



# ADVANCES IN QUALITY & OUTCOMES: *A Data Managers Meeting*

SEPTEMBER 25-26, 2025 • SAN ANTONIO, TX

If you'd like to register online or for more information, visit [sts.org/AQO](https://sts.org/AQO).

## 1. REGISTRANT INFORMATION

☐ I am an STS Member. My 6-digit Member ID # is: \_\_\_\_\_

☐ I am NOT an STS Member.

*Note: STS membership is not the same as Database participation. You must have a valid 6-digit STS Member ID number to be eligible for member pricing.*

First Name

Last Name

Designation (e.g., MD, RN)

Job Title

Institution

Email Address (required)

Cell Phone (XXX-XXX-XXXX)

Mailing Address Street

City

State/Province

ZIP/Postal Code

### Profession

- |   |  |  |   |
|---|--|--|---|
| <input type="checkbox"/> Academic Researcher    | <input type="checkbox"/> Cardiothoracic Surgery Resident | <input type="checkbox"/> Medical Student     | <input type="checkbox"/> Practice Administrator |
| <input type="checkbox"/> Allied Health – Other  | <input type="checkbox"/> Clinical Nurse Specialist       | <input type="checkbox"/> Nurse Practitioner  | <input type="checkbox"/> Pulmonologist          |
| <input type="checkbox"/> Anesthesiologist       | <input type="checkbox"/> Data Manager                    | <input type="checkbox"/> Perfusionist        | <input type="checkbox"/> Registered Nurse       |
| <input type="checkbox"/> Cardiologist           | <input type="checkbox"/> General Surgery Resident        | <input type="checkbox"/> Physician Assistant | <input type="checkbox"/> Other: _____           |
| <input type="checkbox"/> Cardiothoracic Surgeon | <input type="checkbox"/> Industry Employee               | <input type="checkbox"/> Physician – Other   |   |

### Practice

- |  |  |
|--|--|
| <input type="checkbox"/> Academic Medicine (medical school or university)                    | <input type="checkbox"/> Hospital Employed                       |
| <input type="checkbox"/> Academic Medicine w/ an ACGME-approved CT surgery residency program | <input type="checkbox"/> Private Practice – small (1-3 surgeons) |
| <input type="checkbox"/> Government  | <input type="checkbox"/> Private Practice – large (4+ surgeons)  |
| <input type="checkbox"/> HMO Employed  | <input type="checkbox"/> Other (please specify): _____           |

### Primary Discipline:

- |   |   |  |   |
|---|---|--|---|
| <input type="checkbox"/> Adult Cardiac Surgery                | <input type="checkbox"/> Adult Congenital Cardiac Surgery | <input type="checkbox"/> Critical Care                 | <input type="checkbox"/> General Thoracic Surgery |
| <input type="checkbox"/> Pediatric Congenital Cardiac Surgery | <input type="checkbox"/> Vascular Surgery                 | <input type="checkbox"/> Other (please specify): _____ |   |

### How did you hear about AQO 2025?

- ☐ Email   ☐ Social Media   ☐ STS Website   ☐ Colleague   ☐ STS Webinar   ☐ Other: \_\_\_\_\_

## 2. REGISTRATION

REGISTRATION FEE (Please complete only one line below) (Intermacs/Pedimacs will take place virtually as an online forum on Sept. 23)	Early Bird – By July 16		Standard – July 17	
	Member	Non-Member	Member	Non-Member
ONE DAY <input type="checkbox"/> Adult Cardiac <input type="checkbox"/> Congenital <input type="checkbox"/> General Thoracic	<input type="checkbox"/> \$750	<input type="checkbox"/> \$850	<input type="checkbox"/> \$850	<input type="checkbox"/> \$950
TWO DAY Choose two: <input type="checkbox"/> Adult Cardiac <input type="checkbox"/> Congenital <input type="checkbox"/> General Thoracic	<input type="checkbox"/> \$1,100	<input type="checkbox"/> \$1,300	<input type="checkbox"/> \$1,300	<input type="checkbox"/> \$1,500
VIRTUAL PASS + Intermacs/Pedimacs Live Virtual Forum	<input type="checkbox"/> \$450	<input type="checkbox"/> \$550	<input type="checkbox"/> \$550	<input type="checkbox"/> \$650
VIRTUAL PASS	<input type="checkbox"/> \$350	<input type="checkbox"/> \$450	<input type="checkbox"/> \$450	<input type="checkbox"/> \$550

### **3. PAYMENT**

Please make check payable to "The Society of Thoracic Surgeons". Mail the check and this form to:  
The Society of Thoracic Surgeons, PO Box 809179, Chicago, IL 60680-9308

*A \$100 administrative fee will be charged for cancelations. No refunds will be given after Wednesday, Sept. 11, 2025.*