Society of Thoracic Surgeons

Congenital Heart Surgery Database Monthly Webinar

STS National Database[™]

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February 16, 2021

- Welcome and Introductions
- STS Update
- IQVIA Update
- User Feedback





STS Updates

- 2021 Harvest Schedule Posted on STS website
 - <u>https://www.sts.org/registries/sts-national-database/harvest-schedule-and-information</u>
 - Spring 2021 Harvest close is TBD
 - Please continue using open submission and cleaning your data
 - STS will give Participants a minimum of two weeks notice prior to harvest close date
 - Includes procedures up through 12/31/2020
- Primary Procedure Mismatch Report
 - Important first step review Report Overview (IQVIA Library) to understand its currently functionality
 - Primary Procedure assignment occurs in analysis at DCRI
 - IQVIA does NOT change your data

• CHSD Public Reporting

- No Public Reporting of the 2020 data
- New Workgroup being convened to plan the future of STS CHSD public reporting and risk modeling
- More information coming soon!

• STS Mentorship Program

- · Pairs experienced Data Managers with new Data Managers
- For more information contact Adie Dolan (<u>adolan@sts.org</u>)
- We need both mentors and mentees!!
- <u>https://www.sts.org/registries-research-center/sts-national-database/sts-national-database-mentorship-program</u>

2021 STS Annual Meeting Highlights

• Thomas B. Ferguson Lecture

 "Personal Reflections from COVID-19"

Vivien T. Thomas Lecture

 "The Long Shadow of Racism and Racial Bias in the Lack of Diversity"



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	Learning Center Meetings Quality &	Safety Registries Research Center Advocacy Publications Jesources COVID-19
5	STS » Publications	
	The Annals of Thoracic Surgery	Podcast Episodes
	STS News	The Society's podcast, Surgical Hot Topics, features leaders in cardiothoracic surgery discussing
	STS National Database News	important issues in the field. Please note: The comments included in these episodes are that of the individuals involved and not necessarily that of The Society of Thoracic Surgeons.
	STS Advocacy Monthly	Find episodes here, or subscribe via the links below:
	STS International Connection	ITunes Google Play Stitcher iHeartRadio TuneIn Radio CastBox
	STS Candidate Connection	#85: STS 2021: Thomas B. Ferguson Lecture
	Videos	February 8, 2021
	VIGEOS	
	Podcast Episodes	Three prestigious surgeons on three continents provided their "Personal Reflections from COVID-19" during the STS Annual Meeting Thomas B. Ferguson Lecture. The surgeons shared

COVID-19" during the STS Annual Meeting Thomas B. Ferguson Lecture. The surgeons shared their experiences and thoughts about the pandemic and how it has affected them, their families, institutions, colleagues, and their patients. Craig R. Smith Jr., MD, offered his view from Columbia University and NewYork-Presbyterian Hospital in New York City, Enrico Ruffini, MD, provided his perspective from the University of Torino in Italy, and Alan D.L. Sihoe, MD, MA, FRCSEd, described his experiences at Gleneagles Hospital in Hong Kong—an area that was the epicenter of the horrific SARS outbreak in 2003.



#84: STS 2021: Vivien T. Thomas Lecture

February 8, 2021

Quinn Capers IV, MD, presented the Vivien T. Thomas Lecture during the STS Annual Meeting. In his lecture, "The Long Shadow of Racism and Racial Bias in the Lack of Diversity," Dr. Capers discussed the factors that contribute to racial disparities in the medical field. He also outlined specific points when "gatekeepers" such as school counselors and admissions faculty, as well as mentors and role models, can hold the keys to life-changing moments that help shape successful careers. In addition, he presented strategies that are practically applicable, by both institutions and individuals, to combat racial disparities.

Dr. Capers is the associate dean for faculty diversity and vice chair for diversity and inclusion in the Department of Internal Medicine at The University of Texas Southwestern Medical Center in Dallas.



Did you know about The STS Patient Website?

- <u>https://ctsurgerypatients.org/</u>
- Offers immediate and easy access to expert multimedia content on cardiothoracic diseases and operations.
- If you interact with patients at your institution, please share this valuable resource



The Society of Thoracic Surgeons The Patient Guide to Heart, Lung, and Esophageal Surgery BLOG Procedures Before, During, and After Surgery Other Chest Disease Diseases Ventricular Ventricular Septal Defect Septal Defect Surgery What is ventricular septal defect surgery? A ventricular septal defect In normal development, the (VSD) is a common heart walls (septum) between the defect that affects an heart chambers connect. estimated 42 out of every separating the four chambers 10,000 babies born annually, before the baby is born. But

Aorta

Pulmonary Artery

A ventricular septal defect (VSD) is a common heart (VSD) is a common heart walls (septum) between the defect that affects an estimated 42 out of every separating the four chambers connect, separating the four chambers before the baby is born. But according to the US Centers for Disease Control and Prevention. With a VSD, there is an abnormal opening in the wall between the main the wall between the main pumping chambers of the match accurate to the vertices). In normal development, the walls (septum) between the walls (septum) between the baby is born. But sometimes, this doesn't happen. When there is a hole, blood is allowed to pass from the left side of the heart to the wall between the main the right side, causing too much oxygen-rich (red) blood heart (the ventricles).

The Ventricular Septal **Defect (VSD) Surgery** Page

- Provides detailed information on causes and symptoms, diagnosis and treatment options
- Information on what to expect after surgery
- Downloadable handouts available for patients
- STS patient website contact is **Jennifer Bagley** (jbagley@sts.org)

Day of Congenital Heart Surgery

Day of Congenital Heart Surgery

You should have received specific instructions for your child during the pre-operative work-up. Be sure to arrive promptly, trying to get there a few minutes before you are scheduled to arrive.

After you arrive at the hospital, go to the Preoperative Admitting Area. Once admitted, your son/daughter will change into been taken to the operating hospital pajamas. The anesthesiologist will speak with you before the surgery. Your child may be given medicine to help him/her relax

A nurse from the Heart Care Team will accompany your child to the operating room After your son/daughter has room, please go to the designated parent waiting area. The surgeons will meet with you there after the operation



THE HEART CARE TEAM Many people at your child's hospital help to care for your son/daughter before, during, and after surgery. Here are a few of the team members you may meet

Cardiothoracic Surgeon

Overview

Heads the team that will perform your child's heart surgery and also is your child's attending doctor during the hospital stay

The Heart Care



IQVIA Update Joe Brower



The item below were released to production the weekend of February 13, 2021.

NOTE: The below update and a list of all of the updated validations were posted to the Notifications section for reference.

Platform Updates

Data Quality Report

STS-5555 – Identified CHSD Validations will be updated from an error severity to a critical severity to improve data quality.

The below list of validation checks will now appear as a critical error for 3.3 and 3.41 data versions:

- Surgery date cannot be later than current date.
- Date of Birth cannot be later than Surgery Date.
- Date of Birth cannot be later than current date.
- Date of Last Follow-Up cannot be later than current date.
- Admission date cannot be later than current date.
- Admit date cannot be later than Discharge date.
- Admit date cannot be later than Surgery Date.
- Intubation Date/Time cannot be later than current date.
- Initial Extubation Date/Time cannot be later than current date.
- Final Extubation Date/Time cannot be later than current date.
- Date of Database Discharge cannot be later than current date.
- Readmission Date cannot be later than current date.

The below list of validation checks will now appear as a critical error for 3.3 and 3.41 data versions:

- Review Date cannot be later than current date.
- Date and Time of Transport to Procedure Location Or Anesthesia Start Time cannot be later than current date.
- Date and Time of Induction cannot be later than current date.
- Date and Time of ICU/PACU Arrival cannot be later than current date.
- OR Entry and Exit times are inconsistent.
- Mortality Date cannot be later than current date.
- Mortality Date cannot be less than Discharge Date.
- Mortality Date cannot be less than Surgery Date.
- Mortality Date cannot be less than Date of Last Followup.
- Mortality Date cannot be less than Date of Birth.

Upcoming IQVIA February 2021 Release Update

The item below are targeted to be released to production the weekend of Feb 27, 2021.

Missing Variable Report

STS-5474 – MVR showing "ProCmplxCon3Ds3" as missing in the report even though field is not active on the case form.

CHSD Participant Dashboard Report

STS-5484 – STAT 4 filter is excluding cases assigned to LV Endocardial Fibroelastosis resection(3390) and Double root translocation(3400)

IQVIA Update

Please note: Submitted tickets are currently under review and the IQVIA support team will follow up on resolution and/or target release confirmation. The IQVIA Team is currently reviewing items that will be released in an upcoming release. Those items will be posted to the Notifications section.



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Primary Procedure Mismatch Enhancements

Items below are targeted to be released weekend of February 27th for the Primary Procedure Mismatch Report

Primary Procedure Mismatch Report

STS-4386 – Report logic will be updated to include consideration for identified combination codes for primary procedure

STS-4371 – Add Kawashima procedure to the exception 1 code list for code list for code list for consideration

STS-4387 – Report logic will be updated to consider the Kawashima procedure as the primary when coded in conjunction with a Glenn or Hemifontain procedure so it is never downgraded

Primary Procedure Mismatch Enhancements

CON'T - Items below are targeted to be released weekend of February 27th for the Primary Procedure Mismatch Report

Primary Procedure Mismatch Report

STS-4389 – Report logic will be updated to include specific rule for 3 identified VSD repairs when selected in combination with a PFO, Primary closure procedure

STS-4388 – Report logic will be updated to include specific "hybrid approach" codes to the exception rule 1 procedure specific factor lists

Hybrid Approach "Stage 1", Application of RPA and LPA bands (2160)

Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) (2170)

Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) + application of RPA (2180)

Primary Procedure Mismatch Report Defect

STS-5471 – report displaying mismatch between TOF repair, No ventriculotomy (350) and RVOT procedure (510), this will be resolved with the report enhancements.



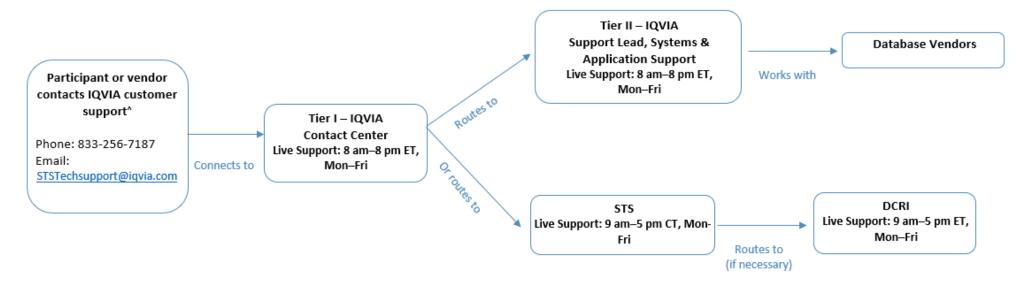
IQVIA Support Plan





sts.org

Please include your Participant ID



IQVIA's Support Plan

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

Resources

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

Contact Information

- Leigh Ann Jones, STS National Database Manager, Congenital and General Thoracic
 - Ljones@sts.org
 - 312-202-5822
- Database Operational Questions
 - <u>STSDB@sts.org</u>

Upcoming CHSD Webinars

User Group Call

• February 23 @ 12pm CT

User Group Call

• March 9 @ 12pm CT

Monthly Webinar

• March 16 @ 12pm CT





Open Discussion



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Please use the Q&A Function. We will answer as many questions as possible.

We encourage your feedback and want to hear from you!

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THANK YOU FOR JOINING!