral Perfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Antegrade  
         2 Retrograde  
         3 Both antegrade and retrograde

---

*Long Name:* Total Circulatory Arrest Time *SeqNo:* 2426  
*Short Name:* **TotCircArrTm** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Calculated variable measuring circulatory arrest without cerebral perfusion time plus any cerebral perfusion time.  
*Data Source:* Calculated *Format:* Integer  
 Low Value: 0      High Value: 1299  
 ParentShortName: CircArr  
 ParentLongName: Circulatory Arrest  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

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*Long Name:* Cooling Time prior to Circ Arrest *SeqNo:* 2427  
*Short Name:* **CoolingTimePriorCircArr** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the time it took to cool the patient prior to circulatory arrest. This is the time from CPB initiation to start of circulatory arrest.  
*Data Source:* User *Format:* Real  
 Low Value: 1.00 High Value: 100.00 UsualRangeLow: 10.00 UsualRangeHigh: 60.00  
 ParentShortName: CircArr  
 ParentLongName: Circulatory Arrest  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Aortic Occlusion *SeqNo:* 2430  
*Short Name:* **AortOccl** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the technique of aortic occlusion used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 5 None - beating heart
  - 6 None - fibrillating heart
  - 2 Aortic Crossclamp
  - 3 Balloon Occlusion
-

---

*Long Name:* Cross Clamp Time (min) *SeqNo:* 2435  
*Short Name:* **XClampTm** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of minutes that the coronary circulation is mechanically isolated from systemic circulation, either by an aortic cross clamp or systemic circulatory arrest.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 600 UsualRangeLow: 0 UsualRangeHigh: 180  
 ParentShortName: AortOccl  
 ParentLongName: Aortic Occlusion  
 ParentHarvestCodes: 2|3  
 ParentValues: = "Aortic Crossclamp" or "Balloon Occlusion"

---

*Long Name:* Cardioplegia Delivery *SeqNo:* 2440  
*Short Name:* **CplegiaDeliv** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the delivery method of cardioplegia if used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 None
  - 2 Antegrade
  - 3 Retrograde
  - 4 Both
-

*Long Name:* Cardioplegia Type *SeqNo:* 2445  
*Short Name:* **CplegiaType** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the type of cardioplegia used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* CplegiaDeliv  
*ParentLongName:* Cardioplegia Delivery  
*ParentHarvestCodes:* 2|3|4  
*ParentValues:* = "Antegrade", "Retrograde" or "Both"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Blood
2	Crystalloid
3	Both
4	Other

*Long Name:* Cerebral Oximetry Used *SeqNo:* 2450  
*Short Name:* **CerOxUsed** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether cerebral oximetry was used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*Harvest Codes:*  
Code: Value:  
 1 Yes  
 2 No

*Long Name:* Diffuse Aortic Calcification (Porcelain Aorta) *SeqNo:* 2490  
*Short Name:* **ConCalc** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether diffuse or concentric calcification of the aorta was discovered preoperatively or Intraoperatively using imaging or palpation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*Harvest Codes:*  
Code: Value:  
 1 Yes

2 No

*Long Name:* Assessment of Ascending Aorta/Arch *SeqNo:* 2495  
*Short Name:* **AsmtAscAA** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the Ascending Aorta/Arch was evaluated for atheroma or plaque during surgery using TEE or epiaortic ultrasound. (Not intended for assessment of aneurysmal disease or dissection.)  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Not reported

*Long Name:* Method of Assessment of Aorta Plaque *SeqNo:* 2497  
*Short Name:* **AsmtAoDxMeth** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the method of assessing the highest grade of atheroma or plaque in the ascending aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AsmtAscAA

ParentLongName: Assessment of Ascending Aorta/Arch

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 TEE
- 2 Epiaortic ultrasound
- 3 CT scan
- 4 Other diagnostic modality



<i>Long Name:</i>	Assessment of Aorta Plaque	<i>SeqNo:</i>	2500
<i>Short Name:</i>	<b>AsmtAoDx</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate highest grade of atheroma or plaque in the ascending aorta.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	AsmtAscAA		
<i>ParentLongName:</i>	Assessment of Ascending Aorta/Arch		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Normal aorta / No or minimal plaque	
	2	Extensive intimal thickening	
	3	Protruding Atheroma < 5 mm	
	4	Protruding Atheroma >= 5 mm	
	5	Mobile plaques	
	6	Not documented	

<i>Long Name:</i>	Aortic Condition Altered Plan	<i>SeqNo:</i>	2505
<i>Short Name:</i>	<b>AsmtAPln</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether aortic assessment changed cannulation strategy or surgical plan.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Intraop Blood Products Refused	<i>SeqNo:</i>	2510
<i>Short Name:</i>	<b>IBldProdRef</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient or family refused blood products.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Intraop Blood Products	<i>SeqNo:</i>	2515
<i>Short Name:</i>	<b>IBldProd</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether blood products were transfused any time intraoperatively during the initial surgery. Intraoperatively is defined as any blood started after OR Entry before OR Exit.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No, not given	
	3	Patient Refused	

<i>Long Name:</i>	Intraop Blood Products - RBC Units	<i>SeqNo:</i>	2520
<i>Short Name:</i>	<b>IBdRBCU</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the number of units of packed red blood cells that were transfused intraoperatively. Do not include autologous, cell-saver, pump-residual or chest tube recirculated blood.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	0	High Value:	300
		UsualRangeLow:	0
		UsualRangeHigh:	20
ParentShortName:	IBldProd		
ParentLongName:	Intraop Blood Products		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

---

*Long Name:* Intraop Blood Products - Platelet Dose Pack *SeqNo:* 2521  
*Short Name:* **IBdPlatDosePk** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of platelet dose packs administered from OR Entry to OR Exit. A dose pack is not the same as unit. Please see intent/clarification for further direction.  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 99  
ParentShortName: IBldProd  
ParentLongName: Intraop Blood Products  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Intraop Blood Products - FFP/Plasma Units *SeqNo:* 2525  
*Short Name:* **IBdFFPU** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the number of units of fresh frozen plasma that were transfused intraoperatively.  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 300 UsualRangeLow: 0 UsualRangeHigh: 10  
ParentShortName: IBldProd  
ParentLongName: Intraop Blood Products  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

<i>Long Name:</i>	Intraop Blood Products - Platelet Units	<i>SeqNo:</i>	2530
<i>Short Name:</i>	<b>IBdPlatU</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the number of units of platelets that were transfused intraoperatively.  Count the dose pack as one unit. A dose pack may consist of 4, 6, 8, 10, or any number of donor platelets obtained. The number of units coded is not volume dependent.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	0	High Value:	99
ParentShortName:	IBldProd		
ParentLongName:	Intraop Blood Products		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

<i>Long Name:</i>	Intraop Blood Products - Cryo Units	<i>SeqNo:</i>	2535
<i>Short Name:</i>	<b>IBdCryoU</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the number of units of cryoprecipitate that were transfused intraoperatively. One bag of cryo = one unit. The number of units is not volume dependent.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	0	High Value:	300
ParentShortName:	IBldProd		
ParentLongName:	Intraop Blood Products		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

*Long Name:* Intraop Clotting Factors *SeqNo:* 2545  
*Short Name:* **IntraClotFact** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether clotting factors were administered intraoperatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes, Factor VIIa
- 5 Yes, Factor VIII
- 2 Yes, FEIBA
- 3 Yes, Composite
- 4 No

*Long Name:* Intraop Prothrombin Complex Concentrate *SeqNo:* 2546  
*Short Name:* **IntraopProComCon** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether prothrombin complex concentrate (i.e.K-Centra)was given intraoperatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Intraop Antifibrinolytic Medications - Epsilon Amino-Caproic Acid *SeqNo:* 2550  
*Short Name:* **IMedEACA** *Core:* No  
*Section Name:* Operative *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient received Epsilon Amino-Caproic Acid in the operating room.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

<i>Long Name:</i>	Intraop Antifibrinolytic Medications - Tranexamic Acid	<i>SeqNo:</i>	2555
<i>Short Name:</i>	<b>IMedTran</b>	<i>Core:</i>	No
<i>Section Name:</i>	Operative	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient received Tranexamic Acid in the operating room.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Intraop Antifibrinolytic Medication Given	<i>SeqNo:</i>	2556
<i>Short Name:</i>	<b>IAntifibMedGiven</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate if an antifibrinolytic medication was used from OR Entry to OR Exit.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Intraop Antifibrinolytic Medication	<i>SeqNo:</i>	2557
<i>Short Name:</i>	<b>IAntifibMed</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Operative	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate which antifibrinolytic medication was used from OR Entry to OR Exit. If more than one was administered, choose all that apply.		
<i>Data Source:</i>	User	<i>Format:</i>	Multi-Select
<i>ParentShortName:</i>	IAntifibMedGiven		
<i>ParentLongName:</i>	Intraop Antifibrinolytic Medication Given		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Epsilon Amino-Caproic Acid	
	2	Tranexamic Acid	
	3	Aprotinin	

---

*Long Name:* Intraop TEE post procedure *SeqNo:* 2560  
*Short Name:* **InOpTEE** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a transesophageal echocardiogram (TEE) was performed after CPB prior to OR Exit time.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* Post Repair TEE Highest Level Aortic Insufficiency *SeqNo:* 2565  
*Short Name:* **PRepAR** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the highest level of aortic insufficiency/ regurgitation found on post CPB intraop TEE prior to and closest to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: InOpTEE

ParentLongName: Intraop TEE post procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

## Harvest Codes:

Code: Value:

- 1 None
  - 2 Trivial/Trace
  - 3 Mild
  - 4 Moderate
  - 5 Severe
  - 6 Not documented
-

---

*Long Name:* Aortic Gradient - Post Repair Mean *SeqNo:* 2566  
*Short Name:* **PRepAGradM** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the mean aortic valve gradient in mmHg on TEE in the OR post Cardiopulmonary Bypass, prior to and closest to OR Exit.  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 200.0  
 ParentShortName: InOpTEE  
 ParentLongName: Intraop TEE post procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Post Repair Aortic Paravalvular Leak *SeqNo:* 2567  
*Short Name:* **PRepAPVL** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was an aortic paravalvular leak noted on TEE in the OR after Cardiopulmonary Bypass, prior to and closest to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: InOpTEE  
 ParentLongName: Intraop TEE post procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

Harvest Codes:

Code: Value:

- 7 No Prosthetic Valve
  - 1 None
  - 2 Trivial/Trace
  - 3 Mild
  - 4 Moderate
  - 5 Severe
  - 6 Not documented
-



*Long Name:* Post Repair TEE Highest Level Mitral Insufficiency *SeqNo:* 2570  
*Short Name:* **PRepMR** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the highest level of mitral insufficiency/ regurgitation found on post Cardiopulmonary Bypass intraop TEE prior to and closest to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: InOpTEE

ParentLongName: Intraop TEE post procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

*Long Name:* Mitral Gradient - Post Repair Mean *SeqNo:* 2571  
*Short Name:* **PRepMGradM** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the mean mitral valve gradient in mmHg on TEE in the OR post Cardiopulmonary Bypass, after the procedure prior to and closest to OR Exit.  
*Data Source:* User *Format:* Real

Low Value: 0.0 High Value: 30.0

ParentShortName: InOpTEE

ParentLongName: Intraop TEE post procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

*Long Name:* Post Repair Mitral Paravalvular Leak *SeqNo:* 2572  
*Short Name:* **PRepMPVL** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether there was a mitral paravalvular leak noted on TEE in the OR after Cardiopulmonary Bypass, prior to and closest to OR Exit.

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

ParentShortName: InOpTEE

ParentLongName: Intraop TEE post procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 7 No Prosthetic Valve
- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

*Long Name:* Post Repair TEE Highest Level Tricuspid Insufficiency *SeqNo:* 2575  
*Short Name:* **PRepTR** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the highest level of tricuspid insufficiency/ regurgitation found on post Cardiopulmonary Bypass intraop TEE prior to and closest to OR Exit.

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

ParentShortName: InOpTEE

ParentLongName: Intraop TEE post procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

---

*Long Name:* Tricuspid Gradient - Post Repair Mean *SeqNo:* 2576  
*Short Name:* **PRepTGradM** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the mean tricuspid valve gradient in mmHg on TEE in the OR post Cardiopulmonary Bypass, after the procedure prior to and closest to OR Exit.  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 100.0  
ParentShortName: InOpTEE  
ParentLongName: Intraop TEE post procedure  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Post Repair Tricuspid Paravalvular Leak *SeqNo:* 2577  
*Short Name:* **PRepTPVL** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was a tricuspid paravalvular leak noted on TEE in the OR after Cardiopulmonary Bypass, prior to and closest to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: InOpTEE  
ParentLongName: Intraop TEE post procedure  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

Harvest Codes:

Code: Value:

- 7 No Prosthetic Valve
  - 1 None
  - 2 Trivial/Trace
  - 3 Mild
  - 4 Moderate
  - 5 Severe
  - 6 Not documented
-

---

*Long Name:* Ejection Fraction Measured Post Procedure *SeqNo:* 2581  
*Short Name:* **PPEFMeas** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the ejection fraction was measured on TEE in the OR after Cardiopulmonary Bypass, prior to and closest to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: InOpTEE  
ParentLongName: Intraop TEE post procedure  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Ejection Fraction Post Procedure *SeqNo:* 2582  
*Short Name:* **PPEF** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the ejection fraction noted on TEE in the OR after Cardiopulmonary Bypass, prior to and closest to OR Exit.  
*Data Source:* User *Format:* Real  
Low Value: 1.0 High Value: 99.0 UsualRangeLow: 5.0 UsualRangeHigh: 90.0  
ParentShortName: PPEFMeas  
ParentLongName: Ejection Fraction Measured Post Procedure  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Planned Post Procedure PCI *SeqNo:* 2606  
*Short Name:* **PPPlannedPCI** *Core:* Yes  
*Section Name:* Operative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the procedure was followed by a planned PCI.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
Harvest Codes:  
Code: Value:

- 
- 1 Yes
  - 2 No
- 

*Long Name:* Internal Mammary Artery Used *SeqNo:* 2626  
*Short Name:* **IMAUsed** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether an internal mammary artery conduit was used

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Left IMA Used *SeqNo:* 2627  
*Short Name:* **LeftIMA** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the left internal mammary was used

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

ParentShortName: IMAUsed

ParentLongName: Internal Mammary Artery Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes, pedicle
  - 2 Yes, skeletonized
  - 3 No / NA
-

*Long Name:* Right IMA Used *SeqNo:* 2628  
*Short Name:* **RightIMA** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether the right internal mammary was used

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

ParentShortName: IMAUsed

ParentLongName: Internal Mammary Artery Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes, pedicle
- 2 Yes, skeletonized
- 3 No / NA

*Long Name:* Reason for No IMA *SeqNo:* 2629  
*Short Name:* **NoIMARsn** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate PRIMARY reason Internal Mammary artery was not used as documented in medical record.

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

ParentShortName: IMAUsed

ParentLongName: Internal Mammary Artery Used

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes and Value Definitions:

Code: Value:

Definition:

- 2 Subclavian stenosis
- 3 Previous cardiac or thoracic surgery
- 4 Previous mediastinal radiation
- 5 Emergent or salvage procedure
- 6 No (bypassable) LAD disease Includes LAD with no bypassable disease.
- 8 Other - acceptable STS provided exclusion (See Training Manual)
- 7 Other - not acceptable STS exclusion (See Training

## Manual)

*Long Name:* Distal Anastomoses with Arterial Conduit(s) *SeqNo:* 2630  
*Short Name:* **DistAnastArtCond** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate if an anastomosis was placed which had a distal portion made of artery. This could be one arterial graft or a composite graft with the distal portion of the composite being arterial.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Total Number of Distal Anastomoses with Arterial Conduits *SeqNo:* 2631  
*Short Name:* **TotalNoDistAnastArtCond** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the total number of arterial grafts (any graft where the distal portion is arterial).

*Data Source:* User *Format:* Integer

Low Value: 1 High Value: 10

ParentShortName: DistAnastArtCond

ParentLongName: Distal Anastomoses with Arterial Conduit(s)

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Distal Anastomoses with Radial Artery Conduit(s) Used *SeqNo:* 2633  
*Short Name:* **RadialArtUsed** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a radial artery conduit was used  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DistAnastArtCond

ParentLongName: Distal Anastomoses with Arterial Conduit(s)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Radial Dist Anast # *SeqNo:* 2634  
*Short Name:* **NumRadDA** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of distal anastomoses done using radial artery grafts.  
*Data Source:* User *Format:* Integer

Low Value: 0 High Value: 6

ParentShortName: RadialArtUsed

ParentLongName: Distal Anastomoses with Radial Artery Conduit(s) Used

ParentHarvestCodes: 1

ParentValues: = "Yes"



---

*Long Name:* Radial Artery Harvest and Preparation Time *SeqNo:* 2636  
*Short Name:* **RadHarvPrepTm** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total time for radial artery harvest and preparation.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 240.00  
 ParentShortName: RadialArtUsed  
 ParentLongName: Distal Anastomoses with Radial Artery Conduit(s) Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Distal Anastomoses with Venous Conduit(s) Used *SeqNo:* 2637  
*Short Name:* **VenousCondUsed** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a venous conduit was used  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpCAB  
 ParentLongName: CAB  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Total Number of Distal Anastomoses with Venous Conduits *SeqNo:* 2638  
*Short Name:* **DistVein** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of distal anastomoses with venous conduits.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 9  
 ParentShortName: VenousCondUsed  
 ParentLongName: Distal Anastomoses with Venous Conduit(s) Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Saphenous Vein Harvest And Preparation Time *SeqNo:* 2640  
*Short Name:* **SaphHarPrepTm** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total time for saphenous vein harvest and preparation.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 240.00  
 ParentShortName: VenousCondUsed  
 ParentLongName: Distal Anastomoses with Venous Conduit(s) Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* IMA Dist Anast # *SeqNo:* 2668  
*Short Name:* **NumIMADA** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the total number of distal anastomoses done using IMA grafts.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 6  
 ParentShortName: IMAUsed  
 ParentLongName: Internal Mammary Artery Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Left IMA Harvest Technique *SeqNo:* 2670  
*Short Name:* **LIMAHarvTech** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the harvest technique used for the left internal mammary  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftIMA  
 ParentLongName: Left IMA Used  
 ParentHarvestCodes: 1|2  
 ParentValues: = "Yes, pedicle" or "Yes, skeletonized"  
 Harvest Codes:  
     Code: Value:  
     1 Direct Vision (open)  
     2 Thoracoscopy  
     3 Combination  
     4 Robotic Assist

*Long Name:* Right IMA Harvest Technique *SeqNo:* 2672  
*Short Name:* **RIMAHarvTech** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the harvest technique used for the right internal mammary  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RightIMA  
 ParentLongName: Right IMA Used  
 ParentHarvestCodes: 1|2  
 ParentValues: = "Yes, pedicle" or "Yes, skeletonized"  
 Harvest Codes:  
     Code: Value:  
     1 Direct Vision (open)  
     2 Thoracoscopy  
     3 Combination  
     4 Robotic Assist

*Long Name:* Radial Dist Anast Harvest Technique *SeqNo:* 2675  
*Short Name:* **RadHTech** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the technique used to harvest the radial artery(s).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RadialArtUsed  
 ParentLongName: Distal Anastomoses with Radial Artery Conduit(s) Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Endoscopic  
         2 Direct Vision (open)  
         3 Both

*Long Name:* Dist Anast - Vein Harvest Technique *SeqNo:* 2679  
*Short Name:* **DistVeinHTech** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the technique used to harvest the vein graft(s).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VenousCondUsed  
 ParentLongName: Distal Anastomoses with Venous Conduit(s) Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Endoscopic  
         2 Direct Vision (open)  
         3 Both  
         4 Cryopreserved

*Long Name:* Other Arterial Distal Anastomoses # *SeqNo:* 2681  
*Short Name:* **NumOArtD** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the number of arterial distal anastomoses that were used, other than radial or IMA.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 6  
 ParentShortName: OpCAB  
 ParentLongName: CAB  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Number Of Distal Anastomoses With Arterial-Venous Composit Conduits *SeqNo:* 2690  
*Short Name:* **NumArtVenComp** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the number of distal anastomoses with arterial-venous composite conduits  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5  
 ParentShortName: OpCAB  
 ParentLongName: CAB  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Number Of Distal Anastomoses With Venous-Arterial Composit Conduits *SeqNo:* 2691  
*Short Name:* **NumVenArtComp** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the number of distal anastomoses with venous-arterial composite conduits  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5  
 ParentShortName: OpCAB  
 ParentLongName: CAB  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Number Of Distal Anastomoses With Arterial-Arterial Composite Conduits *SeqNo:* 2692  
*Short Name:* **NumArtArtComp** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the number of distal anastomoses with arterial-arterial composite conduits  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 5  
 ParentShortName: OpCAB  
 ParentLongName: CAB  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

---

*Long Name:* Proximal Technique *SeqNo:* 2710  
*Short Name:* **ProxTech** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the technique employed for proximal graft anastomosis.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Single Cross Clamp
  - 2 Partial Occlusion Clamp
  - 3 Anastomotic Assist Device
  - 4 None
- 

*Long Name:* CAB Proximal Site 01 *SeqNo:* 2730  
*Short Name:* **CABProximalSite01** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 12 Aorta
  - 13 T graft off artery
  - 14 T graft off vein
  - 15 In-situ IMA
  - 11 Other
-

*Long Name:* CAB Distal Site 01 *SeqNo:* 2740  
*Short Name:* **CABDistSite01** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate distal insertion site of bypass.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

15 Left Main Coronary Artery  
(LMCA)  
 18 LAD  
 19 Diagonal  
 10 Ramus Intermedius  
 17 Circumflex  
 20 Obtuse Marginal  
 1 RCA  
 3 Posterior Descending (PDA)  
 4 Posterolateral (PLB)  
 2 Acute Marginal (AM)  
 21 None

*Long Name:* CAB Conduit 01 *SeqNo:* 2750  
*Short Name:* **CABConduit01** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the conduit type used.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

9 In-situ IMA  
 4 Free IMA



---

1 Vein  
5 Radial artery  
10 Other

---

*Long Name:* CAB Distal Position 01 *SeqNo:* 2755  
*Short Name:* **CABDistPos01** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate anastomotic position.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

2 Side to Side  
1 End to Side

---

*Long Name:* CAB Endarterectomy 01 *SeqNo:* 2760  
*Short Name:* **CABEndArt01** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether endarterectomy was performed.

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

ParentShortName: OpCAB

ParentLongName: CAB

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No

---

<i>Long Name:</i>	CAB Vein Patch Angioplasty 01	<i>SeqNo:</i>	2765
<i>Short Name:</i>	<b>CABVeinPatAng01</b>	<i>Core:</i>	No
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a vein patch angioplasty was performed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OpCAB		
<i>ParentLongName:</i>	CAB		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	CAB 02	<i>SeqNo:</i>	2770
<i>Short Name:</i>	<b>CAB02</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a second Coronary Artery Bypass graft was done.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OpCAB		
<i>ParentLongName:</i>	CAB		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Additional Grafts	
	2	No Additional Grafts	

*Long Name:* CAB Proximal Site 02 *SeqNo:* 2790  
*Short Name:* **CABProximalSite02** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: CAB02

ParentLongName: CAB 02

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

12 Aorta  
 13 T graft off artery  
 14 T graft off vein  
 15 In-situ IMA  
 11 Other

*Long Name:* CAB Distal Site 02 *SeqNo:* 2800  
*Short Name:* **CABDistSite02** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate distal insertion site of bypass.

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

ParentShortName: CAB02

ParentLongName: CAB 02

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

Code: Value:

Definition:

15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch

---

2	Acute Marginal	Acute Marginal
21	None	

---

*Long Name:* CAB Conduit 02 *SeqNo:* 2810  
*Short Name:* **CABConduit02** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the conduit type used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB02

ParentLongName: CAB 02

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

9	In-situ IMA
4	Free IMA
1	Vein
5	Radial artery
10	Other

---

*Long Name:* CAB Distal Position 02 *SeqNo:* 2815  
*Short Name:* **CABDistPos02** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate anastomotic position.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB02

ParentLongName: CAB 02

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

2	Side to Side
1	End to Side

---

*Long Name:* CAB Endarterectomy 02 *SeqNo:* 2820  
*Short Name:* **CABEndArt02** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB02  
 ParentLongName: CAB 02  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* CAB Vein Patch Angioplasty 02 *SeqNo:* 2825  
*Short Name:* **CABVeinPatAng02** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a vein patch angioplasty was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB02  
 ParentLongName: CAB 02  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* CAB 03 *SeqNo:* 2830  
*Short Name:* **CAB03** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether a third Coronary Artery Bypass graft was done.

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

ParentShortName: CAB02

ParentLongName: CAB 02

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 1 Additional Grafts
  - 2 No Additional Grafts
- 

*Long Name:* CAB Proximal Site 03 *SeqNo:* 2850  
*Short Name:* **CABProximalSite03** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: CAB03

ParentLongName: CAB 03

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 12 Aorta
  - 13 T graft off artery
  - 14 T graft off vein
  - 15 In-situ IMA
  - 11 Other
-

*Long Name:* CAB Distal Site 03 *SeqNo:* 2860  
*Short Name:* **CABDistSite03** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB03  
 ParentLongName: CAB 03  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch
2	Acute Marginal	Acute Marginal
21	None	

*Long Name:* CAB Conduit 03 *SeqNo:* 2870  
*Short Name:* **CABConduit03** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the conduit type used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB03  
 ParentLongName: CAB 03  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein

- 5 Radial artery
- 10 Other

*Long Name:* CAB Distal Position 03 *SeqNo:* 2875  
*Short Name:* **CABDistPos03** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate anastomotic position.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB03  
 ParentLongName: CAB 03  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 2            | Side to Side  |
| 1            | End to Side   |

*Long Name:* CAB Endarterectomy 03 *SeqNo:* 2880  
*Short Name:* **CABEndArt03** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB03  
 ParentLongName: CAB 03  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |



<i>Long Name:</i>	CAB Vein Patch Angioplasty 03	<i>SeqNo:</i>	2885
<i>Short Name:</i>	<b>CABVeinPatAng03</b>	<i>Core:</i>	No
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a vein patch angioplasty was performed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	CAB03		
ParentLongName:	CAB 03		
ParentHarvestCodes:	1		
ParentValues:	= "Additional Grafts"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	CAB 04	<i>SeqNo:</i>	2890
<i>Short Name:</i>	<b>CAB04</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a fourth Coronary Artery Bypass graft was done.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	CAB03		
ParentLongName:	CAB 03		
ParentHarvestCodes:	1		
ParentValues:	= "Additional Grafts"		
Harvest Codes:			
	<u>Code:</u>	<u>Value:</u>	
	1	Additional Grafts	
	2	No Additional Grafts	

*Long Name:* CAB Proximal Site 04 *SeqNo:* 2910  
*Short Name:* **CABProximalSite04** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: CAB04

ParentLongName: CAB 04

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
12	Aorta
13	T graft off artery
14	T graft off vein
15	In-situ IMA
11	Other

*Long Name:* CAB Distal Site 04 *SeqNo:* 2920  
*Short Name:* **CABDistSite04** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate distal insertion site of bypass.

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

ParentShortName: CAB04

ParentLongName: CAB 04

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch

2	Acute Marginal	Acute Marginal
21	None	

<i>Long Name:</i>	CAB Conduit 04	<i>SeqNo:</i>	2930
<i>Short Name:</i>	<b>CABConduit04</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the conduit type used.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

ParentShortName: CAB04  
 ParentLongName: CAB 04  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein
5	Radial artery
10	Other

<i>Long Name:</i>	CAB Distal Position 04	<i>SeqNo:</i>	2935
<i>Short Name:</i>	<b>CABDistPos04</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate anastomotic position.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

ParentShortName: CAB04  
 ParentLongName: CAB 04  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
2	Side to Side
1	End to Side

*Long Name:* CAB Endarterectomy 04 *SeqNo:* 2940  
*Short Name:* **CABEndArt04** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether endarterectomy was performed.

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

ParentShortName: CAB04

ParentLongName: CAB 04

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* CAB Vein Patch Angioplasty 04 *SeqNo:* 2945  
*Short Name:* **CABVeinPatAng04** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No

*DBTableName* Adultdata1

*Definition:* Indicate whether a vein patch angioplasty was performed.

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

ParentShortName: CAB04

ParentLongName: CAB 04

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* CAB 05 *SeqNo:* 2950  
*Short Name:* **CAB05** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether a fifth Coronary Artery Bypass graft was done.

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

ParentShortName: CAB04

ParentLongName: CAB 04

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 1 Additional Grafts
  - 2 No Additional Grafts
- 

*Long Name:* CAB Proximal Site 05 *SeqNo:* 2970  
*Short Name:* **CABProximalSite05** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: CAB05

ParentLongName: CAB 05

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 12 Aorta
  - 13 T graft off artery
  - 14 T graft off vein
  - 15 In-situ IMA
  - 11 Other
-

*Long Name:* CAB Distal Site 05 *SeqNo:* 2980  
*Short Name:* **CABDistSite05** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB05

ParentLongName: CAB 05

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch
2	Acute Marginal	Acute Marginal
21	None	

*Long Name:* CAB Conduit 05 *SeqNo:* 2990  
*Short Name:* **CABConduit05** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the conduit type used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB05

ParentLongName: CAB 05

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein

- 5 Radial artery
- 10 Other

*Long Name:* CAB Distal Position 05 *SeqNo:* 2995  
*Short Name:* **CABDistPos05** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate anastomotic position.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB05  
 ParentLongName: CAB 05  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 2            | Side to Side  |
| 1            | End to Side   |

*Long Name:* CAB Endarterectomy 05 *SeqNo:* 3000  
*Short Name:* **CABEndArt05** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB05  
 ParentLongName: CAB 05  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |

<i>Long Name:</i>	CAB Vein Patch Angioplasty 05	<i>SeqNo:</i>	3005
<i>Short Name:</i>	<b>CABVeinPatAng05</b>	<i>Core:</i>	No
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a vein patch angioplasty was performed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CAB05		
<i>ParentLongName:</i>	CAB 05		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Additional Grafts"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	CAB 06	<i>SeqNo:</i>	3010
<i>Short Name:</i>	<b>CAB06</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a sixth Coronary Artery Bypass graft was done.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CAB05		
<i>ParentLongName:</i>	CAB 05		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Additional Grafts"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Additional Grafts	
	2	No Additional Grafts	



*Long Name:* CAB Proximal Site 06 *SeqNo:* 3030  
*Short Name:* **CABProximalSite06** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate proximal site of the bypass graft.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB06

ParentLongName: CAB 06

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

12 Aorta  
13 T graft off artery  
14 T graft off vein  
15 In-situ IMA  
11 Other

*Long Name:* CAB Distal Site 06 *SeqNo:* 3040  
*Short Name:* **CABDistSite06** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB06

ParentLongName: CAB 06

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

Code: Value:

Definition:

15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch

2	Acute Marginal	Acute Marginal
21	None	

<i>Long Name:</i>	CAB Conduit 06	<i>SeqNo:</i>	3050
<i>Short Name:</i>	<b>CABConduit06</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the conduit type used.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

ParentShortName: CAB06  
 ParentLongName: CAB 06  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein
5	Radial artery
10	Other

<i>Long Name:</i>	CAB Distal Position 06	<i>SeqNo:</i>	3055
<i>Short Name:</i>	<b>CABDistPos06</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate anastomotic position.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

ParentShortName: CAB06  
 ParentLongName: CAB 06  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
2	Side to Side
1	End to Side

*Long Name:* CAB Endarterectomy 06 *SeqNo:* 3060  
*Short Name:* **CABEndArt06** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB06  
 ParentLongName: CAB 06  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* CAB Vein Patch Angioplasty 06 *SeqNo:* 3065  
*Short Name:* **CABVeinPatAng06** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a vein patch angioplasty was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB06  
 ParentLongName: CAB 06  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* CAB 07 *SeqNo:* 3070  
*Short Name:* **CAB07** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether a seventh Coronary Artery Bypass graft was done.

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

ParentShortName: CAB06

ParentLongName: CAB 06

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 1 Additional Grafts
  - 2 No Additional Grafts
- 

*Long Name:* CAB Proximal Site 07 *SeqNo:* 3090  
*Short Name:* **CABProximalSite07** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: CAB07

ParentLongName: CAB 07

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 12 Aorta
  - 13 T graft off artery
  - 14 T graft off vein
  - 15 In-situ IMA
  - 11 Other
-

*Long Name:* CAB Distal Site 07 *SeqNo:* 3100  
*Short Name:* **CABDistSite07** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB07

ParentLongName: CAB 07

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch
2	Acute Marginal	Acute Marginal
21	None	

*Long Name:* CAB Conduit 07 *SeqNo:* 3110  
*Short Name:* **CABConduit07** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the conduit type used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB07

ParentLongName: CAB 07

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein

5 Radial artery  
10 Other

---

*Long Name:* CAB Distal Position 07 *SeqNo:* 3115  
*Short Name:* **CABDistPos07** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate anastomotic position.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB07

ParentLongName: CAB 07

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

2 Side to Side  
1 End to Side

---

*Long Name:* CAB Endarterectomy 07 *SeqNo:* 3120  
*Short Name:* **CABEndArt07** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB07

ParentLongName: CAB 07

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

1 Yes  
2 No

<i>Long Name:</i>	CAB Vein Patch Angioplasty 07	<i>SeqNo:</i>	3125
<i>Short Name:</i>	<b>CABVeinPatAng07</b>	<i>Core:</i>	No
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a vein patch angioplasty was performed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CAB07		
<i>ParentLongName:</i>	CAB 07		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Additional Grafts"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	CAB 08	<i>SeqNo:</i>	3130
<i>Short Name:</i>	<b>CAB08</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether an eighth Coronary Artery Bypass graft was done.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CAB07		
<i>ParentLongName:</i>	CAB 07		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Additional Grafts"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Additional Grafts	
	2	No Additional Grafts	

*Long Name:* CAB Proximal Site 08 *SeqNo:* 3150  
*Short Name:* **CABProximalSite08** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate proximal site of the bypass graft.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB08

ParentLongName: CAB 08

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

12	Aorta
13	T graft off artery
14	Tgraft off vein
15	In-situ IMA
11	Other

*Long Name:* CAB Distal Site 08 *SeqNo:* 3160  
*Short Name:* **CABDistSite08** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB08

ParentLongName: CAB 08

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

Code: Value:

Definition:

15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch



---

2	Acute Marginal	Acute Marginal
21	None	

---

*Long Name:* CAB Conduit 08 *SeqNo:* 3170  
*Short Name:* **CABConduit08** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the conduit type used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB08  
 ParentLongName: CAB 08  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein
5	Radial artery
10	Other

---

*Long Name:* CAB Distal Position 08 *SeqNo:* 3175  
*Short Name:* **CABDistPos08** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate anastomotic position.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB08  
 ParentLongName: CAB 08  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
2	Side to Side
1	End to Side

---

*Long Name:* CAB Endarterectomy 08 *SeqNo:* 3180  
*Short Name:* **CABEndArt08** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB08  
 ParentLongName: CAB 08  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* CAB Vein Patch Angioplasty 08 *SeqNo:* 3185  
*Short Name:* **CABVeinPatAng08** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a vein patch angioplasty was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB08  
 ParentLongName: CAB 08  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* CAB 09 *SeqNo:* 3190  
*Short Name:* **CAB09** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether a ninth Coronary Artery Bypass graft was done.

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

ParentShortName: CAB08

ParentLongName: CAB 08

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 1 Additional Grafts
  - 2 No Additional Grafts
- 

*Long Name:* CAB Proximal Site 09 *SeqNo:* 3210  
*Short Name:* **CABProximalSite09** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate proximal site of the bypass graft.

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

ParentShortName: CAB09

ParentLongName: CAB 09

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

- 12 Aorta
  - 13 T graft off artery
  - 14 T graft off vein
  - 15 In-situ IMA
  - 11 Other
-

*Long Name:* CAB Distal Site 09 *SeqNo:* 3220  
*Short Name:* **CABDistSite09** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB09

ParentLongName: CAB 09

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch
2	Acute Marginal	Acute Marginal
21	None	

*Long Name:* CAB Conduit 09 *SeqNo:* 3230  
*Short Name:* **CABConduit09** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the conduit type used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB09

ParentLongName: CAB 09

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein

- 5 Radial artery
- 10 Other

*Long Name:* CAB Distal Position 09 *SeqNo:* 3235  
*Short Name:* **CABDistPos09** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate anastomotic position.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB09  
 ParentLongName: CAB 09  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 2            | Side to Side  |
| 1            | End to Side   |

*Long Name:* CAB Endarterectomy 09 *SeqNo:* 3240  
*Short Name:* **CABEndArt09** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB09  
 ParentLongName: CAB 09  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |

<i>Long Name:</i>	CAB Vein Patch Angioplasty 09	<i>SeqNo:</i>	3245
<i>Short Name:</i>	<b>CABVeinPatAng09</b>	<i>Core:</i>	No
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a vein patch angioplasty was performed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CAB09		
<i>ParentLongName:</i>	CAB 09		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Additional Grafts"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	CAB 10	<i>SeqNo:</i>	3250
<i>Short Name:</i>	<b>CAB10</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether a tenth Coronary Artery Bypass graft was done.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CAB09		
<i>ParentLongName:</i>	CAB 09		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Additional Grafts"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Additional Grafts	
	2	No Additional Grafts	

*Long Name:* CAB Proximal Site 10 *SeqNo:* 3270  
*Short Name:* **CABProximalSite10** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate proximal site of the bypass graft.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB10

ParentLongName: CAB 10

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes:

Code: Value:

12	Aorta
13	T graft off artery
14	T graft off vein
15	In-situ IMA
11	Other

*Long Name:* CAB Distal Site 10 *SeqNo:* 3280  
*Short Name:* **CABDistSite10** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal insertion site of bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAB10

ParentLongName: CAB 10

ParentHarvestCodes: 1

ParentValues: = "Additional Grafts"

Harvest Codes and Value Definitions:

Code: Value:

Definition:

15	Left Main Coronary Artery (LMCA)	Left Main
18	LAD	
19	Diagonal	
10	Ramus Intermedius	Ramus Intermedius
17	Circumflex	Circumflex
20	Obtuse Marginal	
1	RCA	Right Coronary Artery
3	PDA	Posterior Descending Artery
4	Posterior Lateral	Posterolateral Branch

2	Acute Marginal	Acute Marginal
21	None	

<i>Long Name:</i>	CAB Conduit 10	<i>SeqNo:</i>	3290
<i>Short Name:</i>	<b>CABConduit10</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the conduit type used.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

ParentShortName: CAB10  
 ParentLongName: CAB 10  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
9	In-situ IMA
4	Free IMA
1	Vein
5	Radial artery
10	Other

<i>Long Name:</i>	CAB Distal Position 10	<i>SeqNo:</i>	3295
<i>Short Name:</i>	<b>CABDistPos10</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Coronary Bypass	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate anastomotic position.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

ParentShortName: CAB10  
 ParentLongName: CAB 10  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
2	Side to Side
1	End to Side



*Long Name:* CAB Endarterectomy 10 *SeqNo:* 3300  
*Short Name:* **CABEndArt10** *Core:* Yes  
*Section Name:* Coronary Bypass *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endarterectomy was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB10  
 ParentLongName: CAB 10  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* CAB Vein Patch Angioplasty 10 *SeqNo:* 3305  
*Short Name:* **CABVeinPatAng10** *Core:* No  
*Section Name:* Coronary Bypass *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a vein patch angioplasty was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CAB10  
 ParentLongName: CAB 10  
 ParentHarvestCodes: 1  
 ParentValues: = "Additional Grafts"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* First Valve Prosthesis Explant Position *SeqNo:* 3315  
*Short Name:* **ValExpPos** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location of the first explanted prosthetic valve or annuloplasty device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ValExp

ParentLongName: Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Aortic
- 2 Mitral
- 3 Tricuspid
- 4 Pulmonic

*Long Name:* First Valve Explant Type *SeqNo:* 3320  
*Short Name:* **ValExpTyp** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the first type of valve device explanted or enter unknown.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ValExp

ParentLongName: Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Mechanical
- 3 Bioprosthetic
- 7 Homograft
- 10 Autograft
- 4 Annuloplasty
- 5 Leaflet Clip
- 6 Transcatheter Valve
- 11 Transcatheter Valve in Valve  
with prosthetic valve
- 9 Other
- 1 Unknown

---

*Long Name:* First Valve Explant Etiology *SeqNo:* 3325  
*Short Name:* **ValExpEt** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the primary reason for explanting valve device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ValExp  
 ParentLongName: Valve Prosthesis Explant  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Endocarditis
2	Failed repair
3	Hemolysis
4	Incompetence
5	Pannus
6	Paravalvular leak
7	Prosthetic Deterioration
8	Sizing/Positioning issue
9	Stenosis
10	Thrombus
11	Other
12	Unknown

---

*Long Name:* First Valve Explant Device Known *SeqNo:* 3330  
*Short Name:* **ValExpDevKnown** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the type of explanted valve device is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ValExp  
 ParentLongName: Valve Prosthesis Explant  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* First Valve Explant Device *SeqNo:* 3335  
*Short Name:* **ValExpDev** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the model number of the first prosthesis explanted.

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

ParentShortName: ValExpDevKnown

ParentLongName: First Valve Explant Device Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve
- 202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
- 215 PV10 - CryoLife Pulmonary  
Valve without Conduit

- 
- 216 R010 - CryoLife Aortoiliac Grafts
  - 217 R020 - CryoLife Femoral Popliteal Artery
  - 218 SGPV00 - CryoLife SG Pulmonary Valve & Conduit
  - 219 SGPV10 - CryoLife SG Pulmonary Valve without Conduit
  - 220 V010 - CryoLife Saphenous Vein
  - 221 V060 - CryoLife Femoral Vein
  - 224 2500## - Edwards Prima Aortic Stentless Bioprosthesis
  - 225 2500P## - Edwards Prima Plus Stentless Aortic Bioprosthesis
  - 226 2625## - Carpentier-Edwards Porcine Aortic Bioprosthesis
  - 227 2650## - Carpentier-Edwards S.A.V. Aortic Porcine Bioprosthesis
  - 228 2700## - Carpentier-Edwards Perimount Pericardial Aortic Bioprosthesis
  - 229 2700TFX## - Carpentier-Edwards Perimount Theon Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 230 2800## - Carpentier-Edwards Perimount RSR Pericardial Aortic Bioprosthesis
  - 231 2800TFX## - Carpentier-Edwards Perimount Theon RSR Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 232 3000## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis
  - 233 3000TFX## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 234 3160## - Edwards-Duromedics Bileaflet Prostheses
  - 235 3300TFX## - Carpentier-Edwards Perimount Magna

- Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
- 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring
- 253 5200## - Carpentier-Edwards

- Physio II Mitral Annuloplasty  
Ring
- 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
- 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
- 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
- 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
- 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
- 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
- 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
- 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
- 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
- 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
- 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
- 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 266 9600## - Edwards Mira  
Mechanical Valve
- 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
- 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Large

- 
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
  - 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
  - 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
  - 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
  - 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
  - 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
  - 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
  - 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
  - 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
  - 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
  - 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
  - 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
  - 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
  - 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
  - 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
  - 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
  - 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
  - 286 174A-## - Medtronic  
Hancock Apical Left



- 
- Ventricle Connector
- 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
- 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
- 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
- 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
- 291 310## - Medtronic Mosaic  
Mitral
- 504 400## - Medtronic Avalor  
Aortic Valve
- 292 610B## - Medtronic Duran  
Band
- 293 610R## - Medtronic Duran  
Ring
- 294 620B## - Medtronic Duran  
AnCore Band
- 295 620BG## - Medtronic Duran  
AnCore Band With Chordal  
Guide
- 296 620R## - Medtronic Duran  
AnCore Ring
- 297 620RG## - Medtronic Duran  
Ancore Ring With Chordal  
Guide
- 298 638B## - Medtronic CG  
Future Band
- 299 638R## - Medtronic CG  
Future Composite Ring
- 300 670 - Medtronic Simplici-T  
Annuloplasty System
- 301 680R## - Medtronic Profile  
3D Ring
- 302 995CS## - Medtronic  
Freestyle, Complete  
Subcoronary - CS
- 303 995MS## - Medtronic  
Freestyle, Modified  
Subcoronary - MS
- 304 FR995-## - Medtronic  
Freestyle, Full Root - FR
- 307 HC105-## - Medtronic  
Hancock Low-porosity  
Valved Conduit
- 308 HC150-## - Medtronic  
Hancock Modified Orifice

- 
- Pulmonic Valved Conduit
- 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
- 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
- 311 T510C## - Medtronic  
Hancock II Mitral
- 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
- 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
- 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
- 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
- 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
- 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
- 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
- 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
- 329 AF-8## - Sorin Group:  
Carbomedics AnnuloFlex  
Annuloplasty System
- 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
- 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
- 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
- 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral  
Valve
- 335 R5-0## - Sorin Group:

- 
- Carbomedics Reduced Series  
Aortic Valve
  - 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
  - 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
  - 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
  - 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
  - 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
  - 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
  - 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
  - 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
  - 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
  - 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
  - 351 ##AHPJ-505 - Abbott

- Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
- 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
- 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
- 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
- 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
- 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
- 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
- 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
- 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
- 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
- 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
- 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
PTFE Cuff

- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthesis Heart Valve
- 384 B30-##A - Abbott Medical

- Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical  
Tailor Flexible Annuloplasty

- Ring
- 505 CDS0501 Abbott MitraClip  
NT Clip Delivery System
  - 506 CDS0601-NTR Abbott  
MitraClip NTR Clip Delivery  
System
  - 507 CDS0601-XTR Abbott  
MitraClip XTR Clip Delivery  
System
  - 508 CDS0201 - Abbott MitraClip  
Delivery System
  - 404 PB10-## - Medtronic Melody  
Transcatheter Pulmonary  
Valve
  - 405 700FF## - Medtronic  
Simulus FLX-O Ring
  - 406 700FC## - Medtronic Simulus  
FLX-C Band
  - 407 735AF## - Medtronic  
Simulus Adjustable Ring
  - 408 800SR## - Medtronic Simulus  
Semi-rigid Ring
  - 409 900SFC## - Medtronic TriAd  
Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic  
Bioprosthesis
  - 411 6200## - Carpentier-Edwards  
Physio Tricuspid  
Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic  
Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical  
Trifecta Aortic Stented Tissue  
Valve
  - 416 505DM## - Medtronic Open  
Pivot AP360 Series Mitral  
Heart Valve
  - 417 800SC## - Medtronic Simulus  
Semi-rigid Mitral  
Annuloplasty Ring
  - 418 6000-## - Medtronic 3f  
Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary  
Hemi-Artery
  - 420 SGPH00 - Cryolife SG  
Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour  
3D Annuloplasty ring

- 422 735AC## - Medtronic  
Simulus Adjustable Band
- 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
- 509 9750TFX## - Edwards  
Sapien 3 Transcatheter  
Heart Valve
- 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
- 428 ICV08## - Sorin Group  
Sovering Annuloplasty
- 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
- 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
- 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
- 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
- 435 PS ## - Sorin Group  
Pericarbon More Mitral
- 510 PVS## - Perceval Aortic  
Valve
- 436 ART ## SOP - Sorin Group  
Soprano Armonia
- 437 ART ## SG - Sorin Group  
Freedom Solo
- 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
- 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
- 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
- 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
- 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
- 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
- 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System
- 448 S3TA1## - Edwards Sapien 3  
Transcatheter Valve with



- Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve
- 471 CNA21 - Sorin Crown PRT  
Tissue Valve

- 472 CNA23 - Sorin Crown PRT  
Tissue Valve
- 473 CNA25 - Sorin Crown PRT  
Tissue Valve
- 474 CNA27 - Sorin Crown PRT  
Tissue Valve
- 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
- 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
- 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
- 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
- 479 ICV1208 - Sorin Perceval  
Tissue Valves
- 480 ICV1209 - Sorin Perceval  
Tissue Valves
- 481 ICV1210 - Sorin Perceval  
Tissue Valves
- 482 ICV1211 - Sorin Perceval  
Tissue Valves
- 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
- 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
- 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
- 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
- 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
- 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 492 ICV1337 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring

- 493 IVC1247 - Solo Smart Aortic Tissue Valves
- 494 LMCP - LifeNet CardioGRAFT Left Mono Cusp Patch
- 495 MCP - LifeNet CardioGRAFT Mono Cusp Patch
- 496 PPGK - LifeNet CardioGRAFT Thick Pulmonary Patch
- 497 PPGN - LifeNet CardioGRAFT Thin Pulmonary Patch
- 498 PRT-## - Portico Transcatheter Aortic Valve
- 499 RMCP - LifeNet CardioGRAFT Right Mono Cusp Patch
- 500 TAS - LifeNet CardioGraft Thoracic Aorta - Small 16mm and less
- 501 TFGT-##A - Abbott Medical Trifecta with Glide Technology (GT) Aortic Stented Tissue Valve
- 502 Z65LOTUSKIT## - Lotus Valve Kit
- 776 Surgeon Fashioned Device
- 777 Other US FDA-Approved Device
- 778 Other Non-US FDA-Approved Device

*Long Name:* First Valve Explant Unique Device Identifier (UDI) *SeqNo:* 3340

*Short Name:* **ValExpUDI** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the device UDI if available, otherwise leave blank.

*Data Source:* User *Format:* Text

*ParentShortName:* ValExpDevKnown

*ParentLongName:* First Valve Explant Device Known

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

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*Long Name:* First Valve Explant Device Year Known *SeqNo:* 3341  
*Short Name:* **ValExpYrKn** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the year of implant is known for the device being explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ValExpDevKnown

ParentLongName: First Valve Explant Device Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* First Valve Explant Implant Year *SeqNo:* 3342  
*Short Name:* **ValExpYr** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the year of implant for the device being explanted.  
*Data Source:* User *Format:* Text

ParentShortName: ValExpYrKn

ParentLongName: First Valve Explant Device Year Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Second Valve Prosthesis Explant *SeqNo:* 3350  
*Short Name:* **ValExp2** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether a second prosthetic valve or annuloplasty was explanted during this procedure.

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

ParentShortName: ValExp

ParentLongName: Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Second Valve Prosthesis Explant Position *SeqNo:* 3355  
*Short Name:* **ValExpPos2** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the location of the second explanted prosthetic valve or annuloplasty.

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

ParentShortName: ValExp2

ParentLongName: Second Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Aortic

2 Mitral

3 Tricuspid

4 Pulmonic

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*Long Name:* Second Valve Explant Type *SeqNo:* 3360  
*Short Name:* **ValExpTyp2** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the second type of valve device explanted or enter unknown.

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

ParentShortName: ValExp2

ParentLongName: Second Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Mechanical
  - 3 Bioprosthetic
  - 7 Homograft
  - 10 Autograft
  - 4 Annuloplasty
  - 5 Leaflet Clip
  - 6 Transcatheter Valve
  - 11 Transcatheter Valve in Valve  
with prosthetic valve
  - 9 Other
  - 1 Unknown
- 

*Long Name:* Second Valve Explant Etiology *SeqNo:* 3365  
*Short Name:* **ValExpEt2** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the primary reason for explanting valve device.

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

ParentShortName: ValExp2

ParentLongName: Second Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Endocarditis
- 2 Failed repair
- 3 Hemolysis
- 4 Incompetence

- 5 Pannus
- 6 Paravalvular leak
- 7 Prosthetic Deterioration
- 8 Sizing/Positioning issue
- 9 Stenosis
- 10 Thrombus
- 11 Other
- 12 Unknown

*Long Name:* Second Valve Explant Device Known *SeqNo:* 3370  
*Short Name:* **ValExpDevKnown2** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the type of explanted valve device is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ValExp2  
*ParentLongName:* Second Valve Prosthesis Explant  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* Second Valve Explant Device *SeqNo:* 3375  
*Short Name:* **ValExpDev2** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the model number of the second prosthesis explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ValExpDevKnown2  
*ParentLongName:* Second Valve Explant Device Known  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
201	500DM## - Medtronic Open Pivot Standard Mitral Heart Valve
202	500FA## - Medtronic Open Pivot Standard Aortic Heart

- Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
- 215 PV10 - CryoLife Pulmonary  
Valve without Conduit
- 216 R010 - CryoLife Aortoiliac  
Grafts
- 217 R020 - CryoLife Femoral  
Popliteal Artery
- 218 SGPV00 - CryoLife SG  
Pulmonary Valve & Conduit
- 219 SGPV10 - CryoLife SG  
Pulmonary Valve without  
Conduit
- 220 V010 - CryoLife Saphenous  
Vein
- 221 V060 - CryoLife Femoral Vein
- 224 2500## - Edwards Prima  
Aortic Stentless Bioprosthesis
- 225 2500P## - Edwards Prima  
Plus Stentless Aortic  
Bioprosthesis
- 226 2625## - Carpentier-Edwards  
Porcine Aortic Bioprosthesis
- 227 2650## - Carpentier-Edwards  
S.A.V. Aortic Porcine



- Bioprosthesis
- 228 2700## - Carpentier-Edwards  
Perimount Pericardial Aortic  
Bioprosthesis
- 229 2700TFX## - Carpentier-  
Edwards Perimount Theon  
Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 230 2800## - Carpentier-Edwards  
Perimount RSR Pericardial  
Aortic Bioprosthesis
- 231 2800TFX## - Carpentier-  
Edwards Perimount Theon  
RSR Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 232 3000## - Carpentier-Edwards  
Perimount Magna Pericardial  
Aortic Bioprosthesis
- 233 3000TFX## - Carpentier-  
Edwards Perimount Magna  
Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 234 3160## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 235 3300TFX## - Carpentier-  
Edwards Perimount Magna  
Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards

- 
- Classic Mitral Annuloplasty  
Ring with Duraflor Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflor Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflor Treatment
- 248 4600## - Crosgrave-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrave-Edwards  
Annuloplasty System with  
Duraflor Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring
- 253 5200## - Carpentier-Edwards  
Physio II Mitral Annuloplasty  
Ring
- 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
- 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
- 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
- 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
- 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix

- Process
- 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
  - 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
  - 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
  - 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
  - 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
  - 266 9600## - Edwards Mira  
Mechanical Valve
  - 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
  - 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Large
  - 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
  - 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
  - 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
  - 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
  - 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
  - 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
  - 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
  - 275 HVPL - LifeNet CardioGraft

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- Pulmonary Heart Valve -  
Large
- 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
- 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
- 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
- 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
- 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
- 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
- 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
- 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
- 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
- 286 174A-## - Medtronic  
Hancock Apical Left  
Ventricle Connector
- 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
- 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
- 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
- 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
- 291 310## - Medtronic Mosaic  
Mitral
- 504 400## - Medtronic Avalor  
Aortic Valve
- 292 610B## - Medtronic Duran  
Band
- 293 610R## - Medtronic Duran  
Ring
- 294 620B## - Medtronic Duran  
AnCore Band

- 295 620BG## - Medtronic Duran AnCore Band With Chordal Guide
- 296 620R## - Medtronic Duran AnCore Ring
- 297 620RG## - Medtronic Duran Ancore Ring With Chordal Guide
- 298 638B## - Medtronic CG Future Band
- 299 638R## - Medtronic CG Future Composite Ring
- 300 670 - Medtronic Simpli-T Annuloplasty System
- 301 680R## - Medtronic Profile 3D Ring
- 302 995CS## - Medtronic Freestyle, Complete Subcoronary - CS
- 303 995MS## - Medtronic Freestyle, Modified Subcoronary - MS
- 304 FR995-## - Medtronic Freestyle, Full Root - FR
- 307 HC105-## - Medtronic Hancock Low-porosity Valved Conduit
- 308 HC150-## - Medtronic Hancock Modified Orifice Pulmonic Valved Conduit
- 309 T505C2## - Medtronic Hancock II Aortic Cinch
- 310 T505U2## - Medtronic Hancock II Ultra Cinch
- 311 T510C## - Medtronic Hancock II Mitral
- 312 ONXA## - On-X Aortic Valve with standard sewing ring
- 313 ONXAC## - On-X Aortic Valve with Conform-X Sewing Ring
- 314 ONXACE## - On-X Aortic Valve with Conform-X Sewing Ring, extended
- 315 ONXAE## - On-X Aortic Valve with standard sewing ring, extended
- 316 ONXM## - On-X Mitral Valve with standard sewing ring

- 317 ONXMC## - On-X Mitral Valve with Conform-X Sewing Ring
- 327 LXA## - Sorin Group Mitroflow Aortic Pericardial Heart Valve
- 328 A5-0## - Sorin Group: Carbomedics Standard Aortic Valve
- 329 AF-8## - Sorin Group: Carbomedics AnnuloFlex Annuloplasty System
- 330 AP-0## - Sorin Group: Carbomedics Carbo-Seal Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group: Carbomedics AnnuloFlo Annuloplasty System
- 332 CP-0## - Sorin Group: Carbomedics Carbo-Seal Valsalva Ascending Aortic Prosthesis
- 333 F7-0## - Sorin Group: Carbomedics OptiForm Mitral Valve
- 334 M7-0## - Sorin Group: Carbomedics Standard Mitral Valve
- 335 R5-0## - Sorin Group: Carbomedics Reduced Series Aortic Valve
- 336 S5-0## - Sorin Group: Carbomedics Top Hat Supra-Annular Aortic Valve
- 337 ##A-101 - Abbott Medical Mechanical Aortic Heart Valve
- 338 ##AEC-102 - Abbott Medical Mechanical Heart Valve
- 339 ##AECJ-502 - Abbott Medical Masters Series Aortic Mechanical Valve, Expanded Cuff
- 340 ##AECS-602 - Abbott Medical Masters Series Mechanical Heart Valve with Silzone Coating
- 341 ##AEHPJ-505 - Abbott Medical Masters HP Mechanical Valve, Expanded Cuff

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- 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
  - 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
  - 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
  - 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
  - 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
  - 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
  - 351 ##AHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
  - 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
  - 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
  - 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
  - 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
  - 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis

- 
- 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
  - 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
  - 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
  - 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
  - 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
  - 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
PTFE Cuff
  - 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
  - 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
  - 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
  - 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
  - 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
  - 373 ##MTJ-503 - Abbott Medical



- Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthetic Heart Valve
- 384 B30-##A - Abbott Medical  
Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating

- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Ring
- 505 CDS0501 Abbott MitraClip  
NT Clip Delivery System
- 506 CDS0601-NTR Abbott  
MitraClip NTR Clip Delivery  
System
- 507 CDS0601-XTR Abbott  
MitraClip XTR Clip Delivery  
System
- 508 CDS0201 - Abbott MitraClip  
Delivery System
- 404 PB10-## - Medtronic Melody  
Transcatheter Pulmonary  
Valve
- 405 700FF## - Medtronic  
Simulus FLX-O Ring
- 406 700FC## - Medtronic Simulus  
FLX-C Band
- 407 735AF## - Medtronic  
Simulus Adjustable Ring
- 408 800SR## - Medtronic Simulus  
Semi-rigid Ring

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- 409 900SFC## - Medtronic TriAd Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic Bioprosthesis
  - 411 6200## - Carpentier-Edwards Physio Tricuspid Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical Trifecta Aortic Stented Tissue Valve
  - 416 505DM## - Medtronic Open Pivot AP360 Series Mitral Heart Valve
  - 417 800SC## - Medtronic Simulus Semi-rigid Mitral Annuloplasty Ring
  - 418 6000-## - Medtronic 3f Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary Hemi-Artery
  - 420 SGPH00 - Cryolife SG Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour 3D Annuloplasty ring
  - 422 735AC## - Medtronic Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien Transcatheter Heart Valve
  - 509 9750TFX## - Edwards Spapient 3 Transcatheter Heart Valve
  - 425 H607 - Medtronic post. Annuloplasty band (Split, Mayo)
  - 428 ICV08## - Sorin Group Sovering Annuloplasty
  - 429 ICV09## - Sorin Group MEMO 3D Semi-rigid Annuloplasty Ring
  - 432 A1-0## - Sorin Group: Carbomedics Orbis Universal Aortic Valve
  - 433 M2-0## - Sorin Group: Carbomedics Orbis UniversalMitral Valve
  - 434 PF ## - Sorin Group

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- Pericarbon Freedom Stentless  
435 PS ## - Sorin Group  
Pericarbon More Mitral  
510 PVS## - Perceval Aortic  
Valve  
436 ART ## SOP - Sorin Group  
Soprano Armonia  
437 ART ## SG - Sorin Group  
Freedom Solo  
438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic  
439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral  
440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic  
441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic  
445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System  
446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System  
447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System  
448 S3TA1## - Edwards Sapien 3  
Transcatheter Valve with  
Certitude System  
449 CRS-P3-640 - Medtronic  
CoreValve  
450 CRS-P3-943 - Medtronic  
CoreValve  
511 TAV## - Medtronic Evolut  
Pro Plus  
451 MCS-P3 - Medtronic  
CoreValve  
452 MCS-P4 - Medtronic  
CoreValve Evolut  
453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring  
454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder  
455 ONXAAP## - On-X  
Ascending Aortic Prosthesis  
458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT

- 
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
  - 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
  - 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
  - 462 73##1088 - Vascutek  
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
  - 469 ART##SMT - Sorin Solo  
Smart
  - 470 CNA19 - Sorin Crown PRT  
Tissue Valve
  - 471 CNA21 - Sorin Crown PRT  
Tissue Valve
  - 472 CNA23 - Sorin Crown PRT  
Tissue Valve
  - 473 CNA25 - Sorin Crown PRT  
Tissue Valve
  - 474 CNA27 - Sorin Crown PRT  
Tissue Valve
  - 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
  - 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
  - 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
  - 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
  - 479 ICV1208 - Sorin Perceval  
Tissue Valves

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- 480 ICV1209 - Sorin Perceval  
Tissue Valves
  - 481 ICV1210 - Sorin Perceval  
Tissue Valves
  - 482 ICV1211 - Sorin Perceval  
Tissue Valves
  - 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
  - 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
  - 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
  - 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 492 ICV1337 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 493 IVC1247 - Solo Smart Aortic  
Tissue Valves
  - 494 LMCP - LifeNet  
CardioGRAFT Left Mono  
Cusp Patch
  - 495 MCP - LifeNet  
CardioGRAFT Mono Cusp  
Patch
  - 496 PPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch
  - 497 PPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch
  - 498 PRT-## - Portico  
Transcatheter Aortic Valve
  - 499 RMCP - LifeNet  
CardioGRAFT Right Mono  
Cusp Patch
  - 500 TAS - LifeNet CardioGraft  
Thoracic Aorta - Small 16mm  
and less

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501 TFGT-##A - Abbott Medical  
Trifecta with Glide  
Technology (GT) Aortic  
Stented Tissue Valve

502 Z65LOTUSKIT## - Lotus  
Valve Kit

776 Surgeon Fashioned Device

777 Other US FDA-Approved  
Device

778 Other Non-US FDA-  
Approved Device

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*Long Name:* Second Valve Explant Device Unique Device Identifier (UDI) *SeqNo:* 3380

*Short Name:* **ValExpDevUDI** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the device UDI if available, otherwise leave blank.

*Data Source:* User *Format:* Text

ParentShortName: ValExpDevKnown2

ParentLongName: Second Valve Explant Device Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Second Explant Year of Implant Known *SeqNo:* 3381

*Short Name:* **ValExp2YrImplantKn** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate if the year of implant is known for the device being explanted.

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

ParentShortName: ValExpDevKnown2

ParentLongName: Second Valve Explant Device Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* Second Valve Explant Implant Year *SeqNo:* 3382  
*Short Name:* **ValExp2ImplantYr** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the year of implant for the device being explanted.  
*Data Source:* User *Format:* Text

*ParentShortName:* ValExp2YrImplantKn  
*ParentLongName:* Second Explant Year of Implant Known  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

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*Long Name:* Third Valve Prosthesis Explant *SeqNo:* 3385  
*Short Name:* **ValExp3** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a third prosthetic valve or annuloplasty was explanted during this procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ValExp2  
*ParentLongName:* Second Valve Prosthesis Explant  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes  
2 No

---



*Long Name:* Third Valve Prosthesis Explant Position *SeqNo:* 3386  
*Short Name:* **ValExpPos3** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the location of the third explanted prosthetic valve or annuloplasty.

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

ParentShortName: ValExp3

ParentLongName: Third Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Aortic
- 2 Mitral
- 3 Tricuspid
- 4 Pulmonic

*Long Name:* Third Valve Explant Type *SeqNo:* 3387  
*Short Name:* **ValExpTyp3** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the third type of valve device explanted or enter unknown.

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

ParentShortName: ValExp3

ParentLongName: Third Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Mechanical
- 3 Bioprosthetic
- 7 Homograft
- 10 Autograft
- 4 Annuloplasty
- 5 Leaflet Clip
- 6 Transcatheter Valve
- 11 Transcatheter Valve in Valve  
with prosthetic valve
- 9 Other
- 1 Unknown

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*Long Name:* Third Valve Explant Etiology *SeqNo:* 3388  
*Short Name:* **ValExpEt3** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the primary reason for explanting valve device.

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

ParentShortName: ValExp3

ParentLongName: Third Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Endocarditis
  - 2 Failed repair
  - 3 Hemolysis
  - 4 Incompetence
  - 5 Pannus
  - 6 Paravalvular leak
  - 7 Prosthetic Deterioration
  - 8 Sizing/Positioning issue
  - 9 Stenosis
  - 10 Thrombus
  - 11 Other
  - 12 Unknown
- 

*Long Name:* Third Valve Explant Device Known *SeqNo:* 3389  
*Short Name:* **ValExpDevKnown3** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the type of explanted valve device is known.

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

ParentShortName: ValExp3

ParentLongName: Third Valve Prosthesis Explant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Third Valve Explant Device *SeqNo:* 3390  
*Short Name:* **ValExpDev3** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the model number of the third prosthesis explanted.

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

ParentShortName: ValExpDevKnown3

ParentLongName: Third Valve Explant Device Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve
- 202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
- 215 PV10 - CryoLife Pulmonary  
Valve without Conduit

- 
- 216 R010 - CryoLife Aortoiliac Grafts
  - 217 R020 - CryoLife Femoral Popliteal Artery
  - 218 SGPV00 - CryoLife SG Pulmonary Valve & Conduit
  - 219 SGPV10 - CryoLife SG Pulmonary Valve without Conduit
  - 220 V010 - CryoLife Saphenous Vein
  - 221 V060 - CryoLife Femoral Vein
  - 224 2500## - Edwards Prima Aortic Stentless Bioprosthesis
  - 225 2500P## - Edwards Prima Plus Stentless Aortic Bioprosthesis
  - 226 2625## - Carpentier-Edwards Porcine Aortic Bioprosthesis
  - 227 2650## - Carpentier-Edwards S.A.V. Aortic Porcine Bioprosthesis
  - 228 2700## - Carpentier-Edwards Perimount Pericardial Aortic Bioprosthesis
  - 229 2700TFX## - Carpentier-Edwards Perimount Theon Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 230 2800## - Carpentier-Edwards Perimount RSR Pericardial Aortic Bioprosthesis
  - 231 2800TFX## - Carpentier-Edwards Perimount Theon RSR Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 232 3000## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis
  - 233 3000TFX## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 234 3160## - Edwards-Duromedics Bileaflet Prostheses
  - 235 3300TFX## - Carpentier-Edwards Perimount Magna

- Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
- 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring
- 253 5200## - Carpentier-Edwards

- Physio II Mitral Annuloplasty  
Ring
- 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
- 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
- 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
- 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
- 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
- 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
- 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
- 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
- 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
- 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
- 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
- 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 266 9600## - Edwards Mira  
Mechanical Valve
- 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
- 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Large

- 
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
  - 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
  - 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
  - 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
  - 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
  - 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
  - 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
  - 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
  - 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
  - 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
  - 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
  - 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
  - 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
  - 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
  - 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
  - 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
  - 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
  - 286 174A-## - Medtronic  
Hancock Apical Left

- 
- Ventricle Connector
- 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
- 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
- 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
- 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
- 291 310## - Medtronic Mosaic  
Mitral
- 504 400## - Medtronic Avalor  
Aortic Valve
- 292 610B## - Medtronic Duran  
Band
- 293 610R## - Medtronic Duran  
Ring
- 294 620B## - Medtronic Duran  
AnCore Band
- 295 620BG## - Medtronic Duran  
AnCore Band With Chordal  
Guide
- 296 620R## - Medtronic Duran  
AnCore Ring
- 297 620RG## - Medtronic Duran  
Ancore Ring With Chordal  
Guide
- 298 638B## - Medtronic CG  
Future Band
- 299 638R## - Medtronic CG  
Future Composite Ring
- 300 670 - Medtronic Simplici-T  
Annuloplasty System
- 301 680R## - Medtronic Profile  
3D Ring
- 302 995CS## - Medtronic  
Freestyle, Complete  
Subcoronary - CS
- 303 995MS## - Medtronic  
Freestyle, Modified  
Subcoronary - MS
- 304 FR995-## - Medtronic  
Freestyle, Full Root - FR
- 307 HC105-## - Medtronic  
Hancock Low-porosity  
Valved Conduit
- 308 HC150-## - Medtronic  
Hancock Modified Orifice



- 
- Pulmonic Valved Conduit
- 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
- 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
- 311 T510C## - Medtronic  
Hancock II Mitral
- 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
- 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
- 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
- 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
- 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
- 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
- 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
- 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
- 329 AF-8## - Sorin Group:  
Carbomedics AnnuloFlex  
Annuloplasty System
- 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
- 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
- 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
- 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral  
Valve
- 335 R5-0## - Sorin Group:

- 
- Carbomedics Reduced Series  
Aortic Valve
  - 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
  - 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
  - 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
  - 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
  - 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
  - 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
  - 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
  - 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
  - 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
  - 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
  - 351 ##AHPJ-505 - Abbott

- Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
- 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
- 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
- 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
- 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
- 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
- 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
- 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
- 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
- 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
- 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
- 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
PTFE Cuff

- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthetic Heart Valve
- 384 B30-##A - Abbott Medical

- Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical  
Tailor Flexible Annuloplasty

- Ring
- 505 CDS0501 Abbott MitraClip  
NT Clip Delivery System
  - 506 CDS0601-NTR Abbott  
MitraClip NTR Clip Delivery  
System
  - 507 CDS0601-XTR Abbott  
MitraClip XTR Clip Delivery  
System
  - 508 CDS0201 - Abbott MitraClip  
Delivery System
  - 404 PB10-## - Medtronic Melody  
Transcatheter Pulmonary  
Valve
  - 405 700FF## - Medtronic  
Simulus FLX-O Ring
  - 406 700FC## - Medtronic Simulus  
FLX-C Band
  - 407 735AF## - Medtronic  
Simulus Adjustable Ring
  - 408 800SR## - Medtronic Simulus  
Semi-rigid Ring
  - 409 900SFC## - Medtronic TriAd  
Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic  
Bioprosthesis
  - 411 6200## - Carpentier-Edwards  
Physio Tricuspid  
Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic  
Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical  
Trifecta Aortic Stented Tissue  
Valve
  - 416 505DM## - Medtronic Open  
Pivot AP360 Series Mitral  
Heart Valve
  - 417 800SC## - Medtronic Simulus  
Semi-rigid Mitral  
Annuloplasty Ring
  - 418 6000-## - Medtronic 3f  
Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary  
Hemi-Artery
  - 420 SGPH00 - Cryolife SG  
Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour  
3D Annuloplasty ring

- 
- 422 735AC## - Medtronic  
Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 509 9750TFX## - Edwards  
Sapien 3 Transcatheter  
Heart Valve
  - 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
  - 428 ICV08## - Sorin Group  
Sovering Annuloplasty
  - 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
  - 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
  - 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
  - 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
  - 435 PS ## - Sorin Group  
Pericarbon More Mitral
  - 510 PVS## - Perceval Aortic  
Valve
  - 436 ART ## SOP - Sorin Group  
Soprano Armonia
  - 437 ART ## SG - Sorin Group  
Freedom Solo
  - 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
  - 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
  - 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
  - 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
  - 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
  - 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
  - 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System
  - 448 S3TA1## - Edwards Sapien 3  
Transcatheter Valve with

- Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve
- 471 CNA21 - Sorin Crown PRT  
Tissue Valve



- 472 CNA23 - Sorin Crown PRT  
Tissue Valve
- 473 CNA25 - Sorin Crown PRT  
Tissue Valve
- 474 CNA27 - Sorin Crown PRT  
Tissue Valve
- 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
- 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
- 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
- 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
- 479 ICV1208 - Sorin Perceval  
Tissue Valves
- 480 ICV1209 - Sorin Perceval  
Tissue Valves
- 481 ICV1210 - Sorin Perceval  
Tissue Valves
- 482 ICV1211 - Sorin Perceval  
Tissue Valves
- 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
- 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
- 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
- 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
- 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
- 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 492 ICV1337 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring

- 493 IVC1247 - Solo Smart Aortic Tissue Valves
- 494 LMCP - LifeNet CardioGRAFT Left Mono Cusp Patch
- 495 MCP - LifeNet CardioGRAFT Mono Cusp Patch
- 496 PPGK - LifeNet CardioGRAFT Thick Pulmonary Patch
- 497 PPGN - LifeNet CardioGRAFT Thin Pulmonary Patch
- 498 PRT-## - Portico Transcatheter Aortic Valve
- 499 RMCP - LifeNet CardioGRAFT Right Mono Cusp Patch
- 500 TAS - LifeNet CardioGraft Thoracic Aorta - Small 16mm and less
- 501 TFGT-##A - Abbott Medical Trifecta with Glide Technology (GT) Aortic Stented Tissue Valve
- 502 Z65LOTUSKIT## - Lotus Valve Kit
- 776 Surgeon Fashioned Device
- 777 Other US FDA-Approved Device
- 778 Other Non-US FDA-Approved Device

*Long Name:* Third Valve Explant Device Unique Device Identifier (UDI) *SeqNo:* 3391

*Short Name:* **ValExpDev3UDI** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the device UDI if available, otherwise leave blank.

*Data Source:* User *Format:* Text

*ParentShortName:* ValExpDevKnown3

*ParentLongName:* Third Valve Explant Device Known

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

---

*Long Name:* Third Explant Year of Implant Known *SeqNo:* 3392  
*Short Name:* **ValExp3YrImplantKn** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the year of implant is known for the device being explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ValExpDevKnown3

*ParentLongName:* Third Valve Explant Device Known

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Third Valve Explant Implant Year *SeqNo:* 3393  
*Short Name:* **ValExp3ImplantYr** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the year of implant for the device being explanted.  
*Data Source:* User *Format:* Text

*ParentShortName:* ValExp3YrImplantKn

*ParentLongName:* Third Explant Year of Implant Known

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

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*Long Name:* VS-Aortic Valve Procedure *SeqNo:* 3395  
*Short Name:* **VSAVPr** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of procedure that was performed on the aortic valve.

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

ParentShortName: AVAortaProcPerf

ParentLongName: AV-Aorta Procedure Performed

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

Code: Value:

- 1 Replacement
  - 2 Repair / Reconstruction
  - 3 Surgical Prosthetic Valve Intervention (Not explant of valve)
- 

*Long Name:* VS-Aortic Transcatheter Valve Replacement *SeqNo:* 3400  
*Short Name:* **VSTCV** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the aortic valve replacement was done using a transcatheter valve device.

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

ParentShortName: VSAVPr

ParentLongName: VS-Aortic Valve Procedure

ParentHarvestCodes: 1

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* VS-Transcatheter Valve Replacement Approach *SeqNo:* 3401  
*Short Name:* **VSTCVR** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate transcatheter valve replacement approach.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSTCV

ParentLongName: VS-Aortic Transcatheter Valve Replacement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Transapical
  - 2 Transaxillary
  - 3 Transfemoral
  - 4 Transaortic
  - 5 Subclavian
  - 7 Transiliac
  - 8 Transeptal
  - 9 Transcarotid
  - 10 Transcaval
  - 6 Other
- 

*Long Name:* VS-Aortic Surgical Valve Replacement *SeqNo:* 3402  
*Short Name:* **VSAVSurgRep** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve replacement was done using a surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVPr

ParentLongName: VS-Aortic Valve Procedure

ParentHarvestCodes: 1

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* VS-Aortic Surgical Valve Replacement Device Type *SeqNo:* 3403  
*Short Name:* **VSAVSurgType** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of device used to surgically replace the aortic valve.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVSurgRep

ParentLongName: VS-Aortic Surgical Valve Replacement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Mechanical
  - 2 Bioprosthetic
  - 3 Surgeon fashioned pericardium (Ozaki)
  - 4 Other
- 

*Long Name:* VS-Aortic Surgical Bioprosthetic Replacement Valve Type *SeqNo:* 3404  
*Short Name:* **VSAVSurgBioT** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of bioprosthetic device used to surgically replace the aortic valve.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVSurgType

ParentLongName: VS-Aortic Surgical Valve Replacement Device Type

ParentHarvestCodes: 2

ParentValues: = "Bioprosthetic"

Harvest Codes:

Code: Value:

- 1 Stented
  - 2 Stentless subcoronary valve only
  - 3 Sutureless/rapid deployment
-

*Long Name:* VS-Aortic Valve Repair - Commissural Suture Annuloplasty *SeqNo:* 3410  
*Short Name:* **VSAVRComA** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included a commissural annuloplasty.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - External Suture Annuloplasty *SeqNo:* 3411  
*Short Name:* **VSAVRExSutAn** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included an external suture annuloplasty.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Leaflet Plication *SeqNo:* 3412  
*Short Name:* **VSAVRLPlic** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet plication.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Nodular Release *SeqNo:* 3413  
*Short Name:* **VSAVRNodRel** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included nodular release.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No



*Long Name:* VS-Aortic Valve Repair - Leaflet Free Edge Reinforcement (PTFE) Suture *SeqNo:* 3414  
*Short Name:* **VSAVRPTFE** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet free edge reinforcement (PTFE) suture.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Leaflet Commissural Resuspension Suture *SeqNo:* 3415  
*Short Name:* **VSAVRComRS** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet commissural resuspension suture.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Division of Fused Leaflet Raphe *SeqNo:* 3416  
*Short Name:* **VSAVRRaphe** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included division of fused leaflet raphe.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Ring Annuloplasty *SeqNo:* 3417  
*Short Name:* **VSAVRRingA** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included a ring annuloplasty.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Ring Annuloplasty - Type *SeqNo:* 3418  
*Short Name:* **VSAVRRingATy** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of ring annuloplasty that was used in this procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVRRingA  
 ParentLongName: VS-Aortic Valve Repair - Ring Annuloplasty  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 External Ring  
         2 Internal Ring

*Long Name:* VS-Aortic Valve Repair - Leaflet Resection Suture *SeqNo:* 3419  
*Short Name:* **VSAVRLResect** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet resection.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Aortic Valve Repair - Leaflet Shaving *SeqNo:* 3420  
*Short Name:* **VSAVRLeafShav** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet shaving.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Leaflet Pericardial Patch *SeqNo:* 3421  
*Short Name:* **VSAVRLPPatch** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet pericardial patch.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Leaflet Debridement *SeqNo:* 3422  
*Short Name:* **VSAVRDeb** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included leaflet debridement.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Repair - Repair of Periprosthetic Leak *SeqNo:* 3423  
*Short Name:* **VSAVRPeriLeak** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic valve repair procedure included repair of a Periprosthetic leak.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPr  
 ParentLongName: VS-Aortic Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Repair / Reconstruction"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Aortic Valve Procedure Repair Type *SeqNo:* 3424

*Short Name:* **AVProcRepType** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the repair type of the aortic valve. If more than one repair type was performed, select all that apply.

*Data Source:* User

*Format:* Multi-Select

ParentShortName: VSAVPr

ParentLongName: VS-Aortic Valve Procedure

ParentHarvestCodes: 2

ParentValues: = "Repair / Reconstruction"

Harvest Codes:

Code: Value:

- 1 Commissural suture annuloplasty
- 2 Leaflet plication
- 3 Leaflet commissural resuspension suture
- 4 Leaflet free edge reinforcement
- 5 External Suture Annuloplasty
- 6 Nodular Release
- 7 Leaflet Shaving
- 8 Leaflet debridement
- 9 Ring annuloplasty External Ring
- 10 Pannus/Thrombus Removal (Native Valve)
- 11 Leaflet resection suture
- 12 Leaflet pericardial patch
- 13 Division of fused leaflet raphe
- 14 Ring annuloplasty Internal Ring

*Long Name:* VS-Aortic Valve Procedure Surgical Prosthetic Valve Intervention Type *SeqNo:* 3425  
*Short Name:* **AVSurgProsthValInt** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate what procedure was performed on a previously implanted prosthetic Aortic valve. If more than one intervention was performed, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: VSAVPr

ParentLongName: VS-Aortic Valve Procedure

ParentHarvestCodes: 3

ParentValues: = "Surgical Prosthetic Valve Intervention (Not explant of valve)"

Harvest Codes:

Code: Value:

- 1 Repair of periprosthetic leak
- 2 Removal of Pannus
- 3 Removal of Clot
- 4 Other

*Long Name:* VS-Aortic Proc-Aortic Annular Enlargement *SeqNo:* 3460  
*Short Name:* **AnlrEnl** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether an annular enlargement procedure was performed on the Aortic Valve.

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

ParentShortName: AVAortaProcPerf

ParentLongName: AV-Aorta Procedure Performed

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VS-Aortic Proc-Aortic Annular Enlargement - Technique *SeqNo:* 3461  
*Short Name:* **AnlrEnlTech** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the technique used for the aortic annular enlargement procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AnlrEnl

ParentLongName: VS-Aortic Proc-Aortic Annular Enlargement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Nicks-Nunez
- 2 Manougian
- 3 Konno
- 4 Other
- 5 Unknown

*Long Name:* VS-Aortic Valve Sparing Root Operation Performed *SeqNo:* 3466  
*Short Name:* **VSAVSparRt** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a valve sparing root operation was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVRoot

ParentLongName: VS-Aortic Root Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No



*Long Name:* VS-Aortic Valve Patch *SeqNo:* 3469  
*Short Name:* **VSAVPat** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a patch was used  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAV  
 ParentLongName: VS-Aortic Valve  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Aortic Valve Patch Type *SeqNo:* 3470  
*Short Name:* **VSAVPatTy** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of patch used  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSAVPat  
 ParentLongName: VS-Aortic Valve Patch  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Synthetic  
         2 Bioprosthetic  
         3 Autologous

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*Long Name:* VS - Replacement of non-coronary sinus (Modified Wheat/Modified Tacoub) *SeqNo:* 3471

*Short Name:* **AVReplNonCorSin** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate if a replacement of a non-coronary sinus was performed. This includes modified Wheat and modified Yacoub procedures.

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

ParentShortName: AVAortaProcPerf

ParentLongName: AV-Aorta Procedure Performed

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* VS-Aortic Valve or Valve Repair Device Implant *SeqNo:* 3472

*Short Name:* **AorticImplant** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether an aortic valve or valve repair device was implanted.

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

ParentShortName: AVAortaProcPerf

ParentLongName: AV-Aorta Procedure Performed

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* VS-Aortic Proc-Implant Model Number *SeqNo:* 3480  
*Short Name:* **VSAoIm** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the name of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.

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

ParentShortName: AorticImplant

ParentLongName: VS-Aortic Valve or Valve Repair Device Implant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve
- 202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
- 215 PV10 - CryoLife Pulmonary

- 
- Valve without Conduit
  - 216 R010 - CryoLife Aortoiliac Grafts
  - 217 R020 - CryoLife Femoral Popliteal Artery
  - 218 SGPV00 - CryoLife SG Pulmonary Valve & Conduit
  - 219 SGPV10 - CryoLife SG Pulmonary Valve without Conduit
  - 220 V010 - CryoLife Saphenous Vein
  - 221 V060 - CryoLife Femoral Vein
  - 224 2500## - Edwards Prima Aortic Stentless Bioprosthesis
  - 225 2500P## - Edwards Prima Plus Stentless Aortic Bioprosthesis
  - 226 2625## - Carpentier-Edwards Porcine Aortic Bioprosthesis
  - 227 2650## - Carpentier-Edwards S.A.V. Aortic Porcine Bioprosthesis
  - 228 2700## - Carpentier-Edwards Perimount Pericardial Aortic Bioprosthesis
  - 229 2700TFX## - Carpentier-Edwards Perimount Theon Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 230 2800## - Carpentier-Edwards Perimount RSR Pericardial Aortic Bioprosthesis
  - 231 2800TFX## - Carpentier-Edwards Perimount Theon RSR Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 232 3000## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis
  - 233 3000TFX## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 234 3160## - Edwards-Duromedics Bileaflet Prostheses
  - 235 3300TFX## - Carpentier-

- Edwards Perimount Magna  
Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
- 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring

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- 253 5200## - Carpentier-Edwards  
Physio II Mitral Annuloplasty  
Ring
  - 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
  - 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
  - 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
  - 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
  - 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
  - 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
  - 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
  - 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
  - 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
  - 266 9600## - Edwards Mira  
Mechanical Valve
  - 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
  - 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-

- Valved) - Large
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
- 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
- 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
- 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
- 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
- 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
- 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
- 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
- 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
- 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
- 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
- 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
- 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
- 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
- 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
- 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
- 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
- 286 174A-## - Medtronic

- 
- Hancock Apical Left  
Ventricle Connector
- 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
- 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
- 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
- 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
- 291 310## - Medtronic Mosaic  
Mitral
- 504 400## - Medtronic Avalor  
Aortic Valve
- 292 610B## - Medtronic Duran  
Band
- 293 610R## - Medtronic Duran  
Ring
- 294 620B## - Medtronic Duran  
AnCore Band
- 295 620BG## - Medtronic Duran  
AnCore Band With Chordal  
Guide
- 296 620R## - Medtronic Duran  
AnCore Ring
- 297 620RG## - Medtronic Duran  
Ancore Ring With Chordal  
Guide
- 298 638B## - Medtronic CG  
Future Band
- 299 638R## - Medtronic CG  
Future Composite Ring
- 300 670 - Medtronic Simplici-T  
Annuloplasty System
- 301 680R## - Medtronic Profile  
3D Ring
- 302 995CS## - Medtronic  
Freestyle, Complete  
Subcoronary - CS
- 303 995MS## - Medtronic  
Freestyle, Modified  
Subcoronary - MS
- 304 FR995-## - Medtronic  
Freestyle, Full Root - FR
- 307 HC105-## - Medtronic  
Hancock Low-porosity  
Valved Conduit
- 308 HC150-## - Medtronic



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- Hancock Modified Orifice  
Pulmonic Valved Conduit
- 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
- 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
- 311 T510C## - Medtronic  
Hancock II Mitral
- 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
- 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
- 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
- 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
- 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
- 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
- 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
- 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
- 329 AF-8## - Sorin Group:  
Carbomedics AnnuloFlex  
Annuloplasty System
- 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
- 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
- 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
- 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral  
Valve

- 335 R5-0## - Sorin Group:  
Carbomedics Reduced Series  
Aortic Valve
- 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
- 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
- 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
- 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
- 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
- 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
- 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
- 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
- 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
- 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
- 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series

- 351 ##AHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
- 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
- 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
- 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
- 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
- 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
- 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
- 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
- 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
- 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
- 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
- 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded

- 
- PTFE Cuff
- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthetic Heart Valve

- 384 B30-##A - Abbott Medical  
Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical

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- Tailor Flexible Annuloplasty Ring
  - 505 CDS0501 Abbott MitraClip NT Clip Delivery System
  - 506 CDS0601-NTR Abbott MitraClip NTR Clip Delivery System
  - 507 CDS0601-XTR Abbott MitraClip XTR Clip Delivery System
  - 508 CDS0201 - Abbott MitraClip Delivery System
  - 404 PB10-## - Medtronic Melody Transcatheter Pulmonary Valve
  - 405 700FF## - Medtronic Simulus FLX-O Ring
  - 406 700FC## - Medtronic Simulus FLX-C Band
  - 407 735AF## - Medtronic Simulus Adjustable Ring
  - 408 800SR## - Medtronic Simulus Semi-rigid Ring
  - 409 900SFC## - Medtronic TriAd Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic Bioprosthesis
  - 411 6200## - Carpentier-Edwards Physio Tricuspid Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical Trifecta Aortic Stented Tissue Valve
  - 416 505DM## - Medtronic Open Pivot AP360 Series Mitral Heart Valve
  - 417 800SC## - Medtronic Simulus Semi-rigid Mitral Annuloplasty Ring
  - 418 6000-## - Medtronic 3f Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary Hemi-Artery
  - 420 SGPH00 - Cryolife SG Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour

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- 3D Annuloplasty ring
  - 422 735AC## - Medtronic  
Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 509 9750TFX## - Edwards  
Spapient 3 Transcatheter  
Heart Valve
  - 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
  - 428 ICV08## - Sorin Group  
Sovering Annuloplasty
  - 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
  - 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
  - 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
  - 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
  - 435 PS ## - Sorin Group  
Pericarbon More Mitral
  - 510 PVS## - Perceval Aortic  
Valve
  - 436 ART ## SOP - Sorin Group  
Soprano Armonia
  - 437 ART ## SG - Sorin Group  
Freedom Solo
  - 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
  - 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
  - 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
  - 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
  - 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
  - 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
  - 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System
  - 448 S3TA1## - Edwards Sapien 3

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- Transcatheter Valve with  
Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve
- 471 CNA21 - Sorin Crown PRT



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- Tissue Valve
  - 472 CNA23 - Sorin Crown PRT  
Tissue Valve
  - 473 CNA25 - Sorin Crown PRT  
Tissue Valve
  - 474 CNA27 - Sorin Crown PRT  
Tissue Valve
  - 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
  - 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
  - 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
  - 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
  - 479 ICV1208 - Sorin Perceval  
Tissue Valves
  - 480 ICV1209 - Sorin Perceval  
Tissue Valves
  - 481 ICV1210 - Sorin Perceval  
Tissue Valves
  - 482 ICV1211 - Sorin Perceval  
Tissue Valves
  - 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
  - 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
  - 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
  - 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 492 ICV1337 - Sorin MEMO 3D

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- RECHORD Annuloplasty Ring
  - 493 IVC1247 - Solo Smart Aortic  
Tissue Valves
  - 494 LMCP - LifeNet  
CardioGRAFT Left Mono  
Cusp Patch
  - 495 MCP - LifeNet  
CardioGRAFT Mono Cusp  
Patch
  - 496 PPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch
  - 497 PPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch
  - 498 PRT-## - Portico  
Transcatheter Aortic Valve
  - 499 RMCP - LifeNet  
CardioGRAFT Right Mono  
Cusp Patch
  - 500 TAS - LifeNet CardioGraft  
Thoracic Aorta - Small 16mm  
and less
  - 501 TFGT-##A - Abbott Medical  
Trifecta with Glide  
Technology (GT) Aortic  
Stented Tissue Valve
  - 502 Z65LOTUSKIT## - Lotus  
Valve Kit
  - 776 Surgeon Fashioned Device
  - 777 Other US FDA-Approved  
Device
  - 778 Other Non-US FDA-  
Approved Device
-

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*Long Name:* VS-Aortic Proc-Imp-Size *SeqNo:* 3485  
*Short Name:* **VSAoImSz** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Aortic implant size.  
*Data Source:* User *Format:* Integer  
Low Value: 5 High Value: 100 UsualRangeLow: 17 UsualRangeHigh: 33  
ParentShortName: AorticImplant  
ParentLongName: VS-Aortic Valve or Valve Repair Device Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VS-Aortic Proc-Imp - Unique Device Identifier (UDI) *SeqNo:* 3490  
*Short Name:* **VSAoImUDI** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: AorticImplant  
ParentLongName: VS-Aortic Valve or Valve Repair Device Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VS-Mitral Valve Procedure *SeqNo:* 3500  
*Short Name:* **VSMVPr** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of procedure that was performed on the mitral valve.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VSMV  
ParentLongName: VS-Mitral Valve  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:

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- 1 Repair
- 2 Replacement
- 3 Surgical Prosthetic Valve Intervention (Not explant of valve)

*Long Name:* VS-Mitral Valve - Repair Approach *SeqNo:* 3501  
*Short Name:* **VSMVRepApp** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the approach that was used to repair the Mitral Valve.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VSMVPr  
*ParentLongName:* VS-Mitral Valve Procedure  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Repair"  
*Harvest Codes:*

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 2            | Surgical      |
| 1            | Transcatheter |

*Long Name:* VS - Mitral Valve Repair - Surgical Approach *SeqNo:* 3502  
*Short Name:* **VSMVRepAppSurg** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the type of repair to the mitral valve. If more than one repair type was performed, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* VSMVRepApp  
*ParentLongName:* VS-Mitral Valve - Repair Approach  
*ParentHarvestCodes:* 2  
*ParentValues:* = "Surgical"  
*Harvest Codes and Value Definitions:*

- | <u>Code:</u> | <u>Value:</u>                       | <u>Definition:</u> |
|--------------|-------------------------------------|--------------------|
| 1            | Annuloplasty                        |                    |
| 2            | Annular decalcification/debridement |                    |
| 3            | Mitral commissurotomy               |                    |
| 4            | Leaflet resection                   |                    |
| 5            | Leaflet extension/replacement patch |                    |

- 6 Mitral commissuroplasty
- 7 Neochords (PTFE)
- 8 Edge to edge repair
- 9 Mitral cleft repair (scallop closure)
- 10 Chordal Transfer
- 11 Leaflet Plication
- 12 Pannus/Thrombus Removal (Native Valve)

*Long Name:* VS - Mitral Valve Resection Location *SeqNo:* 3503  
*Short Name:* **VSMVResLoc** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* If a leaflet resection was performed on the mitral valve, choose the resection location(s).

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

ParentShortName: VSMVRepAppSurg

ParentLongName: VS - Mitral Valve Repair - Surgical Approach

ParentHarvestCodes: 4

ParentValues: = "Leaflet resection"

Harvest Codes:

Code: Value:

- 1 Anterior Resection
- 2 Posterior Resection
- 3 Both

*Long Name:* VS-Mitral Valve Repair - Annuloplasty *SeqNo:* 3505  
*Short Name:* **VSMitRAnnulo** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1

*Definition:* Indicate whether the mitral valve repair procedure included an annuloplasty.

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

ParentShortName: VSMVRepApp

ParentLongName: VS-Mitral Valve - Repair Approach

ParentHarvestCodes: 2

ParentValues: = "Surgical"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VS-Mitral Valve Repair - Leaflet Resection *SeqNo:* 3506  
*Short Name:* **VSMitRLeafRes** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a leaflet resection.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVRepApp  
 ParentLongName: VS-Mitral Valve - Repair Approach  
 ParentHarvestCodes: 2  
 ParentValues: = "Surgical"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Leaflet Resection Type *SeqNo:* 3509  
*Short Name:* **VSLeafResTyp** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of leaflet resection.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRLeafRes  
 ParentLongName: VS-Mitral Valve Repair - Leaflet Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Triangular  
         2 Quadrangular  
         3 Other

*Long Name:* VS-Mitral Leaflet Resection Methods *SeqNo:* 3510  
*Short Name:* **VSLeafResTypMult** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of resection method used. If more than one method was used, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* VSMVRepAppSurg

*ParentLongName:* VS - Mitral Valve Repair - Surgical Approach

*ParentHarvestCodes:* 4

*ParentValues:* = "Leaflet resection"

*Harvest Codes:*

Code: Value:

- 1 Triangular Alone
- 2 Quadrangular Alone
- 4 Resection with Sliding  
Valvuloplasty
- 5 Resection with Folding  
Valvuloplasty
- 3 Other

*Long Name:* VS - Mitral Valve Surgery Neochords Location *SeqNo:* 3511  
*Short Name:* **VSNeochordLoc** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* If neochords were included in the repair approach, choose the neochord location(s).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VSMVRepAppSurg

*ParentLongName:* VS - Mitral Valve Repair - Surgical Approach

*ParentHarvestCodes:* 7

*ParentValues:* = "Neochords (PTFE)"

*Harvest Codes:*

Code: Value:

- 1 Anterior
- 2 Posterior
- 3 Both
- 4 Not Documented

*Long Name:* Valve Surgery - Mitral Valve Chordal Transfer Location *SeqNo:* 3512  
*Short Name:* **VSChordalTransLoc** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* If chordal transfer occurred, choose the chordal transfer location(s).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSMVRepAppSurg

ParentLongName: VS - Mitral Valve Repair - Surgical Approach

ParentHarvestCodes: 10

ParentValues: = "Chordal Transfer"

Harvest Codes:

Code: Value:

- 1 Anterior Chordal transfer
- 2 Posterior Chordal transfer
- 3 Not documented

*Long Name:* VS-Mitral Valve Repair - Leaflet Extension / Replacement Patch - Location *SeqNo:* 3513  
*Short Name:* **VSMitRLeafERPLoc** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location of the mitral leaflet extension/replacement patch  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSMVRepAppSurg

ParentLongName: VS - Mitral Valve Repair - Surgical Approach

ParentHarvestCodes: 5

ParentValues: = "Leaflet extension/replacement patch"

Harvest Codes:

Code: Value:

- 1 Anterior
- 2 Posterior
- 3 Both
- 4 Not Documented



*Long Name:* VS-Mitral Repair Leaflet - Anterior Resection *SeqNo:* 3517  
*Short Name:* **VSLeafAntRes** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicat whether anterior MV leaflet resection was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRLeafRes  
 ParentLongName: VS-Mitral Valve Repair - Leaflet Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Repair Leaflet - Anterior Resection - Location Documented *SeqNo:* 3518  
*Short Name:* **VSLeafAntResLocD** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the location of the anterior resection was documented.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafAntRes  
 ParentLongName: VS-Mitral Repair Leaflet - Anterior Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Repair Leaflet - Anterior Resection - A1 *SeqNo:* 3519  
*Short Name:* **VSLeafAntResA1** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the anterior leaflet resection included location A1  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafAntResLocD  
 ParentLongName: VS-Mitral Repair Leaflet - Anterior Resection - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Anterior Resection - A2 *SeqNo:* 3520  
*Short Name:* **VSLeafAntResA2** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the anterior leaflet resection included location A2  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafAntResLocD  
 ParentLongName: VS-Mitral Repair Leaflet - Anterior Resection - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Anterior Resection - A3 *SeqNo:* 3521  
*Short Name:* **VSLeafAntResA3** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the anterior leaflet resection included location A3  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafAntResLocD  
 ParentLongName: VS-Mitral Repair Leaflet - Anterior Resection - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Posterior Resection *SeqNo:* 3522  
*Short Name:* **VSLeafPostRes** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicat whether posterior MV leaflet resection was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRLeafRes  
 ParentLongName: VS-Mitral Valve Repair - Leaflet Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Posterior Resection - Location Documented *SeqNo:* 3523  
*Short Name:* **VSLeafPostResLocD** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicat whether posterior MV leaflet resection location was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafPostRes  
 ParentLongName: VS-Mitral Repair Leaflet - Posterior Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Posterior Resection - P1 *SeqNo:* 3524  
*Short Name:* **VSLeafPostResP1** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the posterior leaflet resection included location P1  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafPostResLocD  
 ParentLongName: VS-Mitral Repair Leaflet - Posterior Resection - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Posterior Resection - P2 *SeqNo:* 3525  
*Short Name:* **VSLeafPostResP2** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the posterior leaflet resection included location P2  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafPostResLocD  
 ParentLongName: VS-Mitral Repair Leaflet - Posterior Resection - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Posterior Resection - P3 *SeqNo:* 3526  
*Short Name:* **VSLeafPostResP3** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the posterior leaflet resection included location P3  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafPostResLocD  
 ParentLongName: VS-Mitral Repair Leaflet - Posterior Resection - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Repair Leaflet - Commissure Resection *SeqNo:* 3527  
*Short Name:* **VSLeafComRes** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether resection of the mitral commissure was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRLeafRes  
 ParentLongName: VS-Mitral Valve Repair - Leaflet Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Repair Leaflet - Commissure Resection - Location *SeqNo:* 3528  
*Short Name:* **VSLeafComResLoc** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the location of the mitral commissure resection  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSLeafComRes  
 ParentLongName: VS-Mitral Repair Leaflet - Commissure Resection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Medial (C2)  
     2 Lateral (C1)  
     3 Both  
     4 Not Documented

*Long Name:* VS-Mitral Valve Repair - Neochords (PTFE) *SeqNo:* 3529  
*Short Name:* **VSMitRPTFE** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included neochords (PTFE).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVRepApp  
 ParentLongName: VS-Mitral Valve - Repair Approach  
 ParentHarvestCodes: 2  
 ParentValues: = "Surgical"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Anterior Neochords *SeqNo:* 3530  
*Short Name:* **VSNeoAnt** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether anterior neochords were placed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRPTFE  
 ParentLongName: VS-Mitral Valve Repair - Neochords (PTFE)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Anterior Neochords - Location Documented *SeqNo:* 3531  
*Short Name:* **VSNeoAntLocD** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether location of anterior neochord placement was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoAnt  
 ParentLongName: VS-Mitral Valve Repair - Anterior Neochords  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Anterior Neochords - A1 *SeqNo:* 3532  
*Short Name:* **VSNeoAntA1** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether neochord location included location A1  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoAntLocD  
 ParentLongName: VS-Mitral Valve Repair - Anterior Neochords - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



*Long Name:* VS-Mitral Valve Repair - Anterior Neochords - A2 *SeqNo:* 3533  
*Short Name:* **VSNeoAntA2** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether neochord location included location A2  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoAntLocD  
 ParentLongName: VS-Mitral Valve Repair - Anterior Neochords - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Anterior Neochords - A3 *SeqNo:* 3534  
*Short Name:* **VSNeoAntA3** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether neochord location included location A3  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoAntLocD  
 ParentLongName: VS-Mitral Valve Repair - Anterior Neochords - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Posterior Neochords *SeqNo:* 3535  
*Short Name:* **VSNeoPost** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether posterior neochords were placed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRPTFE  
 ParentLongName: VS-Mitral Valve Repair - Neochords (PTFE)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Posterior Neochords - Location Documented *SeqNo:* 3536  
*Short Name:* **VSNeoPostLocD** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether location of posterior neochord placement was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoPost  
 ParentLongName: VS-Mitral Valve Repair - Posterior Neochords  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Posterior Neochords - P1 *SeqNo:* 3537  
*Short Name:* **VSNeoPostP1** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether posterior neochord location included location P1  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoPostLocD  
 ParentLongName: VS-Mitral Valve Repair - Posterior Neochords - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Posterior Neochords - P2 *SeqNo:* 3538  
*Short Name:* **VSNeoPostP2** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether posterior neochord location included location P2  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoPostLocD  
 ParentLongName: VS-Mitral Valve Repair - Posterior Neochords - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Posterior Neochords - P3 *SeqNo:* 3539  
*Short Name:* **VSNeoPostP3** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether posterior neochord location included location P3  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoPostLocD  
 ParentLongName: VS-Mitral Valve Repair - Posterior Neochords - Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Commissure Neochords *SeqNo:* 3540  
*Short Name:* **VSNeoCom** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether commissural neochords were placed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRPTFE  
 ParentLongName: VS-Mitral Valve Repair - Neochords (PTFE)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Commissure Neochords - Location *SeqNo:* 3541  
*Short Name:* **VSNeoComLoc** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate location of commissural neochord placement  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSNeoCom  
 ParentLongName: VS-Mitral Valve Repair - Commissure Neochords  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Medial (C2)  
         2 Lateral (C1)  
         3 Both  
         4 Not Documented

*Long Name:* VS-Mitral Valve Repair - Chordal / Leaflet Transfer *SeqNo:* 3542  
*Short Name:* **VSMitRChord** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a chordal / leaflet transfer.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVRepApp  
 ParentLongName: VS-Mitral Valve - Repair Approach  
 ParentHarvestCodes: 2  
 ParentValues: = "Surgical"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior *SeqNo:* 3543  
*Short Name:* **VSChorLfAnt** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether chordal leaflet transfer was anterior  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRChord  
 ParentLongName: VS-Mitral Valve Repair - Chordal / Leaflet Transfer  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior Location Documented *SeqNo:* 3544  
*Short Name:* **VSChorLfAntLocD** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether location of anterior chordal leaflet transfer was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfAnt  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior - A1 *SeqNo:* 3545  
*Short Name:* **VSChorLfAntA1** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether anterior chordal leaflet transfer location was A1  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfAntLocD  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior - A2 *SeqNo:* 3546  
*Short Name:* **VSChorLfAntA2** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether anterior chordal leaflet transfer location was A2  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfAntLocD  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior - A3 *SeqNo:* 3547  
*Short Name:* **VSChorLfAntA3** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether anterior chordal leaflet transfer location was A3  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfAntLocD  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Anterior Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior *SeqNo:* 3548  
*Short Name:* **VSChorLfPost** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether chordal leaflet transfer was posterior  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRChord  
 ParentLongName: VS-Mitral Valve Repair - Chordal / Leaflet Transfer  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



<i>Long Name:</i>	VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior Location Documented	<i>SeqNo:</i>	3549
<i>Short Name:</i>	<b>VSChorLfPostLocD</b>	<i>Core:</i>	No
<i>Section Name:</i>	Valve Surgery	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether location of posterior chordal leaflet transfer was documented		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	VSChorLfPost		
<i>ParentLongName:</i>	VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior - P1	<i>SeqNo:</i>	3550
<i>Short Name:</i>	<b>VSChorLfPostP1</b>	<i>Core:</i>	No
<i>Section Name:</i>	Valve Surgery	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether posterior chordal leaflet transfer location was P1		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	VSChorLfPostLocD		
<i>ParentLongName:</i>	VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior Location Documented		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior - P2 *SeqNo:* 3551  
*Short Name:* **VSChorLfPostP2** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether posterior chordal leaflet transfer location was P2  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfPostLocD  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior - P3 *SeqNo:* 3552  
*Short Name:* **VSChorLfPostP3** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether posterior chordal leaflet transfer location was P3  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfPostLocD  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Posterior Location Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Commissure *SeqNo:* 3553  
*Short Name:* **VSChorLfCom** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether chordal leaflet transfer was commissural  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMitRChord  
 ParentLongName: VS-Mitral Valve Repair - Chordal / Leaflet Transfer  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Valve Repair - Chordal Leaflet Transfer - Commissure Location *SeqNo:* 3554  
*Short Name:* **VSChorLfComLoc** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate location of commissural leaflet transfer  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSChorLfCom  
 ParentLongName: VS-Mitral Valve Repair - Chordal Leaflet Transfer - Commissure  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Medial (C2)  
     2 Lateral (C1)  
     3 Both  
     4 Not Documented

*Long Name:* VS-Mitral Valve Repair - Folding Plasty *SeqNo:* 3555  
*Short Name:* **VSMitRFold** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included folding plasty.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Sliding Plasty *SeqNo:* 3556  
*Short Name:* **VSMitRSlidP** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a sliding plasty.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Annular Decalcification / Debridement *SeqNo:* 3557  
*Short Name:* **VSMitRADecalc** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included an annular decalcification / debridement.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VSMVPr  
ParentLongName: VS-Mitral Valve Procedure  
ParentHarvestCodes: 1  
ParentValues: = "Repair"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

*Long Name:* VS-Mitral Valve Repair - Leaflet Extension / Replacement / Patch *SeqNo:* 3558  
*Short Name:* **VSMitRLeafERP** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a leaflet extension / replacement / patch.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VSMVPr  
ParentLongName: VS-Mitral Valve Procedure  
ParentHarvestCodes: 1  
ParentValues: = "Repair"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

*Long Name:* VS-Mitral Valve Repair - Edge To Edge Repair *SeqNo:* 3570  
*Short Name:* **VSMitREdge** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included an edge to edge repair.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Valve Repair - Mitral Commissurotomy *SeqNo:* 3580  
*Short Name:* **VSMitRMitComm** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a mitral commissurotomy.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Valve Repair - Mitral Commissuroplasty *SeqNo:* 3585  
*Short Name:* **VSMitRMitCplasty** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a mitral commissuroplasty.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Mitral Cleft Repair (Scallop Closure) *SeqNo:* 3590  
*Short Name:* **VSMitRMitCleft** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve repair procedure included a mitral cleft repair.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Mitral Valve Repair - Paraprothetic Leak Repair *SeqNo:* 3591  
*Short Name:* **VSMitParaprosLeak** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was repair of a mitral paraprothetic leak  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Repair"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Mitral Repair Attempted *SeqNo:* 3600  
*Short Name:* **MitralIntent** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a Mitral Valve Repair was attempted prior to the Mitral Valve Replacement.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSMVPr  
 ParentLongName: VS-Mitral Valve Procedure  
 ParentHarvestCodes: 2  
 ParentValues: = "Replacement"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No



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*Long Name:* VS-Mitral Chordal Preservation *SeqNo:* 3605  
*Short Name:* **VSChorPres** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether native chords were preserved.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSMVPr

ParentLongName: VS-Mitral Valve Procedure

ParentHarvestCodes: 2

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 2 Anterior
  - 3 Posterior
  - 4 Both
  - 1 None
- 

*Long Name:* VS-Mitral Transcatheter Valve Replacement *SeqNo:* 3610  
*Short Name:* **VSTCVMit** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the mitral valve replacement was done using a transcatheter valve device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSMVPr

ParentLongName: VS-Mitral Valve Procedure

ParentHarvestCodes: 2

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* VS-Mitral Valve Procedure - Surgical Prosthetic Valve Intervention (Not Explant of Valve): *SeqNo:* 3612

*Short Name:* **SurgProsValInt** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate what procedure was performed on a previously implanted prosthetic Mitral valve. If more than one intervention was performed, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: VSMVPr

ParentLongName: VS-Mitral Valve Procedure

ParentHarvestCodes: 3

ParentValues: = "Surgical Prosthetic Valve Intervention (Not explant of valve)"

Harvest Codes:

Code: Value:

- 1 Repair of periprosthetic leak
- 2 Removal of Pannus
- 3 Removal of Clot
- 4 Other

*Long Name:* VS-Mitral Implant *SeqNo:* 3615

*Short Name:* **MitralImplant** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether a mitral valve or valve device was implanted.

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

ParentShortName: VSMV

ParentLongName: VS-Mitral Valve

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VS-Mitral Implant - Type *SeqNo:* 3620  
*Short Name:* **MitralImplantTy** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the type of mitral valve or valve device implanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* MitralImplant

*ParentLongName:* VS-Mitral Implant

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Mechanical valve
- 3 Bioprosthetic valve
- 5 Annuloplasty Ring Surgical
- 8 Annuloplasty without ring  
(pericardial or suture)
- 7 Transcatheter device  
implanted open heart
- 9 Transcatheter Replacement  
Device (Transapical)
- 10 Transcatheter Replacement  
Device (Trans-septal)
- 11 Annuloplasty Ring  
Transcatheter
- 2 Mitral leaflet clip
- 6 Other

*Long Name:* VS - Mitral Leaflet Clip Number Implanted *SeqNo:* 3621  
*Short Name:* **MitralLeafletClipNum** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* If a mitral leaflet clip was implanted, enter the number of clips implanted. Exclude failed implant attempts.  
*Data Source:* User *Format:* Integer

*Low Value:* 1 *High Value:* 3

*ParentShortName:* MitralImplantTy

*ParentLongName:* VS-Mitral Implant - Type

*ParentHarvestCodes:* 2

*ParentValues:* = "Mitral leaflet clip"

*Long Name:* VS-Mitral Proc-Implant Model Number *SeqNo:* 3625  
*Short Name:* **VSMiIm** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of the device implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* MitralImplant

*ParentLongName:* VS-Mitral Implant

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve
- 202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit

- 
- 215 PV10 - CryoLife Pulmonary Valve without Conduit
  - 216 R010 - CryoLife Aortoiliac Grafts
  - 217 R020 - CryoLife Femoral Popliteal Artery
  - 218 SGPV00 - CryoLife SG Pulmonary Valve & Conduit
  - 219 SGPV10 - CryoLife SG Pulmonary Valve without Conduit
  - 220 V010 - CryoLife Saphenous Vein
  - 221 V060 - CryoLife Femoral Vein
  - 224 2500## - Edwards Prima Aortic Stentless Bioprosthesis
  - 225 2500P## - Edwards Prima Plus Stentless Aortic Bioprosthesis
  - 226 2625## - Carpentier-Edwards Porcine Aortic Bioprosthesis
  - 227 2650## - Carpentier-Edwards S.A.V. Aortic Porcine Bioprosthesis
  - 228 2700## - Carpentier-Edwards Perimount Pericardial Aortic Bioprosthesis
  - 229 2700TFX## - Carpentier-Edwards Perimount Theon Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 230 2800## - Carpentier-Edwards Perimount RSR Pericardial Aortic Bioprosthesis
  - 231 2800TFX## - Carpentier-Edwards Perimount Theon RSR Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 232 3000## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis
  - 233 3000TFX## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 234 3160## - Edwards-Duromedics Bileaflet Prostheses

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- 235 3300TFX## - Carpentier-  
Edwards Perimount Magna  
Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
  - 236 3600## - Edwards Mira  
Mechanical Valve
  - 237 3600f## - Edwards Mira  
Mechanical Valve
  - 238 3600u## - Edwards Mira  
Mechanical Valve
  - 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
  - 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
  - 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
  - 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
  - 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
  - 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
  - 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
  - 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
  - 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
  - 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
  - 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
  - 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
  - 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
  - 252 5100M## - Edwards  
Myxomatous Annuloplasty

- 
- Ring
- 253 5200## - Carpentier-Edwards  
Physio II Mitral Annuloplasty  
Ring
- 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
- 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
- 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
- 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
- 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
- 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
- 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
- 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
- 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
- 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
- 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
- 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 266 9600## - Edwards Mira  
Mechanical Valve
- 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
- 267 AAL - LifeNet CardioGraft

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- Ascending Aorta (Non-Valved) - Large
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-Valved) - Medium
- 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-Valved) - Small
- 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
- 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
- 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
- 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
- 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
- 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
- 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
- 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
- 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
- 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
- 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
- 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
- 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
- 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
- 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium



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- 286 174A-## - Medtronic Hancock Apical Left Ventricle Connector
  - 287 200## - Medtronic Contegra Unsupported Pulmonary Valve Conduit
  - 288 200S## - Medtronic Contegra Supported Pulmonary Valve Conduit
  - 289 305C2## - Medtronic Mosaic Standard Cinch - Aortic
  - 290 305U2## - Medtronic Mosaic Ultra Cinch - Aortic
  - 291 310## - Medtronic Mosaic Mitral
  - 504 400## - Medtronic Avalor Aortic Valve
  - 292 610B## - Medtronic Duran Band
  - 293 610R## - Medtronic Duran Ring
  - 294 620B## - Medtronic Duran AnCore Band
  - 295 620BG## - Medtronic Duran AnCore Band With Chordal Guide
  - 296 620R## - Medtronic Duran AnCore Ring
  - 297 620RG## - Medtronic Duran Ancore Ring With Chordal Guide
  - 298 638B## - Medtronic CG Future Band
  - 299 638R## - Medtronic CG Future Composite Ring
  - 300 670 - Medtronic Simplici-T Annuloplasty System
  - 301 680R## - Medtronic Profile 3D Ring
  - 302 995CS## - Medtronic Freestyle, Complete Subcoronary - CS
  - 303 995MS## - Medtronic Freestyle, Modified Subcoronary - MS
  - 304 FR995-## - Medtronic Freestyle, Full Root - FR
  - 307 HC105-## - Medtronic Hancock Low-porosity Valved Conduit

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- 308 HC150-## - Medtronic  
Hancock Modified Orifice  
Pulmonic Valved Conduit
  - 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
  - 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
  - 311 T510C## - Medtronic  
Hancock II Mitral
  - 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
  - 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
  - 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
  - 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
  - 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
  - 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
  - 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
  - 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
  - 329 AF-8## - Sorin Group:  
Carbomedics AnnuloFlex  
Annuloplasty System
  - 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
  - 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
  - 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
  - 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
  - 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral

- Valve
- 335 R5-0## - Sorin Group:  
Carbomedics Reduced Series  
Aortic Valve
- 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
- 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
- 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
- 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
- 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
- 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
- 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
- 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
- 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
- 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
- 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)

- Series
- 351 ##AHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
  - 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
  - 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
  - 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
  - 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
  - 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
  - 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
  - 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
  - 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
  - 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
  - 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
  - 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral

- Mechanical Valve, Expanded  
PTFE Cuff
- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless

- Bioprosthetic Heart Valve
- 384 B30-##A - Abbott Medical  
Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating

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- 403 TARP-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Ring
  - 505 CDS0501 Abbott MitraClip  
NT Clip Delivery System
  - 506 CDS0601-NTR Abbott  
MitraClip NTR Clip Delivery  
System
  - 507 CDS0601-XTR Abbott  
MitraClip XTR Clip Delivery  
System
  - 508 CDS0201 - Abbott MitraClip  
Delivery System
  - 404 PB10-## - Medtronic Melody  
Transcatheter Pulmonary  
Valve
  - 405 700FF## - Medtronic  
Simulus FLX-O Ring
  - 406 700FC## - Medtronic Simulus  
FLX-C Band
  - 407 735AF## - Medtronic  
Simulus Adjustable Ring
  - 408 800SR## - Medtronic Simulus  
Semi-rigid Ring
  - 409 900SFC## - Medtronic TriAd  
Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic  
Bioprosthesis
  - 411 6200## - Carpentier-Edwards  
Physio Tricuspid  
Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic  
Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical  
Trifecta Aortic Stented Tissue  
Valve
  - 416 505DM## - Medtronic Open  
Pivot AP360 Series Mitral  
Heart Valve
  - 417 800SC## - Medtronic Simulus  
Semi-rigid Mitral  
Annuloplasty Ring
  - 418 6000-## - Medtronic 3f  
Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary  
Hemi-Artery
  - 420 SGPH00 - Cryolife SG  
Pulmonary Hemi-Artery

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- 421 690R## - Medtronic Contour  
3D Annuloplasty ring
  - 422 735AC## - Medtronic  
Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 509 9750TFX## - Edwards  
Sapien 3 Transcatheter  
Heart Valve
  - 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
  - 428 ICV08## - Sorin Group  
Sovering Annuloplasty
  - 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
  - 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
  - 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
  - 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
  - 435 PS ## - Sorin Group  
Pericarbon More Mitral
  - 510 PVS## - Perceval Aortic  
Valve
  - 436 ART ## SOP - Sorin Group  
Soprano Armonia
  - 437 ART ## SG - Sorin Group  
Freedom Solo
  - 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
  - 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
  - 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
  - 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
  - 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
  - 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
  - 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System



- 448 S3TA1## - Edwards Sapien 3  
Transcatheter Valve with  
Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve

- 471 CNA21 - Sorin Crown PRT  
Tissue Valve
- 472 CNA23 - Sorin Crown PRT  
Tissue Valve
- 473 CNA25 - Sorin Crown PRT  
Tissue Valve
- 474 CNA27 - Sorin Crown PRT  
Tissue Valve
- 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
- 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
- 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
- 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
- 479 ICV1208 - Sorin Perceval  
Tissue Valves
- 480 ICV1209 - Sorin Perceval  
Tissue Valves
- 481 ICV1210 - Sorin Perceval  
Tissue Valves
- 482 ICV1211 - Sorin Perceval  
Tissue Valves
- 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
- 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
- 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
- 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
- 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
- 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
- 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring

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- 492 ICV1337 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 493 IVC1247 - Solo Smart Aortic  
Tissue Valves
  - 494 LMCP - LifeNet  
CardioGRAFT Left Mono  
Cusp Patch
  - 495 MCP - LifeNet  
CardioGRAFT Mono Cusp  
Patch
  - 496 PPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch
  - 497 PPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch
  - 498 PRT-## - Portico  
Transcatheter Aortic Valve
  - 499 RMCP - LifeNet  
CardioGRAFT Right Mono  
Cusp Patch
  - 500 TAS - LifeNet CardioGraft  
Thoracic Aorta - Small 16mm  
and less
  - 501 TFGT-##A - Abbott Medical  
Trifecta with Glide  
Technology (GT) Aortic  
Stented Tissue Valve
  - 502 Z65LOTUSKIT## - Lotus  
Valve Kit
  - 776 Surgeon Fashioned Device
  - 777 Other US FDA-Approved  
Device
  - 778 Other Non-US FDA-  
Approved Device
-

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*Long Name:* VS-Mitral Proc-Imp-Size *SeqNo:* 3630  
*Short Name:* **VSMiImSz** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Mitral implant size.  
*Data Source:* User *Format:* Integer  
Low Value: 5      High Value: 100      UsualRangeLow: 21      UsualRangeHigh: 36  
ParentShortName: MitralImplant  
ParentLongName: VS-Mitral Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VS-Mitral Proc-Imp-Unique Device Identifier (UDI) *SeqNo:* 3634  
*Short Name:* **VSMiImUDI** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: MitralImplant  
ParentLongName: VS-Mitral Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VS - Tricuspid Valve Procedure Performed - Type *SeqNo:* 3636  
*Short Name:* **VSTrPr** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of tricuspid procedure performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VSTV  
ParentLongName: VS-Tricuspid Valve  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:

---

- 1 Repair
- 2 Replacement
- 3 Surgical Prosthetic Valve Intervention (Not Explant of Valve)

*Long Name:* VS - Tricuspid Valve Repair Type *SeqNo:* 3637  
*Short Name:* **VSTSRepairType** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the type of tricuspid valve repair surgery. If more than one repair type was performed, choose all that apply

*Data Source:* User *Format:* Multi-Select

ParentShortName: VSTrPr

ParentLongName: VS - Tricuspid Valve Procedure Performed - Type

ParentHarvestCodes: 1

ParentValues: = "Repair"

Harvest Codes:

Code: Value:

- 1 Annuloplasty
- 2 Transcatheter Clip/Device
- 3 Leaflet Resection
- 4 Pannus/Thrombus Removal (Native Valve)

*Long Name:* VS-Tricuspid Repair - Annuloplasty Type *SeqNo:* 3638  
*Short Name:* **OpTricusAnTy** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate type of annuloplasty procedure.

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

ParentShortName: VSTSRepairType

ParentLongName: VS - Tricuspid Valve Repair Type

ParentHarvestCodes: 1

ParentValues: = "Annuloplasty"

Harvest Codes:

Code: Value:

- 1 Pericardium
- 2 Suture
- 3 Prosthetic ring
- 4 Prosthetic band

## 5 Other

*Long Name:* VS-Tricuspid Repair *SeqNo:* 3646  
*Short Name:* **VSTrRepair** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether tricuspid repair was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSTV  
 ParentLongName: VS-Tricuspid Valve  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Tricuspid Repair - Annuloplasty *SeqNo:* 3647  
*Short Name:* **VSTrRepAnnulo** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the tricuspid repair included an annuloplasty  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSTrRepair  
 ParentLongName: VS-Tricuspid Repair  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* VS-Tricuspid Repair - Leaflet Resection *SeqNo:* 3649  
*Short Name:* **VSTrLeafRes** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the tricuspid repair included leaflet resection  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSTrRepair  
 ParentLongName: VS-Tricuspid Repair  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Tricuspid Replacement *SeqNo:* 3650  
*Short Name:* **VSTrReplace** *Core:* No  
*Section Name:* Valve Surgery *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether tricuspid replacement was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSTV  
 ParentLongName: VS-Tricuspid Valve  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* VS-Tricuspid Transcatheter Valve Replacement *SeqNo:* 3652  
*Short Name:* **VSTCVTri** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the tricuspid valve replacement was done using a transcatheter valve device.

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

ParentShortName: VSTrPr

ParentLongName: VS - Tricuspid Valve Procedure Performed - Type

ParentHarvestCodes: 2

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VS-Tricuspid Valve Procedure - Surgical Prosthetic Valve Intervention *SeqNo:* 3653  
 (Not Explant of Valve)

*Short Name:* **VSTVSurgProsthValIntType** *Core:* Yes

*Section Name:* Valve Surgery *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate what procedure was performed on a previously implanted prosthetic Tricuspid valve. If more than one intervention was performed, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: VSTrPr

ParentLongName: VS - Tricuspid Valve Procedure Performed - Type

ParentHarvestCodes: 3

ParentValues: = "Surgical Prosthetic Valve Intervention (Not Explant of Valve)"

Harvest Codes:

Code: Value:

- 1 Repair of periprosthetic leak
- 2 Removal of Pannus
- 3 Removal of Clot
- 4 Other



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*Long Name:* VS-Tricuspid Implant *SeqNo:* 3660  
*Short Name:* **TricuspidImplant** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether a tricuspid valve or device was implanted.

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

ParentShortName: VSTV

ParentLongName: VS-Tricuspid Valve

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* VS-Tricuspid Implant - Type *SeqNo:* 3665  
*Short Name:* **TricusImplantTy** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of tricuspid valve or valve device implanted.

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

ParentShortName: TricuspidImplant

ParentLongName: VS-Tricuspid Implant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Mechanical valve
  - 2 Annuloplasty device
  - 3 Bioprosthetic valve
  - 5 Homograft
  - 7 Transcatheter device implanted open heart
  - 4 Transcatheter valve
  - 6 Other
-

*Long Name:* VS-Tricuspid Proc-Implant Model Number *SeqNo:* 3670  
*Short Name:* **VSTrIm** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the model number of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.

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

ParentShortName: TricuspidImplant

ParentLongName: VS-Tricuspid Implant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve
- 202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
- 215 PV10 - CryoLife Pulmonary

- 
- Valve without Conduit
  - 216 R010 - CryoLife Aortoiliac Grafts
  - 217 R020 - CryoLife Femoral Popliteal Artery
  - 218 SGPV00 - CryoLife SG Pulmonary Valve & Conduit
  - 219 SGPV10 - CryoLife SG Pulmonary Valve without Conduit
  - 220 V010 - CryoLife Saphenous Vein
  - 221 V060 - CryoLife Femoral Vein
  - 224 2500## - Edwards Prima Aortic Stentless Bioprosthesis
  - 225 2500P## - Edwards Prima Plus Stentless Aortic Bioprosthesis
  - 226 2625## - Carpentier-Edwards Porcine Aortic Bioprosthesis
  - 227 2650## - Carpentier-Edwards S.A.V. Aortic Porcine Bioprosthesis
  - 228 2700## - Carpentier-Edwards Perimount Pericardial Aortic Bioprosthesis
  - 229 2700TFX## - Carpentier-Edwards Perimount Theon Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 230 2800## - Carpentier-Edwards Perimount RSR Pericardial Aortic Bioprosthesis
  - 231 2800TFX## - Carpentier-Edwards Perimount Theon RSR Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 232 3000## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis
  - 233 3000TFX## - Carpentier-Edwards Perimount Magna Pericardial Aortic Bioprosthesis with ThermaFix Process
  - 234 3160## - Edwards-Duromedics Bileaflet Prostheses
  - 235 3300TFX## - Carpentier-

- Edwards Perimount Magna  
Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
- 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring

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- 253 5200## - Carpentier-Edwards  
Physio II Mitral Annuloplasty  
Ring
  - 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
  - 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
  - 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
  - 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
  - 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
  - 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
  - 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
  - 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
  - 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
  - 266 9600## - Edwards Mira  
Mechanical Valve
  - 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
  - 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-

- Valved) - Large
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
- 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
- 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
- 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
- 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
- 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
- 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
- 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
- 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
- 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
- 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
- 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
- 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
- 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
- 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
- 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
- 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
- 286 174A-## - Medtronic

- 
- Hancock Apical Left  
Ventricle Connector
- 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
- 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
- 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
- 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
- 291 310## - Medtronic Mosaic  
Mitral
- 504 400## - Medtronic Avalor  
Aortic Valve
- 292 610B## - Medtronic Duran  
Band
- 293 610R## - Medtronic Duran  
Ring
- 294 620B## - Medtronic Duran  
AnCore Band
- 295 620BG## - Medtronic Duran  
AnCore Band With Chordal  
Guide
- 296 620R## - Medtronic Duran  
AnCore Ring
- 297 620RG## - Medtronic Duran  
Ancore Ring With Chordal  
Guide
- 298 638B## - Medtronic CG  
Future Band
- 299 638R## - Medtronic CG  
Future Composite Ring
- 300 670 - Medtronic Simplici-T  
Annuloplasty System
- 301 680R## - Medtronic Profile  
3D Ring
- 302 995CS## - Medtronic  
Freestyle, Complete  
Subcoronary - CS
- 303 995MS## - Medtronic  
Freestyle, Modified  
Subcoronary - MS
- 304 FR995-## - Medtronic  
Freestyle, Full Root - FR
- 307 HC105-## - Medtronic  
Hancock Low-porosity  
Valved Conduit
- 308 HC150-## - Medtronic

- Hancock Modified Orifice  
Pulmonic Valved Conduit
- 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
- 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
- 311 T510C## - Medtronic  
Hancock II Mitral
- 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
- 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
- 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
- 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
- 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
- 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
- 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
- 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
- 329 AF-8## - Sorin Group:  
Carbomedics AnnuloFlex  
Annuloplasty System
- 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
- 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
- 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
- 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral  
Valve



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- 335 R5-0## - Sorin Group:  
Carbomedics Reduced Series  
Aortic Valve
  - 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
  - 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
  - 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
  - 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
  - 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
  - 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
  - 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
  - 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
  - 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
  - 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
  - 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series

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- 351 ##AHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
  - 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
  - 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
  - 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
  - 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
  - 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
  - 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
  - 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
  - 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
  - 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
  - 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
  - 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded

- PTFE Cuff
- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthetic Heart Valve

- 384 B30-##A - Abbott Medical  
Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical

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- Tailor Flexible Annuloplasty Ring
  - 505 CDS0501 Abbott MitraClip NT Clip Delivery System
  - 506 CDS0601-NTR Abbott MitraClip NTR Clip Delivery System
  - 507 CDS0601-XTR Abbott MitraClip XTR Clip Delivery System
  - 508 CDS0201 - Abbott MitraClip Delivery System
  - 404 PB10-## - Medtronic Melody Transcatheter Pulmonary Valve
  - 405 700FF## - Medtronic Simulus FLX-O Ring
  - 406 700FC## - Medtronic Simulus FLX-C Band
  - 407 735AF## - Medtronic Simulus Adjustable Ring
  - 408 800SR## - Medtronic Simulus Semi-rigid Ring
  - 409 900SFC## - Medtronic TriAd Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic Bioprosthesis
  - 411 6200## - Carpentier-Edwards Physio Tricuspid Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical Trifecta Aortic Stented Tissue Valve
  - 416 505DM## - Medtronic Open Pivot AP360 Series Mitral Heart Valve
  - 417 800SC## - Medtronic Simulus Semi-rigid Mitral Annuloplasty Ring
  - 418 6000-## - Medtronic 3f Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary Hemi-Artery
  - 420 SGPH00 - Cryolife SG Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour

- 
- 3D Annuloplasty ring
  - 422 735AC## - Medtronic  
Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 509 9750TFX## - Edwards  
Spapient 3 Transcatheter  
Heart Valve
  - 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
  - 428 ICV08## - Sorin Group  
Sovering Annuloplasty
  - 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
  - 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
  - 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
  - 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
  - 435 PS ## - Sorin Group  
Pericarbon More Mitral
  - 510 PVS## - Perceval Aortic  
Valve
  - 436 ART ## SOP - Sorin Group  
Soprano Armonia
  - 437 ART ## SG - Sorin Group  
Freedom Solo
  - 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
  - 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
  - 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
  - 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
  - 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
  - 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
  - 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System
  - 448 S3TA1## - Edwards Sapien 3

- 
- Transcatheter Valve with  
Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve
- 471 CNA21 - Sorin Crown PRT

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- Tissue Valve
  - 472 CNA23 - Sorin Crown PRT  
Tissue Valve
  - 473 CNA25 - Sorin Crown PRT  
Tissue Valve
  - 474 CNA27 - Sorin Crown PRT  
Tissue Valve
  - 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
  - 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
  - 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
  - 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
  - 479 ICV1208 - Sorin Perceval  
Tissue Valves
  - 480 ICV1209 - Sorin Perceval  
Tissue Valves
  - 481 ICV1210 - Sorin Perceval  
Tissue Valves
  - 482 ICV1211 - Sorin Perceval  
Tissue Valves
  - 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
  - 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
  - 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
  - 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 492 ICV1337 - Sorin MEMO 3D



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- RECHORD Annuloplasty Ring
  - 493 IVC1247 - Solo Smart Aortic  
Tissue Valves
  - 494 LMCP - LifeNet  
CardioGRAFT Left Mono  
Cusp Patch
  - 495 MCP - LifeNet  
CardioGRAFT Mono Cusp  
Patch
  - 496 PPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch
  - 497 PPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch
  - 498 PRT-## - Portico  
Transcatheter Aortic Valve
  - 499 RMCP - LifeNet  
CardioGRAFT Right Mono  
Cusp Patch
  - 500 TAS - LifeNet CardioGraft  
Thoracic Aorta - Small 16mm  
and less
  - 501 TFGT-##A - Abbott Medical  
Trifecta with Glide  
Technology (GT) Aortic  
Stented Tissue Valve
  - 502 Z65LOTUSKIT## - Lotus  
Valve Kit
  - 776 Surgeon Fashioned Device
  - 777 Other US FDA-Approved  
Device
  - 778 Other Non-US FDA-  
Approved Device
-

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*Long Name:* VS-Tricuspid Proc-Imp-Size *SeqNo:* 3675  
*Short Name:* **VSTrImSz** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Tricuspid implant size.  
*Data Source:* User *Format:* Integer  
Low Value: 5 High Value: 100 UsualRangeLow: 21 UsualRangeHigh: 36  
ParentShortName: TricuspidImplant  
ParentLongName: VS-Tricuspid Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VS-Tricuspid Proc-Imp-Unique Device Identifier (UDI) *SeqNo:* 3680  
*Short Name:* **VSTrImUDI** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: TricuspidImplant  
ParentLongName: VS-Tricuspid Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* VS-Tricuspid Valvectomy *SeqNo:* 3683  
*Short Name:* **VSTrValvec** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether tricuspid valvectomy was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VSTV  
ParentLongName: VS-Tricuspid Valve  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:

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- 
- 1 Yes  
2 No
- 

*Long Name:* VS-Pulmonic Proc-Procedure *SeqNo:* 3690  
*Short Name:* **OpPulm** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of procedure that was performed on the pulmonic valve.

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

ParentShortName: VSPV

ParentLongName: VS-Pulmonic Valve

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 3 Repair / Leaflet  
Reconstruction  
5 Pannus or Thrombus removal  
2 Replacement  
4 Valvectomy
- 

*Long Name:* VS-Pulmonic Transcatheter Valve Replacement *SeqNo:* 3695  
*Short Name:* **VSTCVPu** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the pulmonic valve replacement was done using a transcatheter valve device.

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

ParentShortName: OpPulm

ParentLongName: VS-Pulmonic Proc-Procedure

ParentHarvestCodes: 2

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes  
2 No
-

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*Long Name:* VS-Pulmonic Implant *SeqNo:* 3700  
*Short Name:* **PulmonicImplant** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a pulmonic valve or device was implanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VSPV  
 ParentLongName: VS-Pulmonic Valve  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

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*Long Name:* VS-Pulmonic - Type Of Implant *SeqNo:* 3701  
*Short Name:* **VSPuTypeImp** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of pulmonic implant  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PulmonicImplant  
 ParentLongName: VS-Pulmonic Implant  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Surgeon Fashioned  
         2 Commercially Supplied

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*Long Name:* VS-Pulmonic - Surgeon Fashioned Implant Material *SeqNo:* 3702  
*Short Name:* **VSPuImpMat** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the material used to fashion the pulmonic implant  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSPuTypeImp  
 ParentLongName: VS-Pulmonic - Type Of Implant  
 ParentHarvestCodes: 1  
 ParentValues: = "Surgeon Fashioned"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	PTFE (Gore-Tex)
2	Pericardium
3	Other

---

*Long Name:* VS-Pulmonic Implant - Device Type *SeqNo:* 3705  
*Short Name:* **PulmonicImplantTy** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of pulmonic valve or valve device implanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSPuTypeImp  
 ParentLongName: VS-Pulmonic - Type Of Implant  
 ParentHarvestCodes: 2  
 ParentValues: = "Commercially Supplied"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Mechanical valve
3	Bioprosthetic valve
4	Transcatheter device
7	Transcatheter device implanted open heart
2	Annuloplasty device
5	Homograft
6	Other

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*Long Name:* VS-Pulmonic Proc-Implant Model Number *SeqNo:* 3710  
*Short Name:* **VSPuIm** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the model number of the prosthesis implanted. The names provided include the manufacturer's model number with "xx" substituting for the device size.

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

ParentShortName: PulmonicImplant

ParentLongName: VS-Pulmonic Implant

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve
- 202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve
- 203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve
- 204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve
- 205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
- 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
- 208 A010 - CryoLife Ascending  
Thoracic Aorta
- 209 A020 - CryoLife Descending  
Thoracic Aorta
- 210 A030 - CryoLife Pulmonary  
Artery
- 211 AV00 - CryoLife Aortic  
Valve and Conduit
- 212 AV10 - CryoLife Aortic  
Valve without Conduit
- 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
- 215 PV10 - CryoLife Pulmonary

- 
- Valve without Conduit
- 216 R010 - CryoLife Aortoiliac  
Grafts
- 217 R020 - CryoLife Femoral  
Popliteal Artery
- 218 SGPV00 - CryoLife SG  
Pulmonary Valve & Conduit
- 219 SGPV10 - CryoLife SG  
Pulmonary Valve without  
Conduit
- 220 V010 - CryoLife Saphenous  
Vein
- 221 V060 - CryoLife Femoral Vein
- 224 2500## - Edwards Prima  
Aortic Stentless Bioprosthesis
- 225 2500P## - Edwards Prima  
Plus Stentless Aortic  
Bioprosthesis
- 226 2625## - Carpentier-Edwards  
Porcine Aortic Bioprosthesis
- 227 2650## - Carpentier-Edwards  
S.A.V. Aortic Porcine  
Bioprosthesis
- 228 2700## - Carpentier-Edwards  
Perimount Pericardial Aortic  
Bioprosthesis
- 229 2700TFX## - Carpentier-  
Edwards Perimount Theon  
Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 230 2800## - Carpentier-Edwards  
Perimount RSR Pericardial  
Aortic Bioprosthesis
- 231 2800TFX## - Carpentier-  
Edwards Perimount Theon  
RSR Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 232 3000## - Carpentier-Edwards  
Perimount Magna Pericardial  
Aortic Bioprosthesis
- 233 3000TFX## - Carpentier-  
Edwards Perimount Magna  
Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 234 3160## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 235 3300TFX## - Carpentier-

- Edwards Perimount Magna  
Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
- 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring



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- 253 5200## - Carpentier-Edwards  
Physio II Mitral Annuloplasty  
Ring
  - 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
  - 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
  - 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
  - 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
  - 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
  - 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
  - 261 7300TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
  - 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
  - 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
  - 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
  - 266 9600## - Edwards Mira  
Mechanical Valve
  - 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
  - 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-

- Valved) - Large
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
- 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
- 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
- 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
- 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
- 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
- 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
- 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
- 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
- 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
- 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left
- 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
- 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
- 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
- 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
- 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
- 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
- 286 174A-## - Medtronic

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- Hancock Apical Left  
Ventricle Connector
- 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
- 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
- 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
- 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
- 291 310## - Medtronic Mosaic  
Mitral
- 504 400## - Medtronic Avalor  
Aortic Valve
- 292 610B## - Medtronic Duran  
Band
- 293 610R## - Medtronic Duran  
Ring
- 294 620B## - Medtronic Duran  
AnCore Band
- 295 620BG## - Medtronic Duran  
AnCore Band With Chordal  
Guide
- 296 620R## - Medtronic Duran  
AnCore Ring
- 297 620RG## - Medtronic Duran  
Ancore Ring With Chordal  
Guide
- 298 638B## - Medtronic CG  
Future Band
- 299 638R## - Medtronic CG  
Future Composite Ring
- 300 670 - Medtronic Simplici-T  
Annuloplasty System
- 301 680R## - Medtronic Profile  
3D Ring
- 302 995CS## - Medtronic  
Freestyle, Complete  
Subcoronary - CS
- 303 995MS## - Medtronic  
Freestyle, Modified  
Subcoronary - MS
- 304 FR995-## - Medtronic  
Freestyle, Full Root - FR
- 307 HC105-## - Medtronic  
Hancock Low-porosity  
Valved Conduit
- 308 HC150-## - Medtronic

- Hancock Modified Orifice  
Pulmonic Valved Conduit
- 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
- 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
- 311 T510C## - Medtronic  
Hancock II Mitral
- 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
- 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
- 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
- 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
- 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
- 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
- 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
- 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
- 329 AF-8## - Sorin Group:  
Carbomedics AnnuloFlex  
Annuloplasty System
- 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
- 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
- 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
- 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral  
Valve

- 335 R5-0## - Sorin Group:  
Carbomedics Reduced Series  
Aortic Valve
- 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
- 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
- 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
- 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
- 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
- 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
- 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
- 345 ##AFHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
- 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
- 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
- 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series

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- 351 ##AHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
  - 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
  - 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
  - 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
  - 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
  - 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
  - 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
  - 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
  - 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
  - 361 ##MEC-102 - Abbott Medical  
Mechanical Heart Valve
  - 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
  - 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
  - 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
  - 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded

- PTFE Cuff
- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve
- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthetic Heart Valve

- 384 B30-##A - Abbott Medical  
Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring
- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical



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- Tailor Flexible Annuloplasty Ring
  - 505 CDS0501 Abbott MitraClip NT Clip Delivery System
  - 506 CDS0601-NTR Abbott MitraClip NTR Clip Delivery System
  - 507 CDS0601-XTR Abbott MitraClip XTR Clip Delivery System
  - 508 CDS0201 - Abbott MitraClip Delivery System
  - 404 PB10-## - Medtronic Melody Transcatheter Pulmonary Valve
  - 405 700FF## - Medtronic Simulus FLX-O Ring
  - 406 700FC## - Medtronic Simulus FLX-C Band
  - 407 735AF## - Medtronic Simulus Adjustable Ring
  - 408 800SR## - Medtronic Simulus Semi-rigid Ring
  - 409 900SFC## - Medtronic TriAd Tricuspid Annuloplasty Ring
  - 410 1000-## - Medtronic 3f Aortic Bioprosthesis
  - 411 6200## - Carpentier-Edwards Physio Tricuspid Annuloplasty Ring
  - 412 9300TFX## - Edwards Sapien Transcatheter Heart Valve
  - 413 305## - Medtronic Mosaic Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical Trifecta Aortic Stented Tissue Valve
  - 416 505DM## - Medtronic Open Pivot AP360 Series Mitral Heart Valve
  - 417 800SC## - Medtronic Simulus Semi-rigid Mitral Annuloplasty Ring
  - 418 6000-## - Medtronic 3f Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary Hemi-Artery
  - 420 SGPH00 - Cryolife SG Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour

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- 3D Annuloplasty ring
  - 422 735AC## - Medtronic  
Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 509 9750TFX## - Edwards  
Spapient 3 Transcatheter  
Heart Valve
  - 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
  - 428 ICV08## - Sorin Group  
Sovering Annuloplasty
  - 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
  - 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
  - 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
  - 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
  - 435 PS ## - Sorin Group  
Pericarbon More Mitral
  - 510 PVS## - Perceval Aortic  
Valve
  - 436 ART ## SOP - Sorin Group  
Soprano Armonia
  - 437 ART ## SG - Sorin Group  
Freedom Solo
  - 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
  - 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
  - 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
  - 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
  - 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
  - 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
  - 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System
  - 448 S3TA1## - Edwards Sapien 3

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- Transcatheter Valve with  
Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve
- 471 CNA21 - Sorin Crown PRT

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- Tissue Valve
  - 472 CNA23 - Sorin Crown PRT  
Tissue Valve
  - 473 CNA25 - Sorin Crown PRT  
Tissue Valve
  - 474 CNA27 - Sorin Crown PRT  
Tissue Valve
  - 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
  - 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
  - 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
  - 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
  - 479 ICV1208 - Sorin Perceval  
Tissue Valves
  - 480 ICV1209 - Sorin Perceval  
Tissue Valves
  - 481 ICV1210 - Sorin Perceval  
Tissue Valves
  - 482 ICV1211 - Sorin Perceval  
Tissue Valves
  - 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
  - 484 ICV1264 - Solo Smart Aortic  
Tissue Valves
  - 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
  - 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 492 ICV1337 - Sorin MEMO 3D

- 
- RECHORD Annuloplasty Ring
  - 493 IVC1247 - Solo Smart Aortic  
Tissue Valves
  - 494 LMCP - LifeNet  
CardioGRAFT Left Mono  
Cusp Patch
  - 495 MCP - LifeNet  
CardioGRAFT Mono Cusp  
Patch
  - 496 PPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch
  - 497 PPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch
  - 498 PRT-## - Portico  
Transcatheter Aortic Valve
  - 499 RMCP - LifeNet  
CardioGRAFT Right Mono  
Cusp Patch
  - 500 TAS - LifeNet CardioGraft  
Thoracic Aorta - Small 16mm  
and less
  - 501 TFGT-##A - Abbott Medical  
Trifecta with Glide  
Technology (GT) Aortic  
Stented Tissue Valve
  - 502 Z65LOTUSKIT## - Lotus  
Valve Kit
  - 776 Surgeon Fashioned Device
  - 777 Other US FDA-Approved  
Device
  - 778 Other Non-US FDA-  
Approved Device
-

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*Long Name:* VS-Pulmonic Proc-Imp-Size *SeqNo:* 3715  
*Short Name:* **VSPuImSz** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Pulmonic implant size.  
*Data Source:* User *Format:* Integer  
Low Value: 5 High Value: 100 UsualRangeLow: 21 UsualRangeHigh: 31  
ParentShortName: PulmonicImplant  
ParentLongName: VS-Pulmonic Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VS-Pulmonic Proc-Imp-Unique Device Identifier *SeqNo:* 3720  
*Short Name:* **VSPuImUDI** *Core:* Yes  
*Section Name:* Valve Surgery *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: PulmonicImplant  
ParentLongName: VS-Pulmonic Implant  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* IABP *SeqNo:* 3725  
*Short Name:* **IABP** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient was placed on an Intra-Aortic Balloon Pump (IABP).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: MechVentAssistDevice  
ParentLongName: Mechanical Assist Device / Ventricular Assist Device  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes

---

2 No

*Long Name:* IABP-When Inserted *SeqNo:* 3730  
*Short Name:* **IABPWhen** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate when the IABP was inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: IABP

ParentLongName: IABP

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Preop
- 2 Intraop
- 3 Postop

*Long Name:* IABP-Indication *SeqNo:* 3735  
*Short Name:* **IABPInd** *Core:* No  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the primary reason for inserting the IABP.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: IABP

ParentLongName: IABP

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Hemodyn Instability
- 2 Procedural Support
- 3 Unstable Angina
- 4 Cardiopulmonary Bypass (CPB) Weaning Failure
- 5 Prophylactic
- 6 Other

*Long Name:* Catheter Based Assist Device Indication *SeqNo:* 3765  
*Short Name:* **CathBasAssistInd** *Core:* No  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate the primary reason for inserting the device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CathBasAssist  
 ParentLongName: Temporary Assist Device Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Hemodynamic Instability  
         2 Cardiopulmonary Bypass (CPB) weaning failure  
         3 PCI Failure  
         5 Procedural support  
         4 Other

*Long Name:* MCAD - ECMO *SeqNo:* 3766  
*Short Name:* **MCADECMO** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate if Extracorporeal membrane oxygenation (ECMO) was used at any time during the acute care period.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: MechVentAssistDevice  
 ParentLongName: Mechanical Assist Device / Ventricular Assist Device  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



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*Long Name:* ECMO Mode *SeqNo:* 3776  
*Short Name:* **ECMO** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the mode in which the patient was placed on ECMO.

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

ParentShortName: MCADECMO

ParentLongName: MCAD - ECMO

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Venovenous
  - 4 Venovenous arterial
  - 6 Venovenous Arterial Venous (VAV)
  - 7 Venovenous arterial (VVA)
- 

*Long Name:* ECMO Initiated *SeqNo:* 3780  
*Short Name:* **ECMOWhen** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate when patient was placed on ECMO.

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

ParentShortName: MCADECMO

ParentLongName: MCAD - ECMO

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Preop
  - 2 Intraop
  - 3 Postop
  - 4 Non-operative
-

<i>Long Name:</i>	ECMO Indication	<i>SeqNo:</i>	3785
<i>Short Name:</i>	<b>ECMOInd</b>	<i>Core:</i>	No
<i>Section Name:</i>	Mechanical Cardiac Assist Devices	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate clinical indication for placing patient on ECMO.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	ECMO		
<i>ParentLongName:</i>	ECMO Mode		
<i>ParentHarvestCodes:</i>	3 4 6		
<i>ParentValues:</i>	= "Veno-venous", "Veno-arterial" or "Veno-Arterial Venous (VAV)"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Cardiac Failure	
	2	Respiratory Failure	
	3	Hypothermia	
	4	Rescue/salvage	
	5	Other	

<i>Long Name:</i>	Temporary Assist Device Used	<i>SeqNo:</i>	3786
<i>Short Name:</i>	<b>CathBasAssist</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Mechanical Cardiac Assist Devices	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient was placed on a catheter based assist device (e.g., Impella).		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	MechVentAssistDevice		
<i>ParentLongName:</i>	Mechanical Assist Device / Ventricular Assist Device		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Temporary Assist Device Used - Position *SeqNo:* 3787  
*Short Name:* **TempAssistDevPos** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate if the temporary assist device was open or catheter based.

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

ParentShortName: CathBasAssist

ParentLongName: Temporary Assist Device Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Open

2 Catheter Based

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*Long Name:* Temporary Assist Type *SeqNo:* 3788  
*Short Name:* **CathBasAssistTy** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of catheter based assist device.

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

ParentShortName: CathBasAssist

ParentLongName: Temporary Assist Device Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 RV

2 LV

3 BiV

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*Long Name:* Temporary Assist Device When Inserted *SeqNo:* 3789  
*Short Name:* **CathBasAssistWhen** *Core:* Yes  
*Section Name:* Mechanical Cardiac Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate when the catheter based assist device was inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CathBasAssist  
 ParentLongName: Temporary Assist Device Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Preop  
         2 Intraop  
         3 Postop

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*Long Name:* VAD-Patient Admitted With VAD *SeqNo:* 3790  
*Short Name:* **PrevVAD** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if at the time of this procedure, the patient has a VAD in place that was inserted during a previous admission or from an outside hospital.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: MechVentAssistDevice  
 ParentLongName: Mechanical Assist Device / Ventricular Assist Device  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

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<i>Long Name:</i>	Previous VAD Facility	<i>SeqNo:</i>	3795
<i>Short Name:</i>	<b>PrevVADF</b>	<i>Core:</i>	No
<i>Section Name:</i>	Ventricular Assist Devices	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate if the previously implanted assist device was implanted at another facility.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	PrevVAD		
<i>ParentLongName:</i>	VAD-Patient Admitted With VAD		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Previous VAD Insertion Date	<i>SeqNo:</i>	3800
<i>Short Name:</i>	<b>PrevVADD</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Ventricular Assist Devices	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate insertion date of previous VAD.		
<i>Data Source:</i>	User	<i>Format:</i>	Date mm/dd/yyyy
<i>ParentShortName:</i>	PrevVAD		
<i>ParentLongName:</i>	VAD-Patient Admitted With VAD		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		

<i>Long Name:</i>	Previous VAD Indication	<i>SeqNo:</i>	3805
<i>Short Name:</i>	<b>PrevVADIn</b>	<i>Core:</i>	No
<i>Section Name:</i>	Ventricular Assist Devices	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Specify indication for VAD insertion.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	PrevVAD		
<i>ParentLongName:</i>	VAD-Patient Admitted With VAD		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<b>Harvest Codes and Value Definitions:</b>			
<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>	
1	Bridge to Transplantation	Includes those patients who are supported with a VAD until a heart transplant is possible.	
2	Bridge to Recovery	Includes those patients who are expected to have ventricular recovery. (i.e. Myocarditis patients, postcardiotomy syndromes, viral cardiomyopathies, AMI w/ revascularization, and post-transplant reperfusion injury).	
3	Destination	Includes those patients where a heart transplant is not an option. The VAD is placed for permanent life sustaining support.	
4	Post Cardiotomy Ventricular Failure	Includes those postcardiotomy patients who receive a VAD because of failure to separate from the heart-lung machine. Postcardiotomy refers to those patients with the inability to wean from cardiopulmonary bypass secondary to left, right, or biventricular failure.	
5	Device Malfunction	Includes those patients who are currently VAD supported and are experiencing device failure.	
6	End of (Device) Life	Mechanical device pump has reached functional life expectancy and requires replacement.	
7	Salvage	Moribund patients unresponsive to medical interventions	

<i>Long Name:</i>	Previous VAD Type	<i>SeqNo:</i>	3810
<i>Short Name:</i>	<b>PrevVADTy</b>	<i>Core:</i>	No
<i>Section Name:</i>	Ventricular Assist Devices	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate type of VAD previously inserted.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	PrevVAD		
<i>ParentLongName:</i>	VAD-Patient Admitted With VAD		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes and Value Definitions:</i>			
<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>	
1	RVAD	Right Ventricular Assist Device	
2	LVAD	Left Ventricular Assist Device	
3	BiVAD	BiVentricular Assist Device	
4	TAH	Total Artificial Heart	

<i>Long Name:</i>	Previous VAD Device Model Number	<i>SeqNo:</i>	3815
<i>Short Name:</i>	<b>PrevVADDevice</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Ventricular Assist Devices	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate Previous VAD device.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	PrevVAD		
<i>ParentLongName:</i>	VAD-Patient Admitted With VAD		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
<u>Code:</u>	<u>Value:</u>		
101	Abiomed AB 5000		
102	Abiomed Abiocor TAH		
103	Abiomed BVS 5000		
104	BerlinHeart EXCOR		
105	BerlinHeart INCOR		
106	CircuLite Synergy Endovascular Micro-Pump System		
107	CircuLite Synergy Micro- Pump (Surgical System)		
139	Eva Heart		
108	HeartWare HVAD		

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109 Impella (catheter based)  
140 Impella 2.0  
141 Impella 5.0  
142 Impella CP  
143 Impella RP  
110 Jarvik 2000  
144 Jostra Rotoflow  
111 Levitronix CentriMag  
112 Levitronix PediMag  
113 LifeBridge  
136 Maquet CardioHelp model  
#70104-7999  
114 Maquet ROTAFLOW  
Centrifugal Pump system  
115 Medtronic Biomedicus  
(Biopump)  
116 Micromed Heart Assist 5  
(DeBakey)  
145 Nu Pulse LVAS  
146 Orqis  
117 pCAS  
118 PediaFlow  
119 PediPump  
120 PennState PVAD  
121 Sorin Revolution  
122 Syncardia CardioWest TAH  
123 Tandem Heart (catheter based)  
124 Terumo Duraheart  
137 Thoratec Heartmate III MLP-  
002487  
125 Thoratec Centrimag  
126 Thoratec Heart Mate II  
127 Thoratec Heart Mate IP  
128 Thoratec Heart Mate VE  
129 Thoratec Heart Mate XVE  
138 THORATEC HEARTMATE  
III IMPLANT KIT (VAD)  
106524  
130 Thoratec IVAD  
131 Thoratec PediMag/ PediVas  
132 Thoratec PVAD  
147 Toyobo  
135 WorldHeart MiFlow  
133 WorldHeart NovaCor  
134 WorldHeart Pediaflow  
999 Other

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*Long Name:* Previous VAD Unique Device Identifier (UDI) *SeqNo:* 3820  
*Short Name:* **PrevVADUDI** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
 ParentShortName: PrevVAD  
 ParentLongName: VAD-Patient Admitted With VAD  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Previous VAD Explanted During This Admission *SeqNo:* 3825  
*Short Name:* **PrevVADExp** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the previously inserted VAD was explanted during this hospitalization.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PrevVAD  
 ParentLongName: VAD-Patient Admitted With VAD  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Yes, not during this procedure	In a prior trip to the operating room.
2	Yes, during this procedure	
3	No	

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*Long Name:* Previous VAD Explanted During This Admission - Reason *SeqNo:* 3830  
*Short Name:* **PrevVADExpRsn** *Core:* No  
*Section Name:* Ventricular Assist Devices *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the primary reason the VAD was explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: PrevVADExp  
 ParentLongName: Previous VAD Explanted During This Admission  
 ParentHarvestCodes: 1|2  
 ParentValues: = "Yes, not during this procedure" or "Yes, during this procedure"  
 Harvest Codes:  
     Code: Value:  
         1 Cardiac transplant  
         2 Recovery  
         3 Device transfer  
         4 Device-related infection  
         5 Device malfunction  
         6 End of (device) life

*Long Name:* Previous VAD Explanted During This Admission - Date *SeqNo:* 3835  
*Short Name:* **PrevVADExpDt** *Core:* No  
*Section Name:* Ventricular Assist Devices *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate date of explant.  
*Data Source:* User *Format:* Date mm/dd/yyyy  
 ParentShortName: PrevVADExp  
 ParentLongName: Previous VAD Explanted During This Admission  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes, not during this procedure"

*Long Name:* Ventricular Assist Device Implanted During This Hospitalization *SeqNo:* 3840  
*Short Name:* **VADImp** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a VAD was inserted during this hospitalization.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: MechVentAssistDevice

ParentLongName: Mechanical Assist Device / Ventricular Assist Device

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VAD-Implant Timing *SeqNo:* 3845  
*Short Name:* **VADImpTmg** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate timing of VAD insertion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VADImp

ParentLongName: Ventricular Assist Device Implanted During This Hospitalization

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Pre-operative (during same hospitalization and prior to OR trip for CV surgical procedure)
- 2 Stand-alone VAD procedure (Not in conjunction with a CV procedure)
- 3 In conjunction with CV surgical procedure (same trip to the OR) - planned
- 4 In conjunction with CV surgical procedure (same trip to the OR) - unplanned
- 5 Post-operative (after surgical procedure during reoperation)

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*Long Name:* VAD Implant Indication *SeqNo:* 3850  
*Short Name:* **VADInd** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason for implanting a Ventricular Assist Device (VAD) during this hospitalization.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VADImp

*ParentLongName:* Ventricular Assist Device Implanted During This Hospitalization

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes and Value Definitions:*

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Bridge to Transplantation	Includes those patients who are supported with a VAD until a heart transplant is possible.
2	Bridge to Recovery	Includes those patients who are expected to have ventricular recovery. (i.e. Myocarditis patients, postcardiotomy syndromes, viral cardiomyopathies, AMI w/ revascularization, and post-transplant reperfusion injury).
3	Destination	Includes those patients where a heart transplant is not an option. The VAD is placed for permanent life sustaining support.
4	Post Cardiotomy Ventricular Failure	Includes those postcardiotomy patients who receive a VAD because of failure to separate from the heart-lung machine. Postcardiotomy refers to those patients with the inability to wean from cardiopulmonary bypass secondary to left, right, or biventricular failure.
5	Device Malfunction	Includes those patients who are currently VAD supported and are experiencing device failure.
6	End of (Device) Life	Mechanical device pump has reached functional life expectancy and requires replacement.
7	Salvage	Moribund patients unresponsive to medical interventions

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*Long Name:* VAD-Implant Type *SeqNo:* 3855  
*Short Name:* **VImpTy** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the first type of VAD implanted during this hospitalization.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VADImp

ParentLongName: Ventricular Assist Device Implanted During This Hospitalization

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Right VAD (RVAD)
- 2 Left VAD (LVAD)
- 3 Biventricular VAD (BiVAD)
- 4 Total Artificial Heart (TAH)

*Long Name:* VAD-Device *SeqNo:* 3860  
*Short Name:* **VProdTy** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the VAD brand name implanted. Implant defined as physical placement of the VAD.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VADImp

ParentLongName: Ventricular Assist Device Implanted During This Hospitalization

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 101 Abiomed AB 5000
- 102 Abiomed Abiocor TAH
- 103 Abiomed BVS 5000
- 104 BerlinHeart EXCOR
- 105 BerlinHeart INCOR
- 106 CircuLite Synergy  
Endovascular Micro-Pump  
System
- 107 CircuLite Synergy Micro-  
Pump (Surgical System)
- 139 Eva Heart
- 108 HeartWare HVAD

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109	Impella (catheter based)
140	Impella 2.0
141	Impella 5.0
142	Impella CP
143	Impella RP
110	Jarvik 2000
144	Jostra Rotoflow
111	Levitronix CentriMag
112	Levitronix PediMag
113	LifeBridge
136	Maquet CardioHelp model #70104-7999
114	Maquet ROTAFLOW Centrifugal Pump system
115	Medtronic Biomedicus (Biopump)
116	Micromed Heart Assist 5 (DeBakey)
145	Nu Pulse LVAS
146	Orqis
117	pCAS
118	PediaFlow
119	PediPump
120	PennState PVAD
121	Sorin Revolution
122	Syncardia CardioWest TAH
123	Tandem Heart (catheter based)
124	Terumo Duraheart
137	Thoratec Heartmate III MLP- 002487
125	Thoratec Centrimag
126	Thoratec Heart Mate II
127	Thoratec Heart Mate IP
128	Thoratec Heart Mate VE
129	Thoratec Heart Mate XVE
138	THORATEC HEARTMATE III IMPLANT KIT (VAD) 106524
130	Thoratec IVAD
131	Thoratec PediMag/ PediVas
132	Thoratec PVAD
147	Toyobo
135	WorldHeart MiFlow
133	WorldHeart NovaCor
134	WorldHeart Pediaflow
999	Other

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*Long Name:* VAD-Implant Date *SeqNo:* 3865  
*Short Name:* **VImpDt** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date the VAD was implanted.  
*Data Source:* User *Format:* Date mm/dd/yyyy  
ParentShortName: VADImp  
ParentLongName: Ventricular Assist Device Implanted During This Hospitalization  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VAD-Implant Unique Device Identifier (UDI) *SeqNo:* 3870  
*Short Name:* **VImpUDI** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: VADImp  
ParentLongName: Ventricular Assist Device Implanted During This Hospitalization  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VAD-Explant *SeqNo:* 3875  
*Short Name:* **VExp** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a VAD was explanted. Explant is defined as physical removal of the VAD.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: MechVentAssistDevice  
ParentLongName: Mechanical Assist Device / Ventricular Assist Device  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Yes, not during this procedure
- 4 Yes, during this procedure

2 No

*Long Name:* VAD-Explant Reason *SeqNo:* 3880  
*Short Name:* **VExpRsn** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason the VAD was explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VExp

ParentLongName: VAD-Explant

ParentHarvestCodes: 3|4

ParentValues: = "Yes, not during this procedure" or "Yes, during this procedure"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Cardiac Transplant	The VAD was explanted for Cardiac Transplant.
2	Recovery	The VAD was removed after cardiac recovery.
3	Device Transfer	The VAD was explanted in order to implant another assist device.
4	Device-Related Infection	An infection within the pump pocket, driveline, VAD Endocarditis, or other infection requiring explantation of the VAD. The body of the VAD has an active infection requiring removal to eliminate the infection. "Device-related infections" are defined as positive culture in the presence of leukocytosis, and /or fever requiring medical or surgical intervention.
5	Device Malfunction	The VAD pump itself is not functioning properly causing hemodynamic compromise, and/or requiring immediate intervention or VAD replacement.
6	End of (device) life	Mechanical device pump has reached functional life expectancy and requires replacement.

*Long Name:* VAD-Explant Date *SeqNo:* 3885  
*Short Name:* **VExpDt** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date the VAD was explanted.  
*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: VExp

ParentLongName: VAD-Explant

ParentHarvestCodes: 3

ParentValues: = "Yes, not during this procedure"



*Long Name:* VAD-Implant #2 *SeqNo:* 3895  
*Short Name:* **VImp2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether a second ventricular assist device was implanted.

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

ParentShortName: VADImp

ParentLongName: Ventricular Assist Device Implanted During This Hospitalization

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VAD-Implant Timing #2 *SeqNo:* 3900  
*Short Name:* **VADImpTmg2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate timing of VAD #2 insertion.

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

ParentShortName: VImp2

ParentLongName: VAD-Implant #2

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Pre-operative (during same hospitalization and prior to OR trip for CV surgical procedure)
- 2 Stand-alone VAD procedure (Not in conjunction with a CV Procedure)
- 3 In conjunction with CV surgical procedure (same trip to the OR) - planned
- 4 In conjunction with CV surgical procedure (same trip to the OR) - unplanned
- 5 Post-operative (after surgical procedure during reoperation)

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*Long Name:* VAD Implant Indication #2 *SeqNo:* 3905  
*Short Name:* **VADInd2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason for implanting a Ventricular Assist Device (VAD) #2 during this hospitalization.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VImp2

*ParentLongName:* VAD-Implant #2

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes and Value Definitions:*

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Bridge to Transplantation	Includes those patients who are supported with a VAD until a heart transplant is possible.
2	Bridge to Recovery	Includes those patients who are expected to have ventricular recovery. (i.e. Myocarditis patients, postcardiotomy syndromes, viral cardiomyopathies, AMI w/ revascularization, and post-transplant reperfusion injury).
3	Destination	Includes those patients where a heart transplant is not an option. The VAD is placed for permanent life sustaining support.
4	Post Cardiotomy Ventricular Failure	Includes those postcardiotomy patients who receive a VAD because of failure to separate from the heart-lung machine. Postcardiotomy refers to those patients with the inability to wean from cardiopulmonary bypass secondary to left, right, or biventricular failure.
5	Device Malfunction	Includes those patients who are currently VAD supported and are experiencing device failure.
6	End of (Device) Life	Mechanical device pump has reached functional life expectancy and requires replacement.
7	Salvage	Moribund patients unresponsive to medical interventions

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*Long Name:* VAD-Implant Type #2 *SeqNo:* 3910  
*Short Name:* **VImpTy2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the second type of ventricular assist device implanted.

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

ParentShortName: VImp2

ParentLongName: VAD-Implant #2

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Right VAD (RVAD)
- 2 Left VAD (LVAD)
- 3 Biventricular VAD (BiVAD)
- 4 Total Artificial Heart (TAH)

*Long Name:* VAD-Device #2 *SeqNo:* 3915  
*Short Name:* **VProdTy2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the specific product #2 implanted. Implant defined as physical placement of the VAD.

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

ParentShortName: VImp2

ParentLongName: VAD-Implant #2

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 101 Abiomed AB 5000
- 102 Abiomed Abiocor TAH
- 103 Abiomed BVS 5000
- 104 BerlinHeart EXCOR
- 105 BerlinHeart INCOR
- 106 CircuLite Synergy  
Endovascular Micro-Pump  
System
- 107 CircuLite Synergy Micro-  
Pump (Surgical System)
- 139 Eva Heart
- 108 HeartWare HVAD

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109 Impella (catheter based)  
140 Impella 2.0  
141 Impella 5.0  
142 Impella CP  
143 Impella RP  
110 Jarvik 2000  
144 Jostra Rotoflow  
111 Levitronix CentriMag  
112 Levitronix PediMag  
113 LifeBridge  
136 Maquet CardioHelp model  
#70104-7999  
114 Maquet ROTAFLOW  
Centrifugal Pump system  
115 Medtronic Biomedicus  
(Biopump)  
116 Micromed Heart Assist 5  
(DeBakey)  
145 Nu Pulse LVAS  
146 Orqis  
117 pCAS  
118 PediaFlow  
119 PediPump  
120 PennState PVAD  
121 Sorin Revolution  
122 Syncardia CardioWest TAH  
123 Tandem Heart (catheter based)  
124 Terumo Duraheart  
137 Thoratec Heartmate III MLP-  
002487  
125 Thoratec Centrimag  
126 Thoratec Heart Mate II  
127 Thoratec Heart Mate IP  
128 Thoratec Heart Mate VE  
129 Thoratec Heart Mate XVE  
138 THORATEC HEARTMATE  
III IMPLANT KIT (VAD)  
106524  
130 Thoratec IVAD  
131 Thoratec PediMag/ PediVas  
132 Thoratec PVAD  
147 Toyobo  
135 WorldHeart MiFlow  
133 WorldHeart NovaCor  
134 WorldHeart Pediaflow  
999 Other

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*Long Name:* VAD-Implant Date #2 *SeqNo:* 3920  
*Short Name:* **VImpDt2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date the VAD #2 was implanted.  
*Data Source:* User *Format:* Date mm/dd/yyyy  
ParentShortName: VImp2  
ParentLongName: VAD-Implant #2  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VAD-Implant Unique Device Identifier (UDI) #2 *SeqNo:* 3925  
*Short Name:* **VImpUDI2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: VImp2  
ParentLongName: VAD-Implant #2  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* VAD-Explant #2 *SeqNo:* 3930  
*Short Name:* **VExp2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a second VAD was explanted. Explant is defined as physical removal of the VAD.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: MechVentAssistDevice  
ParentLongName: Mechanical Assist Device / Ventricular Assist Device  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Yes, not during this procedure
- 4 Yes, during this procedure

2 No

*Long Name:* VAD-Explant Reason #2 *SeqNo:* 3935  
*Short Name:* **VExpRsn2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason the VAD #2 was explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VExp2

*ParentLongName:* VAD-Explant #2

*ParentHarvestCodes:* 3|4

*ParentValues:* = "Yes, not during this procedure" or "Yes, during this procedure"

*Harvest Codes and Value Definitions:*

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Cardiac Transplant	The VAD was explanted for Cardiac Transplant.
2	Recovery	The VAD was removed after cardiac recovery.
3	Device Transfer	The VAD was explanted in order to implant another assist device.
4	Device-Related Infection	An infection within the pump pocket, driveline, VAD Endocarditis, or other infection requiring explantation of the VAD. The body of the VAD has an active infection requiring removal to eliminate the infection. "Device-related infections" are defined as positive culture in the presence of leukocytosis, and /or fever requiring medical or surgical intervention.
5	Device Malfunction	The VAD pump itself is not functioning properly causing hemodynamic compromise, and/or requiring immediate intervention or VAD replacement.
6	End of (device) life	Mechanical device pump has reached functional life expectancy and requires replacement.

*Long Name:* VAD-Explant Date #2 *SeqNo:* 3940  
*Short Name:* **VExpDt2** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date the VAD #2 was explanted.  
*Data Source:* User *Format:* Date mm/dd/yyyy

*ParentShortName:* VExp2

*ParentLongName:* VAD-Explant #2

*ParentHarvestCodes:* 3

*ParentValues:* = "Yes, not during this procedure"

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*Long Name:* VAD-Implant #3 *SeqNo:* 3950  
*Short Name:* **VImp3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether a third ventricular assist device was implanted.

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

ParentShortName: VImp2

ParentLongName: VAD-Implant #2

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* VAD-Implant Timing #3 *SeqNo:* 3955  
*Short Name:* **VADImpTmg3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate timing of VAD #3 insertion.

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

ParentShortName: VImp3

ParentLongName: VAD-Implant #3

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Pre-operative (during same hospitalization and prior to OR trip for CV surgical procedure)
- 2 Stand-alone VAD procedure (Not in conjunction with a CV procedure)
- 3 In conjunction with CV surgical procedure (same trip to the OR) - planned
- 4 In conjunction with CV surgical procedure (same trip to the OR) - unplanned
- 5 Post-operative (after surgical procedure during reoperation)

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*Long Name:* VAD Implant Indication #3 *SeqNo:* 3960  
*Short Name:* **VADInd3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason for implanting a Ventricular Assist Device (VAD)#3 during this hospitalization.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VImp3

*ParentLongName:* VAD-Implant #3

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes and Value Definitions:*

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Bridge to Transplantation	Includes those patients who are supported with a VAD until a heart transplant is possible.
2	Bridge to Recovery	Includes those patients who are expected to have ventricular recovery. (i.e. Myocarditis patients, postcardiotomy syndromes, viral cardiomyopathies, AMI w/ revascularization, and post-transplant reperfusion injury).
3	Destination	Includes those patients where a heart transplant is not an option. The VAD is placed for permanent life sustaining support.
4	Post Cardiotomy Ventricular Failure	Includes those postcardiotomy patients who receive a VAD because of failure to separate from the heart-lung machine. Postcardiotomy refers to those patients with the inability to wean from cardiopulmonary bypass secondary to left, right, or biventricular failure.
5	Device Malfunction	Includes those patients who are currently VAD supported and are experiencing device failure.
6	End of (Device) Life	Mechanical device pump has reached functional life expectancy and requires replacement.
7	Salvage	Moribund patients unresponsive to medical interventions

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*Long Name:* VAD-Implant Type #3 *SeqNo:* 3965  
*Short Name:* **VImpTy3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the third type of ventricular assist device implanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VImp3

ParentLongName: VAD-Implant #3

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Right VAD (RVAD)
- 2 Left VAD (LVAD)
- 3 Biventricular VAD (BiVAD)
- 4 Total Artificial Heart (TAH)

*Long Name:* VAD-Device #3 *SeqNo:* 3970  
*Short Name:* **VProdTy3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the specific product #3 implanted. Implant defined as physical placement of the VAD.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VImp3

ParentLongName: VAD-Implant #3

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 101 Abiomed AB 5000
- 102 Abiomed Abiocor TAH
- 103 Abiomed BVS 5000
- 104 BerlinHeart EXCOR
- 105 BerlinHeart INCOR
- 106 CircuLite Synergy  
Endovascular Micro-Pump  
System
- 107 CircuLite Synergy Micro-  
Pump (Surgical System)
- 139 Eva Heart
- 108 HeartWare HVAD

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109 Impella (catheter based)  
140 Impella 2.0  
141 Impella 5.0  
142 Impella CP  
143 Impella RP  
110 Jarvik 2000  
144 Jostra Rotoflow  
111 Levitronix CentriMag  
112 Levitronix PediMag  
113 LifeBridge  
136 Maquet CardioHelp model  
#70104-7999  
114 Maquet ROTAFLOW  
Centrifugal Pump system  
115 Medtronic Biomedicus  
(Biopump)  
116 Micromed Heart Assist 5  
(DeBakey)  
145 Nu Pulse LVAS  
146 Orqis  
117 pCAS  
118 PediaFlow  
119 PediPump  
120 PennState PVAD  
121 Sorin Revolution  
122 Syncardia CardioWest TAH  
123 Tandem Heart (catheter based)  
124 Terumo Duraheart  
137 Thoratec Heartmate III MLP-  
002487  
125 Thoratec Centrimag  
126 Thoratec Heart Mate II  
127 Thoratec Heart Mate IP  
128 Thoratec Heart Mate VE  
129 Thoratec Heart Mate XVE  
138 THORATEC HEARTMATE  
III IMPLANT KIT (VAD)  
106524  
130 Thoratec IVAD  
131 Thoratec PediMag/ PediVas  
132 Thoratec PVAD  
147 Toyobo  
135 WorldHeart MiFlow  
133 WorldHeart NovaCor  
134 WorldHeart Pediaflow  
999 Other

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*Long Name:* VAD-Implant Date #3 *SeqNo:* 3975  
*Short Name:* **VImpDt3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date the VAD #3 was implanted.  
*Data Source:* User *Format:* Date mm/dd/yyyy  
ParentShortName: VImp3  
ParentLongName: VAD-Implant #3  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* VAD-Implant Unique Device Identifier (UDI) #3 *SeqNo:* 3980  
*Short Name:* **VImpUDI3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the device UDI if available, otherwise leave blank.  
*Data Source:* User *Format:* Text  
ParentShortName: VImp3  
ParentLongName: VAD-Implant #3  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* VAD-Explant #3 *SeqNo:* 3985  
*Short Name:* **VExp3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a third VAD was explanted. Explant is defined as physical removal of the VAD.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: VExp2  
ParentLongName: VAD-Explant #2  
ParentHarvestCodes: 3|4  
ParentValues: = "Yes, not during this procedure" or "Yes, during this procedure"  
Harvest Codes:  
Code: Value:  
3 Yes, not during this procedure  
4 Yes, during this procedure

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2 No

*Long Name:* VAD-Explant Reason #3 *SeqNo:* 3990  
*Short Name:* **VExpRsn3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason the VAD #3 was explanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VExp3

ParentLongName: VAD-Explant #3

ParentHarvestCodes: 3|4

ParentValues: = "Yes, not during this procedure" or "Yes, during this procedure"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Cardiac Transplant	The VAD was explanted for Cardiac Transplant.
2	Recovery	The VAD was removed after cardiac recovery.
3	Device Transfer	The VAD was explanted in order to implant another assist device.
4	Device-Related Infection	An infection within the pump pocket, driveline, VAD Endocarditis, or other infection requiring explantation of the VAD. The body of the VAD has an active infection requiring removal to eliminate the infection. "Device-related infections" are defined as positive culture in the presence of leukocytosis, and /or fever requiring medical or surgical intervention.
5	Device Malfunction	The VAD pump itself is not functioning properly causing hemodynamic compromise, and/or requiring immediate intervention or VAD replacement.
6	End of (device) life	Mechanical device pump has reached functional life expectancy and requires replacement.

*Long Name:* VAD-Explant Date #3 *SeqNo:* 3995  
*Short Name:* **VExpDt3** *Core:* Yes  
*Section Name:* Ventricular Assist Devices *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date the VAD #3 was explanted.  
*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: VExp3

ParentLongName: VAD-Explant #3

ParentHarvestCodes: 3

ParentValues: = "Yes, not during this procedure"

*Long Name:* Other Card-ASD Repair - PFO Type *SeqNo:* 4030  
*Short Name:* **OCarASDPFO** *Core:* No  
*Section Name:* Other Cardiac Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a patent foramen ovale (PFO) was repaired.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Other Card-ASD Repair - Secundum Or Sinus Venosus *SeqNo:* 4035  
*Short Name:* **OCarASDSec** *Core:* No  
*Section Name:* Other Cardiac Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a secundum or sinus venosus ASD was repaired.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Other Card-AFib Intracardiac Lesions *SeqNo:* 4040  
*Short Name:* **OCarAFibIntraLes** *Core:* No  
*Section Name:* Other Cardiac Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether intracardiac lesions were created for the purpose of AFib ablation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Other Card-AFib Epicardial Lesions *SeqNo:* 4045  
*Short Name:* **OCarAFibEpLes** *Core:* No  
*Section Name:* Other Cardiac Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether epicardial lesions were created for the purpose of AFib ablation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Other Card-Atrial Appendage Procedure *SeqNo:* 4050  
*Short Name:* **OCarAAProc** *Core:* No  
*Section Name:* Other Cardiac Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether atrial appendage ligation/exclusion was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         5 Yes  
         4 No

*Long Name:* Other Card-Subaortic Stenosis Resection Type *SeqNo:* 4051  
*Short Name:* **OCarSubaStenResTy** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of subaortic stenosis.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Muscle  
         3 Membrane  
         6 Other  
         5 Not Documented  
         7 No

*Long Name:* Other Card-Pulmonary Thromboembolectomy *SeqNo:* 4052

*Short Name:* **OCPulThromDis** *Core:* Yes

*Section Name:* Other Cardiac Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether the patient had surgery for pulmonary thromboembolic disease.

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

ParentShortName: OpOCard

ParentLongName: Other Cardiac Procedure, except Afib

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

2 Acute

3 Chronic

1 No

*Long Name:* Other Card-Myocardial Stem Cell Therapy *SeqNo:* 4053

*Short Name:* **OCarStemCell** *Core:* Yes

*Section Name:* Other Cardiac Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether myocardial stem cell procedure was performed.

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

ParentShortName: OpOCard

ParentLongName: Other Cardiac Procedure, except Afib

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No



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*Long Name:* Other Card-LVA *SeqNo:* 4054  
*Short Name:* **OCarLVA** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had a Left Ventricular Aneurysm Repair.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

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*Long Name:* Other Card-Arrhythmia Device Surgery *SeqNo:* 4055  
*Short Name:* **OCarACD** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate which arrhythmia correction device was surgically placed in conjunction with the primary surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes and Value Definitions:  
     Code: Value: Definition:  
         2 Pacemaker An internal electronic generator that controls the heart rate.  
         3 Pacemaker with CRT An internal permanent pacemaker that uses biventricular electrical stimulation to synchronize ventricular contraction.  
         4 ICD An internal device that defibrillates the heart.  
         5 ICD with CRT An internal AICD that uses biventricular electrical stimulation to synchronize ventricular contraction.  
         6 Implantable Recorder  
         1 None

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*Long Name:* Other Card-Lead Insertion *SeqNo:* 4060  
*Short Name:* **OCarLeadInsert** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether lead(s) insertion was performed. Do not capture temporary lead placement.

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

ParentShortName: OpOCard

ParentLongName: Other Cardiac Procedure, except Afib

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* Other Card-Arrhythmia Correction Surgery-Lead Extraction *SeqNo:* 4065  
*Short Name:* **OCarACDLE** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether procedure included lead extraction for a device intended to treat cardiac arrhythmias.

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

ParentShortName: OpOCard

ParentLongName: Other Cardiac Procedure, except Afib

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

3 Yes, planned

4 Yes, unplanned due to surgical complication

5 Yes, unplanned due to unsuspected disease or anatomy

2 No

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<i>Long Name:</i>	Other Card-Subaortic Stenosis Resection	<i>SeqNo:</i>	4091
<i>Short Name:</i>	<b>OCarSubaStenRes</b>	<i>Core:</i>	No
<i>Section Name:</i>	Other Cardiac Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether resection of subaortic stenosis was performed.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OpOCard		
<i>ParentLongName:</i>	Other Cardiac Procedure, except Afib		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Other Card-Surgical Ventricular Restoration	<i>SeqNo:</i>	4105
<i>Short Name:</i>	<b>OCarSVR</b>	<i>Core:</i>	No
<i>Section Name:</i>	Other Cardiac Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient had a Surgical Ventricular Restoration either in conjunction with, or as the primary surgical procedure. Surgical Ventricular Restorations are procedures that restore the geometry of the heart after an anterior MI. They include the Dor procedure or the SAVER procedure. This SVR procedure is distinct from an anterior left ventricular aneurysmectomy (LVA) and from a Batista procedure (left ventricular volume reduction procedure).		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OpOCard		
<i>ParentLongName:</i>	Other Cardiac Procedure, except Afib		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

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*Long Name:* Other Card-Transmyocardial Laser Revascularization *SeqNo:* 4110  
*Short Name:* **OCarLasr** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient underwent the creation of multiple channels in left ventricular myocardium with a laser fiber either in conjunction with, or as the primary surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpOCard  
ParentLongName: Other Cardiac Procedure, except Afib  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Other Card-Tumor *SeqNo:* 4115  
*Short Name:* **OCTumor** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had resection of an intracardiac tumor.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpOCard  
ParentLongName: Other Cardiac Procedure, except Afib  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
2 Myxoma  
3 Fibroelastoma  
6 Other  
1 No

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*Long Name:* Other Card-Card Tx *SeqNo:* 4120  
*Short Name:* **OCarCrTx** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had a Heterotopic or Orthotopic heart transplantation either in conjunction with, or as the primary surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpOCard  
ParentLongName: Other Cardiac Procedure, except Afib  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Other Card-Cardiac Trauma *SeqNo:* 4125  
*Short Name:* **OCarTrma** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had a surgical procedure for an injury due to Cardiac Trauma either in conjunction with, or as the primary surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpOCard  
ParentLongName: Other Cardiac Procedure, except Afib  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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<i>Long Name:</i>	Other Card-VSD	<i>SeqNo:</i>	4130
<i>Short Name:</i>	<b>OCarVSD</b>	<i>Core:</i>	No
<i>Section Name:</i>	Other Cardiac Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient had a Ventricular Septal Defect Repair either in conjunction with, or as the primary surgical procedure.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OpOCard		
<i>ParentLongName:</i>	Other Cardiac Procedure, except Afib		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	3	Yes	
	2	No	

<i>Long Name:</i>	Other Card-Acquired VSD Repair	<i>SeqNo:</i>	4131
<i>Short Name:</i>	<b>OCarAcqVSD</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Other Cardiac Procedures	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the patient had an acquired Ventricular Septal Defect Repair either in conjunction with, or as the primary surgical procedure.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OpOCard		
<i>ParentLongName:</i>	Other Cardiac Procedure, except Afib		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Other Card-Other *SeqNo:* 4135  
*Short Name:* **OCardOthr** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had another cardiac procedure performed either in conjunction with, or as the primary surgical procedure that is not included within this section.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpOCard  
ParentLongName: Other Cardiac Procedure, except Afib  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Other Card - ASD Repair *SeqNo:* 4136  
*Short Name:* **OCardASDRep** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if an ASD repair was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OpOCard  
ParentLongName: Other Cardiac Procedure, except Afib  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Other Card - ASD Repair Type *SeqNo:* 4137  
*Short Name:* **OCardASDRepTyp** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the ASD was congenital (secundum) or acquired.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCardASDRep  
 ParentLongName: Other Card - ASD Repair  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Congenital (secundum)  
         2 Acquired

---

*Long Name:* Other Card - PFO Repair *SeqNo:* 4138  
*Short Name:* **OCardPFORep** *Core:* Yes  
*Section Name:* Other Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if an PFO repair was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OpOCard  
 ParentLongName: Other Cardiac Procedure, except Afib  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---



*Long Name:* Other Card-Left Atrial Appendage Obliteration *SeqNo:* 4139  
*Short Name:* **OCarAAMeth** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the method used to ligate/exclude the atrial appendage  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* AFibProc

*ParentLongName:* Atrial Fibrillation Procedure Performed

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 6 Epicardially applied occlusion device
- 7 Epicardial Staple
- 2 Epicardial Suture
- 8 Endocardial Suture
- 9 Prior Transcatheter Device In Existence
- 10 Other
- 11 No

*Long Name:* Other Card-Atrial Appendage Ligation/Exclusion Model *SeqNo:* 4140  
*Short Name:* **OCarAAModel** *Core:* No  
*Section Name:* Other Cardiac Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the epicardial occlusion device model used  
*Data Source:* User *Format:* Text

*ParentShortName:* OCarAAMeth

*ParentLongName:* Other Card-Left Atrial Appendage Obliteration

*ParentHarvestCodes:* 6

*ParentValues:* = "Epicardially applied occlusion device"

---

*Long Name:* Other Card- Epicardial Occlusion Device UDI *SeqNo:* 4141  
*Short Name:* **OCarAAUDI** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier of the epicardial occlusion device  
*Data Source:* User *Format:* Text  
 ParentShortName: OCarAAMeth  
 ParentLongName: Other Card-Left Atrial Appendage Obliteration  
 ParentHarvestCodes: 6  
 ParentValues: = "Epicardially applied occlusion device"

---

*Long Name:* Other Card- Left Atrial Appendage Amputation *SeqNo:* 4142  
*Short Name:* **OCarAAppAmp** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a Left Atrial Appendage (LAA) amputation was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AFibProc  
 ParentLongName: Atrial Fibrillation Procedure Performed  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* AFib Lesion Location *SeqNo:* 4191  
*Short Name:* **OCarAFibLesLoc** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the location of the majority of lesions created to treat atrial fibrillation.

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

ParentShortName: AFibProc

ParentLongName: Atrial Fibrillation Procedure Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Epicardial
- 2 Intracardiac
- 3 Both
- 4 None

*Long Name:* Atrial Fibrillation Surgical Procedure-Method of Lesion Creation - Radio Frequency *SeqNo:* 4200  
*Short Name:* **OCarAFibMethRad** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName:* Adultdata1

*Definition:* Indicate whether the method used to create the lesion(s) for the AFib ablation procedure included radio frequency.

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

ParentShortName: AFibProc

ParentLongName: Atrial Fibrillation Procedure Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* AFib Lesion - Method *SeqNo:* 4201  
*Short Name:* **AFibLesMeth** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the method used to create the lesion(s) for the AFib ablation procedure, choose all that apply.  
*Data Source:* User *Format:* Multi-Select  
ParentShortName: OCarAFibLesLoc  
ParentLongName: AFib Lesion Location  
ParentHarvestCodes: 1|2|3  
ParentValues: = "Epicardial", "Intracardiac" or "Both"  
Harvest Codes:  
Code: Value:  
1 Radiofrequency  
2 Cut-and-sew  
3 Cryo

---

*Long Name:* Atrial Fibrillation - Lesion Creation Radiofrequency - Bipolar *SeqNo:* 4205  
*Short Name:* **OCarAFibMethRadBi** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the radiofrequency method used to create the lesion(s) for the AFib ablation was bipolar.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: AFibLesMeth  
ParentLongName: AFib Lesion - Method  
ParentHarvestCodes: 1  
ParentValues: = "Radiofrequency"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No  
3 Not Documented

---

<i>Long Name:</i>	Atrial Fibrillation Surgical Procedure-Method of Lesion Creation - Cut-And-Sew	<i>SeqNo:</i>	4210
<i>Short Name:</i>	<b>OCarAFibMethCAS</b>	<i>Core:</i>	No
<i>Section Name:</i>	Atrial Fibrillation Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the method used to create the lesion(s) for the AFib ablation procedure included cut-and-sew.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	AFibProc		
<i>ParentLongName:</i>	Atrial Fibrillation Procedure Performed		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

<i>Long Name:</i>	Atrial Fibrillation Surgical Procedure-Method of Lesion Creation - Cryo	<i>SeqNo:</i>	4215
<i>Short Name:</i>	<b>OCarAFibMethCryo</b>	<i>Core:</i>	No
<i>Section Name:</i>	Atrial Fibrillation Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the method used to create the lesion(s) for the AFib ablation procedure included cryoablation.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	AFibProc		
<i>ParentLongName:</i>	Atrial Fibrillation Procedure Performed		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Lesions Documented *SeqNo:* 4240  
*Short Name:* **OCarLesDoc** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the lesions created during the atrial fibrillation surgery are documented.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AFibProc

ParentLongName: Atrial Fibrillation Procedure Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Atrial Afibrillation - Lesion - Left Atrial *SeqNo:* 4242  
*Short Name:* **AFibLeftAtrialLes** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate if Left Atrial lesions were performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OCarLesDoc

ParentLongName: Lesions Documented

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Atrial Afibrillation - Left Atrial Lesion - Method *SeqNo:* 4244  
*Short Name:* **AFibLeftAtrialLesMeth** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the types of Left Atrial lesions. If more than one lesion was made, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: AFibLeftAtrialLes

ParentLongName: Atrial Afibrillation - Lesion - Left Atrial

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Pulmonary Vein Isolation
- 2 Posterior Box Lesion
- 3 Mitral Line
- 4 Left atrial appendage line
- 5 Epicardial Coronary Sinus Lesion
- 6 Epicardial Posterior Wall Other (i.e. Convergent procedure)
- 7 Other

---

*Long Name:* Atrial Afibrillation - Right Atrial Lesion *SeqNo:* 4246  
*Short Name:* **AFibRtAtrialLes** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if Right Atrial lesions were performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OCarLesDoc

ParentLongName: Lesions Documented

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Atrial Afibrillation - Right Atrial Lesion - Method *SeqNo:* 4248  
*Short Name:* **AFibRtAtrialLesMeth** *Core:* Yes  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the types of Right Atrial lesions. If more than one lesion was made, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* AFibRtAtrialLes  
*ParentLongName:* Atrial Afibrillation - Right Atrial Lesion  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Harvest Codes:*

- | <u>Code:</u> | <u>Value:</u>               |
|--------------|-----------------------------|
| 1            | SVC Line                    |
| 2            | IVC Line                    |
| 3            | Tricuspid Completion Line   |
| 4            | Verticle Right Atrial Line  |
| 5            | Right Atrial Appendage Line |
| 6            | Other                       |

*Long Name:* AFib Lesion Location - Bilateral Pulmonary Vein Isolation *SeqNo:* 4250  
*Short Name:* **AFibLes1** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the AFib lesion was pulmonary vein isolation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OCarLesDoc  
*ParentLongName:* Lesions Documented  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Harvest Codes:*

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |



*Long Name:* AFib Lesion Location - Box Lesion Only *SeqNo:* 4255  
*Short Name:* **AFibLes2** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a box lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Inferior Pulmonary Vein Connecting Lesion *SeqNo:* 4260  
*Short Name:* **AFibLes3a** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was an Inferior Pulmonary Vein Connecting Lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Superior Pulmonary Vein Connecting Lesion *SeqNo:* 4265  
*Short Name:* **AFibLes3b** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Superior Pulmonary Vein Connecting Lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* AFib Lesion Location - Posterior Mitral Annular Line Lesion *SeqNo:* 4270  
*Short Name:* **AFibLes4** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Posterior Mitral Annular Line  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* AFib Lesion Location - Pulmonary Vein Connecting Lesion to Anterior Mitral Annulus *SeqNo:* 4275  
*Short Name:* **AFibLes5** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a - Pulmonary Vein Connecting Lesion to Anterior Mitral Annulus lesion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* AFib Lesion Location - Mitral Valve Annular Lesion *SeqNo:* 4280  
*Short Name:* **AFibLes6** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Mitral Valve Cryo Lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* AFib Lesion Location - LAA Ligation/Removal/Obliteration *SeqNo:* 4285  
*Short Name:* **AFibLes7** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the left Atrial Appendage was ligated or removed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Pulmonary Vein to LAA Lesion *SeqNo:* 4290  
*Short Name:* **AFibLes8** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Pulmonary Vein to LAA lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Intercaval Line to Tricuspid Annulus ('T' lesion) *SeqNo:* 4295  
*Short Name:* **AFibLes9** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was an Intercaval Line to Tricuspid Annulus ('T' lesion)  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Tricuspid Cryo Lesion, Medial (10) *SeqNo:* 4300  
*Short Name:* **AFibLes10** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Tricuspid Cryo Lesion, Medial (10)  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Intercaval Line (SVC and IVC) *SeqNo:* 4305  
*Short Name:* **AFibLes11** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was an Intercaval Line  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Tricuspid Annular Line to RAA *SeqNo:* 4310  
*Short Name:* **AFibLes12** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Tricuspid Annular Line to RAA lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - Tricuspid Cryo Lesion (13) *SeqNo:* 4315  
*Short Name:* **AFibLes13** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Tricuspid Cryo Lesion (13)  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - RAA Ligation/Removal/Obliteration *SeqNo:* 4320  
*Short Name:* **AFibLes14** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the Right Atrial Appendage was ligated or removed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - RAA Lateral Wall (Short) *SeqNo:* 4325  
*Short Name:* **AFibLes15a** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a RAA Lateral Wall (Short) lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* AFib Lesion Location - RAA Lateral Wall to 'T' Lesion *SeqNo:* 4330  
*Short Name:* **AFibLes15b** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a RAA Lateral Wall to 'T' Lesion  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



*Long Name:* AFib Lesion Location - Coronary Sinus Lesion *SeqNo:* 4336  
*Short Name:* **AFitLesCSL** *Core:* No  
*Section Name:* Atrial Fibrillation Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the AFib lesion was a Coronary Sinus Lesion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OCarLesDoc  
 ParentLongName: Lesions Documented  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Family History Of Disease Of The Aorta *SeqNo:* 4500  
*Short Name:* **FamHistAorta** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is a family history of disease of the aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Aneurysm  
         2 Dissection  
         3 Both Aneurysm and Dissection  
         4 Sudden Death  
         6 Unknown  
         5 None

---

*Long Name:* Patient's Genetic History *SeqNo:* 4505  
*Short Name:* **PatGenHist** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the genetic history of the patient  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Marfan
- 2 Ehlers-Danlos
- 3 Loeys-Dietz
- 4 Non-Specific familial thoracic aortic syndrome
- 5 Aortic Valve Morphology
- 6 Turner syndrome
- 7 Other
- 9 Unknown
- 8 None

---

*Long Name:* Prior Aortic Intervention *SeqNo:* 4510  
*Short Name:* **PriorAorta** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the patient had prior aortic intervention  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

---

*Long Name:* Prior Aortic Intervention - Previous Repair - Root (Zone 0 - A) *SeqNo:* 4520  
*Short Name:* **PriorRepRoot** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the prior intervention involved the aortic root  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorAorta

ParentLongName: Prior Aortic Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Previous Repair Type - Root (Zone 0 - A) *SeqNo:* 4521  
*Short Name:* **PriorRepTyRoot** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of prior root repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepRoot

ParentLongName: Prior Aortic Intervention - Previous Repair - Root (Zone 0 - A)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Open

2 Endovascular

3 Hybrid

---

---

*Long Name:* Prior Aortic Intervention - Repair Failure - Root (Zone 0 - A) *SeqNo:* 4522  
*Short Name:* **PriorFailRoot** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is failure of the prior root repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepRoot

ParentLongName: Prior Aortic Intervention - Previous Repair - Root (Zone 0 - A)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Disease Progression - Root (Zone 0 - A) *SeqNo:* 4523  
*Short Name:* **PriorProgRoot** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is progression of disease following the prior root repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepRoot

ParentLongName: Prior Aortic Intervention - Previous Repair - Root (Zone 0 - A)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Previous Repair - Ascending (Zone 0 - B&C) *SeqNo:* 4525  
*Short Name:* **PriorRepAsc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the prior intervention involved the ascending aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorAorta

ParentLongName: Prior Aortic Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Prior Aortic Intervention - Previous Repair Type - Ascending (Zone 0 - B&C) *SeqNo:* 4526  
*Short Name:* **PriorRepTyAsc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of prior ascending aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepAsc

ParentLongName: Prior Aortic Intervention - Previous Repair - Ascending (Zone 0 - B&C)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Open

2 Endovascular

3 Hybrid

---

*Long Name:* Prior Aortic Intervention - Repair Failure - Ascending (Zone 0 - B&C) *SeqNo:* 4527  
*Short Name:* **PriorFailAsc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is failure of the prior ascending repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepAsc

ParentLongName: Prior Aortic Intervention - Previous Repair - Ascending (Zone 0 - B&C)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Disease Progression - Ascending (Zone 0 - *SeqNo:* 4528  
*Short Name:* **PriorProgAsc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is progression of disease following the prior ascending aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepAsc

ParentLongName: Prior Aortic Intervention - Previous Repair - Ascending (Zone 0 - B&C)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

---

*Long Name:* Prior Aortic Intervention - Previous Repair - Arch (Zones 1,2,3) *SeqNo:* 4530  
*Short Name:* **PriorRepArch** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the prior intervention involved the aortic arch  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorAorta

ParentLongName: Prior Aortic Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Previous Repair Type - Arch (Zones 1,2,3) *SeqNo:* 4531  
*Short Name:* **PriorRepTyArch** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of prior arch repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepArch

ParentLongName: Prior Aortic Intervention - Previous Repair - Arch (Zones 1,2,3)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Open

2 Endovascular

3 Hybrid

---

---

*Long Name:* Prior Aortic Intervention - Repair Failure - Arch (Zones 1,2,3) *SeqNo:* 4532  
*Short Name:* **PriorFailArch** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is failure of the prior arch repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepArch

ParentLongName: Prior Aortic Intervention - Previous Repair - Arch (Zones 1,2,3)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Disease Progression - Arch (Zones 1,2,3) *SeqNo:* 4533  
*Short Name:* **PriorProgArch** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is progression of disease following the prior arch repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepArch

ParentLongName: Prior Aortic Intervention - Previous Repair - Arch (Zones 1,2,3)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---



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*Long Name:* Prior Aortic Intervention - Previous Repair - Descending (Zones 4,5) *SeqNo:* 4535  
*Short Name:* **PriorRepDesc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the prior intervention involved the descending aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorAorta

ParentLongName: Prior Aortic Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Previous Repair Type - Descending (Zones 4,5) *SeqNo:* 4536  
*Short Name:* **PriorRepTyDesc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of prior descending aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepDesc

ParentLongName: Prior Aortic Intervention - Previous Repair - Descending (Zones 4,5)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Open

2 Endovascular

3 Hybrid

---

*Long Name:* Prior Aortic Intervention - Repair Failure - Descending (Zones 4,5) *SeqNo:* 4537  
*Short Name:* **PriorFailDesc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is failure of the prior descending repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepDesc

ParentLongName: Prior Aortic Intervention - Previous Repair - Descending (Zones 4,5)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Prior Aortic Intervention - Disease Progression - Descending (Zones 4,5) *SeqNo:* 4538  
*Short Name:* **PriorProgDesc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is progression of disease following the prior descending aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepDesc

ParentLongName: Prior Aortic Intervention - Previous Repair - Descending (Zones 4,5)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

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---

*Long Name:* Prior Aortic Intervention - Previous Repair - Suprarenal Abdominal (Zones 6,7) *SeqNo:* 4540  
*Short Name:* **PriorRepSupraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the prior intervention involved the suprarenal abdominal aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorAorta  
 ParentLongName: Prior Aortic Intervention  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Prior Aortic Intervention - Previous Repair Type - Suprarenal Abdominal (Zones 6,7) *SeqNo:* 4541  
*Short Name:* **PriorRepTySupraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of prior suprarenal abdominal aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepSupraAb  
 ParentLongName: Prior Aortic Intervention - Previous Repair - Suprarenal Abdominal (Zones 6,7)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Open
2	Endovascular
3	Hybrid

---

---

*Long Name:* Prior Aortic Intervention - Repair Failure - Suprarenal Abdominal (Zones 6,7) *SeqNo:* 4542  
*Short Name:* **PriorFailSupraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether there is failure of the prior suprarenal abdominal repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* PriorRepSupraAb  
*ParentLongName:* Prior Aortic Intervention - Previous Repair - Suprarenal Abdominal (Zones 6,7)  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Prior Aortic Intervention - Disease Progression - Suprarenal Abdominal (Zones 6,7) *SeqNo:* 4543  
*Short Name:* **PriorProgSupraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether there is progression of disease following the prior suprarenal abdominal aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* PriorRepSupraAb  
*ParentLongName:* Prior Aortic Intervention - Previous Repair - Suprarenal Abdominal (Zones 6,7)  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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---

*Long Name:* Prior Aortic Intervention - Previous Repair - Infrarenal Abdominal (Zones 8,9,10,11) *SeqNo:* 4545  
*Short Name:* **PriorRepInfraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the prior intervention involved the infrarenal abdominal aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorAorta  
 ParentLongName: Prior Aortic Intervention  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Prior Aortic Intervention - Previous Repair Type - Infrarenal Abdominal (Zones 8,9,10,11) *SeqNo:* 4546  
*Short Name:* **PriorRepTyInfraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of prior infrarenal abdominal aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PriorRepInfraAb  
 ParentLongName: Prior Aortic Intervention - Previous Repair - Infrarenal Abdominal (Zones 8,9,10,11)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Open
2	Endovascular
3	Hybrid

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*Long Name:* Prior Aortic Intervention - Repair Failure - Infrarenal Abdominal (Zones 8,9,10,11) *SeqNo:* 4547  
*Short Name:* **PriorFailInfraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is failure of the prior infrarenal abdominal repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* PriorRepInfraAb  
*ParentLongName:* Prior Aortic Intervention - Previous Repair - Infrarenal Abdominal (Zones 8,9,10,11)  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Prior Aortic Intervention - Disease Progression - Infrarenal Abdominal (Zones 8,9,10,11) *SeqNo:* 4548  
*Short Name:* **PriorProgInfraAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is progression of disease following the prior infrarenal abdominal aorta repair  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* PriorRepInfraAb  
*ParentLongName:* Prior Aortic Intervention - Previous Repair - Infrarenal Abdominal (Zones 8,9,10,11)  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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---

*Long Name:* Current Procedure with Endoleak involvement *SeqNo:* 4620  
*Short Name:* **Endoleak** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if current procedure is with endoleak involvement.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

*Long Name:* Endoleak - Type I - Leak At Graft Attachment Site *SeqNo:* 4625  
*Short Name:* **EndoleakTypeI** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endoleak is type I  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Endoleak  
 ParentLongName: Current Procedure with Endoleak involvement  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

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*Long Name:* Endoleak - Type I - Location *SeqNo:* 4630  
*Short Name:* **EndoleakTyILoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location of the type I endoleak  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndoleakTypeI

ParentLongName: Endoleak - Type I - Leak At Graft Attachment Site

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Ia-Proximal
- 2 Ib-Distal
- 3 Ic-Iliac occluder

---

*Long Name:* Endoleak - Type II - Aneurysm Sac Filling Via Branch Vessel *SeqNo:* 4635  
*Short Name:* **EndoleakTypeII** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endoleak is type II  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Endoleak

ParentLongName: Current Procedure with Endoleak involvement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No



---

*Long Name:* Endoleak - Type II - Number Of Vessels *SeqNo:* 4640  
*Short Name:* **EndoleakVessNum** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the number of vessels involved in the type II endoleak  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* EndoleakTypeII

*ParentLongName:* Endoleak - Type II - Aneurysm Sac Filling Via Branch Vessel

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Iia-Single vessel
  - 2 Iib-Two vessels or more
- 

*Long Name:* Endoleak - Type III - Leak Through Defect In Graft *SeqNo:* 4645  
*Short Name:* **EndoleakTypeIII** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether endoleak is type III  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* Endoleak

*ParentLongName:* Current Procedure with Endoleak involvement

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* Endoleak - Type III - Graft Defect Type *SeqNo:* 4650  
*Short Name:* **EndoleakType** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the graft defect type  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndoleakTypeIII

ParentLongName: Endoleak - Type III - Leak Through Defect In Graft

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 IIIa-Junctional separation of modular components
- 2 IIIb-Endograft fractures or holes

---

*Long Name:* Endoleak - Type IV - Leak Through Graft Fabric - Porosity *SeqNo:* 4655  
*Short Name:* **EndoleakTypeIV** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endoleak is type IV  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Endoleak

ParentLongName: Current Procedure with Endoleak involvement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Endoleak - Type V - Endotension-Expansion Aneurysm Sac Without Leak      *SeqNo:* 4660  
*Short Name:* **EndoleakTypeV**      *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures      *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether endoleak is type V  
*Data Source:* User      *Format:* Text (categorical values specified by STS)

*ParentShortName:* Endoleak

*ParentLongName:* Current Procedure with Endoleak involvement

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

*Long Name:* Current Procedure with Aorta Infection      *SeqNo:* 4665  
*Short Name:* **Infection**      *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures      *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if current procedure is with infection.  
*Data Source:* User      *Format:* Text (categorical values specified by STS)

*ParentShortName:* AortProc

*ParentLongName:* Aorta Procedure Performed

*ParentHarvestCodes:* 3|4|5

*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Aorta Infection Type *SeqNo:* 4670  
*Short Name:* **InfectType** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of aortic infection  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Infection

ParentLongName: Current Procedure with Aorta Infection

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Graft infection
  - 2 Valvular endocarditis
  - 3 Nonvalvular endocarditis
  - 4 Native aorta
  - 5 Multiple infection types
- 

*Long Name:* Current Procedure with Trauma *SeqNo:* 4675  
*Short Name:* **Trauma** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if current procedure is with trauma.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Aortic Trauma - Location *SeqNo:* 4676  
*Short Name:* **AorticTraumaLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the location of the aorta where trauma occurred. If more than one location of trauma, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: Trauma

ParentLongName: Current Procedure with Trauma

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u>    |
|--------------|------------------|
| 1            | Root             |
| 2            | Ascending        |
| 3            | Arch             |
| 4            | Descending       |
| 5            | Thoracoabdominal |
| 6            | Abdominal        |

*Long Name:* Trauma Location - Root *SeqNo:* 4680  
*Short Name:* **TraumacRoot** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1

*Definition:* Indicate whether the aortic trauma involved the root

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

ParentShortName: Trauma

ParentLongName: Current Procedure with Trauma

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |

*Long Name:* Trauma Location - Ascending *SeqNo:* 4685  
*Short Name:* **TraumaAsc** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic trauma involved the ascending aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Trauma  
 ParentLongName: Current Procedure with Trauma  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Trauma Location - Arch *SeqNo:* 4690  
*Short Name:* **TraumaArch** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic trauma involved the arch  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Trauma  
 ParentLongName: Current Procedure with Trauma  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Trauma Location - Descending *SeqNo:* 4695  
*Short Name:* **TraumaDesc** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic trauma involved the descending aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Trauma  
 ParentLongName: Current Procedure with Trauma  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Trauma Location - Thoracoabdominal *SeqNo:* 4700  
*Short Name:* **TraumaThorac** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the aortic trauma involved the thoracoabdominal aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Trauma  
 ParentLongName: Current Procedure with Trauma  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

<i>Long Name:</i>	Trauma Location - Abdominal	<i>SeqNo:</i>	4705
<i>Short Name:</i>	<b>TraumaAbdom</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether the aortic trauma involved the abdominal aorta		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Trauma		
<i>ParentLongName:</i>	Current Procedure with Trauma		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Aorta Presentation	<i>SeqNo:</i>	4710
<i>Short Name:</i>	<b>Presentation</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the clinical presentation		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	AortProc		
<i>ParentLongName:</i>	Aorta Procedure Performed		
<i>ParentHarvestCodes:</i>	3 4 5		
<i>ParentValues:</i>	= "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Pain	
	2	CHF	
	3	Cardiac Arrest	
	4	Syncope	
	9	Infection	
	12	Asymptomatic	
	13	Injury related to surgical complication	
	16	Neuro Deficit	
	14	Other	
	15	Unknown	



---

*Long Name:* Aorta Presentation - Neuro Deficit *SeqNo:* 4711  
*Short Name:* **AortPresNeuroDef** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of neuro deficits the patient presented with. Timeframe is from Admission to OR Entry.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Presentation

ParentLongName: Aorta Presentation

ParentHarvestCodes: 16

ParentValues: = "Neuro Deficit"

Harvest Codes:

Code: Value:

- 1 Stroke
  - 2 Limb numbness
  - 3 Paralysis
  - 4 Hoarseness (acute vocal cord dysfunction)
- 

*Long Name:* Aorta Primary indication *SeqNo:* 4712  
*Short Name:* **PrimIndic** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the primary indication for intervention  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Aneurysm
  - 2 Dissection
  - 9 Other
-

*Long Name:* Aneurysm - Etiology *SeqNo:* 4720  
*Short Name:* **AnEtiology** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the aneurysm etiology  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 1

ParentValues: = "Aneurysm"

Harvest Codes:

Code: Value:

- 1 Atherosclerosis
- 2 Infection
- 3 Inflammatory
- 4 Connective Tissue/Syndromic Disorder
- 5 Ulcerative Plaque/Penetrating Ulcer
- 6 Pseudoaneurysm
- 7 Mycotic
- 8 Traumatic transection
- 9 Intercostal visceral patch
- 10 Anastomotic site
- 12 Aortic Valve Morphology
- 13 Chronic Dissection
- 11 Unknown

*Long Name:* Aneurysm - Type *SeqNo:* 4725  
*Short Name:* **AnType** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the aneurysm type  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 1

ParentValues: = "Aneurysm"

Harvest Codes:

Code: Value:

- 1 Fusiform

- 
- 2 Saccular
  - 3 Unknown
- 

*Long Name:* Aneurysm - Rupture *SeqNo:* 4730  
*Short Name:* **AnRupt** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the aneurysm ruptured  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* PrimIndic

*ParentLongName:* Aorta Primary indication

*ParentHarvestCodes:* 1

*ParentValues:* = "Aneurysm"

*Harvest Codes:*

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Aneurysm - Rupture - Contained *SeqNo:* 4735  
*Short Name:* **AnRuptCon** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the rupture was contained  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* AnRupt

*ParentLongName:* Aneurysm - Rupture

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Aneurysm - Location *SeqNo:* 4740  
*Short Name:* **AnLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the location of the maximum diameter of the aneurysm.

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

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 1

ParentValues: = "Aneurysm"

Harvest Codes:

Code: Value:

- 1 Below STJ
- 2 STJ-midascending
- 3 Midascending to distal ascending
- 4 Zone 1
- 5 Zone 2
- 6 Zone 3
- 7 Zone 4
- 8 Zone 5
- 9 Zone 6
- 10 Zone 7
- 11 Zone 8
- 12 Zone 9
- 13 Zone 10
- 14 Zone 11

*Long Name:* Dissection - Timing *SeqNo:* 4745  
*Short Name:* **DisTiming** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the timing of the aortic dissection

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

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 
- 1 Hyperacute (<24 hours)
  - 2 Acute (>=24 hours, <2 weeks)
  - 3 Subacute (>= 2 weeks, <90 days)
  - 4 Chronic (>=90 days)
  - 5 Acute on chronic
  - 6 Unknown
- 

*Long Name:* Dissection Onset Date Known *SeqNo:* 4746  
*Short Name:* **DisOnsetDtKnown** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the date of dissection onset is known  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Dissection Onset Date *SeqNo:* 4747  
*Short Name:* **DisOnsetDt** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate dissection onset date  
*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: DisOnsetDtKnown

ParentLongName: Dissection Onset Date Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Dissection - Primary Tear Location *SeqNo:* 4750  
*Short Name:* **DisTearLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate location of the primary tear  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Below STJ
- 2 STJ-midascending
- 3 Midascending to distal ascending
- 4 Zone 1
- 5 Zone 2
- 6 Zone 3
- 7 Zone 4
- 8 Zone 5
- 9 Zone 6
- 10 Zone 7
- 11 Zone 8
- 12 Zone 9
- 13 Zone 10
- 14 Zone 11

*Long Name:* Dissection - Secondary Tear Location *SeqNo:* 4755  
*Short Name:* **DisSecLoc** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate location of secondary tear  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

1	Below STJ
2	STJ-midascending
3	Midascending to distal ascending
4	Zone 1
5	Zone 2
6	Zone 3
7	Zone 4
8	Zone 5
9	Zone 6
10	Zone 7
11	Zone 8
12	Zone 9
13	Zone 10
14	Zone 11

*Long Name:* Proximal Dissection Extent Known *SeqNo:* 4760

*Short Name:* **DisRetExt** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate if proximal (toward heart) dissection extent is known.

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

*ParentShortName:* PrimIndic

*ParentLongName:* Aorta Primary indication

*ParentHarvestCodes:* 2

*ParentValues:* = "Dissection"

*Harvest Codes:*

Code: Value:

- 1 Yes
- 2 No
- 3 Unknown

---

*Long Name:* Most Proximal Dissection Location *SeqNo:* 4765  
*Short Name:* **DisRetLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate location of most proximal (closest to heart) dissection location.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DisRetExt

ParentLongName: Proximal Dissection Extent Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Below STJ
  - 2 STJ-midascending
  - 3 Midascending to distal ascending
  - 4 Zone 1
  - 5 Zone 2
  - 6 Zone 3
  - 7 Zone 4
- 

*Long Name:* Distal Dissection Extent Known *SeqNo:* 4775  
*Short Name:* **DistalExt** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate if distal (away from heart) dissection is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
-



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*Long Name:* Distal Dissection Extension Location *SeqNo:* 4780  
*Short Name:* **DistalExtLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate location of most distal (away from heart) dissection location.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DistalExt

ParentLongName: Distal Dissection Extent Known

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Below STJ
- 2 STJ-midascending
- 3 Midascending to distal ascending
- 4 Zone 1
- 5 Zone 2
- 6 Zone 3
- 7 Zone 4
- 8 Zone 5
- 9 Zone 6
- 10 Zone 7
- 11 Zone 8
- 12 Zone 9
- 13 Zone 10
- 14 Zone 11

---

*Long Name:* Stanford Classification Known *SeqNo:* 4781  
*Short Name:* **StanfordClass** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the Stanford classification is known.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 
- 1 Type A
  - 2 Type B
  - 3 Unknown
  - 4 Other
- 

*Long Name:* Retrograde dissection caused by Aortic Stent Graft (Post TEVAR) *SeqNo:* 4782  
*Short Name:* **DisPosTEVAR** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if there was a proximal dissection (toward the heart) caused by an aortic stent graft (post TEVAR).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Patient within 30 days post TAVR *SeqNo:* 4783  
*Short Name:* **PtLess30PostTAVR** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the patient had a TAVR within the last 30 days.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
-

---

*Long Name:* Patient within 30 days Post Other Cath Procedure *SeqNo:* 4784  
*Short Name:* **PtLess30PostOthCath** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if the patient had any catheter based procedure, other than TAVR, within the last 30 days.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* Dissection - Malperfusion *SeqNo:* 4785  
*Short Name:* **DisMal** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
-

*Long Name:* Dissection - Malperfusion Type *SeqNo:* 4786  
*Short Name:* **DisMalType** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate where malperfusion occurred. If malperfusion occurred in more than one location, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: DisMal

ParentLongName: Dissection - Malperfusion

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Coronary
- 2 Right Common Carotid
- 3 Left Subclavian
- 4 Superior Mesenteric
- 5 Renal, right
- 6 Spinal
- 7 Right subclavian
- 8 Left Common Carotid
- 9 Celiac
- 10 Renal, left
- 11 Iliofemoral

*Long Name:* Dissection - Malperfusion - Coronary *SeqNo:* 4790  
*Short Name:* **DisMalCor** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1

*Definition:* Indicate whether coronary malperfusion was present

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

ParentShortName: DisMal

ParentLongName: Dissection - Malperfusion

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Dissection - Malperfusion - Right Subclavian *SeqNo:* 4791  
*Short Name:* **DisMalRtSubclav** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether right subclavian malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Dissection - Malperfusion - Right Common Carotid *SeqNo:* 4792  
*Short Name:* **DisMalRtComCar** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether right common carotid malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Dissection - Malperfusion - Left Common Carotid *SeqNo:* 4800  
*Short Name:* **DisMalComL** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether left common carotid malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Dissection - Malperfusion - Left Subclavian *SeqNo:* 4805  
*Short Name:* **DisMalSubL** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether left subclavian malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Dissection - Malperfusion - Celiac *SeqNo:* 4810  
*Short Name:* **DisMalCel** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether celiac malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Dissection - Malperfusion - Superior Mesenteric *SeqNo:* 4815  
*Short Name:* **DisMalSup** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether superior mesenteric malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Dissection - Malperfusion - Renal, Left *SeqNo:* 4820  
*Short Name:* **DisMalRenL** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether left renal malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Dissection - Malperfusion - Renal, Right *SeqNo:* 4825  
*Short Name:* **DisMalRenR** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether right renal malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



*Long Name:* Dissection - Malperfusion - Iliofemoral *SeqNo:* 4830  
*Short Name:* **DisMalllio** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether iliofemoral malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Dissection - Malperfusion - Spinal *SeqNo:* 4835  
*Short Name:* **DisMalSpin** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether spinal malperfusion was present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DisMal  
 ParentLongName: Dissection - Malperfusion  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* Dissection - Lower Extremity Motor Function *SeqNo:* 4836  
*Short Name:* **DisLowMotFun** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate if any NEW motor deficit of either lower extremity was present preoperatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 No deficit
  - 2 Weakness
  - 3 Paralysis
  - 4 Unknown
- 

*Long Name:* Dissection - Lower Extremity Sensory Deficit *SeqNo:* 4837  
*Short Name:* **DisLowSenDef** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate if any NEW sensory deficit of either lower extremity was present preoperatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 2

ParentValues: = "Dissection"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
-

---

*Long Name:* Dissection - Rupture *SeqNo:* 4840  
*Short Name:* **DisRupt** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether dissection ruptured  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
  
ParentShortName: PrimIndic  
ParentLongName: Aorta Primary indication  
ParentHarvestCodes: 2  
ParentValues: = "Dissection"  
Harvest Codes:  
    Code: Value:  
        1 Yes  
        2 No

---

*Long Name:* Dissection - Rupture - Contained *SeqNo:* 4845  
*Short Name:* **DisRuptCon** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the rupture was contained  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
  
ParentShortName: DisRupt  
ParentLongName: Dissection - Rupture  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Yes  
        2 No

---

---

*Long Name:* Dissection - Rupture Location *SeqNo:* 4850  
*Short Name:* **DisRuptLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the rupture location  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DisRupt

ParentLongName: Dissection - Rupture

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Below STJ
- 2 STJ-midascending
- 3 Midascending to distal ascending
- 4 Zone 1
- 5 Zone 2
- 6 Zone 3
- 7 Zone 4
- 8 Zone 5
- 9 Zone 6
- 10 Zone 7
- 11 Zone 8
- 12 Zone 9
- 13 Zone 10
- 14 Zone 11

---

*Long Name:* Aorta Primary Indication - Other *SeqNo:* 4851  
*Short Name:* **PrimIndicOther** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patient's primary indication for Aorta surgery other than Aneurysm or Dissection.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: PrimIndic

ParentLongName: Aorta Primary indication

ParentHarvestCodes: 9

ParentValues: = "Other"

Harvest Codes:

Code: Value:

- 
- 1 Valvular Dysfunction
  - 2 Stenosis/Obstruction
  - 3 Intramural Hematoma
  - 4 Coarctation
  - 5 Endoleak
  - 6 Infection
  - 7 Injury related to Surgical  
Complication/Perforation
  - 8 Trauma
- 

*Long Name:* Root - Aortic-Annular Ectasia *SeqNo:* 4855

*Short Name:* **RootAAnnEctasia** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate whether aorto-annular ectasia is present

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
- 

*Long Name:* Root - Asymmetric Root Dilation *SeqNo:* 4870

*Short Name:* **RootDilaAsym** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate whether asymmetric root dilation is present

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes

- 
- 2 No
  - 3 Unknown
- 

*Long Name:* Root - Asymmetric Root Dilation - Location *SeqNo:* 4875  
*Short Name:* **RootDilaAsym** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate location of asymmetric root dilation  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RootDilaAsym

ParentLongName: Root - Asymmetric Root Dilation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Right
  - 2 Left
  - 3 Non-coronary
- 

*Long Name:* Root - Sinus Of Valsalva Aneurysm *SeqNo:* 4878  
*Short Name:* **RootSinus** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether there is a sinus of valsalva aneurysm  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Unknown
-

<i>Long Name:</i>	Root - Sinus Of Valsalva Aneurysm - Location	<i>SeqNo:</i>	4879
<i>Short Name:</i>	<b>RootSinusLoc</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate location of sinus of valsalva aneurysm		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	RootSinus		
<i>ParentLongName:</i>	Root - Sinus Of Valsalva Aneurysm		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Right	
	2	Left	
	3	Non-coronary	

<i>Long Name:</i>	Root - Sinus Of Valsalva Aneurysm - Multi Location	<i>SeqNo:</i>	4880
<i>Short Name:</i>	<b>RootSinusLocMult</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate locations of sinus of valsalva aneurysm.		
<i>Data Source:</i>	User	<i>Format:</i>	Multi-Select
<i>ParentShortName:</i>	RootSinus		
<i>ParentLongName:</i>	Root - Sinus Of Valsalva Aneurysm		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Right	
	2	Left	
	3	Non-coronary	

---

*Long Name:* Arch Anomalies *SeqNo:* 4881  
*Short Name:* **ArchAnom** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether arch anomalies are present.

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Arch Anomalies Type *SeqNo:* 4882

*Short Name:* **ArchAnomTy** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate which arch anomalies are present. If there are multiple arch anomalies, choose all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: ArchAnom

ParentLongName: Arch Anomalies

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Arch Type Right

2 Aberrant Right Subclavian

3 Kommerell/Ductus Bulge

4 Variant vertebral origin

5 Aberrant Left Subclavian

6 Bovine

---



*Long Name:* Arch Type *SeqNo:* 4883  
*Short Name:* **ArchType** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate arch type  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Left  
         2 Right

*Long Name:* Arch - Aberrant Right Subclavian *SeqNo:* 4884  
*Short Name:* **ArchAbRtSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the right subclavian is aberrant  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Arch - Aberrant Left Subclavian *SeqNo:* 4885  
*Short Name:* **ArchAbLtSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the left subclavian is aberrant  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Arch - Kommerell *SeqNo:* 4886  
*Short Name:* **ArchKom** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether Kommerell arch type is present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Arch - Bovine *SeqNo:* 4887  
*Short Name:* **ArchBovine** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether bovine arch type is present  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Arch - Variant Vertebral Origin *SeqNo:* 4888  
*Short Name:* **ArchVarVertOr** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is variant origin of the vertebral  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

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*Long Name:* Patent Internal Mammary Artery Bypass Graft *SeqNo:* 4889  
*Short Name:* **ArchPatIMA** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is a patent internal mammary bypass graft present  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No  
3 N/A

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*Long Name:* Ascending Asymmetric Dilation *SeqNo:* 4891  
*Short Name:* **AscAsymDil** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there is asymmetric dilatation of the ascending aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No  
3 Unknown

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*Long Name:* Ascending Proximal Coronary Bypass Grafts *SeqNo:* 4892  
*Short Name:* **AscProxGr** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether proximal bypass grafts are present on the aorta  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

*Long Name:* 3-D Reconstruction Aortic Diameter Measurements Available *SeqNo:* 4893  
*Short Name:* **Diameter3DMeas** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether 3-D reconstruction aortic diameter measurements are available  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* Diameter Measurements 3D - Annulus *SeqNo:* 4894  
*Short Name:* **Diam3DAnnulus** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate diameter of the annulus  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: Diameter3DMeas  
 ParentLongName: 3-D Reconstruction Aortic Diameter Measurements Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Diameter Measurements 3D - Sinus Segment *SeqNo:* 4895  
*Short Name:* **Diam3DSinus** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate diameter of the sinus segment  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: Diameter3DMeas  
 ParentLongName: 3-D Reconstruction Aortic Diameter Measurements Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Diameter Measurements 3D - Sinotubular Junction *SeqNo:* 4896  
*Short Name:* **Diam3DSinotubular** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of the sinotubular junction  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: Diameter3DMeas  
 ParentLongName: 3-D Reconstruction Aortic Diameter Measurements Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

<i>Long Name:</i>	Diameter Measurements 3D - Mid-ascending	<i>SeqNo:</i>	4897
<i>Short Name:</i>	<b>Diam3DMidAsc</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the diameter of the mid-ascending aorta		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	10	High Value:	120
ParentShortName:	Diameter3DMeas		
ParentLongName:	3-D Reconstruction Aortic Diameter Measurements Available		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

<i>Long Name:</i>	Diameter Measurements 3D - Distal Ascending	<i>SeqNo:</i>	4898
<i>Short Name:</i>	<b>Diam3DDistalAsc</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the diameter of the distal ascending aorta		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	10	High Value:	120
ParentShortName:	Diameter3DMeas		
ParentLongName:	3-D Reconstruction Aortic Diameter Measurements Available		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

*Long Name:* Diameter Measurements 3D - Zone 1 *SeqNo:* 4899  
*Short Name:* **Diam3DZone1** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 1  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Diameter Measurements 3D - Zone 2 *SeqNo:* 4900  
*Short Name:* **Diam3DZone2** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 2  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Diameter Measurements 3D - Zone 3 *SeqNo:* 4901  
*Short Name:* **Diam3DZone3** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 3  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"



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*Long Name:* Diameter Measurements 3D - Zone 4 *SeqNo:* 4902  
*Short Name:* **Diam3DZone4** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 4  
*Data Source:* User *Format:* Integer  
Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

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*Long Name:* Diameter Measurements 3D - Zone 5 *SeqNo:* 4903  
*Short Name:* **Diam3DZone5** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 5  
*Data Source:* User *Format:* Integer  
Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

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*Long Name:* Diameter Measurements 3D - Zone 6 *SeqNo:* 4904  
*Short Name:* **Diam3DZone6** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 6  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Diameter Measurements 3D - Zone 7 *SeqNo:* 4905  
*Short Name:* **Diam3DZone7** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 7  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

*Long Name:* Diameter Measurements 3D - Zone 8 *SeqNo:* 4906  
*Short Name:* **Diam3DZone8** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 8  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Diameter Measurements 3D - Zone 9 *SeqNo:* 4907  
*Short Name:* **Diam3DZone9** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 9  
*Data Source:* User *Format:* Integer  
Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

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*Long Name:* Diameter Measurements 3D - Zone 10 *SeqNo:* 4908  
*Short Name:* **Diam3DZone10** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 10  
*Data Source:* User *Format:* Integer  
Low Value: 10 High Value: 120  
*ParentShortName:* Diameter3DMeas  
*ParentLongName:* 3-D Reconstruction Aortic Diameter Measurements Available  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

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*Long Name:* Diameter Measurements Largest - Annulus *SeqNo:* 4910  
*Short Name:* **DiamLgstAnnulus** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate diameter of the annulus  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Sinus Segment *SeqNo:* 4911  
*Short Name:* **DiamLgstSinus** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate diameter of the sinus segment  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Sinotubular Junction *SeqNo:* 4912  
*Short Name:* **DiamLgstSinotubular** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of the sinotubular junction  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Mid-ascending *SeqNo:* 4913  
*Short Name:* **DiamLgstMidAsc** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of the mid-ascending aorta  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Distal Ascending *SeqNo:* 4914  
*Short Name:* **DiamLgstDistalAsc** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of the distal ascending aorta  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 1 *SeqNo:* 4915  
*Short Name:* **DiamLgstZone1** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 1  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 2 *SeqNo:* 4916  
*Short Name:* **DiamLgstZone2** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 2  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 3 *SeqNo:* 4917  
*Short Name:* **DiamLgstZone3** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 3  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 4 *SeqNo:* 4918  
*Short Name:* **DiamLgstZone4** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 4  
*Data Source:* User *Format:* Integer  
 Low Value: 10      High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 5 *SeqNo:* 4919  
*Short Name:* **DiamLgstZone5** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 5  
*Data Source:* User *Format:* Integer  
 Low Value: 10      High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"



*Long Name:* Diameter Measurements Largest - Zone 6 *SeqNo:* 4920  
*Short Name:* **DiamLgstZone6** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 6  
*Data Source:* User *Format:* Integer  
 Low Value: 10      High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 7 *SeqNo:* 4921  
*Short Name:* **DiamLgstZone7** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 7  
*Data Source:* User *Format:* Integer  
 Low Value: 10      High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 8 *SeqNo:* 4922  
*Short Name:* **DiamLgstZone8** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 8  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 9 *SeqNo:* 4923  
*Short Name:* **DiamLgstZone9** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 9  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 10 *SeqNo:* 4924  
*Short Name:* **DiamLgstZone10** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 10  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

*Long Name:* Diameter Measurements Largest - Zone 11 *SeqNo:* 4925  
*Short Name:* **DiamLgstZone11** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate the diameter of zone 11  
*Data Source:* User *Format:* Integer  
 Low Value: 10 High Value: 120  
*ParentShortName:* AortProc  
*ParentLongName:* Aorta Procedure Performed  
*ParentHarvestCodes:* 3|4|5  
*ParentValues:* = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

---

*Long Name:* Treated Zone with the Largest Diameter *SeqNo:* 4926  
*Short Name:* **TrtZnLrgDiam** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the treated zone with the largest diameter.

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Below STJ
  - 2 STJ-midascending
  - 3 Midascending-distal ascending
  - 4 Zone 1
  - 5 Zone 2
  - 6 Zone 3
  - 7 Zone 4
  - 8 Zone 5
  - 9 Zone 6
  - 10 Zone 7
  - 11 Zone 8
  - 12 Zone 9
  - 13 Zone 10
  - 14 Zone 11
-

---

*Long Name:* Treated Zone with the Largest Diameter - Measurement *SeqNo:* 4927  
*Short Name:* **TrtZnLrgDiamMeas** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the size of the largest diameter of the treated zone. Measurement to be recorded in millimeters (mm).  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 120.0  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

---

*Long Name:* Treated Zone with the Largest Diameter - Method Obtained *SeqNo:* 4928  
*Short Name:* **TrtZnLrgDiamMeasMeth** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the method used to obtain the recorded size. See Intent/Clarification section for directions if more than one source is available.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 3D or 4D Reconstruction
  - 2 PreOp CT
  - 3 PreOp MRI
  - 4 PreOp Echo
  - 5 Intra Operatively
-

*Long Name:* Proximal to Treated Zone(s) (Largest Diameter) Available *SeqNo:* 4929  
*Short Name:* **ProxTreatZoneAvail** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a measurement is available on the zone proximal (closest to the heart) to treated area.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No

*Long Name:* Proximal to Treated Zone(s) (Largest Diameter) Available - Location *SeqNo:* 4930  
*Short Name:* **ProxTreatZoneAvailLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the zone proximal (closest to the heart) to the treated zone(s).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ProxTreatZoneAvail

ParentLongName: Proximal to Treated Zone(s) (Largest Diameter) Available

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Below STJ  
2 STJ-midascending  
3 Midascending-distal ascending  
4 Zone 1  
5 Zone 2  
6 Zone 3  
7 Zone 4  
8 Zone 5  
9 Zone 6  
10 Zone 7  
11 Zone 8  
12 Zone 9

13 Zone 10  
14 Zone 11

---

*Long Name:* Proximal to Treated Zone(s) (Largest Diameter) Available - Measurement *SeqNo:* 4931  
*Short Name:* **ProxTreatZoneAvailMeas** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the largest diameter of the zone proximal (closest to the heart) to the treated zone(s).  
Measurement to be recorded in millimeters (mm).  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 120.0  
ParentShortName: ProxTreatZoneAvail  
ParentLongName: Proximal to Treated Zone(s) (Largest Diameter) Available  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Proximal to Treated Zone(s) (Largest Diameter) - Method Obtained *SeqNo:* 4932  
*Short Name:* **ProxTreatZoneAvailMeth** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the method used to obtain the recorded size. See Intent/Clarification section for  
directions if more than one source is available.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ProxTreatZoneAvail  
ParentLongName: Proximal to Treated Zone(s) (Largest Diameter) Available  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 3D or 4D Reconstruction  
2 PreOp CT  
3 PreOp MRI  
4 PreOp Echo  
5 Intra Operatively

---

*Long Name:* Distal to Treated Zone(s) (Largest Diameter) Available *SeqNo:* 4933  
*Short Name:* **DistTreatZoneAvail** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a measurement is available on the zone distal (further from the heart) to treated area).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No

*Long Name:* Distal to Treated Zone(s) (Largest Diameter) Available - Location *SeqNo:* 4934  
*Short Name:* **DistTreatZoneAvailLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the zone distal (furthest from the heart) to the treated zone(s).  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DistTreatZoneAvail

ParentLongName: Distal to Treated Zone(s) (Largest Diameter) Available

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 STJ-midascending  
2 Midascending-distal ascending  
3 Zone 1  
4 Zone 2  
5 Zone 3  
6 Zone 4  
7 Zone 5  
8 Zone 6  
9 Zone 7  
10 Zone 8  
11 Zone 9  
12 Zone 10



## 13 Zone 11

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*Long Name:* Distal to Treated Zone(s) (Largest Diameter) Available - Measurement *SeqNo:* 4935  
*Short Name:* **DistTreatZoneAvailMeas** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the largest diameter of the zone distal (furthest from the heart) to the treated zone(s).  
 Measurement to be recorded in millimeters (mm).  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 120.0  
 ParentShortName: DistTreatZoneAvail  
 ParentLongName: Distal to Treated Zone(s) (Largest Diameter) Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Distal to Treated Zone(s) (Largest Diameter) Available - Method Obtained *SeqNo:* 4936  
*Short Name:* **DistTreatZoneAvailMeth** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the method used to obtain the recorded size. See Intent/Clarification section for  
 directions if more than one source is available.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DistTreatZoneAvail  
 ParentLongName: Distal to Treated Zone(s) (Largest Diameter) Available  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

Code: Value:

- 1 3D or 4D Reconstruction
  - 2 PreOp CT
  - 3 PreOp MRI
  - 4 PreOp Echo
  - 5 Intra Operatively
-

<i>Long Name:</i>	Diameter Measurements 3D - Zone 11	<i>SeqNo:</i>	4949
<i>Short Name:</i>	<b>Diam3DZone11</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate the diameter of zone 11		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
Low Value:	10	High Value:	120
ParentShortName:	Diameter3DMeas		
ParentLongName:	3-D Reconstruction Aortic Diameter Measurements Available		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

<i>Long Name:</i>	VS-Aorta - Aortic Valve or Root Procedure Performed	<i>SeqNo:</i>	4951
<i>Short Name:</i>	<b>VSAVAo</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate if a procedure was performed on the aortic valve or aortic root.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
ParentShortName:	AVAortaProcPerf		
ParentLongName:	AV-Aorta Procedure Performed		
ParentHarvestCodes:	1		
ParentValues:	= "Yes"		

Harvest Codes:

Code: Value:

- 3 Yes, planned
- 4 Yes, unplanned due to surgical complication
- 5 Yes, unplanned due to unsuspected disease or anatomy
- 2 No

---

*Long Name:* VS-Aorta - Aortic Valve Procedure Performed *SeqNo:* 4952  
*Short Name:* **VSAVPrAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the procedure performed on the aortic valve.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVAo

ParentLongName: VS-Aorta - Aortic Valve or Root Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 2 Replacement
- 1 Repair/Reconstruction
- 3 Surgical Prosthetic Valve Intervention (Not Explant of Valve)

---

*Long Name:* VS-Aorta - Aortic Transcatheter Valve Replacement *SeqNo:* 4953  
*Short Name:* **VSTCVAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a transcatheter aortic valve replacement was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVPrAo

ParentLongName: VS-Aorta - Aortic Valve Procedure Performed

ParentHarvestCodes: 2

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VS-Aorta - Transcatheter Valve Replacement Approach *SeqNo:* 4954  
*Short Name:* **VSTCVRAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the approach used for the transcatheter aortic valve procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSTCVAo

ParentLongName: VS-Aorta - Aortic Transcatheter Valve Replacement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Transapical
- 2 Transaxillary
- 3 Transfemoral
- 4 Transaortic
- 5 Subclavian
- 6 Transiliac
- 7 Transeptal
- 8 Transcarotid
- 9 Trancaval
- 10 Other

*Long Name:* VS-Aorta - Aortic Surgical Valve Replacement *SeqNo:* 4955  
*Short Name:* **VSAVSurgRepAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if an aortic valve surgical replacement was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVPrAo

ParentLongName: VS-Aorta - Aortic Valve Procedure Performed

ParentHarvestCodes: 2

ParentValues: = "Replacement"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* VS-Aorta - Aortic Surgical Valve Replacement - Device Type *SeqNo:* 4956  
*Short Name:* **VSAVSurgTypeAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of valve implanted during the surgical aortic valve procedure.

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

ParentShortName: VSAVSurgRepAo

ParentLongName: VS-Aorta - Aortic Surgical Valve Replacement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Mechanical
  - 2 Bioprosthetic
  - 3 Surgeon fashioned pericardium (Ozaki)
  - 4 Other
- 

*Long Name:* VS-Aorta - Aortic Surgical Bioprosthetic Replacement - Valve Type *SeqNo:* 4957  
*Short Name:* **VSAVSurgBioTAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of bioprosthetic valve that was implanted.

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

ParentShortName: VSAVSurgTypeAo

ParentLongName: VS-Aorta - Aortic Surgical Valve Replacement - Device Type

ParentHarvestCodes: 2

ParentValues: = "Bioprosthetic"

Harvest Codes:

Code: Value:

- 1 Stented
  - 2 Stentless subcoronary valve only
  - 3 Sutureless/rapid deployment
-

*Long Name:* VS-Aorta - Aortic Valve Procedure Repair Type *SeqNo:* 4958

*Short Name:* **AVProcRepTypeAo** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the type of aortic valve repair that was performed. If more than one repair was performed, choose all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: VSAVPrAo

ParentLongName: VS-Aorta - Aortic Valve Procedure Performed

ParentHarvestCodes: 1

ParentValues: = "Repair/Reconstruction"

Harvest Codes:

Code: Value:

- 1 Commissural suture annuloplasty
- 2 Leaflet plication
- 3 Leaflet commissural resuspension suture
- 4 Leaflet free edge reinforcement
- 5 External Suture Annuloplasty
- 6 Nodular Release
- 7 Leaflet Shaving
- 8 Leaflet debridement
- 9 Ring annuloplasty External Ring
- 10 Pannus/Thrombus Removal (Native Valve)
- 11 Leaflet resection suture
- 12 Leaflet pericardial patch
- 13 Division of fused leaflet raphe
- 14 Ring annuloplasty Internal Ring

*Long Name:* VS-Aorta - Aortic Valve Procedure Surgical Prosthetic Valve Intervention (Not Explant of Valve) *SeqNo:* 4959

*Short Name:* **AVSurgProsthValIntAo** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate what procedure was performed on a previously implanted prosthetic Aortic valve. If more than one intervention was performed, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: VSAVPrAo

ParentLongName: VS-Aorta - Aortic Valve Procedure Performed

ParentHarvestCodes: 3

ParentValues: = "Surgical Prosthetic Valve Intervention (Not Explant of Valve)"

Harvest Codes:

Code: Value:

- 1 Repair of periprosthetic leak
- 2 Removal of Pannus
- 3 Removal of Clot
- 4 Other

*Long Name:* VS-Aorta - Aortic annular enlargement *SeqNo:* 4960

*Short Name:* **AnlrEnlAo** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate if an aortic annular enlargement was performed.

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

ParentShortName: VSAVAo

ParentLongName: VS-Aorta - Aortic Valve or Root Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* VS-Aorta - Aortic Annular Enlargement - Technique *SeqNo:* 4961  
*Short Name:* **AnlrEnlTechAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the technique used for aortic annular enlargement.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AnlrEnlAo

ParentLongName: VS-Aorta - Aortic annular enlargement

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Nicks-Nunez
- 2 Manougian
- 3 Konno
- 4 Other
- 5 Unknown

*Long Name:* VS-Aorta - Replacement of non-coronary sinus (Modified Wheat/Modified Yacoub) *SeqNo:* 4962  
*Short Name:* **AVReplNonCorSinAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a replacement of a non-coronary sinus was performed. This included modified Wheat and modified Yacoub procedures.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVAo

ParentLongName: VS-Aorta - Aortic Valve or Root Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No



---

*Long Name:* VS-Aortic Root Procedure *SeqNo:* 4963  
*Short Name:* **VSAVRroot** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether an aortic root procedure was performed during this operation.

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

ParentShortName: VSAVAo

ParentLongName: VS-Aorta - Aortic Valve or Root Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* VS-Aortic Root Replacement With Coronary Ostial Reimplantation *SeqNo:* 4964  
*Short Name:* **VSAVRrootOREimp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether the root replacement procedure included coronary Ostial Reimplantation.

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

ParentShortName: VSAVRroot

ParentLongName: VS-Aortic Root Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* VS-Aortic Root Replacement With Coronary Ostial Reimplantation - Type      *SeqNo:* 4965  
*Short Name:* **VSAVRootOReimpType**      *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures      *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* If a root procedure was performed, indicate the type of reimplantation.

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

ParentShortName: VSAVRootOReimp

ParentLongName: VS-Aortic Root Replacement With Coronary Ostial Reimplantation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Composite Valve Conduit
- 2 Valve Sparing Root

*Long Name:* VS-Aortic Root Procedure With Coronary Ostial Reimplantation      *SeqNo:* 4966  
 (Bentall) - Type  
*Short Name:* **VSAVRootOReimpTy**      *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures      *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the type of device used for root replacement.

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

ParentShortName: VSAVRootOReimpType

ParentLongName: VS-Aortic Root Replacement With Coronary Ostial Reimplantation - Type

ParentHarvestCodes: 1

ParentValues: = "Composite Valve Conduit"

Harvest Codes:

Code: Value:

- 1 Mechanical
- 2 Bioprosthetic
- 4 Homograft root replacement
- 3 Autograft with native pulmonary valve (Ross procedure)

---

*Long Name:* VS-Aortic Root Procedure With Coronary Ostial Reimplantation - Bioprosthetic Type *SeqNo:* 4967  
*Short Name:* **VSAVRepBioTy** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of bioprosthetic device used during the aortic root replacement with coronary Ostial Reimplantation  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VSAVRootOReimpTy

*ParentLongName:* VS-Aortic Root Procedure With Coronary Ostial Reimplantation (Bentall) - Type

*ParentHarvestCodes:* 2

*ParentValues:* = "Bioprosthetic"

*Harvest Codes:*

Code: Value:

- 3 Stented Valve Conduit
- 4 Stentless Valve Conduit
- 2 Stentless biologic full root

---

*Long Name:* VS-Aortic Valve Sparing Root Operation *SeqNo:* 4968  
*Short Name:* **VSAVSparRtOp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of aortic valve sparing root operation that was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VSAVRootOReimpType

*ParentLongName:* VS-Aortic Root Replacement With Coronary Ostial Reimplantation - Type

*ParentHarvestCodes:* 2

*ParentValues:* = "Valve Sparing Root"

*Harvest Codes:*

Code: Value:

- 3 Valve sparing root reimplantation (David)
- 4 Valve sparing root remodeling (Yacoub)
- 5 Valve sparing root reconstruction (Florida Sleeve)

---

*Long Name:* Coronary Reimplantation *SeqNo:* 4969  
*Short Name:* **VSAVCorReimp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the type of coronary reimplantation performed. If the procedure did not include coronary reimplantation, select none.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVRoot

ParentLongName: VS-Aortic Root Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 No
  - 2 Direct to Root Prosthesis (Button)
  - 3 With Vein Graft Extension (SVG Cabrol)
  - 4 With Dacron Graft Extention (Classic Cabrol)
- 

*Long Name:* VS-Aortic Valve Major Root Reconstruction/Debridement without coronary ostial reimplantation *SeqNo:* 4970  
*Short Name:* **VSAVRootRecon** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the procedure included aortic valve major root reconstruction / debridement.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: VSAVRoot

ParentLongName: VS-Aortic Root Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* Surgical Ascending/Arch Procedure *SeqNo:* 4975  
*Short Name:* **ArchProc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if a surgical ascending/arch procedure was performed. Endovascular procedures are not captured here.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: AortProc  
ParentLongName: Aorta Procedure Performed  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Surgical Ascending/Arch Procedure - Proximal Location *SeqNo:* 4976  
*Short Name:* **ArchProxLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the proximal location (closest to the heart) of the procedure performed on the ascending/arch. If the procedure originate with the aortic valve choose STJ-Midascending.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ArchProc  
ParentLongName: Surgical Ascending/Arch Procedure  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 STJ-midascending  
2 Midascending to distal ascending  
3 Zone 1  
4 Zone 2  
5 Zone 3

---

---

*Long Name:* Open Arch Procedure - Distal Technique *SeqNo:* 4980  
*Short Name:* **ArchDisTech** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the distal technique for the arch procedure

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

ParentShortName: ArchProc

ParentLongName: Surgical Ascending/Arch Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Open/Unclamped
  - 2 Clamped
- 

*Long Name:* Open Arch Procedure - Distal Site *SeqNo:* 4985  
*Short Name:* **ArchDiscSite** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the distal site

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

ParentShortName: ArchProc

ParentLongName: Surgical Ascending/Arch Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Ascending Aorta
  - 2 Hemiarch
  - 3 Zone 1
  - 4 Zone 2
  - 5 Zone 3
  - 6 Zone 4
-

---

*Long Name:* Open Arch Procedure - Distal Extension *SeqNo:* 4990  
*Short Name:* **ArchDisExt** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate distal extension type  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ArchProc

ParentLongName: Surgical Ascending/Arch Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Elephant trunk
  - 2 Frozen Elephant trunk
  - 3 No
- 

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation *SeqNo:* 4995  
*Short Name:* **ArchBranReimp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ArchProc

ParentLongName: Surgical Ascending/Arch Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Arch Branch Location *SeqNo:* 4996  
*Short Name:* **ArchBranReimpLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the arch branch location. If more than one arch branch was reimplanted, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: ArchBranReimp

ParentLongName: Open Arch Procedure - Arch Branch Reimplantation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u>        |
|--------------|----------------------|
| 1            | Innominate           |
| 2            | Left Subclavian      |
| 3            | Right Subclavian     |
| 4            | Left Vertebral       |
| 5            | Right Common Carotid |
| 6            | Left Common Carotid  |
| 7            | Other                |

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Innominate *SeqNo:* 5000  
*Short Name:* **ArchBranInnom** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included the innominate artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ArchBranReimp

ParentLongName: Open Arch Procedure - Arch Branch Reimplantation

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

- | <u>Code:</u> | <u>Value:</u> |
|--------------|---------------|
| 1            | Yes           |
| 2            | No            |



*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Right Subclavian *SeqNo:* 5001  
*Short Name:* **ArchBranRSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included the right subclavian artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArchBranReimp  
 ParentLongName: Open Arch Procedure - Arch Branch Reimplantation  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Right Common Carotid *SeqNo:* 5002  
*Short Name:* **ArchBranRComm** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included the right common carotid artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArchBranReimp  
 ParentLongName: Open Arch Procedure - Arch Branch Reimplantation  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Left Common Carotid *SeqNo:* 5005  
*Short Name:* **ArchBranLComm** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included the left common carotid artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArchBranReimp  
 ParentLongName: Open Arch Procedure - Arch Branch Reimplantation  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Left Subclavian *SeqNo:* 5010  
*Short Name:* **ArchBranLSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included the left subclavian artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArchBranReimp  
 ParentLongName: Open Arch Procedure - Arch Branch Reimplantation  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Left Vertebral *SeqNo:* 5011  
*Short Name:* **ArchBranLVert** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included the left vertebral artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArchBranReimp  
 ParentLongName: Open Arch Procedure - Arch Branch Reimplantation  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Open Arch Procedure - Arch Branch Reimplantation - Other *SeqNo:* 5012  
*Short Name:* **ArchBranOth** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether arch branch reimplantation included any other artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ArchBranReimp  
 ParentLongName: Open Arch Procedure - Arch Branch Reimplantation  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Surgical Descending Thoracic Aorta or Thoracoabdominal Procedure *SeqNo:* 5015  
*Short Name:* **DescAortaProc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate if a surgical procedure of the descending thoracic or thoracoabdominal aorta was performed. Endovascular procedures are not captured here.

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No

*Long Name:* Open Surgical Descending - Proximal Location *SeqNo:* 5020  
*Short Name:* **DescAortaLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the proximal location of the descending aorta procedure

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

ParentShortName: DescAortaProc

ParentLongName: Surgical Descending Thoracic Aorta or Thoracoabdominal Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Reverse Hemiarch  
2 Zone 0  
3 Zone 1  
4 Zone 2  
5 Zone 3  
6 Zone 4  
7 Zone 5  
8 Zone 6  
9 Zone 7  
10 Zone 8  
11 Zone 9

---

*Long Name:* Intercostal Reimplantation *SeqNo:* 5030  
*Short Name:* **AortaInterReimp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether intercostal vessels were reimplanted  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DescAortaProc

ParentLongName: Surgical Descending Thoracic Aorta or Thoracoabdominal Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes  
2 No

---

*Long Name:* Distal Location *SeqNo:* 5035  
*Short Name:* **AortaDisZone** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the distal location of the descending/thoracoabdominal procedure  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DescAortaProc

ParentLongName: Surgical Descending Thoracic Aorta or Thoracoabdominal Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Zone 3  
2 Zone 4  
3 Zone 5  
4 Zone 6  
5 Zone 7  
6 Zone 8  
7 Zone 9  
8 Zone 10  
9 Zone 11

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---

*Long Name:* Visceral Vessel Intervention *SeqNo:* 5045  
*Short Name:* **AortaVisceral** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was visceral vessel intervention  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* DescAortaProc

*ParentLongName:* Surgical Descending Thoracic Aorta or Thoracoabdominal Procedure

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Visceral Vessel Intervention - Celiac *SeqNo:* 5050  
*Short Name:* **AortaViscCel** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the visceral vessel intervention involved the celiac artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* AortaVisceral

*ParentLongName:* Visceral Vessel Intervention

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Reimplantation

2 Branch Graft

3 None

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---

*Long Name:* Visceral Vessel Intervention - Superior Mesenteric *SeqNo:* 5055  
*Short Name:* **AortaViscSup** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the visceral vessel intervention involved the superior mesenteric artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortaVisceral

ParentLongName: Visceral Vessel Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Reimplantation
- 2 Branch Graft
- 3 None

---

*Long Name:* Visceral Vessel Intervention - Right Renal *SeqNo:* 5060  
*Short Name:* **AortaViscRenR** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the visceral vessel intervention involved the right renal artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortaVisceral

ParentLongName: Visceral Vessel Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Reimplantation
- 2 Branch Graft
- 3 None

---

*Long Name:* Visceral Vessel Intervention - Left Renal *SeqNo:* 5065  
*Short Name:* **AortaViscRenL** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the visceral vessel intervention involved the left renal artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortaVisceral

ParentLongName: Visceral Vessel Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Reimplantation
  - 2 Branch Graft
  - 3 None
- 

*Long Name:* Endovascular Procedures *SeqNo:* 5066  
*Short Name:* **EndovasProc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was an endovascular procedure  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-



---

*Long Name:* Endovascular Procedures - Access *SeqNo:* 5067  
*Short Name:* **EndovasAccess** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the access used for the endovascular procedure  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Femoral
- 2 Iliac
- 3 Abdominal Aorta
- 4 Lt. Subclavian/Axila
- 5 Rt. Subclavian/Axila
- 6 Ascending Aorta
- 8 Carotid
- 7 LV Apex

---

*Long Name:* Endovascular Procedures - Percutaneous Access *SeqNo:* 5068  
*Short Name:* **EndovasPercAcc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether access was percutaneous  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Endovascular Procedures - Proximal Landing Zone *SeqNo:* 5070  
*Short Name:* **EndoProxZone** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the proximal landing zone  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Below STJ
- 2 STJ-midascending
- 3 Midascending to distal ascending
- 4 Zone 1
- 5 Zone 2
- 6 Zone 3
- 7 Zone 4
- 8 Zone 5
- 9 Zone 6
- 10 Zone 7
- 11 Zone 8
- 12 Zone 9
- 13 Zone 10
- 14 Zone 11

*Long Name:* Endovascular Procedures - Distal Landing Zone *SeqNo:* 5080  
*Short Name:* **EndoDistalZone** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the distal landing zone  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Below STJ
- 2 STJ-midascending
- 3 Midascending to distal ascending
- 4 Zone 1
- 5 Zone 2
- 6 Zone 3
- 7 Zone 4
- 8 Zone 5
- 9 Zone 6
- 10 Zone 7
- 11 Zone 8
- 12 Zone 9
- 13 Zone 10
- 14 Zone 11

<i>Long Name:</i>	Endovascular Procedures - TAVR	<i>SeqNo:</i>	5090
<i>Short Name:</i>	<b>EndovasTAVR</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether there was a transcatheter aortic valve procedure component		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	EndovasProc		
<i>ParentLongName:</i>	Endovascular Procedures		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Endovascular Procedures - Ascending TEVAR *SeqNo:* 5095  
*Short Name:* **EndovasTEVAR** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether an ascending TEVAR was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Dedicated IDE
- 2 Off Label Stent
- 3 No

---

*Long Name:* Arch Vessel Management - Innominate *SeqNo:* 5100  
*Short Name:* **Innominate** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the management of the innominate artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Flow
- 2 Endovascular Branch Graft
- 3 Endovascular Parallel Graft
- 4 Extra-anatomic Bypass
- 5 Fenestrated
- 6 No Flow Restored

*Long Name:* Innominate - Extra-Anatomic Bypass Location *SeqNo:* 5101  
*Short Name:* **InExtraAnatBypLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* For innominate vessel management, indicate the location of the extra-anatomic bypass location.  
 If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* Innominate  
*ParentLongName:* Arch Vessel Management - Innominate  
*ParentHarvestCodes:* 4  
*ParentValues:* = "Extra-anatomic Bypass"  
*Harvest Codes:*

- | <u>Code:</u> | <u>Value:</u>                   |
|--------------|---------------------------------|
| 1            | Aorta- Innominate               |
| 2            | Aorta- Right carotid            |
| 3            | Aorta- right subclavian         |
| 4            | Right Carotid- Right subclavian |
| 5            | Other                           |

*Long Name:* Innominate - Extra-Anatomic Bypass - Aorta-Innominate *SeqNo:* 5105  
*Short Name:* **InAortaInnom** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was an aorta to innominate bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
*ParentShortName:* Innominate  
*ParentLongName:* Arch Vessel Management - Innominate  
*ParentHarvestCodes:* 4  
*ParentValues:* = "Extra-anatomic Bypass"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

*Long Name:* Innominate - Extra-Anatomic Bypass - Aorta-Right Carotid *SeqNo:* 5110  
*Short Name:* **InAortaCarotid** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was an aorta to right carotid bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Innominate  
 ParentLongName: Arch Vessel Management - Innominate  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Innominate - Extra-Anatomic Bypass - Aorta-Right Subclavian *SeqNo:* 5115  
*Short Name:* **InAortaSubclav** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was an aorta to right subclavian bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Innominate  
 ParentLongName: Arch Vessel Management - Innominate  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Innominate - Extra-Anatomic Bypass - Right Carotid - Right Subclavian *SeqNo:* 5125  
*Short Name:* **InCaroSubclav** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was a right carotid to right subclavian bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Innominate  
 ParentLongName: Arch Vessel Management - Innominate  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Innominate - Extra-Anatomic Bypass - Other *SeqNo:* 5135  
*Short Name:* **InOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any other extra-anatomic innominate bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Innominate  
 ParentLongName: Arch Vessel Management - Innominate  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* Arch Vessel Management - Left Carotid *SeqNo:* 5140  
*Short Name:* **LeftCarotid** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the management of the left carotid artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Flow
- 2 Endovascular Branch Graft
- 3 Endovascular Parallel Graft
- 4 Extra-anatomic Bypass
- 5 Fenestrated
- 6 No Flow Restored

---

*Long Name:* Arch Vessel Management - Left Carotid - Extra-anatomic Bypass *SeqNo:* 5141  
*Short Name:* **LeftCarotidExtraAnatBy** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For left carotid vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: LeftCarotid

ParentLongName: Arch Vessel Management - Left Carotid

ParentHarvestCodes: 4

ParentValues: = "Extra-anatomic Bypass"

Harvest Codes:

Code: Value:

- 1 Aorta- left carotid
  - 2 Innominate- left carotid
  - 3 Right carotid- Left carotid
  - 4 Other
-



*Long Name:* Left Carotid - Extra-Anatomic Bypass - Aorta-Left Carotid *SeqNo:* 5150  
*Short Name:* **LTCaroAortaCaro** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was an aorta to left carotid bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftCarotid  
 ParentLongName: Arch Vessel Management - Left Carotid  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Left Carotid - Extra-Anatomic Bypass - Innominate-Left Carotid *SeqNo:* 5160  
*Short Name:* **LTCaroInnomCaro** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was an innominate to left carotid bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftCarotid  
 ParentLongName: Arch Vessel Management - Left Carotid  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Left Carotid - Extra-Anatomic Bypass - Right Carotid - Left Carotid *SeqNo:* 5170  
*Short Name:* **LTCaroCarotid** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was a right carotid to left carotid bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftCarotid  
 ParentLongName: Arch Vessel Management - Left Carotid  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Left Carotid - Extra-Anatomic Bypass - Other *SeqNo:* 5175  
*Short Name:* **LTCaroOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any other extra-anatomic left carotid bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftCarotid  
 ParentLongName: Arch Vessel Management - Left Carotid  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Arch Vessel Management - Left Subclavian *SeqNo:* 5180  
*Short Name:* **LeftSubclavian** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the management of the left subclavian artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* EndovasProc

*ParentLongName:* Endovascular Procedures

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Native Flow
- 2 Endovascular Branch Graft
- 3 Endovascular Parallel Graft
- 4 Extra-anatomic Bypass
- 5 Fenestrated
- 6 No Flow Restored

*Long Name:* Arch Vessel Management - Left Subclavian - Extra-anatomic Bypass *SeqNo:* 5181  
*Short Name:* **LeftSubclavExtraAnatByp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For left subclavian vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* LeftSubclavian

*ParentLongName:* Arch Vessel Management - Left Subclavian

*ParentHarvestCodes:* 4

*ParentValues:* = "Extra-anatomic Bypass"

*Harvest Codes:*

Code: Value:

- 1 Aorta- left subclavian
- 2 Left carotid- left subclavian
- 3 Other

*Long Name:* Left Subclavian - Extra-Anatomic Bypass - Aorta-Left Subclavian *SeqNo:* 5195  
*Short Name:* **LTSubAortaSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was an aorta to left subclavian bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftSubclavian  
 ParentLongName: Arch Vessel Management - Left Subclavian  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Left Subclavian - Extra-Anatomic Bypass - Left Carotid-Left Subclavian *SeqNo:* 5205  
*Short Name:* **LTSubCarotidSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was a left carotid to left subclavian bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftSubclavian  
 ParentLongName: Arch Vessel Management - Left Subclavian  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Left Subclavian - Extra-Anatomic Bypass - Other *SeqNo:* 5213  
*Short Name:* **LTSubOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any other extra-anatomic left subclavian bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftSubclavian  
 ParentLongName: Arch Vessel Management - Left Subclavian  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Arch Vessel Management - Other Arch Vessels Extra-Anatomic Bypass *SeqNo:* 5214  
*Short Name:* **OthArchVes** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether other arch vessel extra-anatomic bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: EndovasProc  
 ParentLongName: Endovascular Procedures  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Other - Extra-Anatomic Bypass - Innominate - Carotid *SeqNo:* 5215  
*Short Name:* **OthInnomCaro** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was innominate to carotid  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OthArchVes  
 ParentLongName: Arch Vessel Management - Other Arch Vessels Extra-Anatomic Bypass  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Other - Extra-Anatomic Bypass - Innominate - Subclavian *SeqNo:* 5216  
*Short Name:* **OthInnomSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was innominate to subclavian  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OthArchVes  
 ParentLongName: Arch Vessel Management - Other Arch Vessels Extra-Anatomic Bypass  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Other - Extra-Anatomic Bypass - Subclavian - Subclavian *SeqNo:* 5217  
*Short Name:* **OthSubSub** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was subclavian to subclavian  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OthArchVes  
 ParentLongName: Arch Vessel Management - Other Arch Vessels Extra-Anatomic Bypass  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Other - Extra-Anatomic Bypass - Other *SeqNo:* 5218  
*Short Name:* **OthOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any other extra-anatomic arch vessel bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OthArchVes  
 ParentLongName: Arch Vessel Management - Other Arch Vessels Extra-Anatomic Bypass  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Visceral Vessel Management - Celiac *SeqNo:* 5220  
*Short Name:* **Celiac** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate management of the celiac artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Flow
- 2 Endovascular Branch Graft
- 3 Endovascular Parallel Graft
- 4 Extra-anatomic Bypass
- 5 Fenestrated
- 6 No Flow Restored

---

*Long Name:* Visceral Vessel Management - Celiac - Extra-anatomic Bypass *SeqNo:* 5221  
*Short Name:* **CeliacExtraAnatByb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For celiac vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: Celiac

ParentLongName: Visceral Vessel Management - Celiac

ParentHarvestCodes: 4

ParentValues: = "Extra-anatomic Bypass"

Harvest Codes:

Code: Value:

- 1 Aorta- celiac
- 2 Iliac- celiac
- 3 Other



*Long Name:* Celiac - Extra-Anatomic Bypass - Aorta-Celiac *SeqNo:* 5225  
*Short Name:* **CeliacAortaCeli** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was aorta to celiac  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Celiac  
 ParentLongName: Visceral Vessel Management - Celiac  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Celiac - Extra-Anatomic Bypass - Iliac-Celiac *SeqNo:* 5245  
*Short Name:* **CeliacIliacCeliac** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was iliac to celiac  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Celiac  
 ParentLongName: Visceral Vessel Management - Celiac  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

<i>Long Name:</i>	Celiac - Extra-Anatomic Bypass - Other	<i>SeqNo:</i>	5265
<i>Short Name:</i>	<b>CeliacOther</b>	<i>Core:</i>	No
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate whether another extra-anatomic celiac bypass was performed		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Celiac		
<i>ParentLongName:</i>	Visceral Vessel Management - Celiac		
<i>ParentHarvestCodes:</i>	4		
<i>ParentValues:</i>	= "Extra-anatomic Bypass"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Visceral Vessel Management - Superior Mesenteric	<i>SeqNo:</i>	5270
<i>Short Name:</i>	<b>SupMesenteric</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Aorta And Aortic Root Procedures	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata1		
<i>Definition:</i>	Indicate management of the superior mesenteric artery		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	EndovasProc		
<i>ParentLongName:</i>	Endovascular Procedures		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Native Flow	
	2	Endovascular Branch Graft	
	3	Endovascular Parallel Graft	
	4	Extra-anatomic Bypass	
	5	Fenestrated	
	6	No Flow Restored	

*Long Name:* Visceral Vessel Management - Superior mesenteric - Extra-anatomic Bypass *SeqNo:* 5271  
*Short Name:* **SupMesExtraAnatByp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For superior mesenteric management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: SupMesenteric

ParentLongName: Visceral Vessel Management - Superior Mesenteric

ParentHarvestCodes: 4

ParentValues: = "Extra-anatomic Bypass"

Harvest Codes:

Code: Value:

- 1 Aorta- superior mesenteric
- 2 Iliac- superior mesenteric
- 3 Other

*Long Name:* Superior Mesenteric - Extra-Anatomic Bypass - Aorta-Superior Mesenteric *SeqNo:* 5280  
*Short Name:* **SupMesAortaSuMe** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was aorta to superior mesenteric  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: SupMesenteric

ParentLongName: Visceral Vessel Management - Superior Mesenteric

ParentHarvestCodes: 4

ParentValues: = "Extra-anatomic Bypass"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Superior Mesenteric - Extra-Anatomic Bypass - Iliac-Superior Mesenteric *SeqNo:* 5300  
*Short Name:* **SupMesIliacSupMe** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was iliac to superior mesenteric  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: SupMesenteric  
 ParentLongName: Visceral Vessel Management - Superior Mesenteric  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Superior Mesenteric - Extra-Anatomic Bypass - Other *SeqNo:* 5315  
*Short Name:* **SupMesOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether another extra-anatomic superior mesenteric bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: SupMesenteric  
 ParentLongName: Visceral Vessel Management - Superior Mesenteric  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Visceral Vessel Management - Right Renal *SeqNo:* 5320  
*Short Name:* **RightRenal** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate management of the right renal artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native Flow
- 2 Endovascular Branch Graft
- 3 Endovascular Parallel Graft
- 4 Extra-anatomic Bypass
- 5 Fenestrated
- 6 No Flow Restored

*Long Name:* Visceral Vessel Management - Right Renal - Extra-anatomic Bypass *SeqNo:* 5321  
*Short Name:* **RightRenalExtraAnatByb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For right renal vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: RightRenal

ParentLongName: Visceral Vessel Management - Right Renal

ParentHarvestCodes: 4

ParentValues: = "Extra-anatomic Bypass"

Harvest Codes:

Code: Value:

- 1 Aorta- right renal
- 2 Iliac- right renal
- 3 Other

*Long Name:* Right Renal - Extra-Anatomic Bypass - Aorta-Right Renal *SeqNo:* 5325  
*Short Name:* **RtRenAortaRtRe** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was aorta to right renal  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RightRenal  
 ParentLongName: Visceral Vessel Management - Right Renal  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Right Renal - Extra-Anatomic Bypass - Iliac-Right Renal *SeqNo:* 5340  
*Short Name:* **RtRenIliacRtRen** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was iliac to right renal  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RightRenal  
 ParentLongName: Visceral Vessel Management - Right Renal  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Right Renal - Extra-Anatomic Bypass - Other *SeqNo:* 5350  
*Short Name:* **RtRenOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether another extra-anatomic right renal bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RightRenal  
 ParentLongName: Visceral Vessel Management - Right Renal  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Visceral Vessel Management - Left Renal *SeqNo:* 5360  
*Short Name:* **LeftRenal** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate management of the left renal artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: EndovasProc  
 ParentLongName: Endovascular Procedures  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Native Flow  
         2 Endovascular Branch Graft  
         3 Endovascular Parallel Graft  
         4 Extra-anatomic Bypass  
         5 Fenestrated  
         6 No Flow Restored

*Long Name:* Visceral Vessel Management - Left Renal - Extra-anatomic Bypass *SeqNo:* 5361  
*Short Name:* **LeftRenalExtraAnatByp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For left renal vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* LeftRenal

*ParentLongName:* Visceral Vessel Management - Left Renal

*ParentHarvestCodes:* 4

*ParentValues:* = "Extra-anatomic Bypass"

*Harvest Codes:*

Code: Value:

- 1 Aorta- left renal
- 2 Iliac- left renal
- 3 Other

*Long Name:* Left Renal - Extra-Anatomic Bypass - Aorta-Left Renal *SeqNo:* 5365  
*Short Name:* **LtRenAortaLtRe** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was aorta to left renal  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* LeftRenal

*ParentLongName:* Visceral Vessel Management - Left Renal

*ParentHarvestCodes:* 4

*ParentValues:* = "Extra-anatomic Bypass"

*Harvest Codes:*

Code: Value:

- 1 Yes
- 2 No



*Long Name:* Left Renal - Extra-Anatomic Bypass - Iliac-Left Renal *SeqNo:* 5370  
*Short Name:* **LtRenIliacLtRen** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was iliac to left renal  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftRenal  
 ParentLongName: Visceral Vessel Management - Left Renal  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Left Renal - Extra-Anatomic Bypass - Other *SeqNo:* 5375  
*Short Name:* **LtRenOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether another extra-anatomic left renal bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftRenal  
 ParentLongName: Visceral Vessel Management - Left Renal  
 ParentHarvestCodes: 4  
 ParentValues: = "Extra-anatomic Bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

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*Long Name:* Visceral Vessel Management - Right Iliac *SeqNo:* 5378  
*Short Name:* **RightIliac** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate management of the right iliac artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native flow
- 2 Bifurcated graft
- 3 Extra-anatomic bypass
- 4 No Flow Restored

---

*Long Name:* Visceral Vessel Management - Right Iliac - Extra-anatomic Bypass *SeqNo:* 5379  
*Short Name:* **RightIliacExtraAnatByp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For right iliac vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: RightIliac

ParentLongName: Visceral Vessel Management - Right Iliac

ParentHarvestCodes: 3

ParentValues: = "Extra-anatomic bypass"

Harvest Codes:

Code: Value:

- 1 Femoral- Femoral
  - 2 Other
-

*Long Name:* Visceral Vessel Management - Right Iliac - Femoral-Femoral *SeqNo:* 5380  
*Short Name:* **RtIliacFemFem** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was femoral to femoral  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RightIliac  
 ParentLongName: Visceral Vessel Management - Right Iliac  
 ParentHarvestCodes: 3  
 ParentValues: = "Extra-anatomic bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Visceral Vessel Management - Right Iliac - Other *SeqNo:* 5381  
*Short Name:* **RtIliacOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether another right iliac extra-anatomic bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: RightIliac  
 ParentLongName: Visceral Vessel Management - Right Iliac  
 ParentHarvestCodes: 3  
 ParentValues: = "Extra-anatomic bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

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*Long Name:* Visceral Vessel Management - Left Iliac *SeqNo:* 5382  
*Short Name:* **LeftIliac** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate management of the left iliac artery  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native flow
- 2 Bifurcated graft
- 3 Extra-anatomic bypass
- 4 No Flow Restored

---

*Long Name:* Visceral Vessel Management - Left Iliac - Extra-anatomic Bypass *SeqNo:* 5383  
*Short Name:* **LeftIliacExtraAnatByp** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* For left iliac vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: LeftIliac

ParentLongName: Visceral Vessel Management - Left Iliac

ParentHarvestCodes: 3

ParentValues: = "Extra-anatomic bypass"

Harvest Codes:

Code: Value:

- 1 Femoral- Femoral
  - 2 Other
-

*Long Name:* Visceral Vessel Management - Left Iliac - Femoral-Femoral *SeqNo:* 5384  
*Short Name:* **LtIliacFemFem** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the extra-anatomic bypass was femoral to femoral  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftIliac  
 ParentLongName: Visceral Vessel Management - Left Iliac  
 ParentHarvestCodes: 3  
 ParentValues: = "Extra-anatomic bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Visceral Vessel Management - Left Iliac - Other *SeqNo:* 5385  
*Short Name:* **LtIliacOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether another left iliac extra-anatomic bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: LeftIliac  
 ParentLongName: Visceral Vessel Management - Left Iliac  
 ParentHarvestCodes: 3  
 ParentValues: = "Extra-anatomic bypass"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* Visceral Vessel Management - Internal Iliac Preserved *SeqNo:* 5386  
*Short Name:* **IntIliacPres** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether the internal iliac was preserved  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Right iliac only
  - 2 Left iliac only
  - 3 Both
  - 4 No
- 

*Long Name:* Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass *SeqNo:* 5387  
*Short Name:* **OthVisVes** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether extra-anatomic bypass of other visceral vessels was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

*Long Name:* Visceral Vessel Management - Other Visceral Vessel(s) Extra-anatomic Bypass - Location *SeqNo:* 5388  
*Short Name:* **OthVisVesExtraAnatBypLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* For other visceral vessel management, indicate the location of the extra-anatomic bypass location. If more than one location was bypass, select all that apply.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* OthVisVes

*ParentLongName:* Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Aorta-other
- 2 Iliac-other
- 3 Other

*Long Name:* Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass - Aorta-Other *SeqNo:* 5389  
*Short Name:* **OthVisAortOth** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName:* Adultdata1  
*Definition:* Indicate whether other extra-anatomic bypass included an aorta to other bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OthVisVes

*ParentLongName:* Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass - Iliac-Other *SeqNo:* 5390  
*Short Name:* **OthVisIliacOth** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether other extra-anatomic bypass included an iliac to other bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OthVisVes  
 ParentLongName: Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass - Other *SeqNo:* 5395  
*Short Name:* **OthVisOther** *Core:* No  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* No  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any other visceral vessel extra-anatomic bypass was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OthVisVes  
 ParentLongName: Visceral Vessel Management - Other visceral Vessels Extra-Anatomic Bypass  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No



---

*Long Name:* Planned Staged Hybrid *SeqNo:* 5400  
*Short Name:* **PlanStagHybrid** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the procedure was a planned staged hybrid  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc  
ParentLongName: Endovascular Procedures  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Dissection Proximal Entry Tear Covered *SeqNo:* 5401  
*Short Name:* **DisProxTearCov** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the proximal entry tear was covered  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc  
ParentLongName: Endovascular Procedures  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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---

*Long Name:* Endoleak At End Of Procedure *SeqNo:* 5402  
*Short Name:* **EndoEndProc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate whether there was endoleak present at the end of the procedure

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

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Endoleak At End Of Procedure - Type *SeqNo:* 5403

*Short Name:* **EndoEndProcTy** *Core:* Yes

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

*DBTableName:* Adultdata1

*Definition:* Indicate the type of endoleak present

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

ParentShortName: EndoEndProc

ParentLongName: Endoleak At End Of Procedure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Ia

2 Ib

3 II

4 III

5 IV

6 V

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---

*Long Name:* Conversion To Open *SeqNo:* 5404  
*Short Name:* **ConvToOpen** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was an unplanned conversion to an open procedure  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: EndovasProc  
ParentLongName: Endovascular Procedures  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Conversion To Open - Reason *SeqNo:* 5405  
*Short Name:* **ConvToOpenRes** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the reason for conversion to open procedure  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ConvToOpen  
ParentLongName: Conversion To Open  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Deployment failure  
2 Endoleak  
3 Rupture  
4 Occlusion / loss of branch

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*Long Name:* Intraop Dissection Extension *SeqNo:* 5406  
*Short Name:* **IntDisExten** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was intraoperative dissection extension  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
  - 2 Antegrade
  - 3 Retrograde
  - 4 Both
- 

*Long Name:* Unintentional Rupture Of Dissection Septum *SeqNo:* 5407  
*Short Name:* **UnintRup** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether there was unintentional rupture of the dissection septum  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: EndovasProc

ParentLongName: Endovascular Procedures

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* Unintentional Rupture Of Dissection Septum - Location *SeqNo:* 5408  
*Short Name:* **UnintRupLoc** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location of the unintentional rupture of the dissection septum  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: UnintRup

ParentLongName: Unintentional Rupture Of Dissection Septum

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Below STJ
  - 2 STJ-midascending
  - 3 Midascending to distal ascending
  - 4 Zone 1
  - 5 Zone 2
  - 6 Zone 3
  - 7 Zone 4
  - 8 Zone 5
  - 9 Zone 6
  - 10 Zone 7
  - 11 Zone 8
  - 12 Zone 9
  - 13 Zone 10
  - 14 Zone 11
-

---

*Long Name:* Spinal Drain *SeqNo:* 5420  
*Short Name:* **SpinalDrain** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate when/if a spinal drain was placed  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
  
ParentShortName: AortProc  
ParentLongName: Aorta Procedure Performed  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Pre-aortic procedure  
2 Post-aortic procedure  
3 None

---

*Long Name:* IntraOp Motor Evoked Potential *SeqNo:* 5425  
*Short Name:* **MotorEvoke** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether motor evoked potential was measured intraoperatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
  
ParentShortName: AortProc  
ParentLongName: Aorta Procedure Performed  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* IntraOp Motor Evoked Potential - Documented MEP Abnormality *SeqNo:* 5426  
*Short Name:* **MotorEvokeAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any abnormality of motor evoked potential was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: MotorEvoke

ParentLongName: IntraOp Motor Evoked Potential

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes  
2 No  
3 Unknown

*Long Name:* IntraOp Somatosensory Evoked Potential *SeqNo:* 5430  
*Short Name:* **SomatEvoke** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* indicate whether somatosensory evoked potential was measured intraoperatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No

*Long Name:* IntraOp Somatosensory Evoked Potential - Documented SEP Abnormality *SeqNo:* 5431  
*Short Name:* **SomatEvokeAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any abnormality of somatosensory evoked potential was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: SomatEvoke

ParentLongName: IntraOp Somatosensory Evoked Potential

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes  
2 No  
3 Unknown

*Long Name:* IntraOp EEG *SeqNo:* 5432  
*Short Name:* **IntraOpEEG** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether EEG was monitored intraoperatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

1 Yes  
2 No



---

*Long Name:* IntraOp EEG - Documented EEG Abnormality *SeqNo:* 5433  
*Short Name:* **IntraOpEEGAb** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether any abnormality of intraoperative EEG was documented  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: IntraOpEEG  
 ParentLongName: IntraOp EEG  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No
3	Unknown

---

*Long Name:* IntraOp Intravascular Ultrasound (IVUS) *SeqNo:* 5434  
*Short Name:* **IntraOpIVUS** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* indicate whether intravascular ultrasound was used interoperatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc  
 ParentLongName: Aorta Procedure Performed  
 ParentHarvestCodes: 3|4|5  
 ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* IntraOp Transcutaneous Doppler *SeqNo:* 5435  
*Short Name:* **TransDoppler** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether a transcutaneous doppler was used intraoperatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc  
ParentLongName: Aorta Procedure Performed  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* IntraOp Angiogram *SeqNo:* 5436  
*Short Name:* **IntraOpAng** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether an intraoperative angiogram was performed  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AortProc  
ParentLongName: Aorta Procedure Performed  
ParentHarvestCodes: 3|4|5  
ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* IntraOp Angiogram - Volume Of Contrast *SeqNo:* 5437  
*Short Name:* **IntraOpAngVol** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total volume of contrast given intraoperatively  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 2000.0  
ParentShortName: IntraOpAng  
ParentLongName: IntraOp Angiogram  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* IntraOp Angiogram - Fluoroscopy Time In Minutes *SeqNo:* 5438  
*Short Name:* **IntraOpAngFlTm** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the total intraoperative fluoroscopy time in minutes  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 300.00  
ParentShortName: IntraOpAng  
ParentLongName: IntraOp Angiogram  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Endovascular Balloon Fenestration of the Dissection Flap *SeqNo:* 5439  
*Short Name:* **EndoBalFenDisFlap** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate if endovascular balloon fenestration of the dissection flap was performed. If not, select N/A.

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 PreOp
- 2 IntrOp
- 3 PostOp
- 4 N/A

*Long Name:* Aorta Device Inserted *SeqNo:* 5440  
*Short Name:* **ADevIns** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate whether one or more devices were inserted into the aorta or aortic position (for combined procedures).

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

ParentShortName: AortProc

ParentLongName: Aorta Procedure Performed

ParentHarvestCodes: 3|4|5

ParentValues: = "Yes, planned", "Yes, unplanned due to surgical complication" or "Yes, unplanned due to unsuspected disease or anatomy"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Aortic Valve or Aortic Valve Composite Graft Implanted *SeqNo:* 5441  
*Short Name:* **AVAVCompGraftImplAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate if an aortic valve or an aortic valve composite graft was implanted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ADevIns

ParentLongName: Aorta Device Inserted

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Aortic Valve or Aortic Valve Composite Graft Implanted - Model Number *SeqNo:* 5442  
*Short Name:* **AVAVCompGrImplModelAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of the aortic valve or aortic valve composite graft.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AVAVCompGraftImplAo

ParentLongName: Aortic Valve or Aortic Valve Composite Graft Implanted

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

201 500DM## - Medtronic Open  
Pivot Standard Mitral Heart  
Valve

202 500FA## - Medtronic Open  
Pivot Standard Aortic Heart  
Valve

203 501DA## - Medtronic Open  
Pivot AP Series Aortic Heart  
Valve

204 501DM## - Medtronic Open  
Pivot AP Series Mitral Heart  
Valve

205 502AG## - Medtronic Open  
Pivot Aortic Valved Graft  
(AVG)

- 
- 206 503DA## - Medtronic Open  
Pivot APex Series Heart Valve
  - 207 505DA## - Medtronic Open  
Pivot AP360 Series Aortic  
Heart Valve
  - 208 A010 - CryoLife Ascending  
Thoracic Aorta
  - 209 A020 - CryoLife Descending  
Thoracic Aorta
  - 210 A030 - CryoLife Pulmonary  
Artery
  - 211 AV00 - CryoLife Aortic  
Valve and Conduit
  - 212 AV10 - CryoLife Aortic  
Valve without Conduit
  - 214 PV00 - CryoLife Pulmonary  
Valve & Conduit
  - 215 PV10 - CryoLife Pulmonary  
Valve without Conduit
  - 216 R010 - CryoLife Aortoiliac  
Grafts
  - 217 R020 - CryoLife Femoral  
Popliteal Artery
  - 218 SGPV00 - CryoLife SG  
Pulmonary Valve & Conduit
  - 219 SGPV10 - CryoLife SG  
Pulmonary Valve without  
Conduit
  - 220 V010 - CryoLife Saphenous  
Vein
  - 221 V060 - CryoLife Femoral Vein
  - 224 2500## - Edwards Prima  
Aortic Stentless Bioprosthesis
  - 225 2500P## - Edwards Prima  
Plus Stentless Aortic  
Bioprosthesis
  - 226 2625## - Carpentier-Edwards  
Porcine Aortic Bioprosthesis
  - 227 2650## - Carpentier-Edwards  
S.A.V. Aortic Porcine  
Bioprosthesis
  - 228 2700## - Carpentier-Edwards  
Perimount Pericardial Aortic  
Bioprosthesis
  - 229 2700TFX## - Carpentier-  
Edwards Perimount Theon  
Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
  - 230 2800## - Carpentier-Edwards

- 
- Perimount RSR Pericardial  
Aortic Bioprosthesis
- 231 2800TFX## - Carpentier-  
Edwards Perimount Theon  
RSR Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 232 3000## - Carpentier-Edwards  
Perimount Magna Pericardial  
Aortic Bioprosthesis
- 233 3000TFX## - Carpentier-  
Edwards Perimount Magna  
Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 234 3160## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 235 3300TFX## - Carpentier-  
Edwards Perimount Magna  
Ease Pericardial Aortic  
Bioprosthesis with ThermaFix  
Process
- 236 3600## - Edwards Mira  
Mechanical Valve
- 237 3600f## - Edwards Mira  
Mechanical Valve
- 238 3600u## - Edwards Mira  
Mechanical Valve
- 239 4100## - Carpentier-  
McCarthy-Adams IMR  
ETlogix Mitral Annuloplasty  
Ring
- 240 4200## - Edwards GeoForm  
Mitral Annuloplasty Ring
- 241 4300## - Carpentier-Edwards  
Bioprosthetic Valved Conduit
- 242 4400## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring
- 243 4425## - Carpentier-Edwards  
Classic Mitral Annuloplasty  
Ring with Duraflo Treatment
- 244 4450## - Carpentier-Edwards  
Physio Mitral Annuloplasty  
Ring
- 245 4475## - Carpentier-Edwards  
Physio Annuloplasty Ring  
with Duraflo Treatment
- 246 4500## - Carpentier-Edwards  
Classic Tricuspid

- 
- Annuloplasty Ring
- 247 4525## - Carpentier-Edwards  
Classic Tricuspid  
Annuloplasty Ring with  
Duraflo Treatment
- 248 4600## - Crosgrove-Edwards  
Mitral/Tricuspid Annuloplasty  
Ring
- 249 4625## - Crosgrove-Edwards  
Annuloplasty System with  
Duraflo Treatment
- 250 4900## - Edwards MC3  
Tricuspid Annuloplasty  
System
- 251 5100## - Edwards DETlogix  
Mitral Annuloplasty Ring
- 252 5100M## - Edwards  
Myxomatous Annuloplasty  
Ring
- 253 5200## - Carpentier-Edwards  
Physio II Mitral Annuloplasty  
Ring
- 254 6625## - Carpentier-Edwards  
Porcine Mitral Bioprosthesis
- 255 6625-ESR-LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis with Extended  
Suture Ring
- 256 6625LP## - Carpentier-  
Edwards Duraflex Low  
Pressure Porcine Mitral  
Bioprosthesis
- 257 6900P## - Carpentier-  
Edwards Perimount Plus  
Mitral Pericardial  
Bioprosthesis
- 258 6900PTFX## - Carpentier-  
Edwards Perimount Theon  
Mitral Pericardial  
Bioprosthesis with ThermaFix  
Process
- 259 7000TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Pericardial  
Bioprosthesis
- 260 7200TFX## - Carpentier-  
Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis
- 261 7300TFX## - Carpentier-



- Edwards Perimount Magna  
Mitral Ease Pericardial  
Bioprosthesis with ThermaFix  
Process
- 262 9000## - Cribier-Edwards  
Aortic Bioprosthesis
- 263 9000PHV## - Cribier-  
Edwards Aortic Bioprosthesis
- 264 9000TFX## - Edwards Sapien  
Transcatheter Heart Valve
- 265 9120## - Edwards-  
Duromedics Bileaflet  
Prostheses
- 266 9600## - Edwards Mira  
Mechanical Valve
- 503 11500A-## EdwardsInspiris  
Resilia Aortic Valve
- 267 AAL - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Large
- 268 AAM - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Medium
- 269 AAS - LifeNet CardioGraft  
Ascending Aorta (Non-  
Valved) - Small
- 270 DLHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Left
- 271 DRHPA - LifeNet  
CardioGraft Decellularized  
Hemi-Pulmonary Artery with  
Matracell - Right
- 272 HVAL - LifeNet CardioGraft  
Aortic Heart Valve - Large
- 273 HVAM - LifeNet CardioGraft  
Aortic Heart Valve - Medium
- 274 HVAS - LifeNet CardioGraft  
Aortic Heart Valve - Small
- 275 HVPL - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Large
- 276 HVPM - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Medium
- 277 HVPS - LifeNet CardioGraft  
Pulmonary Heart Valve -  
Small
- 278 LHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery - Left

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- 279 PAL - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Large
  - 280 PAM - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Medium
  - 281 PAS - LifeNet CardioGraft  
Pulmonary Artery (Non-  
Valved) - Small
  - 282 RHPA - LifeNet CardioGraft  
Hemi-Pulmonary Artery -  
Right
  - 283 TAL - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Large
  - 284 TAM - LifeNet CardioGraft  
Thoracic Aorta Non-valved -  
Medium
  - 286 174A-## - Medtronic  
Hancock Apical Left  
Ventricle Connector
  - 287 200## - Medtronic Contegra  
Unsupported Pulmonary  
Valve Conduit
  - 288 200S## - Medtronic Contegra  
Supported Pulmonary Valve  
Conduit
  - 289 305C2## - Medtronic Mosaic  
Standard Cinch - Aortic
  - 290 305U2## - Medtronic Mosaic  
Ultra Cinch - Aortic
  - 291 310## - Medtronic Mosaic  
Mitral
  - 504 400## - Medtronic Avalor  
Aortic Valve
  - 292 610B## - Medtronic Duran  
Band
  - 293 610R## - Medtronic Duran  
Ring
  - 294 620B## - Medtronic Duran  
AnCore Band
  - 295 620BG## - Medtronic Duran  
AnCore Band With Chordal  
Guide
  - 296 620R## - Medtronic Duran  
AnCore Ring
  - 297 620RG## - Medtronic Duran  
Ancore Ring With Chordal  
Guide
  - 298 638B## - Medtronic CG  
Future Band

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- 299 638R## - Medtronic CG  
Future Composite Ring
  - 300 670 - Medtronic Simplici-T  
Annuloplasty System
  - 301 680R## - Medtronic Profile  
3D Ring
  - 302 995CS## - Medtronic  
Freestyle, Complete  
Subcoronary - CS
  - 303 995MS## - Medtronic  
Freestyle, Modified  
Subcoronary - MS
  - 304 FR995-## - Medtronic  
Freestyle, Full Root - FR
  - 307 HC105-## - Medtronic  
Hancock Low-porosity  
Valved Conduit
  - 308 HC150-## - Medtronic  
Hancock Modified Orifice  
Pulmonic Valved Conduit
  - 309 T505C2## - Medtronic  
Hancock II Aortic Cinch
  - 310 T505U2## - Medtronic  
Hancock II Ultra Cinch
  - 311 T510C## - Medtronic  
Hancock II Mitral
  - 312 ONXA## - On-X Aortic  
Valve with standard sewing  
ring
  - 313 ONXAC## - On-X Aortic  
Valve with Conform-X  
Sewing Ring
  - 314 ONXACE## - On-X Aortic  
Valve with Conform-X  
Sewing Ring, extended
  - 315 ONXAE## - On-X Aortic  
Valve with standard sewing  
ring, extended
  - 316 ONXM## - On-X Mitral  
Valve with standard sewing  
ring
  - 317 ONXMC## - On-X Mitral  
Valve with Conform-X  
Sewing Ring
  - 327 LXA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve
  - 328 A5-0## - Sorin Group:  
Carbomedics Standard Aortic  
Valve
  - 329 AF-8## - Sorin Group:

- Carbomedics AnnuloFlex  
Annuloplasty System
- 330 AP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Ascending Aortic Prosthesis
- 331 AR-7## - Sorin Group:  
Carbomedics AnnuloFlo  
Annuloplasty System
- 332 CP-0## - Sorin Group:  
Carbomedics Carbo-Seal  
Valsalva Ascending Aortic  
Prosthesis
- 333 F7-0## - Sorin Group:  
Carbomedics OptiForm Mitral  
Valve
- 334 M7-0## - Sorin Group:  
Carbomedics Standard Mitral  
Valve
- 335 R5-0## - Sorin Group:  
Carbomedics Reduced Series  
Aortic Valve
- 336 S5-0## - Sorin Group:  
Carbomedics Top Hat Supra-  
Annular Aortic Valve
- 337 ##A-101 - Abbott Medical  
Mechanical Aortic Heart  
Valve
- 338 ##AEC-102 - Abbott Medical  
Mechanical Heart Valve
- 339 ##AECJ-502 - Abbott  
Medical Masters Series Aortic  
Mechanical Valve, Expanded  
Cuff
- 340 ##AECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 341 ##AEHPJ-505 - Abbott  
Medical Masters HP  
Mechanical Valve, Expanded  
Cuff
- 342 ##AEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 343 ##AET-104 - Abbott Medical  
Mechanical Heart Valve
- 344 ##AETJ-504 - Abbott  
Medical Masters Series  
Mechanical Heart Valve
- 345 ##AFHPJ-505 - Abbott

- Medical Masters HP Aortic  
Mechanical Valve, Flex Cuff
- 346 ##AG-701 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 347 ##AGF-706 - Abbott Medical  
Regent Valve with Silzone  
Coating
- 348 ##AGFN-756 - Abbott  
Medical Regent Aortic  
Mechanical Valve, Flex Cuff
- 349 ##AGN-751 - Abbott Medical  
Regent Aortic Mechanical  
Valve, Standard Cuff
- 350 ##AHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 351 ##AHPJ-505 - Abbott  
Medical Masters HP Aortic  
Mechanical Heart Valve,  
Standard Cuff
- 352 ##AHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 353 ##AJ-501 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, Standard  
Cuff
- 354 ##AS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 355 ##AT-103 - Abbott Medical  
Mechanical Heart Valve
- 356 ##ATJ-503 - Abbott Medical  
Masters Series Aortic  
Mechanical Valve, PTFE Cuff
- 357 ##CAVG-404 - Abbott  
Medical Coated Aortic  
Valved Graft Prosthesis
- 358 ##CAVGJ-514 - Abbott  
Medical Masters Series Aortic  
Valved Graft
- 359 ##CAVGJ-514-00 - Abbott  
Medical Masters Aortic  
Valved Graft, Hemashield  
Technology
- 360 ##M-101 - Abbott Medical  
Mechanical Mitral Heart Valve
- 361 ##MEC-102 - Abbott Medical

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- Mechanical Heart Valve
- 362 ##MECJ-502 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
Cuff
- 363 ##MECS-602 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 364 ##MEHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 365 ##MET-104 - Abbott Medical  
Mechanical Heart Valve
- 366 ##METJ-504 - Abbott  
Medical Masters Series Mitral  
Mechanical Valve, Expanded  
PTFE Cuff
- 367 ##MHP-105 - Abbott Medical  
Mechanical Heart Valve  
Hemodynamic Plus (HP)  
Series
- 368 ##MHPJ-505 - Abbott  
Medical Masters HP Mitral  
Mechanical Heart Valve,  
Standard Cuff
- 369 ##MHPS-605 - Abbott  
Medical Masters Series  
Mechanical Heart Valve with  
Silzone Coating
- 370 ##MJ-501 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, Standard  
Cuff
- 371 ##MS-601 - Abbott Medical  
Masters Mechanical Heart  
Valve with Silzone Coating
- 372 ##MT-103 - Abbott Medical  
Mechanical Heart Valve
- 373 ##MTJ-503 - Abbott Medical  
Masters Series Mitral  
Mechanical Valve, PTFE Cuff
- 374 ##VAVGJ-515 - Abbott  
Medical Masters HP Aortic  
Valved Graft
- 375 AFR-## - Abbott Medical  
Attune Flexible Adjustable  
Annuloplasty Ring
- 376 B10-##A - Abbott Medical  
Biocor Aortic Valve

- 377 B10-##A-00 - Abbott Medical  
Biocor Aortic Valve
- 378 B10-##M - Abbott Medical  
Biocor Mitral Valve
- 379 B10-##M-00 - Abbott  
Medical Biocor Mitral Valve
- 380 B100-##A-00 - Abbott  
Medical Biocor Stented  
Aortic Tissue Valve
- 381 B100-##M-00 - Abbott  
Medical Biocor Stented  
Mitral Tissue Valve
- 382 B10SP-## - Abbott Medical  
Biocor Supra Stented Porcine  
Heart Valve
- 383 B20-0##A - Abbott Medical  
Biocor Porcine Stentless  
Bioprosthetic Heart Valve
- 384 B30-##A - Abbott Medical  
Biocor Valve
- 385 B30-##M - Abbott Medical  
Biocor Valve
- 386 BSP100-## - Abbott Medical  
Biocor Supra Aortic Stented  
Tissue Valve
- 387 E100-##A-00 - Abbott  
Medical Epic Aortic Stented  
Tissue Valve
- 388 E100-##M-00 - Abbott  
Medical Epic Mitral Stented  
Tissue Valve
- 389 EL-##A - Abbott Medical  
Epic Aortic Valve
- 390 EL-##M - Abbott Medical  
Epic Mitral Valve
- 391 ELS-##A - Abbott Medical  
Epic Tissue Aortic Valve with  
Silzone Coating
- 392 ELS-##M - Abbott Medical  
Epic Tissue Mitral Valve with  
Silzone Coating
- 393 ESP100-##-00 - Abbott  
Medical Epic Supra Aortic  
Stented Tissue Valve
- 394 ESP100-##A-00 - Abbott  
Medical Epic Stented Aortic  
Tissue Valve
- 395 ROOT-## - Abbott Medical  
Toronto Root with BiLinx AC
- 396 RSAR-## - Abbott Medical  
SJM Rigid Saddle Ring

- 397 SARP-## - Abbott Medical  
SJM STguin Semi-Rigid  
Annuloplasty Ring
- 398 SARS-M## - Abbott Medical  
STguin Annuloplasty Ring  
with Silzone Coating
- 399 SPA-101-## - Abbott Medical  
Toronto SPV Valve
- 400 SPA-201-## - Abbott Medical  
Toronto SPV II Bioprosthetic  
Heart Valve
- 401 TAB-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Band
- 402 TAR-## - Abbott Medical  
Tailor Annuloplasty Ring with  
Silzone Coating
- 403 TARP-## - Abbott Medical  
Tailor Flexible Annuloplasty  
Ring
- 505 CDS0501 Abbott MitraClip  
NT Clip Delivery System
- 506 CDS0601-NTR Abbott  
MitraClip NTR Clip Delivery  
System
- 507 CDS0601-XTR Abbott  
MitraClip XTR Clip Delivery  
System
- 508 CDS0201 - Abbott MitraClip  
Delivery System
- 404 PB10-## - Medtronic Melody  
Transcatheter Pulmonary  
Valve
- 405 700FF## - Medtronic  
Simulus FLX-O Ring
- 406 700FC## - Medtronic Simulus  
FLX-C Band
- 407 735AF## - Medtronic  
Simulus Adjustable Ring
- 408 800SR## - Medtronic Simulus  
Semi-rigid Ring
- 409 900SFC## - Medtronic TriAd  
Tricuspid Annuloplasty Ring
- 410 1000-## - Medtronic 3f Aortic  
Bioprosthesis
- 411 6200## - Carpentier-Edwards  
Physio Tricuspid  
Annuloplasty Ring
- 412 9300TFX## - Edwards Sapien  
Transcatheter Heart Valve



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- 413 305## - Medtronic Mosaic  
Ultra Porcine Heart Valve
  - 415 TF-##A - Abbott Medical  
Trifecta Aortic Stented Tissue  
Valve
  - 416 505DM## - Medtronic Open  
Pivot AP360 Series Mitral  
Heart Valve
  - 417 800SC## - Medtronic Simulus  
Semi-rigid Mitral  
Annuloplasty Ring
  - 418 6000-## - Medtronic 3f  
Enable Aortic Bioprosthesis
  - 419 PH00 - Cryolife Pulmonary  
Hemi-Artery
  - 420 SGPH00 - Cryolife SG  
Pulmonary Hemi-Artery
  - 421 690R## - Medtronic Contour  
3D Annuloplasty ring
  - 422 735AC## - Medtronic  
Simulus Adjustable Band
  - 423 9600TFX## - Edwards Sapien  
Transcatheter Heart Valve
  - 509 9750TFX## - Edwards  
Spapient 3 Transcatheter  
Heart Valve
  - 425 H607 - Medtronic post.  
Annuloplasty band (Split,  
Mayo)
  - 428 ICV08## - Sorin Group  
Sovering Annuloplasty
  - 429 ICV09## - Sorin Group  
MEMO 3D Semi-rigid  
Annuloplasty Ring
  - 432 A1-0## - Sorin Group:  
Carbomedics Orbis Universal  
Aortic Valve
  - 433 M2-0## - Sorin Group:  
Carbomedics Orbis  
UniversalMitral Valve
  - 434 PF ## - Sorin Group  
Pericarbon Freedom Stentless
  - 435 PS ## - Sorin Group  
Pericarbon More Mitral
  - 510 PVS## - Perceval Aortic  
Valve
  - 436 ART ## SOP - Sorin Group  
Soprano Armonia
  - 437 ART ## SG - Sorin Group  
Freedom Solo

- 438 ART ## LFA- Sorin Group  
Bicarbon Fitline Aortic
- 439 MTR ## LFM- Sorin Group  
Bicarbon Fitline Mitral
- 440 ART ## LOV- Sorin Group  
Bicarbon Overline Aortic
- 441 ART ## LSA- Sorin Group  
Bicarbon Slimline Aortic
- 445 9355NF## - Edwards Sapien  
XT Transcatheter Valve with  
NovaFlex System
- 446 9355ASP## - Edwards Sapien  
XT Transcatheter Valve with  
Ascendra System
- 447 S3TF1## - Edwards Sapien 3  
Transcatheter Valve with  
Commander System
- 448 S3TA1## - Edwards Sapien 3  
Transcatheter Valve with  
Certitude System
- 449 CRS-P3-640 - Medtronic  
CoreValve
- 450 CRS-P3-943 - Medtronic  
CoreValve
- 511 TAV## - Medtronic Evolut  
Pro Plus
- 451 MCS-P3 - Medtronic  
CoreValve
- 452 MCS-P4 - Medtronic  
CoreValve Evolut
- 453 ONXAN## - On-X Aortic  
Heart Valve with Anatomic  
Sewing Ring
- 454 ONXANE## - On-X Valve  
with Anatomic Sewing ring  
and Extended Holder
- 455 ONXAAP## - On-X  
Ascending Aortic Prosthesis
- 458 DLA## - Sorin Group  
Mitroflow Aortic Pericardial  
Heart Valve with PRT
- 459 MVC0##- Sorin Group  
Mitroflow Valsalva Conduit
- 460 1260 ### - Starr-Edwards  
Silastic Ball Aortic Heart  
Valve Prosthesis
- 461 6120 ### - Starr Edwards  
Silastic Ball Mitral Heart  
Valve Prosthesis
- 462 73##1088 - Vascutek

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- 463 Gelweave Plexus Graft  
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
- 469 ART##SMT - Sorin Solo  
Smart
- 470 CNA19 - Sorin Crown PRT  
Tissue Valve
- 471 CNA21 - Sorin Crown PRT  
Tissue Valve
- 472 CNA23 - Sorin Crown PRT  
Tissue Valve
- 473 CNA25 - Sorin Crown PRT  
Tissue Valve
- 474 CNA27 - Sorin Crown PRT  
Tissue Valve
- 475 DPPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch  
(decellularized)
- 476 DPPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch  
(decellularized)
- 477 EVOLUTR-##-US -  
Medtronic CoreValve Evolut  
R
- 478 H749LTV##0 - Boston  
Scientific Lotus Transcatheter  
Valve
- 479 ICV1208 - Sorin Perceval  
Tissue Valves
- 480 ICV1209 - Sorin Perceval  
Tissue Valves
- 481 ICV1210 - Sorin Perceval  
Tissue Valves
- 482 ICV1211 - Sorin Perceval  
Tissue Valves
- 483 ICV1248 - Solo Smart Aortic  
Tissue Valves
- 484 ICV1264 - Solo Smart Aortic

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- Tissue Valves
  - 485 ICV1265 - Solo Smart Aortic  
Tissue Valves
  - 486 ICV1331 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 487 ICV1332 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 488 ICV1333 - Sorin MEMO 3D  
RECHORD Annuloplasty  
Ring
  - 489 ICV1334 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 490 ICV1335 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 491 ICV1336 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 492 ICV1337 - Sorin MEMO 3D  
RECHORD Annuloplasty Ring
  - 493 IVC1247 - Solo Smart Aortic  
Tissue Valves
  - 494 LMCP - LifeNet  
CardioGRAFT Left Mono  
Cusp Patch
  - 495 MCP - LifeNet  
CardioGRAFT Mono Cusp  
Patch
  - 496 PPGK - LifeNet  
CardioGRAFT Thick  
Pulmonary Patch
  - 497 PPGN - LifeNet  
CardioGRAFT Thin  
Pulmonary Patch
  - 498 PRT-## - Portico  
Transcatheter Aortic Valve
  - 499 RMCP - LifeNet  
CardioGRAFT Right Mono  
Cusp Patch
  - 500 TAS - LifeNet CardioGraft  
Thoracic Aorta - Small 16mm  
and less
  - 501 TFGT-##A - Abbott Medical  
Trifecta with Glide  
Technology (GT) Aortic  
Stented Tissue Valve
  - 502 Z65LOTUSKIT## - Lotus  
Valve Kit
  - 776 Surgeon Fashioned Device
  - 777 Other US FDA-Approved  
Device

778 Other Non-US FDA-  
Approved Device

*Long Name:* Aortic Valve or Aortic Valve Composite Graft Implanted - Size *SeqNo:* 5443  
*Short Name:* **AVAVCompGrImplSizeAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the size of the aortic valve or aortic valve composite graft. For composite grafts record the size of the valve.

*Data Source:* User *Format:* Text

ParentShortName: AVAVCompGraftImplAo

ParentLongName: Aortic Valve or Aortic Valve Composite Graft Implanted

ParentHarvestCodes: 1

ParentValues: = "Yes"

*Long Name:* Aortic Valve or Aortic Valve Composite Graft Implanted - Unique Device Identifier *SeqNo:* 5444  
*Short Name:* **AVAVCompGrImplUDIAo** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the UDI of the aortic valve or aortic valve composite graft.

*Data Source:* User *Format:* Text

ParentShortName: AVAVCompGraftImplAo

ParentLongName: Aortic Valve or Aortic Valve Composite Graft Implanted

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Aorta Device - Location #01 *SeqNo:* 5450  
*Short Name:* **ADevLoc01** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the location within the aorta where device #01 was inserted.

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

ParentShortName: ADevIns

ParentLongName: Aorta Device Inserted

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 2 Below sinotubular junction
  - 3 Sinotubular junction to mid ascending
  - 4 Mid ascending to distal ascending
  - 5 Zone 1 (between innominate and left carotid)
  - 6 Zone 2 (between left carotid and left subclavian)
  - 7 Zone 3 (first 2 cm. distal to left subclavian)
  - 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
  - 9 Zone 5 (mid descending aorta to celiac)
  - 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
-

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*Long Name:* Aorta Device - Implant Method #01 *SeqNo:* 5455  
*Short Name:* **ADevDelMeth01** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #01 within the aorta.

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

ParentShortName: ADevIns

ParentLongName: Aorta Device Inserted

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #01 *SeqNo:* 5460  
*Short Name:* **ADevOut01** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #01.

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

ParentShortName: ADevIns

ParentLongName: Aorta Device Inserted

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 Implanted/deployed and  
removed
  - 3 Successfully  
implanted/deployed
-

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*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"

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*Long Name:* Aorta Device - Unique Device Identifier #01 *SeqNo:* 5470  
*Short Name:* **ADevUDI01** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #01 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
ParentShortName: ADevIns  
ParentLongName: Aorta Device Inserted  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* Aorta Device - Location #02 *SeqNo:* 5475  
*Short Name:* **ADevLoc02** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #02 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ADevIns  
ParentLongName: Aorta Device Inserted  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:

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- 1 No additional devices inserted
  - 2 Below sinotubular junction
  - 3 Sinotubular junction to mid ascending
  - 4 Mid ascending to distal ascending
  - 5 Zone 1 (between innominate and left carotid)
  - 6 Zone 2 (between left carotid and left subclavian)
  - 7 Zone 3 (first 2 cm. distal to left subclavian)
  - 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
  - 9 Zone 5 (mid descending aorta to celiac)
  - 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #02

*SeqNo:* 5480

*Short Name:* **ADevDelMeth02**

*Core:* Yes

*Section Name:* Aorta And Aortic Root Procedures

*Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #02 within the aorta.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc02

*ParentLongName:* Aorta Device - Location #02

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
-

---

*Long Name:* Aorta Device - Outcome #02 *SeqNo:* 5485  
*Short Name:* **ADevOut02** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #02.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ADevLoc02

ParentLongName: Aorta Device - Location #02

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
- 2 Implanted/deployed and  
removed
- 3 Successfully  
implanted/deployed

---

*Long Name:* Aorta Device - Model Number #02 *SeqNo:* 5490  
*Short Name:* **ADevModel02** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #02.  
*Data Source:* User *Format:* Text

ParentShortName: ADevLoc02

ParentLongName: Aorta Device - Location #02

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #02 *SeqNo:* 5495  
*Short Name:* **ADevUDI02** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #02 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc02  
 ParentLongName: Aorta Device - Location #02  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

*Long Name:* Aorta Device - Location #03 *SeqNo:* 5500  
*Short Name:* **ADevLoc03** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #03 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc02  
 ParentLongName: Aorta Device - Location #02  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)

- 
- 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #03 *SeqNo:* 5505  
*Short Name:* **ADevDelMeth03** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the implant method used to insert device #03 within the aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc03

*ParentLongName:* Aorta Device - Location #03

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #03 *SeqNo:* 5510  
*Short Name:* **ADevOut03** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #03.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc03

*ParentLongName:* Aorta Device - Location #03

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Unsuccessfully implanted/maldeployed

- 
- 2 Implanted/deployed and removed
  - 3 Successfully implanted/deployed
- 

*Long Name:* Aorta Device - Model Number #03 *SeqNo:* 5515  
*Short Name:* **ADevModel03** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #03.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc03

*ParentLongName:* Aorta Device - Location #03

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #03 *SeqNo:* 5520  
*Short Name:* **ADevUDI03** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #03 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc03

*ParentLongName:* Aorta Device - Location #03

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #04 *SeqNo:* 5525  
*Short Name:* **ADevLoc04** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the location within the aorta where device #04 was inserted, or indicate that no additional devices were inserted.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

ParentShortName: ADevLoc03

ParentLongName: Aorta Device - Location #03

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)
- 10 Zone 6 (celiac to superior mesenteric)
- 11 Zone 7 (superior mesenteric to renals)
- 12 Zone 8 (renal to infra-renal abdominal aorta)
- 13 Zone 9 (infrarenal abdominal aorta)
- 14 Zone 10 (common iliac)
- 15 Zone 11 (external iliacs)
- 16 No Additional Grafts

---

*Long Name:* Aorta Device - Implant Method #04 *SeqNo:* 5530  
*Short Name:* **ADevDelMeth04** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #04 within the aorta.

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

ParentShortName: ADevLoc04

ParentLongName: Aorta Device - Location #04

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #04 *SeqNo:* 5535  
*Short Name:* **ADevOut04** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #04.

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

ParentShortName: ADevLoc04

ParentLongName: Aorta Device - Location #04

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 Implanted/deployed and  
removed
  - 3 Successfully  
implanted/deployed
-

---

*Long Name:* Aorta Device - Model Number #04 *SeqNo:* 5540  
*Short Name:* **ADevModel04** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #04.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc04  
 ParentLongName: Aorta Device - Location #04  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #04 *SeqNo:* 5545  
*Short Name:* **ADevUDI04** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #04 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc04  
 ParentLongName: Aorta Device - Location #04  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #05 *SeqNo:* 5550  
*Short Name:* **ADevLoc05** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #05 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc04  
 ParentLongName: Aorta Device - Location #04  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:  
     Code: Value:

---



- 
- 1 No additional devices inserted
  - 2 Below sinotubular junction
  - 3 Sinotubular junction to mid ascending
  - 4 Mid ascending to distal ascending
  - 5 Zone 1 (between innominate and left carotid)
  - 6 Zone 2 (between left carotid and left subclavian)
  - 7 Zone 3 (first 2 cm. distal to left subclavian)
  - 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
  - 9 Zone 5 (mid descending aorta to celiac)
  - 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #05

*SeqNo:* 5555

*Short Name:* **ADevDelMeth05**

*Core:* Yes

*Section Name:* Aorta And Aortic Root Procedures

*Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #05 within the aorta.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc05

*ParentLongName:* Aorta Device - Location #05

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
-

---

*Long Name:* Aorta Device - Outcome #05 *SeqNo:* 5560  
*Short Name:* **ADevOut05** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #05.

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

ParentShortName: ADevLoc05

ParentLongName: Aorta Device - Location #05

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 Implanted/deployed and  
removed
  - 3 Successfully  
implanted/deployed
- 

*Long Name:* Aorta Device - Model Number #05 *SeqNo:* 5565  
*Short Name:* **ADevModel05** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the model number of aorta device #05.

*Data Source:* User *Format:* Text

ParentShortName: ADevLoc05

ParentLongName: Aorta Device - Location #05

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #05 *SeqNo:* 5570  
*Short Name:* **ADevUDI05** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #05 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc05  
 ParentLongName: Aorta Device - Location #05  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

*Long Name:* Aorta Device - Location #06 *SeqNo:* 5575  
*Short Name:* **ADevLoc06** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #06 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc05  
 ParentLongName: Aorta Device - Location #05  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)

- 
- 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #06 *SeqNo:* 5580  
*Short Name:* **ADevDelMeth06** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the implant method used to insert device #06 within the aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc06

*ParentLongName:* Aorta Device - Location #06

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #06 *SeqNo:* 5585  
*Short Name:* **ADevOut06** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #06.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc06

*ParentLongName:* Aorta Device - Location #06

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Unsuccessfully implanted/maldeployed

- 
- 2 Implanted/deployed and removed
  - 3 Successfully implanted/deployed
- 

*Long Name:* Aorta Device - Model Number #06 *SeqNo:* 5590

*Short Name:* **ADevModel06** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #06.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc06

*ParentLongName:* Aorta Device - Location #06

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #06 *SeqNo:* 5595

*Short Name:* **ADevUDI06** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #06 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc06

*ParentLongName:* Aorta Device - Location #06

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #07 *SeqNo:* 5600  
*Short Name:* **ADevLoc07** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the location within the aorta where device #07 was inserted, or indicate that no additional devices were inserted.

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

ParentShortName: ADevLoc06

ParentLongName: Aorta Device - Location #06

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)
- 10 Zone 6 (celiac to superior mesenteric)
- 11 Zone 7 (superior mesenteric to renals)
- 12 Zone 8 (renal to infra-renal abdominal aorta)
- 13 Zone 9 (infrarenal abdominal aorta)
- 14 Zone 10 (common iliac)
- 15 Zone 11 (external iliacs)
- 16 No Additional Grafts

---

*Long Name:* Aorta Device - Implant Method #07 *SeqNo:* 5605  
*Short Name:* **ADevDelMeth07** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #07 within the aorta.

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

ParentShortName: ADevLoc07

ParentLongName: Aorta Device - Location #07

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #07 *SeqNo:* 5610  
*Short Name:* **ADevOut07** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #07.

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

ParentShortName: ADevLoc07

ParentLongName: Aorta Device - Location #07

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 Implanted/deployed and  
removed
  - 3 Successfully  
impanted/deployed
-

---

*Long Name:* Aorta Device - Model Number #07 *SeqNo:* 5615  
*Short Name:* **ADevModel07** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #07.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc07  
 ParentLongName: Aorta Device - Location #07  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #07 *SeqNo:* 5620  
*Short Name:* **ADevUDI07** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #07 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc07  
 ParentLongName: Aorta Device - Location #07  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #08 *SeqNo:* 5625  
*Short Name:* **ADevLoc08** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #08 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc07  
 ParentLongName: Aorta Device - Location #07  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:  
     Code: Value:

---



- 
- 1 No additional devices inserted
  - 2 Below sinotubular junction
  - 3 Sinotubular junction to mid ascending
  - 4 Mid ascending to distal ascending
  - 5 Zone 1 (between innominate and left carotid)
  - 6 Zone 2 (between left carotid and left subclavian)
  - 7 Zone 3 (first 2 cm. distal to left subclavian)
  - 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
  - 9 Zone 5 (mid descending aorta to celiac)
  - 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #08

*SeqNo:* 5630

*Short Name:* **ADevDelMeth08**

*Core:* Yes

*Section Name:* Aorta And Aortic Root Procedures

*Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #08 within the aorta.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc08

*ParentLongName:* Aorta Device - Location #08

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
-

---

*Long Name:* Aorta Device - Outcome #08 *SeqNo:* 5635  
*Short Name:* **ADevOut08** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #08.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ADevLoc08

ParentLongName: Aorta Device - Location #08

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
- 2 Implanted/deployed and  
removed
- 3 Successfully  
implanted/deployed

---

*Long Name:* Aorta Device - Model Number #08 *SeqNo:* 5640  
*Short Name:* **ADevModel08** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #08.  
*Data Source:* User *Format:* Text

ParentShortName: ADevLoc08

ParentLongName: Aorta Device - Location #08

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

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*Long Name:* Aorta Device - Unique Device Identifier #08 *SeqNo:* 5645  
*Short Name:* **ADevUDI08** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #08 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
ParentShortName: ADevLoc08  
ParentLongName: Aorta Device - Location #08  
ParentHarvestCodes: <>1 And Is Not Missing  
ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #09 *SeqNo:* 5650  
*Short Name:* **ADevLoc09** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #09 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ADevLoc08  
ParentLongName: Aorta Device - Location #08  
ParentHarvestCodes: <>1 And Is Not Missing  
ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)

- 
- 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #09 *SeqNo:* 5655  
*Short Name:* **ADevDelMeth09** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the implant method used to insert device #09 within the aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ADevLoc09

ParentLongName: Aorta Device - Location #09

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #09 *SeqNo:* 5660  
*Short Name:* **ADevOut09** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #09.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ADevLoc09

ParentLongName: Aorta Device - Location #09

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully implanted/maldeployed

- 2 Implanted/deployed and removed
- 3 Successfully implanted/deployed

*Long Name:* Aorta Device - Model Number #09 *SeqNo:* 5665

*Short Name:* **ADevModel09** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #09.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc09

*ParentLongName:* Aorta Device - Location #09

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Long Name:* Aorta Device - Unique Device Identifier #09 *SeqNo:* 5670

*Short Name:* **ADevUDI09** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #09 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc09

*ParentLongName:* Aorta Device - Location #09

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Long Name:* Aorta Device - Location #10 *SeqNo:* 5675  
*Short Name:* **ADevLoc10** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the location within the aorta where device #10 was inserted, or indicate that no additional devices were inserted.

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

ParentShortName: ADevLoc09

ParentLongName: Aorta Device - Location #09

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)
- 10 Zone 6 (celiac to superior mesenteric)
- 11 Zone 7 (superior mesenteric to renals)
- 12 Zone 8 (renal to infra-renal abdominal aorta)
- 13 Zone 9 (infrarenal abdominal aorta)
- 14 Zone 10 (common iliac)
- 15 Zone 11 (external iliacs)
- 16 No Additional Grafts

---

*Long Name:* Aorta Device - Implant Method #10 *SeqNo:* 5680  
*Short Name:* **ADevDelMeth10** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #10 within the aorta.

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

ParentShortName: ADevLoc10

ParentLongName: Aorta Device - Location #10

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #10 *SeqNo:* 5685  
*Short Name:* **ADevOut10** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #10.

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

ParentShortName: ADevLoc10

ParentLongName: Aorta Device - Location #10

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 Implanted/deployed and  
removed
  - 3 Successfully  
impanted/deployed
-

---

*Long Name:* Aorta Device - Model Number #10 *SeqNo:* 5690  
*Short Name:* **ADevModel10** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #10.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc10  
 ParentLongName: Aorta Device - Location #10  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #10 *SeqNo:* 5695  
*Short Name:* **ADevUDI10** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #10 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc10  
 ParentLongName: Aorta Device - Location #10  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #11 *SeqNo:* 5700  
*Short Name:* **ADevLoc11** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #11 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc10  
 ParentLongName: Aorta Device - Location #10  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:  
     Code: Value:

---



- 
- 1 No additional devices inserted
  - 2 Below sinotubular junction
  - 3 Sinotubular junction to mid ascending
  - 4 Mid ascending to distal ascending
  - 5 Zone 1 (between innominate and left carotid)
  - 6 Zone 2 (between left carotid and left subclavian)
  - 7 Zone 3 (first 2 cm. distal to left subclavian)
  - 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
  - 9 Zone 5 (mid descending aorta to celiac)
  - 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #11

*SeqNo:* 5705

*Short Name:* **ADevDelMeth11**

*Core:* Yes

*Section Name:* Aorta And Aortic Root Procedures

*Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #11 within the aorta.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc11

*ParentLongName:* Aorta Device - Location #11

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
-

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*Long Name:* Aorta Device - Outcome #11 *SeqNo:* 5710  
*Short Name:* **ADevOut11** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #11.

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

ParentShortName: ADevLoc11

ParentLongName: Aorta Device - Location #11

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 Implanted/deployed and  
removed
  - 3 Successfully  
implanted/deployed
- 

*Long Name:* Aorta Device - Model Number #11 *SeqNo:* 5715  
*Short Name:* **ADevModel11** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #11.

*Data Source:* User *Format:* Text

ParentShortName: ADevLoc11

ParentLongName: Aorta Device - Location #11

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

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*Long Name:* Aorta Device - Unique Device Identifier #11 *SeqNo:* 5720  
*Short Name:* **ADevUDI11** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #11 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc11  
 ParentLongName: Aorta Device - Location #11  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #12 *SeqNo:* 5725  
*Short Name:* **ADevLoc12** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #12 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc11  
 ParentLongName: Aorta Device - Location #11  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)

- 
- 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #12 *SeqNo:* 5730  
*Short Name:* **ADevDelMeth12** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the implant method used to insert device #12 within the aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc12

*ParentLongName:* Aorta Device - Location #12

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #12 *SeqNo:* 5735  
*Short Name:* **ADevOut12** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #12.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc12

*ParentLongName:* Aorta Device - Location #12

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Unsuccessfully implanted/maldeployed

- 
- 2 Implanted/deployed and removed
  - 3 Successfully implanted/deployed
- 

*Long Name:* Aorta Device - Model Number #12 *SeqNo:* 5740  
*Short Name:* **ADevModel12** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #12.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc12

*ParentLongName:* Aorta Device - Location #12

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

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*Long Name:* Aorta Device - Unique Device Identifier #12 *SeqNo:* 5745  
*Short Name:* **ADevUDI12** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #12 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc12

*ParentLongName:* Aorta Device - Location #12

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #13 *SeqNo:* 5750  
*Short Name:* **ADevLoc13** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the location within the aorta where device #13 was inserted, or indicate that no additional devices were inserted.

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

ParentShortName: ADevLoc12

ParentLongName: Aorta Device - Location #12

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)
- 10 Zone 6 (celiac to superior mesenteric)
- 11 Zone 7 (superior mesenteric to renals)
- 12 Zone 8 (renal to infra-renal abdominal aorta)
- 13 Zone 9 (infrarenal abdominal aorta)
- 14 Zone 10 (common iliac)
- 15 Zone 11 (external iliacs)
- 16 No Additional Grafts

---

*Long Name:* Aorta Device - Implant Method #13 *SeqNo:* 5755  
*Short Name:* **ADevDelMeth13** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #13 within the aorta.

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

ParentShortName: ADevLoc13

ParentLongName: Aorta Device - Location #13

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #13 *SeqNo:* 5760  
*Short Name:* **ADevOut13** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #13.

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

ParentShortName: ADevLoc13

ParentLongName: Aorta Device - Location #13

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
  - 2 implanted/deployed and  
removed
  - 3 Successfully  
implanted/deployed
-

---

*Long Name:* Aorta Device - Model Number #13 *SeqNo:* 5765  
*Short Name:* **ADevModel13** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #13.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc13  
 ParentLongName: Aorta Device - Location #13  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #13 *SeqNo:* 5770  
*Short Name:* **ADevUDI13** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #13 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.  
*Data Source:* User *Format:* Text  
 ParentShortName: ADevLoc13  
 ParentLongName: Aorta Device - Location #13  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Location #14 *SeqNo:* 5775  
*Short Name:* **ADevLoc14** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the location within the aorta where device #14 was inserted, or indicate that no additional devices were inserted.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ADevLoc13  
 ParentLongName: Aorta Device - Location #13  
 ParentHarvestCodes: <>1 And Is Not Missing  
 ParentValues: Is Not "No additional devices inserted" And Is Not Missing  
 Harvest Codes:  
     Code: Value:

---



- 
- 1 No additional devices inserted
  - 2 Below sinotubular junction
  - 3 Sinotubular junction to mid ascending
  - 4 Mid ascending to distal ascending
  - 5 Zone 1 (between innominate and left carotid)
  - 6 Zone 2 (between left carotid and left subclavian)
  - 7 Zone 3 (first 2 cm. distal to left subclavian)
  - 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
  - 9 Zone 5 (mid descending aorta to celiac)
  - 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #14

*SeqNo:* 5780

*Short Name:* **ADevDelMeth14**

*Core:* Yes

*Section Name:* Aorta And Aortic Root Procedures

*Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #14 within the aorta.

*Data Source:* User

*Format:* Text (categorical values specified by STS)

*ParentShortName:* ADevLoc14

*ParentLongName:* Aorta Device - Location #14

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

*Harvest Codes:*

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
-

---

*Long Name:* Aorta Device - Outcome #14 *SeqNo:* 5785  
*Short Name:* **ADevOut14** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the outcome of the attempt to insert device #14.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ADevLoc14

ParentLongName: Aorta Device - Location #14

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully  
implanted/maldeployed
- 2 implanted/deployed and  
removed
- 3 Successfully  
implanted/deployed

---

*Long Name:* Aorta Device - Model Number #14 *SeqNo:* 5790  
*Short Name:* **ADevModel14** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the model number of aorta device #14.  
*Data Source:* User *Format:* Text

ParentShortName: ADevLoc14

ParentLongName: Aorta Device - Location #14

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #14 *SeqNo:* 5795  
*Short Name:* **ADevUDI14** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #14 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.

*Data Source:* User *Format:* Text

ParentShortName: ADevLoc14

ParentLongName: Aorta Device - Location #14

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

*Long Name:* Aorta Device - Location #15 *SeqNo:* 5800  
*Short Name:* **ADevLoc15** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the location within the aorta where device #15 was inserted, or indicate that no additional devices were inserted.

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

ParentShortName: ADevLoc14

ParentLongName: Aorta Device - Location #14

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 No additional devices inserted
- 2 Below sinotubular junction
- 3 Sinotubular junction to mid ascending
- 4 Mid ascending to distal ascending
- 5 Zone 1 (between innominate and left carotid)
- 6 Zone 2 (between left carotid and left subclavian)
- 7 Zone 3 (first 2 cm. distal to left subclavian)
- 8 Zone 4 (end of zone 3 to mid descending aorta - T6)
- 9 Zone 5 (mid descending aorta to celiac)

- 
- 10 Zone 6 (celiac to superior mesenteric)
  - 11 Zone 7 (superior mesenteric to renals)
  - 12 Zone 8 (renal to infra-renal abdominal aorta)
  - 13 Zone 9 (infrarenal abdominal aorta)
  - 14 Zone 10 (common iliac)
  - 15 Zone 11 (external iliacs)
  - 16 No Additional Grafts
- 

*Long Name:* Aorta Device - Implant Method #15 *SeqNo:* 5805

*Short Name:* **ADevDelMeth15** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the implant method used to insert device #15 within the aorta.

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

ParentShortName: ADevLoc15

ParentLongName: Aorta Device - Location #15

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Open Surgical
  - 2 Endovascular
- 

*Long Name:* Aorta Device - Outcome #15 *SeqNo:* 5810

*Short Name:* **ADevOut15** *Core:* Yes

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

*DBTableName* Adultdata1

*Definition:* Indicate the outcome of the attempt to insert device #15.

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

ParentShortName: ADevLoc15

ParentLongName: Aorta Device - Location #15

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No additional devices inserted" And Is Not Missing

Harvest Codes:

Code: Value:

- 1 Unsuccessfully implanted/maldeployed

- 
- 2 Implanted/deployed and removed
  - 3 Successfully implanted/deployed
- 

*Long Name:* Aorta Device - Model Number #15 *SeqNo:* 5815  
*Short Name:* **ADevModel15** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the model number of aorta device #15.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc15

*ParentLongName:* Aorta Device - Location #15

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

---

*Long Name:* Aorta Device - Unique Device Identifier #15 *SeqNo:* 5820  
*Short Name:* **ADevUDI15** *Core:* Yes  
*Section Name:* Aorta And Aortic Root Procedures *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the Unique Device Identifier (UDI) of aorta device #15 if available, otherwise leave blank. Note that the UDI is not the same as the serial number.

*Data Source:* User *Format:* Text

*ParentShortName:* ADevLoc15

*ParentLongName:* Aorta Device - Location #15

*ParentHarvestCodes:* <>1 And Is Not Missing

*ParentValues:* Is Not "No additional devices inserted" And Is Not Missing

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*Long Name:* Other Card-Congenital Diagnosis 1 *SeqNo:* 6500  
*Short Name:* **OCarCongDiag1** *Core:* Yes  
*Section Name:* Congenital Defect Repair *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the first of the three most significant congenital diagnoses.

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

ParentShortName: OCarCong

ParentLongName: Other Cardiac Congenital Except Unicuspid, Bicuspid, or Quadricuspid Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
10	PFO	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).
20	ASD, Secundum	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.
30	ASD, Sinus venosus	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.
40	ASD, Coronary sinus	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.
50	ASD, Common atrium (single atrium)	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.
2150	ASD, Postoperative interatrial communication	A surgically created communication between the atria.
71	VSD, Type 1 (Subarterial) (Supracristal) (Conal septal defect) (Infundibular)	A VSD that lies beneath the semilunar valve(s) in the conal or outlet septum.
73	VSD, Type 2 (Perimembranous) (Paramembranous)	A VSD that is confluent with and involves the membranous septum and is bordered by an atrioventricular valve, not including type 3 VSDs.

	(Conoventricular)	
75	VSD, Type 3 (Inlet) (AV canal type)	A VSD that involves the inlet of the right ventricular septum immediately inferior to the AV valve apparatus.
77	VSD, Type 4 (Muscular)	A VSD completely surrounded by muscle.
79	VSD, Type: Gerbode type (LV-RA communication)	A rare form of VSD in which the defect is at the membranous septum; the communication is between the left ventricle and right atrium.
80	VSD, Multiple	More than one VSD exists. Each individual VSD may be coded separately to specify the individual VSD types.
100	AVC (AVSD), Complete (CAVSD)	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.
110	AVC (AVSD), Intermediate (transitional)	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.
120	AVC (AVSD), Partial (incomplete) (PAVSD) (ASD, primum)	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

140	AP window (aortopulmonary window)	malformation of the left AV valve leading to varying degrees of left AV valve regurgitation. No VSD is present. 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.)
150	Pulmonary artery origin from ascending aorta (hemitruncus)	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.
160	Truncus arteriosus	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.
170	Truncal valve insufficiency	Functional abnormality - insufficiency - of the truncal valve. May be further subdivided into grade of insufficiency (I, II, III, IV or mild, moderate, severe).
2470	Truncal valve stenosis	



2010	Truncus arteriosus + Interrupted aortic arch	Indicate if the patient has the diagnosis of “Truncus arteriosus + Interrupted aortic arch”. {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. 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. If in such case there is no ventricular septal defect, then the left ventricle and mitral valve may be extremely hypoplastic.} {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.}
180	Partial anomalous pulmonary venous connection (PAPVC)	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).
190	Partial anomalous pulmonary venous connection (PAPVC), scimitar	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.
200	Total anomalous pulmonary venous connection (TAPVC), Type 1 (supracardiac)	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.
210	Total anomalous pulmonary venous connection (TAPVC), Type 2 (cardiac)	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.
220	Total anomalous pulmonary venous connection (TAPVC), Type 3 (infracardiac)	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.
230	Total anomalous pulmonary venous connection (TAPVC), Type 4 (mixed)	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.
250	Cor triatriatum	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 supralvalvar 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 supralvalvar 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.
260	Pulmonary venous stenosis	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).
2480	Pulmonary venous stenosis, Acquired	
2490	Pulmonary venous stenosis, Spontaneous	
270	Systemic venous anomaly	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.
280	Systemic venous obstruction	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

	<p>producing obstruction of the IVC and tricuspid valve) is to be coded as a systemic venous obstruction, not as a form of cor triatriatum.</p>
290 TOF	<p>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.")</p>
2140 TOF, Pulmonary stenosis	<p>Indicate if the patient has the diagnosis of “TOF, Pulmonary stenosis”. Use this diagnosis if the patient has tetralogy of Fallot and pulmonary stenosis. Do not use this diagnosis if the patient has tetralogy of Fallot and pulmonary atresia. Do not use this diagnosis if the patient has tetralogy of Fallot and absent pulmonary valve. Do not use this diagnosis if the patient has tetralogy of Fallot and atrioventricular canal. {Tetralogy of Fallot 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</p>

- 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.")}
- 300 TOF, AVC (AVSD) 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.
- 310 TOF, Absent pulmonary valve 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.)
- 320 Pulmonary atresia 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.
- 330 Pulmonary atresia, IVS 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.
- 340 Pulmonary atresia, VSD (Including TOF, PA) 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.
- 350 Pulmonary atresia, VSD-MAPCA 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)

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		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.
360	MAPCA(s) (major aortopulmonary collateral[s]) (without PA-VSD)	Rarely MAPCA(s) may occur in patients 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.
370	Ebstein's anomaly	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”.)
380	Tricuspid regurgitation, non-Ebstein's related	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).
390	Tricuspid stenosis	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).
400	Tricuspid regurgitation and tricuspid stenosis	Tricuspid regurgitation present with tricuspid stenosis may be due to congenital factors or acquired.
410	Tricuspid valve, Other	Tricuspid valve pathology not otherwise specified in diagnosis definitions 370, 380, 390 and 400.
420	Pulmonary stenosis, Valvar	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.
430	Pulmonary artery stenosis (hypoplasia), Main (trunk)	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 supra-valvar pulmonary stenosis.
440	Pulmonary artery stenosis, Branch, Central (within the hilar bifurcation)	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.
450	Pulmonary artery stenosis, Branch, Peripheral (at or beyond the hilar bifurcation)	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.
470	Pulmonary artery, Discontinuous	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.
490	Pulmonary stenosis, Subvalvar	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.
500	DCRV	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.
510	Pulmonary valve, Other	Other anomalies of the pulmonary valve may be listed here including but not restricted to absent pulmonary valve.
530	Pulmonary insufficiency	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.).
540	Pulmonary insufficiency and pulmonary stenosis	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 supra-valvar stenosis.
2130	Shunt failure	Indicate if the patient has the diagnosis of “Shunt failure”. This diagnostic subgroup includes failure of any of a variety of shunts (“Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)”, “Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery)”, “Shunt, Systemic to pulmonary, Other”, and “Sano Shunt”), secondary to any of the following etiologies: shunt thrombosis, shunt occlusion, shunt stenosis, shunt obstruction, and shunt outgrowth. This diagnosis (“Shunt failure”) would be the primary diagnosis in a patient with, for example, “Hypoplastic left heart syndrome (HLHS)” who underwent a “Norwood procedure” with a “Modified Blalock-Taussig Shunt” and now requires reoperation for thrombosis of the “Modified Blalock-Taussig Shunt”. The underlying or fundamental diagnosis in this patient is “Hypoplastic left heart syndrome (HLHS)”, but the primary diagnosis for the operation to be performed to treat the thrombosis of the “Modified Blalock-Taussig Shunt” would be “Shunt failure”.
		Please note that the choice “2130 Shunt failure” does not include “520 Conduit failure”.
520	Conduit failure	Indicate if the patient has the diagnosis of “Conduit failure”.



This diagnostic subgroup includes failure of any of a variety of conduits (ventricular [right or left]-to-PA conduits, as well as a variety of other types of conduits [ventricular {right or left}-to-aorta, RA-to-RV, etc.]), secondary to any of the following etiologies: conduit outgrowth, obstruction, stenosis, insufficiency, or insufficiency and stenosis. This diagnosis (“Conduit failure”) would be the primary diagnosis in a patient with, for example, “Truncus arteriosus” repaired in infancy who years later is hospitalized because of conduit stenosis/insufficiency. The underlying or fundamental diagnosis in this patient is “Truncus arteriosus”, but the primary diagnosis for the operation to be performed during the hospitalization (in this case, “Conduit reoperation”) would be “Conduit failure”.

Please note that the choice “520 Conduit failure” does not include “2130 Shunt failure”.

550 Aortic stenosis, Subvalvar

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 supra-valvar 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.

2500 Aortic Stenosis, Subvalvar,  
Discrete

2510 Aortic Stenosis, Subvalvar,  
IHSS

2520 Aortic Stenosis, Subvalvar,  
Tunnel-like

560 Aortic stenosis, Valvar

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 raphe 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.
- 570 Aortic stenosis, Supravalvar 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 neo-aortic 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.
- 590 Aortic valve atresia 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.
- 600 Aortic insufficiency 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.
- 610 Aortic insufficiency and aortic stenosis 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.
- 620 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.
- 630 Sinus of Valsalva aneurysm 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

- 640 LV to aorta tunnel
- Valsalva; when present in multiple form they are more appropriately classified as aneurysms of the aortic root. 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.
- 650 Mitral stenosis, Supravalvar mitral ring
- 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.
- 660 Mitral stenosis, Valvar
- 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.
- 670 Mitral stenosis, Subvalvar
- 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.
680	Mitral stenosis, Subvalvar, Parachute	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, supra-valvar 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.
695	Mitral stenosis	Stenotic lesions of the mitral valve not otherwise specified in the diagnosis definitions 650, 660, 670, and 680.
700	Mitral regurgitation and mitral stenosis	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.
710	Mitral regurgitation	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.
720	Mitral valve, Other	Mitral valve pathology not otherwise coded in diagnosis definitions 650 through 710.
730	Hypoplastic left heart syndrome (HLHS)	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.
- 2080 Shone's syndrome
- 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) supralvalvar 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", supralvalvar 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.
- 740 Cardiomyopathy (including dilated, restrictive, and hypertrophic)
- 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.
- 750 Cardiomyopathy, End-stage congenital heart disease
- 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.

760	Pericardial effusion	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).
770	Pericarditis	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.
780	Pericardial disease, Other	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.
790	Single ventricle, DILV	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

- 800 Single ventricle, DIRV
- Young, Volume 16, Supplement 1: 9 - 21, February 2006.  
A congenital cardiac malformation in which both atria connect to a single, morphologically right ventricle
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- 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.
- 810 Single ventricle, Mitral atresia
- A congenital cardiac malformation in which there is no orifice of mitral valve
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- 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



## 820 Single ventricle, Tricuspid atresia

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.

A congenital cardiac malformation in which there is no orifice of tricuspid valve.

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- 830 Single ventricle, Unbalanced AV canal
- 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 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.
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- 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".
- 840 Single ventricle, Heterotaxia 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".

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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.

850 Single ventricle, Other

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.

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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".

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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.

851 Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)

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.

870 Congenitally corrected TGA

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.

872 Congenitally corrected TGA, IVS

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

- 874 Congenitally corrected TGA, IVS-LVOTO
- their Patients, Jacobs JP, Wernovsky G, Gaynor JW, and Anderson RH (editors). *Cardiology in the Young*, Volume 16 (Supplement 3): 72-84, September 2006.)
- 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.)
- 876 Congenitally corrected TGA, VSD
- 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.)
- 878 Congenitally corrected TGA, VSD-LVOTO
- 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.)
- 880 TGA, IVS  
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).
- 890 TGA, IVS-LVOTO  
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).
- 900 TGA, VSD  
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).
- 910 TGA, VSD-LVOTO  
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).
- 930 DORV, VSD type 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
- 940 DORV, TOF type 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.
- 950 DORV, TGA type 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.
960	DORV, Remote VSD (uncommitted VSD)	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.
2030	DORV + AVSD (AV Canal)	Indicate if the patient has the diagnosis of "DORV + AVSD (AV Canal)". In the event of DORV occurring in association with AVSD (AV Canal), code "DORV + AVSD (AV Canal)", and then use additional (secondary) diagnostic codes to describe the DORV and the AVSD (AV Canal) separately to provide further documentation about the DORV and AVSD (AV Canal) types. {"DORV" is "Double outlet right ventricle" and is defined as a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle.} In this case, the DORV exists in combination with an atrioventricular septal defect and common atrioventricular junction guarded by a common atrioventricular valve.
975	DORV, IVS	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.
980	DOLV	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.
990	Coarctation of aorta	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.
1000	Aortic arch hypoplasia	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.
92	VSD + Aortic arch hypoplasia	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.)
94	VSD + Coarctation of aorta	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.}
1010	Coronary artery anomaly, Anomalous aortic origin of coronary artery (AAOCA)	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.
1020	Coronary artery anomaly, Anomalous pulmonary origin (includes ALCAPA)	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.
1030	Coronary artery anomaly, Fistula	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.
1040	Coronary artery anomaly, Aneurysm	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.
2420	Coronary artery anomaly, Ostial Atresia	
1050	Coronary artery anomaly, Other	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).
1070	Interrupted aortic arch	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.
2020	Interrupted aortic arch + VSD	Indicate if the patient has the diagnosis of "Interrupted aortic arch + VSD". In the event of interrupted aortic arch occurring in association with VSD, code "Interrupted aortic arch + VSD", and then use additional (secondary) diagnostic codes to

<p>2000 Interrupted aortic arch + AP window (aortopulmonary window)</p>	<p>describe the interrupted aortic arch and the VSD separately to provide further documentation about the individual interrupted aortic arch and VSD types. {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.} {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.)}</p> <p>Indicate if the patient has the diagnosis of "Interrupted aortic arch + AP window (aortopulmonary window)". In the event of interrupted aortic arch occurring in association with AP window, code "Interrupted aortic arch + AP window (aortopulmonary window)", and then use additional (secondary) diagnostic codes to describe the interrupted aortic arch and the AP window separately to provide further documentation about the individual interrupted aortic arch and AP window types. {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.} {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</p>
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- 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.)}
- 1080 Patent ductus arteriosus 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.)
- 1090 Vascular ring 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).
- 1100 Pulmonary artery sling 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.
- 1110 Aortic aneurysm (including pseudoaneurysm) 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.
- 1120 Aortic dissection 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).
1130	Lung disease, Benign	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.
1140	Lung disease, Malignant	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.
1160	Tracheal stenosis	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).
2430	Tracheomalacia	
1170	Airway disease, Other	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.
1430	Pleural disease, Benign	Benign diseases of the mediastinal or visceral pleura.
1440	Pleural disease, Malignant	Malignant diseases of the mediastinal or visceral pleura.
1450	Pneumothorax	A collection of air or gas in the pleural space.
1460	Pleural effusion	Abnormal accumulation of fluid in the pleural space.
1470	Chylothorax	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.
1480	Empyema	A collection of purulent material in the pleural space, usually secondary to an infection.
1490	Esophageal disease, Benign	Any benign disease of the esophagus.
1500	Esophageal disease, Malignant	Any malignant disease of the esophagus.
1505	Mediastinal disease	Any disease of the mediastinum awaiting final benign/malignant pathology determination.
1510	Mediastinal disease, Benign	Any benign disease of the mediastinum.
1520	Mediastinal disease, Malignant	Any malignant disease of the mediastinum.
1540	Diaphragm paralysis	Paralysis of diaphragm, unilateral or bilateral.
1550	Diaphragm disease, Other	Any disease of the diaphragm other than paralysis.
2160	Rib tumor, Benign	Non-cancerous tumor of rib(s) (e.g., fibrous dysplasia)
2170	Rib tumor, Malignant	Cancerous tumor of rib(s)- primary (e.g., osteosarcoma, chondrosarcoma)
2180	Rib tumor, Metastatic	Cancerous tumor metastasized to rib(s) from a different primary location
2190	Sternal tumor, Benign	Non-cancerous tumor of sternum (e.g., fibrous dysplasia)
2200	Sternal tumor, Malignant	Cancerous tumor of sternum - primary (e.g., osteosarcoma, chondrosarcoma)
2210	Sternal tumor, Metastatic	Cancerous tumor metastasized to sternum from a different primary location
2220	Pectus carinatum	Pectus carinatum represents a spectrum of protrusion abnormalities of the anterior chest wall. Severe deformity may result in dyspnea and decreased endurance. Some patients

		develop rigidity of the chest wall with decreased lung compliance, progressive emphysema, and increased frequency of respiratory tract infections.
2230	Pectus excavatum	Pectus excavatum is a congenital chest wall deformity in which several ribs and the sternum grow abnormally, producing a concave, or caved-in, appearance in the anterior chest wall. Pectus excavatum is the most common type of congenital chest wall abnormality. It occurs in an estimated 1 in 300-400 births, with male predominance (male-to-female ratio of 3:1). The condition is typically noticed at birth, and more than 90% of cases are diagnosed within the first year of life. Worsening of the chest's appearance and the onset of respiratory symptoms are usually reported during rapid bone growth in the early teenage years.
2240	Thoracic outlet syndrome	Thoracic outlet syndrome (TOS) is caused by compression at the superior thoracic outlet wherein excess pressure is placed on a neurovascular bundle passing between the anterior scalene and middle scalene muscles. It can affect the brachial plexus (nerves that pass into the arm from the neck), the subclavian artery, and - rarely - the vein, which does not normally pass through the scalene hiatus. TOS may occur due to a positional cause - for example, by abnormal compression from the clavicle (collarbone) and shoulder girdle on arm movement. There are also several static forms, caused by abnormalities, enlargement, or spasm of the various muscles surrounding the arteries, veins, and/or brachial plexus, a fixation of a first rib, or a cervical rib. The most common causes of thoracic outlet syndrome include physical trauma from a car accident, repetitive injuries from a job such as frequent non-ergonomic use of a keyboard, sports-related activities, anatomical defects such as having an extra rib, and pregnancy.
1180	Arrhythmia	Any cardiac rhythm other than normal sinus rhythm.
2440	Arrhythmia, Atrial, Atrial fibrillation	
2450	Arrhythmia, Atrial, Atrial flutter	
2460	Arrhythmia, Atrial, Other	
2050	Arrhythmia, Junctional	Indicate if the patient has the diagnosis of "Arrhythmia, Junctional". "Arrhythmias arising from the atrioventricular junction; may be bradycardia, tachycardia, premature beats, or escape rhythm [1]. [1]. Jacobs JP. (Editor). 2008 Supplement to Cardiology in the Young: Databases and The Assessment of Complications associated with The Treatment of Patients with Congenital Cardiac Disease, Prepared by: The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease, Cardiology in the Young, Volume 18, Supplement S2, pages 1 -530, December 9, 2008, page 379.
2060	Arrhythmia, Ventricular	Indicate if the patient has the diagnosis of "Arrhythmia, Ventricular". "Arrhythmia, Ventricular" ROOT Definition = Abnormal rhythm originating from the ventricles [1]. [1]. Jacobs JP. (Editor). 2008 Supplement to Cardiology in the Young: Databases and The Assessment of Complications

		associated with The Treatment of Patients with Congenital Cardiac Disease, Prepared by: The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease, Cardiology in the Young, Volume 18, Supplement S2, pages 1–530, December 9, 2008, page 393.
1185	Arrhythmia, Heart block	Atrioventricular block may be congenital or acquired, and may be of varying degree (first, second, or third degree).
1190	Arrhythmia, Heart block, Acquired	Atrioventricular block, when acquired, may be post-surgical, or secondary to myocarditis or other etiologies; the block may be first, second or third degree.
1200	Arrhythmia, Heart block, Congenital	Atrioventricular block, when congenital, may be first, second or third degree block.
1220	Arrhythmia, Pacemaker, Indication for replacement	Indications for pacemaker replacement may include end of generator life, malfunction, or infection.
2530	Short QT syndrome	
2540	Long QT Syndrome (Ward Romano syndrome)	
2550	Wolff-Parkinson-White syndrome (WPW syndrome)	
1230	Atrial Isomerism, Left	In isomerism, both appendages are of like morphology or structure; in left atrial isomerism both the right atrium and left atrium appear to be a left atrium structurally.
1240	Atrial Isomerism, Right	In isomerism, both appendages are of like morphology or structure; in right atrial isomerism both the right atrium and left atrium appear to be a right atrium structurally.
2090	Dextrocardia	Indicate if the patient has the diagnosis of “Dextrocardia”. “Dextrocardia” is most usually considered synonymous with a right-sided ventricular mass, whilst “dextroversion” is frequently defined as a configuration where the ventricular apex points to the right. In a patient with the usual atrial arrangement, or situs solitus, dextroversion, therefore, implies a turning to the right of the heart [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
2100	Levocardia	Indicate if the patient has the diagnosis of “Levocardia”. “Levocardia” usually considered synonymous with a left-sided ventricular mass, whilst “levoversion” is frequently defined as a configuration where the ventricular apex points to the left [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to Cardiology in the



- Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. *Cardiology in the Young*, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 2110 Mesocardia  
Indicate if the patient has the diagnosis of “Mesocardia”. “Mesocardia” is most usually considered synonymous with the ventricular mass occupying the midline [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to *Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients*, Anderson RH, Jacobs JP, and Wernovsky G, editors. *Cardiology in the Young*, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 2120 Situs inversus  
Indicate if the patient has the diagnosis of “Situs inversus” of the atrial chambers. The development of morphologically right-sided structures on one side of the body, and morphologically left-sided structures on the other side, is termed lateralization. Normal lateralization, the usual arrangement, is also known as “situs solitus”. The mirror-imaged arrangement is also known as “situs inversus”. The term “visceroatrial situs” is often used to refer to the situs of the viscera and atria when their situs is in agreement. The arrangement of the organs themselves, and the arrangement of the atrial chambers, is not always the same. Should such disharmony be encountered, the sidedness of the organs and atrial chambers must be separately specified [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to *Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients*, Anderson RH, Jacobs JP, and Wernovsky G, editors. *Cardiology in the Young*, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 1250 Aneurysm, Ventricular, Right (including pseudoaneurysm)  
An aneurysm of the right ventricle is defined as a localized dilation or enlargement of the right ventricular wall.
- 1260 Aneurysm, Ventricular, Left (including pseudoaneurysm)  
An aneurysm of the left ventricle is defined as a localized dilation or enlargement of the left ventricular wall.
- 1270 Aneurysm, Pulmonary artery  
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).
- 1280 Aneurysm, Other  
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.
1290	Hypoplastic RV	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.
1300	Hypoplastic LV	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.
2070	Postoperative bleeding	Indicate if the patient has the diagnosis of "Postoperative bleeding".
1310	Mediastinitis	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.
1320	Endocarditis	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.
1325	Rheumatic heart disease	Heart disease, usually valvar (e.g., mitral or aortic), following an infection with group A streptococci
1330	Prosthetic valve failure	Indicate if the patient has the diagnosis of "Prosthetic valve failure". This diagnosis is the primary diagnosis to be entered for patients undergoing replacement of a previously placed valve (not conduit) prosthesis, whatever type (e.g., bioprosthetic, mechanical, etc.). Failure may be due to, among others, patient somatic growth, malfunction of the prosthesis, or calcification or overgrowth of the prosthesis (e.g., pannus formation). Secondary or fundamental diagnosis would relate to the underlying valve disease entity. As an example, a patient undergoing removal or replacement of a prosthetic pulmonary valve previously placed for pulmonary insufficiency after repair of tetralogy of Fallot would have as a primary diagnosis "Prosthetic valve failure", as a secondary diagnosis "Pulmonary insufficiency", and as a fundamental diagnosis "Tetralogy of Fallot".
1340	Myocardial infarction	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).

1350	Cardiac tumor	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, mesothelioma, 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.
1360	Pulmonary AV fistula	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.
1370	Pulmonary embolism	A pulmonary embolus is a blockage of an artery in the lungs by fat, air, clumped tumor cells, or a blood clot.
1385	Pulmonary vascular obstructive disease	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) collagen vascular disease, or (5) drug or toxin induced, or (6) diseases of the respiratory system, or (7) chronic thromboembolic disease, among others.
1390	Pulmonary vascular obstructive disease (Eisenmenger's)	"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.
1400	Primary pulmonary hypertension	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.
1410	Persistent fetal circulation	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.
1420	Meconium aspiration	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.
2250	Kawasaki disease	Kawasaki disease, also known as Kawasaki syndrome, is an acute febrile illness of unknown etiology that primarily affects children younger than 5 years of age. It was first described in Japan in 1967, and the first cases outside of Japan were reported in Hawaii in 1976. It is characterized by fever, rash, swelling of the hands and feet, irritation and redness of the whites of the eyes, swollen lymph glands in the neck, and irritation and inflammation of the mouth, lips, and throat. Serious complications of Kawasaki disease include coronary artery dilatations and aneurysms, and Kawasaki disease is a leading cause of acquired heart disease in children in the United States. The standard treatment with intravenous immunoglobulin and aspirin substantially decreases the development of coronary artery abnormalities.
1560	Cardiac, Other	Any cardiac diagnosis not specifically delineated in other diagnostic codes.
1570	Thoracic and/or mediastinal, Other	Any thoracic and/or mediastinal disease not specifically delineated in other diagnostic codes.
1580	Peripheral vascular, Other	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.
2260	Complication of cardiovascular catheterization procedure	Unspecified complication of cardiovascular catheterization procedure
2270	Complication of cardiovascular catheterization procedure, Device embolization	Migration or movement of device introduced during a cardiac catheterization procedure to an unintended location
2280	Complication of cardiovascular catheterization procedure, Device malfunction	Malfunction of a device introduced during a cardiac catheterization procedure
2290	Complication of cardiovascular catheterization procedure, Perforation	Perforation or puncture caused by a device introduced during a cardiac catheterization procedure
2300	Complication of interventional radiology	Unspecified complication of interventional radiology procedure
2310	Complication of interventional radiology procedure, Device	Migration or movement of device introduced during an interventional radiology procedure to an unintended location
2320	Complication of	Malfunction of a device introduced during an interventional

	interventional radiology procedure, Device malfunction	radiology procedure
2330	Complication of interventional radiology procedure, Perforation	Perforation or puncture caused by a device introduced during an interventional radiology procedure
2340	Foreign body, Intracardiac foreign body	Presence of a foreign body within the heart
2350	Foreign body, Intravascular foreign body	Presence of a foreign body within an artery or vein
2360	Open sternum with closed skin	Sternotomy edges not re-approximated prior to closure of skin incision
2370	Open sternum with open skin (includes membrane placed to close skin)	Sternotomy and skin incision left open following surgery, covered with a membrane or dressing
2380	Retained sternal wire causing irritation	Surgically placed wire causing soft tissue irritation, pain or swelling (not infected)
2390	Syncope	A transient, self-limited loss of consciousness with an inability to maintain postural tone that is followed by spontaneous recovery. The term syncope excludes seizures, coma, shock, or other states of altered consciousness.
2400	Trauma, Blunt	Injury (ies) sustained from blunt force, caused by motor vehicle accidents, falls, blows or crush injuries
2410	Trauma, Penetrating	Injury (ies) sustained as a result of sharp force, including cutting or piercing instruments or objects, bites, or firearm injuries from projectiles.
2560	Cardio-respiratory failure not secondary to known structural heart disease	
2570	Myocarditis	
2580	Common AV valve insufficiency	
2590	Protein-losing enteropathy	
2600	Plastic bronchitis	
7000	Normal heart	Normal heart.
7777	Miscellaneous, Other	Any disease (congenital or acquired) not specifically delineated in other diagnostic codes.
4010	Status post - PFO, Primary closure	
4020	Status post - ASD repair, Primary closure	
4030	Status post - ASD repair, Patch	
4040	Status post - ASD repair, Device	
6110	Status post - ASD repair, Patch + PAPVC repair	
4050	Status post - ASD, Common atrium (single atrium), Septation	
4060	Status post - ASD creation/enlargement	

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- 4070 Status post - ASD partial closure
  - 4080 Status post - Atrial septal fenestration
  - 4085 Status post - Atrial fenestration closure
  - 4100 Status post - VSD repair, Primary closure
  - 4110 Status post - VSD repair, Patch
  - 4120 Status post - VSD repair, Device
  - 4130 Status post - VSD, Multiple, Repair
  - 4140 Status post - VSD creation/enlargement
  - 4150 Status post - Ventricular septal fenestration
  - 4170 Status post - AVC (AVSD) repair, Complete (CAVSD)
  - 4180 Status post - AVC (AVSD) repair, Intermediate (Transitional)
  - 4190 Status post - AVC (AVSD) repair, Partial (Incomplete) (PAVSD)
  - 6300 Status post - Valvuloplasty, Common atrioventricular valve
  - 6250 Status post - Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve
  - 6230 Status post - Valve replacement, Common atrioventricular valve
  - 4210 Status post - AP window repair
  - 4220 Status post - Pulmonary artery origin from ascending aorta (hemitruncus) repair
  - 4230 Status post - Truncus arteriosus repair
  - 4240 Status post - Valvuloplasty, Truncal valve
  - 6290 Status post - Valvuloplasty converted to valve replacement in the same operation, Truncal valve
  - 4250 Status post - Valve replacement, Truncal valve
  - 6220 Status post - Truncus +

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- Interrupted aortic arch repair (IAA) repair
  - 4260 Status post - PAPVC repair
  - 4270 Status post - PAPVC, Scimitar, Repair
  - 6120 Status post - PAPVC repair, Baffle redirection to left atrium with systemic vein translocation (Warden) (SVC sewn to right atrial appendage)
  - 4280 Status post - TAPVC repair
  - 6200 Status post - TAPVC repair + Shunt - systemic-to-pulmonary
  - 4290 Status post - Cor triatriatum repair
  - 4300 Status post - Pulmonary venous stenosis repair
  - 4310 Status post - Atrial baffle procedure (non-Mustard, non-Senning)
  - 4330 Status post - Anomalous systemic venous connection repair
  - 4340 Status post - Systemic venous stenosis repair
  - 4350 Status post - TOF repair, No ventriculotomy
  - 4360 Status post - TOF repair, Ventriculotomy, Nontransannular patch
  - 4370 Status post - TOF repair, Ventriculotomy, Transannular patch
  - 7330 Status post - TOF repair, Ventriculotomy, Transannular patch, plus native valve reconstruction
  - 7340 Status post - TOF repair, Ventriculotomy, Transannular patch, with monocusp or other surgically fashioned RVOT valve
  - 4380 Status post - TOF repair, RV-PA conduit
  - 4390 Status post - TOF - AVC (AVSD) repair
  - 4400 Status post - TOF - Absent pulmonary valve repair
  - 4420 Status post - Pulmonary atresia - VSD (including TOF, PA) repair

- 6700 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])
- 6710 Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])
- 6720 Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
- 6730 Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)
- 6740 Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)
- 6750 Status post - Unifocalization MAPCA(s), Unilateral pulmonary unifocalization
- 4440 Status post - Unifocalization MAPCA(s)
- 4450 Status post - Occlusion of MAPCA(s)
- 4460 Status post - Valvuloplasty, Tricuspid
- 6280 Status post - Valvuloplasty converted to valve replacement in the same operation, Tricuspid
- 4465 Status post - Ebstein's repair
- 4470 Status post - Valve replacement, Tricuspid (TVR)



- 4480 Status post - Valve closure, Tricuspid (exclusion, univentricular approach)
- 4490 Status post - Valve excision, Tricuspid (without replacement)
- 4500 Status post - Valve surgery, Other, Tricuspid
- 4510 Status post - RVOT procedure
- 4520 Status post - 1 1/2 ventricular repair
- 4530 Status post - PA, reconstruction (plasty), Main (trunk)
- 4540 Status post - PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation)
- 4550 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch)
- 7350 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, proximal to first segmental branch)
- 7360 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, beyond the first segmental branch)
- 4570 Status post - DCRV repair
- 7370 Status post - RV Rehabilitation, Endocardial Resection
- 4590 Status post - Valvuloplasty, Pulmonic
- 6270 Status post - Valvuloplasty converted to valve replacement in the same operation, Pulmonic
- 4600 Status post - Valve replacement, Pulmonic (PVR)
- 4630 Status post - Valve excision, Pulmonary (without replacement)
- 4640 Status post - Valve closure, Semilunar

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- 4650 Status post - Valve surgery, Other, Pulmonic
  - 4610 Status post - Conduit placement, RV to PA
  - 4620 Status post - Conduit placement, LV to PA
  - 5774 Status post - Conduit placement, Ventricle to aorta
  - 5772 Status post - Conduit placement, Other
  - 4580 Status post - Conduit reoperation
  - 4660 Status post - Valvuloplasty, Aortic
  - 6240 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic
  - 6310 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure
  - 6320 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure
  - 4670 Status post - Valve replacement, Aortic (AVR)
  - 4680 Status post - Valve replacement, Aortic (AVR), Mechanical
  - 4690 Status post - Valve replacement, Aortic (AVR), Bioprosthetic
  - 4700 Status post - Valve replacement, Aortic (AVR), Homograft
  - 4715 Status post - Aortic root replacement, Bioprosthetic
  - 4720 Status post - Aortic root replacement, Mechanical
  - 4730 Status post - Aortic root replacement, Homograft
  - 4735 Status post - Aortic root replacement, Valve sparing
  - 4740 Status post - Ross procedure
  - 4750 Status post - Konno procedure
  - 4760 Status post - Ross-Konno

- procedure
- 4770 Status post - Other annular enlargement procedure
  - 4780 Status post - Aortic stenosis, Subvalvar, Repair
  - 6100 Status post - Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS
  - 4790 Status post - Aortic stenosis, Supravalvar, Repair
  - 4800 Status post - Valve surgery, Other, Aortic
  - 7380 Status post - Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis
  - 4810 Status post - Sinus of Valsalva, Aneurysm repair
  - 4820 Status post - LV to aorta tunnel repair
  - 4830 Status post - Valvuloplasty, Mitral
  - 6260 Status post - Valvuloplasty converted to valve replacement in the same operation, Mitral
  - 4840 Status post - Mitral stenosis, Supravalvar mitral ring repair
  - 4850 Status post - Valve replacement, Mitral (MVR)
  - 4860 Status post - Valve surgery, Other, Mitral
  - 4870 Status post - Norwood procedure
  - 4880 Status post - HLHS biventricular repair
  - 7390 Status post - LV Endocardial Fibroelastosis resection
  - 6755 Status post - Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neo-aorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
  - 6160 Status post - Hybrid Approach "Stage 1", Application of

- RPA & LPA bands
- 6170 Status post - Hybrid Approach  
"Stage 1", Stent placement in  
arterial duct (PDA)
- 6180 Status post - Hybrid Approach  
"Stage 1", Stent placement in  
arterial duct (PDA) +  
application of RPA & LPA  
bands
- 6140 Status post - Hybrid approach  
"Stage 2", Aortopulmonary  
amalgamation + Superior  
Cavopulmonary  
anastomosis(es) + PA  
Debanding + Aortic arch  
repair (Norwood [Stage 1] +  
Superior Cavopulmonary  
anastomosis(es) + PA  
Debanding)
- 6150 Status post - Hybrid approach  
"Stage 2", Aortopulmonary  
amalgamation + Superior  
Cavopulmonary  
anastomosis(es) + PA  
Debanding + Without aortic  
arch repair
- 6760 Status post - Hybrid  
Approach, Transcardiac  
balloon dilation
- 6770 Status post - Hybrid  
Approach, Transcardiac  
transcatheter device placement
- 1590 Status post - Transplant, Heart
- 1610 Status post - Transplant, Heart  
and lung
- 4910 Status post - Partial left  
ventriculectomy (LV volume  
reduction surgery) (Batista)
- 4920 Status post - Pericardial  
drainage procedure
- 4930 Status post - Pericardiectomy
- 4940 Status post - Pericardial  
procedure, Other
- 4950 Status post - Fontan, Atrio-  
pulmonary connection
- 4960 Status post - Fontan, Atrio-  
ventricular connection
- 4970 Status post - Fontan, TCPC,  
Lateral tunnel, Fenestrated
- 4980 Status post - Fontan, TCPC,  
Lateral tunnel, Nonfenestrated

- 5000 Status post - Fontan, TCPC, External conduit, Fenestrated
- 5010 Status post - Fontan, TCPC, External conduit, Nonfenestrated
- 6780 Status post - Fontan, TCPC, Intra/extracardiac conduit, Fenestrated
- 6790 Status post - Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated
- 7310 Status post - Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Fenestrated
- 7320 Status post - Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Nonfenestrated
- 5025 Status post - Fontan revision or conversion (Re-do Fontan)
- 5030 Status post - Fontan, Other
- 6340 Status post - Fontan + Atrioventricular valvuloplasty
- 5035 Status post - Ventricular septation
- 5050 Status post - Congenitally corrected TGA repair, Atrial switch and ASO (double switch)
- 5060 Status post - Congenitally corrected TGA repair, Atrial switch and Rastelli
- 5070 Status post - Congenitally corrected TGA repair, VSD closure
- 5080 Status post - Congenitally corrected TGA repair, VSD closure and LV to PA conduit
- 5090 Status post - Congenitally corrected TGA repair, Other
- 5110 Status post - Arterial switch operation (ASO)
- 5120 Status post - Arterial switch operation (ASO) and VSD repair
- 5123 Status post - Arterial switch procedure + Aortic arch repair
- 5125 Status post - Arterial switch procedure and VSD repair + Aortic arch repair

- 5130 Status post - Senning
- 5140 Status post - Mustard
- 5145 Status post - Atrial baffle procedure, Mustard or Senning revision
- 5150 Status post - Rastelli
- 5160 Status post - REV
- 6190 Status post - Aortic root translocation over left ventricle (Including Nikaidoh procedure)
- 6210 Status post - TGA, Other procedures (Kawashima, LV-PA conduit, other)
- 7400 Status post - Double root translocation
- 5180 Status post - DORV, Intraventricular tunnel repair
- 7410 Status post - DORV repair, No Ventriculotomy
- 7420 Status post - DORV repair, Ventriculotomy, Nontransannular patch
- 7430 Status post - DORV repair, Ventriculotomy, Transannular patch
- 7440 Status post - DORV repair, RV-PA conduit
- 7450 Status post - DORV - AVC (AVSD) repair
- 5200 Status post - DOLV repair
- 5210 Status post - Coarctation repair, End to end
- 5220 Status post - Coarctation repair, End to end, Extended
- 7460 Status post - Coarctation repair, Descending aorta anastomosed to Ascending aorta
- 5230 Status post - Coarctation repair, Subclavian flap
- 5240 Status post - Coarctation repair, Patch aortoplasty
- 5250 Status post - Coarctation repair, Interposition graft
- 7470 Status post - Coarctation repair, Extra-anatomic Bypass graft
- 5260 Status post - Coarctation repair, Other

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- 5275 Status post - Coarctation repair + VSD repair
  - 5280 Status post - Aortic arch repair
  - 5285 Status post - Aortic arch repair + VSD repair
  - 5290 Status post - Coronary artery fistula ligation
  - 5291 Status post - Anomalous origin of coronary artery from pulmonary artery repair
  - 5300 Status post - Coronary artery bypass
  - 5305 Status post - Anomalous aortic origin of coronary artery (AAOCA) repair
  - 5310 Status post - Coronary artery procedure, Other
  - 5320 Status post - Interrupted aortic arch repair
  - 5330 Status post - PDA closure, Surgical
  - 5340 Status post - PDA closure, Device
  - 5360 Status post - Vascular ring repair
  - 5365 Status post - Aortopexy
  - 5370 Status post - Pulmonary artery sling repair
  - 5380 Status post - Aortic aneurysm repair
  - 5390 Status post - Aortic dissection repair
  - 5400 Status post - Lung biopsy
  - 1600 Status post - Transplant, Lung(s)
  - 5420 Status post - Lung procedure, Other
  - 5440 Status post - Tracheal procedure
  - 6800 Status post - Muscle flap, Trunk (i.e., intercostal, pectus, or serratus muscle)
  - 6810 Status post - Muscle flap, Trunk (i.e. latissimus dorsi)
  - 6820 Status post - Removal, Sternal wire
  - 6830 Status post - Rib excision, Complete
  - 6840 Status post - Rib excision, Partial

- 6850 Status post - Sternal fracture - open treatment
- 6860 Status post - Sternal resection, Radical resection of sternum
- 6870 Status post - Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy
- 6880 Status post - Tumor of chest wall - Excision including ribs
- 6890 Status post - Tumor of chest wall - Excision including ribs, With reconstruction
- 6900 Status post - Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor
- 6910 Status post - Tumor of soft tissue of thorax - Excision of subcutaneous tumor
- 6920 Status post - Tumor of soft tissue of thorax - Radical resection
- 6930 Status post - Hyoid myotomy and suspension
- 6940 Status post - Muscle flap,
- 6950 Status post - Procedure on neck
- 6960 Status post - Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor
- 6970 Status post - Tumor of soft tissue of neck - Excision of subcutaneous tumor
- 6980 Status post - Tumor of soft tissue of neck - Radical resection
- 6990 Status post - Pectus bar removal
- 7005 Status post - Pectus bar repositioning
- 7010 Status post - Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy
- 7020 Status post - Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy
- 7030 Status post - Pectus repair, Open repair
- 7040 Status post - Division of



- scalenus anticus, With  
resection of a cervical rib
- 7050 Status post - Division of  
scalenus anticus, Without  
resection of a cervical rib
- 7060 Status post - Rib excision,  
Excision of cervical rib
- 7070 Status post - Rib excision,  
Excision of cervical rib, With  
sympathectomy
- 7080 Status post - Rib excision,  
Excision of first rib
- 7090 Status post - Rib excision,  
Excision of first rib, With  
sympathectomy
- 7100 Status post - Procedure on  
thorax
- 5450 Status post - Pacemaker  
implantation, Permanent
- 5460 Status post - Pacemaker  
procedure
- 6350 Status post - Explantation of  
pacing system
- 5470 Status post - ICD (AICD)  
implantation
- 5480 Status post - ICD (AICD)  
([automatic] implantable  
cardioverter defibrillator)  
procedure
- 5490 Status post - Arrhythmia  
surgery - atrial, Surgical  
Ablation
- 5500 Status post - Arrhythmia  
surgery - ventricular, Surgical  
Ablation
- 6500 Status post - Cardiovascular  
catheterization procedure,  
Diagnostic
- 6520 Status post - Cardiovascular  
catheterization procedure,  
Diagnostic, Angiographic data  
obtained
- 6550 Status post - Cardiovascular  
catheterization procedure,  
Diagnostic, Electrophysiology  
alteration
- 6540 Status post - Cardiovascular  
catheterization procedure,  
Diagnostic, Hemodynamic  
alteration
- 6510 Status post - Cardiovascular

- catheterization procedure,  
Diagnostic, Hemodynamic  
data obtained
- 6530 Status post - Cardiovascular  
catheterization procedure,  
Diagnostic, Transluminal test  
occlusion
- 6410 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic
- 6670 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Adjunctive  
therapy
- 6570 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Balloon dilation
- 6590 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Balloon  
valvotomy
- 6600 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Coil implantation
- 6610 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Device  
implantation
- 7110 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Device  
implantation attempted
- 6690 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic,  
Electrophysiological ablation
- 7120 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Intravascular  
foreign body removal
- 6640 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Perforation  
(establishing interchamber  
and/or intervessel  
communication)
- 6580 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Septostomy
- 6620 Status post - Cardiovascular  
catheterization procedure,  
Therapeutic, Stent insertion

- 6630 Status post - Cardiovascular catheterization procedure, Therapeutic, Stent re-dilation
- 6650 Status post - Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion
- 6660 Status post - Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve
- 5590 Status post - Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)
- 5600 Status post - Shunt, Systemic to pulmonary, Central (shunt from aorta)
- 7130 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)
- 7230 Status post - Shunt, Systemic to pulmonary, Potts - Smith type (descending aorta to pulmonary artery)
- 5610 Status post - Shunt, Systemic to pulmonary, Other
- 5630 Status post - Shunt, Ligation and takedown
- 6095 Status post - Shunt, Reoperation
- 5640 Status post - PA banding (PAB)
- 5650 Status post - PA debanding
- 7200 Status post - PA band adjustment
- 5660 Status post - Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction)
- 5670 Status post - Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)
- 5680 Status post - Glenn

- (unidirectional  
cavopulmonary anastomosis)  
(unidirectional Glenn)
- 5690 Status post - Bilateral  
bidirectional cavopulmonary  
anastomosis (BBDCPA)  
(bilateral bidirectional Glenn)
- 5700 Status post - HemiFontan
- 6330 Status post - Superior  
cavopulmonary  
anastomosis(es) (Glenn or  
HemiFontan) +  
Atrioventricular valvuloplasty
- 6130 Status post - Superior  
Cavopulmonary  
anastomosis(es) + PA  
reconstruction
- 7300 Status post - Takedown of  
superior cavopulmonary  
anastomosis
- 7140 Status post - Hepatic vein to  
azygous vein connection,  
Direct
- 7150 Status post - Hepatic vein to  
azygous vein connection,  
Interposition graft
- 7160 Status post - Kawashima  
operation (superior  
cavopulmonary connection in  
setting of interrupted IVC  
with azygous continuation)
- 5710 Status post - Palliation, Other
- 6360 Status post - ECMO  
cannulation
- 6370 Status post - ECMO  
decannulation
- 5910 Status post - ECMO procedure
- 5900 Status post - Intraaortic  
balloon pump (IABP) insertion
- 5920 Status post - Right/left heart  
assist device procedure
- 6390 Status post - VAD explantation
- 6380 Status post - VAD  
implantation
- 7170 Status post - VAD change out
- 6420 Status post -  
Echocardiography procedure,  
Sedated transesophageal  
echocardiogram
- 6430 Status post -  
Echocardiography procedure,

- Sedated transthoracic echocardiogram
- 6435 Status post - Non-cardiovascular, Non-thoracic procedure on cardiac patient with cardiac anesthesia
- 6440 Status post - Radiology procedure on cardiac patient, Cardiac Computerized Axial Tomography (CT Scan)
- 6450 Status post - Radiology procedure on cardiac patient, Cardiac Magnetic Resonance Imaging (MRI)
- 6460 Status post - Radiology procedure on cardiac patient, Diagnostic radiology
- 6470 Status post - Radiology procedure on cardiac patient, Non-Cardiac Computerized Tomography (CT) on cardiac patient
- 6480 Status post - Radiology procedure on cardiac patient, Non-cardiac Magnetic Resonance Imaging (MRI) on cardiac patient
- 6490 Status post - Radiology procedure on cardiac patient, Therapeutic radiology
- 5720 Status post - Aneurysm, Ventricular, Right, Repair
- 5730 Status post - Aneurysm, Ventricular, Left, Repair
- 5740 Status post - Aneurysm, Pulmonary artery, Repair
- 5760 Status post - Cardiac tumor resection
- 5780 Status post - Pulmonary AV fistula repair/occlusion
- 5790 Status post - Ligation, Pulmonary artery
- 5802 Status post - Pulmonary embolectomy, Acute pulmonary embolus
- 5804 Status post - Pulmonary embolectomy, Chronic pulmonary embolus
- 5810 Status post - Pleural drainage procedure
- 5820 Status post - Pleural

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	procedure, Other
5830	Status post - Ligation, Thoracic duct
5840	Status post - Decortication
5850	Status post - Esophageal procedure
5860	Status post - Mediastinal procedure
5870	Status post - Bronchoscopy
5880	Status post - Diaphragm plication
5890	Status post - Diaphragm procedure, Other
5930	Status post - VATS (video- assisted thoracoscopic surgery)
5940	Status post - Minimally invasive procedure
5950	Status post - Bypass for noncardiac lesion
5960	Status post - Delayed sternal closure
5970	Status post - Mediastinal exploration
5980	Status post - Sternotomy wound drainage
7180	Status post - Intravascular stent removal
7220	Status post - Removal of transcatheter delivered device from heart
7210	Status post - Removal of transcatheter delivered device from blood vessel
5990	Status post - Thoracotomy, Other
6000	Status post - Cardiotomy, Other
6010	Status post - Cardiac procedure, Other
6020	Status post - Thoracic and/or mediastinal procedure, Other
6030	Status post - Peripheral vascular procedure, Other
6040	Status post - Miscellaneous procedure, Other
11777	Status post - Other procedure

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*Long Name:* Other Card-Congenital Diagnosis 2 *SeqNo:* 6505  
*Short Name:* **OCarCongDiag2** *Core:* Yes  
*Section Name:* Congenital Defect Repair *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the second of the three most significant congenital diagnoses.

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

ParentShortName: OCarCong

ParentLongName: Other Cardiac Congenital Except Unicuspid, Bicuspid, or Quadricuspid Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	No other congenital diagnoses	
10	PFO	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).
20	ASD, Secundum	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.
30	ASD, Sinus venosus	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.
40	ASD, Coronary sinus	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.
50	ASD, Common atrium (single atrium)	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.
2150	ASD, Postoperative interatrial communication	A surgically created communication between the atria.
71	VSD, Type 1 (Subarterial) (Supracristal) (Conal septal defect) (Infundibular)	A VSD that lies beneath the semilunar valve(s) in the conal or outlet septum.
73	VSD, Type 2 (Perimembranous)	A VSD that is confluent with and involves the membranous septum and is bordered by an atrioventricular valve, not

	(Paramembranous) (Conoventricular)	including type 3 VSDs.
75	VSD, Type 3 (Inlet) (AV canal type)	A VSD that involves the inlet of the right ventricular septum immediately inferior to the AV valve apparatus.
77	VSD, Type 4 (Muscular)	A VSD completely surrounded by muscle.
79	VSD, Type: Gerbode type (LV-RA communication)	A rare form of VSD in which the defect is at the membranous septum; the communication is between the left ventricle and right atrium.
80	VSD, Multiple	More than one VSD exists. Each individual VSD may be coded separately to specify the individual VSD types.
100	AVC (AVSD), Complete (CAVSD)	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.
110	AVC (AVSD), Intermediate (transitional)	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.
120	AVC (AVSD), Partial (incomplete) (PAVSD) (ASD,	An AVC with an ostium primum ASD (a usually crescent-shaped ASD in the inferior (posterior) portion of the atrial



	primum)	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.
140	AP window (aortopulmonary window)	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.)
150	Pulmonary artery origin from ascending aorta (hemitruncus)	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.
160	Truncus arteriosus	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.
170	Truncal valve insufficiency	Functional abnormality - insufficiency - of the truncal valve. May be further subdivided into grade of insufficiency (I, II, III, IV or mild, moderate, severe).

2470	Truncal valve stenosis	
2010	Truncus arteriosus + Interrupted aortic arch	Indicate if the patient has the diagnosis of “Truncus arteriosus + Interrupted aortic arch”. {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. 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. If in such case there is no ventricular septal defect, then the left ventricle and mitral valve may be extremely hypoplastic.} {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.}
180	Partial anomalous pulmonary venous connection (PAPVC)	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).
190	Partial anomalous pulmonary venous connection (PAPVC), scimitar	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.
200	Total anomalous pulmonary venous connection (TAPVC), Type 1 (supracardiac)	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.
210	Total anomalous pulmonary venous connection (TAPVC), Type 2 (cardiac)	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.
220	Total anomalous pulmonary venous connection (TAPVC), Type 3 (infracardiac)	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.
230	Total anomalous pulmonary venous connection (TAPVC), Type 4 (mixed)	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.
250	Cor triatriatum	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 supralvalvar 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 supralvalvar 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.
260	Pulmonary venous stenosis	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).
2480	Pulmonary venous stenosis, Acquired	
2490	Pulmonary venous stenosis, Spontaneous	
270	Systemic venous anomaly	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.
280	Systemic venous obstruction	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

	<p>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.</p>
290 TOF	<p>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.")</p>
2140 TOF, Pulmonary stenosis	<p>Indicate if the patient has the diagnosis of “TOF, Pulmonary stenosis”. Use this diagnosis if the patient has tetralogy of Fallot and pulmonary stenosis. Do not use this diagnosis if the patient has tetralogy of Fallot and pulmonary atresia. Do not use this diagnosis if the patient has tetralogy of Fallot and absent pulmonary valve. Do not use this diagnosis if the patient has tetralogy of Fallot and atrioventricular canal. {Tetralogy of Fallot 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,</p>

- 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.")}
- 300 TOF, AVC (AVSD) 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.
- 310 TOF, Absent pulmonary valve 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.)
- 320 Pulmonary atresia 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.
- 330 Pulmonary atresia, IVS 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.
- 340 Pulmonary atresia, VSD (Including TOF, PA) 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.
- 350 Pulmonary atresia, VSD-MAPCA 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.
360	MAPCA(s) (major aortopulmonary collateral[s]) (without PA-VSD)	Rarely MAPCA(s) may occur in patients 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.
370	Ebstein's anomaly	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”.)
380	Tricuspid regurgitation, non-Ebstein's related	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).
390	Tricuspid stenosis	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).
400	Tricuspid regurgitation and tricuspid stenosis	Tricuspid regurgitation present with tricuspid stenosis may be due to congenital factors or acquired.
410	Tricuspid valve, Other	Tricuspid valve pathology not otherwise specified in diagnosis definitions 370, 380, 390 and 400.
420	Pulmonary stenosis, Valvar	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.
430	Pulmonary artery stenosis (hypoplasia), Main (trunk)	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 supra-valvar pulmonary stenosis.
440	Pulmonary artery stenosis, Branch, Central (within the hilar bifurcation)	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.
450	Pulmonary artery stenosis, Branch, Peripheral (at or beyond the hilar bifurcation)	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.
470	Pulmonary artery, Discontinuous	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.
490	Pulmonary stenosis, Subvalvar	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.
500	DCRV	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.
510	Pulmonary valve, Other	Other anomalies of the pulmonary valve may be listed here including but not restricted to absent pulmonary valve.
530	Pulmonary insufficiency	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.).
540	Pulmonary insufficiency and pulmonary stenosis	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 supra-valvar stenosis.
2130	Shunt failure	Indicate if the patient has the diagnosis of “Shunt failure”. This diagnostic subgroup includes failure of any of a variety of shunts (“Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)”, “Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery)”, “Shunt, Systemic to pulmonary, Other”, and “Sano Shunt”), secondary to any of the following etiologies: shunt thrombosis, shunt occlusion, shunt stenosis, shunt obstruction, and shunt outgrowth. This diagnosis (“Shunt failure”) would be the primary diagnosis in a patient with, for example, “Hypoplastic left heart syndrome (HLHS)” who underwent a “Norwood procedure” with a “Modified Blalock-Taussig Shunt” and now requires reoperation for thrombosis of the “Modified Blalock-Taussig Shunt”. The underlying or fundamental diagnosis in this patient is “Hypoplastic left heart syndrome (HLHS)”, but the primary diagnosis for the operation to be performed to treat the thrombosis of the “Modified Blalock-Taussig Shunt” would be “Shunt failure”.

Please note that the choice “2130 Shunt failure” does not include “520 Conduit failure”.

520	Conduit failure	<p>Indicate if the patient has the diagnosis of “Conduit failure”. This diagnostic subgroup includes failure of any of a variety of conduits (ventricular [right or left]-to-PA conduits, as well as a variety of other types of conduits [ventricular {right or left}-to-aorta, RA-to-RV, etc.]), secondary to any of the following etiologies: conduit outgrowth, obstruction, stenosis, insufficiency, or insufficiency and stenosis. This diagnosis (“Conduit failure”) would be the primary diagnosis in a patient with, for example, “Truncus arteriosus” repaired in infancy who years later is hospitalized because of conduit stenosis/insufficiency. The underlying or fundamental diagnosis in this patient is “Truncus arteriosus”, but the primary diagnosis for the operation to be performed during the hospitalization (in this case, “Conduit reoperation”) would be “Conduit failure”.</p> <p>Please note that the choice “520 Conduit failure” does not include “2130 Shunt failure”.</p>
550	Aortic stenosis, Subvalvar	<p>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 supra-aortic 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.</p>
2500	Aortic Stenosis, Subvalvar, Discrete	
2510	Aortic Stenosis, Subvalvar, IHSS	
2520	Aortic Stenosis, Subvalvar, Tunnel-like	
560	Aortic stenosis, Valvar	<p>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</p>

- 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.
- 570 Aortic stenosis, Supravalvar 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 neo-aortic 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.
- 590 Aortic valve atresia 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.
- 600 Aortic insufficiency 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.
- 610 Aortic insufficiency and aortic stenosis 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.
- 620 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.
- 630 Sinus of Valsalva aneurysm 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

- 640 LV to aorta tunnel
- 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.
- 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.
- 650 Mitral stenosis, Supravalvar mitral ring
- 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.
- 660 Mitral stenosis, Valvar
- 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.
- 670 Mitral stenosis, Subvalvar
- 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.
680	Mitral stenosis, Subvalvar, Parachute	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, supra-valvar 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.
695	Mitral stenosis	Stenotic lesions of the mitral valve not otherwise specified in the diagnosis definitions 650, 660, 670, and 680.
700	Mitral regurgitation and mitral stenosis	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.
710	Mitral regurgitation	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.
720	Mitral valve, Other	Mitral valve pathology not otherwise coded in diagnosis definitions 650 through 710.
730	Hypoplastic left heart syndrome (HLHS)	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.
- 2080 Shone's syndrome  
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) supralvalvar 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", supralvalvar 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.
- 740 Cardiomyopathy (including dilated, restrictive, and hypertrophic)  
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.
- 750 Cardiomyopathy, End-stage congenital heart disease  
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

760	Pericardial effusion	lesions. 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).
770	Pericarditis	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.
780	Pericardial disease, Other	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.
790	Single ventricle, DILV	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, Stellan 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,



- 800 Single ventricle, DIRV
- Gaynor JW, and Anderson RH (editors). *Cardiology in the Young*, Volume 16, Supplement 1: 9 - 21, February 2006.
- 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, Stellan 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.
- 810 Single ventricle, Mitral atresia
- 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

## 820 Single ventricle, Tricuspid atresia

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.

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.

830	Single ventricle, Unbalanced AV canal	<p>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.</p> <p>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.</p> <p>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".</p> <p>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".</p>
840	Single ventricle, Heterotaxia syndrome	<p>"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'.</p> <p>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".</p>

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.

850 Single ventricle, Other

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.

851 Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)

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.

870 Congenitally corrected TGA

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.

872 Congenitally corrected TGA, IVS

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.)
- 874 Congenitally corrected TGA, IVS-LVOTO 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.)
- 876 Congenitally corrected TGA, VSD 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.)
- 878 Congenitally corrected TGA, VSD-LVOTO 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.)

- 880 TGA, IVS  
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).
- 890 TGA, IVS-LVOTO  
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).
- 900 TGA, VSD  
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).
- 910 TGA, VSD-LVOTO  
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).
- 930 DORV, VSD type 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
- 940 DORV, TOF type 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.
- 950 DORV, TGA type 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.
- 960 DORV, Remote VSD (uncommitted VSD) 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.
- 2030 DORV + AVSD (AV Canal) Indicate if the patient has the diagnosis of “DORV + AVSD (AV Canal)”. In the event of DORV occurring in association with AVSD (AV Canal), code “DORV + AVSD (AV Canal)”, and then use additional (secondary) diagnostic codes to describe the DORV and the AVSD (AV Canal) separately to provide further documentation about the DORV and AVSD (AV Canal) types. {“DORV” is “Double outlet right ventricle” and is defined as a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle.} In this case, the DORV exists in combination with an atrioventricular septal defect and common atrioventricular junction guarded by a common atrioventricular valve.
- 975 DORV, IVS 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.
- 980 DOLV 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.
990	Coarctation of aorta	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.
1000	Aortic arch hypoplasia	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.
92	VSD + Aortic arch hypoplasia	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.)
94	VSD + Coarctation of aorta	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.}
1010	Coronary artery anomaly, Anomalous aortic origin of coronary artery (AAOCA)	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.
1020	Coronary artery anomaly, Anomalous pulmonary origin (includes ALCAPA)	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.
1030	Coronary artery anomaly, Fistula	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.
1040	Coronary artery anomaly, Aneurysm	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.
2420	Coronary artery anomaly, Ostial Atresia	
1050	Coronary artery anomaly, Other	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).
1070	Interrupted aortic arch	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.
2020	Interrupted aortic arch + VSD	Indicate if the patient has the diagnosis of "Interrupted aortic arch + VSD". In the event of interrupted aortic arch occurring in association with VSD, code "Interrupted aortic arch + VSD",

2000 Interrupted aortic arch + AP window (aortopulmonary window)

and then use additional (secondary) diagnostic codes to describe the interrupted aortic arch and the VSD separately to provide further documentation about the individual interrupted aortic arch and VSD types. {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.} {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.)}

Indicate if the patient has the diagnosis of "Interrupted aortic arch + AP window (aortopulmonary window)". In the event of interrupted aortic arch occurring in association with AP window, code "Interrupted aortic arch + AP window (aortopulmonary window)", and then use additional (secondary) diagnostic codes to describe the interrupted aortic arch and the AP window separately to provide further documentation about the individual interrupted aortic arch and AP window types. {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.} {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.)}
- 1080 Patent ductus arteriosus 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.)
- 1090 Vascular ring 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).
- 1100 Pulmonary artery sling 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.
- 1110 Aortic aneurysm (including pseudoaneurysm) 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.
- 1120 Aortic dissection 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).
1130	Lung disease, Benign	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.
1140	Lung disease, Malignant	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.
1160	Tracheal stenosis	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).
2430	Tracheomalacia	
1170	Airway disease, Other	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.
1430	Pleural disease, Benign	Benign diseases of the mediastinal or visceral pleura.
1440	Pleural disease, Malignant	Malignant diseases of the mediastinal or visceral pleura.
1450	Pneumothorax	A collection of air or gas in the pleural space.
1460	Pleural effusion	Abnormal accumulation of fluid in the pleural space.
1470	Chylothorax	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.
1480	Empyema	A collection of purulent material in the pleural space, usually secondary to an infection.
1490	Esophageal disease, Benign	Any benign disease of the esophagus.
1500	Esophageal disease, Malignant	Any malignant disease of the esophagus.
1505	Mediastinal disease	Any disease of the mediastinum awaiting final benign/malignant pathology determination.
1510	Mediastinal disease, Benign	Any benign disease of the mediastinum.
1520	Mediastinal disease, Malignant	Any malignant disease of the mediastinum.
1540	Diaphragm paralysis	Paralysis of diaphragm, unilateral or bilateral.
1550	Diaphragm disease, Other	Any disease of the diaphragm other than paralysis.
2160	Rib tumor, Benign	Non-cancerous tumor of rib(s) (e.g., fibrous dysplasia)
2170	Rib tumor, Malignant	Cancerous tumor of rib(s)- primary (e.g., osteosarcoma, chondrosarcoma)
2180	Rib tumor, Metastatic	Cancerous tumor metastasized to rib(s) from a different primary location
2190	Sternal tumor, Benign	Non-cancerous tumor of sternum (e.g., fibrous dysplasia)
2200	Sternal tumor, Malignant	Cancerous tumor of sternum - primary (e.g., osteosarcoma, chondrosarcoma)
2210	Sternal tumor, Metastatic	Cancerous tumor metastasized to sternum from a different primary location
2220	Pectus carinatum	Pectus carinatum represents a spectrum of protrusion abnormalities of the anterior chest wall. Severe deformity may

		result in dyspnea and decreased endurance. Some patients develop rigidity of the chest wall with decreased lung compliance, progressive emphysema, and increased frequency of respiratory tract infections.
2230	Pectus excavatum	Pectus excavatum is a congenital chest wall deformity in which several ribs and the sternum grow abnormally, producing a concave, or caved-in, appearance in the anterior chest wall. Pectus excavatum is the most common type of congenital chest wall abnormality. It occurs in an estimated 1 in 300-400 births, with male predominance (male-to-female ratio of 3:1). The condition is typically noticed at birth, and more than 90% of cases are diagnosed within the first year of life. Worsening of the chest's appearance and the onset of respiratory symptoms are usually reported during rapid bone growth in the early teenage years.
2240	Thoracic outlet syndrome	Thoracic outlet syndrome (TOS) is caused by compression at the superior thoracic outlet wherein excess pressure is placed on a neurovascular bundle passing between the anterior scalene and middle scalene muscles. It can affect the brachial plexus (nerves that pass into the arm from the neck), the subclavian artery, and - rarely - the vein, which does not normally pass through the scalene hiatus. TOS may occur due to a positional cause - for example, by abnormal compression from the clavicle (collarbone) and shoulder girdle on arm movement. There are also several static forms, caused by abnormalities, enlargement, or spasm of the various muscles surrounding the arteries, veins, and/or brachial plexus, a fixation of a first rib, or a cervical rib. The most common causes of thoracic outlet syndrome include physical trauma from a car accident, repetitive injuries from a job such as frequent non-ergonomic use of a keyboard, sports-related activities, anatomical defects such as having an extra rib, and pregnancy.
1180	Arrhythmia	Any cardiac rhythm other than normal sinus rhythm.
2440	Arrhythmia, Atrial, Atrial fibrillation	
2450	Arrhythmia, Atrial, Atrial flutter	
2460	Arrhythmia, Atrial, Other	
2050	Arrhythmia, Junctional	Indicate if the patient has the diagnosis of "Arrhythmia, Junctional". "Arrhythmias arising from the atrioventricular junction; may be bradycardia, tachycardia, premature beats, or escape rhythm [1]. [1]. Jacobs JP. (Editor). 2008 Supplement to Cardiology in the Young: Databases and The Assessment of Complications associated with The Treatment of Patients with Congenital Cardiac Disease, Prepared by: The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease, Cardiology in the Young, Volume 18, Supplement S2, pages 1 -530, December 9, 2008, page 379.
2060	Arrhythmia, Ventricular	Indicate if the patient has the diagnosis of "Arrhythmia, Ventricular". "Arrhythmia, Ventricular" ROOT Definition = Abnormal rhythm originating from the ventricles [1]. [1]. Jacobs JP. (Editor). 2008 Supplement to Cardiology in the



		Young: Databases and The Assessment of Complications associated with The Treatment of Patients with Congenital Cardiac Disease, Prepared by: The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease, <i>Cardiology in the Young</i> , Volume 18, Supplement S2, pages 1–530, December 9, 2008, page 393.
1185	Arrhythmia, Heart block	Atrioventricular block may be congenital or acquired, and may be of varying degree (first, second, or third degree).
1190	Arrhythmia, Heart block, Acquired	Atrioventricular block, when acquired, may be post-surgical, or secondary to myocarditis or other etiologies; the block may be first, second or third degree.
1200	Arrhythmia, Heart block, Congenital	Atrioventricular block, when congenital, may be first, second or third degree block.
1220	Arrhythmia, Pacemaker, Indication for replacement	Indications for pacemaker replacement may include end of generator life, malfunction, or infection.
2530	Short QT syndrome	
2540	Long QT Syndrome (Ward Romano syndrome)	
2550	Wolff-Parkinson-White syndrome (WPW syndrome)	
1230	Atrial Isomerism, Left	In isomerism, both appendages are of like morphology or structure; in left atrial isomerism both the right atrium and left atrium appear to be a left atrium structurally.
1240	Atrial Isomerism, Right	In isomerism, both appendages are of like morphology or structure; in right atrial isomerism both the right atrium and left atrium appear to be a right atrium structurally.
2090	Dextrocardia	Indicate if the patient has the diagnosis of “Dextrocardia”. “Dextrocardia” is most usually considered synonymous with a right-sided ventricular mass, whilst “dextroversion” is frequently defined as a configuration where the ventricular apex points to the right. In a patient with the usual atrial arrangement, or situs solitus, dextroversion, therefore, implies a turning to the right of the heart [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervenkov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to <i>Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients</i> , Anderson RH, Jacobs JP, and Wernovsky G, editors. <i>Cardiology in the Young</i> , Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
2100	Levocardia	Indicate if the patient has the diagnosis of “Levocardia”. “Levocardia” usually considered synonymous with a left-sided ventricular mass, whilst “levoverision” is frequently defined as a configuration where the ventricular apex points to the left [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervenkov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting

- of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 2110 Mesocardia  
Indicate if the patient has the diagnosis of “Mesocardia”. “Mesocardia” is most usually considered synonymous with the ventricular mass occupying the midline [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 2120 Situs inversus  
Indicate if the patient has the diagnosis of “Situs inversus” of the atrial chambers. The development of morphologically right-sided structures on one side of the body, and morphologically left-sided structures on the other side, is termed lateralization. Normal lateralization, the usual arrangement, is also known as “situs solitus”. The mirror-imaged arrangement is also known as “situs inversus”. The term “visceroatrial situs” is often used to refer to the situs of the viscera and atria when their situs is in agreement. The arrangement of the organs themselves, and the arrangement of the atrial chambers, is not always the same. Should such disharmony be encountered, the sidedness of the organs and atrial chambers must be separately specified [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 1250 Aneurysm, Ventricular, Right (including pseudoaneurysm)  
An aneurysm of the right ventricle is defined as a localized dilation or enlargement of the right ventricular wall.
- 1260 Aneurysm, Ventricular, Left (including pseudoaneurysm)  
An aneurysm of the left ventricle is defined as a localized dilation or enlargement of the left ventricular wall.
- 1270 Aneurysm, Pulmonary artery  
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).
- 1280 Aneurysm, Other  
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.
1290	Hypoplastic RV	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.
1300	Hypoplastic LV	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.
2070	Postoperative bleeding	Indicate if the patient has the diagnosis of "Postoperative bleeding".
1310	Mediastinitis	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.
1320	Endocarditis	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.
1325	Rheumatic heart disease	Heart disease, usually valvar (e.g., mitral or aortic), following an infection with group A streptococci
1330	Prosthetic valve failure	Indicate if the patient has the diagnosis of "Prosthetic valve failure". This diagnosis is the primary diagnosis to be entered for patients undergoing replacement of a previously placed valve (not conduit) prosthesis, whatever type (e.g., bioprosthetic, mechanical, etc.). Failure may be due to, among others, patient somatic growth, malfunction of the prosthesis, or calcification or overgrowth of the prosthesis (e.g., pannus formation). Secondary or fundamental diagnosis would relate to the underlying valve disease entity. As an example, a patient undergoing removal or replacement of a prosthetic pulmonary valve previously placed for pulmonary insufficiency after repair of tetralogy of Fallot would have as a primary diagnosis "Prosthetic valve failure", as a secondary diagnosis "Pulmonary insufficiency", and as a fundamental diagnosis "Tetralogy of Fallot".
1340	Myocardial infarction	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

1350 Cardiac tumor	<p>left coronary artery from the pulmonary artery (ALCAPA).</p> <p>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, mesothelioma, 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.</p>
1360 Pulmonary AV fistula	<p>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.</p>
1370 Pulmonary embolism	<p>A pulmonary embolus is a blockage of an artery in the lungs by fat, air, clumped tumor cells, or a blood clot.</p>
1385 Pulmonary vascular obstructive disease	<p>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) collagen vascular disease, or (5) drug or toxin induced, or (6) diseases of the respiratory system, or (7) chronic thromboembolic disease, among others.</p>
1390 Pulmonary vascular obstructive disease (Eisenmenger's)	<p>"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.</p>
1400 Primary pulmonary hypertension	<p>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.</p>
1410 Persistent fetal circulation	<p>Persistence of the blood flow pattern seen in fetal life, in which high pulmonary vascular resistance in the lungs results in</p>

		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.
1420	Meconium aspiration	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.
2250	Kawasaki disease	Kawasaki disease, also known as Kawasaki syndrome, is an acute febrile illness of unknown etiology that primarily affects children younger than 5 years of age. It was first described in Japan in 1967, and the first cases outside of Japan were reported in Hawaii in 1976. It is characterized by fever, rash, swelling of the hands and feet, irritation and redness of the whites of the eyes, swollen lymph glands in the neck, and irritation and inflammation of the mouth, lips, and throat. Serious complications of Kawasaki disease include coronary artery dilatations and aneurysms, and Kawasaki disease is a leading cause of acquired heart disease in children in the United States. The standard treatment with intravenous immunoglobulin and aspirin substantially decreases the development of coronary artery abnormalities.
1560	Cardiac, Other	Any cardiac diagnosis not specifically delineated in other diagnostic codes.
1570	Thoracic and/or mediastinal, Other	Any thoracic and/or mediastinal disease not specifically delineated in other diagnostic codes.
1580	Peripheral vascular, Other	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.
2260	Complication of cardiovascular catheterization procedure	Unspecified complication of cardiovascular catheterization procedure
2270	Complication of cardiovascular catheterization procedure, Device embolization	Migration or movement of device introduced during a cardiac catheterization procedure to an unintended location
2280	Complication of cardiovascular catheterization procedure, Device malfunction	Malfunction of a device introduced during a cardiac catheterization procedure
2290	Complication of cardiovascular catheterization procedure, Perforation	Perforation or puncture caused by a device introduced during a cardiac catheterization procedure
2300	Complication of interventional radiology	Unspecified complication of interventional radiology procedure
2310	Complication of interventional radiology procedure, Device	Migration or movement of device introduced during an interventional radiology procedure to an unintended location

2320	Complication of interventional radiology procedure, Device malfunction	Malfunction of a device introduced during an interventional radiology procedure
2330	Complication of interventional radiology procedure, Perforation	Perforation or puncture caused by a device introduced during an interventional radiology procedure
2340	Foreign body, Intracardiac foreign body	Presence of a foreign body within the heart
2350	Foreign body, Intravascular foreign body	Presence of a foreign body within an artery or vein
2360	Open sternum with closed skin	Sternotomy edges not re-approximated prior to closure of skin incision
2370	Open sternum with open skin (includes membrane placed to close skin)	Sternotomy and skin incision left open following surgery, covered with a membrane or dressing
2380	Retained sternal wire causing irritation	Surgically placed wire causing soft tissue irritation, pain or swelling (not infected)
2390	Syncope	A transient, self-limited loss of consciousness with an inability to maintain postural tone that is followed by spontaneous recovery. The term syncope excludes seizures, coma, shock, or other states of altered consciousness.
2400	Trauma, Blunt	Injury (ies) sustained from blunt force, caused by motor vehicle accidents, falls, blows or crush injuries
2410	Trauma, Penetrating	Injury (ies) sustained as a result of sharp force, including cutting or piercing instruments or objects, bites, or firearm injuries from projectiles.
2560	Cardio-respiratory failure not secondary to known structural heart disease	
2570	Myocarditis	
2580	Common AV valve insufficiency	
2590	Protein-losing enteropathy	
2600	Plastic bronchitis	
7000	Normal heart	Normal heart.
7777	Miscellaneous, Other	Any disease (congenital or acquired) not specifically delineated in other diagnostic codes.
4010	Status post - PFO, Primary closure	
4020	Status post - ASD repair, Primary closure	
4030	Status post - ASD repair, Patch	
4040	Status post - ASD repair, Device	
6110	Status post - ASD repair, Patch + PAPVC repair	
4050	Status post - ASD, Common atrium (single atrium), Septation	
4060	Status post - ASD	

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- creation/enlargement
  - 4070 Status post - ASD partial closure
  - 4080 Status post - Atrial septal fenestration
  - 4085 Status post - Atrial fenestration closure
  - 4100 Status post - VSD repair, Primary closure
  - 4110 Status post - VSD repair, Patch
  - 4120 Status post - VSD repair, Device
  - 4130 Status post - VSD, Multiple, Repair
  - 4140 Status post - VSD creation/enlargement
  - 4150 Status post - Ventricular septal fenestration
  - 4170 Status post - AVC (AVSD) repair, Complete (CAVSD)
  - 4180 Status post - AVC (AVSD) repair, Intermediate (Transitional)
  - 4190 Status post - AVC (AVSD) repair, Partial (Incomplete) (PAVSD)
  - 6300 Status post - Valvuloplasty, Common atrioventricular valve
  - 6250 Status post - Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve
  - 6230 Status post - Valve replacement, Common atrioventricular valve
  - 4210 Status post - AP window repair
  - 4220 Status post - Pulmonary artery origin from ascending aorta (hemitruncus) repair
  - 4230 Status post - Truncus arteriosus repair
  - 4240 Status post - Valvuloplasty, Truncal valve
  - 6290 Status post - Valvuloplasty converted to valve replacement in the same operation, Truncal valve
  - 4250 Status post - Valve replacement, Truncal valve

- 6220 Status post - Truncus + Interrupted aortic arch repair (IAA) repair
- 4260 Status post - PAPVC repair
- 4270 Status post - PAPVC, Scimitar, Repair
- 6120 Status post - PAPVC repair, Baffle redirection to left atrium with systemic vein translocation (Warden) (SVC sewn to right atrial appendage)
- 4280 Status post - TAPVC repair
- 6200 Status post - TAPVC repair + Shunt - systemic-to-pulmonary
- 4290 Status post - Cor triatriatum repair
- 4300 Status post - Pulmonary venous stenosis repair
- 4310 Status post - Atrial baffle procedure (non-Mustard, non-Senning)
- 4330 Status post - Anomalous systemic venous connection repair
- 4340 Status post - Systemic venous stenosis repair
- 4350 Status post - TOF repair, No ventriculotomy
- 4360 Status post - TOF repair, Ventriculotomy, Nontransannular patch
- 4370 Status post - TOF repair, Ventriculotomy, Transannular patch
- 7330 Status post - TOF repair, Ventriculotomy, Transannular patch, plus native valve reconstruction
- 7340 Status post - TOF repair, Ventriculotomy, Transannular patch, with monocusp or other surgically fashioned RVOT valve
- 4380 Status post - TOF repair, RV-PA conduit
- 4390 Status post - TOF - AVC (AVSD) repair
- 4400 Status post - TOF - Absent pulmonary valve repair
- 4420 Status post - Pulmonary atresia - VSD (including TOF,



- PA) repair
- 6700 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])
- 6710 Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])
- 6720 Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
- 6730 Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)
- 6740 Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)
- 6750 Status post - Unifocalization MAPCA(s), Unilateral pulmonary unifocalization
- 4440 Status post - Unifocalization MAPCA(s)
- 4450 Status post - Occlusion of MAPCA(s)
- 4460 Status post - Valvuloplasty, Tricuspid
- 6280 Status post - Valvuloplasty converted to valve replacement in the same operation, Tricuspid
- 4465 Status post - Ebstein's repair
- 4470 Status post - Valve

- replacement, Tricuspid (TVR)
- 4480 Status post - Valve closure, Tricuspid (exclusion, univentricular approach)
- 4490 Status post - Valve excision, Tricuspid (without replacement)
- 4500 Status post - Valve surgery, Other, Tricuspid
- 4510 Status post - RVOT procedure
- 4520 Status post - 1 1/2 ventricular repair
- 4530 Status post - PA, reconstruction (plasty), Main (trunk)
- 4540 Status post - PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation)
- 4550 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch)
- 7350 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, proximal to first segmental branch)
- 7360 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, beyond the first segmental branch)
- 4570 Status post - DCRV repair
- 7370 Status post - RV Rehabilitation, Endocardial Resection
- 4590 Status post - Valvuloplasty, Pulmonic
- 6270 Status post - Valvuloplasty converted to valve replacement in the same operation, Pulmonic
- 4600 Status post - Valve replacement, Pulmonic (PVR)
- 4630 Status post - Valve excision, Pulmonary (without replacement)
- 4640 Status post - Valve closure,

- Semilunar
- 4650 Status post - Valve surgery, Other, Pulmonic
  - 4610 Status post - Conduit placement, RV to PA
  - 4620 Status post - Conduit placement, LV to PA
  - 5774 Status post - Conduit placement, Ventricle to aorta
  - 5772 Status post - Conduit placement, Other
  - 4580 Status post - Conduit reoperation
  - 4660 Status post - Valvuloplasty, Aortic
  - 6240 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic
  - 6310 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure
  - 6320 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure
  - 4670 Status post - Valve replacement, Aortic (AVR)
  - 4680 Status post - Valve replacement, Aortic (AVR), Mechanical
  - 4690 Status post - Valve replacement, Aortic (AVR), Bioprosthetic
  - 4700 Status post - Valve replacement, Aortic (AVR), Homograft
  - 4715 Status post - Aortic root replacement, Bioprosthetic
  - 4720 Status post - Aortic root replacement, Mechanical
  - 4730 Status post - Aortic root replacement, Homograft
  - 4735 Status post - Aortic root replacement, Valve sparing
  - 4740 Status post - Ross procedure
  - 4750 Status post - Konno procedure

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- 4760 Status post - Ross-Konno procedure
  - 4770 Status post - Other annular enlargement procedure
  - 4780 Status post - Aortic stenosis, Subvalvar, Repair
  - 6100 Status post - Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS
  - 4790 Status post - Aortic stenosis, Supravalvar, Repair
  - 4800 Status post - Valve surgery, Other, Aortic
  - 7380 Status post - Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis
  - 4810 Status post - Sinus of Valsalva, Aneurysm repair
  - 4820 Status post - LV to aorta tunnel repair
  - 4830 Status post - Valvuloplasty, Mitral
  - 6260 Status post - Valvuloplasty converted to valve replacement in the same operation, Mitral
  - 4840 Status post - Mitral stenosis, Supravalvar mitral ring repair
  - 4850 Status post - Valve replacement, Mitral (MVR)
  - 4860 Status post - Valve surgery, Other, Mitral
  - 4870 Status post - Norwood procedure
  - 4880 Status post - HLHS biventricular repair
  - 7390 Status post - LV Endocardial Fibroelastosis resection
  - 6755 Status post - Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neo-aorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
  - 6160 Status post - Hybrid Approach

- "Stage 1", Application of RPA & LPA bands
- 6170 Status post - Hybrid Approach  
"Stage 1", Stent placement in arterial duct (PDA)
- 6180 Status post - Hybrid Approach  
"Stage 1", Stent placement in arterial duct (PDA) + application of RPA & LPA bands
- 6140 Status post - Hybrid approach  
"Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Aortic arch repair (Norwood [Stage 1] + Superior Cavopulmonary anastomosis(es) + PA Debanding)
- 6150 Status post - Hybrid approach  
"Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Without aortic arch repair
- 6760 Status post - Hybrid Approach, Transcardiac balloon dilation
- 6770 Status post - Hybrid Approach, Transcardiac transcatheter device placement
- 1590 Status post - Transplant, Heart
- 1610 Status post - Transplant, Heart and lung
- 4910 Status post - Partial left ventriculectomy (LV volume reduction surgery) (Batista)
- 4920 Status post - Pericardial drainage procedure
- 4930 Status post - Pericardiectomy
- 4940 Status post - Pericardial procedure, Other
- 4950 Status post - Fontan, Atrio-pulmonary connection
- 4960 Status post - Fontan, Atrio-ventricular connection
- 4970 Status post - Fontan, TCPC, Lateral tunnel, Fenestrated
- 4980 Status post - Fontan, TCPC,

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- Lateral tunnel, Nonfenestrated
  - 5000 Status post - Fontan, TCPC, External conduit, Fenestrated
  - 5010 Status post - Fontan, TCPC, External conduit, Nonfenestrated
  - 6780 Status post - Fontan, TCPC, Intra/extracardiac conduit, Fenestrated
  - 6790 Status post - Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated
  - 7310 Status post - Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Fenestrated
  - 7320 Status post - Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Nonfenestrated
  - 5025 Status post - Fontan revision or conversion (Re-do Fontan)
  - 5030 Status post - Fontan, Other
  - 6340 Status post - Fontan + Atrioventricular valvuloplasty
  - 5035 Status post - Ventricular septation
  - 5050 Status post - Congenitally corrected TGA repair, Atrial switch and ASO (double switch)
  - 5060 Status post - Congenitally corrected TGA repair, Atrial switch and Rastelli
  - 5070 Status post - Congenitally corrected TGA repair, VSD closure
  - 5080 Status post - Congenitally corrected TGA repair, VSD closure and LV to PA conduit
  - 5090 Status post - Congenitally corrected TGA repair, Other
  - 5110 Status post - Arterial switch operation (ASO)
  - 5120 Status post - Arterial switch operation (ASO) and VSD repair
  - 5123 Status post - Arterial switch procedure + Aortic arch repair
  - 5125 Status post - Arterial switch procedure and VSD repair +

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- Aortic arch repair
  - 5130 Status post - Senning
  - 5140 Status post - Mustard
  - 5145 Status post - Atrial baffle procedure, Mustard or Senning revision
  - 5150 Status post - Rastelli
  - 5160 Status post - REV
  - 6190 Status post - Aortic root translocation over left ventricle (Including Nikaidoh procedure)
  - 6210 Status post - TGA, Other procedures (Kawashima, LV-PA conduit, other)
  - 7400 Status post - Double root translocation
  - 5180 Status post - DORV, Intraventricular tunnel repair
  - 7410 Status post - DORV repair, No Ventriculotomy
  - 7420 Status post - DORV repair, Ventriculotomy, Nontransannular patch
  - 7430 Status post - DORV repair, Ventriculotomy, Transannular patch
  - 7440 Status post - DORV repair, RV-PA conduit
  - 7450 Status post - DORV - AVC (AVSD) repair
  - 5200 Status post - DOLV repair
  - 5210 Status post - Coarctation repair, End to end
  - 5220 Status post - Coarctation repair, End to end, Extended
  - 7460 Status post - Coarctation repair, Descending aorta anastomosed to Ascending aorta
  - 5230 Status post - Coarctation repair, Subclavian flap
  - 5240 Status post - Coarctation repair, Patch aortoplasty
  - 5250 Status post - Coarctation repair, Interposition graft
  - 7470 Status post - Coarctation repair, Extra-anatomic Bypass graft
  - 5260 Status post - Coarctation

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- repair, Other
  - 5275 Status post - Coarctation  
repair + VSD repair
  - 5280 Status post - Aortic arch repair
  - 5285 Status post - Aortic arch  
repair + VSD repair
  - 5290 Status post - Coronary artery  
fistula ligation
  - 5291 Status post - Anomalous  
origin of coronary artery from  
pulmonary artery repair
  - 5300 Status post - Coronary artery  
bypass
  - 5305 Status post - Anomalous  
aortic origin of coronary  
artery (AAOCA) repair
  - 5310 Status post - Coronary artery  
procedure, Other
  - 5320 Status post - Interrupted aortic  
arch repair
  - 5330 Status post - PDA closure,  
Surgical
  - 5340 Status post - PDA closure,  
Device
  - 5360 Status post - Vascular ring  
repair
  - 5365 Status post - Aortopexy
  - 5370 Status post - Pulmonary artery  
sling repair
  - 5380 Status post - Aortic aneurysm  
repair
  - 5390 Status post - Aortic dissection  
repair
  - 5400 Status post - Lung biopsy
  - 1600 Status post - Transplant,  
Lung(s)
  - 5420 Status post - Lung procedure,  
Other
  - 5440 Status post - Tracheal  
procedure
  - 6800 Status post - Muscle flap,  
Trunk (i.e., intercostal, pectus,  
or serratus muscle)
  - 6810 Status post - Muscle flap,  
Trunk (i.e. latissimus dorsi)
  - 6820 Status post - Removal, Sternal  
wire
  - 6830 Status post - Rib excision,  
Complete
  - 6840 Status post - Rib excision,



- Partial
- 6850 Status post - Sternal fracture - open treatment
  - 6860 Status post - Sternal resection, Radical resection of sternum
  - 6870 Status post - Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy
  - 6880 Status post - Tumor of chest wall - Excision including ribs
  - 6890 Status post - Tumor of chest wall - Excision including ribs, With reconstruction
  - 6900 Status post - Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor
  - 6910 Status post - Tumor of soft tissue of thorax - Excision of subcutaneous tumor
  - 6920 Status post - Tumor of soft tissue of thorax - Radical resection
  - 6930 Status post - Hyoid myotomy and suspension
  - 6940 Status post - Muscle flap,
  - 6950 Status post - Procedure on neck
  - 6960 Status post - Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor
  - 6970 Status post - Tumor of soft tissue of neck - Excision of subcutaneous tumor
  - 6980 Status post - Tumor of soft tissue of neck - Radical resection
  - 6990 Status post - Pectus bar removal
  - 7005 Status post - Pectus bar repositioning
  - 7010 Status post - Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy
  - 7020 Status post - Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy
  - 7030 Status post - Pectus repair, Open repair

- 7040 Status post - Division of scalenus anticus, With resection of a cervical rib
- 7050 Status post - Division of scalenus anticus, Without resection of a cervical rib
- 7060 Status post - Rib excision, Excision of cervical rib
- 7070 Status post - Rib excision, Excision of cervical rib, With sympathectomy
- 7080 Status post - Rib excision, Excision of first rib
- 7090 Status post - Rib excision, Excision of first rib, With sympathectomy
- 7100 Status post - Procedure on thorax
- 5450 Status post - Pacemaker implantation, Permanent
- 5460 Status post - Pacemaker procedure
- 6350 Status post - Explantation of pacing system
- 5470 Status post - ICD (AICD) implantation
- 5480 Status post - ICD (AICD) ([automatic] implantable cardioverter defibrillator) procedure
- 5490 Status post - Arrhythmia surgery - atrial, Surgical Ablation
- 5500 Status post - Arrhythmia surgery - ventricular, Surgical Ablation
- 6500 Status post - Cardiovascular catheterization procedure, Diagnostic
- 6520 Status post - Cardiovascular catheterization procedure, Diagnostic, Angiographic data obtained
- 6550 Status post - Cardiovascular catheterization procedure, Diagnostic, Electrophysiology alteration
- 6540 Status post - Cardiovascular catheterization procedure, Diagnostic, Hemodynamic alteration

- 6510 Status post - Cardiovascular catheterization procedure, Diagnostic, Hemodynamic data obtained
- 6530 Status post - Cardiovascular catheterization procedure, Diagnostic, Transluminal test occlusion
- 6410 Status post - Cardiovascular catheterization procedure, Therapeutic
- 6670 Status post - Cardiovascular catheterization procedure, Therapeutic, Adjunctive therapy
- 6570 Status post - Cardiovascular catheterization procedure, Therapeutic, Balloon dilation
- 6590 Status post - Cardiovascular catheterization procedure, Therapeutic, Balloon valvotomy
- 6600 Status post - Cardiovascular catheterization procedure, Therapeutic, Coil implantation
- 6610 Status post - Cardiovascular catheterization procedure, Therapeutic, Device implantation
- 7110 Status post - Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted
- 6690 Status post - Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation
- 7120 Status post - Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal
- 6640 Status post - Cardiovascular catheterization procedure, Therapeutic, Perforation (establishing interchamber and/or intervessel communication)
- 6580 Status post - Cardiovascular catheterization procedure, Therapeutic, Septostomy
- 6620 Status post - Cardiovascular catheterization procedure,

- Therapeutic, Stent insertion
- 6630 Status post - Cardiovascular catheterization procedure, Therapeutic, Stent re-dilation
- 6650 Status post - Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion
- 6660 Status post - Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve
- 5590 Status post - Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)
- 5600 Status post - Shunt, Systemic to pulmonary, Central (shunt from aorta)
- 7130 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)
- 7230 Status post - Shunt, Systemic to pulmonary, Potts - Smith type (descending aorta to pulmonary artery)
- 5610 Status post - Shunt, Systemic to pulmonary, Other
- 5630 Status post - Shunt, Ligation and takedown
- 6095 Status post - Shunt, Reoperation
- 5640 Status post - PA banding (PAB)
- 5650 Status post - PA debanding
- 7200 Status post - PA band adjustment
- 5660 Status post - Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction)
- 5670 Status post - Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)

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- 5680 Status post - Glenn  
(unidirectional  
cavopulmonary anastomosis)  
(unidirectional Glenn)
  - 5690 Status post - Bilateral  
bidirectional cavopulmonary  
anastomosis (BBDCPA)  
(bilateral bidirectional Glenn)
  - 5700 Status post - HemiFontan
  - 6330 Status post - Superior  
cavopulmonary  
anastomosis(es) (Glenn or  
HemiFontan) +  
Atrioventricular valvuloplasty
  - 6130 Status post - Superior  
Cavopulmonary  
anastomosis(es) + PA  
reconstruction
  - 7300 Status post - Takedown of  
superior cavopulmonary  
anastomosis
  - 7140 Status post - Hepatic vein to  
azygous vein connection,  
Direct
  - 7150 Status post - Hepatic vein to  
azygous vein connection,  
Interposition graft
  - 7160 Status post - Kawashima  
operation (superior  
cavopulmonary connection in  
setting of interrupted IVC  
with azygous continuation)
  - 5710 Status post - Palliation, Other
  - 6360 Status post - ECMO  
cannulation
  - 6370 Status post - ECMO  
decannulation
  - 5910 Status post - ECMO procedure
  - 5900 Status post - Intraaortic  
balloon pump (IABP) insertion
  - 5920 Status post - Right/left heart  
assist device procedure
  - 6390 Status post - VAD explantation
  - 6380 Status post - VAD  
implantation
  - 7170 Status post - VAD change out
  - 6420 Status post -  
Echocardiography procedure,  
Sedated transesophageal  
echocardiogram
  - 6430 Status post -

- Echocardiography procedure,  
Sedated transthoracic  
echocardiogram
- 6435 Status post - Non-  
cardiovascular, Non-thoracic  
procedure on cardiac patient  
with cardiac anesthesia
- 6440 Status post - Radiology  
procedure on cardiac patient,  
Cardiac Computerized Axial  
Tomography (CT Scan)
- 6450 Status post - Radiology  
procedure on cardiac patient,  
Cardiac Magnetic Resonance  
Imaging (MRI)
- 6460 Status post - Radiology  
procedure on cardiac patient,  
Diagnostic radiology
- 6470 Status post - Radiology  
procedure on cardiac patient,  
Non-Cardiac Computerized  
Tomography (CT) on cardiac  
patient
- 6480 Status post - Radiology  
procedure on cardiac patient,  
Non-cardiac Magnetic  
Resonance Imaging (MRI) on  
cardiac patient
- 6490 Status post - Radiology  
procedure on cardiac patient,  
Therapeutic radiology
- 5720 Status post - Aneurysm,  
Ventricular, Right, Repair
- 5730 Status post - Aneurysm,  
Ventricular, Left, Repair
- 5740 Status post - Aneurysm,  
Pulmonary artery, Repair
- 5760 Status post - Cardiac tumor  
resection
- 5780 Status post - Pulmonary AV  
fistula repair/occlusion
- 5790 Status post - Ligation,  
Pulmonary artery
- 5802 Status post - Pulmonary  
embolectomy, Acute  
pulmonary embolus
- 5804 Status post - Pulmonary  
embolectomy, Chronic  
pulmonary embolus
- 5810 Status post - Pleural drainage  
procedure

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5820	Status post - Pleural procedure, Other
5830	Status post - Ligation, Thoracic duct
5840	Status post - Decortication
5850	Status post - Esophageal procedure
5860	Status post - Mediastinal procedure
5870	Status post - Bronchoscopy
5880	Status post - Diaphragm plication
5890	Status post - Diaphragm procedure, Other
5930	Status post - VATS (video-assisted thoracoscopic surgery)
5940	Status post - Minimally invasive procedure
5950	Status post - Bypass for noncardiac lesion
5960	Status post - Delayed sternal closure
5970	Status post - Mediastinal exploration
5980	Status post - Sternotomy wound drainage
7180	Status post - Intravascular stent removal
7220	Status post - Removal of transcatheter delivered device from heart
7210	Status post - Removal of transcatheter delivered device from blood vessel
5990	Status post - Thoracotomy, Other
6000	Status post - Cardiotomy, Other
6010	Status post - Cardiac procedure, Other
6020	Status post - Thoracic and/or mediastinal procedure, Other
6030	Status post - Peripheral vascular procedure, Other
6040	Status post - Miscellaneous procedure, Other
11777	Status post - Other procedure

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*Long Name:* Other Card-Congenital Diagnosis 3 *SeqNo:* 6510  
*Short Name:* **OCarCongDiag3** *Core:* Yes  
*Section Name:* Congenital Defect Repair *Harvest:* Yes  
*DBTableName* Adultdata1

*Definition:* Indicate the third of the three most significant congenital diagnoses.

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

ParentShortName: OCarCongDiag2

ParentLongName: Other Card-Congenital Diagnosis 2

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No other congenital diagnoses" And Is Not Missing

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	No other congenital diagnoses	
10	PFO	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).
20	ASD, Secundum	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.
30	ASD, Sinus venosus	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.
40	ASD, Coronary sinus	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.
50	ASD, Common atrium (single atrium)	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.
2150	ASD, Postoperative interatrial communication	A surgically created communication between the atria.
71	VSD, Type 1 (Subarterial) (Supracristal) (Conal septal defect) (Infundibular)	A VSD that lies beneath the semilunar valve(s) in the conal or outlet septum.
73	VSD, Type 2 (Perimembranous)	A VSD that is confluent with and involves the membranous septum and is bordered by an atrioventricular valve, not



	(Paramembranous) (Conoventricular)	including type 3 VSDs.
75	VSD, Type 3 (Inlet) (AV canal type)	A VSD that involves the inlet of the right ventricular septum immediately inferior to the AV valve apparatus.
77	VSD, Type 4 (Muscular)	A VSD completely surrounded by muscle.
79	VSD, Type: Gerbode type (LV-RA communication)	A rare form of VSD in which the defect is at the membranous septum; the communication is between the left ventricle and right atrium.
80	VSD, Multiple	More than one VSD exists. Each individual VSD may be coded separately to specify the individual VSD types.
100	AVC (AVSD), Complete (CAVSD)	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.
110	AVC (AVSD), Intermediate (transitional)	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.
120	AVC (AVSD), Partial (incomplete) (PAVSD) (ASD,	An AVC with an ostium primum ASD (a usually crescent-shaped ASD in the inferior (posterior) portion of the atrial

	primum)	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.
140	AP window (aortopulmonary window)	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.)
150	Pulmonary artery origin from ascending aorta (hemitruncus)	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.
160	Truncus arteriosus	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.
170	Truncal valve insufficiency	Functional abnormality - insufficiency - of the truncal valve. May be further subdivided into grade of insufficiency (I, II, III, IV or mild, moderate, severe).

2470	Truncal valve stenosis	
2010	Truncus arteriosus + Interrupted aortic arch	Indicate if the patient has the diagnosis of “Truncus arteriosus + Interrupted aortic arch”. {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. 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. If in such case there is no ventricular septal defect, then the left ventricle and mitral valve may be extremely hypoplastic.} {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.}
180	Partial anomalous pulmonary venous connection (PAPVC)	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).
190	Partial anomalous pulmonary venous connection (PAPVC), scimitar	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.
200	Total anomalous pulmonary venous connection (TAPVC), Type 1 (supracardiac)	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.
210	Total anomalous pulmonary venous connection (TAPVC), Type 2 (cardiac)	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.
220	Total anomalous pulmonary venous connection (TAPVC), Type 3 (infracardiac)	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.
230	Total anomalous pulmonary venous connection (TAPVC), Type 4 (mixed)	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.
250	Cor triatriatum	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 supralvalvar 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 supralvalvar 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.
260	Pulmonary venous stenosis	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).
2480	Pulmonary venous stenosis, Acquired	
2490	Pulmonary venous stenosis, Spontaneous	
270	Systemic venous anomaly	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.
280	Systemic venous obstruction	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.
- 290 TOF  
 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.")
- 2140 TOF, Pulmonary stenosis  
 Indicate if the patient has the diagnosis of “TOF, Pulmonary stenosis”. Use this diagnosis if the patient has tetralogy of Fallot and pulmonary stenosis. Do not use this diagnosis if the patient has tetralogy of Fallot and pulmonary atresia. Do not use this diagnosis if the patient has tetralogy of Fallot and absent pulmonary valve. Do not use this diagnosis if the patient has tetralogy of Fallot and atrioventricular canal. {Tetralogy of Fallot 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.")}

300 TOF, AVC (AVSD)

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.

310 TOF, Absent pulmonary valve

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.)
- 320 Pulmonary atresia 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.
- 330 Pulmonary atresia, IVS 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.
- 340 Pulmonary atresia, VSD (Including TOF, PA) 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.
- 350 Pulmonary atresia, VSD-MAPCA 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.
360	MAPCA(s) (major aortopulmonary collateral[s]) (without PA-VSD)	Rarely MAPCA(s) may occur in patients 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.
370	Ebstein's anomaly	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”.)
380	Tricuspid regurgitation, non-Ebstein's related	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).
390	Tricuspid stenosis	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).
400	Tricuspid regurgitation and tricuspid stenosis	Tricuspid regurgitation present with tricuspid stenosis may be due to congenital factors or acquired.
410	Tricuspid valve, Other	Tricuspid valve pathology not otherwise specified in diagnosis definitions 370, 380, 390 and 400.
420	Pulmonary stenosis, Valvar	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.
430	Pulmonary artery stenosis (hypoplasia), Main (trunk)	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 supra-valvar pulmonary stenosis.
440	Pulmonary artery stenosis, Branch, Central (within the hilar bifurcation)	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.
450	Pulmonary artery stenosis, Branch, Peripheral (at or beyond the hilar bifurcation)	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.
470	Pulmonary artery, Discontinuous	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.
490	Pulmonary stenosis, Subvalvar	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.
500	DCRV	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.
510	Pulmonary valve, Other	Other anomalies of the pulmonary valve may be listed here including but not restricted to absent pulmonary valve.
530	Pulmonary insufficiency	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.).
540	Pulmonary insufficiency and pulmonary stenosis	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 supra-valvar stenosis.
2130	Shunt failure	Indicate if the patient has the diagnosis of “Shunt failure”. This diagnostic subgroup includes failure of any of a variety of shunts (“Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)”, “Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery)”, “Shunt, Systemic to pulmonary, Other”, and “Sano Shunt”), secondary to any of the following etiologies: shunt thrombosis, shunt occlusion, shunt stenosis, shunt obstruction, and shunt outgrowth. This diagnosis (“Shunt failure”) would be the primary diagnosis in a patient with, for example, “Hypoplastic left heart syndrome (HLHS)” who underwent a “Norwood procedure” with a “Modified Blalock-Taussig Shunt” and now requires reoperation for thrombosis of the “Modified Blalock-Taussig Shunt”. The underlying or fundamental diagnosis in this patient is “Hypoplastic left heart syndrome (HLHS)”, but the primary diagnosis for the operation to be performed to treat the thrombosis of the “Modified Blalock-Taussig Shunt” would be “Shunt failure”.

Please note that the choice “2130 Shunt failure” does not include “520 Conduit failure”.

520	Conduit failure	<p>Indicate if the patient has the diagnosis of “Conduit failure”. This diagnostic subgroup includes failure of any of a variety of conduits (ventricular [right or left]-to-PA conduits, as well as a variety of other types of conduits [ventricular {right or left}-to-aorta, RA-to-RV, etc.]), secondary to any of the following etiologies: conduit outgrowth, obstruction, stenosis, insufficiency, or insufficiency and stenosis. This diagnosis (“Conduit failure”) would be the primary diagnosis in a patient with, for example, “Truncus arteriosus” repaired in infancy who years later is hospitalized because of conduit stenosis/insufficiency. The underlying or fundamental diagnosis in this patient is “Truncus arteriosus”, but the primary diagnosis for the operation to be performed during the hospitalization (in this case, “Conduit reoperation”) would be “Conduit failure”.</p> <p>Please note that the choice “520 Conduit failure” does not include “2130 Shunt failure”.</p>
550	Aortic stenosis, Subvalvar	<p>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 supra-aortic 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.</p>
2500	Aortic Stenosis, Subvalvar, Discrete	
2510	Aortic Stenosis, Subvalvar, IHSS	
2520	Aortic Stenosis, Subvalvar, Tunnel-like	
560	Aortic stenosis, Valvar	<p>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</p>

- 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.
- 570 Aortic stenosis, Supravalvar 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 neo-aortic 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.
- 590 Aortic valve atresia 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.
- 600 Aortic insufficiency 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.
- 610 Aortic insufficiency and aortic stenosis 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.
- 620 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.
- 630 Sinus of Valsalva aneurysm 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.
- 640 LV to aorta tunnel  
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.
- 650 Mitral stenosis, Supravalvar mitral ring  
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.
- 660 Mitral stenosis, Valvar  
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.
- 670 Mitral stenosis, Subvalvar  
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.
680	Mitral stenosis, Subvalvar, Parachute	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, supra-valvar 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.
695	Mitral stenosis	Stenotic lesions of the mitral valve not otherwise specified in the diagnosis definitions 650, 660, 670, and 680.
700	Mitral regurgitation and mitral stenosis	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.
710	Mitral regurgitation	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.
720	Mitral valve, Other	Mitral valve pathology not otherwise coded in diagnosis definitions 650 through 710.
730	Hypoplastic left heart syndrome (HLHS)	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.
- 2080 Shone's syndrome  
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) supralvalvar 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", supralvalvar 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.
- 740 Cardiomyopathy (including dilated, restrictive, and hypertrophic)  
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.
- 750 Cardiomyopathy, End-stage congenital heart disease  
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



760	Pericardial effusion	lesions. 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).
770	Pericarditis	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.
780	Pericardial disease, Other	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.
790	Single ventricle, DILV	A congenital cardiac malformation in which both atria connect to a single, morphologically left ventricle.

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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, Stellan 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,

- 800 Single ventricle, DIRV
- Gaynor JW, and Anderson RH (editors). *Cardiology in the Young*, Volume 16, Supplement 1: 9 - 21, February 2006.
- 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, Stellan 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.
- 810 Single ventricle, Mitral atresia
- 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

## 820 Single ventricle, Tricuspid atresia

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.

A congenital cardiac malformation in which there is no orifice of tricuspid valve.

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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.

- 830 Single ventricle, Unbalanced AV canal
- 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 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".
- 840 Single ventricle, Heterotaxia 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.

850 Single ventricle, Other

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.

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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.

851 Single Ventricle + Total anomalous pulmonary venous connection (TAPVC)

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.

870 Congenitally corrected TGA

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.

872 Congenitally corrected TGA, IVS

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.)
- 874 Congenitally corrected TGA, IVS-LVOTO 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.)
- 876 Congenitally corrected TGA, VSD 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.)
- 878 Congenitally corrected TGA, VSD-LVOTO 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.)

- 880 TGA, IVS  
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).
- 890 TGA, IVS-LVOTO  
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).
- 900 TGA, VSD  
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).
- 910 TGA, VSD-LVOTO  
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).
- 930 DORV, VSD type 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
- 940 DORV, TOF type 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.
- 950 DORV, TGA type 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.
- 960 DORV, Remote VSD (uncommitted VSD) 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.
- 2030 DORV + AVSD (AV Canal) Indicate if the patient has the diagnosis of “DORV + AVSD (AV Canal)”. In the event of DORV occurring in association with AVSD (AV Canal), code “DORV + AVSD (AV Canal)”, and then use additional (secondary) diagnostic codes to describe the DORV and the AVSD (AV Canal) separately to provide further documentation about the DORV and AVSD (AV Canal) types. {“DORV” is “Double outlet right ventricle” and is defined as a type of ventriculoarterial connection in which both great vessels arise entirely or predominantly from the right ventricle.} In this case, the DORV exists in combination with an atrioventricular septal defect and common atrioventricular junction guarded by a common atrioventricular valve.
- 975 DORV, IVS 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.
- 980 DOLV 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.
990	Coarctation of aorta	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.
1000	Aortic arch hypoplasia	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.
92	VSD + Aortic arch hypoplasia	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.)
94	VSD + Coarctation of aorta	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.}
1010	Coronary artery anomaly, Anomalous aortic origin of coronary artery (AAOCA)	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.
1020	Coronary artery anomaly, Anomalous pulmonary origin (includes ALCAPA)	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.
1030	Coronary artery anomaly, Fistula	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.
1040	Coronary artery anomaly, Aneurysm	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.
2420	Coronary artery anomaly, Ostial Atresia	
1050	Coronary artery anomaly, Other	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).
1070	Interrupted aortic arch	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.
2020	Interrupted aortic arch + VSD	Indicate if the patient has the diagnosis of "Interrupted aortic arch + VSD". In the event of interrupted aortic arch occurring in association with VSD, code "Interrupted aortic arch + VSD",

2000 Interrupted aortic arch + AP window (aortopulmonary window)	<p>and then use additional (secondary) diagnostic codes to describe the interrupted aortic arch and the VSD separately to provide further documentation about the individual interrupted aortic arch and VSD types. {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.} {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.)}</p> <p>Indicate if the patient has the diagnosis of "Interrupted aortic arch + AP window (aortopulmonary window)". In the event of interrupted aortic arch occurring in association with AP window, code "Interrupted aortic arch + AP window (aortopulmonary window)", and then use additional (secondary) diagnostic codes to describe the interrupted aortic arch and the AP window separately to provide further documentation about the individual interrupted aortic arch and AP window types. {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.} {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</p>
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- 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.)}
- 1080 Patent ductus arteriosus 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.)
- 1090 Vascular ring 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).
- 1100 Pulmonary artery sling 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.
- 1110 Aortic aneurysm (including pseudoaneurysm) 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.
- 1120 Aortic dissection 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).
1130	Lung disease, Benign	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.
1140	Lung disease, Malignant	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.
1160	Tracheal stenosis	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).
2430	Tracheomalacia	
1170	Airway disease, Other	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.
1430	Pleural disease, Benign	Benign diseases of the mediastinal or visceral pleura.
1440	Pleural disease, Malignant	Malignant diseases of the mediastinal or visceral pleura.
1450	Pneumothorax	A collection of air or gas in the pleural space.
1460	Pleural effusion	Abnormal accumulation of fluid in the pleural space.
1470	Chylothorax	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.
1480	Empyema	A collection of purulent material in the pleural space, usually secondary to an infection.
1490	Esophageal disease, Benign	Any benign disease of the esophagus.
1500	Esophageal disease, Malignant	Any malignant disease of the esophagus.
1505	Mediastinal disease	Any disease of the mediastinum awaiting final benign/malignant pathology determination.
1510	Mediastinal disease, Benign	Any benign disease of the mediastinum.
1520	Mediastinal disease, Malignant	Any malignant disease of the mediastinum.
1540	Diaphragm paralysis	Paralysis of diaphragm, unilateral or bilateral.
1550	Diaphragm disease, Other	Any disease of the diaphragm other than paralysis.
2160	Rib tumor, Benign	Non-cancerous tumor of rib(s) (e.g., fibrous dysplasia)
2170	Rib tumor, Malignant	Cancerous tumor of rib(s)- primary (e.g., osteosarcoma, chondrosarcoma)
2180	Rib tumor, Metastatic	Cancerous tumor metastasized to rib(s) from a different primary location
2190	Sternal tumor, Benign	Non-cancerous tumor of sternum (e.g., fibrous dysplasia)
2200	Sternal tumor, Malignant	Cancerous tumor of sternum - primary (e.g., osteosarcoma, chondrosarcoma)
2210	Sternal tumor, Metastatic	Cancerous tumor metastasized to sternum from a different primary location
2220	Pectus carinatum	Pectus carinatum represents a spectrum of protrusion abnormalities of the anterior chest wall. Severe deformity may



		result in dyspnea and decreased endurance. Some patients develop rigidity of the chest wall with decreased lung compliance, progressive emphysema, and increased frequency of respiratory tract infections.
2230	Pectus excavatum	Pectus excavatum is a congenital chest wall deformity in which several ribs and the sternum grow abnormally, producing a concave, or caved-in, appearance in the anterior chest wall. Pectus excavatum is the most common type of congenital chest wall abnormality. It occurs in an estimated 1 in 300-400 births, with male predominance (male-to-female ratio of 3:1). The condition is typically noticed at birth, and more than 90% of cases are diagnosed within the first year of life. Worsening of the chest's appearance and the onset of respiratory symptoms are usually reported during rapid bone growth in the early teenage years.
2240	Thoracic outlet syndrome	Thoracic outlet syndrome (TOS) is caused by compression at the superior thoracic outlet wherein excess pressure is placed on a neurovascular bundle passing between the anterior scalene and middle scalene muscles. It can affect the brachial plexus (nerves that pass into the arm from the neck), the subclavian artery, and - rarely - the vein, which does not normally pass through the scalene hiatus. TOS may occur due to a positional cause - for example, by abnormal compression from the clavicle (collarbone) and shoulder girdle on arm movement. There are also several static forms, caused by abnormalities, enlargement, or spasm of the various muscles surrounding the arteries, veins, and/or brachial plexus, a fixation of a first rib, or a cervical rib. The most common causes of thoracic outlet syndrome include physical trauma from a car accident, repetitive injuries from a job such as frequent non-ergonomic use of a keyboard, sports-related activities, anatomical defects such as having an extra rib, and pregnancy.
1180	Arrhythmia	Any cardiac rhythm other than normal sinus rhythm.
2440	Arrhythmia, Atrial, Atrial fibrillation	
2450	Arrhythmia, Atrial, Atrial flutter	
2460	Arrhythmia, Atrial, Other	
2050	Arrhythmia, Junctional	Indicate if the patient has the diagnosis of "Arrhythmia, Junctional". "Arrhythmias arising from the atrioventricular junction; may be bradycardia, tachycardia, premature beats, or escape rhythm [1]. [1]. Jacobs JP. (Editor). 2008 Supplement to Cardiology in the Young: Databases and The Assessment of Complications associated with The Treatment of Patients with Congenital Cardiac Disease, Prepared by: The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease, Cardiology in the Young, Volume 18, Supplement S2, pages 1 -530, December 9, 2008, page 379.
2060	Arrhythmia, Ventricular	Indicate if the patient has the diagnosis of "Arrhythmia, Ventricular". "Arrhythmia, Ventricular" ROOT Definition = Abnormal rhythm originating from the ventricles [1]. [1]. Jacobs JP. (Editor). 2008 Supplement to Cardiology in the

		Young: Databases and The Assessment of Complications associated with The Treatment of Patients with Congenital Cardiac Disease, Prepared by: The Multi-Societal Database Committee for Pediatric and Congenital Heart Disease, <i>Cardiology in the Young</i> , Volume 18, Supplement S2, pages 1–530, December 9, 2008, page 393.
1185	Arrhythmia, Heart block	Atrioventricular block may be congenital or acquired, and may be of varying degree (first, second, or third degree).
1190	Arrhythmia, Heart block, Acquired	Atrioventricular block, when acquired, may be post-surgical, or secondary to myocarditis or other etiologies; the block may be first, second or third degree.
1200	Arrhythmia, Heart block, Congenital	Atrioventricular block, when congenital, may be first, second or third degree block.
1220	Arrhythmia, Pacemaker, Indication for replacement	Indications for pacemaker replacement may include end of generator life, malfunction, or infection.
2530	Short QT syndrome	
2540	Long QT Syndrome (Ward Romano syndrome)	
2550	Wolff-Parkinson-White syndrome (WPW syndrome)	
1230	Atrial Isomerism, Left	In isomerism, both appendages are of like morphology or structure; in left atrial isomerism both the right atrium and left atrium appear to be a left atrium structurally.
1240	Atrial Isomerism, Right	In isomerism, both appendages are of like morphology or structure; in right atrial isomerism both the right atrium and left atrium appear to be a right atrium structurally.
2090	Dextrocardia	Indicate if the patient has the diagnosis of “Dextrocardia”. “Dextrocardia” is most usually considered synonymous with a right-sided ventricular mass, whilst “dextroversion” is frequently defined as a configuration where the ventricular apex points to the right. In a patient with the usual atrial arrangement, or situs solitus, dextroversion, therefore, implies a turning to the right of the heart [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervenkov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to <i>Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients</i> , Anderson RH, Jacobs JP, and Wernovsky G, editors. <i>Cardiology in the Young</i> , Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
2100	Levocardia	Indicate if the patient has the diagnosis of “Levocardia”. “Levocardia” usually considered synonymous with a left-sided ventricular mass, whilst “levoverision” is frequently defined as a configuration where the ventricular apex points to the left [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervenkov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting

- of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 2110 Mesocardia  
Indicate if the patient has the diagnosis of “Mesocardia”. “Mesocardia” is most usually considered synonymous with the ventricular mass occupying the midline [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 2120 Situs inversus  
Indicate if the patient has the diagnosis of “Situs inversus” of the atrial chambers. The development of morphologically right-sided structures on one side of the body, and morphologically left-sided structures on the other side, is termed lateralization. Normal lateralization, the usual arrangement, is also known as “situs solitus”. The mirror-imaged arrangement is also known as “situs inversus”. The term “visceroatrial situs” is often used to refer to the situs of the viscera and atria when their situs is in agreement. The arrangement of the organs themselves, and the arrangement of the atrial chambers, is not always the same. Should such disharmony be encountered, the sidedness of the organs and atrial chambers must be separately specified [1]. [1]. Jacobs JP, Anderson RH, Weinberg P, Walters III HL, Tchervakov CI, Del Duca D, Franklin RCG, Aiello VD, Béland MJ, Colan SD, Gaynor JW, Krogmann ON, Kurosawa H, Maruszewski B, Stellin G, Elliott MJ. The nomenclature, definition and classification of cardiac structures in the setting of heterotaxy. In 2007 Supplement to Cardiology in the Young: Controversies and Challenges Facing Paediatric Cardiovascular Practitioners and their Patients, Anderson RH, Jacobs JP, and Wernovsky G, editors. Cardiology in the Young, Volume 17, Supplement 2, pages 1–28, doi: 10.1017/S1047951107001138, September 2007.
- 1250 Aneurysm, Ventricular, Right (including pseudoaneurysm)  
An aneurysm of the right ventricle is defined as a localized dilation or enlargement of the right ventricular wall.
- 1260 Aneurysm, Ventricular, Left (including pseudoaneurysm)  
An aneurysm of the left ventricle is defined as a localized dilation or enlargement of the left ventricular wall.
- 1270 Aneurysm, Pulmonary artery  
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).
- 1280 Aneurysm, Other  
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.
1290	Hypoplastic RV	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.
1300	Hypoplastic LV	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.
2070	Postoperative bleeding	Indicate if the patient has the diagnosis of "Postoperative bleeding".
1310	Mediastinitis	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.
1320	Endocarditis	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.
1325	Rheumatic heart disease	Heart disease, usually valvar (e.g., mitral or aortic), following an infection with group A streptococci
1330	Prosthetic valve failure	Indicate if the patient has the diagnosis of "Prosthetic valve failure". This diagnosis is the primary diagnosis to be entered for patients undergoing replacement of a previously placed valve (not conduit) prosthesis, whatever type (e.g., bioprosthetic, mechanical, etc.). Failure may be due to, among others, patient somatic growth, malfunction of the prosthesis, or calcification or overgrowth of the prosthesis (e.g., pannus formation). Secondary or fundamental diagnosis would relate to the underlying valve disease entity. As an example, a patient undergoing removal or replacement of a prosthetic pulmonary valve previously placed for pulmonary insufficiency after repair of tetralogy of Fallot would have as a primary diagnosis "Prosthetic valve failure", as a secondary diagnosis "Pulmonary insufficiency", and as a fundamental diagnosis "Tetralogy of Fallot".
1340	Myocardial infarction	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

1350 Cardiac tumor	<p>left coronary artery from the pulmonary artery (ALCAPA).</p> <p>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, mesothelioma, 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.</p>
1360 Pulmonary AV fistula	<p>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.</p>
1370 Pulmonary embolism	<p>A pulmonary embolus is a blockage of an artery in the lungs by fat, air, clumped tumor cells, or a blood clot.</p>
1385 Pulmonary vascular obstructive disease	<p>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) collagen vascular disease, or (5) drug or toxin induced, or (6) diseases of the respiratory system, or (7) chronic thromboembolic disease, among others.</p>
1390 Pulmonary vascular obstructive disease (Eisenmenger's)	<p>"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.</p>
1400 Primary pulmonary hypertension	<p>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.</p>
1410 Persistent fetal circulation	<p>Persistence of the blood flow pattern seen in fetal life, in which high pulmonary vascular resistance in the lungs results in</p>

		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.
1420	Meconium aspiration	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.
2250	Kawasaki disease	Kawasaki disease, also known as Kawasaki syndrome, is an acute febrile illness of unknown etiology that primarily affects children younger than 5 years of age. It was first described in Japan in 1967, and the first cases outside of Japan were reported in Hawaii in 1976. It is characterized by fever, rash, swelling of the hands and feet, irritation and redness of the whites of the eyes, swollen lymph glands in the neck, and irritation and inflammation of the mouth, lips, and throat. Serious complications of Kawasaki disease include coronary artery dilatations and aneurysms, and Kawasaki disease is a leading cause of acquired heart disease in children in the United States. The standard treatment with intravenous immunoglobulin and aspirin substantially decreases the development of coronary artery abnormalities.
1560	Cardiac, Other	Any cardiac diagnosis not specifically delineated in other diagnostic codes.
1570	Thoracic and/or mediastinal, Other	Any thoracic and/or mediastinal disease not specifically delineated in other diagnostic codes.
1580	Peripheral vascular, Other	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.
2260	Complication of cardiovascular catheterization procedure	Unspecified complication of cardiovascular catheterization procedure
2270	Complication of cardiovascular catheterization procedure, Device embolization	Migration or movement of device introduced during a cardiac catheterization procedure to an unintended location
2280	Complication of cardiovascular catheterization procedure, Device malfunction	Malfunction of a device introduced during a cardiac catheterization procedure
2290	Complication of cardiovascular catheterization procedure, Perforation	Perforation or puncture caused by a device introduced during a cardiac catheterization procedure
2300	Complication of interventional radiology	Unspecified complication of interventional radiology procedure
2310	Complication of interventional radiology procedure, Device	Migration or movement of device introduced during an interventional radiology procedure to an unintended location

2320	Complication of interventional radiology procedure, Device malfunction	Malfunction of a device introduced during an interventional radiology procedure
2330	Complication of interventional radiology procedure, Perforation	Perforation or puncture caused by a device introduced during an interventional radiology procedure
2340	Foreign body, Intracardiac foreign body	Presence of a foreign body within the heart
2350	Foreign body, Intravascular foreign body	Presence of a foreign body within an artery or vein
2360	Open sternum with closed skin	Sternotomy edges not re-approximated prior to closure of skin incision
2370	Open sternum with open skin (includes membrane placed to close skin)	Sternotomy and skin incision left open following surgery, covered with a membrane or dressing
2380	Retained sternal wire causing irritation	Surgically placed wire causing soft tissue irritation, pain or swelling (not infected)
2390	Syncope	A transient, self-limited loss of consciousness with an inability to maintain postural tone that is followed by spontaneous recovery. The term syncope excludes seizures, coma, shock, or other states of altered consciousness.
2400	Trauma, Blunt	Injury (ies) sustained from blunt force, caused by motor vehicle accidents, falls, blows or crush injuries
2410	Trauma, Penetrating	Injury (ies) sustained as a result of sharp force, including cutting or piercing instruments or objects, bites, or firearm injuries from projectiles.
2560	Cardio-respiratory failure not secondary to known structural heart disease	
2570	Myocarditis	
2580	Common AV valve insufficiency	
2590	Protein-losing enteropathy	
2600	Plastic bronchitis	
7000	Normal heart	Normal heart.
7777	Miscellaneous, Other	Any disease (congenital or acquired) not specifically delineated in other diagnostic codes.
4010	Status post - PFO, Primary closure	
4020	Status post - ASD repair, Primary closure	
4030	Status post - ASD repair, Patch	
4040	Status post - ASD repair, Device	
6110	Status post - ASD repair, Patch + PAPVC repair	
4050	Status post - ASD, Common atrium (single atrium), Septation	
4060	Status post - ASD	

- creation/enlargement
- 4070 Status post - ASD partial closure
- 4080 Status post - Atrial septal fenestration
- 4085 Status post - Atrial fenestration closure
- 4100 Status post - VSD repair, Primary closure
- 4110 Status post - VSD repair, Patch
- 4120 Status post - VSD repair, Device
- 4130 Status post - VSD, Multiple, Repair
- 4140 Status post - VSD creation/enlargement
- 4150 Status post - Ventricular septal fenestration
- 4170 Status post - AVC (AVSD) repair, Complete (CAVSD)
- 4180 Status post - AVC (AVSD) repair, Intermediate (Transitional)
- 4190 Status post - AVC (AVSD) repair, Partial (Incomplete) (PAVSD)
- 6300 Status post - Valvuloplasty, Common atrioventricular valve
- 6250 Status post - Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve
- 6230 Status post - Valve replacement, Common atrioventricular valve
- 4210 Status post - AP window repair
- 4220 Status post - Pulmonary artery origin from ascending aorta (hemitruncus) repair
- 4230 Status post - Truncus arteriosus repair
- 4240 Status post - Valvuloplasty, Truncal valve
- 6290 Status post - Valvuloplasty converted to valve replacement in the same operation, Truncal valve
- 4250 Status post - Valve replacement, Truncal valve



- 6220 Status post - Truncus +  
Interrupted aortic arch repair  
(IAA) repair
- 4260 Status post - PAPVC repair
- 4270 Status post - PAPVC,  
Scimitar, Repair
- 6120 Status post - PAPVC repair,  
Baffle redirection to left  
atrium with systemic vein  
translocation (Warden) (SVC  
sewn to right atrial appendage)
- 4280 Status post - TAPVC repair
- 6200 Status post - TAPVC repair +  
Shunt - systemic-to-pulmonary
- 4290 Status post - Cor triatriatum  
repair
- 4300 Status post - Pulmonary  
venous stenosis repair
- 4310 Status post - Atrial baffle  
procedure (non-Mustard, non-  
Senning)
- 4330 Status post - Anomalous  
systemic venous connection  
repair
- 4340 Status post - Systemic venous  
stenosis repair
- 4350 Status post - TOF repair, No  
ventriculotomy
- 4360 Status post - TOF repair,  
Ventriculotomy,  
Nontransannular patch
- 4370 Status post - TOF repair,  
Ventriculotomy, Transannular  
patch
- 7330 Status post - TOF repair,  
Ventriculotomy, Transannular  
patch, plus native valve  
reconstruction
- 7340 Status post - TOF repair,  
Ventriculotomy, Transannular  
patch, with monocusp or other  
surgically fashioned RVOT  
valve
- 4380 Status post - TOF repair, RV-  
PA conduit
- 4390 Status post - TOF - AVC  
(AVSD) repair
- 4400 Status post - TOF - Absent  
pulmonary valve repair
- 4420 Status post - Pulmonary  
atresia - VSD (including TOF,

- PA) repair
- 6700 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])
- 6710 Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])
- 6720 Status post - Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
- 6730 Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)
- 6740 Status post - Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)
- 6750 Status post - Unifocalization MAPCA(s), Unilateral pulmonary unifocalization
- 4440 Status post - Unifocalization MAPCA(s)
- 4450 Status post - Occlusion of MAPCA(s)
- 4460 Status post - Valvuloplasty, Tricuspid
- 6280 Status post - Valvuloplasty converted to valve replacement in the same operation, Tricuspid
- 4465 Status post - Ebstein's repair
- 4470 Status post - Valve

- replacement, Tricuspid (TVR)
- 4480 Status post - Valve closure, Tricuspid (exclusion, univentricular approach)
- 4490 Status post - Valve excision, Tricuspid (without replacement)
- 4500 Status post - Valve surgery, Other, Tricuspid
- 4510 Status post - RVOT procedure
- 4520 Status post - 1 1/2 ventricular repair
- 4530 Status post - PA, reconstruction (plasty), Main (trunk)
- 4540 Status post - PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation)
- 4550 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch)
- 7350 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, proximal to first segmental branch)
- 7360 Status post - PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, beyond the first segmental branch)
- 4570 Status post - DCRV repair
- 7370 Status post - RV Rehabilitation, Endocardial Resection
- 4590 Status post - Valvuloplasty, Pulmonic
- 6270 Status post - Valvuloplasty converted to valve replacement in the same operation, Pulmonic
- 4600 Status post - Valve replacement, Pulmonic (PVR)
- 4630 Status post - Valve excision, Pulmonary (without replacement)
- 4640 Status post - Valve closure,

- Semilunar
- 4650 Status post - Valve surgery, Other, Pulmonic
  - 4610 Status post - Conduit placement, RV to PA
  - 4620 Status post - Conduit placement, LV to PA
  - 5774 Status post - Conduit placement, Ventricle to aorta
  - 5772 Status post - Conduit placement, Other
  - 4580 Status post - Conduit reoperation
  - 4660 Status post - Valvuloplasty, Aortic
  - 6240 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic
  - 6310 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure
  - 6320 Status post - Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure
  - 4670 Status post - Valve replacement, Aortic (AVR)
  - 4680 Status post - Valve replacement, Aortic (AVR), Mechanical
  - 4690 Status post - Valve replacement, Aortic (AVR), Bioprosthetic
  - 4700 Status post - Valve replacement, Aortic (AVR), Homograft
  - 4715 Status post - Aortic root replacement, Bioprosthetic
  - 4720 Status post - Aortic root replacement, Mechanical
  - 4730 Status post - Aortic root replacement, Homograft
  - 4735 Status post - Aortic root replacement, Valve sparing
  - 4740 Status post - Ross procedure
  - 4750 Status post - Konno procedure

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- 4760 Status post - Ross-Konno procedure
  - 4770 Status post - Other annular enlargement procedure
  - 4780 Status post - Aortic stenosis, Subvalvar, Repair
  - 6100 Status post - Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS
  - 4790 Status post - Aortic stenosis, Supravalvar, Repair
  - 4800 Status post - Valve surgery, Other, Aortic
  - 7380 Status post - Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis
  - 4810 Status post - Sinus of Valsalva, Aneurysm repair
  - 4820 Status post - LV to aorta tunnel repair
  - 4830 Status post - Valvuloplasty, Mitral
  - 6260 Status post - Valvuloplasty converted to valve replacement in the same operation, Mitral
  - 4840 Status post - Mitral stenosis, Supravalvar mitral ring repair
  - 4850 Status post - Valve replacement, Mitral (MVR)
  - 4860 Status post - Valve surgery, Other, Mitral
  - 4870 Status post - Norwood procedure
  - 4880 Status post - HLHS biventricular repair
  - 7390 Status post - LV Endocardial Fibroelastosis resection
  - 6755 Status post - Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neo-aorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
  - 6160 Status post - Hybrid Approach

- "Stage 1", Application of RPA & LPA bands
- 6170 Status post - Hybrid Approach  
"Stage 1", Stent placement in arterial duct (PDA)
- 6180 Status post - Hybrid Approach  
"Stage 1", Stent placement in arterial duct (PDA) + application of RPA & LPA bands
- 6140 Status post - Hybrid approach  
"Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Aortic arch repair (Norwood [Stage 1] + Superior Cavopulmonary anastomosis(es) + PA Debanding)
- 6150 Status post - Hybrid approach  
"Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Without aortic arch repair
- 6760 Status post - Hybrid Approach, Transcardiac balloon dilation
- 6770 Status post - Hybrid Approach, Transcardiac transcatheter device placement
- 1590 Status post - Transplant, Heart
- 1610 Status post - Transplant, Heart and lung
- 4910 Status post - Partial left ventriculectomy (LV volume reduction surgery) (Batista)
- 4920 Status post - Pericardial drainage procedure
- 4930 Status post - Pericardiectomy
- 4940 Status post - Pericardial procedure, Other
- 4950 Status post - Fontan, Atrio-pulmonary connection
- 4960 Status post - Fontan, Atrio-ventricular connection
- 4970 Status post - Fontan, TCPC, Lateral tunnel, Fenestrated
- 4980 Status post - Fontan, TCPC,

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- Lateral tunnel, Nonfenestrated
- 5000 Status post - Fontan, TCPC,  
External conduit, Fenestrated
- 5010 Status post - Fontan, TCPC,  
External conduit,  
Nonfenestrated
- 6780 Status post - Fontan, TCPC,  
Intra/extracardiac conduit,  
Fenestrated
- 6790 Status post - Fontan, TCPC,  
Intra/extracardiac conduit,  
Nonfenestrated
- 7310 Status post - Fontan, TCPC,  
External conduit, hepatic  
veins to pulmonary artery,  
Fenestrated
- 7320 Status post - Fontan, TCPC,  
External conduit, hepatic  
veins to pulmonary artery,  
Nonfenestrated
- 5025 Status post - Fontan revision  
or conversion (Re-do Fontan)
- 5030 Status post - Fontan, Other
- 6340 Status post - Fontan +  
Atrioventricular valvuloplasty
- 5035 Status post - Ventricular  
septation
- 5050 Status post - Congenitally  
corrected TGA repair, Atrial  
switch and ASO (double  
switch)
- 5060 Status post - Congenitally  
corrected TGA repair, Atrial  
switch and Rastelli
- 5070 Status post - Congenitally  
corrected TGA repair, VSD  
closure
- 5080 Status post - Congenitally  
corrected TGA repair, VSD  
closure and LV to PA conduit
- 5090 Status post - Congenitally  
corrected TGA repair, Other
- 5110 Status post - Arterial switch  
operation (ASO)
- 5120 Status post - Arterial switch  
operation (ASO) and VSD  
repair
- 5123 Status post - Arterial switch  
procedure + Aortic arch repair
- 5125 Status post - Arterial switch  
procedure and VSD repair +

- 
- Aortic arch repair
  - 5130 Status post - Senning
  - 5140 Status post - Mustard
  - 5145 Status post - Atrial baffle procedure, Mustard or Senning revision
  - 5150 Status post - Rastelli
  - 5160 Status post - REV
  - 6190 Status post - Aortic root translocation over left ventricle (Including Nikaidoh procedure)
  - 6210 Status post - TGA, Other procedures (Kawashima, LV-PA conduit, other)
  - 7400 Status post - Double root translocation
  - 5180 Status post - DORV, Intraventricular tunnel repair
  - 7410 Status post - DORV repair, No Ventriculotomy
  - 7420 Status post - DORV repair, Ventriculotomy, Nontransannular patch
  - 7430 Status post - DORV repair, Ventriculotomy, Transannular patch
  - 7440 Status post - DORV repair, RV-PA conduit
  - 7450 Status post - DORV - AVC (AVSD) repair
  - 5200 Status post - DOLV repair
  - 5210 Status post - Coarctation repair, End to end
  - 5220 Status post - Coarctation repair, End to end, Extended
  - 7460 Status post - Coarctation repair, Descending aorta anastomosed to Ascending aorta
  - 5230 Status post - Coarctation repair, Subclavian flap
  - 5240 Status post - Coarctation repair, Patch aortoplasty
  - 5250 Status post - Coarctation repair, Interposition graft
  - 7470 Status post - Coarctation repair, Extra-anatomic Bypass graft
  - 5260 Status post - Coarctation



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repair, Other

5275 Status post - Coarctation  
repair + VSD repair

5280 Status post - Aortic arch repair

5285 Status post - Aortic arch  
repair + VSD repair

5290 Status post - Coronary artery  
fistula ligation

5291 Status post - Anomalous  
origin of coronary artery from  
pulmonary artery repair

5300 Status post - Coronary artery  
bypass

5305 Status post - Anomalous  
aortic origin of coronary  
artery (AAOCA) repair

5310 Status post - Coronary artery  
procedure, Other

5320 Status post - Interrupted aortic  
arch repair

5330 Status post - PDA closure,  
Surgical

5340 Status post - PDA closure,  
Device

5360 Status post - Vascular ring  
repair

5365 Status post - Aortopexy

5370 Status post - Pulmonary artery  
sling repair

5380 Status post - Aortic aneurysm  
repair

5390 Status post - Aortic dissection  
repair

5400 Status post - Lung biopsy

1600 Status post - Transplant,  
Lung(s)

5420 Status post - Lung procedure,  
Other

5440 Status post - Tracheal  
procedure

6800 Status post - Muscle flap,  
Trunk (i.e., intercostal, pectus,  
or serratus muscle)

6810 Status post - Muscle flap,  
Trunk (i.e. latissimus dorsi)

6820 Status post - Removal, Sternal  
wire

6830 Status post - Rib excision,  
Complete

6840 Status post - Rib excision,

- Partial
- 6850 Status post - Sternal fracture - open treatment
  - 6860 Status post - Sternal resection, Radical resection of sternum
  - 6870 Status post - Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy
  - 6880 Status post - Tumor of chest wall - Excision including ribs
  - 6890 Status post - Tumor of chest wall - Excision including ribs, With reconstruction
  - 6900 Status post - Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor
  - 6910 Status post - Tumor of soft tissue of thorax - Excision of subcutaneous tumor
  - 6920 Status post - Tumor of soft tissue of thorax - Radical resection
  - 6930 Status post - Hyoid myotomy and suspension
  - 6940 Status post - Muscle flap,
  - 6950 Status post - Procedure on neck
  - 6960 Status post - Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor
  - 6970 Status post - Tumor of soft tissue of neck - Excision of subcutaneous tumor
  - 6980 Status post - Tumor of soft tissue of neck - Radical resection
  - 6990 Status post - Pectus bar removal
  - 7005 Status post - Pectus bar repositioning
  - 7010 Status post - Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy
  - 7020 Status post - Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy
  - 7030 Status post - Pectus repair, Open repair

- 7040 Status post - Division of scalenus anticus, With resection of a cervical rib
- 7050 Status post - Division of scalenus anticus, Without resection of a cervical rib
- 7060 Status post - Rib excision, Excision of cervical rib
- 7070 Status post - Rib excision, Excision of cervical rib, With sympathectomy
- 7080 Status post - Rib excision, Excision of first rib
- 7090 Status post - Rib excision, Excision of first rib, With sympathectomy
- 7100 Status post - Procedure on thorax
- 5450 Status post - Pacemaker implantation, Permanent
- 5460 Status post - Pacemaker procedure
- 6350 Status post - Explantation of pacing system
- 5470 Status post - ICD (AICD) implantation
- 5480 Status post - ICD (AICD) ([automatic] implantable cardioverter defibrillator) procedure
- 5490 Status post - Arrhythmia surgery - atrial, Surgical Ablation
- 5500 Status post - Arrhythmia surgery - ventricular, Surgical Ablation
- 6500 Status post - Cardiovascular catheterization procedure, Diagnostic
- 6520 Status post - Cardiovascular catheterization procedure, Diagnostic, Angiographic data obtained
- 6550 Status post - Cardiovascular catheterization procedure, Diagnostic, Electrophysiology alteration
- 6540 Status post - Cardiovascular catheterization procedure, Diagnostic, Hemodynamic alteration

- 6510 Status post - Cardiovascular catheterization procedure, Diagnostic, Hemodynamic data obtained
- 6530 Status post - Cardiovascular catheterization procedure, Diagnostic, Transluminal test occlusion
- 6410 Status post - Cardiovascular catheterization procedure, Therapeutic
- 6670 Status post - Cardiovascular catheterization procedure, Therapeutic, Adjunctive therapy
- 6570 Status post - Cardiovascular catheterization procedure, Therapeutic, Balloon dilation
- 6590 Status post - Cardiovascular catheterization procedure, Therapeutic, Balloon valvotomy
- 6600 Status post - Cardiovascular catheterization procedure, Therapeutic, Coil implantation
- 6610 Status post - Cardiovascular catheterization procedure, Therapeutic, Device implantation
- 7110 Status post - Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted
- 6690 Status post - Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation
- 7120 Status post - Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal
- 6640 Status post - Cardiovascular catheterization procedure, Therapeutic, Perforation (establishing interchamber and/or intervessel communication)
- 6580 Status post - Cardiovascular catheterization procedure, Therapeutic, Septostomy
- 6620 Status post - Cardiovascular catheterization procedure,

- Therapeutic, Stent insertion
- 6630 Status post - Cardiovascular catheterization procedure, Therapeutic, Stent re-dilation
- 6650 Status post - Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion
- 6660 Status post - Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve
- 5590 Status post - Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)
- 5600 Status post - Shunt, Systemic to pulmonary, Central (shunt from aorta)
- 7130 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)
- 7230 Status post - Shunt, Systemic to pulmonary, Potts - Smith type (descending aorta to pulmonary artery)
- 5610 Status post - Shunt, Systemic to pulmonary, Other
- 5630 Status post - Shunt, Ligation and takedown
- 6095 Status post - Shunt, Reoperation
- 5640 Status post - PA banding (PAB)
- 5650 Status post - PA debanding
- 7200 Status post - PA band adjustment
- 5660 Status post - Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction)
- 5670 Status post - Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)

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- 5680 Status post - Glenn  
(unidirectional  
cavopulmonary anastomosis)  
(unidirectional Glenn)
  - 5690 Status post - Bilateral  
bidirectional cavopulmonary  
anastomosis (BBDCPA)  
(bilateral bidirectional Glenn)
  - 5700 Status post - HemiFontan
  - 6330 Status post - Superior  
cavopulmonary  
anastomosis(es) (Glenn or  
HemiFontan) +  
Atrioventricular valvuloplasty
  - 6130 Status post - Superior  
Cavopulmonary  
anastomosis(es) + PA  
reconstruction
  - 7300 Status post - Takedown of  
superior cavopulmonary  
anastomosis
  - 7140 Status post - Hepatic vein to  
azygous vein connection,  
Direct
  - 7150 Status post - Hepatic vein to  
azygous vein connection,  
Interposition graft
  - 7160 Status post - Kawashima  
operation (superior  
cavopulmonary connection in  
setting of interrupted IVC  
with azygous continuation)
  - 5710 Status post - Palliation, Other
  - 6360 Status post - ECMO  
cannulation
  - 6370 Status post - ECMO  
decannulation
  - 5910 Status post - ECMO procedure
  - 5900 Status post - Intraaortic  
balloon pump (IABP) insertion
  - 5920 Status post - Right/left heart  
assist device procedure
  - 6390 Status post - VAD explantation
  - 6380 Status post - VAD  
implantation
  - 7170 Status post - VAD change out
  - 6420 Status post -  
Echocardiography procedure,  
Sedated transesophageal  
echocardiogram
  - 6430 Status post -

- Echocardiography procedure,  
Sedated transthoracic  
echocardiogram
- 6435 Status post - Non-  
cardiovascular, Non-thoracic  
procedure on cardiac patient  
with cardiac anesthesia
- 6440 Status post - Radiology  
procedure on cardiac patient,  
Cardiac Computerized Axial  
Tomography (CT Scan)
- 6450 Status post - Radiology  
procedure on cardiac patient,  
Cardiac Magnetic Resonance  
Imaging (MRI)
- 6460 Status post - Radiology  
procedure on cardiac patient,  
Diagnostic radiology
- 6470 Status post - Radiology  
procedure on cardiac patient,  
Non-Cardiac Computerized  
Tomography (CT) on cardiac  
patient
- 6480 Status post - Radiology  
procedure on cardiac patient,  
Non-cardiac Magnetic  
Resonance Imaging (MRI) on  
cardiac patient
- 6490 Status post - Radiology  
procedure on cardiac patient,  
Therapeutic radiology
- 5720 Status post - Aneurysm,  
Ventricular, Right, Repair
- 5730 Status post - Aneurysm,  
Ventricular, Left, Repair
- 5740 Status post - Aneurysm,  
Pulmonary artery, Repair
- 5760 Status post - Cardiac tumor  
resection
- 5780 Status post - Pulmonary AV  
fistula repair/occlusion
- 5790 Status post - Ligation,  
Pulmonary artery
- 5802 Status post - Pulmonary  
embolectomy, Acute  
pulmonary embolus
- 5804 Status post - Pulmonary  
embolectomy, Chronic  
pulmonary embolus
- 5810 Status post - Pleural drainage  
procedure

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5820	Status post - Pleural procedure, Other
5830	Status post - Ligation, Thoracic duct
5840	Status post - Decortication
5850	Status post - Esophageal procedure
5860	Status post - Mediastinal procedure
5870	Status post - Bronchoscopy
5880	Status post - Diaphragm plication
5890	Status post - Diaphragm procedure, Other
5930	Status post - VATS (video-assisted thoracoscopic surgery)
5940	Status post - Minimally invasive procedure
5950	Status post - Bypass for noncardiac lesion
5960	Status post - Delayed sternal closure
5970	Status post - Mediastinal exploration
5980	Status post - Sternotomy wound drainage
7180	Status post - Intravascular stent removal
7220	Status post - Removal of transcatheter delivered device from heart
7210	Status post - Removal of transcatheter delivered device from blood vessel
5990	Status post - Thoracotomy, Other
6000	Status post - Cardiotomy, Other
6010	Status post - Cardiac procedure, Other
6020	Status post - Thoracic and/or mediastinal procedure, Other
6030	Status post - Peripheral vascular procedure, Other
6040	Status post - Miscellaneous procedure, Other
11777	Status post - Other procedure

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*Long Name:* Other Card-Congenital Procedure 1 *SeqNo:* 6515  
*Short Name:* **OCarCongProc1** *Core:* Yes  
*Section Name:* Congenital Defect Repair *Harvest:* Yes  
*DBTableName:* Adultdata1  
*Definition:* Indicate the first of the three most significant congenital procedures.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OCarCong

ParentLongName: Other Cardiac Congenital Except Unicuspid, Bicuspid, or Quadricuspid Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
10	PFO, Primary closure	Suture closure of patent foramen ovale (PFO).
20	ASD repair, Primary closure	Suture closure of secundum (most frequently), coronary sinus, sinus venosus or common atrium ASD.
30	ASD repair, Patch	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD.
40	ASD repair, Device	Closure of any type ASD (including PFO) using a device.
2110	ASD repair, Patch + PAPVC repair	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD plus PAPVC repair, any type
50	ASD, Common atrium (single atrium), Septation	Septation of common (single) atrium using any type patch material.
60	ASD creation/enlargement	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.
70	ASD partial closure	Intentional partial closure of any type ASD (partial suture or fenestrated patch closure).
80	Atrial septal fenestration	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.
85	Atrial fenestration closure	Closure of previously created atrial fenestration using any method including device, primary suture, or patch.
100	VSD repair, Primary closure	Suture closure of any type VSD.
110	VSD repair, Patch	Patch closure (using any type of patch material) of any type VSD.
120	VSD repair, Device	Closure of any type VSD using a device.
130	VSD, Multiple, Repair	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.
140	VSD creation/enlargement	Creation of a ventricular septal defect or enlargement of an existing ventricular septal defect.
150	Ventricular septal fenestration	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.
170	AVC (AVSD) repair, Complete (CAVSD)	Repair of complete AV canal (AVSD) using one- or two-patch or other technique, with or without mitral valve cleft repair.
180	AVC (AVSD) repair, Intermediate (Transitional)	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.
190	AVC (AVSD) repair, Partial (Incomplete) (PAVSD)	Repair of partial AV canal defect (primum ASD), any technique, with or without repair of cleft mitral valve.
2300	Valvuloplasty, Common atrioventricular valve	Common AV valve repair, any type
2250	Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve	Common AV valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
2230	Valve replacement, Common atrioventricular valve	Replacement of the common AV valve with a prosthetic valve
210	AP window repair	Repair of AP window using one- or two-patch technique with cardiopulmonary bypass; or, without cardiopulmonary bypass, using transcatheter device or surgical closure.
220	Pulmonary artery origin from ascending aorta (hemitruncus) repair	Repair of pulmonary artery origin from the ascending aorta by direct reimplantation, autogenous flap, or conduit, with or without use of cardiopulmonary bypass.
230	Truncus arteriosus repair	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).
240	Valvuloplasty, Truncal valve	Truncal valve repair, any type.
2290	Valvuloplasty converted to valve replacement in the same operation, Truncal valve	Truncal valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
250	Valve replacement, Truncal valve	Replacement of the truncal valve with a prosthetic valve.
2220	Truncus + Interrupted aortic arch repair (IAA) repair	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
260	PAPVC repair	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.
270	PAPVC, Scimitar, Repair	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.
2120	PAPVC repair, Baffle redirection to left atrium with systemic vein translocation (Warden) (SVC sewn to right atrial appendage)	An intracardiac baffle is created to redirect pulmonary venous return to the left atrium and SVC sewn to right atrial appendage)
280	TAPVC repair	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.
2200	TAPVC repair + Shunt - systemic-to-pulmonary	Repair of TAPVC, any type plus a systemic to pulmonary shunt creation
290	Cor triatriatum repair	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.
300	Pulmonary venous stenosis repair	Repair of pulmonary venous stenosis, whether congenital or acquired. Repair can be accomplished with a variety of approaches: sutureless, patch venoplasty, stent placement, etc.
310	Atrial baffle procedure (non-Mustard, non-Senning)	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.
330	Anomalous systemic venous connection repair	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).
340	Systemic venous stenosis repair	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.
350	TOF repair, No	Tetralogy of Fallot repair (assumes VSD closure and relief of

	ventriculotomy	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.
360	TOF repair, Ventriculotomy, Nontransannular patch	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.
370	TOF repair, Ventriculotomy, Transannular patch	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.
3330	TOF repair, Ventriculotomy, Transannular patch, plus native valve reconstruction	
3340	TOF repair, Ventriculotomy, Transannular patch, with monocusp or other surgically fashioned RVOT valve	
380	TOF repair, RV-PA conduit	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.
390	TOF - AVC (AVSD) repair	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.
400	TOF - Absent pulmonary valve repair	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.
420	Pulmonary atresia - VSD (including TOF, PA) repair	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.
2700	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])	1-stage repair that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
2710	Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])	VSD closure + RV to PA connection [with or without conduit])
2720	Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])	Completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization
2730	Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)	Complete unifocalization , all usable MAPCA[s] are incorporated
2740	Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)	Incomplete unifocalization, not all usable MAPCA[s] are incorporated
2750	Unifocalization MAPCA(s), Unilateral pulmonary unifocalization	MAPCA(s), Unilateral pulmonary unifocalization (one side)
440	Unifocalization MAPCA(s)	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.
450	Occlusion of MAPCA(s)	Occlusion, or closing off, of MAPCAs. This may be done with a transcatheter occluding device, usually a coil, or by surgical techniques.
460	Valvuloplasty, Tricuspid	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.
2280	Valvuloplasty converted to valve replacement in the same operation, Tricuspid	Tricuspid valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
465	Ebstein's repair	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.
470	Valve replacement, Tricuspid (TVR)	Replacement of the tricuspid valve with a prosthetic valve.
480	Valve closure, Tricuspid (exclusion, univentricular approach)	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.
490	Valve excision, Tricuspid (without replacement)	Excision of the tricuspid valve without placement of a prosthetic valve.
500	Valve surgery, Other, Tricuspid	Other tricuspid valve surgery not specified in procedure codes.
510	RVOT procedure	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.
520	1 1/2 ventricular repair	Partial biventricular repair; includes intracardiac repair with bidirectional cavopulmonary anastomosis to volume unload a small ventricle or poorly functioning ventricle.
530	PA, reconstruction (plasty), Main (trunk)	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.
540	PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation)	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.
550	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch)	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.
3350	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, proximal to first segmental branch)	
3360	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, beyond the first segmental branch)	
570	DCRV repair	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.
3370	RV Rehabilitation, Endocardial Resection	
590	Valvuloplasty, Pulmonic	Valvuloplasty of the pulmonic valve may include a range of techniques including but not limited to: valvotomy with or without bypass, commissurotomy, and valvuloplasty.
2270	Valvuloplasty converted to valve replacement in the same operation, Pulmonic	Pulmonic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
600	Valve replacement, Pulmonic (PVR)	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.
630	Valve excision, Pulmonary (without replacement)	Excision of the pulmonary valve without placement of a prosthetic valve.
640	Valve closure, Semilunar	Closure of a semilunar valve (pulmonic or aortic) by any technique.
650	Valve surgery, Other, Pulmonic	Other pulmonic valve surgery not specified in procedure codes.
610	Conduit placement, RV to PA	Placement of a conduit, any type, from RV to PA.
620	Conduit placement, LV to PA	Placement of a conduit, any type, from LV to PA.
1774	Conduit placement, Ventricle to aorta	Placement of a conduit from the right or left ventricle to the aorta.
1772	Conduit placement, Other	Placement of a conduit from any chamber or vessel to any vessel, valved or valveless, not listed elsewhere.
580	Conduit reoperation	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.).
660	Valvuloplasty, Aortic	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).
2240	Valvuloplasty converted to valve replacement in the same operation, Aortic	Aortic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
2310	Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure	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
2320	Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure	Aortic valve repair attempted, converted to Konno aortoventriculoplasty using a pulmonary autograft root for the aortic root replacement.
670	Valve replacement, Aortic (AVR)	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.
680	Valve replacement, Aortic (AVR), Mechanical	Replacement of the aortic valve with a mechanical prosthetic valve.
690	Valve replacement, Aortic (AVR), Bioprosthetic	Replacement of the aortic valve with a bioprosthetic prosthetic valve.
700	Valve replacement, Aortic (AVR), Homograft	Replacement of the aortic valve with a homograft prosthetic valve.
715	Aortic root replacement, Bioprosthetic	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.
720	Aortic root replacement, Mechanical	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.
730	Aortic root replacement, Homograft	Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a homograft.
735	Aortic root replacement, Valve sparing	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).
740	Ross procedure	Replacement of the aortic valve with a pulmonary autograft and replacement of the pulmonary valve with a homograft conduit.
750	Konno procedure	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.
760	Ross-Konno procedure	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.
770	Other annular enlargement procedure	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.
780	Aortic stenosis, Subvalvar, Repair	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.
2100	Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS	Subvalvar aortic stenosis repair including excision and myectomy
790	Aortic stenosis, Supravalvar, Repair	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.
800	Valve surgery, Other, Aortic	Other aortic valve surgery not specified in other procedure codes.
3380	Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis	
810	Sinus of Valsalva, Aneurysm repair	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.
820	LV to aorta tunnel repair	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.
830	Valvuloplasty, Mitral	Repair of mitral valve including, but not limited to: valvotomy (closed or open heart), cleft repair, annuloplasty with or without ring, chordal reconstruction, commissurotomy, leaflet repair, or papillary muscle repair.
2260	Valvuloplasty converted to valve replacement in the same operation, Mitral	Mitral valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
840	Mitral stenosis, Supravalvar mitral ring repair	Supravalvar mitral ring repair.
850	Valve replacement, Mitral (MVR)	Replacement of mitral valve with prosthetic valve, any kind, in suprannular or annular position.
860	Valve surgery, Other, Mitral	Other mitral valve surgery not specified in procedure codes.
870	Norwood procedure	The Norwood operation is synonymous with the term 'Norwood (Stage 1)' and is defined as an aortopulmonary connection and neo-aortic 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
880	HLHS biventricular repair	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.
3390	LV Endocardial Fibroelastosis resection	
2755	Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neo-aorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)	
2160	Hybrid Approach "Stage 1", Application of RPA & LPA bands	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".
2170	Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA)	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".
2180	Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) + application of RPA & LPA bands	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".
2140	Hybrid approach "Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Aortic arch repair (Norwood [Stage 1] + Superior Cavopulmonary anastomosis(es) + PA Debanding)	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.
2150	Hybrid approach "Stage 2",	A "Hybrid Procedure" is defined as a procedure that combines

Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Without aortic arch repair	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.
2760 Hybrid Approach, Transcardiac balloon dilation	
2770 Hybrid Approach, Transcardiac transcatheter device placement	
890 Transplant, Heart	Heart transplantation, any technique, allograft or xenograft.
900 Transplant, Heart and lung	Heart and lung (single or double) transplantation.
910 Partial left ventriculectomy (LV volume reduction surgery) (Batista)	Wedge resection of LV muscle, with suturing of cut edges together, to reduce LV volume.
920 Pericardial drainage procedure	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).
930 Pericardiectomy	Surgical removal of the pericardium.
940 Pericardial procedure, Other	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.
950 Fontan, 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.
960 Fontan, Atrio-ventricular connection	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.
970 Fontan, TCPC, Lateral tunnel, Fenestrated	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.
980	Fontan, TCPC, Lateral tunnel, Nonfenestrated	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.
1000	Fontan, TCPC, External conduit, Fenestrated	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.
1010	Fontan, TCPC, External conduit, Nonfenestrated	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.
2780	Fontan, TCPC, Intra/extracardiac conduit, Fenestrated	The TCPC with Intra/extracardiac conduit is a TCPC type of Fontan operation created with a tube where the tube is attached to the inferior caval vein inside of the heart, and then the tube passes outside of the heart and is attached to the pulmonary artery outside of the heart. "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

2790 Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated	<p>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.</p> <p>The TCPC with Intra/extracardiac conduit is a TCPC type of Fontan operation created with a tube where the tube is attached to the inferior caval vein inside of the heart, and then the tube passes outside of the heart and is attached to the pulmonary artery outside of the heart. “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.</p>
3310 Fontan, TCPC, External conduit, Hepatic veins to pulmonary artery, Fenestrated	
3320 Fontan, TCPC, External conduit, Hepatic veins to pulmonary artery, Nonfenestrated	
1025 Fontan revision or conversion (Re-do Fontan)	<p>“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.</p>
1030 Fontan, Other	<p>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.</p>
2340 Fontan + Atrioventricular valvuloplasty	<p>“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.</p>
1035 Ventricular septation	<p>Creation of a prosthetic ventricular septum. Surgical procedure used to septate univentricular hearts with two atrioventricular</p>

		valves. Additional procedures, such as resection of subpulmonic stenosis, should be listed separately.
1050	Congenitally corrected TGA repair, Atrial switch and ASO (double switch)	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.
1060	Congenitally corrected TGA repair, Atrial switch and Rastelli	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.
1070	Congenitally corrected TGA repair, VSD closure	Repair of congenitally corrected TGA by VSD closure only.
1080	Congenitally corrected TGA repair, VSD closure and LV to PA conduit	Repair of congenitally corrected TGA by VSD closure and placement of an LV-to-PA conduit.
1090	Congenitally corrected TGA repair, Other	Any procedures for correction of CCTGA not otherwise specified in other listed procedure codes.
1110	Arterial switch operation (ASO)	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.
1120	Arterial switch operation (ASO) and VSD repair	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.
1123	Arterial switch procedure + Aortic arch repair	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.
1125	Arterial switch procedure and VSD repair + Aortic arch repair	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.
1130	Senning	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.
1140	Mustard	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.
1145	Atrial baffle procedure, Mustard or Senning revision	Revision of a previous atrial baffle procedure (either Mustard or Senning), for any reason (e.g., obstruction, baffle leak).
1150	Rastelli	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.
1160	REV	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.
2190	Aortic root translocation over left ventricle (Including Nikaidoh procedure)	
2210	TGA, Other procedures (Kawashima, LV-PA conduit, other)	
3400	Double root translocation	
1180	DORV, Intraventricular tunnel repair	Repair of DORV using a tunnel closure of the VSD to the aortic valve. This also includes the posterior straight tunnel repair of Kawashima
3410	DORV repair, No Ventriculotomy	
3420	DORV repair, Ventriculotomy, Nontransannular patch	
3430	DORV repair, Ventriculotomy, Transannular patch	
3440	DORV repair, RV-PA conduit	
3450	DORV - AVC (AVSD) repair	



1200	DOLV repair	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.
1210	Coarctation repair, End to end	Repair of coarctation of aorta by excision of the coarctation segment and end-to-end circumferential anastomosis of the aorta.
1220	Coarctation repair, End to end, Extended	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.
3460	Coarctation repair, Descending aorta anastomosed to Ascending aorta	
1230	Coarctation repair, Subclavian flap	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.
1240	Coarctation repair, Patch aortoplasty	Repair of coarctation of the aorta by incising the coarctation site with placement of a patch sutured in place longitudinally along the aortotomy edge.
1250	Coarctation repair, Interposition graft	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.
3470	Coarctation repair, Extra-anatomic Bypass graft	
1260	Coarctation repair, Other	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.
1275	Coarctation repair + VSD repair	Coarctation of aorta repair, any technique, and simultaneous VSD repair, any type VSD, any type repair.
1280	Aortic arch repair	Aortic arch repair, any technique.
1285	Aortic arch repair + VSD repair	Aortic arch repair, any technique, and simultaneous VSD repair, any type VSD, any type repair. This includes repair of IAA with VSD.
1290	Coronary artery fistula ligation	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).
1291	Anomalous origin of coronary artery from pulmonary artery repair	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).
1300	Coronary artery bypass	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.).
1305	Anomalous aortic origin of coronary artery from aorta (AAOCA) repair	
1310	Coronary artery procedure, Other	Any coronary artery procedure not specifically listed.
1320	Interrupted aortic arch repair	Repair of interrupted aortic arch (any type) by any technique (direct anastomosis, prosthetic graft, etc.). Does not include repair of IAA-VSD.
1330	PDA closure, Surgical	Closure of a PDA by any surgical technique (ligation, division, clip) using any approach (i.e., thoracotomy, thoracoscopic, etc.).
1340	PDA closure, Device	Closure of a PDA by device using transcatheter techniques.
1360	Vascular ring repair	Repair of vascular ring (any type, except pulmonary artery sling) by any technique.
1365	Aortopexy	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).
1370	Pulmonary artery sling repair	Pulmonary artery sling repair by any technique.
1380	Aortic aneurysm repair	Aortic aneurysm repair by any technique.
1390	Aortic dissection repair	Aortic dissection repair by any technique.
1400	Lung biopsy	Lung biopsy, any technique.
1410	Transplant, lung(s)	Lung or lobe transplantation of any type.
1420	Lung procedure, Other	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.
1440	Tracheal procedure	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.
2800	Muscle flap, Trunk (i.e. intercostal, pectus, or serratus muscle)	A trunk muscle flap (intercostal, pectus, or serratus muscle) is rotated to buttress or augment a suture line, anastomosis or fill the pleural space.
2810	Muscle flap, Trunk (i.e. latissimus dorsi)	A trunk muscle flap (latissimus dorsi) is rotated to buttress or augment a suture line, anastomosis or fill the pleural space.
2820	Removal, Sternal wire	Excision of wire used to approximate sternum, previous sternotomy
2830	Rib excision, Complete	Complete excision of rib(s)
2840	Rib excision, Partial	Partial excision of rib(s)
2850	Sternal fracture - open treatment	Repair of a sternal fracture with sutures, wires, plates or bars.
2860	Sternal resection, Radical resection of sternum	Involves removal of the sternum with complex reconstructive requirements for either a tumor or severe sternal infection.
2870	Sternal resection, Radical resection of sternum with	Involves resection of the sternum and mediastinal lymph node dissection.

	mediastinal lymphadenectomy	
2880	Tumor of chest wall - Excision including ribs	Excision of ribs and attached muscles for a benign or malignant tumor of the chest wall. When three or less ribs are taken or if the defect is covered by the scapula, reconstruction may not be necessary.
2890	Tumor of chest wall - Excision including ribs, With reconstruction	Resection of the chest wall tumor with reconstruction of the defect, usually with plastic mesh (marlex, prolene), methylmethacrylate/mesh sandwich or a muscle flap.
2900	Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor	Excision of a deep chest wall tumor that involves the muscles but not the ribs. These would usually be benign tumors such as a fibroma or a deep lipoma.
2910	Tumor of soft tissue of thorax - Excision of subcutaneous tumor	Excision of tumor in the skin/fat of the chest wall-typically a lipoma.
2920	Tumor of soft tissue of thorax - Radical resection	En-bloc, radical excision of a cancer of the chest wall muscles, involving the skin, fat and muscles. Typically it would be a desmoid tumor or a sarcoma malignant fibrous histiocytoma, rhabdomyosarcoma.
2930	Hyoid myotomy and suspension	Typically done as a suprahyoid laryngeal release to reduce tension on a cervical tracheal resection anastomosis. The hyoid bone is cut laterally on both sides to allow it to drop down and thus lower the larynx and trachea.
2940	Muscle flap, Neck	A neck muscle flap is rotated to buttress or augment a suture line, anastomosis or fill a space. Commonly used neck muscles are strap muscles, sternocleidomastoid muscle, levator scapulae.
2950	Procedure on neck	Unlisted procedure of the neck
2960	Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor	Excision of a tumor that involves the muscles of the neck. These would usually be benign tumors such as a fibroma or a deep lipoma.
2970	Tumor of soft tissue of neck - Excision of subcutaneous tumor	Excision of a tumor in the skin/fat of the neck-typically a lipoma.
2980	Tumor of soft tissue of neck - Radical resection	A surgical procedure in which the fibrofatty contents of the neck are removed for the treatment of cervical lymphatic metastases. Neck dissection is most commonly used in the management of cancers of the upper aerodigestive tract. It is also used for malignancies of the skin of the head and neck area, the thyroid, and the salivary glands.
2990	Pectus bar removal	Removal of a previously implanted chest wall bar
3000	Pectus bar repositioning	Repositioning of a previously implanted chest wall bar
3010	Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy	Placement of a Nuss transverse chest wall bar to push the sternum forward to repair a pectus deformity, with thoracoscopy
3020	Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy	Placement of a Nuss transverse chest wall bar to push the sternum forward to repair a pectus deformity, without thoracoscopy
3030	Pectus repair, Open repair	Resection of several costal cartilages, a partial osteotomy of the sternum, and often placement of a temporary bar for stabilization of pectus chest wall deformity
3040	Division of scalenus anticus,	Repair of Thoracic Outlet Syndrome variant where the scalenus

	With resection of a cervical rib	anticus muscle or a band from it impinges on the brachial plexus along with resection of the abnormal cervical rib
3050	Division of scalenus anticus, Without resection of a cervical rib	Repair of Thoracic Outlet Syndrome variant where the scalenus anticus muscle or a band from it impinges on the brachial plexus along without resection of the abnormal cervical rib
3060	Rib excision, Excision of cervical rib	Removal of the first rib or a cervical rib for treatment of Thoracic Outlet Syndrome
3070	Rib excision, Excision of cervical rib, With sympathectomy	Removal of the first rib or a cervical rib and sympathectomy for treatment of Thoracic Outlet Syndrome
3080	Rib excision, Excision of first rib	Removal of the first rib
3090	Rib excision, Excision of first rib, With sympathectomy	Removal of the first rib and sympathectomy
3100	Procedure on thorax	Unlisted procedure on thorax
1450	Pacemaker implantation, Permanent	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.).
1460	Pacemaker procedure	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.
2350	Explantation of pacing system	Removal of pacemaker generator and wires
1470	ICD (AICD) implantation	Implantation of an (automatic) implantable cardioverter defibrillator system.
1480	ICD (AICD) ([automatic] implantable cardioverter defibrillator) procedure	Any revision to a previously placed AICD including revisions to leads, pads, generators, pockets. This may include explantation procedures as well.
1490	Arrhythmia surgery - atrial, Surgical Ablation	Surgical ablation (any type) of any atrial arrhythmia.
1500	Arrhythmia surgery - ventricular, Surgical Ablation	Surgical ablation (any type) of any ventricular arrhythmia.
2500	Cardiovascular catheterization procedure, Diagnostic	Invasive diagnostic procedure involving the heart and great vessels
2520	Cardiovascular catheterization procedure, Diagnostic, Angiographic data obtained	Invasive diagnostic procedure involving the heart and great vessels using angiography
2550	Cardiovascular catheterization procedure, Diagnostic, Electrophysiology alteration	
2540	Cardiovascular catheterization procedure, Diagnostic, Hemodynamic alteration	Invasive diagnostic procedure involving pressure or flow alteration in the cardiovascular system
2510	Cardiovascular catheterization procedure, Diagnostic, Hemodynamic data obtained	Invasive diagnostic procedure involving pressure and flow assessment of the heart and great vessels
2530	Cardiovascular catheterization procedure, Diagnostic, Transluminal test occlusion	

2410	Cardiovascular catheterization procedure, Therapeutic	Invasive therapeutic procedure involving the heart and great vessels
2670	Cardiovascular catheterization procedure, Therapeutic, Adjunctive therapy	
1540	Cardiovascular catheterization procedure, Therapeutic, Balloon dilation	Invasive therapeutic procedure involving balloon dilatation of a cardiovascular structure
2590	Cardiovascular catheterization procedure, Therapeutic, Balloon valvotomy	Invasive therapeutic procedure involving balloon dilatation of a valve
1580	Cardiovascular catheterization procedure, Therapeutic, Coil implantation	Invasive therapeutic procedure involving implantation of a coil
1560	Cardiovascular catheterization procedure, Therapeutic, Device implantation	Invasive therapeutic procedure involving implantation of a device
3110	Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted	Invasive therapeutic procedure involving attempted but unsuccessful implantation of a device
2690	Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation.	Invasive therapeutic procedure involving Catheter based creation of lesions in the heart with radiofrequency energy, cryotherapy , or ultrasound energy to cure or control arrhythmias
3120	Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal	Invasive therapeutic procedure involving removal of an intravascular foreign body
2640	Cardiovascular catheterization procedure, Therapeutic, Perforation (establishing interchamber and/or intervessel communication)	Invasive therapeutic procedure establishing interchamber and/or intervessel communication
2580	Cardiovascular catheterization procedure, Therapeutic, Septostomy	Invasive therapeutic procedure establishing an intracardiac septal communication
1550	Cardiovascular catheterization procedure, Therapeutic, Stent insertion	Invasive therapeutic procedure involving implantation of a stent
2630	Cardiovascular catheterization procedure, Therapeutic, Stent re-dilatation	Invasive therapeutic procedure involving dilatation of a previously implanted stent
2650	Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion	
2660	Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve	Invasive therapeutic procedure involving deployment/ implantation of a valve
1590	Shunt, Systemic to pulmonary, Modified Blalock-Taussig	Placement of a tube graft from a branch of the aortic arch to the pulmonary artery with or without bypass, from any approach

	Shunt (MBTS)	(thoracotomy, sternotomy).
1600	Shunt, Systemic to pulmonary, Central (shunt from aorta)	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).
3130	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)	Creation of a central shunt with an end-to-side connection between the transected main pulmonary artery and the side of the ascending aorta
3230	Shunt, Systemic to pulmonary, Potts - Smith type (descending aorta to pulmonary artery)	
1610	Shunt, Systemic to pulmonary, Other	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.
1630	Shunt, Ligation and takedown	Takedown of any shunt.
2095	Shunt, Reoperation	Revision or replacement of a previously created shunt
1640	PA banding (PAB)	Placement of a pulmonary artery band, any type.
1650	PA debanding	Debanding of pulmonary artery. Please list separately any pulmonary artery reconstruction required.
3200	PA band adjustment	
1660	Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction)	In the Damus-Kaye-Stansel procedure the proximal transected main pulmonary artery is connected by varying techniques to the aorta.
1670	Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)	Superior vena cava to pulmonary artery anastomosis allowing flow to both pulmonary arteries with an end-to-side superior vena-to-pulmonary artery anastomosis.
1680	Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)	Superior vena cava to ipsilateral pulmonary artery anastomosis (i.e., LSVC to LPA, RSVC to RPA).
1690	Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)	Bilateral superior vena cava-to-pulmonary artery anastomoses (requires bilateral SVCs).
1700	HemiFontan	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 close junction of the SVC and the right atrium.
2330	Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty	
2130	Superior Cavopulmonary anastomosis(es) + PA reconstruction	
3300	Takedown of superior cavopulmonary anastomosis	
3140	Hepatic vein to azygous vein connection, Direct	
3150	Hepatic vein to azygous vein connection, Interposition graft	
3160	Kawashima operation (superior cavopulmonary connection in setting of interrupted IVC with azygous continuation)	
1710	Palliation, Other	Any other palliative procedure not specifically listed.
2360	ECMO cannulation	Insertion of cannulas for extracorporeal membrane oxygenation
2370	ECMO decannulation	Removal of cannulas for extracorporeal membrane oxygenation
1910	ECMO procedure	Any ECMO procedure (cannulation, decannulation, etc.).
1900	Intraaortic balloon pump (IABP) insertion	Insertion of intraaortic balloon pump by any technique.
1920	Right/left heart assist device procedure	Any right, left, or biventricular assist device procedure (placement, removal etc.).
2390	VAD explantation	Removal of ventricular assist device
2380	VAD implantation	Insertion of a ventricular assist device
3170	VAD change out	Removal of previously inserted ventricular assist device and insertion of a new device
2420	Echocardiography procedure, Sedated transesophageal echocardiogram	Procedural sedation for echocardiogram
2430	Echocardiography procedure, Sedated transthoracic echocardiogram	Procedural sedation for echocardiogram, transthoracic
2435	Non-cardiovascular, Non-thoracic procedure on cardiac patient with cardiac anesthesia	Anesthesia provided by cardiac anesthesiologist for patient with congenital heart disease undergoing a non- cardiovascular, non-thoracic procedure
2440	Radiology procedure on cardiac patient, Cardiac Computerized Axial Tomography (CT Scan)	A patient with congenital heart disease undergoing cardiac CT scan
2450	Radiology procedure on cardiac patient, Cardiac	A patient with congenital heart disease undergoing cardiac MRI

	Magnetic Resonance Imaging (MRI)	
2460	Radiology procedure on cardiac patient, Diagnostic radiology	A patient with congenital heart disease undergoing a diagnostic radiology procedure
2470	Radiology procedure on cardiac patient, Non-Cardiac Computerized Tomography (CT) on cardiac patient	A patient with congenital heart disease undergoing a non-cardiac CT scan
2480	Radiology procedure on cardiac patient, Non-cardiac Magnetic Resonance Imaging (MRI) on cardiac patient	A patient with congenital heart disease undergoing non-cardiac MRI
2490	Radiology procedure on cardiac patient, Therapeutic radiology	A patient with congenital heart disease undergoing a therapeutic radiology procedure
1720	Aneurysm, Ventricular, Right, Repair	Repair of right ventricular aneurysm, any technique.
1730	Aneurysm, Ventricular, Left, Repair	Repair of left ventricular aneurysm, any technique.
1740	Aneurysm, Pulmonary artery, Repair	Repair of pulmonary artery aneurysm, any technique.
1760	Cardiac tumor resection	Resection of cardiac tumor, any type.
1780	Pulmonary AV fistula repair/occlusion	Repair or occlusion of a pulmonary arteriovenous fistula.
1790	Ligation, Pulmonary artery	Ligation or division of the pulmonary artery. Most often performed as a secondary procedure.
1802	Pulmonary embolectomy, Acute pulmonary embolus	Acute pulmonary embolism (clot) removal, through catheter or surgery.
1804	Pulmonary embolectomy, Chronic pulmonary embolus	Chronic pulmonary embolism (clot) removal, through catheter or surgery.
1810	Pleural drainage procedure	Pleural drainage procedure via thoracocentesis, tube thoracostomy, or open surgical drainage.
1820	Pleural procedure, Other	Other pleural procedures not specifically listed; may include pleurodesis (mechanical, talc, antibiotic or other), among others.
1830	Ligation, Thoracic duct	Ligation of the thoracic duct; most commonly for persistent chylothorax.
1840	Decortication	Decortication of the lung by any technique.
1850	Esophageal procedure	Any procedure performed on the esophagus.
1860	Mediastinal procedure	Any non-cardiovascular mediastinal procedure not otherwise listed.
1870	Bronchoscopy	Bronchoscopy, rigid or flexible, for diagnostic, biopsy, or treatment purposes (laser, stent, dilation, lavage).
1880	Diaphragm plication	Plication of the diaphragm; most often for diaphragm paralysis due to phrenic nerve injury.
1890	Diaphragm procedure, Other	Any diaphragm procedure not specifically listed.
1930	VATS (video-assisted thoracoscopic surgery)	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).



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1940	Minimally invasive procedure	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).
1950	Bypass for noncardiac lesion	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).
1960	Delayed sternal closure	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.
1970	Mediastinal exploration	Mediastinal exploration, most often for postoperative control of bleeding or tamponade, but may be exploration to assess mediastinal mass, etc.
1980	Sternotomy wound drainage	Drainage of the sternotomy wound.
3180	Intravascular stent removal	Removal of a previously placed intravascular stent
3220	Removal of transcatheter-delivered device from heart	
3210	Removal of transcatheter-delivered device from blood vessel	
1990	Thoracotomy, Other	Any procedure performed through a thoracotomy incision not otherwise listed.
2000	Cardiotomy, Other	Any procedure involving an incision in the heart that is not otherwise listed.
2010	Cardiac procedure, Other	Any cardiac procedure, bypass or non-bypass, that is not otherwise listed.
2020	Thoracic and/or mediastinal procedure, Other	Any thoracic and/or mediastinal procedure not otherwise listed.
2030	Peripheral vascular procedure, Other	Any peripheral vascular procedure; may include procedures such as femoral artery repair, iliac artery repair, etc.
2040	Miscellaneous procedure, Other	Any miscellaneous procedure not otherwise listed.
7777	Other procedure	Any procedure on any organ system not otherwise listed.

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*Long Name:* Other Card-Congenital Procedure 2 *SeqNo:* 6520  
*Short Name:* **OCarCongProc2** *Core:* Yes  
*Section Name:* Congenital Defect Repair *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the second of the three most significant congenital procedures.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OCarCong

ParentLongName: Other Cardiac Congenital Except Unicuspid, Bicuspid, or Quadricuspid Valve

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	No other congenital procedures	
10	PFO, Primary closure	Suture closure of patent foramen ovale (PFO).
20	ASD repair, Primary closure	Suture closure of secundum (most frequently), coronary sinus, sinus venosus or common atrium ASD.
30	ASD repair, Patch	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD.
40	ASD repair, Device	Closure of any type ASD (including PFO) using a device.
2110	ASD repair, Patch + PAPVC repair	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD plus PAPVC repair, any type
50	ASD, Common atrium (single atrium), Septation	Septation of common (single) atrium using any type patch material.
60	ASD creation/enlargement	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.
70	ASD partial closure	Intentional partial closure of any type ASD (partial suture or fenestrated patch closure).
80	Atrial septal fenestration	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.
85	Atrial fenestration closure	Closure of previously created atrial fenestration using any method including device, primary suture, or patch.
100	VSD repair, Primary closure	Suture closure of any type VSD.
110	VSD repair, Patch	Patch closure (using any type of patch material) of any type VSD.
120	VSD repair, Device	Closure of any type VSD using a device.
130	VSD, Multiple, Repair	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.
140	VSD creation/enlargement	Creation of a ventricular septal defect or enlargement of an existing ventricular septal defect.
150	Ventricular septal fenestration	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.
170	AVC (AVSD) repair, Complete (CAVSD)	Repair of complete AV canal (AVSD) using one- or two-patch or other technique, with or without mitral valve cleft repair.
180	AVC (AVSD) repair, Intermediate (Transitional)	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.
190	AVC (AVSD) repair, Partial (Incomplete) (PAVSD)	Repair of partial AV canal defect (primum ASD), any technique, with or without repair of cleft mitral valve.
2300	Valvuloplasty, Common atrioventricular valve	Common AV valve repair, any type
2250	Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve	Common AV valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
2230	Valve replacement, Common atrioventricular valve	Replacement of the common AV valve with a prosthetic valve
210	AP window repair	Repair of AP window using one- or two-patch technique with cardiopulmonary bypass; or, without cardiopulmonary bypass, using transcatheter device or surgical closure.
220	Pulmonary artery origin from ascending aorta (hemitruncus) repair	Repair of pulmonary artery origin from the ascending aorta by direct reimplantation, autogenous flap, or conduit, with or without use of cardiopulmonary bypass.
230	Truncus arteriosus repair	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).
240	Valvuloplasty, Truncal valve	Truncal valve repair, any type.
2290	Valvuloplasty converted to valve replacement in the same operation, Truncal valve	Truncal valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
250	Valve replacement, Truncal valve	Replacement of the truncal valve with a prosthetic valve.
2220	Truncus + Interrupted aortic arch repair (IAA) repair	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
260	PAPVC repair	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.
270	PAPVC, Scimitar, Repair	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.
2120	PAPVC repair, Baffle redirection to left atrium with systemic vein translocation (Warden) (SVC sewn to right atrial appendage)	An intracardiac baffle is created to redirect pulmonary venous return to the left atrium and SVC sewn to right atrial appendage)
280	TAPVC repair	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.
2200	TAPVC repair + Shunt - systemic-to-pulmonary	Repair of TAPVC, any type plus a systemic to pulmonary shunt creation
290	Cor triatriatum repair	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.
300	Pulmonary venous stenosis repair	Repair of pulmonary venous stenosis, whether congenital or acquired. Repair can be accomplished with a variety of approaches: sutureless, patch venoplasty, stent placement, etc.
310	Atrial baffle procedure (non-Mustard, non-Senning)	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.
330	Anomalous systemic venous connection repair	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).
340	Systemic venous stenosis repair	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.
350	TOF repair, No	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.
360	TOF repair, Ventriculotomy, Nontransannular patch	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.
370	TOF repair, Ventriculotomy, Transannular patch	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.
3330	TOF repair, Ventriculotomy, Transannular patch, plus native valve reconstruction	
3340	TOF repair, Ventriculotomy, Transannular patch, with monocusp or other surgically fashioned RVOT valve	
380	TOF repair, RV-PA conduit	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.
390	TOF - AVC (AVSD) repair	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.
400	TOF - Absent pulmonary valve repair	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.
420	Pulmonary atresia - VSD (including TOF, PA) repair	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.
2700	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])	1-stage repair that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
2710	Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])	VSD closure + RV to PA connection [with or without conduit])
2720	Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])	Completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization
2730	Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)	Complete unifocalization , all usable MAPCA[s] are incorporated
2740	Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)	Incomplete unifocalization, not all usable MAPCA[s] are incorporated
2750	Unifocalization MAPCA(s), Unilateral pulmonary unifocalization	MAPCA(s), Unilateral pulmonary unifocalization (one side)
440	Unifocalization MAPCA(s)	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.
450	Occlusion of MAPCA(s)	Occlusion, or closing off, of MAPCAs. This may be done with a transcatheter occluding device, usually a coil, or by surgical techniques.
460	Valvuloplasty, Tricuspid	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.
2280	Valvuloplasty converted to valve replacement in the same operation, Tricuspid	Tricuspid valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
465	Ebstein's repair	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.
470	Valve replacement, Tricuspid (TVR)	Replacement of the tricuspid valve with a prosthetic valve.
480	Valve closure, Tricuspid (exclusion, univentricular approach)	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.
490	Valve excision, Tricuspid (without replacement)	Excision of the tricuspid valve without placement of a prosthetic valve.
500	Valve surgery, Other, Tricuspid	Other tricuspid valve surgery not specified in procedure codes.
510	RVOT procedure	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.
520	1 1/2 ventricular repair	Partial biventricular repair; includes intracardiac repair with bidirectional cavopulmonary anastomosis to volume unload a small ventricle or poorly functioning ventricle.
530	PA, reconstruction (plasty), Main (trunk)	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.
540	PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation)	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.
550	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch)	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.
3350	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, proximal to first segmental branch)	
3360	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, beyond the first segmental branch)	
570	DCRV repair	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.
3370	RV Rehabilitation, Endocardial Resection	
590	Valvuloplasty, Pulmonic	Valvuloplasty of the pulmonic valve may include a range of techniques including but not limited to: valvotomy with or without bypass, commissurotomy, and valvuloplasty.
2270	Valvuloplasty converted to valve replacement in the same operation, Pulmonic	Pulmonic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
600	Valve replacement, Pulmonic (PVR)	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.
630	Valve excision, Pulmonary (without replacement)	Excision of the pulmonary valve without placement of a prosthetic valve.
640	Valve closure, Semilunar	Closure of a semilunar valve (pulmonic or aortic) by any technique.
650	Valve surgery, Other, Pulmonic	Other pulmonic valve surgery not specified in procedure codes.
610	Conduit placement, RV to PA	Placement of a conduit, any type, from RV to PA.
620	Conduit placement, LV to PA	Placement of a conduit, any type, from LV to PA.
1774	Conduit placement, Ventricle to aorta	Placement of a conduit from the right or left ventricle to the aorta.
1772	Conduit placement, Other	Placement of a conduit from any chamber or vessel to any



		vessel, valved or valveless, not listed elsewhere.
580	Conduit reoperation	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.).
660	Valvuloplasty, Aortic	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).
2240	Valvuloplasty converted to valve replacement in the same operation, Aortic	Aortic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
2310	Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure	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
2320	Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure	Aortic valve repair attempted, converted to Konno aortoventriculoplasty using a pulmonary autograft root for the aortic root replacement.
670	Valve replacement, Aortic (AVR)	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.
680	Valve replacement, Aortic (AVR), Mechanical	Replacement of the aortic valve with a mechanical prosthetic valve.
690	Valve replacement, Aortic (AVR), Bioprosthetic	Replacement of the aortic valve with a bioprosthetic prosthetic valve.
700	Valve replacement, Aortic (AVR), Homograft	Replacement of the aortic valve with a homograft prosthetic valve.
715	Aortic root replacement, Bioprosthetic	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.
720	Aortic root replacement, Mechanical	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.
730	Aortic root replacement, Homograft	Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a homograft.
735	Aortic root replacement, Valve sparing	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).
740	Ross procedure	Replacement of the aortic valve with a pulmonary autograft and replacement of the pulmonary valve with a homograft conduit.
750	Konno procedure	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.
760	Ross-Konno procedure	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.
770	Other annular enlargement procedure	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.
780	Aortic stenosis, Subvalvar, Repair	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.
2100	Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS	Subvalvar aortic stenosis repair including excision and myectomy
790	Aortic stenosis, Supravalvar, Repair	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.
800	Valve surgery, Other, Aortic	Other aortic valve surgery not specified in other procedure codes.
3380	Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis	
810	Sinus of Valsalva, Aneurysm repair	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.
820	LV to aorta tunnel repair	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.
830	Valvuloplasty, Mitral	Repair of mitral valve including, but not limited to: valvotomy (closed or open heart), cleft repair, annuloplasty with or without ring, chordal reconstruction, commissurotomy, leaflet repair, or papillary muscle repair.
2260	Valvuloplasty converted to valve replacement in the same operation, Mitral	Mitral valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
840	Mitral stenosis, Supravalvar mitral ring repair	Supravalvar mitral ring repair.
850	Valve replacement, Mitral (MVR)	Replacement of mitral valve with prosthetic valve, any kind, in suprannular or annular position.
860	Valve surgery, Other, Mitral	Other mitral valve surgery not specified in procedure codes.
870	Norwood procedure	The Norwood operation is synonymous with the term 'Norwood (Stage 1)' and is defined as an aortopulmonary connection and neo-aortic 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
880	HLHS biventricular repair	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.
- 3390 LV Endocardial Fibroelastosis resection
- 2755 Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neo-aorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
- 2160 Hybrid Approach "Stage 1", Application of RPA & LPA bands
- 2170 Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA)
- 2180 Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) + application of RPA & LPA bands
- 2140 Hybrid approach "Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Aortic arch repair (Norwood [Stage 1] + Superior Cavopulmonary anastomosis(es) + PA Debanding)
- 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".
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- 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

2150 Hybrid approach "Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Without aortic arch repair	that is typically commenced with a hybrid procedure. 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.
2760 Hybrid Approach, Transcardiac balloon dilation	
2770 Hybrid Approach, Transcardiac transcatheter device placement	
890 Transplant, Heart	Heart transplantation, any technique, allograft or xenograft.
900 Transplant, Heart and lung	Heart and lung (single or double) transplantation.
910 Partial left ventriculectomy (LV volume reduction surgery) (Batista)	Wedge resection of LV muscle, with suturing of cut edges together, to reduce LV volume.
920 Pericardial drainage procedure	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).
930 Pericardiectomy	Surgical removal of the pericardium.
940 Pericardial procedure, Other	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.
950 Fontan, 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.
960 Fontan, Atrio-ventricular connection	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.
970 Fontan, TCPC, Lateral tunnel, Fenestrated	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.
980	Fontan, TCPC, Lateral tunnel, Nonfenestrated	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.
1000	Fontan, TCPC, External conduit, Fenestrated	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.
1010	Fontan, TCPC, External conduit, Nonfenestrated	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.
2780	Fontan, TCPC, Intra/extracardiac conduit, Fenestrated	The TCPC with Intra/extracardiac conduit is a TCPC type of Fontan operation created with a tube where the tube is attached to the inferior caval vein inside of the heart, and then the tube passes outside of the heart and is attached to the pulmonary artery outside of the heart. "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.
2790	Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated	The TCPC with Intra/extracardiac conduit is a TCPC type of Fontan operation created with a tube where the tube is attached to the inferior caval vein inside of the heart, and then the tube passes outside of the heart and is attached to the pulmonary artery outside of the heart. “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.
3310	Fontan, TCPC, External conduit, Hepatic veins to pulmonary artery, Fenestrated	
3320	Fontan, TCPC, External conduit, Hepatic veins to pulmonary artery, Nonfenestrated	
1025	Fontan revision or conversion (Re-do Fontan)	“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.
1030	Fontan, Other	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.
2340	Fontan + Atrioventricular valvuloplasty	“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.

1035	Ventricular septation	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.
1050	Congenitally corrected TGA repair, Atrial switch and ASO (double switch)	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.
1060	Congenitally corrected TGA repair, Atrial switch and Rastelli	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.
1070	Congenitally corrected TGA repair, VSD closure	Repair of congenitally corrected TGA by VSD closure only.
1080	Congenitally corrected TGA repair, VSD closure and LV to PA conduit	Repair of congenitally corrected TGA by VSD closure and placement of an LV-to-PA conduit.
1090	Congenitally corrected TGA repair, Other	Any procedures for correction of CCTGA not otherwise specified in other listed procedure codes.
1110	Arterial switch operation (ASO)	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.
1120	Arterial switch operation (ASO) and VSD repair	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.
1123	Arterial switch procedure + Aortic arch repair	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.
1125	Arterial switch procedure and VSD repair + Aortic arch repair	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.
1130	Senning	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.
1140	Mustard	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.
1145	Atrial baffle procedure,	Revision of a previous atrial baffle procedure (either Mustard



	Mustard or Senning revision	or Senning), for any reason (e.g., obstruction, baffle leak).
1150	Rastelli	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.
1160	REV	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.
2190	Aortic root translocation over left ventricle (Including Nikaidoh procedure)	
2210	TGA, Other procedures (Kawashima, LV-PA conduit, other)	
3400	Double root translocation	
1180	DORV, Intraventricular tunnel repair	Repair of DORV using a tunnel closure of the VSD to the aortic valve. This also includes the posterior straight tunnel repair of Kawashima
3410	DORV repair, No Ventriculotomy	
3420	DORV repair, Ventriculotomy, Nontransannular patch	
3430	DORV repair, Ventriculotomy, Transannular patch	

3440	DORV repair, RV-PA conduit	
3450	DORV - AVC (AVSD) repair	
1200	DOLV repair	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.
1210	Coarctation repair, End to end	Repair of coarctation of aorta by excision of the coarctation segment and end-to-end circumferential anastomosis of the aorta.
1220	Coarctation repair, End to end, Extended	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.
3460	Coarctation repair, Descending aorta anastomosed to Ascending aorta	
1230	Coarctation repair, Subclavian flap	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.
1240	Coarctation repair, Patch aortoplasty	Repair of coarctation of the aorta by incising the coarctation site with placement of a patch sutured in place longitudinally along the aortotomy edge.
1250	Coarctation repair, Interposition graft	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.
3470	Coarctation repair, Extra-anatomic Bypass graft	
1260	Coarctation repair, Other	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.
1275	Coarctation repair + VSD repair	Coarctation of aorta repair, any technique, and simultaneous VSD repair, any type VSD, any type repair.
1280	Aortic arch repair	Aortic arch repair, any technique.
1285	Aortic arch repair + VSD repair	Aortic arch repair, any technique, and simultaneous VSD repair, any type VSD, any type repair. This includes repair of IAA with VSD.
1290	Coronary artery fistula ligation	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).
1291	Anomalous origin of coronary artery from pulmonary artery repair	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).

1300	Coronary artery bypass	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.).
1305	Anomalous aortic origin of coronary artery from aorta (AAOCA) repair	
1310	Coronary artery procedure, Other	Any coronary artery procedure not specifically listed.
1320	Interrupted aortic arch repair	Repair of interrupted aortic arch (any type) by any technique (direct anastomosis, prosthetic graft, etc.). Does not include repair of IAA-VSD.
1330	PDA closure, Surgical	Closure of a PDA by any surgical technique (ligation, division, clip) using any approach (i.e., thoracotomy, thoracoscopic, etc.).
1340	PDA closure, Device	Closure of a PDA by device using transcatheter techniques.
1360	Vascular ring repair	Repair of vascular ring (any type, except pulmonary artery sling) by any technique.
1365	Aortopexy	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).
1370	Pulmonary artery sling repair	Pulmonary artery sling repair by any technique.
1380	Aortic aneurysm repair	Aortic aneurysm repair by any technique.
1390	Aortic dissection repair	Aortic dissection repair by any technique.
1400	Lung biopsy	Lung biopsy, any technique.
1410	Transplant, lung(s)	Lung or lobe transplantation of any type.
1420	Lung procedure, Other	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.
1440	Tracheal procedure	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.
2800	Muscle flap, Trunk (i.e. intercostal, pectus, or serratus muscle)	A trunk muscle flap (intercostal, pectus, or serratus muscle) is rotated to buttress or augment a suture line, anastomosis or fill the pleural space.
2810	Muscle flap, Trunk (i.e. latissimus dorsi)	A trunk muscle flap (latissimus dorsi) is rotated to buttress or augment a suture line, anastomosis or fill the pleural space.
2820	Removal, Sternal wire	Excision of wire used to approximate sternum, previous sternotomy
2830	Rib excision, Complete	Complete excision of rib(s)
2840	Rib excision, Partial	Partial excision of rib(s)
2850	Sternal fracture - open treatment	Repair of a sternal fracture with sutures, wires, plates or bars.
2860	Sternal resection, Radical resection of sternum	Involves removal of the sternum with complex reconstructive requirements for either a tumor or severe sternal infection.

2870	Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy	Involves resection of the sternum and mediastinal lymph node dissection.
2880	Tumor of chest wall - Excision including ribs	Excision of ribs and attached muscles for a benign or malignant tumor of the chest wall. When three or less ribs are taken or if the defect is covered by the scapula, reconstruction may not be necessary.
2890	Tumor of chest wall - Excision including ribs, With reconstruction	Resection of the chest wall tumor with reconstruction of the defect, usually with plastic mesh (marlex, prolene), methylmethacrylate/mesh sandwich or a muscle flap.
2900	Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor	Excision of a deep chest wall tumor that involves the muscles but not the ribs. These would usually be benign tumors such as a fibroma or a deep lipoma.
2910	Tumor of soft tissue of thorax - Excision of subcutaneous tumor	Excision of tumor in the skin/fat of the chest wall-typically a lipoma.
2920	Tumor of soft tissue of thorax - Radical resection	En-bloc, radical excision of a cancer of the chest wall muscles, involving the skin, fat and muscles. Typically it would be a desmoid tumor or a sarcoma malignant fibrous histiocytoma, rhabdomyosarcoma.
2930	Hyoid myotomy and suspension	Typically done as a suprahyoid laryngeal release to reduce tension on a cervical tracheal resection anastomosis. The hyoid bone is cut laterally on both sides to allow it to drop down and thus lower the larynx and trachea.
2940	Muscle flap, Neck	A neck muscle flap is rotated to buttress or augment a suture line, anastomosis or fill a space. Commonly used neck muscles are strap muscles, sternocleidomastoid muscle, levator scapulae.
2950	Procedure on neck	Unlisted procedure of the neck
2960	Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor	Excision of a tumor that involves the muscles of the neck. These would usually be benign tumors such as a fibroma or a deep lipoma.
2970	Tumor of soft tissue of neck - Excision of subcutaneous tumor	Excision of a tumor in the skin/fat of the neck-typically a lipoma.
2980	Tumor of soft tissue of neck - Radical resection	A surgical procedure in which the fibrofatty contents of the neck are removed for the treatment of cervical lymphatic metastases. Neck dissection is most commonly used in the management of cancers of the upper aerodigestive tract. It is also used for malignancies of the skin of the head and neck area, the thyroid, and the salivary glands.
2990	Pectus bar removal	Removal of a previously implanted chest wall bar
3000	Pectus bar repositioning	Repositioning of a previously implanted chest wall bar
3010	Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy	Placement of a Nuss transverse chest wall bar to push the sternum forward to repair a pectus deformity, with thoracoscopy
3020	Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy	Placement of a Nuss transverse chest wall bar to push the sternum forward to repair a pectus deformity, without thoracoscopy
3030	Pectus repair, Open repair	Resection of several costal cartilages, a partial osteotomy of the sternum, and often placement of a temporary bar for

		stabilization of pectus chest wall deformity
3040	Division of scalenus anticus, With resection of a cervical rib	Repair of Thoracic Outlet Syndrome variant where the scalenus anticus muscle or a band from it impinges on the brachial plexus along with resection of the abnormal cervical rib
3050	Division of scalenus anticus, Without resection of a cervical rib	Repair of Thoracic Outlet Syndrome variant where the scalenus anticus muscle or a band from it impinges on the brachial plexus along without resection of the abnormal cervical rib
3060	Rib excision, Excision of cervical rib	Removal of the first rib or a cervical rib for treatment of Thoracic Outlet Syndrome
3070	Rib excision, Excision of cervical rib, With sympathectomy	Removal of the first rib or a cervical rib and sympathectomy for treatment of Thoracic Outlet Syndrome
3080	Rib excision, Excision of first rib	Removal of the first rib
3090	Rib excision, Excision of first rib, With sympathectomy	Removal of the first rib and sympathectomy
3100	Procedure on thorax	Unlisted procedure on thorax
1450	Pacemaker implantation, Permanent	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.).
1460	Pacemaker procedure	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.
2350	Explantation of pacing system	Removal of pacemaker generator and wires
1470	ICD (AICD) implantation	Implantation of an (automatic) implantable cardioverter defibrillator system.
1480	ICD (AICD) ([automatic] implantable cardioverter defibrillator) procedure	Any revision to a previously placed AICD including revisions to leads, pads, generators, pockets. This may include explantation procedures as well.
1490	Arrhythmia surgery - atrial, Surgical Ablation	Surgical ablation (any type) of any atrial arrhythmia.
1500	Arrhythmia surgery - ventricular, Surgical Ablation	Surgical ablation (any type) of any ventricular arrhythmia.
2500	Cardiovascular catheterization procedure, Diagnostic	Invasive diagnostic procedure involving the heart and great vessels
2520	Cardiovascular catheterization procedure, Diagnostic, Angiographic data obtained	Invasive diagnostic procedure involving the heart and great vessels using angiography
2550	Cardiovascular catheterization procedure, Diagnostic, Electrophysiology alteration	
2540	Cardiovascular catheterization procedure, Diagnostic, Hemodynamic alteration	Invasive diagnostic procedure involving pressure or flow alteration in the cardiovascular system
2510	Cardiovascular catheterization procedure, Diagnostic, Hemodynamic data obtained	Invasive diagnostic procedure involving pressure and flow assessment of the heart and great vessels
2530	Cardiovascular catheterization	

	procedure, Diagnostic, Transluminal test occlusion	
2410	Cardiovascular catheterization procedure, Therapeutic	Invasive therapeutic procedure involving the heart and great vessels
2670	Cardiovascular catheterization procedure, Therapeutic, Adjunctive therapy	
1540	Cardiovascular catheterization procedure, Therapeutic, Balloon dilation	Invasive therapeutic procedure involving balloon dilatation of a cardiovascular structure
2590	Cardiovascular catheterization procedure, Therapeutic, Balloon valvotomy	Invasive therapeutic procedure involving balloon dilatation of a valve
1580	Cardiovascular catheterization procedure, Therapeutic, Coil implantation	Invasive therapeutic procedure involving implantation of a coil
1560	Cardiovascular catheterization procedure, Therapeutic, Device implantation	Invasive therapeutic procedure involving implantation of a device
3110	Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted	Invasive therapeutic procedure involving attempted but unsuccessful implantation of a device
2690	Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation.	Invasive therapeutic procedure involving Catheter based creation of lesions in the heart with radiofrequency energy, cryotherapy , or ultrasound energy to cure or control arrhythmias
3120	Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal	Invasive therapeutic procedure involving removal of an intravascular foreign body
2640	Cardiovascular catheterization procedure, Therapeutic, Perforation (establishing interchamber and/or intervessel communication)	Invasive therapeutic procedure establishing interchamber and/or intervessel communication
2580	Cardiovascular catheterization procedure, Therapeutic, Septostomy	Invasive therapeutic procedure establishing an intracardiac septal communication
1550	Cardiovascular catheterization procedure, Therapeutic, Stent insertion	Invasive therapeutic procedure involving implantation of a stent
2630	Cardiovascular catheterization procedure, Therapeutic, Stent re-dilatation	Invasive therapeutic procedure involving dilatation of a previously implanted stent
2650	Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion	
2660	Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve	Invasive therapeutic procedure involving deployment/ implantation of a valve

1590	Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)	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).
1600	Shunt, Systemic to pulmonary, Central (shunt from aorta)	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).
3130	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)	Creation of a central shunt with an end-to-side connection between the transected main pulmonary artery and the side of the ascending aorta
3230	Shunt, Systemic to pulmonary, Potts - Smith type (descending aorta to pulmonary artery)	
1610	Shunt, Systemic to pulmonary, Other	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.
1630	Shunt, Ligation and takedown	Takedown of any shunt.
2095	Shunt, Reoperation	Revision or replacement of a previously created shunt
1640	PA banding (PAB)	Placement of a pulmonary artery band, any type.
1650	PA debanding	Debanding of pulmonary artery. Please list separately any pulmonary artery reconstruction required.
3200	PA band adjustment	
1660	Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction)	In the Damus-Kaye-Stansel procedure the proximal transected main pulmonary artery is connected by varying techniques to the aorta.
1670	Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)	Superior vena cava to pulmonary artery anastomosis allowing flow to both pulmonary arteries with an end-to-side superior vena-to-pulmonary artery anastomosis.
1680	Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)	Superior vena cava to ipsilateral pulmonary artery anastomosis (i.e., LSVC to LPA, RSVC to RPA).
1690	Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)	Bilateral superior vena cava-to-pulmonary artery anastomoses (requires bilateral SVCs).
1700	HemiFontan	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 close junction of the SVC and the right atrium.
2330	Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty	
2130	Superior Cavopulmonary anastomosis(es) + PA reconstruction	
3300	Takedown of superior cavopulmonary anastomosis	
3140	Hepatic vein to azygous vein connection, Direct	
3150	Hepatic vein to azygous vein connection, Interposition graft	
3160	Kawashima operation (superior cavopulmonary connection in setting of interrupted IVC with azygous continuation)	
1710	Palliation, Other	Any other palliative procedure not specifically listed.
2360	ECMO cannulation	Insertion of cannulas for extracorporeal membrane oxygenation
2370	ECMO decannulation	Removal of cannulas for extracorporeal membrane oxygenation
1910	ECMO procedure	Any ECMO procedure (cannulation, decannulation, etc.).
1900	Intraaortic balloon pump (IABP) insertion	Insertion of intraaortic balloon pump by any technique.
1920	Right/left heart assist device procedure	Any right, left, or biventricular assist device procedure (placement, removal etc.).
2390	VAD explantation	Removal of ventricular assist device
2380	VAD implantation	Insertion of a ventricular assist device
3170	VAD change out	Removal of previously inserted ventricular assist device and insertion of a new device
2420	Echocardiography procedure, Sedated transesophageal echocardiogram	Procedural sedation for echocardiogram
2430	Echocardiography procedure, Sedated transthoracic echocardiogram	Procedural sedation for echocardiogram, transthoracic
2435	Non-cardiovascular, Non-thoracic procedure on cardiac patient with cardiac anesthesia	Anesthesia provided by cardiac anesthesiologist for patient with congenital heart disease undergoing a non- cardiovascular, non-thoracic procedure
2440	Radiology procedure on cardiac patient, Cardiac Computerized Axial Tomography (CT Scan)	A patient with congenital heart disease undergoing cardiac CT scan



2450	Radiology procedure on cardiac patient, Cardiac Magnetic Resonance Imaging (MRI)	A patient with congenital heart disease undergoing cardiac MRI
2460	Radiology procedure on cardiac patient, Diagnostic radiology	A patient with congenital heart disease undergoing a diagnostic radiology procedure
2470	Radiology procedure on cardiac patient, Non-Cardiac Computerized Tomography (CT) on cardiac patient	A patient with congenital heart disease undergoing a non-cardiac CT scan
2480	Radiology procedure on cardiac patient, Non-cardiac Magnetic Resonance Imaging (MRI) on cardiac patient	A patient with congenital heart disease undergoing non-cardiac MRI
2490	Radiology procedure on cardiac patient, Therapeutic radiology	A patient with congenital heart disease undergoing a therapeutic radiology procedure
1720	Aneurysm, Ventricular, Right, Repair	Repair of right ventricular aneurysm, any technique.
1730	Aneurysm, Ventricular, Left, Repair	Repair of left ventricular aneurysm, any technique.
1740	Aneurysm, Pulmonary artery, Repair	Repair of pulmonary artery aneurysm, any technique.
1760	Cardiac tumor resection	Resection of cardiac tumor, any type.
1780	Pulmonary AV fistula repair/occlusion	Repair or occlusion of a pulmonary arteriovenous fistula.
1790	Ligation, Pulmonary artery	Ligation or division of the pulmonary artery. Most often performed as a secondary procedure.
1802	Pulmonary embolectomy, Acute pulmonary embolus	Acute pulmonary embolism (clot) removal, through catheter or surgery.
1804	Pulmonary embolectomy, Chronic pulmonary embolus	Chronic pulmonary embolism (clot) removal, through catheter or surgery.
1810	Pleural drainage procedure	Pleural drainage procedure via thoracocentesis, tube thoracostomy, or open surgical drainage.
1820	Pleural procedure, Other	Other pleural procedures not specifically listed; may include pleurodesis (mechanical, talc, antibiotic or other), among others.
1830	Ligation, Thoracic duct	Ligation of the thoracic duct; most commonly for persistent chylothorax.
1840	Decortication	Decortication of the lung by any technique.
1850	Esophageal procedure	Any procedure performed on the esophagus.
1860	Mediastinal procedure	Any non-cardiovascular mediastinal procedure not otherwise listed.
1870	Bronchoscopy	Bronchoscopy, rigid or flexible, for diagnostic, biopsy, or treatment purposes (laser, stent, dilation, lavage).
1880	Diaphragm plication	Plication of the diaphragm; most often for diaphragm paralysis due to phrenic nerve injury.
1890	Diaphragm procedure, Other	Any diaphragm procedure not specifically listed.
1930	VATS (video-assisted thoracoscopic surgery)	Video-assisted thoracoscopic surgery utilized; this code should be used in addition to the specific procedure code (e.g., if PDA

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		ligated using VATS technique, PDA ligation should be primary procedure, VATS should be secondary procedure).
1940	Minimally invasive procedure	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).
1950	Bypass for noncardiac lesion	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).
1960	Delayed sternal closure	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.
1970	Mediastinal exploration	Mediastinal exploration, most often for postoperative control of bleeding or tamponade, but may be exploration to assess mediastinal mass, etc.
1980	Sternotomy wound drainage	Drainage of the sternotomy wound.
3180	Intravascular stent removal	Removal of a previously placed intravascular stent
3220	Removal of transcatheter-delivered device from heart	
3210	Removal of transcatheter-delivered device from blood vessel	
1990	Thoracotomy, Other	Any procedure performed through a thoracotomy incision not otherwise listed.
2000	Cardiotomy, Other	Any procedure involving an incision in the heart that is not otherwise listed.
2010	Cardiac procedure, Other	Any cardiac procedure, bypass or non-bypass, that is not otherwise listed.
2020	Thoracic and/or mediastinal procedure, Other	Any thoracic and/or mediastinal procedure not otherwise listed.
2030	Peripheral vascular procedure, Other	Any peripheral vascular procedure; may include procedures such as femoral artery repair, iliac artery repair, etc.
2040	Miscellaneous procedure, Other	Any miscellaneous procedure not otherwise listed.
7777	Other procedure	Any procedure on any organ system not otherwise listed.

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*Long Name:* Other Card-Congenital Procedure 3 *SeqNo:* 6525  
*Short Name:* **OCarCongProc3** *Core:* Yes  
*Section Name:* Congenital Defect Repair *Harvest:* Yes  
*DBTableName:* Adultdata1

*Definition:* Indicate the third of the three most significant congenital procedures.

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

ParentShortName: OCarCongProc2

ParentLongName: Other Card-Congenital Procedure 2

ParentHarvestCodes: <>1 And Is Not Missing

ParentValues: Is Not "No other congenital procedures" And Is Not Missing

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	No other congenital procedures	
10	PFO, Primary closure	Suture closure of patent foramen ovale (PFO).
20	ASD repair, Primary closure	Suture closure of secundum (most frequently), coronary sinus, sinus venosus or common atrium ASD.
30	ASD repair, Patch	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD.
40	ASD repair, Device	Closure of any type ASD (including PFO) using a device.
2110	ASD repair, Patch + PAPVC repair	Patch closure (using any type of patch material) of secundum, coronary sinus, or sinus venosus ASD plus PAPVC repair, any type
50	ASD, Common atrium (single atrium), Septation	Septation of common (single) atrium using any type patch material.
60	ASD creation/enlargement	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.
70	ASD partial closure	Intentional partial closure of any type ASD (partial suture or fenestrated patch closure).
80	Atrial septal fenestration	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.
85	Atrial fenestration closure	Closure of previously created atrial fenestration using any method including device, primary suture, or patch.
100	VSD repair, Primary closure	Suture closure of any type VSD.
110	VSD repair, Patch	Patch closure (using any type of patch material) of any type VSD.
120	VSD repair, Device	Closure of any type VSD using a device.
130	VSD, Multiple, Repair	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.
140	VSD creation/enlargement	Creation of a ventricular septal defect or enlargement of an existing ventricular septal defect.
150	Ventricular septal fenestration	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.
170	AVC (AVSD) repair, Complete (CAVSD)	Repair of complete AV canal (AVSD) using one- or two-patch or other technique, with or without mitral valve cleft repair.
180	AVC (AVSD) repair, Intermediate (Transitional)	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.
190	AVC (AVSD) repair, Partial (Incomplete) (PAVSD)	Repair of partial AV canal defect (primum ASD), any technique, with or without repair of cleft mitral valve.
2300	Valvuloplasty, Common atrioventricular valve	Common AV valve repair, any type
2250	Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve	Common AV valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
2230	Valve replacement, Common atrioventricular valve	Replacement of the common AV valve with a prosthetic valve
210	AP window repair	Repair of AP window using one- or two-patch technique with cardiopulmonary bypass; or, without cardiopulmonary bypass, using transcatheter device or surgical closure.
220	Pulmonary artery origin from ascending aorta (hemitruncus) repair	Repair of pulmonary artery origin from the ascending aorta by direct reimplantation, autogenous flap, or conduit, with or without use of cardiopulmonary bypass.
230	Truncus arteriosus repair	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).
240	Valvuloplasty, Truncal valve	Truncal valve repair, any type.
2290	Valvuloplasty converted to valve replacement in the same operation, Truncal valve	Truncal valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
250	Valve replacement, Truncal valve	Replacement of the truncal valve with a prosthetic valve.
2220	Truncus + Interrupted aortic arch repair (IAA) repair	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
260	PAPVC repair	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.
270	PAPVC, Scimitar, Repair	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.
2120	PAPVC repair, Baffle redirection to left atrium with systemic vein translocation (Warden) (SVC sewn to right atrial appendage)	An intracardiac baffle is created to redirect pulmonary venous return to the left atrium and SVC sewn to right atrial appendage)
280	TAPVC repair	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.
2200	TAPVC repair + Shunt - systemic-to-pulmonary	Repair of TAPVC, any type plus a systemic to pulmonary shunt creation
290	Cor triatriatum repair	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.
300	Pulmonary venous stenosis repair	Repair of pulmonary venous stenosis, whether congenital or acquired. Repair can be accomplished with a variety of approaches: sutureless, patch venoplasty, stent placement, etc.
310	Atrial baffle procedure (non-Mustard, non-Senning)	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.
330	Anomalous systemic venous connection repair	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).
340	Systemic venous stenosis repair	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.
350	TOF repair, No	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.
360	TOF repair, Ventriculotomy, Nontransannular patch	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.
370	TOF repair, Ventriculotomy, Transannular patch	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.
3330	TOF repair, Ventriculotomy, Transannular patch, plus native valve reconstruction	
3340	TOF repair, Ventriculotomy, Transannular patch, with monocusp or other surgically fashioned RVOT valve	
380	TOF repair, RV-PA conduit	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.
390	TOF - AVC (AVSD) repair	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.
400	TOF - Absent pulmonary valve repair	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.
420	Pulmonary atresia - VSD (including TOF, PA) repair	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.
2700	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])	1-stage repair that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])
2710	Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit])	VSD closure + RV to PA connection [with or without conduit])
2720	Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization (includes completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])	Completion of pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit])Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalization
2730	Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated)	Complete unifocalization , all usable MAPCA[s] are incorporated
2740	Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated)	Incomplete unifocalization, not all usable MAPCA[s] are incorporated
2750	Unifocalization MAPCA(s), Unilateral pulmonary unifocalization	MAPCA(s), Unilateral pulmonary unifocalization (one side)
440	Unifocalization MAPCA(s)	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.
450	Occlusion of MAPCA(s)	Occlusion, or closing off, of MAPCAs. This may be done with a transcatheter occluding device, usually a coil, or by surgical techniques.
460	Valvuloplasty, Tricuspid	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.
2280	Valvuloplasty converted to valve replacement in the same operation, Tricuspid	Tricuspid valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
465	Ebstein's repair	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.
470	Valve replacement, Tricuspid (TVR)	Replacement of the tricuspid valve with a prosthetic valve.
480	Valve closure, Tricuspid (exclusion, univentricular approach)	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.
490	Valve excision, Tricuspid (without replacement)	Excision of the tricuspid valve without placement of a prosthetic valve.
500	Valve surgery, Other, Tricuspid	Other tricuspid valve surgery not specified in procedure codes.
510	RVOT procedure	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.
520	1 1/2 ventricular repair	Partial biventricular repair; includes intracardiac repair with bidirectional cavopulmonary anastomosis to volume unload a small ventricle or poorly functioning ventricle.
530	PA, reconstruction (plasty), Main (trunk)	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.
540	PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation)	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.
550	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch)	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.
3350	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, proximal to first segmental branch)	
3360	PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch, beyond the first segmental branch)	
570	DCRV repair	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.
3370	RV Rehabilitation, Endocardial Resection	
590	Valvuloplasty, Pulmonic	Valvuloplasty of the pulmonic valve may include a range of techniques including but not limited to: valvotomy with or without bypass, commissurotomy, and valvuloplasty.
2270	Valvuloplasty converted to valve replacement in the same operation, Pulmonic	Pulmonic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
600	Valve replacement, Pulmonic (PVR)	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.
630	Valve excision, Pulmonary (without replacement)	Excision of the pulmonary valve without placement of a prosthetic valve.
640	Valve closure, Semilunar	Closure of a semilunar valve (pulmonic or aortic) by any technique.
650	Valve surgery, Other, Pulmonic	Other pulmonic valve surgery not specified in procedure codes.
610	Conduit placement, RV to PA	Placement of a conduit, any type, from RV to PA.
620	Conduit placement, LV to PA	Placement of a conduit, any type, from LV to PA.
1774	Conduit placement, Ventricle to aorta	Placement of a conduit from the right or left ventricle to the aorta.
1772	Conduit placement, Other	Placement of a conduit from any chamber or vessel to any

		vessel, valved or valveless, not listed elsewhere.
580	Conduit reoperation	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.).
660	Valvuloplasty, Aortic	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).
2240	Valvuloplasty converted to valve replacement in the same operation, Aortic	Aortic valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
2310	Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure	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
2320	Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure	Aortic valve repair attempted, converted to Konno aortoventriculoplasty using a pulmonary autograft root for the aortic root replacement.
670	Valve replacement, Aortic (AVR)	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.
680	Valve replacement, Aortic (AVR), Mechanical	Replacement of the aortic valve with a mechanical prosthetic valve.
690	Valve replacement, Aortic (AVR), Bioprosthetic	Replacement of the aortic valve with a bioprosthetic prosthetic valve.
700	Valve replacement, Aortic (AVR), Homograft	Replacement of the aortic valve with a homograft prosthetic valve.
715	Aortic root replacement, Bioprosthetic	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.
720	Aortic root replacement, Mechanical	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.
730	Aortic root replacement, Homograft	Replacement of the aortic root (that portion of the aorta attached to the heart; it gives rise to the coronary arteries) with a homograft.
735	Aortic root replacement, Valve sparing	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).
740	Ross procedure	Replacement of the aortic valve with a pulmonary autograft and replacement of the pulmonary valve with a homograft conduit.
750	Konno procedure	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.
760	Ross-Konno procedure	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.
770	Other annular enlargement procedure	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.
780	Aortic stenosis, Subvalvar, Repair	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.
2100	Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS	Subvalvar aortic stenosis repair including excision and myectomy
790	Aortic stenosis, Supravalvar, Repair	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.
800	Valve surgery, Other, Aortic	Other aortic valve surgery not specified in other procedure codes.
3380	Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis	
810	Sinus of Valsalva, Aneurysm repair	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.
820	LV to aorta tunnel repair	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.
830	Valvuloplasty, Mitral	Repair of mitral valve including, but not limited to: valvotomy (closed or open heart), cleft repair, annuloplasty with or without ring, chordal reconstruction, commissurotomy, leaflet repair, or papillary muscle repair.
2260	Valvuloplasty converted to valve replacement in the same operation, Mitral	Mitral valve repair attempted, converted to valve replacement with prosthetic valve during the same operation
840	Mitral stenosis, Supravalvar mitral ring repair	Supravalvar mitral ring repair.
850	Valve replacement, Mitral (MVR)	Replacement of mitral valve with prosthetic valve, any kind, in suprannular or annular position.
860	Valve surgery, Other, Mitral	Other mitral valve surgery not specified in procedure codes.
870	Norwood procedure	The Norwood operation is synonymous with the term 'Norwood (Stage 1)' and is defined as an aortopulmonary connection and neo-aortic 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
880	HLHS biventricular repair	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.
- 3390 LV Endocardial Fibroelastosis resection
- 2755 Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neo-aorta + Arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui)
- 2160 Hybrid Approach "Stage 1", Application of RPA & LPA bands
- 2170 Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA)
- 2180 Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) + application of RPA & LPA bands
- 2140 Hybrid approach "Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Aortic arch repair (Norwood [Stage 1] + Superior Cavopulmonary anastomosis(es) + PA Debanding)
- 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".
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- 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

2150 Hybrid approach "Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Without aortic arch repair	that is typically commenced with a hybrid procedure. 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.
2760 Hybrid Approach, Transcardiac balloon dilation	
2770 Hybrid Approach, Transcardiac transcatheter device placement	
890 Transplant, Heart	Heart transplantation, any technique, allograft or xenograft.
900 Transplant, Heart and lung	Heart and lung (single or double) transplantation.
910 Partial left ventriculectomy (LV volume reduction surgery) (Batista)	Wedge resection of LV muscle, with suturing of cut edges together, to reduce LV volume.
920 Pericardial drainage procedure	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).
930 Pericardiectomy	Surgical removal of the pericardium.
940 Pericardial procedure, Other	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.
950 Fontan, 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.
960 Fontan, Atrio-ventricular connection	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.
970 Fontan, TCPC, Lateral tunnel, Fenestrated	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.
980	Fontan, TCPC, Lateral tunnel, Nonfenestrated	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.
1000	Fontan, TCPC, External conduit, Fenestrated	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.
1010	Fontan, TCPC, External conduit, Nonfenestrated	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.
2780	Fontan, TCPC, Intra/extracardiac conduit, Fenestrated	The TCPC with Intra/extracardiac conduit is a TCPC type of Fontan operation created with a tube where the tube is attached to the inferior caval vein inside of the heart, and then the tube passes outside of the heart and is attached to the pulmonary artery outside of the heart. "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.
2790	Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated	The TCPC with Intra/extracardiac conduit is a TCPC type of Fontan operation created with a tube where the tube is attached to the inferior caval vein inside of the heart, and then the tube passes outside of the heart and is attached to the pulmonary artery outside of the heart. “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.
3310	Fontan, TCPC, External conduit, Hepatic veins to pulmonary artery, Fenestrated	
3320	Fontan, TCPC, External conduit, Hepatic veins to pulmonary artery, Nonfenestrated	
1025	Fontan revision or conversion (Re-do Fontan)	“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.
1030	Fontan, Other	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.
2340	Fontan + Atrioventricular valvuloplasty	“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.



1035	Ventricular septation	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.
1050	Congenitally corrected TGA repair, Atrial switch and ASO (double switch)	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.
1060	Congenitally corrected TGA repair, Atrial switch and Rastelli	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.
1070	Congenitally corrected TGA repair, VSD closure	Repair of congenitally corrected TGA by VSD closure only.
1080	Congenitally corrected TGA repair, VSD closure and LV to PA conduit	Repair of congenitally corrected TGA by VSD closure and placement of an LV-to-PA conduit.
1090	Congenitally corrected TGA repair, Other	Any procedures for correction of CCTGA not otherwise specified in other listed procedure codes.
1110	Arterial switch operation (ASO)	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.
1120	Arterial switch operation (ASO) and VSD repair	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.
1123	Arterial switch procedure + Aortic arch repair	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.
1125	Arterial switch procedure and VSD repair + Aortic arch repair	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.
1130	Senning	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.
1140	Mustard	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.
1145	Atrial baffle procedure,	Revision of a previous atrial baffle procedure (either Mustard

	Mustard or Senning revision	or Senning), for any reason (e.g., obstruction, baffle leak).
1150	Rastelli	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.
1160	REV	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.
2190	Aortic root translocation over left ventricle (Including Nikaidoh procedure)	
2210	TGA, Other procedures (Kawashima, LV-PA conduit, other)	
3400	Double root translocation	
1180	DORV, Intraventricular tunnel repair	Repair of DORV using a tunnel closure of the VSD to the aortic valve. This also includes the posterior straight tunnel repair of Kawashima
3410	DORV repair, No Ventriculotomy	
3420	DORV repair, Ventriculotomy, Nontransannular patch	
3430	DORV repair, Ventriculotomy, Transannular patch	

3440	DORV repair, RV-PA conduit	
3450	DORV - AVC (AVSD) repair	
1200	DOLV repair	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.
1210	Coarctation repair, End to end	Repair of coarctation of aorta by excision of the coarctation segment and end-to-end circumferential anastomosis of the aorta.
1220	Coarctation repair, End to end, Extended	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.
3460	Coarctation repair, Descending aorta anastomosed to Ascending aorta	
1230	Coarctation repair, Subclavian flap	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.
1240	Coarctation repair, Patch aortoplasty	Repair of coarctation of the aorta by incising the coarctation site with placement of a patch sutured in place longitudinally along the aortotomy edge.
1250	Coarctation repair, Interposition graft	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.
3470	Coarctation repair, Extra-anatomic Bypass graft	
1260	Coarctation repair, Other	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.
1275	Coarctation repair + VSD repair	Coarctation of aorta repair, any technique, and simultaneous VSD repair, any type VSD, any type repair.
1280	Aortic arch repair	Aortic arch repair, any technique.
1285	Aortic arch repair + VSD repair	Aortic arch repair, any technique, and simultaneous VSD repair, any type VSD, any type repair. This includes repair of IAA with VSD.
1290	Coronary artery fistula ligation	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).
1291	Anomalous origin of coronary artery from pulmonary artery repair	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).

1300	Coronary artery bypass	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.).
1305	Anomalous aortic origin of coronary artery from aorta (AAOCA) repair	
1310	Coronary artery procedure, Other	Any coronary artery procedure not specifically listed.
1320	Interrupted aortic arch repair	Repair of interrupted aortic arch (any type) by any technique (direct anastomosis, prosthetic graft, etc.). Does not include repair of IAA-VSD.
1330	PDA closure, Surgical	Closure of a PDA by any surgical technique (ligation, division, clip) using any approach (i.e., thoracotomy, thoracoscopic, etc.).
1340	PDA closure, Device	Closure of a PDA by device using transcatheter techniques.
1360	Vascular ring repair	Repair of vascular ring (any type, except pulmonary artery sling) by any technique.
1365	Aortopexy	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).
1370	Pulmonary artery sling repair	Pulmonary artery sling repair by any technique.
1380	Aortic aneurysm repair	Aortic aneurysm repair by any technique.
1390	Aortic dissection repair	Aortic dissection repair by any technique.
1400	Lung biopsy	Lung biopsy, any technique.
1410	Transplant, lung(s)	Lung or lobe transplantation of any type.
1420	Lung procedure, Other	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.
1440	Tracheal procedure	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.
2800	Muscle flap, Trunk (i.e. intercostal, pectus, or serratus muscle)	A trunk muscle flap (intercostal, pectus, or serratus muscle) is rotated to buttress or augment a suture line, anastomosis or fill the pleural space.
2810	Muscle flap, Trunk (i.e. latissimus dorsi)	A trunk muscle flap (latissimus dorsi) is rotated to buttress or augment a suture line, anastomosis or fill the pleural space.
2820	Removal, Sternal wire	Excision of wire used to approximate sternum, previous sternotomy
2830	Rib excision, Complete	Complete excision of rib(s)
2840	Rib excision, Partial	Partial excision of rib(s)
2850	Sternal fracture - open treatment	Repair of a sternal fracture with sutures, wires, plates or bars.
2860	Sternal resection, Radical resection of sternum	Involves removal of the sternum with complex reconstructive requirements for either a tumor or severe sternal infection.

2870	Sternal resection, Radical resection of sternum with mediastinal lymphadenectomy	Involves resection of the sternum and mediastinal lymph node dissection.
2880	Tumor of chest wall - Excision including ribs	Excision of ribs and attached muscles for a benign or malignant tumor of the chest wall. When three or less ribs are taken or if the defect is covered by the scapula, reconstruction may not be necessary.
2890	Tumor of chest wall - Excision including ribs, With reconstruction	Resection of the chest wall tumor with reconstruction of the defect, usually with plastic mesh (marlex, prolene), methylmethacrylate/mesh sandwich or a muscle flap.
2900	Tumor of soft tissue of thorax - Excision of deep subfascial or intramuscular tumor	Excision of a deep chest wall tumor that involves the muscles but not the ribs. These would usually be benign tumors such as a fibroma or a deep lipoma.
2910	Tumor of soft tissue of thorax - Excision of subcutaneous tumor	Excision of tumor in the skin/fat of the chest wall-typically a lipoma.
2920	Tumor of soft tissue of thorax - Radical resection	En-bloc, radical excision of a cancer of the chest wall muscles, involving the skin, fat and muscles. Typically it would be a desmoid tumor or a sarcoma malignant fibrous histiocytoma, rhabdomyosarcoma.
2930	Hyoid myotomy and suspension	Typically done as a suprahyoid laryngeal release to reduce tension on a cervical tracheal resection anastomosis. The hyoid bone is cut laterally on both sides to allow it to drop down and thus lower the larynx and trachea.
2940	Muscle flap, Neck	A neck muscle flap is rotated to buttress or augment a suture line, anastomosis or fill a space. Commonly used neck muscles are strap muscles, sternocleidomastoid muscle, levator scapulae.
2950	Procedure on neck	Unlisted procedure of the neck
2960	Tumor of soft tissue of neck - Excision of deep subfascial or intramuscular tumor	Excision of a tumor that involves the muscles of the neck. These would usually be benign tumors such as a fibroma or a deep lipoma.
2970	Tumor of soft tissue of neck - Excision of subcutaneous tumor	Excision of a tumor in the skin/fat of the neck-typically a lipoma.
2980	Tumor of soft tissue of neck - Radical resection	A surgical procedure in which the fibrofatty contents of the neck are removed for the treatment of cervical lymphatic metastases. Neck dissection is most commonly used in the management of cancers of the upper aerodigestive tract. It is also used for malignancies of the skin of the head and neck area, the thyroid, and the salivary glands.
2990	Pectus bar removal	Removal of a previously implanted chest wall bar
3000	Pectus bar repositioning	Repositioning of a previously implanted chest wall bar
3010	Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy	Placement of a Nuss transverse chest wall bar to push the sternum forward to repair a pectus deformity, with thoracoscopy
3020	Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy	Placement of a Nuss transverse chest wall bar to push the sternum forward to repair a pectus deformity, without thoracoscopy
3030	Pectus repair, Open repair	Resection of several costal cartilages, a partial osteotomy of the sternum, and often placement of a temporary bar for

		stabilization of pectus chest wall deformity
3040	Division of scalenus anticus, With resection of a cervical rib	Repair of Thoracic Outlet Syndrome variant where the scalenus anticus muscle or a band from it impinges on the brachial plexus along with resection of the abnormal cervical rib
3050	Division of scalenus anticus, Without resection of a cervical rib	Repair of Thoracic Outlet Syndrome variant where the scalenus anticus muscle or a band from it impinges on the brachial plexus along without resection of the abnormal cervical rib
3060	Rib excision, Excision of cervical rib	Removal of the first rib or a cervical rib for treatment of Thoracic Outlet Syndrome
3070	Rib excision, Excision of cervical rib, With sympathectomy	Removal of the first rib or a cervical rib and sympathectomy for treatment of Thoracic Outlet Syndrome
3080	Rib excision, Excision of first rib	Removal of the first rib
3090	Rib excision, Excision of first rib, With sympathectomy	Removal of the first rib and sympathectomy
3100	Procedure on thorax	Unlisted procedure on thorax
1450	Pacemaker implantation, Permanent	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.).
1460	Pacemaker procedure	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.
2350	Explantation of pacing system	Removal of pacemaker generator and wires
1470	ICD (AICD) implantation	Implantation of an (automatic) implantable cardioverter defibrillator system.
1480	ICD (AICD) ([automatic] implantable cardioverter defibrillator) procedure	Any revision to a previously placed AICD including revisions to leads, pads, generators, pockets. This may include explantation procedures as well.
1490	Arrhythmia surgery - atrial, Surgical Ablation	Surgical ablation (any type) of any atrial arrhythmia.
1500	Arrhythmia surgery - ventricular, Surgical Ablation	Surgical ablation (any type) of any ventricular arrhythmia.
2500	Cardiovascular catheterization procedure, Diagnostic	Invasive diagnostic procedure involving the heart and great vessels
2520	Cardiovascular catheterization procedure, Diagnostic, Angiographic data obtained	Invasive diagnostic procedure involving the heart and great vessels using angiography
2550	Cardiovascular catheterization procedure, Diagnostic, Electrophysiology alteration	
2540	Cardiovascular catheterization procedure, Diagnostic, Hemodynamic alteration	Invasive diagnostic procedure involving pressure or flow alteration in the cardiovascular system
2510	Cardiovascular catheterization procedure, Diagnostic, Hemodynamic data obtained	Invasive diagnostic procedure involving pressure and flow assessment of the heart and great vessels
2530	Cardiovascular catheterization	

	procedure, Diagnostic, Transluminal test occlusion	
2410	Cardiovascular catheterization procedure, Therapeutic	Invasive therapeutic procedure involving the heart and great vessels
2670	Cardiovascular catheterization procedure, Therapeutic, Adjunctive therapy	
1540	Cardiovascular catheterization procedure, Therapeutic, Balloon dilation	Invasive therapeutic procedure involving balloon dilatation of a cardiovascular structure
2590	Cardiovascular catheterization procedure, Therapeutic, Balloon valvotomy	Invasive therapeutic procedure involving balloon dilatation of a valve
1580	Cardiovascular catheterization procedure, Therapeutic, Coil implantation	Invasive therapeutic procedure involving implantation of a coil
1560	Cardiovascular catheterization procedure, Therapeutic, Device implantation	Invasive therapeutic procedure involving implantation of a device
3110	Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted	Invasive therapeutic procedure involving attempted but unsuccessful implantation of a device
2690	Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation.	Invasive therapeutic procedure involving Catheter based creation of lesions in the heart with radiofrequency energy, cryotherapy , or ultrasound energy to cure or control arrhythmias
3120	Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal	Invasive therapeutic procedure involving removal of an intravascular foreign body
2640	Cardiovascular catheterization procedure, Therapeutic, Perforation (establishing interchamber and/or intervessel communication)	Invasive therapeutic procedure establishing interchamber and/or intervessel communication
2580	Cardiovascular catheterization procedure, Therapeutic, Septostomy	Invasive therapeutic procedure establishing an intracardiac septal communication
1550	Cardiovascular catheterization procedure, Therapeutic, Stent insertion	Invasive therapeutic procedure involving implantation of a stent
2630	Cardiovascular catheterization procedure, Therapeutic, Stent re-dilatation	Invasive therapeutic procedure involving dilatation of a previously implanted stent
2650	Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion	
2660	Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve	Invasive therapeutic procedure involving deployment/ implantation of a valve

1590	Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)	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).
1600	Shunt, Systemic to pulmonary, Central (shunt from aorta)	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).
3130	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)	Creation of a central shunt with an end-to-side connection between the transected main pulmonary artery and the side of the ascending aorta
3230	Shunt, Systemic to pulmonary, Potts - Smith type (descending aorta to pulmonary artery)	
1610	Shunt, Systemic to pulmonary, Other	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.
1630	Shunt, Ligation and takedown	Takedown of any shunt.
2095	Shunt, Reoperation	Revision or replacement of a previously created shunt
1640	PA banding (PAB)	Placement of a pulmonary artery band, any type.
1650	PA debanding	Debanding of pulmonary artery. Please list separately any pulmonary artery reconstruction required.
3200	PA band adjustment	
1660	Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction)	In the Damus-Kaye-Stansel procedure the proximal transected main pulmonary artery is connected by varying techniques to the aorta.
1670	Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)	Superior vena cava to pulmonary artery anastomosis allowing flow to both pulmonary arteries with an end-to-side superior vena-to-pulmonary artery anastomosis.
1680	Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)	Superior vena cava to ipsilateral pulmonary artery anastomosis (i.e., LSVC to LPA, RSVC to RPA).
1690	Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)	Bilateral superior vena cava-to-pulmonary artery anastomoses (requires bilateral SVCs).
1700	HemiFontan	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 close junction of the SVC and the right atrium.
2330	Superior cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty	
2130	Superior Cavopulmonary anastomosis(es) + PA reconstruction	
3300	Takedown of superior cavopulmonary anastomosis	
3140	Hepatic vein to azygous vein connection, Direct	
3150	Hepatic vein to azygous vein connection, Interposition graft	
3160	Kawashima operation (superior cavopulmonary connection in setting of interrupted IVC with azygous continuation)	
1710	Palliation, Other	Any other palliative procedure not specifically listed.
2360	ECMO cannulation	Insertion of cannulas for extracorporeal membrane oxygenation
2370	ECMO decannulation	Removal of cannulas for extracorporeal membrane oxygenation
1910	ECMO procedure	Any ECMO procedure (cannulation, decannulation, etc.).
1900	Intraaortic balloon pump (IABP) insertion	Insertion of intraaortic balloon pump by any technique.
1920	Right/left heart assist device procedure	Any right, left, or biventricular assist device procedure (placement, removal etc.).
2390	VAD explantation	Removal of ventricular assist device
2380	VAD implantation	Insertion of a ventricular assist device
3170	VAD change out	Removal of previously inserted ventricular assist device and insertion of a new device
2420	Echocardiography procedure, Sedated transesophageal echocardiogram	Procedural sedation for echocardiogram
2430	Echocardiography procedure, Sedated transthoracic echocardiogram	Procedural sedation for echocardiogram, transthoracic
2435	Non-cardiovascular, Non-thoracic procedure on cardiac patient with cardiac anesthesia	Anesthesia provided by cardiac anesthesiologist for patient with congenital heart disease undergoing a non- cardiovascular, non-thoracic procedure
2440	Radiology procedure on cardiac patient, Cardiac Computerized Axial Tomography (CT Scan)	A patient with congenital heart disease undergoing cardiac CT scan

2450	Radiology procedure on cardiac patient, Cardiac Magnetic Resonance Imaging (MRI)	A patient with congenital heart disease undergoing cardiac MRI
2460	Radiology procedure on cardiac patient, Diagnostic radiology	A patient with congenital heart disease undergoing a diagnostic radiology procedure
2470	Radiology procedure on cardiac patient, Non-Cardiac Computerized Tomography (CT) on cardiac patient	A patient with congenital heart disease undergoing a non-cardiac CT scan
2480	Radiology procedure on cardiac patient, Non-cardiac Magnetic Resonance Imaging (MRI) on cardiac patient	A patient with congenital heart disease undergoing non-cardiac MRI
2490	Radiology procedure on cardiac patient, Therapeutic radiology	A patient with congenital heart disease undergoing a therapeutic radiology procedure
1720	Aneurysm, Ventricular, Right, Repair	Repair of right ventricular aneurysm, any technique.
1730	Aneurysm, Ventricular, Left, Repair	Repair of left ventricular aneurysm, any technique.
1740	Aneurysm, Pulmonary artery, Repair	Repair of pulmonary artery aneurysm, any technique.
1760	Cardiac tumor resection	Resection of cardiac tumor, any type.
1780	Pulmonary AV fistula repair/occlusion	Repair or occlusion of a pulmonary arteriovenous fistula.
1790	Ligation, Pulmonary artery	Ligation or division of the pulmonary artery. Most often performed as a secondary procedure.
1802	Pulmonary embolectomy, Acute pulmonary embolus	Acute pulmonary embolism (clot) removal, through catheter or surgery.
1804	Pulmonary embolectomy, Chronic pulmonary embolus	Chronic pulmonary embolism (clot) removal, through catheter or surgery.
1810	Pleural drainage procedure	Pleural drainage procedure via thoracocentesis, tube thoracostomy, or open surgical drainage.
1820	Pleural procedure, Other	Other pleural procedures not specifically listed; may include pleurodesis (mechanical, talc, antibiotic or other), among others.
1830	Ligation, Thoracic duct	Ligation of the thoracic duct; most commonly for persistent chylothorax.
1840	Decortication	Decortication of the lung by any technique.
1850	Esophageal procedure	Any procedure performed on the esophagus.
1860	Mediastinal procedure	Any non-cardiovascular mediastinal procedure not otherwise listed.
1870	Bronchoscopy	Bronchoscopy, rigid or flexible, for diagnostic, biopsy, or treatment purposes (laser, stent, dilation, lavage).
1880	Diaphragm plication	Plication of the diaphragm; most often for diaphragm paralysis due to phrenic nerve injury.
1890	Diaphragm procedure, Other	Any diaphragm procedure not specifically listed.
1930	VATS (video-assisted thoracoscopic surgery)	Video-assisted thoracoscopic surgery utilized; this code should be used in addition to the specific procedure code (e.g., if PDA

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		ligated using VATS technique, PDA ligation should be primary procedure, VATS should be secondary procedure).
1940	Minimally invasive procedure	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).
1950	Bypass for noncardiac lesion	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).
1960	Delayed sternal closure	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.
1970	Mediastinal exploration	Mediastinal exploration, most often for postoperative control of bleeding or tamponade, but may be exploration to assess mediastinal mass, etc.
1980	Sternotomy wound drainage	Drainage of the sternotomy wound.
3180	Intravascular stent removal	Removal of a previously placed intravascular stent
3220	Removal of transcatheter-delivered device from heart	
3210	Removal of transcatheter-delivered device from blood vessel	
1990	Thoracotomy, Other	Any procedure performed through a thoracotomy incision not otherwise listed.
2000	Cardiotomy, Other	Any procedure involving an incision in the heart that is not otherwise listed.
2010	Cardiac procedure, Other	Any cardiac procedure, bypass or non-bypass, that is not otherwise listed.
2020	Thoracic and/or mediastinal procedure, Other	Any thoracic and/or mediastinal procedure not otherwise listed.
2030	Peripheral vascular procedure, Other	Any peripheral vascular procedure; may include procedures such as femoral artery repair, iliac artery repair, etc.
2040	Miscellaneous procedure, Other	Any miscellaneous procedure not otherwise listed.
7777	Other procedure	Any procedure on any organ system not otherwise listed.

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*Long Name:* Other Non Card-Caro Endart *SeqNo:* 6530  
*Short Name:* **ONCCarEn** *Core:* Yes  
*Section Name:* Other Non-Cardiac Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether the patient underwent surgical removal of stenotic atheromatous plaque or percutaneous/surgical placement of carotid stent in conjunction with the primary surgical procedure.

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

ParentShortName: OpONCard

ParentLongName: Other Non Card

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Yes, planned
- 4 Yes, unplanned due to surgical complication
- 5 Yes, unplanned due to unsuspected disease or anatomy
- 2 No

*Long Name:* Other Non Card-Other Vasc *SeqNo:* 6535  
*Short Name:* **ONCOVasc** *Core:* Yes  
*Section Name:* Other Non-Cardiac Procedures *Harvest:* Yes

*DBTableName* Adultdata1

*Definition:* Indicate whether patient had a procedure to treat vascular disease in conjunction with the primary surgical procedure.

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

ParentShortName: OpONCard

ParentLongName: Other Non Card

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 3 Yes, planned
- 4 Yes, unplanned due to surgical complication
- 5 Yes, unplanned due to unsuspected disease or anatomy
- 2 No

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*Long Name:* Other Non Card-Other Thor *SeqNo:* 6540  
*Short Name:* **ONCOThor** *Core:* Yes  
*Section Name:* Other Non-Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether patient underwent a procedure involving the thorax/pleura in conjunction with the primary surgical procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OpONCard

*ParentLongName:* Other Non Card

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 3 Yes, planned
  - 4 Yes, unplanned due to surgical complication
  - 5 Yes, unplanned due to unsuspected disease or anatomy
  - 2 No
- 

*Long Name:* Other Non Card-Other *SeqNo:* 6545  
*Short Name:* **ONCOther** *Core:* Yes  
*Section Name:* Other Non-Cardiac Procedures *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient had any other non-cardiac procedure performed in conjunction with the primary surgical procedure that is not included within this section.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OpONCard

*ParentLongName:* Other Non Card

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 3 Yes, planned
- 4 Yes, unplanned due to surgical complication
- 5 Yes, unplanned due to unsuspected disease or anatomy
- 2 No

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*Long Name:* Patient Expired in OR *SeqNo:* 6546  
*Short Name:* **ExpiredInOR** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient died prior to leaving the operating room during the initial surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

1 Yes  
2 No

---

*Long Name:* Peak Postoperative Creatinine Level within 48 hours of OR Exit *SeqNo:* 6550  
*Short Name:* **PeakPostCreat48Hrs** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the patients peak creatinine level from OR Exit to 48 hours post OR Exit.  
*Data Source:* User *Format:* Real  
Low Value: 0.10    High Value: 30.00    UsualRangeLow: 0.40    UsualRangeHigh: 13.00  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"

---

---

*Long Name:* Peak Postoperative Creatinine Level prior to discharge *SeqNo:* 6555  
*Short Name:* **PostCreat** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the postoperative Creatinine level. If more than one level is obtained, code the highest level from OR Exit to Discharge. (This can be the same value as Peak PostOperative Creatinine within 48 hours of OR Exit.)  
*Data Source:* User *Format:* Real  
 Low Value: 0.01 High Value: 30.00 UsualRangeLow: 0.40 UsualRangeHigh: 13.00  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"

---

*Long Name:* Discharge Hemoglobin *SeqNo:* 6556  
*Short Name:* **PostopHemoglobin** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the postoperative hemoglobin closest to discharge  
*Data Source:* User *Format:* Real  
 Low Value: 1.00 High Value: 50.00  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"

---

---

*Long Name:* Discharge Hematocrit *SeqNo:* 6557  
*Short Name:* **PostopHct** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the postoperative hematocrit closest to discharge  
*Data Source:* User *Format:* Real  
Low Value: 1.00 High Value: 99.99  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"

---

*Long Name:* Blood Prod *SeqNo:* 6560  
*Short Name:* **BldProd** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether blood products were transfused any time postoperatively. Postoperatively is defined as any blood started after OR Exit time of initial surgical procedure. Include blood transfused after the initial surgery, including any blood transfused during a reoperative surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---



---

*Long Name:* Blood Prod - RBC Units *SeqNo:* 6565  
*Short Name:* **BdRBCU** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the number of units of packed red blood cells that were transfused any time postoperatively.

Do not include autologous, cell-saver or chest tube recirculated blood.

*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 300 UsualRangeLow: 0 UsualRangeHigh: 50  
 ParentShortName: BldProd  
 ParentLongName: Blood Prod  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Blood Prod - Fresh Frozen Plasma/Plasma Units *SeqNo:* 6570  
*Short Name:* **BdFFPU** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the number of units of fresh frozen plasma or plasma that were transfused any time postoperatively.

*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 300 UsualRangeLow: 0 UsualRangeHigh: 40  
 ParentShortName: BldProd  
 ParentLongName: Blood Prod  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Blood Prod - Cryo Units *SeqNo:* 6575  
*Short Name:* **BdCryoU** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of units of cryoprecipitate that were transfused postoperatively. One bag of cryo = one unit.  
 The number of units is not volume dependent.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 300 UsualRangeLow: 0 UsualRangeHigh: 20  
 ParentShortName: BldProd  
 ParentLongName: Blood Prod  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Blood Prod - Platelet Units *SeqNo:* 6580  
*Short Name:* **BdPlatU** *Core:* No  
*Section Name:* Postoperative *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of units of platelets that were transfused postoperatively. Count the dose pack as one unit. A dose pack may consist of 4, 6, 8, 10, or any number of donor platelets obtained.  
 The number of units coded is not volume dependent.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 99  
 ParentShortName: BldProd  
 ParentLongName: Blood Prod  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Blood Prod - Platelet Dose Pack *SeqNo:* 6581  
*Short Name:* **BdPlatDosePk** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total number of platelet dose packs administered from OR Exit to acute care discharge. A dose pack is not the same as unit. Please see intent/clarification for further direction.  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 99  
 ParentShortName: BldProd  
 ParentLongName: Blood Prod  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Extubated In OR *SeqNo:* 6585  
*Short Name:* **ExtubOR** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate whether the patient was extubated prior to leaving the operating room during the initial surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"

Harvest Codes and Value Definitions:

<u>Code:</u>	<u>Value:</u>	<u>Definition:</u>
1	Yes	
2	No	
3	N/A	Patient was not intubated in the OR

---

*Long Name:* Initial Extubation Date And Time *SeqNo:* 6586  
*Short Name:* **ExtubateDT** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the date (mm/dd/yyyy) and time (hh:mm) (24 hour clock) ventilatory support initially ceased after surgery.  
*Data Source:* User *Format:* Date and time in the format mm/dd/yyyy  
hh:mm with the time in 24-hour clock

*ParentShortName:* ExtubOR  
*ParentLongName:* Extubated In OR  
*ParentHarvestCodes:* 2|3  
*ParentValues:* = "No" or "N/A"

---

*Long Name:* Total Initial Postoperative Vent Hours *SeqNo:* 6587  
*Short Name:* **TotalPOInitVentHr** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* System calculated. OR Exit date/time to initial extubation date/time.  
*Data Source:* Calculated *Format:* Real

*Low Value:* 0.00 *High Value:* 6000.00  
*ParentShortName:* ExtubOR  
*ParentLongName:* Extubated In OR  
*ParentHarvestCodes:* 2|3  
*ParentValues:* = "No" or "N/A"

---

---

*Long Name:* Postop Intubation/Reintubation During Hospital Stay *SeqNo:* 6591  
*Short Name:* **PostopIntub** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient was intubated for the first time after leaving the OR from the initial procedure, or re-intubated during the hospital stay after the initial extubation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Additional Hours Ventilated *SeqNo:* 6595  
*Short Name:* **VentHrsA** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate how many additional hours the patient was on ventilator after initial extubation.  
*Data Source:* User *Format:* Real  
Low Value: 0.10 High Value: 5000.00  
ParentShortName: PostopIntub  
ParentLongName: Postop Intubation/Reintubation During Hospital Stay  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

---

*Long Name:* Total Postoperative Ventilation Hours *SeqNo:* 6600  
*Short Name:* **VentHrsTot** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Calculated variable measuring OR exit time to extubation time plus any additional hours due to reintubation.  
*Data Source:* Calculated *Format:* Real  
 Low Value: 0.00 High Value: 6000.00  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"

---

*Long Name:* ICU Visit *SeqNo:* 6605  
*Short Name:* **ICUVisit** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient received ICU level of care immediately following the initial surgery. Include ICU unit, post-anesthesia recovery, and other similar critical care environments.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* Initial ICU hours *SeqNo:* 6610  
*Short Name:* **ICUInHrs** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the number of hours the patient received ICU level of care from OR exit time following the initial surgery until the time of actual transfer out of ICU. Include ICU unit, post-anesthesia recovery, and other similar critical care environments.  
 For those sites providing postop ICU level of care in one single stay unit (admission to ICU to hospital discharge), document the number of hours immediately following the initial surgery until a physician order is written to change the level of care provided.

*Data Source:* User *Format:* Real  
 Low Value: 0.10 High Value: 5000.00 UsualRangeLow: 1.00 UsualRangeHigh: 300.00  
 ParentShortName: ICUVisit  
 ParentLongName: ICU Visit  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Readmission to ICU *SeqNo:* 6615  
*Short Name:* **ICUReadm** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient spent time in an ICU after having been transferred to a step-down unit (lower level care). Specific situations are described below:  
 OR -> ICU -> OR -> ICU = No  
 OR -> ICU -> STEP DOWN -> ICU = Yes  
 OR -> STEP DOWN -> ICU = Yes  
 Single care unit:  
 Code ICU readmission when the level of care increases and is noted in the physician order.

*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

---

*Long Name:* Additional ICU Hours *SeqNo:* 6620  
*Short Name:* **ICUAdHrs** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the number of additional hours spent in the ICU, or at the equivalent higher level of care in single stay units.  
*Data Source:* User *Format:* Real  
Low Value: 0.10      High Value: 5000.00      UsualRangeLow: 1.00      UsualRangeHigh: 300.00  
ParentShortName: ICUReadm  
ParentLongName: Readmission to ICU  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Postop Echo *SeqNo:* 6625  
*Short Name:* **POpTTEch** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether an echo was performed postoperatively to evaluate valvular function prior to discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
    Code: Value:  
    1 Yes  
    2 No

---



*Long Name:* Postop Echo Aortic Insufficiency *SeqNo:* 6630  
*Short Name:* **POpTTAR** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate the highest level of aortic insufficiency/regurgitation found on post op echo closest to discharge.

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

ParentShortName: POpTTTEch

ParentLongName: Postop Echo

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

*Long Name:* Postop Echo Aortic Paravalvular Leak *SeqNo:* 6631  
*Short Name:* **POpAortParaLk** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes

*DBTableName* Adultdata2

*Definition:* Indicate the highest level of aortic paravalvular leak found on post op echo closest to discharge.

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

ParentShortName: POpTTTEch

ParentLongName: Postop Echo

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented
- 7 N/A

*Long Name:* Postop Echo Mitral Insufficiency *SeqNo:* 6635  
*Short Name:* **POpTTMR** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the highest level of mitral insufficiency/regurgitation found on post op echo closest to discharge.

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

ParentShortName: POpTTTEch

ParentLongName: Postop Echo

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

*Long Name:* Postop Echo Mitral Paravalvular leak *SeqNo:* 6636  
*Short Name:* **POpMitParaLk** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the highest level of mitral paravalvular leak found on post op echo closest to discharge.

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

ParentShortName: POpTTTEch

ParentLongName: Postop Echo

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented
- 7 N/A

*Long Name:* Postop Echo Tricuspid Insufficiency *SeqNo:* 6640  
*Short Name:* **POpTTTR** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest level of tricuspid insufficiency/ regurgitation found on post op echo closest to discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POpTTTEch

ParentLongName: Postop Echo

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

*Long Name:* Postop Echo Pulmonic Insufficiency *SeqNo:* 6645  
*Short Name:* **POpTTPu** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest level of pulmonic insufficiency/ regurgitation found on post op echo closest to discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: POpTTTEch

ParentLongName: Postop Echo

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 None
- 2 Trivial/Trace
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not documented

*Long Name:* Postop EF Done *SeqNo:* 6650  
*Short Name:* **POpEFD** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the Ejection Fraction was measured postoperatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ExpiredInOR  
 ParentLongName: Patient Expired in OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Postop EF *SeqNo:* 6655  
*Short Name:* **POpEF** *Core:* Yes  
*Section Name:* Postoperative *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the Ejection Fraction (percentage of the blood emptied from the left ventricle at the end of the contraction) noted on the TEE post OR Exit, closest to discharge.  
*Data Source:* User *Format:* Real  
 Low Value: 1.0      High Value: 99.0      UsualRangeLow: 5.0      UsualRangeHigh: 99.0  
 ParentShortName: POpEFD  
 ParentLongName: Postop EF Done  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Postop Cardiac Enzymes Drawn *SeqNo:* 6660  
*Short Name:* **POpEnzDrawn** *Core:* No  
*Section Name:* Postoperative *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether Cardiac Enzymes (biomarkers) were drawn post procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 Harvest Codes:  
     Code: Value:  
         1 Yes

2 No

---

*Long Name:* Postop Peak CKMB *SeqNo:* 6665  
*Short Name:* **POpPkCKMB** *Core:* No  
*Section Name:* Postoperative *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the peak CKMB (highest level post procedure).  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 5000.0  
*ParentShortName:* POpEnzDrawn  
*ParentLongName:* Postop Cardiac Enzymes Drawn  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Postop Peak Troponin I *SeqNo:* 6670  
*Short Name:* **POpPkTrI** *Core:* No  
*Section Name:* Postoperative *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the peak Troponin I (highest level post procedure).  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 5000.0  
*ParentShortName:* POpEnzDrawn  
*ParentLongName:* Postop Cardiac Enzymes Drawn  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Postop Peak Troponin T *SeqNo:* 6675  
*Short Name:* **POpPkTrT** *Core:* No  
*Section Name:* Postoperative *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the peak Troponin T (highest level post procedure).  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 5000.0  
 ParentShortName: POpEnzDrawn  
 ParentLongName: Postop Cardiac Enzymes Drawn  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

*Long Name:* Postop 12 Lead EKG *SeqNo:* 6680  
*Short Name:* **POpEKG** *Core:* No  
*Section Name:* Postoperative *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the post procedure 12 lead EKG findings, if performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

Harvest Codes:

Code: Value:

- 1 Not Performed
- 2 No ischemic changes
- 4 New ST changes
- 3 New Pathological Q-Wave or LBBB
- 8 New RBBB
- 9 New AV Conduction Block
- 5 New STEMI
- 6 Other
- 7 NA (no pre-op EKG for comparison, transplant)

---

*Long Name:* Post-Op-Surgical Site Infection *SeqNo:* 6690  
*Short Name:* **SurSInf** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether a surgical site infection (SSI) was diagnosed within 30 days of the procedure or any time during the hospitalization for surgery.  
Refer to the most current CDC definition for SSI which can be found in the training manual.

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

ParentShortName: ExpiredInOR

ParentLongName: Patient Expired in OR

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

Code: Value:

- 3 Yes, Infectious
  - 4 Yes, Non-Infectious
  - 5 Yes, both
  - 2 No
- 

*Long Name:* Post-Op-Superficial Sternal Wound *SeqNo:* 6695  
*Short Name:* **CSternalSupInf** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether a superficial sternal wound infection was diagnosed within 30 days of the procedure or any time during the hospitalization for surgery.

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

ParentShortName: SurSInf

ParentLongName: Post-Op-Surgical Site Infection

ParentHarvestCodes: 3|5

ParentValues: = "Yes, Infectious" or "Yes, both"

Harvest Codes:

Code: Value:

- 3 Yes, within 30 days of procedure
  - 4 Yes, >30 days after procedure but during hospitalization for surgery
  - 2 No
-

---

*Long Name:* Post-Op-Deep Sternal *SeqNo:* 6700  
*Short Name:* **DeepSternInf** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether a deep sternal wound infection or mediastinitis was diagnosed within 30 days of the OR date or at any time during the initial hospitalization.

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

ParentShortName: SurSInf

ParentLongName: Post-Op-Surgical Site Infection

ParentHarvestCodes: 3|5

ParentValues: = "Yes, Infectious" or "Yes, both"

Harvest Codes:

Code: Value:

- 3 Yes, within 30 days of procedure
  - 4 Yes, >30 days after procedure but during initial hospitalization
  - 2 No
- 

*Long Name:* Post-Op-Deep Sternal - Diagnosis Date *SeqNo:* 6705  
*Short Name:* **DeepSternInfDt** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the first date that deep sternal wound infection or mediastinitis was documented.

*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: DeepSternInf

ParentLongName: Post-Op-Deep Sternal

ParentHarvestCodes: 3|4

ParentValues: = "Yes, within 30 days of procedure" or "Yes, >30 days after procedure but during initial hospitalization"

---



<i>Long Name:</i>	Post-Op-Infect-Thoracotomy	<i>SeqNo:</i>	6710
<i>Short Name:</i>	<b>CIThor</b>	<i>Core:</i>	No
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether a surgical site infection involving a thoracotomy or parasternal site was diagnosed within 30 days of the procedure or any time during the hospitalization for surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	SurSInf		
<i>ParentLongName:</i>	Post-Op-Surgical Site Infection		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	=		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	3	Yes, within 30 days of procedure	
	4	Yes, >30 days after procedure but during hospitalization for surgery	
	2	No	

<i>Long Name:</i>	Post-Op-Infect-Thoracotomy (within 30 days or initial hospitalization)	<i>SeqNo:</i>	6711
<i>Short Name:</i>	<b>CIThor30</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether a surgical site infection involving a thoracotomy or parasternal site was diagnosed within 30 days of the procedure or any time during the hospitalization for surgery.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	SurSInf		
<i>ParentLongName:</i>	Post-Op-Surgical Site Infection		
<i>ParentHarvestCodes:</i>	3 5		
<i>ParentValues:</i>	= "Yes, Infectious" or "Yes, both"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Post-Op-Conduit Harvest (within 30 days or initial hospitalization) *SeqNo:* 6715  
*Short Name:* **ConduitHarv** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a surgical site infection involving a conduit harvest site was diagnosed within 30 days of the procedure or any time during the hospitalization for surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: SurSInf  
ParentLongName: Post-Op-Surgical Site Infection  
ParentHarvestCodes: 3|5  
ParentValues: = "Yes, Infectious" or "Yes, both"  
Harvest Codes:  
Code: Value:  
5 Yes  
2 No

---

*Long Name:* Post-Op-Cannulation Site (within 30 days or initial hospitalization) *SeqNo:* 6720  
*Short Name:* **CanSite** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a surgical site infection involving a cannulation site was diagnosed within 30 days of the procedure or any time during the hospitalization for surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: SurSInf  
ParentLongName: Post-Op-Surgical Site Infection  
ParentHarvestCodes: 3|5  
ParentValues: = "Yes, Infectious" or "Yes, both"  
Harvest Codes:  
Code: Value:  
5 Yes  
2 No

---

*Long Name:* Post-Op-Wound Intervention / Procedure *SeqNo:* 6725  
*Short Name:* **WoundInter** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a wound intervention or procedure was performed.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: SurSInf  
 ParentLongName: Post-Op-Surgical Site Infection  
 ParentHarvestCodes: 1  
 ParentValues: =  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-Wound Intervention - Open With Packing / Irrigation *SeqNo:* 6730  
*Short Name:* **WoundIntOpen** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether wound intervention(s) involved opening the wound and packing and/or irrigation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: WoundInter  
 ParentLongName: Post-Op-Wound Intervention / Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes, primary incision  
         2 Yes, secondary incision  
         3 Both  
         4 No

*Long Name:* Post-Op-Wound Intervention - Wound Vac *SeqNo:* 6735  
*Short Name:* **WoundIntVac** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether wound intervention(s) included application of a wound vac.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: WoundInter  
 ParentLongName: Post-Op-Wound Intervention / Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes, primary incision  
         2 Yes, secondary incision  
         3 Both  
         4 No

*Long Name:* Post-Op-Wound Intervention - Secondary Procedure Muscle Flap *SeqNo:* 6740  
*Short Name:* **WoundIntMuscle** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether wound intervention(s) included a secondary procedure involving a muscle flap.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: WoundInter  
 ParentLongName: Post-Op-Wound Intervention / Procedure  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes, primary incision  
         2 Yes, secondary incision  
         3 Both  
         4 No

<i>Long Name:</i>	Post-Op-Wound Intervention - Secondary Procedure Omental Flap	<i>SeqNo:</i>	6745
<i>Short Name:</i>	<b>WoundIntOmental</b>	<i>Core:</i>	No
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether wound intervention(s) included a secondary procedure involving an Omental flap.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	WoundInter		
<i>ParentLongName:</i>	Post-Op-Wound Intervention / Procedure		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Non-Infective Surgical Wound Dehiscence (includes non-infective sterile wound)	<i>SeqNo:</i>	6748
<i>Short Name:</i>	<b>NonInfSurgWndDeh</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate if the patient's non-infectious sternal wound dehiscence was deep or superficial.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	SurSInf		
<i>ParentLongName:</i>	Post-Op-Surgical Site Infection		
<i>ParentHarvestCodes:</i>	4 5		
<i>ParentValues:</i>	= "Yes, Non-Infectious" or "Yes, both"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Sternal Superficial	
	2	Deep Sternal	

---

*Long Name:* Deep Sternal Wound Infection Within 90 Days *SeqNo:* 6749  
*Short Name:* **DeepSternalInf90** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there was evidence that the patient had a deep sternal wound infection within 90 days of the procedure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No  
3 Unknown

---

*Long Name:* In Hospital Post-Op Events *SeqNo:* 6750  
*Short Name:* **Complics** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a postoperative event occurred during the hospitalization for surgery. This includes the entire postoperative period up to discharge, even if over 30 days.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ExpiredInOR  
ParentLongName: Patient Expired in OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Post-Op-ReOp Bleeding/Tampanade *SeqNo:* 6755  
*Short Name:* **COpReBld** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient was reexplored for mediastinal bleeding with or without tamponade either in the ICU or returned to the operating room.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Post-Op-ReOp Bleed Timing *SeqNo:* 6760  
*Short Name:* **COpReBldTim** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate when reoperation for bleeding took place.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: COpReBld  
ParentLongName: Post-Op-ReOp Bleeding/Tampanade  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes and Value Definitions:  
Code: Value: Definition:  
1 Acute Within 24 hours of the end of the case  
2 Late more than 24 hours after case ends

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*Long Name:* Post-Op-ReOp for Valvular Dysfunction *SeqNo:* 6765  
*Short Name:* **COpReVlv** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient returned to the operating room for prosthetic or native valve dysfunction. Dysfunction may be structural and/or non-structural failure. Dysfunction may be of prosthesis, a progressive native disease process, or an acute event process that disrupts valve function and creates either clinical compromising insufficiency/regurgitation or valve orifice narrowing.

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

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

3 Yes, surgical  
4 Yes, transcatheter  
2 No

---

*Long Name:* Post-Op-Unplanned Coronary Artery Intervention *SeqNo:* 6771  
*Short Name:* **CRaintMI** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the patient had an unplanned coronary intervention (PCI) or unplanned surgical intervention on a coronary artery.

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

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes  
2 No

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*Long Name:* Post-Op-Unplanned Coronary Artery Intervention - Vessels *SeqNo:* 6772  
*Short Name:* **CReintMIVes** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of vessels that required postoperative reintervention.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CReintMI

ParentLongName: Post-Op-Unplanned Coronary Artery Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Native coronary
  - 2 Graft
  - 3 Both
- 

*Long Name:* Post-Op-Unplanned Coronary Artery Intervention - Intervention Type *SeqNo:* 6773  
*Short Name:* **CReintMIIntTy** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of intervention used postoperatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CReintMI

ParentLongName: Post-Op-Unplanned Coronary Artery Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Surgery
  - 2 PCI
  - 3 Both
-

---

*Long Name:* Post-Op-Aortic Intervention *SeqNo:* 6774  
*Short Name:* **CAortReint** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient underwent an unplanned postoperative aortic intervention.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Post-Op-Aortic Reintervention-Type *SeqNo:* 6775  
*Short Name:* **CAortReintTy** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of aortic intervention the patient received.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CAortReint

ParentLongName: Post-Op-Aortic Intervention

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Open

2 Endovascular

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*Long Name:* Post-Op-ReOp Other Cardiac Reasons *SeqNo:* 6778  
*Short Name:* **COpReOth** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient underwent an unplanned return to the operating room for other cardiac reasons.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Post-Op-Return To OR For Other Non-cardiac Reason *SeqNo:* 6780  
*Short Name:* **COpReNon** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient underwent an unplanned return to the operating room for other non-cardiac reasons.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Post-Op-Open Chest With Planned Delayed Sternal Closure *SeqNo:* 6785  
*Short Name:* **COPIndDelay** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the chest was left open after the index surgical procedure with planned delayed sternal closure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Post-Op-Sternotomy Issue *SeqNo:* 6790  
*Short Name:* **CSternal** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate presence of a post-operative sternotomy issue.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

<i>Long Name:</i>	Post-Op Sternal instability/dehiscence (sterile)	<i>SeqNo:</i>	6795
<i>Short Name:</i>	<b>CSternalDehis</b>	<i>Core:</i>	No
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	The code indicates sterile dehiscence of the sternal edges without evidence of infection but which requires surgical intervention. Skin and subcutaneous tissue may remain intact.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	CSternal		
<i>ParentLongName:</i>	Post-Op-Sternotomy Issue		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Post-Op-Sepsis	<i>SeqNo:</i>	6800
<i>Short Name:</i>	<b>CSepsis</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate if the patient developed sepsis.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Complics		
<i>ParentLongName:</i>	In Hospital Post-Op Events		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

*Long Name:* Post-Op-Sepsis-Positive Blood Cultures *SeqNo:* 6805  
*Short Name:* **CSepsisPBC** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a recognized pathogen is cultured from 1 or more blood cultures and is not related to an infection at another site.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CSepsis  
ParentLongName: Post-Op-Sepsis  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

*Long Name:* Post-Op-Neuro-Stroke Perm *SeqNo:* 6810  
*Short Name:* **CNStrokP** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient has a postoperative stroke (i.e., any confirmed neurological deficit of abrupt onset caused by a disturbance in blood supply to the brain) that was confirmed on imaging or did not resolve within 24 hours.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

<i>Long Name:</i>	Post-Op-Neuro-Transient Ischemic Attack - TIA	<i>SeqNo:</i>	6815
<i>Short Name:</i>	<b>CNStrokTTIA</b>	<i>Core:</i>	No
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient had a postoperative Transient Ischemic Attack (TIA): Loss of neurological function that was abrupt in onset but with complete return of function within 24 hours.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Complics		
<i>ParentLongName:</i>	In Hospital Post-Op Events		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Post-Op-Neuro-Encephalopathy	<i>SeqNo:</i>	6821
<i>Short Name:</i>	<b>CNEnceph</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate if the patient was diagnosed with encephalopathy.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Complics		
<i>ParentLongName:</i>	In Hospital Post-Op Events		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	7	Yes	
	8	No	

*Long Name:* Post-Op-Neuro-Coma/Unresponsive State *SeqNo:* 6822  
*Short Name:* **CNComa** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient developed a postoperative coma or unresponsive state (not stroke).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-Neuro - Lower Extremity Paralysis >24 Hours *SeqNo:* 6825  
*Short Name:* **CNParal** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a new postoperative paralysis of the lower extremities not related to a stroke lasting greater than 24 hours.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No



*Long Name:* Post-Op-Neuro-Paralysis Type *SeqNo:* 6826  
*Short Name:* **CNParalTy** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the new postoperative paralysis, paraparesis, or paraplegia was transient or permanent.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CNParal  
ParentLongName: Post-Op-Neuro - Lower Extremity Paralysis >24 Hours  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Transient  
2 Permanent

*Long Name:* Post-Op-Neuro-Paresis >24 Hours *SeqNo:* 6829  
*Short Name:* **CNParesis** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether post operative paresis was present lasting greater than 24 hours.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

*Long Name:* Post-Op-Neuro-Paresis Type *SeqNo:* 6830  
*Short Name:* **CNParesisTy** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of post op paresis  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CNParesis  
 ParentLongName: Post-Op-Neuro-Paresis >24 Hours  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Transient  
         2 Permanent

*Long Name:* Post-Op-Phrenic Nerve Injury *SeqNo:* 6832  
*Short Name:* **PhrenNrvInj** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient has symptoms of phrenic nerve injury, (e.g., immobility or elevation of the diaphragm, etc.).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

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*Long Name:* Post-Op-Recurrent Laryngeal Nerve Injury *SeqNo:* 6833  
*Short Name:* **RecLarynNrvInj** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient has symptoms of recurrent laryngeal nerve injury, (e.g., hoarseness, difficulty speaking, etc.).  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Post-Op-Pulm-Vent Prolonged *SeqNo:* 6835  
*Short Name:* **CPVntLng** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had prolonged post-operative pulmonary ventilation > 24.0 hours.  
The hours of postoperative ventilation time include OR exit until extubation, plus any additional hours following reintubation.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Pulm - Prolonged Ventilation - Tracheostomy Required after OR Exit *SeqNo:* 6838  
*Short Name:* **CPVntLngTrachReq** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* For patients with initial intubation times greater than 24 hours, indicate if the patient required a tracheostomy after OR Exit. Exclude patient who had a tracheostomy prior to OR Entry.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CPVntLng  
 ParentLongName: Post-Op-Pulm-Vent Prolonged  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

---

*Long Name:* Post-Op-Pulm-Pneumonia *SeqNo:* 6840  
*Short Name:* **CPPneum** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had pneumonia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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<i>Long Name:</i>	Post-Op-Venous Thromboembolism-VTE	<i>SeqNo:</i>	6845
<i>Short Name:</i>	<b>CVTE</b>	<i>Core:</i>	No
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient developed postoperative venous thrombosis or thromboembolic event.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Complics		
<i>ParentLongName:</i>	In Hospital Post-Op Events		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Post-Op-Pulmonary Thromboembolism	<i>SeqNo:</i>	6850
<i>Short Name:</i>	<b>PulmEmb</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Postoperative Events	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient had a pulmonary thromboembolism diagnosed by radiologic study such as V/Q scan, angiogram, or spiral CT.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	Complics		
<i>ParentLongName:</i>	In Hospital Post-Op Events		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Post-Op-Pleural Effusion Requiring Drainage *SeqNo:* 6860  
*Short Name:* **CPIEff** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a post-operative pleural effusion required drainage via thoracentesis or chest tube insertion.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

*Long Name:* Post-Op-Pneumothorax Requiring Intervention *SeqNo:* 6865  
*Short Name:* **PostOpPneumo** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a post-operative pneumothorax requiring intervention.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

---

*Long Name:* Post-Op-Renal-Renal Failure *SeqNo:* 6870  
*Short Name:* **CRenFail** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient had acute renal failure or worsening renal function resulting in ONE OR BOTH of the following:  
 1. Increase in serum creatinine level 3.0 x greater than baseline, or serum creatinine level  $\geq 4$  mg/dL , Acute rise must be at least 0.5 mg/dl 2. A new requirement for dialysis postoperatively.

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

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Post-Op-Renal-Dialysis Req *SeqNo:* 6875  
*Short Name:* **CRenDial** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient had a new requirement for dialysis postoperatively, which may include hemodialysis, peritoneal dialysis.

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

ParentShortName: CRenFail

ParentLongName: Post-Op-Renal-Renal Failure

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Post-Op-Dialysis Required After Discharge *SeqNo:* 6880  
*Short Name:* **DialDur** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether dialysis was required after hospital discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CRenDial

ParentLongName: Post-Op-Renal-Dialysis Req

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Post-Op-Dialysis Duration *SeqNo:* 6881  
*Short Name:* **DialStat** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the duration of post-discharge dialysis.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CRenDial

ParentLongName: Post-Op-Renal-Dialysis Req

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Temporary

2 Permanent

3 Unknown



*Long Name:* Post-Op-Ultra Filtration *SeqNo:* 6885  
*Short Name:* **CUltraFil** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient required Ultra filtration.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-Vasc-Iliac/Fem Dissect *SeqNo:* 6888  
*Short Name:* **CVaIlFem** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a dissection occurring in the iliac or femoral arteries.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* Post-Op-Vasc-Acute Limb Ischemia *SeqNo:* 6889  
*Short Name:* **CVaLbIsC** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had any complication producing acute limb ischemia. This may include upper or lower limb ischemia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Post-Op-Deep Venous Thrombosis *SeqNo:* 6891  
*Short Name:* **DVT** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient had thrombosis (clot formation) in a deep vein.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Post-Op-Mechanical Assist Device Related Complication *SeqNo:* 6892  
*Short Name:* **CMAD** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there was a post-operative event related to a mechanical assist device.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Post-Op-Mechanical Assist Device Related Events *SeqNo:* 6893  
*Short Name:* **CMADEvents** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of mechanical assist device related postoperative events that required a procedural or surgical intervention.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: CMAD

ParentLongName: Post-Op-Mechanical Assist Device Related Complication

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Cannula/Insertion site issue

2 Hemorrhagic

3 Thrombotic/Embolic

4 Hemolytic

5 Infection

6 Other mechanical assist  
device related complication

---

*Long Name:* Post-Op-MAD-Cannula / Insertion Site Issue *SeqNo:* 6894  
*Short Name:* **CMADCanIns** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the mechanical assist device related postoperative event included a cannula/insertion site issue.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CMAD  
 ParentLongName: Post-Op-Mechanical Assist Device Related Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Post-Op-MAD-Hemorrhagic *SeqNo:* 6895  
*Short Name:* **CMADHem** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there was hemorrhage related to a mechanical assist device  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CMAD  
 ParentLongName: Post-Op-Mechanical Assist Device Related Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Post-Op-MAD-Thrombotic/Embolic *SeqNo:* 6896  
*Short Name:* **CMADThromEm** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there was a thrombotic or embolic event related to a mechanical assist device  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CMAD  
 ParentLongName: Post-Op-Mechanical Assist Device Related Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-MAD-Hemolytic *SeqNo:* 6897  
*Short Name:* **CMADHemolytic** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there was a hemolytic event related to a mechanical assist device  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CMAD  
 ParentLongName: Post-Op-Mechanical Assist Device Related Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-MAD-Infection *SeqNo:* 6898  
*Short Name:* **CMADInf** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether there was infection related to a mechanical assist device  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CMAD  
 ParentLongName: Post-Op-Mechanical Assist Device Related Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-MAD-Other *SeqNo:* 6899  
*Short Name:* **CMADOther** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether any other mechanical assist device related event occurred  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CMAD  
 ParentLongName: Post-Op-Mechanical Assist Device Related Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

*Long Name:* Post-Op-Rhythm Disturbance Requiring Perm Device *SeqNo:* 6900  
*Short Name:* **CRhythmDis** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether patient developed a new dysrhythmia requiring insertion of a permanent device.  
Do not code these device insertions in the reoperation section even if performed in the OR.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
6 Yes  
7 No

*Long Name:* Post-Op-New Dysrhythmia Requiring Insertion of a Permanent Device *SeqNo:* 6901  
*Short Name:* **NewRhythmDis** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the patient developed a new dysrhythmia requiring insertion of a permanent device.  
Do not code in the reoperation section even if performed in the OR.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

*Long Name:* Post-Op-Other-Cardiac Arrest *SeqNo:* 6905  
*Short Name:* **COTArrst** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had an acute cardiac arrest documented by one of the following:a.  
 Ventricular fibrillation/ Pulseless VTb. PEAc. Asystoled. ICD shocks  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Post-Op-Other-Aortic Rupture *SeqNo:* 6906  
*Short Name:* **COTAortRupt** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether aortic rupture occurred post op  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No



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*Long Name:* PostOp - Other - Aortic Complication *SeqNo:* 6907  
*Short Name:* **AorticComp** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the patient had an aortic related complication. Complications include aortic dissection, post-op aortic endoleaks, aortic side branch malperfusion, or aortic stent graft induced entry tear.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Post-Op-Other-Aortic Dissection *SeqNo:* 6909  
*Short Name:* **CVaAoDis** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a dissection occurring in any part of the aorta.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: AorticComp  
ParentLongName: PostOp - Other - Aortic Complication  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Post-Op-Other-Aortic DissectionType *SeqNo:* 6910  
*Short Name:* **CVaAoDisTy** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of aortic dissection  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: CVaAoDis  
 ParentLongName: Post-Op-Other-Aortic Dissection  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Antegrade  
         2 Retrograde  
         3 Both

*Long Name:* Post-Op-Other-Aortic Endoleak *SeqNo:* 6921  
*Short Name:* **COtAortEndo** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a post operative endoleak occurred  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: AorticComp  
 ParentLongName: PostOp - Other - Aortic Complication  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
         1 Yes  
         2 No

---

*Long Name:* Post-Op-Other-Aortic Endoleak Type *SeqNo:* 6922  
*Short Name:* **COtAortEndoTy** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate they type of endoleak  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: COtAortEndo

ParentLongName: Post-Op-Other-Aortic Endoleak

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1	Ia
2	Ib
3	II
4	III
5	IV
6	V

---

*Long Name:* Post-Op-Other-Aortic Side Branch Malperfusion *SeqNo:* 6926  
*Short Name:* **COtAortSide** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether aortic side branch malperfusion occurred  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AorticComp

ParentLongName: PostOp - Other - Aortic Complication

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1	Yes
2	No

---

*Long Name:* Post-Op-Other-Aortic Stent Graft Induced Entry Tear *SeqNo:* 6927  
*Short Name:* **COTaortTear** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether an aortic stent graft induced entry tear occurred  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AorticComp

ParentLongName: PostOp - Other - Aortic Complication

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Post-Op-Other-Anticoagulant Bleeding Event *SeqNo:* 6929  
*Short Name:* **COTCoag** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had bleeding, hemorrhage, and/or embolic events related to anticoagulant therapy postoperatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

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---

*Long Name:* Anticoagulant Bleeding Event - Type *SeqNo:* 6930  
*Short Name:* **AnticoagBleedEvtType** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the type of anticoagulation bleeding event. Anticoagulation bleeding events include Intracerebral, subdural, or Gastrointestinal.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: COtCoag  
ParentLongName: Post-Op-Other-Anticoagulant Bleeding Event  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Intracerebral  
        2 Subdural  
        3 Gastrointestinal

---

*Long Name:* Heparin Induced Thrombocytopenia (HIT) *SeqNo:* 6931  
*Short Name:* **HIT** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate if the patient was diagnosed with Heparin Induced Thrombocytopenia. Diagnosis can occur with confirmation from an outside facility after patient's discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Complics  
ParentLongName: In Hospital Post-Op Events  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
        1 Yes  
        2 No

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*Long Name:* Heparin Induced Thrombocytopenia Thrombosis *SeqNo:* 6932  
*Short Name:* **HITT** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the patient was diagnosed with Heparin Induced Thrombocytopenia Thrombosis.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: HIT

ParentLongName: Heparin Induced Thrombocytopenia (HIT)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Post-Op-Other-Pericardiocentesis *SeqNo:* 6933  
*Short Name:* **COTamp** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had pericardiocentesis to remove fluid in the pericardial space compromising cardiac filling.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* Post-Op-Other-Gastro-Intestinal Event *SeqNo:* 6935  
*Short Name:* **COtGI** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had a postoperative occurrence of any GI event, including but not limited to:  
a. GI bleeding requiring transfusion  
b. Pancreatitis with abnormal amylase/lipase requiring nasogastric (NG) suction therapy  
c. Cholecystitis requiring cholecystectomy or drainage  
d. Mesenteric ischemia requiring exploration  
e. Hepatic failure  
f. Prolonged ileus  
g. Clostridium difficile

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

*ParentShortName:* Complics

*ParentLongName:* In Hospital Post-Op Events

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Gastro-Intestinal Event - Type *SeqNo:* 6936  
*Short Name:* **GIEventType** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of gastrointestinal event.  
*Data Source:* User *Format:* Multi-Select

*ParentShortName:* COtGI

*ParentLongName:* Post-Op-Other-Gastro-Intestinal Event

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Ischemic Bowel

2 Gastrointestinal bleed

3 Pancreatitis

4 Cholecystitis

5 Liver Dysfunction/Liver  
Failure

6 Ileus

## 7 Other

*Long Name:* Post-Op-Other-Liver Dysfunction or Failure *SeqNo:* 6939  
*Short Name:* **COTLiver** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had liver dysfunction or failure.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Post-Op-Other-Multi Sys Fail *SeqNo:* 6940  
*Short Name:* **COTMSF** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient had two or more major organ systems suffer compromised functions.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: Complics  
 ParentLongName: In Hospital Post-Op Events  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No



*Long Name:* Post-Op-Other-A Fib *SeqNo:* 6945  
*Short Name:* **COTAFib** *Core:* Yes  
*Section Name:* Postoperative Events *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the patient experienced atrial fibrillation/flutter (AF) after OR Exit that a. last longer than one hour, or b. lasts less than one hour but requires medical or procedural intervention. Exclude patients who were in AFib at the start of surgery (OR Entry).

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

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Post-Op-Other-Other *SeqNo:* 6950  
*Short Name:* **COTOther** *Core:* No  
*Section Name:* Postoperative Events *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether a postoperative event occurred that is not identified in the categories above yet impacts hospital length of stay and/or outcome.

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

ParentShortName: Complics

ParentLongName: In Hospital Post-Op Events

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

<i>Long Name:</i>	Date of Last Follow-Up	<i>SeqNo:</i>	7000
<i>Short Name:</i>	<b>LFUDate</b>	<i>Core:</i>	No
<i>Section Name:</i>	Discharge / Mortality	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the date on which the last follow-up was made. If patient dies in the hospital, this value will be the same as the date of death. If no follow-up is made after patient is discharged, this value will be the same as the discharge date.		
<i>Data Source:</i>	User	<i>Format:</i>	Date mm/dd/yyyy

<i>Long Name:</i>	Mort-Status at 30 Days After Surgery (either discharged or in-hospital)	<i>SeqNo:</i>	7001
<i>Short Name:</i>	<b>Mt30Stat</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Discharge / Mortality	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether the patient was alive or dead at 30 days post-surgery (whether in hospital or not).		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Alive
- 2 Dead
- 3 Unknown

<i>Long Name:</i>	Mort-Op Death-Method Of Verification	<i>SeqNo:</i>	7002
<i>Short Name:</i>	<b>Mt30StatMeth</b>	<i>Core:</i>	No
<i>Section Name:</i>	Discharge / Mortality	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the primary method used to verify the patient's 30-day mortality status.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Phone call to patient or family
- 2 Letter from medical provider
- 3 Evidence of life or death in medical record (lab tests, cardiac rehab visits, etc.)
- 4 Office visit on or after 30 days after procedure
- 5 Social Security Death Master

File / NDI
6 Other

*Long Name:* Patient Transfer to Another Acute Hospital *SeqNo:* 7003  
*Short Name:* **DischMtPtTrnfAcuteHosp** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate if the patient was transferred to another acute care hospital.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* ExpiredInOR  
*ParentLongName:* Patient Expired in OR  
*ParentHarvestCodes:* 2  
*ParentValues:* = "No"

*Harvest Codes:*  
Code: Value:  
 1 Yes  
 2 No

*Long Name:* Patient Transfer to Acute Care Hospital - Date *SeqNo:* 7004  
*Short Name:* **DischMtPtTrnfAcuteHospDt** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the date the patient was transferred to another acute care hospital.  
*Data Source:* User *Format:* Date mm/dd/yyyy

*ParentShortName:* DischMtPtTrnfAcuteHosp  
*ParentLongName:* Patient Transfer to Another Acute Hospital  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Patient Still in Acute Care Hospital Setting *SeqNo:* 7005  
*Short Name:* **DischMtPtAcuteHospStill** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the patient is still in the acute care setting after the index procedure. Once the patient is discharged from the acute care setting (either from performing hospital or subsequent transfers) choose no and proceed with discharge/mortality data capture.

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

ParentShortName: ExpiredInOR

ParentLongName: Patient Expired in OR

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Hospital Discharge Date *SeqNo:* 7006  
*Short Name:* **DischDt** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the date the patient was discharged from the hospital ( Acute Care Facility). If the patient died in the hospital, the discharge date is the date of death.

*Data Source:* User *Format:* Date mm/dd/yyyy

ParentShortName: DischMtPtAcuteHospStill

ParentLongName: Patient Still in Acute Care Hospital Setting

ParentHarvestCodes: 2

ParentValues: = "No"

---

---

*Long Name:* Status at Hospital Discharge *SeqNo:* 7007  
*Short Name:* **DischMortStat** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's status at hospital discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DischMtPtAcuteHospStill  
 ParentLongName: Patient Still in Acute Care Hospital Setting  
 ParentHarvestCodes: 2  
 ParentValues: = "No"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
3	Discharged Alive, last known status alive (other than Hospice)
4	Discharged Alive, died after discharge
5	Discharged to Hospice
2	Died in hospital

---

*Long Name:* Discharge Location *SeqNo:* 7010  
*Short Name:* **DisLoctn** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the location to where the patient was discharged.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: DischMortStat  
 ParentLongName: Status at Hospital Discharge  
 ParentHarvestCodes: 3|4  
 ParentValues: = "Discharged Alive, last known status alive (other than Hospice)" or "Discharged Alive, died after discharge"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Home
2	Extended Care/Transitional Care Unit/Rehab
4	Nursing Home
6	Left AMA
777	Other

---

---

*Long Name:* Extended Care/Transitional Care Unit/Rehab - Type *SeqNo:* 7011  
*Short Name:* **DisLExtCareTCURRehabTy** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of extended care, transitional care unit, or rehab unit the patient was discharged from acute care to.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: DisLoctn  
ParentLongName: Discharge Location  
ParentHarvestCodes: 2  
ParentValues: = "Extended Care/Transitional Care Unit/Rehab"  
Harvest Codes:  
Code: Value:  
1 Acute Short-term Rehab  
2 Long-term Rehab  
3 Unknown

---

*Long Name:* Cardiac Rehabilitation Referral *SeqNo:* 7015  
*Short Name:* **CardRef** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether advice was given or discussion conducted with the patient (by physician, nurse, or other personnel) regarding the importance of joining a cardiac rehabilitation program, or an appointment made.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: DisLoctn  
ParentLongName: Discharge Location  
ParentHarvestCodes: 1|2|4|777  
ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No  
3 Not Applicable

---

*Long Name:* Substance Use Screening and Counseling Performed (NQF 2595) *SeqNo:* 7016  
*Short Name:* **SubsUseScrnCounPerf** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*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.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Not Applicable

*Long Name:* Smoking Cessation Counseling *SeqNo:* 7020  
*Short Name:* **SmokCoun** *Core:* No  
*Section Name:* Discharge / Mortality *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether, prior to discharge from the acute care facility, the patient received smoking cessation counseling. Please select "Not Applicable" for those patients with no prior history of smoking or remote (more than 1 year) history.

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

ParentShortName: DischMortStat

ParentLongName: Status at Hospital Discharge

ParentHarvestCodes: 3|4

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

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No
- 3 Not Applicable

---

*Long Name:* Aspirin - Discharge *SeqNo:* 7060  
*Short Name:* **DCASA** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on Aspirin, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
- 

*Long Name:* ADP Inhibitors - Discharge *SeqNo:* 7070  
*Short Name:* **DCADP** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on an ADP inhibitor, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
-



*Long Name:* Other Antiplatelet - Discharge *SeqNo:* 7075  
*Short Name:* **DCOthAntiplat** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on any other antiplatelet medication, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

*ParentShortName:* DisLoctn

*ParentLongName:* Discharge Location

*ParentHarvestCodes:* 1|2|4|777

*ParentValues:* = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

*Harvest Codes:*

Code: Value:

- 1 Yes
- 2 No
- 3 Contraindicated

*Long Name:* Direct Thrombin Inhibitors - Discharge *SeqNo:* 7080  
*Short Name:* **DCDirThromIn** *Core:* No  
*Section Name:* Discharge / Mortality *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on a direct thrombin inhibitor, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

*ParentShortName:* DischMortStat

*ParentLongName:* Status at Hospital Discharge

*ParentHarvestCodes:* 3|4

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

*Harvest Codes:*

Code: Value:

- 1 Yes
- 2 No
- 3 Contraindicated

---

*Long Name:* Direct Oral Anticoagulant - Discharge *SeqNo:* 7081  
*Short Name:* **DCDirOralAnticoag** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on Direct Oral Anticoagulant, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
- 

*Long Name:* Warfarin (Coumadin) - Discharge *SeqNo:* 7085  
*Short Name:* **DCCoum** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on Warfarin (Coumadin), or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
-

<i>Long Name:</i>	Factor Xa Inhibitors - Discharge	<i>SeqNo:</i>	7090								
<i>Short Name:</i>	<b>DCFactorXa</b>	<i>Core:</i>	No								
<i>Section Name:</i>	Discharge / Mortality	<i>Harvest:</i>	No								
<i>DBTableName</i>	Adultdata2										
<i>Definition:</i>	Indicate whether or not the patient was discharged from facility on a factor Xa inhibitor, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.										
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)								
<i>ParentShortName:</i>	DischMortStat										
<i>ParentLongName:</i>	Status at Hospital Discharge										
<i>ParentHarvestCodes:</i>	3 4										
<i>ParentValues:</i>	= "Discharged Alive, last known status alive (other than Hospice)" or "Discharged Alive, died after discharge"										
<i>Harvest Codes:</i>	<table border="0"> <thead> <tr> <th><u>Code:</u></th> <th><u>Value:</u></th> </tr> </thead> <tbody> <tr> <td>1</td> <td>Yes</td> </tr> <tr> <td>2</td> <td>No</td> </tr> <tr> <td>3</td> <td>Contraindicated</td> </tr> </tbody> </table>			<u>Code:</u>	<u>Value:</u>	1	Yes	2	No	3	Contraindicated
<u>Code:</u>	<u>Value:</u>										
1	Yes										
2	No										
3	Contraindicated										

<i>Long Name:</i>	Novel Oral Anticoagulant - Discharge	<i>SeqNo:</i>	7091								
<i>Short Name:</i>	<b>DCNovOrAnti</b>	<i>Core:</i>	No								
<i>Section Name:</i>	Discharge / Mortality	<i>Harvest:</i>	No								
<i>DBTableName</i>	Adultdata2										
<i>Definition:</i>	Indicate whether or not the patient was discharged from facility on a Novel Oral Anticoagulant, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.										
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)								
<i>ParentShortName:</i>	DischMortStat										
<i>ParentLongName:</i>	Status at Hospital Discharge										
<i>ParentHarvestCodes:</i>	3 4										
<i>ParentValues:</i>	= "Discharged Alive, last known status alive (other than Hospice)" or "Discharged Alive, died after discharge"										
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<u>Code:</u>	<u>Value:</u>										
1	Yes										
2	No										
3	Contraindicated										

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*Long Name:* Other Anticoagulant - Discharge *SeqNo:* 7095  
*Short Name:* **DCOthAnticoag** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on any other anticoagulant, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
- 

*Long Name:* ACE or ARB Inhibitors - Discharge *SeqNo:* 7100  
*Short Name:* **DCACE** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on ACE or ARB Inhibitors, or if it was contraindicated or not indicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Contraindicated
  - 6 Not indicated (see Training Manual)
-

---

*Long Name:* Amiodarone - Discharge *SeqNo:* 7103  
*Short Name:* **DCAmiodarone** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on Amiodarone, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

1 Yes  
 2 No  
 3 Contraindicated

---

*Long Name:* Beta Blockers - Discharge *SeqNo:* 7105  
*Short Name:* **DCBeta** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged on beta blockers, or if beta blocker was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

1 Yes  
 2 No  
 3 Contraindicated

---

---

*Long Name:* Lipid Lowering Statin - Discharge *SeqNo:* 7115  
*Short Name:* **DCLipLowStat** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on a Statin, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

1 Yes

2 No

3 Contraindicated

---

*Long Name:* Lipid Lowering - Other - Discharge *SeqNo:* 7120  
*Short Name:* **DCLipLowNonStat** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether or not the patient was discharged from facility on a lipid-lowering medication other than a statin, or if it was contraindicated. The contraindication must be documented in the medical record by a physician, nurse practitioner, pharmacist or physician assistant.

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

ParentShortName: DisLoctn

ParentLongName: Discharge Location

ParentHarvestCodes: 1|2|4|777

ParentValues: = "Home", "Extended Care/Transitional Care Unit/Rehab", "Nursing Home" or "Other"

Harvest Codes:

Code: Value:

1 Yes

2 No

3 Contraindicated

---

---

*Long Name:* Mortality - Date *SeqNo:* 7121  
*Short Name:* **MtDate** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the date the patient was declared dead.  
*Data Source:* User *Format:* Date mm/dd/yyyy  
 ParentShortName: DischMortStat  
 ParentLongName: Status at Hospital Discharge  
 ParentHarvestCodes: 4|5  
 ParentValues: = "Discharged Alive, died after discharge" or "Discharged to Hospice"

---

*Long Name:* Mort-Operative Mortality *SeqNo:* 7124  
*Short Name:* **MtOpD** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* 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.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: DischMortStat  
 ParentLongName: Status at Hospital Discharge  
 ParentHarvestCodes: 4|5  
 ParentValues: = "Discharged Alive, died after discharge" or "Discharged to Hospice"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

---

*Long Name:* Post Discharge Death Location *SeqNo:* 7125  
*Short Name:* **PostDisDthLoc** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the location where the patient died after being discharged from the original hospitalization.

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

ParentShortName: DischMortStat

ParentLongName: Status at Hospital Discharge

ParentHarvestCodes: 4|5

ParentValues: = "Discharged Alive, died after discharge" or "Discharged to Hospice"

Harvest Codes:

Code: Value:

- 1 Home
  - 2 Extended Care Facility
  - 3 Hospice
  - 4 Acute Rehabilitation
  - 5 Hospital during readmission
  - 6 Other
  - 7 Unknown
- 

*Long Name:* Mort-Primary Cause of Death *SeqNo:* 7126  
*Short Name:* **MtCause** *Core:* Yes  
*Section Name:* Discharge / Mortality *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the PRIMARY cause of death, i.e., the first significant abnormal event which ultimately led to death.

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

ParentShortName: DischMortStat

ParentLongName: Status at Hospital Discharge

ParentHarvestCodes: 2

ParentValues: = "Died in hospital"

Harvest Codes:

Code: Value:

- 1 Cardiac
- 2 Neurologic
- 3 Renal
- 4 Vascular
- 5 Infection
- 6 Pulmonary
- 700 Unknown



777 Other

*Long Name:* In-Hospital Death location *SeqNo:* 7128  
*Short Name:* **InHospDthLoc** *Core:* No  
*Section Name:* Discharge / Mortality *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the location within the hospital where the patient died.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: DischMortStat  
ParentLongName: Status at Hospital Discharge  
ParentHarvestCodes: 2  
ParentValues: = "Died in hospital"  
Harvest Codes:  
Code: Value:  
1 OR During Initial surgery  
2 OR During Reoperation  
3 In Hospital (Other Than OR)

*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

---

*Long Name:* Date of Readmission *SeqNo:* 7145  
*Short Name:* **ReadmitDt** *Core:* Yes  
*Section Name:* Readmission *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the date the patient was readmitted.  
*Data Source:* User *Format:* Date mm/dd/yyyy  
ParentShortName: Readmit  
ParentLongName: Readmission  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Readmit Reason *SeqNo:* 7160  
*Short Name:* **ReadmRsn** *Core:* Yes  
*Section Name:* Readmission *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the primary reason that the patient was readmitted as an in-patient.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: Readmit  
ParentLongName: Readmission  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:

Code: Value:

- 34 Angina
- 21 Anticoagulation  
Complication -  
Pharmacological
- 20 Anticoagulation  
Complication - Valvular
- 33 Aortic Complication
- 2 Arrhythmia/Heart Block
- 35 Blood Pressure (hyper or  
hypotension)
- 36 Chest pain, noncardiac
- 3 Congestive Heart Failure
- 22 Coronary Artery / Graft  
Dysfunction
- 37 Depression/psychiatric issue
- 27 DVT
- 38 Electrolyte imbalance

- 
- 24 Endocarditis
  - 39 Failure to thrive
  - 40 GI issue
  - 23 Infection - Conduit Harvest Site
  - 9 Infection - Deep Sternum / Mediastinitis
  - 41 Mental status changes
  - 5 Myocardial Infarction
  - 28 PE
  - 6 Pericardial Effusion and/or Tamponade
  - 42 Pericarditis/Post Cardiotomy Syndrome
  - 31 Pleural effusion requiring intervention
  - 29 Pneumonia
  - 14 Renal Failure
  - 43 Renal insufficiency
  - 30 Respiratory complications, other
  - 44 Sepsis
  - 18 Stroke
  - 15 TIA
  - 45 Transfusion
  - 26 Transplant Rejection
  - 25 VAD Complication
  - 8 Valve Dysfunction
  - 19 Vascular Complication, acute
  - 46 Wound, other (drainage, cellulitis)
  - 47 Wound, Sternal dehiscence not related to infection
  - 998 Other - Related Readmission
  - 999 Other - Nonrelated Readmission
  - 32 Other - Planned readmission
  - 997 Unknown
-

---

*Long Name:* Readmit Reason - Primary Procedure *SeqNo:* 7165  
*Short Name:* **ReadmPro** *Core:* Yes  
*Section Name:* Readmission *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the primary procedure that the patient received after being readmitted as an in-patient.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: Readmit

ParentLongName: Readmission

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

700	No Procedure Performed
100	Cath lab for valve intervention
30	Cath lab for coronary intervention (PCI)
80	Dialysis
10	OR for Bleeding
50	OR for Coronary Artery Intervention
70	OR for Sternal Debridement/Muscle Flap
60	OR for Valve Intervention
90	OR for Vascular Procedure
130	OR for Aorta Intervention
20	Pacemaker insertion/AICD
40	Pericardiotomy/Pericardiocentesis
140	Planned noncardiac procedure
110	Thoracentesis / chest tube insertion
120	Wound vac
710	Other Procedure
720	Unknown

---

*Long Name:* Readmit Reason - Primary Procedure - Aorta Intervention Type *SeqNo:* 7166  
*Short Name:* **ReadmAortIntTy** *Core:* Yes  
*Section Name:* Readmission *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of aortic intervention required during readmission  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ReadmPro

ParentLongName: Readmit Reason - Primary Procedure

ParentHarvestCodes: 130

ParentValues: = "OR for Aorta Intervention"

Harvest Codes:

Code: Value:

- 1 Open
- 2 Endovascular

*Long Name:* Readmit Reason - Primary Procedure - Aorta Intervention Indication *SeqNo:* 7167  
*Short Name:* **ReadmAortIntInd** *Core:* Yes  
*Section Name:* Readmission *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Select the indication for aortic reintervention  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ReadmPro

ParentLongName: Readmit Reason - Primary Procedure

ParentHarvestCodes: 130

ParentValues: = "OR for Aorta Intervention"

Harvest Codes:

Code: Value:

- 1 Rupture
- 2 Endoleak
- 3 Infection
- 4 Dissection
- 5 Expansion
- 6 Loss of side branch patency
- 7 Other

---

*Long Name:* Predicted Risk of Mortality *SeqNo:* 7170  
*Short Name:* **PredMort** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Mortality.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

*Long Name:* Predicted Deep Sternal Wound Infx *SeqNo:* 7175  
*Short Name:* **PredDeep** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Deep Sternal Wound Infection.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

*Long Name:* Predicted Reoperation *SeqNo:* 7180  
*Short Name:* **PredReop** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Reoperation.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

---

*Long Name:* Predicted Permanent Stroke *SeqNo:* 7185  
*Short Name:* **PredStro** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Permanent Stroke.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

*Long Name:* Predicted Prolonged Ventilation *SeqNo:* 7190  
*Short Name:* **PredVent** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Prolonged Ventilation.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

*Long Name:* Predicted Renal Failure *SeqNo:* 7195  
*Short Name:* **PredRenF** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Renal Failure.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

---

*Long Name:* Predicted Morbidity or Mortality *SeqNo:* 7200  
*Short Name:* **PredMM** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Morbidity or Mortality.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

*Long Name:* Predicted Short Length of Stay *SeqNo:* 7205  
*Short Name:* **Pred6D** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Short Length of Stay.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---

*Long Name:* Predicted Long Length of Stay *SeqNo:* 7210  
*Short Name:* **Pred14D** *Core:* Yes  
*Section Name:* Risk Scores *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* Indicate the Predicted Risk of Long Length of Stay.  
*Data Source:* Calculated *Format:* Real number, at least 0.3 digits (3 decimal places)  
Low Value: 0.000 High Value: 100.000

---



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*Long Name:* Temporary Yes/No Field #1 *SeqNo:* 7215  
*Short Name:* **TempYN1** *Core:* Yes  
*Section Name:* STS Temporary Fields *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* This is a temporary field that should not be used for data collection until expressly instructed to by the STS.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Temporary Yes/No Field #2 *SeqNo:* 7220  
*Short Name:* **TempYN2** *Core:* Yes  
*Section Name:* STS Temporary Fields *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* This is a temporary field that should not be used for data collection until expressly instructed to by the STS.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Temporary Date Field *SeqNo:* 7225  
*Short Name:* **TempDt** *Core:* Yes  
*Section Name:* STS Temporary Fields *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* This is a temporary field that should not be used for data collection until expressly instructed to by the STS.  
*Data Source:* User *Format:* Date mm/dd/yyyy

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*Long Name:* Temporary Coded Field *SeqNo:* 7230  
*Short Name:* **TempCode** *Core:* Yes  
*Section Name:* STS Temporary Fields *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* This is a temporary field that should not be used for data collection until expressly instructed to by the STS.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	11
12	12
13	13
14	14
15	15
16	16
17	17
18	18
19	19
20	20

---

*Long Name:* Temporary Text Field *SeqNo:* 7235  
*Short Name:* **TempText** *Core:* Yes  
*Section Name:* STS Temporary Fields *Harvest:* Yes  
*DBTableName* Adultdata1  
*Definition:* This is a temporary field that should not be used for data collection until expressly instructed to by the STS.  
*Data Source:* User *Format:* Text

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*Long Name:* Organization Participates in Adult Anesthesia Section *SeqNo:* 7300  
*Short Name:* **OrgPartAdAnesthSect** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if your organization participate in the Adult Anesthesia Section.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

## Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
- 

*Long Name:* Primary Anesthesiologist Name *SeqNo:* 7310  
*Short Name:* **PrimAnesName** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the full name of the primary anesthesiologist for the procedure.  
*Data Source:* User *Format:* Text

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Primary Anesthesiologist National Provider Identifier *SeqNo:* 7315  
*Short Name:* **PrimAnesNPI** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the individual-level National Provider Identifier (NPI) of the primary anesthesiologist for the procedure.  
*Data Source:* Automatic *Format:* Text

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Care Team Model *SeqNo:* 7320  
*Short Name:* **AnesCareTeamMod** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName:* Adultdata2

*Definition:* Indicate the anesthesia care team assigned for the predominant portion of the procedure, defined as greater than 40% of the duration of the procedure from induction of anesthesia to the patient intraoperatively.

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

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Anesthesiologist working alone
  - 2 Attending anesthesiologist teaching/medically directing fellow
  - 3 Attending anesthesiologist teaching/medically directing house staff
  - 4 Attending anesthesiologist medically directing CRNA
  - 8 Attending anesthesiologist medically directing AA
  - 6 Surgeon medically directing CRNA
  - 7 CRNA practicing independently
-

*Long Name:* Anesthesiology Care Team Model - Anesthesiologist Directing CRNA Ratio *SeqNo:* 7321  
*Short Name:* **AnesCareTeamModCRNARatio** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the ratio of the attending anesthesiologist medically directed CRNA.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AnesCareTeamMod

ParentLongName: Care Team Model

ParentHarvestCodes: 4

ParentValues: = "Attending anesthesiologist medically directing CRNA"

Harvest Codes:

Code: Value:

1 1:1  
 2 1:2  
 3 1:3  
 4 1:4  
 5 1:5  
 6 N/A

*Long Name:* Anesthesiology Care Team Model - Anesthesiology Directing AA - Ratio *SeqNo:* 7322  
*Short Name:* **AnesCareTeamModAARatio** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the ratio of the attending anesthesiologist medically directed AA.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: AnesCareTeamMod

ParentLongName: Care Team Model

ParentHarvestCodes: 8

ParentValues: = "Attending anesthesiologist medically directing AA"

Harvest Codes:

Code: Value:

1 1:1  
 2 1:2  
 3 1:3  
 4 1:4  
 5 1:5  
 6 N/A

*Long Name:* Pain Score Baseline *SeqNo:* 7325  
*Short Name:* **PainScorePre** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the highest baseline (preoperative) pain score on the 0-10 integer scale, or indicate that the score was not recorded.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect  
*ParentLongName:* Organization Participates in Adult Anesthesia Section  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*

<u>Code:</u>	<u>Value:</u>
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	Not Recorded

*Long Name:* Blood Pressure Baseline (Pre-Anesthetic Induction) - Systolic *SeqNo:* 7326  
*Short Name:* **PreAnesthBPSys** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the most representative preoperative systolic blood pressure after OR entry closest to, but prior to induction of anesthesia.  
*Data Source:* User *Format:* Integer

*Low Value:* 50 *High Value:* 300  
*ParentShortName:* OrgPartAdAnesthSect  
*ParentLongName:* Organization Participates in Adult Anesthesia Section  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

---

*Long Name:* Blood Pressure Baseline (Pre-Anesthetic Induction) - Diastolic *SeqNo:* 7327  
*Short Name:* **PreAnesthBPDia** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the most representative preoperative diastolic blood pressure after OR entry closest to, but prior to induction of anesthesia.  
*Data Source:* User *Format:* Integer  
Low Value: 20 High Value: 150  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Heart Rate Baseline (Pre-Anesthetic Induction) *SeqNo:* 7328  
*Short Name:* **PreAnesthHR** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the most representative preoperative heart rate after OR entry closest to , but prior to induction of anesthesia.  
*Data Source:* User *Format:* Integer  
Low Value: 30 High Value: 170  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

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*Long Name:* Pulmonary Artery Catheter Used *SeqNo:* 7329  
*Short Name:* **PACIntra** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the preoperative or intraoperative placement of a pulmonary artery catheter.

Placement of a pulmonary artery catheter (PAC) in the preoperative or intraoperative period and use of this catheter during the intraoperative period.

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

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Algorithm used to Guide Transfusion *SeqNo:* 7330  
*Short Name:* **TransfAlg** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether a transfusion algorithm or guideline was used to guide transfusion in the patient.

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

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

4 Yes

3 No

---



---

*Long Name:* Heparin Prior to CPB *SeqNo:* 7335  
*Short Name:* **HepPriorCPB** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if heparin that was administered by anesthesia after OR Entry but prior to the initiation of first cardiopulmonary bypass  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OrgPartAdAnesthSect  
 ParentLongName: Organization Participates in Adult Anesthesia Section  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

*Long Name:* Heparin Total Dose *SeqNo:* 7340  
*Short Name:* **TotHep** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total dose of heparin that was administered by anesthesia after OR Entry but prior to the initiation of first cardiopulmonary bypass. Include all doses of heparin given prior to the first cardiopulmonary bypass. Value should be recorded in units.  
*Data Source:* User *Format:* Integer  
 Low Value: 0      High Value: 200000  
 ParentShortName: HepPriorCPB  
 ParentLongName: Heparin Prior to CPB  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

---

*Long Name:* Heparin Management *SeqNo:* 7345  
*Short Name:* **HepMgmt** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the method of heparin management used intraoperatively prior to CPB. Different approaches are utilized to measure the adequacy of heparinization for anticoagulation.

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

ParentShortName: TotHep

ParentLongName: Heparin Total Dose

ParentHarvestCodes: >0

ParentValues: >0

Harvest Codes:

Code: Value:

- 1 Heparin titration based on activated clotting time (ACT)
  - 2 Heparin titration based on heparin concentration (e.g. Hepcon system)
  - 3 Other method
- 

*Long Name:* Fresh Frozen Plasma prior to CPB *SeqNo:* 7346  
*Short Name:* **FFPPriorCPB** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the patient received fresh frozen plasma intra-operatively after heparin was given but prior to cardiopulmonary bypass.

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

ParentShortName: HepPriorCPB

ParentLongName: Heparin Prior to CPB

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-

---

*Long Name:* Fresh Frozen Plasma prior to CPB - Total Dose *SeqNo:* 7347  
*Short Name:* **FFPPriorCPBUnits** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total number of units of Fresh Frozen Plasma given intra-operatively between anesthesia administered first heparin bolus and commencement of cardiopulmonary bypass.  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 99 UsualRangeLow: 0 UsualRangeHigh: 10  
ParentShortName: FFPPriorCPB  
ParentLongName: Fresh Frozen Plasma prior to CPB  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Antithrombin III prior to CPB *SeqNo:* 7348  
*Short Name:* **AntithromPriorCPB** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if antithrombin III was given intra-operatively after heparin was given but prior to cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: HepPriorCPB  
ParentLongName: Heparin Prior to CPB  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

---

*Long Name:* Antithrombin III Total Dose *SeqNo:* 7351  
*Short Name:* **AntithromDose** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total dose of antithrombin III given between anesthesia administered first heparin bolus and commencement of CPB.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 7500.00  
ParentShortName: AntithromPriorCPB  
ParentLongName: Antithrombin III prior to CPB  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Bivalirudin *SeqNo:* 7352  
*Short Name:* **AnticoagPriorCPBBival** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if bivalirudin was given intra-operatively prior to cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Argatroban *SeqNo:* 7353  
*Short Name:* **AnticoagPriorCPBArg** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if argatroban was given intra-operatively prior to cardiopulmonary bypass

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

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Viscoelastic Testing Used During Operation *SeqNo:* 7360  
*Short Name:* **IntraViscoTest** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether viscoelastic testing was used intraoperatively (example: TEG and ROTEM).

Thromboelastography (TEG) is a method of testing the efficiency of coagulation in the blood.

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

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

*Long Name:* Volatile Agent Used *SeqNo:* 7365  
*Short Name:* **VolAgentUsed** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a volatile agent was used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

*Long Name:* Volatile Agent - Isoflurane *SeqNo:* 7366  
*Short Name:* **VolAgentIso** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the volatile agent used was Isoflurane  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* VolAgentUsed

*ParentLongName:* Volatile Agent Used

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

*Long Name:* Volatile Agent - Sevoflurane *SeqNo:* 7367  
*Short Name:* **VolAgentSevo** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the volatile agent used was Sevoflurane  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VolAgentUsed  
 ParentLongName: Volatile Agent Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Volatile Agent - Desflurane *SeqNo:* 7368  
*Short Name:* **VolAgentDes** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the volatile agent used was Desflurane  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: VolAgentUsed  
 ParentLongName: Volatile Agent Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

<i>Long Name:</i>	Volatile Agent - Other	<i>SeqNo:</i>	7369
<i>Short Name:</i>	<b>VolAgentOth</b>	<i>Core:</i>	No
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether any other volatile agent was used		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	VolAgentUsed		
<i>ParentLongName:</i>	Volatile Agent Used		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Volatile Agent(s) Used - Type	<i>SeqNo:</i>	7370
<i>Short Name:</i>	<b>VolatileAgentUsedTy</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the type of volatile agent used intra-operatively. If more than one agent was used, select all that apply.		
<i>Data Source:</i>	User	<i>Format:</i>	Multi-Select
<i>ParentShortName:</i>	VolAgentUsed		
<i>ParentLongName:</i>	Volatile Agent Used		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Isoflurane	
	2	Desflurane	
	3	Sevoflurane	
	4	Other	



*Long Name:* Volatile Agent(s) Timing *SeqNo:* 7377  
*Short Name:* **VolAgentTiming** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the timing of the administration of the volatile agent. If a volatile agent was administered at different time, select all that apply.

*Data Source:* User *Format:* Multi-Select

ParentShortName: VolAgentUsed

ParentLongName: Volatile Agent Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Pre CPB
- 2 During CPB
- 3 Post CPB
- 4 Maintenance (if no CPB)

*Long Name:* Volatile Agent Timing - Pre-CPB *SeqNo:* 7378  
*Short Name:* **VolAgentTimPre** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether the volatile agent was used prior to the patient being on CPB.

*Data Source:* User *Format:* Integer

ParentShortName: VolAgentUsed

ParentLongName: Volatile Agent Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Volatile Agent Timing - During CPB *SeqNo:* 7379  
*Short Name:* **VolAgentTimDur** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the volatile agent was used during the period when patient was on CPB.  
*Data Source:* User *Format:* Integer  
 ParentShortName: VolAgentUsed  
 ParentLongName: Volatile Agent Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Volatile Agent Timing - Post CPB *SeqNo:* 7380  
*Short Name:* **VolAgentTimPost** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the volatile agent was used after the patient was taken off CPB.  
*Data Source:* User *Format:* Integer  
 ParentShortName: VolAgentUsed  
 ParentLongName: Volatile Agent Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Volatile Agent Timing - Maintenance (no CPB) *SeqNo:* 7385  
*Short Name:* **VolAgentTimMaint** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate whether a volatile agent was used for maintenance in a non-pump case (no CPB).  
*Data Source:* User *Format:* Integer  
 ParentShortName: VolAgentUsed  
 ParentLongName: Volatile Agent Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

*Long Name:* Intraop Infusion: Propofol *SeqNo:* 7395  
*Short Name:* **PropIntra** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the use of propofol infusion during surgery.  
 Any use of a propofol infusion during the intraoperative period, usually but not always, in the post-bypass period.  
*Data Source:* User *Format:* Integer  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

*Long Name:* Intraop Midazolam *SeqNo:* 7398  
*Short Name:* **IntraopMidaz** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if midazolam was administered from OR Entry to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraop Mgs of Midazolam - Dose *SeqNo:* 7400  
*Short Name:* **MidazIntra** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the interoperative dose of midazolam in milligrams administered after OR entry and prior to OR exit. Enter zero if no midazolam used.  
*Data Source:* User *Format:* Real

*Low Value:* 0.0 *High Value:* 50.0

*ParentShortName:* IntraopMidaz

*ParentLongName:* Intraop Midazolam

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

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---

*Long Name:* Intraop Fentanyl *SeqNo:* 7402  
*Short Name:* **IntraFent** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if fentanyl was administered from OR Entry to OR Exit  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraop Fentanyl Dose *SeqNo:* 7404  
*Short Name:* **IntraFentDose** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total dose of fentanyl administered in micrograms (mcgs) from OR Entry to OR Exit.  
*Data Source:* User *Format:* Real  
Low Value: 0.00    High Value: 3000.00    UsualRangeLow: 25.00    UsualRangeHigh: 2000.0  
0

ParentShortName: IntraFent

ParentLongName: Intraop Fentanyl

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

---

*Long Name:* Intraop Sufentanil *SeqNo:* 7406  
*Short Name:* **IntraopSufent** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if sufentanil was administered from OR Entry to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraop Sufentanil Dose *SeqNo:* 7408  
*Short Name:* **IntraopSufentDose** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total dose of sufentanil administered in micrograms (mcgs) from OR Entry to OR Exit.  
*Data Source:* User *Format:* Real

Low Value: 0.00    High Value: 5000.00    UsualRangeLow: 25.00    UsualRangeHigh: 2500.0  
0

ParentShortName: IntraopSufent

ParentLongName: Intraop Sufentanil

ParentHarvestCodes: 1

ParentValues: = "Yes"

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---

*Long Name:* Intraop Reminfentanal *SeqNo:* 7410  
*Short Name:* **IntraopRemifent** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if remifentanil was administered from OR Entry to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraop Remifentanil Dose *SeqNo:* 7412  
*Short Name:* **IntraopRemifentDose** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total dose of remifentanil administered in micrograms (mcgs) from OR Entry to OR Exit.  
*Data Source:* User *Format:* Real  
*Low Value:* 0.00 *High Value:* 50000.00 *UsualRangeLow:* 500.00 *UsualRangeHigh:* 20000.00

*ParentShortName:* IntraopRemifent

*ParentLongName:* Intraop Reminfentanal

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

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*Long Name:* Multimodal Analgesics Given (OR Entry to 24h post OR exit) *SeqNo:* 7413  
*Short Name:* **MultimodAnalgesGiven** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether multimodal analgesics were given to the patient from OR Entry to 24 hours post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Multimodal Analgesics (OR Entry to 24h post OR exit) *SeqNo:* 7414  
*Short Name:* **MultimodAnalges** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of multimodal analgesics the patient received from OR Entry to 24 hours post OR Exit. If multiple multimodal analgesics were given, select all that apply.  
*Data Source:* User *Format:* Multi-Select  
ParentShortName: MultimodAnalgesGiven  
ParentLongName: Multimodal Analgesics Given (OR Entry to 24h post OR exit)  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Ketamine (IV)  
2 Local/Regional Anesthesia  
3 Lidocaine Infusion (not bolus)  
4 Acetaminophen (IV or PO)  
5 Cox-2 inhibitor/non-steroidal anti-inflammatory (PO)  
6 Dexmedetomidine (IV)

---



*Long Name:* Blood Pressure Baseline (Pre-Anesthetic Induction) - Mean *SeqNo:* 7420  
*Short Name:* **PreAnesthBPMean** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate the most representative preoperative blood pressure upon arrival in the operating room.  
  
The most representative initial blood pressure (mean) should be recorded. This number may be an initial single recording or the average or median of a series of BP determinations. In all cases, the values should be recorded in the operating room prior to the induction of anesthesia.  
*Data Source:* User *Format:* Integer  
Low Value: 30 High Value: 150

*Long Name:* Intraop Infusion: Dexmedetomidine *SeqNo:* 7432  
*Short Name:* **DexIntra** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate the use of dexmedetomidine infusion during surgery.  
  
Any use of dexmedetomidine infusion during the intraoperative period, usually but not always, in the post-bypass period.  
*Data Source:* User *Format:* Integer

## Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

*Long Name:* Core Temperature Source In OR *SeqNo:* 7435  
*Short Name:* **CoreTempSrc** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the source of core temperature data used to guide cooling and/or rewarming during cardiac surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 Esophageal
- 2 Bladder
- 3 Nasopharyngeal
- 4 Pulmonary artery catheter thermistor
- 5 Tympanic
- 6 Rectal
- 7 CPB venous return
- 8 Jugular-Venous
- 9 Oxygenator arterial outlet blood (CPB Arterial Blood)
- 10 Other
- 11 Unknown

*Long Name:* Core Temperature Maximum During Rewarming *SeqNo:* 7440  
*Short Name:* **CoreTempMax** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's highest core temperature after the initiation of CPB in degrees centigrade. If CPB is not used then code the highest core temp after Incision start time.  
*Data Source:* User *Format:* Real

*Low Value:* 33.0 *High Value:* 41.0

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

<i>Long Name:</i>	Nitric Oxide Therapy Begun Intraoperatively	<i>SeqNo:</i>	7445
<i>Short Name:</i>	<b>NitricOxIntraop</b>	<i>Core:</i>	No
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the usage of inhaled nitric oxide.  Inhaled nitric oxide is used in the treatment of pulmonary hypertension and right ventricular failure. The intent is to capture the usage of inhaled nitric oxide during the cardiac surgical procedure. Do not record the usage of inhaled vasodilating substances other than nitric oxide in this data field.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Crystalloid given by Anesthesia	<i>SeqNo:</i>	7448
<i>Short Name:</i>	<b>CrystGivenAnesth</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate if intravenous crystalloid was administered by the anesthesia care team intraoperatively.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	OrgPartAdAnesthSect		
<i>ParentLongName:</i>	Organization Participates in Adult Anesthesia Section		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<b>Harvest Codes:</b>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

---

*Long Name:* Total Crystalloid Administered by Anesthesia Care Team *SeqNo:* 7450  
*Short Name:* **TotCrystAnesth** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total volume of intravenous crystalloid administered by the anesthesia care team in the OR. The data should be recorded in milliliters. Enter zero if no crystalloid used. Do not record any blood products in this data field.  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 10000 UsualRangeLow: 500 UsualRangeHigh: 10000  
ParentShortName: CrystGivenAnesth  
ParentLongName: Crystalloid given by Anesthesia  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Crystalloid given by Anesthesia - Type *SeqNo:* 7451  
*Short Name:* **CrystGivenAnesthTy** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of crystalloid fluid given by Anesthesia.  
*Data Source:* User *Format:* Multi-Select  
ParentShortName: CrystGivenAnesth  
ParentLongName: Crystalloid given by Anesthesia  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	0.9 Sodium Chloride
2	Normosol
3	Ringer's Lactate
4	Plasmalyte

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*Long Name:* Five Percent Albumin Given by Anesthesia *SeqNo:* 7452  
*Short Name:* **AlbAnesth5Pct** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if 5% Albumin was given by Anesthesia intra-operatively. Only include fluid administered by Anesthesia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Anesthesiology Total 5 % Albumin *SeqNo:* 7453  
*Short Name:* **AnesthTot5PctAlb** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total amount of 5% Albumin administered by Anesthesia in milliliters (mL)  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 2000.0  
ParentShortName: AlbAnesth5Pct  
ParentLongName: Five Percent Albumin Given by Anesthesia  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* Twenty-five Percent Albumin given by Anesthesia *SeqNo:* 7454  
*Short Name:* **AlbAnesth25Pct** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if 25% Albumin was given by Anesthesia intra-operatively. Only include fluid administered by Anesthesia.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
    1 Yes  
    2 No

---

*Long Name:* Anesthesiology Total 25% Albumin *SeqNo:* 7455  
*Short Name:* **AnesthTot25PctAlb** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total amount of 25% Albumin administered by Anesthesia in milliliters (mL).  
*Data Source:* User *Format:* Real  
Low Value: 0.0      High Value: 2000.0  
ParentShortName: AlbAnesth25Pct  
ParentLongName: Twenty-five Percent Albumin given by Anesthesia  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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---

*Long Name:* Autologous Normovolemic Hemodilution (ANH) *SeqNo:* 7456  
*Short Name:* **ANH** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if Autologous Normovolemic Hemodilution (ANH) was administered by anesthesia intra-operatively  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: OrgPartAdAnesthSect  
 ParentLongName: Organization Participates in Adult Anesthesia Section  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 Yes  
     2 No

---

*Long Name:* Autologous Normovolemic Hemodilution (ANH) Volume *SeqNo:* 7457  
*Short Name:* **ANHVol** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total volume of Autologous Normovolemic Hemodilution (ANH) administered in milliliters (mL).  
*Data Source:* User *Format:* Real  
 Low Value: 0.0 High Value: 5000.0  
 ParentShortName: ANH  
 ParentLongName: Autologous Normovolemic Hemodilution (ANH)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Total Synthetic Colloid Administered by Anesthesia Care Team *SeqNo:* 7458  
*Short Name:* **TotColloidAnesth** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the total volume of intravenous synthetic colloid fluid administered by the anesthesia care team. The data should be recorded in milliliters. Enter zero if no synthetic colloid used.  
  
There is continuing controversy as to the risks and benefits of liberal or restrictive intravenous fluid regimens. Record the total volume of all synthetic colloid intravenous fluids administered by the anesthesia care team. Do not record any blood products in this data field.  
  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 4000

*Long Name:* Total Albumin Administered by Anesthesia Care Team *SeqNo:* 7460  
*Short Name:* **TotAlbumAnesth** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the total volume of intravenous human serum albumin fluid administered by the anesthesia care team. The data should be record in milliliters. Enter zero if no albumin used.  
  
There is continuing controversy as to the risks and benefits of liberal or restrictive intravenous fluid regimens. Record the total volume of all human serum albumin fluid administered by the anesthesia care team. Do not record any blood products in this data field.  
  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 2000



---

*Long Name:* Inhaled Vasodilator *SeqNo:* 7462  
*Short Name:* **InhalVaso** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if inhaled vasodilators were administered intra-operatively.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraop IV Vasodilators Used *SeqNo:* 7463  
*Short Name:* **VasodilIntraop** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the usage of intravenous vasodilating drugs administered by continuous infusion during the intraoperative phase of cardiac surgery.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* OrgPartAdAnesthSect

*ParentLongName:* Organization Participates in Adult Anesthesia Section

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

1 Yes

2 No

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*Long Name:* Intraop Glucose Trough *SeqNo:* 7464  
*Short Name:* **IntraopGlucTrough** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether intraoperative glucose level in mg/dL was obtained after induction of anesthesia and prior to OR Exit time.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: OrgPartAdAnesthSect  
ParentLongName: Organization Participates in Adult Anesthesia Section  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
    1 Yes  
    2 No

---

*Long Name:* Intraoperative Glucose Trough Value *SeqNo:* 7465  
*Short Name:* **GlucTroughIntraop** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's lowest intraoperative glucose in mg/dl after induction of anesthesia and prior to OR exit.  
*Data Source:* User *Format:* Integer  
Low Value: 20      High Value: 250  
ParentShortName: IntraopGlucTrough  
ParentLongName: Intraop Glucose Trough  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* Intraop Insulin *SeqNo:* 7473  
*Short Name:* **IntraInsul** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if intra-op insulin was administered from OR Entry to OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraop Insulin Total Dose (max units) *SeqNo:* 7474  
*Short Name:* **TotInsuIntra** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total units (bolus and infusion) of insulin administered intraoperatively after OR entry and prior to OR exit. Enter zero if no insulin was given.  
*Data Source:* User *Format:* Real

Low Value: 0.00 High Value: 200.00

ParentShortName: IntraInsul

ParentLongName: Intraop Insulin

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Intraoperative Processed EEG (BIS) *SeqNo:* 7476  
*Short Name:* **IntraProcEEG** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether an intraoperative processed EEG was monitored

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

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE) *SeqNo:* 7480  
*Short Name:* **IntraOpPreTEE** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if an intraoperative TEE was performed after anesthesia induction and prior to incision.

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

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* LVEF Measured or Estimated *SeqNo:* 7485  
*Short Name:* **PreLVEFMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if an intraoperative ejection fraction was performed after anesthesia induction and prior to incision.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: IntraOpPreTEE  
ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
    1 Yes  
    2 No

---

*Long Name:* LVEF Percentage *SeqNo:* 7490  
*Short Name:* **PreLVEF** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the estimate of Left Ventricular ejection fraction determined by post induction - pre incision intraoperative transesophageal echocardiography.  
*Data Source:* User *Format:* Real  
Low Value: 1.0      High Value: 99.0  
ParentShortName: PreLVEFMeas  
ParentLongName: LVEF Measured or Estimated  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

---

*Long Name:* Left Atrial Size *SeqNo:* 7491  
*Short Name:* **LtAtrSz** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the Left Atrial was measured on the post-induction pre-incision TEE.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: IntraOpPreTEE

ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Left Atrial Superior-Inferior Size *SeqNo:* 7492  
*Short Name:* **LtAtrSupInfSz** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the size of the superior-inferior portion of Left Atrial in centimeters (cm).  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 10.00 UsualRangeLow: 3.00 UsualRangeHigh: 5.00

ParentShortName: LtAtrSz

ParentLongName: Left Atrial Size

ParentHarvestCodes: 1

ParentValues: = "Yes"

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---

*Long Name:* Left Atrial Medial-Lateral Size *SeqNo:* 7493  
*Short Name:* **LtAtrMedLatSz** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the size of the medial-lateral portion of the left atrial in centimeters (cm).  
*Data Source:* User *Format:* Real  
Low Value: 0.00    High Value: 10.00    UsualRangeLow: 3.00    UsualRangeHigh: 5.00  
ParentShortName: LtAtrSz  
ParentLongName: Left Atrial Size  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* RV Function *SeqNo:* 7495  
*Short Name:* **PreRVFx** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the estimate of RV function determined by the post induction - pre incision intraoperative transesophageal echocardiography.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: IntraOpPreTEE  
ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:

Code: Value:

- 1 Normal
  - 2 Mild dysfunction
  - 3 Moderate dysfunction
  - 4 Severe dysfunction
  - 5 Not assessed
-

*Long Name:* Mitral Regurgitation *SeqNo:* 7500  
*Short Name:* **PreMR** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest degree of mitral valve regurgitation from the post induction - pre incision intraoperative transesophageal echocardiography.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

*ParentShortName:* IntraOpPreTEE

*ParentLongName:* Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 None
- 2 Trace/trivial
- 3 Mild
- 4 Moderate
- 5 Severe
- 6 Not assessed

*Long Name:* Mitral Stenosis *SeqNo:* 7505  
*Short Name:* **PreMS** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of mitral valve stenosis from intraoperative transesophageal echocardiography.  
  
Enter the highest level recorded in the chart, i.e., worst performance level. "Moderately severe" should be coded as "severe".  
*Data Source:* User *Format:* Integer

*ParentShortName:* IntraOpPreTEE

*ParentLongName:* Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)

*ParentHarvestCodes:* 1

*ParentValues:* = "Yes"

*Harvest Codes:*

Code: Value:

- 1 None
- 2 Mild
- 3 Moderate
- 4 Severe
- 5 Not assessed



*Long Name:* Aortic Regurgitation *SeqNo:* 7510  
*Short Name:* **PreAR** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of aortic valve regurgitation from intraoperative transesophageal echocardiography.  
 Enter the highest level recorded in the chart, i.e., worst performance level. “Moderately severe” should be coded as “severe”.  
*Data Source:* User *Format:* Integer  
 ParentShortName: IntraOpPreTEE  
 ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 None  
     2 Trace/trivial  
     3 Mild  
     4 Moderate  
     5 Severe  
     6 Not assessed

*Long Name:* Aortic Stenosis *SeqNo:* 7515  
*Short Name:* **PreAS** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2  
*Definition:* Indicate the degree of aortic valve stenosis from intraoperative transesophageal echocardiography.  
 Enter the highest level recorded in the chart, i.e., worst performance level. “Moderately severe”  
*Data Source:* User *Format:* Integer  
 ParentShortName: IntraOpPreTEE  
 ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"  
 Harvest Codes:  
     Code: Value:  
     1 None  
     2 Mild  
     3 Moderate

4	Severe
5	Not assessed

*Long Name:* Aortic Valve Area Assessed *SeqNo:* 7520  
*Short Name:* **PreAVAAssessed** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate whether the aortic valve areas was assessed from intraoperative transesophageal echocardiography.  
*Data Source:* User *Format:* Integer  
*ParentShortName:* IntraOpPreTEE  
*ParentLongName:* Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*  
Code: Value:  
 1 Yes  
 2 No

*Long Name:* Aortic Valve Area *SeqNo:* 7525  
*Short Name:* **PreAVA** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate the aortic valve area from intraoperative transesophageal echocardiography.  
 Enter numeric value in square centimeters for aortic valve.  
*Data Source:* User *Format:* Real  
*Low Value:* 0.2 *High Value:* 5.0  
*ParentShortName:* PreAVAAssessed  
*ParentLongName:* Aortic Valve Area Assessed  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"

<i>Long Name:</i>	Tricuspid Regurgitation	<i>SeqNo:</i>	7530
<i>Short Name:</i>	<b>PreTR</b>	<i>Core:</i>	No
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the degree of tricuspid valve regurgitation from intraoperative transesophageal echocardiography.		
	Enter the highest level recorded in the chart, i.e., worst performance level. "Moderately severe" should be coded as "severe".		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
<i>ParentShortName:</i>	IntraOpPreTEE		
<i>ParentLongName:</i>	Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	None	
	2	Trace/trivial	
	3	Mild	
	4	Moderate	
	5	Severe	
	6	Not assessed	

<i>Long Name:</i>	Patent Foramen Ovale	<i>SeqNo:</i>	7535
<i>Short Name:</i>	<b>PrePFO</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the presence of patent foramen ovale diagnosed by intraoperative post induction - pre incision transesophageal echocardiography.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	IntraOpPreTEE		
<i>ParentLongName:</i>	Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)		
<i>ParentHarvestCodes:</i>	1		
<i>ParentValues:</i>	= "Yes"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	
	3	Not assessed	

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*Long Name:* Ascending Aorta Assessed *SeqNo:* 7540  
*Short Name:* **AscAoAssessed** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the ascending aorta was assessed using TEE intraoperatively post-induction - pre incision.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: IntraOpPreTEE  
ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
    1 Yes  
    2 No

---

*Long Name:* Maximal Ascending Aortic Diameter *SeqNo:* 7545  
*Short Name:* **MxAscAo** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the maximal diameter of the ascending aorta in centimeters using data obtained from an intraoperative TEE.  
*Data Source:* User *Format:* Real  
Low Value: 1.0      High Value: 8.0  
ParentShortName: AscAoAssessed  
ParentLongName: Ascending Aorta Assessed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

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*Long Name:* Maximal Ascending Aortic Atheroma Thickness *SeqNo:* 7550  
*Short Name:* **MxAscAoThick** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the maximal ascending aortic atherosclerotic thickness in mm as measured by intraoperative post induction - pre incision transesophageal echocardiography. If only intimal thickening and no plaque put numeric value of zero.  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 20.0  
ParentShortName: AscAoAssessed  
ParentLongName: Ascending Aorta Assessed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Ascending Aortic Atheroma Mobility *SeqNo:* 7555  
*Short Name:* **AsAthMo** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the ascending aortic atheroma mobility was assessed by intraoperative post induction - pre incision transesophageal echocardiography.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: AscAoAssessed  
ParentLongName: Ascending Aorta Assessed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Aortic Arch Visualized *SeqNo:* 7560  
*Short Name:* **AoArcVis** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether the aortic arch was visualized.

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

ParentShortName: IntraOpPreTEE

ParentLongName: Intraoperative Post-Induction/Pre-Incision Transesophageal Echo (TEE)

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Maximal Aortic Arch Atheroma Thickness *SeqNo:* 7565  
*Short Name:* **MxArcAth** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the maximal aortic arch atherosclerotic thickness in mm as measured by intraoperative post induction - pre incision transesophageal echocardiography.If only intimal thickening and no plaque put numeric value of zero.

*Data Source:* User *Format:* Real

Low Value: 0.0 High Value: 20.0

ParentShortName: AoArcVis

ParentLongName: Aortic Arch Visualized

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Aortic Arch Atheroma Mobility *SeqNo:* 7570  
*Short Name:* **ArcAthMo** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the aortic arch atheroma mobility as measured by post induction - pre incision intraoperative transesophageal echocardiography.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
*ParentShortName:* AoArcVis  
*ParentLongName:* Aortic Arch Visualized  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Cardiopulmonary Bypass Used *SeqNo:* 7575  
*Short Name:* **CPBUsed** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether cardiopulmonary bypass was used.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
*ParentShortName:* OrgPartAdAnesthSect  
*ParentLongName:* Organization Participates in Adult Anesthesia Section  
*ParentHarvestCodes:* 1  
*ParentValues:* = "Yes"  
*Harvest Codes:*  
Code: Value:  
1 Yes  
2 No

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*Long Name:* ABG Management During Cooling *SeqNo:* 7576  
*Short Name:* **ABGMgmtDurCool** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of ABG management that was used during the cooling phase of cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CPBUsed  
ParentLongName: Cardiopulmonary Bypass Used  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Alpha-Stat  
2 pH-Stat  
3 Unknown

---

*Long Name:* ABG Management During Rewarming *SeqNo:* 7577  
*Short Name:* **ABGMgmtDurRewarm** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of ABG management that was used during the rewarming phase of cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CPBUsed  
ParentLongName: Cardiopulmonary Bypass Used  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Alpha-Stat  
2 pH-Stat  
3 Unknown

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*Long Name:* Arterial Outflow Temperature Measured *SeqNo:* 7578  
*Short Name:* **ArtOutTempMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if arterial outflow temperature was measured during cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: CPBUsed

ParentLongName: Cardiopulmonary Bypass Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Highest Arterial Outflow Temperature *SeqNo:* 7579  
*Short Name:* **HighArtOutTemp** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the highest arterial outflow temperature during the rewarming phase of cardiopulmonary bypass.  
*Data Source:* User *Format:* Real

Low Value: 5.00 High Value: 40.00

ParentShortName: ArtOutTempMeas

ParentLongName: Arterial Outflow Temperature Measured

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Retrograde Autologous Priming of CPB Circuit *SeqNo:* 7580  
*Short Name:* **RetrAutolPrim** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether retrograde autologous priming was used by the cardiopulmonary perfusion team prior to the onset of cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CPBUsed  
ParentLongName: Cardiopulmonary Bypass Used  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
    Code: Value:  
    1 Yes  
    2 No

---

*Long Name:* Total Crystalloid Administered by Perfusion Team *SeqNo:* 7585  
*Short Name:* **TotCrystPerf** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total volume of intravenous crystalloid fluids administered by cardiopulmonary perfusion team. The data should be record in milliliters. Enter zero if fluid crystalloid not used by perfusion team.  
Do not record any blood products in this data field.  
*Data Source:* User *Format:* Integer  
Low Value: 0      High Value: 10000  
ParentShortName: CPBUsed  
ParentLongName: Cardiopulmonary Bypass Used  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Crystalloid Administered by Perfusion Team - Type *SeqNo:* 7586  
*Short Name:* **CrystPerfTy** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName:* Adultdata2  
*Definition:* Indicate the type of crystalloid fluid given by Perfusion.  
*Data Source:* User *Format:* Multi-Select

ParentShortName: TotCrystPerf

ParentLongName: Total Crystalloid Administered by Perfusion Team

ParentHarvestCodes: >0

ParentValues: >0

Harvest Codes:

Code: Value:

- 1 0.9 Sodium Chloride
- 2 Normosol
- 3 Ringer's Lactate
- 4 Plasmalyte

*Long Name:* Total Synthetic Colloid Administered by Perfusion Team *SeqNo:* 7590  
*Short Name:* **TotColloidPerf** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName:* Adultdata2  
*Definition:* Indicate the total volume of intravenous synthetic colloid fluids (of any concentration) administered by the cardiopulmonary perfusion team. The data should be recorded in milliliters. Enter zero if synthetic colloid not administered by perfusion team.  
  
 There is continuing controversy as to the risks and benefits of liberal or restrictive intravenous fluid regimens. Record the total of all synthetic colloid intravenous fluids given by the cardiopulmonary perfusion team. Synthetic colloids of all concentrations and substitution ratios should be included, Do not record any blood products in this data field.  
  
*Data Source:* User *Format:* Integer  
 Low Value: 0 High Value: 4000  
 ParentShortName: CPBUsed  
 ParentLongName: Cardiopulmonary Bypass Used  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Total 5% Albumin Administered by Perfusion Team *SeqNo:* 7595  
*Short Name:* **TotAlbumPerf** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the total volume of intravenous human serum albumin fluids (5%) administered by the cardiopulmonary perfusion team. The data should be recorded in milliliters. Enter zero if 5% albumin not administered by perfusion team.

Do not record any blood products in this data field.

*Data Source:* User *Format:* Integer

Low Value: 0 High Value: 2000

ParentShortName: CPBUsed

ParentLongName: Cardiopulmonary Bypass Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Total 25% Albumin Administered by Perfusion Team *SeqNo:* 7596  
*Short Name:* **Tot25AlbumPerf** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the total amount of 25% Albumin given by Perfusion. Only include fluid administered by Perfusion.

*Data Source:* User *Format:* Real

Low Value: 0.0 High Value: 2000.0

ParentShortName: CPBUsed

ParentLongName: Cardiopulmonary Bypass Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

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*Long Name:* Hemofiltration Volume Removed by Perfusion Team *SeqNo:* 7600  
*Short Name:* **HemofilPerf** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the total volume of ultrafiltrate removed by the cardiopulmonary perfusion team during cardiopulmonary bypass and during modified ultra-hemofiltration post-CPB. Record the data in milliliters.  
*Data Source:* User *Format:* Integer  
Low Value: 0 High Value: 10000  
ParentShortName: CPBUsed  
ParentLongName: Cardiopulmonary Bypass Used  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Inotropes used to wean from CPB *SeqNo:* 7605  
*Short Name:* **InotropWeanCPB** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the usage of inotropic drug infusions to facilitate weaning from cardiopulmonary bypass. For this data field, any drug infusion with inotropic properties, including catecholamines, phosphodiesterase inhibitors, and calcium sensitizers, should be recorded.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: CPBUsed  
ParentLongName: Cardiopulmonary Bypass Used  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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---

*Long Name:* Vasopressors used to wean from CPB *SeqNo:* 7610  
*Short Name:* **VasopWeanCPB** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the usage of vasoconstrictive drugs to facilitate weaning from cardiopulmonary bypass. For this data field, any drug infusion at a dosage range with clinically vasoconstrictive properties, including catecholamines and pure vasoconstrictors, should be recorded.

Also record usage of drugs with inotropic effects that have vasoconstrictive properties in higher doses, such as dopamine and epinephrine.

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

ParentShortName: CPBUsed

ParentLongName: Cardiopulmonary Bypass Used

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Cell saver volume *SeqNo:* 7612  
*Short Name:* **CellSavVol** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the total volume of any cell-saver blood that was transfused intraoperatively. Include any volume started after OR Entry even if the infusion completed post-operatively.

Do not include autologous, allogeneic, pump-residual, or chest-tube recirculated blood. Value should be recorded in milliliters.

*Data Source:* User *Format:* Integer

Low Value: 0 High Value: 10000

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Protamine total dose *SeqNo:* 7614  
*Short Name:* **TotProt** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the total dose of protamine given intraoperatively to reverse heparinization after separation from CPB prior to OR Exit.

Value should be recorded in milligrams. Do not include doses given in the ICU.

*Data Source:* User *Format:* Integer

Low Value: 0 High Value: 1000

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

---

*Long Name:* Intraoperative Post-procedure TEE Performed *SeqNo:* 7615  
*Short Name:* **IntraOpPostTEE** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate whether intraoperative TEE was performed intraoperatively after weaning from CPB and prior to OR exit time.

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

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* Systolic Anterior Motion of Mitral Valve *SeqNo:* 7620  
*Short Name:* **PostSAM** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the presence of systolic anterior motion (SAM) of the mitral valve as determined by post procedure intraoperative transesophageal echocardiography. Time frame is after weaning from cardiopulmonary bypass and prior to OR Exit.

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

ParentShortName: IntraOpPostTEE

ParentLongName: Intraoperative Post-procedure TEE Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
  - 3 Not assessed
- 

*Long Name:* Return to CPB for Echo-Related Diagnosis *SeqNo:* 7625  
*Short Name:* **RetCPBEch** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate if the patient had to be placed back on cardiopulmonary bypass for a surgical revisit as a result from findings on the post-procedure TEE prior to OR Exit time.

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

ParentShortName: IntraOpPostTEE

ParentLongName: Intraoperative Post-procedure TEE Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Yes
  - 2 No
-



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*Long Name:* Reason for return to CPB *SeqNo:* 7626  
*Short Name:* **RetCPBRsn** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the reason why the patient required a return to cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RetCPBEch

ParentLongName: Return to CPB for Echo-Related Diagnosis

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 New Wall Motion Abnormality
- 2 Residual Valvular Leak
- 3 Systolic Anterior Motion (SAM)
- 4 Paravalvular Leak
- 5 Ventricular Failure
- 6 Other
- 7 Unknown

---

*Long Name:* Return to CPB Reason - Ventricular Failure Type *SeqNo:* 7627  
*Short Name:* **RetCPBRsnVentFailTy** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the type of ventricular failure leading to the return to cardiopulmonary bypass.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: RetCPBRsn

ParentLongName: Reason for return to CPB

ParentHarvestCodes: 5

ParentValues: = "Ventricular Failure"

Harvest Codes:

Code: Value:

- 1 Left Ventricular Failure
  - 2 Right Ventricular Failure
  - 3 Bi-Ventricular Failure
  - 4 Unknown
-

---

*Long Name:* Post-Procedure Left Ventricular Ejection Fraction Measured *SeqNo:* 7630  
*Short Name:* **PostLVEFMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether left ventricular ejection fraction was measured using transesophageal echocardiography intraoperatively post-procedure after final discontinuation of CPB.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: IntraOpPostTEE  
ParentLongName: Intraoperative Post-procedure TEE Performed  
ParentHarvestCodes: 1  
ParentValues: = "Yes"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Post-Procedure Left Ventricular Ejection Fraction Estimate *SeqNo:* 7635  
*Short Name:* **PostLVEF** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the post-procedure estimate of left ventricular ejection fraction determined by intraoperative transesophageal echocardiography.  
*Data Source:* User *Format:* Real  
Low Value: 1.0 High Value: 99.0  
ParentShortName: PostLVEFMeas  
ParentLongName: Post-Procedure Left Ventricular Ejection Fraction Measured  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Post-Procedure RV Function *SeqNo:* 7640  
*Short Name:* **PostRVFx** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the post-procedure estimate of RV function determined by intraoperative transesophageal echocardiography.

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

ParentShortName: IntraOpPostTEE

ParentLongName: Intraoperative Post-procedure TEE Performed

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

- 1 Normal
- 2 Mild dysfunction
- 3 Moderate dysfunction
- 4 Severe dysfunction
- 5 Not assessed

*Long Name:* Intraoperative Cardiac Arrest Related To Anesthesia Care *SeqNo:* 7641  
*Short Name:* **IntraCardArr** *Core:* No  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* No  
*DBTableName* Adultdata2

*Definition:* Indicate whether there was a cardiac arrest related to anesthesia care

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

Harvest Codes:

Code: Value:

- 1 Yes
- 2 No

---

*Long Name:* Patient Died in the OR *SeqNo:* 7645  
*Short Name:* **ORDeath** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient died within the OR.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: OrgPartAdAnesthSect

ParentLongName: Organization Participates in Adult Anesthesia Section

ParentHarvestCodes: 1

ParentValues: = "Yes"

Harvest Codes:

Code: Value:

1 Yes

2 No

---

*Long Name:* Core Temperature Upon Entry To ICU/PACU Measured *SeqNo:* 7650  
*Short Name:* **PostTempMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the core temperature was measured in degrees Centigrade after OR exit to grone hour post OR exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)

ParentShortName: ORDeath

ParentLongName: Patient Died in the OR

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

Code: Value:

1 Yes

2 No

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*Long Name:* Core Temperature Upon Entry To ICU/PACU *SeqNo:* 7655  
*Short Name:* **PostCoreTemp** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the core temperature in degrees Centigrade after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Real  
 Low Value: 30.0 High Value: 41.0  
 ParentShortName: PostTempMeas  
 ParentLongName: Core Temperature Upon Entry To ICU/PACU Measured  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Postoperative INR Measured *SeqNo:* 7660  
*Short Name:* **PostINRMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the International normalized ratio (INR) was measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ORDeath  
 ParentLongName: Patient Died in the OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* First Postoperative INR *SeqNo:* 7665  
*Short Name:* **PostINR** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the first international normalized ratio (INR) value after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Real  
Low Value: 0.5 High Value: 5.0  
ParentShortName: PostINRMeas  
ParentLongName: Postoperative INR Measured  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* WBC Upon Entry To ICU/PACU Measured *SeqNo:* 7670  
*Short Name:* **PostWBCMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the white blood cell count was measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* WBC Upon Entry To ICU/PACU *SeqNo:* 7675  
*Short Name:* **PostWBC** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the first white blood cell count after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Integer  
Low Value: 1000 High Value: 50000  
ParentShortName: PostWBCMeas  
ParentLongName: WBC Upon Entry To ICU/PACU Measured  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Platelets Upon Entry To ICU/PACU Measured *SeqNo:* 7680  
*Short Name:* **PostPitMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the platelet count was measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* Platelets Upon Entry To ICU/PACU *SeqNo:* 7685  
*Short Name:* **PostPlt** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the first platelet count after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Integer  
Low Value: 5000 High Value: 500000  
ParentShortName: PostPltMeas  
ParentLongName: Platelets Upon Entry To ICU/PACU Measured  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Hemoglobin Measured upon admission to Post Op Care Location (PACU, ICU) *SeqNo:* 7686  
*Short Name:* **PostHemMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the hemoglobin was measured one hour after OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Hemoglobin Upon Entry To ICU/PACU *SeqNo:* 7687  
*Short Name:* **PostHem** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the patient's hemoglobin within one hour post OR Exit in g/dl or g/100 ml or g%.  
*Data Source:* User *Format:* Real  
Low Value: 0.00 High Value: 20.00 UsualRangeLow: 5.00 UsualRangeHigh: 15.00  
ParentShortName: PostHemMeas  
ParentLongName: Hemoglobin Measured upon admission to Post Op Care Location (PACU, ICU)  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Hematocrit Upon Entry To ICU/PACU Measured *SeqNo:* 7690  
*Short Name:* **PostHCTMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the hematocrit value was measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

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*Long Name:* Hematocrit Upon Entry To ICU/PACU *SeqNo:* 7695  
*Short Name:* **PostHCT** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the first hematocrit value measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Real  
 Low Value: 10.0 High Value: 60.0  
 ParentShortName: PostHCTMeas  
 ParentLongName: Hematocrit Upon Entry To ICU/PACU Measured  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Fibrinogen Upon Entry To ICU/PACU Measured *SeqNo:* 7696  
*Short Name:* **PostFibrinMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether fibrinogen was measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ORDeath  
 ParentLongName: Patient Died in the OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"  
 Harvest Codes:  

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* Fibrinogen Upon Entry To ICU/PACU *SeqNo:* 7697  
*Short Name:* **PostFibrin** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the fibrinogen level measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Real  
 Low Value: 0.00 High Value: 1200.00  
 ParentShortName: PostFibrinMeas  
 ParentLongName: Fibrinogen Upon Entry To ICU/PACU Measured  
 ParentHarvestCodes: 1  
 ParentValues: = "Yes"

---

*Long Name:* Lactate Upon Entry To ICU/PACU Measured *SeqNo:* 7700  
*Short Name:* **PostLactMeas** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the lactate value was measured after OR Exit to one hour post OR Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
 ParentShortName: ORDeath  
 ParentLongName: Patient Died in the OR  
 ParentHarvestCodes: 2  
 ParentValues: = "No"  
 Harvest Codes:

<u>Code:</u>	<u>Value:</u>
1	Yes
2	No

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*Long Name:* Lactate Upon Entry To ICU/PACU *SeqNo:* 7705  
*Short Name:* **PostLact** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the value of lactate in mg/dl measured after OR Exit to one hour post OR Exit. Do not record missing data as a zero value.  
*Data Source:* User *Format:* Real  
Low Value: 0.0 High Value: 20.0  
ParentShortName: PostLactMeas  
ParentLongName: Lactate Upon Entry To ICU/PACU Measured  
ParentHarvestCodes: 1  
ParentValues: = "Yes"

---

*Long Name:* Postoperative Peak Glucose within 18-24 hours after OR Exit Time *SeqNo:* 7708  
*Short Name:* **PostOpPeakGlu** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate the postoperative peak glucose measured within 18-24 hours of anesthesia end time.  
*Data Source:* User *Format:* Integer  
Low Value: 30 High Value: 1500  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"

---

<i>Long Name:</i>	Postop Infusion: Dexmedetomidine	<i>SeqNo:</i>	7710
<i>Short Name:</i>	<b>DexPost</b>	<i>Core:</i>	No
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the use of dexmedetomidine infusion after surgery.  Any use of dexmedetomidine infusion during the postoperative period, after transport to the ICU/PACU.		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
<i>ParentShortName:</i>	ORDeath		
<i>ParentLongName:</i>	Patient Died in the OR		
<i>ParentHarvestCodes:</i>	2		
<i>ParentValues:</i>	= "No"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Postop Infusion: Propofol	<i>SeqNo:</i>	7715
<i>Short Name:</i>	<b>PropPost</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the use of propofol infusion after OR Exit to ICU discharge.		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	ORDeath		
<i>ParentLongName:</i>	Patient Died in the OR		
<i>ParentHarvestCodes:</i>	2		
<i>ParentValues:</i>	= "No"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

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*Long Name:* Post Op Other Sedation *SeqNo:* 7716  
*Short Name:* **PostOthSed** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate if the patient required any other type of post-operative sedation from OR Exit to initial ICU Exit.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

*Long Name:* Postoperative Delirium *SeqNo:* 7720  
*Short Name:* **PostopDel** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2  
*Definition:* Indicate whether the patient experienced postoperative delirium from OR Exit to ICU discharge.  
*Data Source:* User *Format:* Text (categorical values specified by STS)  
ParentShortName: ORDeath  
ParentLongName: Patient Died in the OR  
ParentHarvestCodes: 2  
ParentValues: = "No"  
Harvest Codes:  
Code: Value:  
1 Yes  
2 No

---

<i>Long Name:</i>	Heparin-Induced Thrombocytopenia (Postop Dx)	<i>SeqNo:</i>	7725
<i>Short Name:</i>	<b>PostHITAnti</b>	<i>Core:</i>	No
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	No
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate whether Heparin Induced Thrombocytopenia, HIT, is confirmed by antibody testing.		
	<p>Heparin induced thrombocytopenia (HIT) can be defined as any clinical event best explained by platelet factor 4 (PF4)/heparin-reactive antibodies ('HIT antibodies') in a patient who is receiving, or who has recently received heparin. Thrombocytopenia is the most common 'event' in HIT and occurs in at least 90% of patients, depending upon the definition of thrombocytopenia. A very small proportion of patients with HIT develop thrombosis. Alternative (nonheparin) anticoagulant therapy reduces the risk of subsequent thrombosis.</p>		
<i>Data Source:</i>	User	<i>Format:</i>	Integer
<i>ParentShortName:</i>	ORDeath		
<i>ParentLongName:</i>	Patient Died in the OR		
<i>ParentHarvestCodes:</i>	2		
<i>ParentValues:</i>	= "No"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	1	Yes	
	2	No	

<i>Long Name:</i>	Pain Score POD #3	<i>SeqNo:</i>	7730
<i>Short Name:</i>	<b>PainScorePOD3</b>	<i>Core:</i>	Yes
<i>Section Name:</i>	Adult Cardiac Anesthesiology	<i>Harvest:</i>	Yes
<i>DBTableName</i>	Adultdata2		
<i>Definition:</i>	Indicate the pain score on postoperative day #3 (Integer Rating Scale).		
	<p>Highest pain score on postoperative day #3 on the 0-10 integer scale, if recorded, or record score as missing.</p>		
<i>Data Source:</i>	User	<i>Format:</i>	Text (categorical values specified by STS)
<i>ParentShortName:</i>	ORDeath		
<i>ParentLongName:</i>	Patient Died in the OR		
<i>ParentHarvestCodes:</i>	2		
<i>ParentValues:</i>	= "No"		
<i>Harvest Codes:</i>			
	<u>Code:</u>	<u>Value:</u>	
	0	0	
	1	1	
	2	2	
	3	3	
	4	4	

5 5  
 6 6  
 7 7  
 8 8  
 9 9  
 10 10  
 11 Not recorded  
 12 NA

*Long Name:* Pain Score Hospital Discharge *SeqNo:* 7735  
*Short Name:* **PainScoreDisch** *Core:* Yes  
*Section Name:* Adult Cardiac Anesthesiology *Harvest:* Yes  
*DBTableName* Adultdata2

*Definition:* Indicate the pain score on day of discharge (Integer Rating Scale).

Highest pain score recorded on day of discharge on the 0-10 integer scale, if recorded, or record score as missing.

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

ParentShortName: ORDeath

ParentLongName: Patient Died in the OR

ParentHarvestCodes: 2

ParentValues: = "No"

Harvest Codes:

<u>Code:</u>	<u>Value:</u>
0	0
1	1
2	2
3	3
4	4
5	5
6	6
7	7
8	8
9	9
10	10
11	Not Recorded
12	NA