

**The Society of Thoracic Surgeons**

**Congenital Heart Surgery Database**

**Version 3.41**

**Updated May 5, 2020**



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| **ADMINISTRATIVE** | | | | |
| Participant ID:  ParticID (10) | | Patient Participating in STS-Related Clinical Trial: ClinTrial(81) | | 🞎 None 🞎 Trial 1 🞎 Trial 2 🞎 Trial 3 🞎 Trial 4 🞎 Trial 5 🞎 Trial 6 |
|  | *(If not None→)* | | STS-Related Clinical Trial ID:  ClinTrialPatID(82) | |

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| **DEMOGRAPHICS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Patient ID (software generated)  PatID (520) | | | | | | | | | | Patient Nat. ID (SSN):  PatNationalID (110) | | | | | | | | | | | | | | | | | | MRN:  MedRecN (120) | | | | | |
| Last Name:  PatLName (140) | | | | | | | | | | First Name:  PatFName (150) | | | | | | | | | | | | | | | | | | Middle Name:  PatMName (170) | | | | | |
| Region:  PatRegion (180) | | | | | | | | | | Postal Code:  PatPostalCode (190) | | | | | | | | | | | | | | | | | | Country:  PatientCountry (201) | | | | | |
| **BIRTH INFORMATION** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Did the patient have a laboratory confirmed diagnosis of Covid-19?  TempCode (6724) 🞎 No (Harvest Code 10)  🞎 Yes, prior to hospitalization for this surgery (Harvest Code 11)  🞎 Yes, in hospital prior to surgery (Harvest 12)  🞎 Yes, in hospital after surgery (Harvest Code 13)  🞎 Yes, after discharge within 30 days of surgery (Harvest Code 14) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date of Positive Covid-19 Test (closest to OR date) \_\_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_ (mm/dd/yyyy)  TempDt (6723) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Born by IVF: 🞎 Yes 🞎 No BornByIVF (202) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
| Patient Adopted: 🞎 Yes 🞎 No PatientAdopted (203) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Birth Location Known: 🞎 Yes 🞎 No BirthLocKnown (208) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | Born at Home 🞎 Yes 🞎 No BornHome (209) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | *(If No →)* | | | | Birth Hospital Name Known: 🞎 Yes 🞎 No HospNameKnown (210) | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | *(If Yes →)* | | | | | | | | Birth Hospital Name: BirthHospName (211) | | | | | | | | | | | | | | | | | | | |
|  | |  | | | |  | | | | | | | | Birth Hospital TIN: BirthHospTIN (212) | | | | | | | | | | | | | | | | | | | |
|  | | Birth City:  BirthCit (219) | | | | | | | | | | | | | Birth Region:  BirthSta (220) | | | | | | | | | | | | | Birth CountryBirthCountry (231) | | | | | |
| Mode of Delivery Known: | | | | | | | | 🞎 Yes 🞎 No DelivModeKnown (232) | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | Mode of Delivery: DelivMode (233) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | 🞎 Spontaneous onset labor with vaginal delivery | | | | | | | | | | | | | | | | | | | | | | | 🞎 Spontaneous onset labor with cesarean section | | | | | | | | | |
|  | 🞎 Induction of labor with vaginal delivery | | | | | | | | | | | | | | | | | | | | | | | 🞎 Induction of labor with subsequent cesarean section | | | | | | | | | |
|  | 🞎 Scheduled cesarean section | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other cesarean section | | | | | | | | | |
| Mother’s Gravidity and Parity known: 🞎 Yes 🞎 No *(If Yes 🡫)* GravParKnown (234) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Mother’s Gravidity:  Gravidity (235) | | | | | | | | | | | | | | | | | | | | Mother’s Parity:  Parity (236) | | | | | | | | | | | |
| APGAR Scores Known: 🞎 Yes 🞎 No *(If Yes 🡫)* ApgarKnown (237) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | APGAR Score at 1 minute:  Apgar1 (238) | | | | | | | | | | | | | | | | | | | | APGAR Score at 5 minutes:  Apgar5 (239) | | | | | | | | | | | |
| Mother’s Name Known:  MatNameKnown (240) | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | Mother’s Last Name:  MatLName (250) | | | | | | | | | | | | | Mother’s First Name:  MatFName (260) | | | | | | | | | | | | | | Mother’s Middle Name:  MatMName (280) | | | | |
| Mother’s National ID Number (SSN) Known:  MatSSNKnown (290) | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No 🞎 Refused | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | Mother’s National ID Number (SSN):  MatSSN (300) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| DOB: *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_  DOB (310) | | | | | | | | | | | | | | | | | Birth Weight Known:  BirthWtKnown (320) | | | | | | | | | 🞎 Yes 🞎 No | | | | *(If Yes →)* Birth Weight (kg):  BirthWtKg (330) | | | |
| Sex at Birth: 🞎 M 🞎 F 🞎Ambiguous  Gender (340) | | | | | | | | | | | | | | | | | | | | | Premature Birth: 🞎 Yes 🞎 No 🞎 Unknown  Premature (350) | | | | | | | | | | | | |
| Gestational Age at Birth Known:  GestAgeKnown (360) | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | |  | | | | | | | | | | | | | | |
| *(If Yes →)* | Gestational age at birth: Weeks: \_\_\_\_\_wks GestAgeWeeks (370) | | | | | | | | | | | | | | | | | | | | | | Days: 🞎 0 🞎 1 🞎 2 🞎 3 🞎 4 🞎 5 🞎 6 🞎 Unknown GestAgeDays (371) | | | | | | | | | | |
| Multiple Gestation:  MultGest (372) | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | | | | | | | | | | | | Antenatal Diagnosis of Congenital Heart Disease:  AntenatalDiag(373) | | | | | | | | | | | | | | 🞎 Yes 🞎 No  🞎 Unknown | |
| Pregnancy – related complications: 🞎 Yes 🞎 No 🞎 Unknown PregComplications (375) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | Pre-ecclampsia: PregCompPreE (377) | | | | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | | | | | | | | | | | | | Gestational DM: PregCompGestDM (378) | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | |
|  | | Hypertension: PregCompHTN (379) | | | | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | | | | | | | | | | | | | HELLPP: PregCompHELLPP (380) | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | |
|  | | Polyhydramnios: PregCompPolyhydra (381) | | | | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | | | | | | | | | | | | | Oligohydramnios: PregCompOligohydra (382) | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | |
|  | | Hydrops: PregCompHydrops (383) | | | | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | | | | | | | | | | | | | Other: PregCompOther (384) | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | |
| Race Documented:  RaceDocumented (385) | | | | | | | | | 🞎 Yes 🞎 No 🞎 Patient declined to disclose | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes, →)* | | | | Caucasian:  RaceCaucasian (390) | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | Black/African American:  RaceBlack (400) | | | | | | 🞎 Yes 🞎 No |
| Asian:  RaceAsian (410) | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | Am Indian/Alaskan Native:  RaceNativeAm (420) | | | | | | 🞎 Yes 🞎 No |
| Native Hawaiian/Pacific Islander:  RaceNativePacific (430) | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | Other:  RaceOther (440) | | | | | | 🞎 Yes 🞎 No |
| Hispanic or Latino Ethnicity:  Ethnicity (450) | | | | | | | | | | | | | 🞎 Yes 🞎 No 🞎 Not Documented | | | | | | | | | | | | | | | | | | | | |
| Date of Last Follow-Up:  LFUDate (460) | | | | | | | | | | | | | *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | | | | | | | | | | | | | | | | | | | | |
| Last follow-up NYHA Classification: LFUNYHA (470) | | | | | | | | | | | | | | | | | | | 🞎 Not Assessed 🞎 NYHA 1 🞎 NYHA 2 🞎 NYHA 3 🞎 NYHA 4 | | | | | | | | | | | | | | |
| Mortality Status at Last Follow-Up: 🞎 Alive 🞎 Dead LFUMortStat (480) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Dead →)* | | | Mortality Date: *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_  MtDate (490) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| **NONCARDIAC CONGENITAL ANATOMIC ABNORMALITIES (select all that apply)** NCAA (530) | | |
| 🞎 | None | |
| 🞎 | | Major abnormality of head, Choanal atresia |
| 🞎 | | Major abnormality of head, Cleft lip |
| 🞎 | | Major abnormality of head, Cleft palate |
| 🞎 | | Major abnormality of head, Craniosynostosis |
| 🞎 | | Major abnormality of head, Macrocephaly |
| 🞎 | | Major abnormality of head, Microcephaly |
| 🞎 | | Major abnormality of head, Micrognathia |
| 🞎 | | Major abnormality of brain, Hydrocephalus |
| 🞎 | | Major abnormality of brain, Tuberous sclerosis |
| 🞎 | | Major abnormality of spinal cord, Myelomeningocele |
| 🞎 | | Major abnormality of spinal cord, Spina bifida |
| 🞎 | | Major abnormality of spinal cord, Tethered cord |
| 🞎 | | Major abnormality of spine, Scoliosis |
| 🞎 | | Major abnormality of spine, Hemi-vertebrae |
| 🞎 | | Major abnormality of spine, Butterfly vertebrae |
| 🞎 | | Major abnormality of larynx - trachea - or bronchus, Laryngeal cleft |
| 🞎 | | Major abnormality of larynx - trachea - or bronchus, Laryngomalacia |
| 🞎 | | Major abnormality of larynx - trachea - or bronchus, Congenital tracheal stenosis |
| 🞎 | | Major abnormality of larynx - trachea - or bronchus, Tracheomalacia |
| 🞎 | | Major abnormality of larynx - trachea - or bronchus, Tracheoesophageal fistula (TEF) |
| 🞎 | | Major abnormality of larynx - trachea - or bronchus, Bronchomalacia |
| 🞎 | | Major abnormality of chest wall, Pectus carinatum |
| 🞎 | | Major abnormality of chest wall, Pectus excavatum |
| 🞎 | | Major abnormality of lung, Alveolar capillary dysplasia |
| 🞎 | | Major abnormality of lung, Congenital lobar emphysema (CLE) |
| 🞎 | | Major abnormality of lung, Cystic congenital adenomatous malformation of the lung (CAM) |
| 🞎 | | Major abnormality of lung, Cystic fibrosis |
| 🞎 | | Major abnormality of lung, Hypoplastic lung |
| 🞎 | | Major abnormality of lung, Pulmonary lymphangiectasia |
| 🞎 | | Major abnormality of diaphragm, Congenital diaphragmatic hernia (CDH), Bochdalek hernia |
| 🞎 | | Major abnormality of abdominal wall, Gastroschisis |
| 🞎 | | Major abnormality of abdominal wall, Omphalocele |
| 🞎 | | Major abnormality of gastrointestinal system, Esophageal atresia |
| 🞎 | | Major abnormality of gastrointestinal system, Pyloric stenosis |
| 🞎 | | Major abnormality of gastrointestinal system, Biliary atresia |
| 🞎 | | Major abnormality of gastrointestinal system, Duodenal atresia |
| 🞎 | | Major abnormality of gastrointestinal system, Duodenal stenosis |
| 🞎 | | Major abnormality of gastrointestinal system, Jejunal atresia |
| 🞎 | | Major abnormality of gastrointestinal system, Jejunal stenosis |
| 🞎 | | Major abnormality of gastrointestinal system, Ileal atresia |
| 🞎 | | Major abnormality of gastrointestinal system, Ileal stenosis |
| 🞎 | | Major abnormality of gastrointestinal system, Intestinal malrotation |
| 🞎 | | Major abnormality of gastrointestinal system, Hirschsprung's disease (Congenital aganglionic megacolon) |
| 🞎 | | Major abnormality of gastrointestinal system, Stenosis of large intestine |
| 🞎 | | Major abnormality of gastrointestinal system, Atresia of large intestine |
| 🞎 | | Major abnormality of gastrointestinal system, Atresia of rectum |
| 🞎 | | Major abnormality of gastrointestinal system, Stenosis of rectum |
| 🞎 | | Major abnormality of gastrointestinal system, Anal Atresia (imperforate anus) |
| 🞎 | | Major abnormality of genitalia, Ambiguous genitalia |
| 🞎 | | Major abnormality of genitalia, Hypospadiasis |
| 🞎 | | Major abnormality of genitalia, Rectovaginal fistula |
| 🞎 | | Major abnormality of genitalia, Undescended testis |
| 🞎 | | Major abnormality of kidney, Horseshoe kidney |
| 🞎 | | Major abnormality of kidney, Hydronephronsis |
| 🞎 | | Major abnormality of kidney, Polycystic kidney |
| 🞎 | | Major abnormality of kidney, Single kidney |
| 🞎 | | Other |
|  | | *(If NCAA is Other→)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Major Noncardiac Abnormality- Other- Specify NCAAOthSp (540) |

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| **CHROMOSOMAL ABNORMALITIES** | | | | | | | | | | | | | | |
| Chromosomal Abnormality: *(select all that apply)*ChromAb (570) | | | | | | | | | | | | | | |
| 🞎 | No chromosomal or genetic abnormality identified | | | | | | | | | | | | | |
| 🞎 | Known Mosaicism | | | | | | | | 🞎 | 11p15.5 | | | | |
| 🞎 | 1p36 del | | | | | | | | 🞎 | 11q | | | | |
| 🞎 | 1q21.1 del | | | | | | | | 🞎 | 12p1.21 | | | | |
| 🞎 | 1q21.1 dup | | | | | | | | 🞎 | 12p12.1 | | | | |
| 🞎 | 1q42.1 | | | | | | | | 🞎 | 12q24 | | | | |
| 🞎 | 2p21 | | | | | | | | 🞎 | 15q11.2 del | | | | |
| 🞎 | 3p22 | | | | | | | | 🞎 | 15q21.1 | | | | |
| 🞎 | 3q dup | | | | | | | | 🞎 | 16p11.2 del | | | | |
| 🞎 | 4p16 | | | | | | | | 🞎 | 17p11.2 del | | | | |
| 🞎 | 4q del | | | | | | | | 🞎 | 17q21.31 del | | | | |
| 🞎 | 5p15.2 del | | | | | | | | 🞎 | 20p12 | | | | |
| 🞎 | 5p15.33 del | | | | | | | | 🞎 | 22q11 deletion | | | | |
| 🞎 | 6p12 | | | | | | | | 🞎 | 22q11.2 dup | | | | |
| 🞎 | 7q11 | | | | | | | | 🞎 | 45X0 | | | | |
| 🞎 | 7q11.23 del | | | | | | | | 🞎 | 47,XXY | | | | |
| 🞎 | 7q11.23 dup | | | | | | | | 🞎 | Monosomy X | | | | |
| 🞎 | 7q32 | | | | | | | | 🞎 | Trisomy 08 | | | | |
| 🞎 | 7q34 | | | | | | | | 🞎 | Trisomy 09 | | | | |
| 🞎 | 8p23.1 del | | | | | | | | 🞎 | Trisomy 13 | | | | |
| 🞎 | 8p23.1 dup | | | | | | | | 🞎 | Trisomy 18 | | | | |
| 🞎 | 8q12 | | | | | | | | 🞎 | Trisomy 21 | | | | |
| 🞎 | 9q34.3 del | | | | | | | |  |  | | | | |
| 🞎 | Other chromosomal or genetic abnormality | | | | | | | | | | | | | |
|  | *(If “Other chromosomal or genetic abnormality” ↓)* | | | | | | | | | | | | | |
|  |  | Genes With Identified Abnormalities: *(select all that apply↓)* | | | | | | | | | | | | |
|  |  |  | 🞎 | ABCC9y | | | 🞎 | ACTC1 | | | 🞎 | ADAMTS10 | 🞎 | AK7 |
|  |  |  | 🞎 | ANKRD11 | | | 🞎 | ANKS3 | | | 🞎 | ANKS6 | 🞎 | ARID1B |
|  |  |  | 🞎 | ARMC4 | | | 🞎 | B3GALTL | | | 🞎 | B9D1 | 🞎 | B9D2 |
|  |  |  | 🞎 | BBIP1 | | | 🞎 | BBS1 | | | 🞎 | BBS10 | 🞎 | BBS12 |
|  |  |  | 🞎 | BBS2 | | | 🞎 | BBS4 | | | 🞎 | BBS7 | 🞎 | BBS9 |
|  |  |  | 🞎 | BCOR | | | 🞎 | BRAF | | | 🞎 | C21orf59 | 🞎 | C2CD3 |
|  |  |  | 🞎 | C5orf42 | | | 🞎 | CACNA1C | | | 🞎 | CBP | 🞎 | CC2D2A |
|  |  |  | 🞎 | CCDC103 | | | 🞎 | CCDC114 | | | 🞎 | CCDC151 | 🞎 | CCDC39 |
|  |  |  | 🞎 | CCDC40 | | | 🞎 | CCDC65 | | | 🞎 | CCNO | 🞎 | CDK13 |
|  |  |  | 🞎 | CDKN1C | | | 🞎 | CEP120 | | | 🞎 | CEP152 | 🞎 | CEP290 |
|  |  |  | 🞎 | CEP41 | | | 🞎 | CHD4 | | | 🞎 | CHD7 | 🞎 | CITED2 |
|  |  |  | 🞎 | COL1A1 | | | 🞎 | COL1A2 | | | 🞎 | COL5A1 | 🞎 | CRKL |
|  |  |  | 🞎 | CSPP1 | | | 🞎 | DGCR2 | | | 🞎 | DHCR7 | 🞎 | DLL4 |
|  |  |  | 🞎 | DNAAF1 / LRRC50 | | | 🞎 | DNAAF2 | | | 🞎 | DNAAF3 | 🞎 | DNAAF5  (or HEATR2) |
|  |  |  | 🞎 | DNAH11 | | | 🞎 | DNAH5 | | | 🞎 | DNAI1 | 🞎 | DNAI2 |
|  |  |  | 🞎 | DNAJB13 | | | 🞎 | DNAL1 | | | 🞎 | DOCK6 | 🞎 | DYNC2H1 |
|  |  |  | 🞎 | DYX1C1  (aka DNAAF4) | | | 🞎 | EFTUD2 | | | 🞎 | EHMT1 | 🞎 | ELN |
|  |  |  | 🞎 | EP300 | | | 🞎 | ESC02 | | | 🞎 | EST-1 | 🞎 | EVC |
|  |  |  | 🞎 | EVC2 | | | 🞎 | FBN1 | | | 🞎 | FBN2 | 🞎 | FGF8 |
|  |  |  | 🞎 | FGFR1 | | | 🞎 | FLNA | | | 🞎 | FMR1 | 🞎 | FOXC1 |
|  |  |  | 🞎 | FTO | | | 🞎 | GALNT11 | | | 🞎 | GANAB | 🞎 | GAS8 |
|  |  |  | 🞎 | GATA4 | | | 🞎 | GATA6 | | | 🞎 | GDF1 | 🞎 | GJA1 |
|  |  |  | 🞎 | GPC3 | | | 🞎 | GRK5 | | | 🞎 | HNRNPK | 🞎 | HOXA1 |
|  |  |  | 🞎 | HRAS | | | 🞎 | HYDIN | | | 🞎 | IFT122 | 🞎 | IFT140 |
|  |  |  | 🞎 | IFT27 | | | 🞎 | IFT43 | | | 🞎 | IFT80 | 🞎 | INPP5E |
|  |  |  | 🞎 | INTU | | | 🞎 | INVS | | | 🞎 | JAG1 | 🞎 | KAT6B |
|  |  |  | 🞎 | KDM6A | | | 🞎 | KIAA0556 | | | 🞎 | KIAA0586 | 🞎 | KIAA0753 |
|  |  |  | 🞎 | KIF7 | | | 🞎 | KMT2D (MLL2) | | | 🞎 | KRAS | 🞎 | LRRC6 |
|  |  |  | 🞎 | LTBP4 | | | 🞎 | MAP2K1 | | | 🞎 | MAP2K2 | 🞎 | MAPK1 |
|  |  |  | 🞎 | MCIDAS | | | 🞎 | MED12 | | | 🞎 | MED13L | 🞎 | MEGF8 |
|  |  |  | 🞎 | MID1 | | | 🞎 | MKKS | | | 🞎 | MKKS (BBS6) | 🞎 | MKS1 |
|  |  |  | 🞎 | MYH11 | | | 🞎 | MYH6 | | | 🞎 | MYH7 | 🞎 | NF1 |
|  |  |  | 🞎 | NHS | | | 🞎 | NIPBL | | | 🞎 | NKX2-5 | 🞎 | NKX2-6 |
|  |  |  | 🞎 | NME8  (aka TXNDC3) | | | 🞎 | NODAL | | | 🞎 | NOTCH1 | 🞎 | NPHP3 |
|  |  |  | 🞎 | NR2F2 | | | 🞎 | NSD1 | | | 🞎 | OFD1 | 🞎 | PDGFRA |
|  |  |  | 🞎 | PEX1 | | | 🞎 | PIBF1 | | | 🞎 | PIH1D3 | 🞎 | PITX2 |
|  |  |  | 🞎 | PKD1 | | | 🞎 | PKD2 | | | 🞎 | PKHD1 | 🞎 | PQBP1 |
|  |  |  | 🞎 | PRKD1 | | | 🞎 | PTEN | | | 🞎 | PTPN11 | 🞎 | RAB23 |
|  |  |  | 🞎 | RAD21 | | | 🞎 | RAI1 | | | 🞎 | RBM10 | 🞎 | RBPJ |
|  |  |  | 🞎 | RDR2 | | | 🞎 | RECQL4 | | | 🞎 | ROR2 | 🞎 | RPGR |
|  |  |  | 🞎 | RPGRIP1L | | | 🞎 | RPL35A | | | 🞎 | RPS10 | 🞎 | RPS17 |
|  |  |  | 🞎 | RPS24 | | | 🞎 | RPS26 | | | 🞎 | RSK2 | 🞎 | RSPH1 |
|  |  |  | 🞎 | RSPH3 | | | 🞎 | RSPH4A | | | 🞎 | RSPH9 | 🞎 | SALL1 |
|  |  |  | 🞎 | SALL4 | | | 🞎 | SEMA3E | | | 🞎 | SH3PXD2B | 🞎 | SHH |
|  |  |  | 🞎 | SHOC2 | | | 🞎 | SHROOM3 | | | 🞎 | SMAD2 | 🞎 | SMAD3 |
|  |  |  | 🞎 | SMAD6 | | | 🞎 | SMARCA4 | | | 🞎 | SMARCB1 | 🞎 | SMARCE1 |
|  |  |  | 🞎 | SMC1L1 | | | 🞎 | SMC3 | | | 🞎 | SMS | 🞎 | SNAP29 |
|  |  |  | 🞎 | SOS2 | | | 🞎 | SPAG1 | | | 🞎 | STRA6 | 🞎 | TAB2 |
|  |  |  | 🞎 | TBX1 | | | 🞎 | TBX20 | | | 🞎 | TBX5 | 🞎 | TCOF1 |
|  |  |  | 🞎 | TCTEX1D2 | | | 🞎 | TCTN1 | | | 🞎 | TCTN2 | 🞎 | TCTN3 |
|  |  |  | 🞎 | TFAP2B | | | 🞎 | TGFBR1 or 2 | | | 🞎 | TLL1 | 🞎 | TMEM107 |
|  |  |  | 🞎 | TMEM138 | | | 🞎 | TMEM216 | | | 🞎 | TMEM231 | 🞎 | TMEM67 |
|  |  |  | 🞎 | TRIM32 (BBS11) | | | 🞎 | TSC1 | | | 🞎 | TSC2 | 🞎 | TTC25 |
|  |  |  | 🞎 | TTC8 (BBS8) | | | 🞎 | TWIST | | | 🞎 | WDR19 | 🞎 | ZFPM2 / FOG2 |
|  |  |  | 🞎 | ZIC3 | | | 🞎 | ZNF423 | | |  |  |  |  |
|  |  |  | 🞎 | Unlisted Gene or Chromosomal Anomaly | | | | | | | | | | |
|  |  |  | | | | | | | | | | | | |
|  |  |  | | | *(If “Unlisted Gene or Chromosomal Anomaly” ↓)* | | | | | | | | | |
|  |  |  | | | | Unlisted Gene or Chromosomal Anomaly - Specify ChromAbOthSp (580) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- |
| **SYNDROMES** | | | | | | |
| Syndromes: *(select all that apply)* Syndrome (610) | | | | | | |
| 🞎 | No syndromic abnormality identified | | | | | |
| 🞎 | 1p36 deletion syndrome | | | 🞎 | | 1q21.1 duplicaiton syndrome |
| 🞎 | 3q duplication syndrome | | | 🞎 | | 4q deleltion syndrome |
| 🞎 | 7q11.23 duplication syndrome | | | 🞎 | | 8p23.1 deletion syndrome |
| 🞎 | 15q11.2 deletion syndrome | | | 🞎 | | 16p11.2 deletion syndrome |
| 🞎 | 22q11.2 duplication syndrome | | | 🞎 | | Adams-Oliver syndrome |
| 🞎 | Alagille syndrome (intrahepatic biliary duct agenesis) | | | 🞎 | | Alstrom syndrome |
| 🞎 | Alveolar Capillary Dysplasia Syndrome | | | 🞎 | | Apert syndrome |
| 🞎 | Baller-Gerold Syndrome | | | 🞎 | | Bardet-Biedl syndrome |
| 🞎 | Beckwith-Wiedemann syndrome | | | 🞎 | | Brugada syndrome (Sudden unexplained nocturnal death syndrome) (SUNDS) |
| 🞎 | Brugada/Timothy Syndrome | | | 🞎 | | Cantu syndrome |
|  |  | | | 🞎 | | Cardiofaciocutaneous syndrome |
| 🞎 | Carpenter syndrome | | | 🞎 | | Cat-eye syndrome |
| 🞎 | Caudal Regression Syndrome | | | 🞎 | | Char syndrome |
| 🞎 | CHARGE Association | | | 🞎 | | Chiari I Malformation |
| 🞎 | Chromosome 17q12 deletion syndrome | | | 🞎 | | Coffin Lowry syndrome |
| 🞎 | Coffin Siris Syndrome | | | 🞎 | | Cornelia de Lange syndrome |
| 🞎 | Costello syndrome | | | 🞎 | | Cranioectodermal dysplasia (Sensenbrenner syndrome) |
| 🞎 | Cri-du-chat syndrome | | | 🞎 | | Dandy Walker Malformation |
| 🞎 | Deletion 10p syndrome | | | 🞎 | | Deletion 8p syndrome |
| 🞎 | DiGeorge syndrome (velocardiofacial syndrome) (conotruncal anomaly face syndrome) (22q11 deletion) | | | 🞎 | | Distinct disorder |
| 🞎 | Down syndrome (Trisomy 21) | | | 🞎 | | Duane Radial Ray (Okihiro) syndrome |
| 🞎 | Duchenne Muscular Dystrophy | | | 🞎 | | Edwards syndrome (Trisomy 18) |
| 🞎 | Ehlers-Danlos Syndrome | | | 🞎 | | Ellis-van Creveld syndrome |
| 🞎 | ~~Familial atrial septal defects~~ | | | 🞎 | | Familial CHD |
| 🞎 | ~~Familial non-syndromic CHD~~ | | | 🞎 | | Fetal alcohol syndrome (FAS) |
| 🞎 | Fetal drug exposure | | | 🞎 | | Fetal rubella syndrome (Congenital rubella syndrome) |
| 🞎 | Fragile X | | | 🞎 | | Goldenhar syndrome |
| 🞎 | Heterotaxy syndrome, Asplenia syndrome | | | 🞎 | | Heterotaxy syndrome, Polysplenia syndrome |
| 🞎 | Heterotaxy syndrome, Unknown if asplenia or polysplenia | | | 🞎 | | Holt-Oram syndrome |
| 🞎 | Jacobsen syndrome | | | 🞎 | | Joubert syndrome |
| 🞎 | Kabuki syndrome | | | 🞎 | | Kartagener syndrome (Siewert syndrome) (Primary ciliary dyskinesia) |
| 🞎 | Kleefstra Syndrome | | | 🞎 | | Klinefelter syndrome (XXY Syndrome) |
| 🞎 | Koolen-De Vries Syndrome | | | 🞎 | | LEOPARD syndrome |
| 🞎 | Loeys-Dietz syndrome | | | 🞎 | | Marfan syndrome |
| 🞎 | Marfan-like syndrome | | | 🞎 | | McKusick-Kaufman syndrome |
| 🞎 | Meckel-Gruber syndrome | | | 🞎 | | Microphthalmia syndromic 9 |
| 🞎 | Mowat Wilson Syndrome | | | 🞎 | | Mucopolysaccharidosis type IH (Hurler syndrome) |
| 🞎 | Mucopolysaccharidosis type IH/S (Hurler-Scheie syndrome) | | | 🞎 | | Mucopolysaccharidosis type II (Hunter syndrome) |
| 🞎 | Mucopolysaccharidosis type IS (Scheie syndrome) | | | 🞎 | | Nance Horan syndrome |
| 🞎 | Nephronophthisis | | | 🞎 | | Neurofibromatosis |
| 🞎 | ~~Non-syndromic CHD~~ | | | 🞎 | | Noonan syndrome |
| 🞎 | Oculofaciocardiodental | | | 🞎 | | Oral-facial-digital syndromes (types I-XVI and unclassified) |
| 🞎 | Patau syndrome (Trisomy 13) | | | 🞎 | | Peter’s Plus syndrome |
| 🞎 | Pierre Robin syndrome | | | 🞎 | | Polycystic Kidney Disease |
| 🞎 | Primary ciliary dyskinesia (PCD) | | | 🞎 | | Prune Belly Syndrome |
| 🞎 | Rethore syndrome (Trisomy 9) | | | 🞎 | | Roberts syndrome |
| 🞎 | Robinow syndrome | | | 🞎 | | Rubinstein-Taybi syndrome |
| 🞎 | Saethre Chotzen syndrome | | | 🞎 | | Short Rib Polydactyly Type I |
| 🞎 | Short rib thoracic dysplasias including Jeune chondrodysplasia, Saldino Mainzer | | | 🞎 | | Sickle cell disease |
| 🞎 | Sickle cell trait | | | 🞎 | | Sifrim-Hitz-Weiss syndrome (SIHIWES) |
| 🞎 | Simpson-Golabi-Behmel syndrome | | | 🞎 | | Situs inversus |
| 🞎 | Smith Magenis syndrome | | | 🞎 | | Smith-Lemli-Opitz syndrome |
| 🞎 | Sotos syndrome | | | 🞎 | | Spinal Muscular Atrophy, Type II |
| 🞎 | ~~Sporadic and familial CHD~~ | | | 🞎 | | ~~Syndromic CHD~~ |
| 🞎 | TAR syndrome | | | 🞎 | | Thalassemia - Major |
| 🞎 | Thalassemia - Minor | | | 🞎 | | Townes-Brocks syndrome |
| 🞎 | ~~Trisomy 13~~ | | | 🞎 | | ~~Trisomy 18~~ |
| 🞎 | ~~Trisomy 21~~ | | | 🞎 | | Turner syndrome (45XO) |
| 🞎 | VACTERL syndrome (VACTER/VATER/VATERR syndrome) | | | 🞎 | | VACTERL-H syndrome (VATER association with hydrocephalus) (Briard-Evans syndrome) |
| 🞎 | von Willebrand disease (vWD) | | | 🞎 | | Warkany syndrome (Trisomy 8) |
| 🞎 | Williams syndrome (Williams-Beuren syndrome) | | | 🞎 | | Wolf-Hirschhorn syndrome |
| 🞎 | X-linked heterotaxy | | |  | |  |
| 🞎 | Other syndromic abnormality | | |  | |  |
|  | | *(If Other Syndromic abnormality, Specify ↓)* | |  | |  |
|  | | | Syndrome – Other – Specify SyndromeOthSp (620) | |  |  |

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| **HOSPITALIZATION** | | | | | | | | | | | | | | |
| Hospital Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ HospName (630) | | | | | | | | | | | | | | |
| Hospital Zip Code:\_\_\_\_\_\_\_\_\_\_\_\_\_  HospZIP (640) | | | | Hospital State:\_\_\_\_\_\_\_\_\_\_\_\_\_  HospStat (650) | | | | | | Hospital National Provider Identifier: \_\_\_\_\_\_\_\_\_\_\_\_  HospNPI (660) | | | | |
| PrimaryPayor: PayorPrim (771) | | | | | | | Secondary (supplemental) Payor: PayorSecond (773) | | | | | | | |
| 🞎 None/self | | | | | | | 🞎 None/self | | | | | | | |
| *(If Primary not None or missing →)* | | 🞎 Medicare  🞎 Medicaid  🞎 Military Health  🞎 Indian Health Service  🞎 Correctional Facility  🞎 State Specific Plan  🞎 Other Government Insurance  🞎 Commercial Health Insurance  🞎 Health Maintenance Organization  🞎 Non US Plan  🞎 Charitable Care/Foundation Funding (internal)  🞎 Charitable Care/Foundation Funding (external) | | | | | *(If Secondary not None or missing →)* | | | | 🞎 Medicare  🞎 Medicaid  🞎 Military Health  🞎 Indian Health Service  🞎 Correctional Facility  🞎 State Specific Plan  🞎 Other Government Insurance  🞎 Commercial Health Insurance  🞎 Health Maintenance Organization  🞎 Non US Plan  🞎 Charitable Care/Foundation Funding (internal)  🞎 Charitable Care/Foundation Funding (external) | | | |
| *(If Medicare→)* | | Primary Payor Medicare Fee for Service: PrimMCareFFS (772) | 🞎 Yes 🞎 No | | | | *(If Medicare→)* | | | | Secondary Payor Medicare Fee for Service:  SecondMCareFFS (774) | | | 🞎 Yes 🞎 No |
| Admission date: *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ AdmitDt (780) | | | | | | | | | | | | | | |
| Location From which Patient was Admitted:  AdmitFromLoc (781) | | | | | | 🞎 Home  🞎 Other chronic care center | | | | | | | 🞎 Other acute care center  🞎 Born at operative center | |
| Surgery date: *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ SurgDt (790) | | | | | | | | | | | | | | |
| Height (Cm): \_\_\_\_\_\_\_\_\_\_  HeightCm (800) | | | | | Weight (Kg):\_\_\_\_\_\_\_\_\_\_  WeightKg (810) | | | | | | | Age at time of surgery (in days):\_\_\_\_\_\_\_\_\_\_  AgeDays (820) | | |
| **PREOPERATIVE FACTORS (select all that apply)** PreopFactor (850) | | | | | | | | | | | | | | |
| 🞎 | No preoperative factors identified | | | | | | | 🞎 | Sepsis | | | | | |
| 🞎 | Cardio-pulmonary resuscitation | | | | | | | 🞎 | Sepsis with positive blood culture | | | | | |
| 🞎 | Preoperative complete AV block | | | | | | | 🞎 | Preoperative neurological deficit | | | | | |
| 🞎 | Preoperative/Preprocedural mechanical circulatory support (IABP, VAD, ECMO, or CPS) | | | | | | | 🞎 | Seizure during lifetime | | | | | |
| 🞎 | Shock, Persistent at time of surgery | | | | | | | 🞎 | Seizure within 48 hours prior to surgery | | | | | |
| 🞎 | Shock, Resolved at time of surgery | | | | | | | 🞎 | Stroke, CVA, or Intracranial hemorrhage > Grade 2 during lifetime | | | | | |
| 🞎 | Diabetes mellitus, Insulin dependent | | | | | | | 🞎 | Stroke, CVA, or Intracranial hemorrhage > Grade 2 within 48 hours prior to surgery | | | | | |
| 🞎 | Diabetes mellitus, Non-insulin dependent | | | | | | | 🞎 | Renal dysfunction | | | | | |
| 🞎 | Hypothyroidism | | | | | | | 🞎 | Renal failure requiring dialysis | | | | | |
| 🞎 | Currently taking steroids as treatment for adrenal insufficiency | | | | | | | 🞎 | Invasive mechanical ventilation to treat cardiorespiratory failure | | | | | |
| 🞎 | Currently taking steroids for any reason other than treatment of adrenal insufficiency | | | | | | | 🞎 | Non-invasive respiratory support to treat cardiorespiratory failure | | | | | |
| 🞎 | Colostomy present | | | | | | | 🞎 | Respiratory Syncytial Virus | | | | | |
| 🞎 | Enterostomy of small intestine present | | | | | | | 🞎 | Single lung | | | | | |
| 🞎 | Esophagostomy present | | | | | | | 🞎 | Tracheostomy present | | | | | |
| 🞎 | Gastrostomy present | | | | | | | 🞎 | Asthma | | | | | |
| 🞎 | Hepatic dysfunction | | | | | | | 🞎 | Bronchopulmonary Dysplasia (BPD) | | | | | |
| 🞎 | Necrotizing entero-colitis, Treated medically | | | | | | | 🞎 | ICD (AICD) ([automatic] implantable cardioverter defibrillator) present | | | | | |
| 🞎 | Necrotizing entero-colitis, Treated surgically | | | | | | | 🞎 | Pacemaker present | | | | | |
| 🞎 | Coagulation disorder, Hypercoagulable state | | | | | | | 🞎 | Tobacco use | | | | | |
| 🞎 | Coagulation disorder, Hypocoagulable state not secondary to medication (intrinsic hypocoagulable state) | | | | | | | 🞎 | Transferred from another hospital after undergoing cardiac surgical operation at that hospital during this episode of care. | | | | | |
| 🞎 | Coagulation disorder, Hypocoagulable state secondary to medication | | | | | | | 🞎 | Admitted from home after having undergone a cardiac surgical operation within the past 30 days | | | | | |
| 🞎 | Dyslipidemia | | | | | | | 🞎 | Other preoperative factors  *(If Other Preoperative Factors, Specify ↓)*  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PreOpFactorSpecify (851) | | | | | |
| 🞎 | Endocarditis | | | | | | |  |  | | | | | |
| 🞎 | Family History of Coronary Artery Disease | | | | | | |  |  | | | | | |

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| **DIAGNOSIS** | | |
| Select **ALL** diagnosis that apply(↓)  Diagnosis (890) | CIRCLE the **ONE** PRIMARY diagnosis for this operation PrimDiag (900) | Select the **ONE** FUNDAMENTAL diagnosis for this patient (↓)  FundDiagnosis (374) |

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| --- | --- | --- | --- | --- |
| **Septal Defects** | ASD | 🞎 | 10=PFO | 🞎 |
| 🞎 | 20= ASD, Secundum | 🞎 |
| 🞎 | 30= ASD, Sinus venosus | 🞎 |
| 🞎 | 40= ASD, Coronary sinus | 🞎 |
| 🞎 | 50= ASD, Common atrium (single atrium) | 🞎 |
| 🞎 | 2150= ASD, Postoperative interatrial communication | NA |
| VSD | 🞎 | 71= VSD, Type 1 (Subarterial) (Supracristal) (Conal septal defect) (Infundibular) | 🞎 |
| 🞎 | 73= VSD, Type 2 (Perimembranous) (Paramembranous) (Conoventricular) | 🞎 |
| 🞎 | 75= VSD, Type 3 (Inlet) (AV canal type) | 🞎 |
| 🞎 | 77= VSD, Type 4 (Muscular) | 🞎 |
| 🞎 | 79= VSD, Type: Gerbode type (LV-RA communication) | 🞎 |
| 🞎 | 80= VSD, Multiple | 🞎 |
| AV Canal | 🞎 | 100= AVC (AVSD), Complete (CAVSD) | 🞎 |
| 🞎 | 110= AVC (AVSD), Intermediate (transitional) | 🞎 |
| 🞎 | 120= AVC (AVSD), Partial (incomplete) (PAVSD) (ASD, primum) | 🞎 |
| AP Window | 🞎 | 140= AP window (aortopulmonary window) | 🞎 |
| 🞎 | 150= Pulmonary artery origin from ascending aorta (hemitruncus) | 🞎 |
| Truncus Arteriosus | 🞎 | 160= Truncus arteriosus | 🞎 |
| 🞎 | 170= Truncal valve insufficiency | 🞎 |
| 🞎 | 2470= Truncal valve stenosis | NA |
| 🞎 | 2010= Truncus arteriosus + Interrupted aortic arch | 🞎 |
| **Pulmonary Venous Anomalies** | Partial Anomalous Pulmonary Venous Connection | 🞎 | 180= Partial anomalous pulmonary venous connection (PAPVC) | 🞎 |
| 🞎 | 190= Partial anomalous pulmonary venous connection (PAPVC), scimitar | 🞎 |
| Total Anomalous Pulmonary Venous Connection | 🞎 | 200=Total anomalous pulmonary venous connection (TAPVC), Type1 (supracardiac) | 🞎 |
| 🞎 | 210=Total anomalous pulmonary venous connection (TAPVC), Type 2 (cardiac) | 🞎 |
| 🞎 | 220=Total anomalous pulmonary venous connection (TAPVC), Type 3 (infracardiac) | 🞎 |
| 🞎 | 230=Total anomalous pulmonary venous connection (TAPVC), Type 4 (mixed) | 🞎 |
| **Cor Triatriatum** |  | 🞎 | 250=Cor triatriatum | 🞎 |
| **Pulmonary Venous Stenosis** |  | 🞎  🞎  🞎 | 260=Pulmonary venous stenosis  2480=Pulmonary venous stenosis, Acquired  2490=Pulmonary venous stenosis, Spontaneous | 🞎  🞎  🞎 |
| **Systemic Venous Anomalies** | Anomalous Systemic Venous Connection | 🞎 | 270=Systemic venous anomaly | 🞎 |
| Systemic venous obstruction | 🞎 | 280=Systemic venous obstruction | 🞎 |
| **Right Heart Lesions** | Tetralogy of Fallot | 🞎 | 290=TOF | 🞎 |
| 🞎 | 2140=TOF, Pulmonary stenosis | 🞎 |
| 🞎 | 300=TOF, AVC (AVSD) | 🞎 |
| 🞎 | 310=TOF, Absent pulmonary valve | 🞎 |
| Pulmonary Atresia | 🞎 | 320=Pulmonary atresia | 🞎 |
| 🞎 | 330=Pulmonary atresia, IVS | 🞎 |
| 🞎 | 340=Pulmonary atresia, VSD (Including TOF, PA) | 🞎 |
| 🞎 | 350=Pulmonary atresia, VSD-MAPCA | 🞎 |
| 🞎 | 360=MAPCA(s) (major aortopulmonary collateral[s]) (without PA-VSD) | 🞎 |
| Tricuspid Valve Disease and Ebstein’s Anomaly | 🞎 | 370=Ebstein's anomaly | 🞎 |
| 🞎 | 380=Tricuspid regurgitation, non-Ebstein's related | 🞎 |
| 🞎 | 390=Tricuspid stenosis | 🞎 |
| 🞎 | 400=Tricuspid regurgitation and tricuspid stenosis | 🞎 |
| 🞎 | 410=Tricuspid valve, Other | 🞎 |
| RVOT Obstruction and/or Pulmonary Stenosis | 🞎 | 420=Pulmonary stenosis, Valvar | 🞎 |
| 🞎 | 430=Pulmonary artery stenosis (hypoplasia), Main (trunk) | 🞎 |
| 🞎 | 440=Pulmonary artery stenosis, Branch, Central (within the hilar bifurcation) | 🞎 |
| 🞎 | 450=Pulmonary artery stenosis, Branch, Peripheral (at or beyond the hilar bifurcation) | 🞎 |
| 🞎 | 470=Pulmonary artery, Discontinuous | 🞎 |
| 🞎 | 490=Pulmonary stenosis, Subvalvar | 🞎 |
| 🞎 | 500=DCRV | 🞎 |
| Pulmonary Valve Disease | 🞎 | 510=Pulmonary valve, Other | 🞎 |
| 🞎 | 530=Pulmonary insufficiency | 🞎 |
| 🞎 | 540=Pulmonary insufficiency and pulmonary stenosis | 🞎 |
| **Shunt failure** | Shunt failure | 🞎 | 2130=Shunt Failure | NA |
| **Conduit failure** | Conduit failure | 🞎 | 520=Conduit failure | NA |

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| **Left Heart Lesions** | Aortic Valve Disease | 🞎 | 550=Aortic stenosis, Subvalvar | 🞎 |
| 🞎 | 2500=Aortic stenosis, Subvalvar, Discrete | 🞎 |
| 🞎 | 2510=Aortic stenosis, Subvalvar, IHSS | 🞎 |
| 🞎 | 2520=Aortic stenosis, Subvalvar, Tunnel-like | 🞎 |
| 🞎 | 560=Aortic stenosis, Valvar | 🞎 |
| 🞎 | 570=Aortic stenosis, Supravalvar | 🞎 |
| 🞎 | 590=Aortic valve atresia | 🞎 |
| 🞎 | 600=Aortic insufficiency | 🞎 |
| 🞎 | 610=Aortic insufficiency and aortic stenosis | 🞎 |
| 🞎 | 620=Aortic valve, Other | 🞎 |
| Sinus of Valsalva Fistula/Aneurysm | 🞎 | 630=Sinus of Valsalva aneurysm | 🞎 |
| LV to Aorta Tunnel | 🞎 | 640=LV to aorta tunnel | 🞎 |
| Mitral Valve Disease | 🞎 | 650=Mitral stenosis, Supravalvar mitral ring | 🞎 |
| 🞎 | 660=Mitral stenosis, Valvar | 🞎 |
| 🞎 | 670=Mitral stenosis, Subvalvar | 🞎 |
| 🞎 | 680=Mitral stenosis, Subvalvar, Parachute | 🞎 |
| 🞎 | 695=Mitral stenosis | 🞎 |
| 🞎 | 700=Mitral regurgitation and mitral stenosis | 🞎 |
| 🞎 | 710=Mitral regurgitation | 🞎 |
| 🞎 | 720=Mitral valve, Other | 🞎 |
| Hypoplastic Left Heart Syndrome | 🞎 | 730=Hypoplastic left heart syndrome (HLHS) | 🞎 |
| Shone’s syndrome | 🞎 | 2080=Shone’s syndrome *{CANNOT BE PRIMARY DIAGNOSIS}* | 🞎 |
| **Cardiomyopathy** |  | 🞎 | 740=Cardiomyopathy (including dilated, restrictive, and hypertrophic) | 🞎 |
| 🞎 | 750=Cardiomyopathy, End-stage congenital heart disease | 🞎 |
| **Pericardial Disease** |  | 🞎 | 760=Pericardial effusion | 🞎 |
| 🞎 | 770=Pericarditis | 🞎 |
| 🞎 | 780=Pericardial disease, Other | 🞎 |
| **Single Ventricle** |  | 🞎 | 790=Single ventricle, DILV | 🞎 |
| 🞎 | 800=Single ventricle, DIRV | 🞎 |
| 🞎 | 810=Single ventricle, Mitral atresia | 🞎 |
| 🞎 | 820=Single ventricle, Tricuspid atresia | 🞎 |
| 🞎 | 830=Single ventricle, Unbalanced AV canal | 🞎 |
| 🞎 | 840=Single ventricle, Heterotaxia syndrome | 🞎 |
| 🞎 | 850=Single ventricle, Other | 🞎 |
| 🞎 | 851=Single ventricle + Total anomalous pulmonary venous connection (TAPVC) | 🞎 |
| **Transposition of the Great Arteries** | Congenitally Corrected TGA | 🞎 | 870=Congenitally corrected TGA | 🞎 |
| 🞎 | 872=Congenitally corrected TGA, IVS | 🞎 |
| 🞎 | 874=Congenitally corrected TGA, IVS-LVOTO | 🞎 |
| 🞎 | 876=Congenitally corrected TGA, VSD | 🞎 |
| 🞎 | 878=Congenitally corrected TGA, VSD-LVOTO | 🞎 |
| Transposition of the Great Arteries | 🞎 | 880=TGA, IVS | 🞎 |
| 🞎 | 890=TGA, IVS-LVOTO | 🞎 |
| 🞎 | 900=TGA, VSD | 🞎 |
| 🞎 | 910=TGA, VSD-LVOTO | 🞎 |

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| --- | --- | --- | --- | --- |
| **DORV** |  | 🞎 | 930=DORV, VSD type | 🞎 |
| 🞎 | 940=DORV, TOF type | 🞎 |
| 🞎 | 950=DORV, TGA type | 🞎 |
| 🞎 | 960=DORV, Remote VSD (uncommitted VSD) | 🞎 |
| 🞎 | 2030=DORV + AVSD (AV Canal) | 🞎 |
| 🞎 | 975=DORV, IVS | 🞎 |
| **DOLV** |  | 🞎 | 980=DOLV | 🞎 |
| **Thoracic Arteries and Veins** | Coarctation of Aorta and Aortic arch hypoplasia | 🞎 | 990=Coarctation of aorta | 🞎 |
| 🞎 | 1000=Aortic arch hypoplasia | 🞎 |
| 🞎 | 92=VSD + Aortic arch hypoplasia | 🞎 |
| 🞎 | 94=VSD + Coarctation of aorta | 🞎 |
| Coronary Artery Anomalies | 🞎 | 1010=Coronary artery anomaly, Anomalous aortic origin of coronary artery (AAOCA) | 🞎 |
| 🞎 | 1020=Coronary artery anomaly, Anomalous pulmonary origin (includes ALCAPA) | 🞎 |
| 🞎 | 1030=Coronary artery anomaly, Fistula | 🞎 |
| 🞎 | 1040=Coronary artery anomaly, Aneurysm | 🞎 |
| 🞎 | 2420=Coronary artery anomaly, Ostial atresia | 🞎 |
| 🞎 | 1050=Coronary artery anomaly, Other | 🞎 |
| Interrupted Arch | 🞎 | 1070=Interrupted aortic arch | 🞎 |
| 🞎 | 2020=Interrupted aortic arch + VSD | 🞎 |
| 🞎 | 2000=Interrupted aortic arch + AP window (aortopulmonary window) | 🞎 |
| Patent Ductus Arteriosus | 🞎 | 1080=Patent ductus arteriosus | 🞎 |
| Vascular rings and Slings | 🞎 | 1090=Vascular ring | 🞎 |
| 🞎 | 1100=Pulmonary artery sling | 🞎 |
| Aortic Aneurysm | 🞎 | 1110=Aortic aneurysm (including pseudoaneurysm) | 🞎 |
| Aortic Dissection | 🞎 | 1120=Aortic dissection | 🞎 |
| **Thoracic and Mediastinal Disease** | Lung Disease | 🞎 | 1130=Lung disease, Benign | 🞎 |
| 🞎 | 1140=Lung disease, Malignant | 🞎 |
| Tracheal | 🞎 | 1160=Tracheal stenosis | 🞎 |
| 🞎 | 2430=Tracheomalacia | 🞎 |
| 🞎 | 1170=Airway disease, Other | 🞎 |
| Pleural Disease | 🞎 | 1430=Pleural disease, Benign | 🞎 |
| 🞎 | 1440=Pleural disease, Malignant | 🞎 |
| 🞎 | 1450=Pneumothorax | 🞎 |
| 🞎 | 1460=Pleural effusion | 🞎 |
| 🞎 | 1470=Chylothorax | 🞎 |
| 🞎 | 1480=Empyema | 🞎 |
| Esophageal Disease | 🞎 | 1490=Esophageal disease, Benign | 🞎 |
| 🞎 | 1500=Esophageal disease, Malignant | 🞎 |
| Mediastinal Disease | 🞎 | 1505=Mediastinal disease | 🞎 |
| 🞎 | 1510=Mediastinal disease, Benign | 🞎 |
| 🞎 | 1520=Mediastinal disease, Malignant | 🞎 |
| Diaphragmatic Disease | 🞎 | 1540=Diaphragm paralysis | 🞎 |
| 🞎 | 1550=Diaphragm disease, Other | 🞎 |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Thoracic and Mediastinal Disease** | Chest Wall | 🞎 | 2160=Rib tumor, Benign | | 🞎 |
| 🞎 | 2170=Rib tumor, Malignant | | 🞎 |
| 🞎 | 2180=Rib tumor, Metastatic | | 🞎 |
| 🞎 | 2190=Sternal tumor, Benign | | 🞎 |
| 🞎 | 2200=Sternal tumor, Malignant | | 🞎 |
| 🞎 | 2210=Sternal tumor, Metastatic | | 🞎 |
| Pectus Excavatum, Carinatum | 🞎 | 2220=Pectus carinatum | | 🞎 |
| 🞎 | 2230=Pectus excavatum | | 🞎 |
| Thoracic Outlet | 🞎 | 2240=Thoracic outlet syndrome | | 🞎 |
| **Electrophysiological** |  | 🞎 | 1180=Arrhythmia | | 🞎 |
| 🞎 | 2440=Arrhythmia, Atrial, Atrial fibrillation | | 🞎 |
| 🞎 | 2450=Arrhythmia, Atrial, Atrial flutter | | 🞎 |
| 🞎 | 2460=Arrhythmia, Atrial, Other | | 🞎 |
| 🞎 | 2050=Arrhythmia, Junctional | | 🞎 |
| 🞎 | 2060=Arrhythmia, Ventricular | | 🞎 |
| 🞎 | 1185=Arrhythmia, Heart block | | 🞎 |
| 🞎 | 1190=Arrhythmia, Heart block, Acquired | | 🞎 |
| 🞎 | 1200=Arrhythmia, Heart block, Congenital | | 🞎 |
| 🞎 | 1220=Arrhythmia, Pacemaker, Indication for replacement | | NA |
| 🞎 | 2530= Short QT syndrome | | 🞎 |
| 🞎 | 2540= Long QT syndrome (Ward Romano syndrome) | | 🞎 |
| 🞎 | 2550= Wolff-Parkinson-White syndrome (WPW syndrome) | | 🞎 |
| **Miscellaneous, Other** |  | 🞎 | 1230=Atrial Isomerism, Left *{CANNOT BE PRIMARY DIAGNOSIS}* | | NA |
| 🞎 | 1240=Atrial Isomerism, Right *{CANNOT BE PRIMARY DIAGNOSIS}* | | NA |
| 🞎 | 2090=Dextrocardia *{CANNOT BE PRIMARY DIAGNOSIS}* | | NA |
| 🞎 | 2100=Levocardia *{CANNOT BE PRIMARY DIAGNOSIS}* | | NA |
| 🞎 | 2110=Mesocardia *{CANNOT BE PRIMARY DIAGNOSIS}* | | NA |
| 🞎 | 2120=Situs inversus  *{CANNOT BE PRIMARY DIAGNOSIS}* | | NA |
| 🞎 | 1250=Aneurysm, Ventricular, Right (including pseudoaneurysm) | | 🞎 |
| 🞎 | 1260=Aneurysm, Ventricular, Left (including pseudoaneurysm) | | 🞎 |
| 🞎 | 1270=Aneurysm, Pulmonary artery | | 🞎 |
| 🞎 | 1280=Aneurysm, Other | | 🞎 |
| 🞎 | 1290=Hypoplastic RV | | 🞎 |
| 🞎 | 1300=Hypoplastic LV | | 🞎 |
| 🞎 | 2070=Postoperative bleeding | | NA |
| 🞎 | 1310=Mediastinitis | | 🞎 |
| 🞎 | 1320=Endocarditis | | 🞎 |
| 🞎 | 1325=Rheumatic heart disease *{CANNOT BE PRIMARY DIAGNOSIS}* | | 🞎 |
| 🞎 | 1330=Prosthetic valve failure | | NA |
| 🞎 | 1340=Myocardial infarction | | 🞎 |
| 🞎 | 1350=Cardiac tumor | | 🞎 |
| 🞎 | 1360=Pulmonary AV fistula | | 🞎 |
| 🞎 | 1370=Pulmonary embolism | | 🞎 |
| 🞎 | 1385=Pulmonary vascular obstructive disease | | 🞎 |
| 🞎 | 1390=Pulmonary vascular obstructive disease (Eisenmenger’s) | | 🞎 |
| 🞎 | 1400=Primary pulmonary hypertension | | 🞎 |
| 🞎 | 1410=Persistent fetal circulation | | 🞎 |
| 🞎 | 1420=Meconium aspiration | | 🞎 |
| 🞎 | 2250=Kawasaki Disease | | 🞎 |
| 🞎 | 1560=Cardiac, Other | | 🞎 |
| 🞎 | 1570=Thoracic and/or mediastinal, Other | | 🞎 |
| 🞎 | 1580=Peripheral vascular, Other | | 🞎 |
|  |  | 🞎 | 2260=Complication of cardiovascular catheterization procedure | | NA |
| 🞎 | 2270=Complication of cardiovascular catheterization procedure, Device embolization | | NA |
| 🞎 | 2280=Complication of cardiovascular catheterization procedure, Device malfunction | | NA |
| 🞎 | 2290=Complication of cardiovascular catheterization procedure, Perforation | | NA |
| 🞎 | 2300=Complication of interventional radiology procedure | | NA |
| 🞎 | 2310=Complication of interventional radiology procedure, Device embolization | | NA |
| 🞎 | 2320=Complication of interventional radiology procedure, Device malfunction | | NA |
| 🞎 | 2330=Complication of interventional radiology procedure, Perforation | | NA |
| 🞎 | 2340=Foreign body, Intracardiac foreign body | | NA |
| 🞎 | 2350=Foreign body, Intravascular foreign body | | NA |
| 🞎 | 2360=Open sternum with closed skin | | NA |
| 🞎 | 2370=Open sternum with open skin (includes membrane placed to close skin) | | NA |
| 🞎 | 2380=Retained sternal wire causing irritation | | NA |
| 🞎 | 2390=Syncope | | NA |
| 🞎 | 2400=Trauma, Blunt | | 🞎 |
| 🞎 | 2410=Trauma, Penetrating | | 🞎 |
| 🞎 | 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 | | 🞎 |
| 🞎 | 7777=Miscellaneous, Other | | 🞎 |
| **STATUS POST (No “Status post – diagnoses” can be a primary diagnosis or fundamental diagnosis)** | | | | | |
| **Septal Defects** | ASD | 🞎 | | 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 | |
| VSD | 🞎 | | 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 | |
| AV Canal | 🞎 | | 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 | |
| AP Window | 🞎 | | 4210=Status post - AP window repair | |
| 🞎 | | 4220=Status post - Pulmonary artery origin from ascending aorta (hemitruncus) repair | |
| Truncus Arteriosus | 🞎 | | 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 | |
| **Pulmonary Venous Anomalies** | Partial Anomalous Pulmonary Venous Connection | 🞎 | | 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) | |
| Total Anomalous Pulmonary Venous Connection | 🞎 | | 4280=Status post - TAPVC repair | |
| 🞎 | | 6200=Status post - TAPVC repair + Shunt - systemic-to-pulmonary | |
| **Cor Triatriatum** |  | 🞎 | | 4290=Status post - Cor triatriatum repair | |
| **Pulmonary Venous Stenosis** |  | 🞎 | | 4300=Status post - Pulmonary venous stenosis repair | |
| **Systemic Venous Anomalies** | Anomalous Systemic Venous Connection | 🞎 | | 4310=Status post - Atrial baffle procedure (non-Mustard, non-Senning) | |
| 🞎 | | 4330=Status post - Anomalous systemic venous connection repair | |
| Systemic venous obstruction | 🞎 | | 4340=Status post - Systemic venous stenosis repair | |
| **Right Heart Lesions** | Tetralogy of Fallot | 🞎 | | 4350=Status post - TOF repair, No ventriculotomy | |
| 🞎 | | 4360=Status post - TOF repair, Ventriculotomy, Nontransanular patch | |
| 🞎 | | 4370=Status post - TOF repair, Ventriculotomy, Transanular patch | |
| 🞎 | | 7330=Status post - TOF repair, Ventriculotomy, Transanular patch, plus native valve reconstruction | |
| 🞎 | | 7340=Status post - TOF repair, Ventriculotomy, Transanular 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 | |
| Pulmonary Atresia/VSD | 🞎 | | 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 unifocalizarion (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) | |
| Tricuspid Valve Disease and Ebstein’s Anomaly | 🞎 | | 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 | |
| RVOT Obstruction, IVS Pulmonary Stenosis | 🞎 | | 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 | |
| Pulmonary Valve Disease | 🞎 | | 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 | |
| **Conduit operations** | Conduit operations | 🞎 | | 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 | |
| Conduit Stenosis / Insufficiency | 🞎 | | 4580=Status post - Conduit reoperation | |
| **Left Heart Lesions** | Aortic Valve Disease | 🞎 | | 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 | |
| Sinus of Valsalva Aneurysm | 🞎 | | 4810=Status post - Sinus of Valsalva, Aneurysm repair | |
| LV to Aorta Tunnel | 🞎 | | 4820=Status post - LV to aorta tunnel repair | |
| Mitral Valve Disease | 🞎 | | 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 | |
| Hypoplastic Left Heart and Related malformations | 🞎 | | 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 neoaorta + arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui) | |
| **Hybrid** |  | 🞎 | | 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 dilatation | |
|  |  | 🞎 | | 6770=Status post – Hybrid Approach, Transcardiac transcatheter device placement | |
| **Cardiomyopathy** |  | 🞎 | | 1590=Status post - Transplant, Heart | |
| 🞎 | | 1610=Status post - Transplant, Heart and lung | |
| 🞎 | | 4910=Status post - Partial left ventriculectomy (LV volume reduction surgery) (Batista) | |
| **Pericardial Disease** |  | 🞎 | | 4920=Status post - Pericardial drainage procedure | |
| 🞎 | | 4930=Status post - Pericardiectomy | |
| 🞎 | | 4940=Status post - Pericardial procedure, Other | |
| **Single Ventricle** |  | 🞎 | | 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 | |
| **Transposition of the Great Arteries** | Congenitally Corrected TGA | 🞎 | | 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 | |
| Transposition of the Great Arteries | 🞎 | | 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 | |
| **DORV** |  | 🞎 | | 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 | |
| **DOLV** |  | 🞎 | | 5200=Status post - DOLV repair | |
| **Thoracic Arteries and Veins** | Coarctation of Aorta and Aortic arch hypoplasia | 🞎 | | 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 | |
| 🞎 | | 5275=Status post - Coarctation repair + VSD repair | |
| 🞎 | | 5280=Status post - Aortic arch repair | |
| 🞎 | | 5285=Status post - Aortic arch repair + VSD repair | |
| Coronary Artery Anomalies | 🞎 | | 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 | |
| Interrupted Arch | 🞎 | | 5320=Status post - Interrupted aortic arch repair | |
| Patent Ductus Arteriosus | 🞎 | | 5330=Status post - PDA closure, Surgical | |
| 🞎 | | 5340=Status post - PDA closure, Device | |
| Vascular Rings and Slings | 🞎 | | 5360=Status post - Vascular ring repair | |
| 🞎 | | 5365=Status post - Aortopexy | |
| 🞎 | | 5370=Status post - Pulmonary artery sling repair | |
| Aortic Aneurysm | 🞎 | | 5380=Status post - Aortic aneurysm repair | |
| Aortic Dissection | 🞎 | | 5390=Status post - Aortic dissection repair | |
| **Thoracic and Mediastinal Disease** | Lung Disease | 🞎 | | 5400=Status post - Lung biopsy | |
| 🞎 | | 1600=Status post - Transplant, lung(s) | |
| 🞎 | | 5420=Status post - Lung procedure, Other | |
| Tracheal Stenosis | 🞎 | | 5440=Status post - Tracheal procedure | |
| Chest Wall | 🞎 | | 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 the sternum | |
| 🞎 | | 6870=Status post - Sternal resection, Radical resection of the 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 | |
| Neck | 🞎 | | 6930=Status post - Hyoid myotomy and suspension | |
| 🞎 | | 6940=Status post - Muscle flap, Neck | |
| 🞎 | | 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 | |
| Pectus Excvatum, Carinatum | 🞎 | | 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 | |
| Thoracic Outlet | 🞎 | | 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 a cervical rib | |
| 🞎 | | 7070=Status post - Rib excision, Excision of a cervical rib, With sympathectomy | |
| 🞎 | | 7080=Status post - Rib excision, Excision of first rib | |
| 🞎 | | 7090=Status post - Rib excision, Excision of first rib, With sympathectomy | |
| Thorax | 🞎 | | 7100=Status post - Procedure on thorax | |
| **Electrophysiological** |  | 🞎 | | 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 | |
| **Interventional Cardiology Procedures** |  | 🞎 | | 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 | |
| **Palliative Procedures** |  | 🞎 | | 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 | |
| **Mechanical Support** |  | 🞎 | | 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 | |
| **Anesthetic procedures** |  | 🞎 | | 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 | |

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| **Miscellaneous Procedures** |  | 🞎 | 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 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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| **PROCEDURES** | | | |
| Select **ALL** procedures that apply. (↓)  Procedure (930) | | | Circle the **ONE** PRIMARY procedure for this operation.  PrimProc (940) |
| **Septal Defects** | ASD | 🞎 | 10= PFO, Primary closure |
| 🞎 | 20= ASD repair, Primary closure |
| 🞎 | 30= ASD repair, Patch |
| 🞎 | 40= ASD repair, Device |
| 🞎 | 2110= ASD repair, Patch + PAPVC repair |
| 🞎 | 50= ASD, Common atrium (single atrium), Septation |
| 🞎 | 60= ASD creation/enlargement |
| 🞎 | 70= ASD partial closure |
| 🞎 | 80= Atrial septal fenestration |
| 🞎 | 85= Atrial fenestration closure |
| VSD | 🞎 | 100= VSD repair, Primary closure |
| 🞎 | 110= VSD repair, Patch |
| 🞎 | 120= VSD repair, Device |
| 🞎 | 130= VSD, Multiple, Repair |
| 🞎 | 140= VSD creation/enlargement |
| 🞎 | 150= Ventricular septal fenestration |
| AV Canal | 🞎 | 170= AVC (AVSD) repair, Complete (CAVSD) |
| 🞎 | 180= AVC (AVSD) repair, Intermediate (Transitional) |
| 🞎 | 190= AVC (AVSD) repair, Partial (Incomplete) (PAVSD) |
| 🞎 | 2300= Valvuloplasty, Common atrioventricular valve |
| 🞎 | 2250= Valvuloplasty converted to valve replacement in the same operation, Common atrioventricular valve |
| 🞎 | 2230= Valve replacement, Common atrioventricular valve |
| AP Window | 🞎 | 210= AP window repair |
| 🞎 | 220= Pulmonary artery origin from ascending aorta (hemitruncus) repair |
| Truncus Arteriosus | 🞎 | 230= Truncus arteriosus repair |
| 🞎 | 240= Valvuloplasty, Truncal valve |
| 🞎 | 2290= Valvuloplasty converted to valve replacement in the same operation, Truncal valve |
| 🞎 | 250= Valve replacement, Truncal valve |
| 🞎 | 2220= Truncus + Interrupted aortic arch repair (IAA) repair |
| **Pulmonary Venous Anomalies** | Partial Anomalous Pulmonary Venous Connection | 🞎 | 260= PAPVC repair |
| 🞎 | 270= PAPVC, Scimitar, Repair |
| 🞎 | 2120= PAPVC repair, Baffle redirection to left atrium with systemic vein translocation (Warden) (SVC sewn to right atrial appendage) |
| Total Anomalous Pulmonary Venous Connection | 🞎 | 280= TAPVC repair |
| 🞎 | 2200= TAPVC repair + Shunt - systemic-to-pulmonary |
| **Cor Triatriatum** |  | 🞎 | 290= Cor triatriatum repair |
| **Pulmonary Venous Stenosis** |  | 🞎 | 300= Pulmonary venous stenosis repair |
| **Systemic Venous Anomalies** | Anomalous Systemic Venous Connection | 🞎 | 310= Atrial baffle procedure (non-Mustard, non-Senning) |
| 🞎 | 330= Anomalous systemic venous connection repair |
| Systemic venous obstruction | 🞎 | 340= Systemic venous stenosis repair |
| **Right Heart Lesions** | Tetralogy of Fallot | 🞎 | 350= TOF repair, No Ventriculotomy |
| 🞎 | 360= TOF repair, Ventriculotomy, Nontransanular patch |
| 🞎 | 370= TOF repair, Ventriculotomy, Transanular patch |
| 🞎 | 3330= TOF repair, Ventriculotomy, Transanular patch, plus native valve reconstruction |
| 🞎 | 3340= TOF repair, Ventriculotomy, Transanular patch, with monocusp or other surgically fashioned RVOT valve |
| 🞎 | 380= TOF repair, RV-PA conduit |
| 🞎 | 390= TOF - AVC (AVSD) repair |
| 🞎 | 400= TOF - Absent pulmonary valve repair |
| Pulmonary Atresia/VSD | 🞎 | 420= Pulmonary atresia - VSD (including TOF, PA) repair |
| 🞎 | 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]) |
| 🞎 | 2710= Pulmonary atresia - VSD – MAPCA repair, Status post prior complete unifocalization (includes 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]) |
| 🞎 | 2730= Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Complete unifocalization (all usable MAPCA[s] are incorporated) |
| 🞎 | 2740= Unifocalization MAPCA(s), Bilateral pulmonary unifocalization - Incomplete unifocalization (not all usable MAPCA[s] are incorporated) |
| 🞎 | 2750= Unifocalization MAPCA(s), Unilateral pulmonary unifocalization |
| 🞎 | 440= Unifocalization MAPCA(s) |
|  | 🞎 | 450= Occlusion of MAPCA(s) |
| Tricuspid Valve Disease and Ebstein’s Anomaly | 🞎 | 460= Valvuloplasty, Tricuspid (do not use this code if tricuspid valve malfunction is secondary to Ebstein’s anomaly. Use 465= Ebstein’s repair) |
| 🞎 | 2280= Valvuloplasty converted to valve replacement in the same operation, Tricuspid |
| 🞎 | 465= Ebstein's repair |
| 🞎 | 470= Valve replacement, Tricuspid (TVR) |
| 🞎 | 480= Valve closure, Tricuspid (exclusion, univentricular approach) |
| 🞎 | 490= Valve excision, Tricuspid (without replacement) |
| 🞎 | 500= Valve surgery, Other, Tricuspid |
| RVOT Obstruction, IVS Pulmonary Stenosis | 🞎 | 510= RVOT procedure |
| 🞎 | 520= 1 1/2 ventricular repair |
| 🞎 | 530= PA, reconstruction (plasty), Main (trunk) |
| 🞎 | 540= PA, reconstruction (plasty), Branch, Central (within the hilar bifurcation) |
| 🞎 | 550= PA, reconstruction (plasty), Branch, Peripheral (at or beyond the first lobar branch) |
| 🞎 | 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 |
|  | 🞎 | 3370= RV Rehabilitation, Endocardial Resection |
| Pulmonary Valve Disease | 🞎 | 590= Valvuloplasty, Pulmonic |
| 🞎 | 2270= Valvuloplasty converted to valve replacement in the same operation, Pulmonic |
| 🞎 | 600= Valve replacement, Pulmonic (PVR) |
| 🞎 | 630= Valve excision, Pulmonary (without replacement) |
| 🞎 | 640= Valve closure, Semilunar |
| 🞎 | 650= Valve surgery, Other, Pulmonic |
| **Conduit operations** | Conduit operations | 🞎 | 610= Conduit placement, RV to PA |
| 🞎 | 620= Conduit placement, LV to PA |
| 🞎 | 1774= Conduit placement, Ventricle to aorta |
| 🞎 | 1772= Conduit placement, Other |
| Conduit Stenosis / Insufficiency | 🞎 | 580= Conduit reoperation |
| **Left Heart Lesions** | Aortic Valve Disease | 🞎 | 660= Valvuloplasty, Aortic |
| 🞎 | 2240= Valvuloplasty converted to valve replacement in the same operation, Aortic |
| 🞎 | 2310= Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross procedure |
| 🞎 | 2320= Valvuloplasty converted to valve replacement in the same operation, Aortic – with Ross-Konno procedure |
| 🞎 | 670= Valve replacement, Aortic (AVR) |
| 🞎 | 680= Valve replacement, Aortic (AVR), Mechanical |
| 🞎 | 690= Valve replacement, Aortic (AVR), Bioprosthetic |
| 🞎 | 700= Valve replacement, Aortic (AVR), Homograft |
| 🞎 | 715= Aortic root replacement, Bioprosthetic |
| 🞎 | 720= Aortic root replacement, Mechanical |
| 🞎 | 730= Aortic root replacement, Homograft |
| 🞎 | 735= Aortic root replacement, Valve sparing |
| 🞎 | 740= Ross procedure |
| 🞎 | 750= Konno procedure |
| 🞎 | 760= Ross-Konno procedure |
| 🞎 | 770= Other annular enlargement procedure |
| 🞎 | 780= Aortic stenosis, Subvalvar, Repair |
| 🞎 | 2100= Aortic stenosis, Subvalvar, Repair, With myectomy for IHSS |
| 🞎 | 790= Aortic stenosis, Supravalvar, Repair |
| 🞎 | 800=Valve surgery, Other, Aortic |
|  | 🞎 | 3380= Extended Ventricular Septoplasty (modified Konno, VSD creation and patch enlargement of LVOT, sparing aortic valve) for tunnel type sub aortic stenosis |
| Sinus of Valsalva Aneurysm | 🞎 | 810= Sinus of Valsalva, Aneurysm repair |
| LV to Aorta Tunnel | 🞎 | 820= LV to aorta tunnel repair |
| Mitral Valve Disease | 🞎 | 830= Valvuloplasty, Mitral |
| 🞎 | 2260= Valvuloplasty converted to valve replacement in the same operation, Mitral |
| 🞎 | 840= Mitral stenosis, Supravalvar mitral ring repair |
| 🞎 | 850= Valve replacement, Mitral (MVR) |
| 🞎 | 860= Valve surgery, Other, Mitral |
| Hypoplastic Left Heart and Related malformations | 🞎 | 870= Norwood procedure |
| 🞎 | 880= HLHS biventricular repair |
|  | 🞎 | 3390= LV Endocardial Fibroelastosis resection |
|  | 🞎 | 2755= Conduit insertion right ventricle to pulmonary artery + Intraventricular tunnel left ventricle to neoaorta + arch reconstruction (Rastelli and Norwood type arch reconstruction) (Yasui) |
| **Hybrid** |  | 🞎 | 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) |
| 🞎 | 2150= Hybrid approach "Stage 2", Aortopulmonary amalgamation + Superior Cavopulmonary anastomosis(es) + PA Debanding + Without aortic arch repair |
|  | 🞎 | 2760= Hybrid Approach, Transcardiac balloon dilatation |
| 🞎 | 2770= Hybrid Approach, Transcardiac transcatheter device placement |
| **Cardiomyopathy** |  | 🞎 | 890= Transplant, Heart |
| 🞎 | 900= Transplant, Heart and lung |
| 🞎 | 910= Partial left ventriculectomy (LV volume reduction surgery) (Batista) |
| **Pericardial Disease** |  | 🞎 | 920= Pericardial drainage procedure |
| 🞎 | 930= Pericardiectomy |
| 🞎 | 940= Pericardial procedure, Other |
| **Single Ventricle** |  | 🞎 | 950= Fontan, Atrio-pulmonary connection |
| 🞎 | 960= Fontan, Atrio-ventricular connection |
| 🞎 | 970= Fontan, TCPC, Lateral tunnel, Fenestrated |
| 🞎 | 980= Fontan, TCPC, Lateral tunnel, Nonfenestrated |
| 🞎 | 1000= Fontan, TCPC, External conduit, Fenestrated |
| 🞎 | 1010= Fontan, TCPC, External conduit, Nonfenestrated |
| 🞎 | 2780= Fontan, TCPC, Intra/extracardiac conduit, Fenestrated |
| 🞎 | 2790= Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated |
| 🞎 | 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) |
| 🞎 | 1030= Fontan, Other |
| 🞎 | 2340= Fontan + Atrioventricular valvuloplasty |
| 🞎 | 1035= Ventricular septation |
| **Transposition of the Great Arteries** | Congenitally Corrected TGA | 🞎 | 1050=Congenitally corrected TGA repair, Atrial switch and ASO (double switch) |
| 🞎 | 1060= Congenitally corrected TGA repair, Atrial switch and Rastelli |
| 🞎 | 1070= Congenitally corrected TGA repair, VSD closure |
| 🞎 | 1080= Congenitally corrected TGA repair, VSD closure and LV to PA conduit |
| 🞎 | 1090= Congenitally corrected TGA repair, Other |
| Transposition of the Great Arteries | 🞎 | 1110= Arterial switch operation (ASO) |
| 🞎 | 1120= Arterial switch operation (ASO) and VSD repair |
| 🞎 | 1123= Arterial switch procedure + Aortic arch repair |
| 🞎 | 1125= Arterial switch procedure and VSD repair + Aortic arch repair |
| 🞎 | 1130= Senning |
| 🞎 | 1140= Mustard |
| 🞎 | 1145= Atrial baffle procedure, Mustard or Senning revision |
| 🞎 | 1150= Rastelli |
| 🞎 | 1160= REV |
| 🞎 | 2190= Aortic root translocation over left ventricle (Including Nikaidoh procedure) |
| 🞎 | 2210= TGA, Other procedures (Kawashima, LV-PA conduit, other) |
|  |  | 🞎 | 3400= Double root translocation |
| **DORV** |  | 🞎 | 1180= DORV, Intraventricular tunnel repair |
| 🞎 | 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 |
| **DOLV** |  | 🞎 | 1200= DOLV repair |
| **Thoracic Arteries and Veins** | Coarctation of Aorta and Aortic arch hypoplasia | 🞎 | 1210= Coarctation repair, End to end |
| 🞎 | 1220= Coarctation repair, End to end, Extended |
| 🞎 | 3460= Coarctation repair, Descending aorta anastomosed to Ascending aorta |
| 🞎 | 1230= Coarctation repair, Subclavian flap |
| 🞎 | 1240= Coarctation repair, Patch aortoplasty |
| 🞎 | 1250= Coarctation repair, Interposition graft |
| 🞎 | 3470= Coarctation repair, Extra-anatomic Bypass graft |
| 🞎 | 1260= Coarctation repair, Other |
| 🞎 | 1275= Coarctation repair + VSD repair |
| 🞎 | 1280= Aortic arch repair |
| 🞎 | 1285= Aortic arch repair + VSD repair |
| Coronary Artery Anomalies | 🞎 | 1290= Coronary artery fistula ligation |
| 🞎 | 1291= Anomalous origin of coronary artery from pulmonary artery repair |
| 🞎 | 1300= Coronary artery bypass |
| 🞎 | 1305= Anomalous aortic origin of coronary artery (AAOCA) repair |
| 🞎 | 1310= Coronary artery procedure, Other |
| Interrupted Arch | 🞎 | 1320= Interrupted aortic arch repair |
| Patent Ductus Arteriosus | 🞎 | 1330= PDA closure, Surgical |
| 🞎 | 1340= PDA closure, Device |
| Vascular Rings and Slings | 🞎 | 1360= Vascular ring repair |
| 🞎 | 1365= Aortopexy |
| 🞎 | 1370= Pulmonary artery sling repair |
| Aortic Aneurysm | 🞎 | 1380= Aortic aneurysm repair |
| Aortic Dissection | 🞎 | 1390= Aortic dissection repair |
| **Thoracic and Mediastinal Disease** | Lung Disease | 🞎 | 1400= Lung biopsy |
| 🞎 | 1410= Transplant, lung(s) |
| 🞎 | 1420= Lung procedure, Other |
| Tracheal Stenosis | 🞎 | 1440= Tracheal procedure |
| Chest Wall | 🞎 | 2800= Muscle flap, Trunk (i.e. intercostal, pectus, or serratus muscle) |
| 🞎 | 2810= Muscle flap, Trunk (i.e. latissimus dorsi) |
| 🞎 | 2820= Removal, Sternal wire |
| 🞎 | 2830= Rib excision, Complete |
| 🞎 | 2840= Rib excision, Partial |
| 🞎 | 2850= Sternal fracture, Open treatment |
| 🞎 | 2860= Sternal resection, Radical resection of the sternum |
| 🞎 | 2870= Sternal resection, Radical resection of the sternum with mediastinal lymphadenectomy |
| 🞎 | 2880= Tumor of chest wall, Excision including ribs |
| 🞎 | 2890= Tumor of chest wall, Excision including ribs, With reconstruction |
| 🞎 | 2900= Tumor of soft tissue of thorax, Excision of deep subfascial or intramuscular tumor |
| 🞎 | 2910= Tumor of soft tissue of thorax, Excision of subcutaneous tumor |
| 🞎 | 2920= Tumor of soft tissue of thorax, Radical resection |
|  |
| Neck | 🞎 | 2930= Hyoid myotomy and suspension |
| 🞎 | 2940= Muscle flap, Neck |
| 🞎 | 2950= Procedure on neck |
| 🞎 | 2960= Tumor of soft tissue of neck, Excision of deep subfascial or intramuscular tumor |
| 🞎 | 2970= Tumor of soft tissue of neck, Excision of subcutaneous tumor |
| 🞎 | 2980= Tumor of soft tissue of neck, Radical resection |
| Pectus Excavatum, Carinatum | 🞎 | 2990= Pectus bar removal |
| 🞎 | 3000= Pectus bar repositioning |
| 🞎 | 3010= Pectus repair, Minimally invasive repair (Nuss), With thoracoscopy |
| 🞎 | 3020= Pectus repair, Minimally invasive repair (Nuss), Without thoracoscopy |
| 🞎 | 3030= Pectus repair, Open repair |
| Thoracic Outlet | 🞎 | 3040= Division of scalenus anticus, With resection of a cervical rib |
| 🞎 | 3050= Division of scalenus anticus, Without resection of a cervical rib |
| 🞎 | 3060= Rib excision, Excision of a cervical rib |
| 🞎 | 3070= Rib excision, Excision of a cervical rib, With sympathectomy |
| 🞎 | 3080= Rib excision, Excision of first rib |
| 🞎 | 3090= Rib excision, Excision of first rib, With sympathectomy |
| Thorax | 🞎 | 3100= Procedure on thorax |
| **Electrophysiological** |  | 🞎 | 1450= Pacemaker implantation, Permanent |
| 🞎 | 1460= Pacemaker procedure |
| 🞎 | 2350= Explantation of pacing system |
| 🞎 | 1470= ICD (AICD) implantation |
| 🞎 | 1480= ICD (AICD) ([automatic] implantable cardioverter defibrillator) procedure |
| 🞎 | 1490= Arrhythmia surgery - atrial, Surgical Ablation |
| 🞎 | 1500= Arrhythmia surgery - ventricular, Surgical Ablation |
| **Interventional Cardiology Procedures** |  | 🞎 | 2500= Cardiovascular catheterization procedure, Diagnostic |
| 🞎 | 2520= Cardiovascular catheterization procedure, Diagnostic, Angiographic data obtained |
| 🞎 | 2550= Cardiovascular catheterization procedure, Diagnostic, Electrophysiology alteration |
| 🞎 | 2540= Cardiovascular catheterization procedure, Diagnostic, Hemodynamic alteration |
| 🞎 | 2510= Cardiovascular catheterization procedure, Diagnostic, Hemodynamic data obtained |
| 🞎 | 2530= Cardiovascular catheterization procedure, Diagnostic, Transluminal test occlusion |
| 🞎 | 2410= Cardiovascular catheterization procedure, Therapeutic |
| 🞎 | 2670= Cardiovascular catheterization procedure, Therapeutic, Adjunctive therapy |
| 🞎 | 1540= Cardiovascular catheterization procedure, Therapeutic, Balloon dilation |
| 🞎 | 2590= Cardiovascular catheterization procedure, Therapeutic, Balloon valvotomy |
| 🞎 | 1580= Cardiovascular catheterization procedure, Therapeutic, Coil implantation |
| 🞎 | 1560= Cardiovascular catheterization procedure, Therapeutic, Device implantation |
| 🞎 | 3110= Cardiovascular catheterization procedure, Therapeutic, Device implantation attempted |
| 🞎 | 2690= Cardiovascular catheterization procedure, Therapeutic, Electrophysiological ablation |
| 🞎 | 3120= Cardiovascular catheterization procedure, Therapeutic, Intravascular foreign body removal |
| 🞎 | 2640= Cardiovascular catheterization procedure, Therapeutic, Perforation (establishing interchamber and/or intervessel communication) |
| 🞎 | 2580= Cardiovascular catheterization procedure, Therapeutic, Septostomy |
| 🞎 | 1550= Cardiovascular catheterization procedure, Therapeutic, Stent insertion |
| 🞎 | 2630= Cardiovascular catheterization procedure, Therapeutic, Stent re-dilation |
| 🞎 | 2650= Cardiovascular catheterization procedure, Therapeutic, Transcatheter Fontan completion |
| 🞎 | 2660= Cardiovascular catheterization procedure, Therapeutic, Transcatheter implantation of valve |
| **Palliative Procedures** |  | 🞎 | 1590= Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS) |
| 🞎 | 1600= Shunt, Systemic to pulmonary, Central (shunt from aorta) |
| 🞎 | 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) |
| 🞎 | 3230= Shunt, Systemic to pulmonary, Potts – Smith type (descending aorta to pulmonary artery) |
| 🞎 | 1610= Shunt, Systemic to pulmonary, Other |
| 🞎 | 1630= Shunt, Ligation and takedown |
| 🞎 | 2095= Shunt, Reoperation |
| 🞎 | 1640= PA banding (PAB) |
| 🞎 | 1650= PA debanding |
| 🞎 | 3200= PA band adjustment |
| 🞎 | 1660= Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction) |
| 🞎 | 1670= Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn) |
| 🞎 | 1680= Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn) |
| 🞎 | 1690= Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn) |
| 🞎 | 1700= HemiFontan |
| 🞎 | 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 |
| **Mechanical Support** |  | 🞎 | 2360= ECMO cannulation |
| 🞎 | 2370= ECMO decannulation |
| 🞎 | 1910= ECMO procedure |
| 🞎 | 1900= Intraaortic balloon pump (IABP) insertion |
| 🞎 | 1920= Right/left heart assist device procedure |
| 🞎 | 2390= VAD explantation |
| 🞎 | 2380= VAD implantation |
|  |  | 🞎 | 3170= VAD change out |
| **Anesthetic procedures** |  | 🞎 | 2420= Echocardiography procedure, Sedated transesophageal echocardiogram |
| 🞎 | 2430= Echocardiography procedure, Sedated transthoracic echocardiogram |
| 🞎 | 2435= Non-cardiovascular, Non-thoracic procedure on cardiac patient with cardiac anesthesia |
| 🞎 | 2440= Radiology procedure on cardiac patient, Cardiac Computerized Axial Tomography (CT Scan) |
| 🞎 | 2450= Radiology procedure on cardiac patient, Cardiac Magnetic Resonance Imaging (MRI) |
| 🞎 | 2460= Radiology procedure on cardiac patient, Diagnostic radiology |
| 🞎 | 2470= Radiology procedure on cardiac patient, Non-Cardiac Computerized Tomography (CT) on cardiac patient |
| 🞎 | 2480= Radiology procedure on cardiac patient, Non-cardiac Magnetic Resonance Imaging (MRI) on cardiac patient |
| 🞎 | 2490= Radiology procedure on cardiac patient, Therapeutic radiology |

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| **Miscellaneous Procedures** |  | 🞎 | 1720= Aneurysm, Ventricular, Right, Repair |
| 🞎 | 1730= Aneurysm, Ventricular, Left, Repair |
| 🞎 | 1740= Aneurysm, Pulmonary artery, Repair |
| 🞎 | 1760= Cardiac tumor resection |
| 🞎 | 1780= Pulmonary AV fistula repair/occlusion |
| 🞎 | 1790= Ligation, Pulmonary artery |
| 🞎 | 1802= Pulmonary embolectomy, Acute pulmonary embolus |
| 🞎 | 1804= Pulmonary embolectomy, Chronic pulmonary embolus |
| 🞎 | 1810= Pleural drainage procedure |
| 🞎 | 1820= Pleural procedure, Other |
| 🞎 | 1830= Ligation, Thoracic duct |
| 🞎 | 1840= Decortication |
| 🞎 | 1850= Esophageal procedure |
| 🞎 | 1860= Mediastinal procedure |
| 🞎 | 1870= Bronchoscopy |
| 🞎 | 1880= Diaphragm plication |
| 🞎 | 1890= Diaphragm procedure, Other |
| 🞎 | 1930= VATS (video-assisted thoracoscopic surgery) |
| 🞎 | 1940= Minimally invasive procedure |
| 🞎 | 1950= Bypass for noncardiac lesion |
| 🞎 | 1960= Delayed sternal closure |
| 🞎 | 1970= Mediastinal exploration |
| 🞎 | 1980= Sternotomy wound drainage |
| 🞎 | 3180= Intravascular stent removal |
| 🞎 | 3220= Removal of transcatheter delivered device from heart |
| 🞎 | 3210= Removal of transcatheter delivered device from blood vessel |
| 🞎 | 1990= Thoracotomy, Other |
| 🞎 | 2000= Cardiotomy, Other |
| 🞎 | 2010= Cardiac procedure, Other |
| 🞎 | 2020= Thoracic and/or mediastinal procedure, Other |
| 🞎 | 2030= Peripheral vascular procedure, Other |
| 🞎 | 2040= Miscellaneous procedure, Other |
| 🞎 | 2050= Organ procurement |
|  |  | 🞎 | 7777= Other procedure |
| **Operation Canceled or Aborted** | Canceled operation | 🞎 | 7800= Operation canceled before skin incision |
|  | Aborted operation | 🞎 | 7810= Operation aborted after skin incision |

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| **PROCEDURE SPECIFIC FACTORS** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | | **Indicate if any of the following is the Primary procedure** PSFPrimProc (948)  🞎 None of the listed procedures below *(if none, skip to Operative section)* | | | | | | | | | | | | | | | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 VSD repair, Primary closure | | | | | | | | | | | | | | | | 🞎 VSD repair, Patch | | | | | | | | | | | | | | | | 🞎 VSD repair, Device | | | | | | | | | | | | | | | | 🞎 VSD, Multiple, Repair | | | | | | | | | | | | | | | |  | | Apical VSD PSFApicalVSD (949) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Straddling AV valve PSFStradAVVal (950) | | | | | | | | | | | 🞎 Yes 🞎 No | | | *If the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 TOF - AVC (AVSD) repair | | | | | | | | | | | | | | | |  | | | Major coronary crossing RVOT - Coronary anomaly restricting RVOT enlargement PSFMajCorRVOT(951) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | VSD, Multiple, Repair PSFVSDMultRep (952) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Restrictive VSD PSFRestrictVSD (953) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed) PSFHypoBrPulmArt (954) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation) PSFAVRegurg34 (955) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Double orifice left atrioventricular valve PSFDoubOrif (956) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Single papillary muscle in the left ventricle and/or parachute left atrioventricular valve PSFSingPap (957) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Hypoplastic posterior mural leaflet PSFHypoPostMLeaf (958) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Atrioventricular septal defect with ventricular imbalance: dominant left ventricle, hypoplastic right ventricle  PSFASDDomLeft (959) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Atrioventricular septal defect with ventricular imbalance: dominant right ventricle, hypoplastic left ventricle  PSFASDDomRight (960) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Common atrioventricular valve with unbalanced commitment of valve to left ventricle PSFCAVLeft (961) | | | | | | | | | | | 🞎 Yes 🞎 No | |  | | | Common atrioventricular valve with unbalanced commitment of valve to right ventricle PSFCAVRight (962) | | | | | | | | | | | 🞎 Yes 🞎 No | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 TOF repair, No ventriculotomy | | | | | | | | | | | | | | | | 🞎 TOF repair, Ventriculotomy, Nontransanular patch | | | | | | | | | | | | | | | | 🞎 TOF repair, Ventriculotomy, Transanular patch | | | | | | | | | | | | | | | | 🞎 TOF repair, RV-PA conduit | | | | | | | | | | | | | | | | 🞎 TOF - Absent pulmonary valve repair | | | | | | | | | | | | | | | | 🞎 Pulmonary atresia - VSD - MAPCA repair, Complete single stage repair (1-stage that includes bilateral pulmonary unifocalization + VSD closure + RV to PA connection [with or without conduit]) | | | | | | | | | | | | | | | | 🞎 Pulmonary atresia - VSD - MAPCA repair, Status post prior complete unifocalization (includes VSD closure + RV to PA connection [with or without conduit]) | | | | | | | | | | | | | | | | 🞎 Pulmonary atresia - VSD - MAPCA repair, Status post prior incomplete unifocalizarion (includes completion of pulmonary  unifocalization + VSD closure + RV to PA connection [with or without conduit]) | | | | | | | | | | | | | | | | 🞎 Pulmonary atresia - VSD (including TOF, PA) repair | | | | | | | | | | | | | | | |  | | Major coronary crossing RVOT - Coronary anomaly restricting RVOT enlargement PSFMajCorRVOT(951) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | VSD, Multiple, Repair PSFVSDMultRep (952) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Restrictive VSD PSFRestrictVSD (953) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed) PSFHypoBrPulmArt (954) | | | | | | | | | | | 🞎 Yes 🞎 No | | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 AVC (AVSD) repair, Complete (CAVSD) | | | | | | | | | | | | |  | | |  | | AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation) PSFAVRegurg34 (955) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Double orifice left atrioventricular valve PSFDoubOrif (956) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Single papillary muscle in the left ventricle and/or parachute left atrioventricular valve PSFSingPap (957) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Hypoplastic posterior mural leaflet PSFHypoPostMLeaf (958) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Atrioventricular septal defect with ventricular imbalance: dominant left ventricle and hypoplastic right ventricle PSFASDomLeft (959) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Atrioventricular septal defect with ventricular imbalance: dominant right ventricle and hypoplastic left ventricle PSFASDDomRight (960) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Common atrioventricular valve with unbalanced commitment of valve to left ventricle PSFCAVLeft (961) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Common atrioventricular valve with unbalanced commitment of valve to right ventricle PSFCAVRight (962) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | |  | | | | | | | | | | |  | | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn) | | | | | | | | | | | | | | | | 🞎 Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn) | | | | | | | | | | | | | | | | 🞎 Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn) | | | | | | | | | | | | | | | | 🞎 HemiFontan | | | | | | | | | | | | | | | | 🞎 Superior Cavopulmonary anastomosis(es) (Glenn or HemiFontan) + Atrioventricular valvuloplasty | | | | | | | | | | | | | | | | 🞎 Superior Cavopulmonary anastomosis(es) + PA reconstruction | | | | | | | | | | | | | | | | 🞎 Kawashima operation (superior cavopulmonary connection in setting of interrupted IVC with azygous continuation) | | | | | | | | | | | | | | | |  | | AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation) PSFAVRegurg34 (955) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Moderate to severe systemic ventricular dysfunction PSFModSevSVD (963) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed) PSFHypoBrPulmArt (954) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Systemic ventricular outflow tract obstruction (subaortic obstruction) PSFSysVentObs (964) | | | | | | | | | | | 🞎 Yes 🞎 No | | |  | | Ventricular dominance PSFVentDom(965): | | | | 🞎 Left Ventricular dominance | | | |  | | |  | | |  | |  | | | | 🞎 Right Ventricular dominance | | | |  | | |  | | |  | |  | | | | 🞎 Balanced | | | |  | | |  | | |  | |  | | | | 🞎 Indeterminate Ventricular dominance | | | |  | | |  | | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Fontan, Atrio-pulmonary connection | | | | | | | | | | | | | | | | 🞎 Fontan, Atrio-ventricular connection | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, Lateral tunnel, Fenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, Lateral tunnel, Nonfenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, External conduit, Fenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, External conduit, Nonfenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, Intra/extracardiac conduit, Fenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, Intra/extracardiac conduit, Nonfenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Fenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Nonfenestrated | | | | | | | | | | | | | | | | 🞎 Fontan, Other | | | | | | | | | | | | | | | | 🞎 Fontan + Atrioventricular valvuloplasty | | | | | | | | | | | | | | | | 🞎 Fontan revision or conversion (Re-do Fontan) | | | | | | | | | | | | | | | |  | | | | | AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation) PSFAVRegurg34 (955) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Moderate to severe systemic ventricular dysfunction PSFModSevSVD (963) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Hypoplastic branch pulmonary arteries (diminished pulmonary vascular bed) PSFHypoBrPulmArt (954) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Systemic ventricular outflow tract obstruction (subaortic obstruction) PSFSysVentObs (964) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Ventricular dominance PSFVentDom(965): | | 🞎 Left Ventricular dominance | | | | | |  | | |  | | | | |  | | 🞎 Right Ventricular dominance | | | | | |  | | |  | | | | |  | | 🞎 Balanced | | | | | |  | | |  | | | | |  | | 🞎 Indeterminate Ventricular dominance | | | | | |  | | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Arterial switch operation (ASO) | | | | | | | | | | | | | | | | 🞎 Arterial switch procedure + Aortic arch repair | | | | | | | | | | | | | | | |  | | | | | Posterior coronary loop: circumflex coming off the RCA PSFPostLoopCirc (970) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Posterior coronary loop: left trunk coming off the RCA PSFPostLoopLeftTrunc (971) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Double coronary loops: inverted origin of right & left coronary arteries PSFDoubleLoops (972) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Single coronary ostium PSFSingOst (973) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Intramural coronary PSFIntramuralCor (974) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Large infundibular coronary artery from LAD PSFLgInfundArt (975) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Malaligned commissures PSFMalComm (976) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Take down of a commissure PSFTakeDownComm (977) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Aorto-pulmonary diameter mismatch PSFAortoPulMis (978) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Side by side vessels PSFSidebySide (979) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Posterior native aorta PSFPostNatAorta (980) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Subaortic obstruction/ conal septum malalignment PSFSubAObs (981) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Bicuspid native aortic valve (Bicuspid neopulmonary valve) PSFBicusNatAortic (982) | | | | | | | | 🞎 Yes 🞎 No | | |  | | | | | Bicuspid native pulmonary valve (Bicuspid neoaortic valve) PSFBicusNatPulm (983) | | | | | | | | 🞎 Yes 🞎 No | | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Arterial switch operation (ASO) and VSD repair | | | | | | | | | | | | | | | | 🞎 Arterial switch procedure and VSD repair + Aortic arch repair | | | | | | | | | | | | | | | |  | | | | | Posterior coronary loop: circumflex coming off the RCA PSFPostLoopCirc (970) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Posterior coronary loop: left trunk coming off the RCA PSFPostLoopLeftTrunc (971) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Double coronary loops: inverted origin of right & left coronary arteries PSFDoubleLoops (972) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Single coronary ostium PSFSingOst (973) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Intramural coronary PSFIntramuralCor (974) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Large infundibular coronary artery from LAD PSFLgInfundArt (975) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Malaligned commissures PSFMalComm (976) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Take down of a commissure PSFTakeDownComm (977) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Aorto-pulmonary diameter mismatch PSFAortoPulMis (978) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Side by side vessels PSFSidebySide (979) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Posterior native aorta PSFPostNatAorta (980) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Subaortic obstruction/ conal septum malalignment PSFSubAObs (981) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Bicuspid native aortic valve (Bicuspid neopulmonary valve) PSFBicusNatAortic (982) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Bicuspid native pulmonary valve (Bicuspid neoaortic valve) PSFBicusNatPulm (983) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Apical VSD PSFApicalVSD (949) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Straddling AV valve PSFStradAVVal (950) | | | | | | | | | 🞎 Yes 🞎 No | | *If one of the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Truncus arteriosus repair | | | | | | | | | | | | | | | | 🞎 Truncus + Interrupted aortic arch repair (IAA) repair | | | | | | | | | | | | | | | |  | | | | | Truncus type 3 ( PA Branches from PDA or descending aorta) PSFTruncType3 (984) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Abnormal coronary PSFAbnormalCor (985) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Truncal valve regurgitation (moderate to severe) PSFTruncValRegurg (986) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Truncal valve stenosis (moderate to severe) PSFTruncValSten (987) | | | | | | | | | 🞎 Yes 🞎 No | | *If the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Norwood procedure | | | | | | | | | | | | | | | | 🞎 Hybrid Approach "Stage 1", Application of RPA & LPA bands | | | | | | | | | | | | | | | | 🞎 Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) | | | | | | | | | | | | | | | | 🞎 Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) + application of RPA & LPA bands | | | | | | | | | | | | | | | |  | | | | | Source of pulmonary blood flow: Shunt - systemic artery-to-pulmonary artery PSFSrcPulFloShuntSys (988) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Source of pulmonary blood flow: Shunt - ventricle-to-pulmonary artery PSFSrcPulFloShuntVent (989) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Source of pulmonary blood flow: Superior caval vein-to-pulmonary artery PSFSrcPulFloSuper (990) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Source of Pulmonary Blood Flow: Banded central PAs  PSFSrcPulFloBandPA (991) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Ascending aorta < 2 mm PSFAscAortaLT2 (992) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Aortic atresia PSFAortAtresia (993) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Aortic stenosis PSFAortSten (994) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Mitral atresia PSFMitralAtresia (995) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Mitral stenosis PSFMitralSten (996) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Sinusoids PSFSinusoids (997) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Intact atrial septum PSFIntactAtrSep (998) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Obstructed pulmonary venous return with severely restrictive ASD PSFObsPulVenRet (999) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | AV Valve regurgitation grade 3 and 4 (Severe AV Valve regurgitation) PSFAVRegurg34 (955) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Aberrant right subclavian artery PSFAberrantRtSubclav (1000) | | | | | | | | | 🞎 Yes 🞎 No | |  | | | | | Ventricular dominance PSFVentDom(965): | | | 🞎 Left Ventricular dominance | | | | | |  | |  | | | | |  | | | 🞎 Right Ventricular dominance | | | | | |  | |  | | | | |  | | | 🞎 Balanced | | | | | |  | |  | | | | |  | | | 🞎 Indeterminate Ventricular dominance | | | | | |  | | *If the following is the Primary procedure, specify whether the procedure specific factors apply* | | | | | | | | | | | | | | | | 🞎 Ebstein's repair | | | | | | | | | | | | | | | |  | Tricuspid Valve Repair PSFTVRep(1001) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | *If Yes→* | | | Monocusp PSFTVRepMono(1002) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Bileaflet repair PSFTVRepBiLeaf(1004) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Cone repair (360° leaflet approximation) PSFTVRepCone(1006) | | | | | | | |  | | 🞎 Yes 🞎 No | |  | Sebening stitch (anterior RV papillary muscle to ventricular septum) PSFSebening (1008) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | Annular reduction PSFAnnRed (1009) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | *If Yes→* | | | Plication PSFAnnRedPlic (1010) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Partial ring (c-shaped anterior & inferior annulus) PSFAnnRedPartial(1012) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Eccentric ring (inferior annulus) PSFAnnRedEccent (1014) | | | | | | | |  | | 🞎 Yes 🞎 No | |  | Atrialized RV plication PSFAtrialRVPlic (1016) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | Atrialized RV resection PSFAtrialRVRes (1018) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | ASD/PFO closure PSFASDPFO (1020) | | | | | | | |  | | 🞎 Yes 🞎 No 🞎 Subtotal | | | | |  | Reduction atrioplasty PSFRedAtrio (1022) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | Arrhythmia surgery PSFArrSurg (1023) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | |  | *If Yes→* | | | Cavotricuspid isthmus ablation PSFArrSurgCavo (1024) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Modified right atrial maze PSFArrSurgModMaze (1026) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Left atrial Cox maze PSFArrSurgCoxMaze (1028) | | | | | | | |  | | 🞎 Yes 🞎 No | |  |  | | | Pulmonary vein isolation PSFArrSurgPulmIso (1030) | | | | | | | |  | | 🞎 Yes 🞎 No | |  | Bidirectional cavopulmonary anastomosis PSFBiCavoAnast (1032) | | | | | | | | | | |  | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **OPERATIVE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Procedure Location:  ProcLoc (1054) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Cardiac OR | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 ICU | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 SICU | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 General OR | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 CVICU | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Radiology Suite | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 Hybrid Suite | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 NICU | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Procedure Room | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 Cath lab | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 PICU | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Status:Status (1055) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Elective | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Urgent | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Emergent | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Salvage | |
| Operation Type:  OpType (1056) | | | | | | | | | | | | | | | 🞎 CPBCardiovascular | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 No CPB Cardiovascular | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 CPB Non-Cardiovascular | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 ECMO | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Thoracic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Interventional Cardiology | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 VAD with CPB | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 VAD without CPB | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 NonCardiac/NonThoracic Procedure w/ Anesthesia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Near InfraredSpectroscopy (NIRS) Cerebral Metrics Used:NIRSCerUsed (1057) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
| *If NIRSCerUsed is Yes→* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NIRS Cerebral Metrics Used Preoperatively NIRSCerPre (1058) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NIRS Cerebral Metrics Used Intraoperatively NIRSCerIntra (1059) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NIRS Cerebral Metrics Used Postoperatively NIRSCerPost (1060) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
| Near InfraredSpectroscopy (NIRS) Somatic Metrics Used:NIRSSomUsed(1061) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
| *If NIRSSomUsed is Yes→* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NIRS Somatic Metrics Used Preoperatively NIRSSomPre (1062) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NIRS Somatic Metrics Used Intraoperatively NIRSSomIntra (1063) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | NIRS Somatic Metrics Used Postoperatively NIRSSomPost (1064) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| OR Entry Time: *(00:00 – 23:59)* \_\_ \_\_: \_\_ \_\_ OREntryT (1065) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Skin Incision Start Time: *(00:00 – 23:59)* \_\_ \_\_: \_\_ \_\_ SIStartT (1066) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Endotracheal Intubation Performed: 🞎 Yes 🞎 No*(If Yes ↓)* Intubate (1067) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Intubation Date/Time: IntubateDT (1068)  *(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Initial Extubation Date/Time: ExtubateDT (1069)  *(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Extubated in OR: ExtubInOR (1070) 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | Re-Intubated After Initial Postoperative Extubation: 🞎 Yes 🞎 No*(If Yes ↓)* ReIntubate (1071) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | | | | | | | | | | | | | Final Extubation Date/Time: *(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ FinExtubDT (1072) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Incision Type: | | | | | | | | | | | | | | | Sternotomy IncisTyStern (1073) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | Partial Sternotomy IncisTyPartStern (1074) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No *(if yes → )* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Location: 🞎 upper 🞎 lower PartSternLocat (1075) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | Clamshell Thoracotomy IncisTyClam (1076) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | Thoracotomy IncisTyThor (1077) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No *(if yes → )* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Location: 🞎 left 🞎 right ThoraLocat (1078) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | Video-Assisted Thoracoscopy (VATS) IncisTyVATS (1079) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No *(if yes → )* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Location: 🞎 left 🞎 right VATSLocat (1080) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Time of Skin Closure: *(00:00 – 23:59)* \_ \_:\_ \_  SIStopT (1081) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | OR Exit Time: *(00:00 – 23:59)* \_ \_:\_ \_  ORExitT (1082) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Extended Through Midnight: 🞎 Yes 🞎 No MultiDay (1083) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ***If Op type is: “NonCardiac/NonThoracic Procedure w/Anesthesia” or “Interventional Cardiology” → Skip to Complications section.*** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surgeon:  Surgeon (1084) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Surgeon NPI:  SurgNPI (1085) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Taxpayer Identification Number:  TIN (1086) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reoperation Within This Admission: ReOpInAdm (1087) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes – Planned reoperation 🞎 Yes – Unplanned reoperation 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Number of Prior Cardiothoracic Operations:  PrvCtOpN (1090) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Number of Prior CPB Cardiothoracic Operations:  PrvOCtOpN (1100) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If operation type is No CPB Cardiovascular→)* Cross Clamp Time – No CPB: *(minutes):* XClampTmNC (1130) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If operation type is CPB Cardiovascular or VAD w/ CPB or CPB NonCardiovascular↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | CPB Blood Prime*:* | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No *(If Yes →)* CPBPrimed (1140) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | PRBC \_\_\_\_\_\_\_ ml (0 – 5000) PRBC (1141) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | FFP \_\_\_\_\_\_\_\_\_\_ ml (0 – 5000) FFP (1142) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Whole Blood \_\_\_\_\_\_\_\_\_\_\_ ml (0 – 5000) WholeBlood (1143) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | CPB Time *(min):*\_\_\_\_\_  CPBTm (1150) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cross Clamp Time - CPB:*(min):\_\_\_\_\_\_\_*  XClampTm (1160) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Circulatory Arrest Time *(min):\_\_\_\_\_\_* DHCATm (1170) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Induced Fibrillation: 🞎 Yes 🞎 No InducedFib (1175) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* Time: \_\_\_\_\_\_\_\_\_\_ (*minutes*) InducedFibTmMin (1176)  \_\_\_\_\_\_\_\_\_\_ (*seconds*) InducedFibTmSec (1177) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Patient Temperature Monitoring Site : | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | (If Yes, Lowest Core Temperature recorded at site): | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Bladder: | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No TempSiteBla (1180) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | | | \_\_\_\_\_ *°C* LowCTmpBla (1190) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Esophageal: | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No TempSiteEso (1200) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | | | \_\_\_\_\_ *°C* LowCTmpEso (1210) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Nasopharyngeal: | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No TempSiteNas (1220) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | | | \_\_\_\_\_ *°C* LowCTmpNas (1230) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Rectal: | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No TempSiteRec (1240) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | | | \_\_\_\_\_ *°C* LowCTmpRec (1250) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Tympanic: | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No TempSiteTym (1260) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | | | \_\_\_\_\_ *°C* LowCTmpTym (1270) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Other: | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No TempSiteOth (1280) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | | | \_\_\_\_\_ *°C* LowCTmpOth (1290) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | Cooling time (prior to initiation of hypothermic circulatory arrest or selective cerebral perfusion) \_\_\_\_\_\_\_\_\_\_*(minutes)* CoolTimePrior (1301) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Rewarming Time: RewarmTime (1310) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_** *(minutes)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | Cerebral Perfusion Utilized: CPerfUtil (1320) 🞎 Yes 🞎 No *(If Yes ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Cerebral Perfusion Time: \_\_\_\_\_\_\_\_ *(minutes)* CPerfTime (1330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Cerebral Perfusion Cannulation Site: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Innominate Artery CPerfCanInn (1340) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | Right Subclavian CPerfCanRSub(1350) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Right Axillary Artery CPerfCanRAx (1360) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | Right Carotid Artery CPerfCanRCar (1370) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No |
|  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Left Carotid Artery CPerfCanLCar (1380) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | Superior Vena Cava CPerfCanSVC (1390) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No |
|  | | | | | | Cerebral Perfusion Periods: CPerfPer (1400) \_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Cerebral Perfusion Flow Rate: CPerfFlow (1410) \_\_\_\_\_\_\_\_ *(mL/kg) per minute* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Cerebral Perfusion Temperature: CPerfTemp (1420) \_\_\_\_\_\_\_ *°C* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | Arterial Blood Gas Management During Cooling:  ABldGasMgt (1430) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Alpha STAT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 pH STAT | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 pHSTAT cooling/Alpha STAT rewarming | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other Combination | | | | | | | |
|  | | Hematocrit Prior to Circulatory Arrest or Cerebral Perfusion: HCTPriCircA (1440) \_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Cardioplegia Delivery: CplegiaDeliv (1450) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 None | | | | | | | | | | | | | | | | | | | | | | 🞎 Antegrade | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Retrograde | | | | | | | | | | | | | | | | | | | 🞎 Both | |
|  | | *If CPlegiaDeliv is Antegrade, Retrograde or Both ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | Cardioplegia Type:  CPlegiaType (1460) | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Blood | | | | | | | | | | | | | | 🞎 Crystalloid | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Both | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | Cardioplegia Solution:  CPlegiaSolution (1470) | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 del Nido | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Celsior | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Custodiol / Bretschneider (HTK) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Roe’s Solution | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Buckberg | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Microplegia with Potassium | | | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 University of Wisconsin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | Cardioplegia Number of Doses:CPlegiaDose(1490) **\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Hematocrit - First after initiating CPB: HCTFirst (1640) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Hematocrit - Last Measured During CPB: HCTLast (1650) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Hematocrit – Post CPB, Post Protamine: HCTPost (1660) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | |  | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | Ultrafiltration Performed?  UltrafilPerform (1671) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | *(If Yes →)* When: UltraFilPerfWhen (1672) | | | | | | | | | | | 🞎 During CPB, CUF/ZBUF/DUF | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 After CPB, MUF | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 During and after CPB | | | | | | | | | | | | | | | | | |
| Pulmonary Vascular Resistance Measured (within 6 months): 🞎 Yes 🞎 No PVRMeas (1770) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes and WeightKg ≥40 →)*PVR: \_\_\_\_\_ *(Wood units)* PVR (1780) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes and WeightKg <40 →)*PVR Index: \_\_\_\_\_ *(Wood units/m2)* PVRI (1790) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Anticoagulant Used? AnticoagUsed (1792) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No 🞎 Unknown | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | | | | | | | | | | | | | Unfractionated Heparin AnticoagUnfHep (1793) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Argatroban AnticoagArg (1794) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | |
|  | | | | | | | | | | | | | | | | Bivaluridin AnticoagBival (1795) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Other AnticoagOth (1796) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | |
| **Blood and Blood Related Products (Including CPB Blood Prime Units)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Blood Type: 🞎 A 🞎 B 🞎 O 🞎 AB 🞎 Unknown  BloodType (1850) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Rh: 🞎 Positive 🞎 Negative 🞎 Unknown Rh (1860) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Autologous Transfusion: 🞎 Yes 🞎 No AutologousTrans (2461) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cell Saver/Cell Salvage \_\_\_\_\_\_\_\_\_\_\_\_mL  CellSavSalML (2463) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Transfusion of Non-Autologous Blood Products During or After Procedure: 🞎 Yes 🞎 No 🞎 Patient/family refused TransfusBldProdAny (2825) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | Transfusion of Non-Autologous Blood Products Initiated Before Leaving OR: 🞎 Yes 🞎 No  TransfusBldProdBefore (2830) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | Packed Red Blood Cells  BldProdPRBCMLBef (2832) | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | Fresh Frozen Plasma BldProdFFPMLBef (2833) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | |
|  | | | |  | | | | | | | | | Fresh Plasma BldProdFreshPMLBef (2834) | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | |
|  | | | |  | | | | | | | | | Platelets BldProdPlatMLBef (2836) | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | Cryoprecipitate BldProdCryoMLBef (2837) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | |
|  | | | |  | | | | | | | | | Fresh Whole Blood BldProdFreshWBMLBef (2838) | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | Whole Blood BldProdWBMLBef (2839) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | |
|  | | | | Transfusion of Blood Products within 24 hours post procedure: 🞎 Yes 🞎 No TransfusBldProdLT24 (2840) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | Packed Red Blood Cells BldProdPRBCMLLT24 (2841) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | Fresh Frozen Plasma BldProdFFPMLLT24 (2842) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | |
|  | | | | Fresh Plasma BldProdFreshPMLLT24 (2843) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
|  | | | | Platelets BldProdPlatMLLT24 (2845) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | Cryoprecipitate BldProdCryoMLLT24 (2846) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | |
|  | | | | Fresh Whole Blood BldProdFreshWBMLLT24 (2847) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | Whole Blood BldProdWBMLLT24 (2848) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | |
|  | | | | Transfusion of Blood Products after 24 hours post procedure: 🞎 Yes 🞎 No TransfusBldProdGT24 (2849) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | Packed Red Blood Cells BldProdPRBCMLGT24 (2850) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | Fresh Frozen Plasma BldProdFFPMLGT24 (2851) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | |
|  | | | |  | | | | | | | | | Fresh Plasma BldProdFreshPMLGT24 (2852) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | |
|  | | | | Platelets BldProdPlatMLGT24 (2854) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cryoprecipitate BldProdCryoMLGT24 (2855) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | |
|  | | | | Fresh Whole Blood BldProdFreshWBMLGT24 (2856) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | Whole Blood BldProdWBMLGT24 (2857) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *mL*  *(0-10000)* | | | |
|  | | | | Directed Donor Units: 🞎 Yes 🞎 No DirDonorUnits (2858) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Antifibrinolytics Used Intraoperatively: 🞎 Yes 🞎 No AntifibUsage (2859) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | Epsilon Amino-Caproic Acid (Amicar, EACA) Used: 🞎 Yes 🞎 No AntifibEpUse (2860) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | | Epsilon Amino-Caproic Acid (Amicar, EACA) Load  AntifibEpLoadMG (2861) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 30,000 mg)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | Epsilon Amino-Caproic Acid (Amicar, EACA) Pump Prime  AntifibEpPrimeMG (2862 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 30,000 mg)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | *(If AntifinEpPrime >0)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Was Epsilon Amino-Caproic Acid (Amicar, EACA) dosed as mg/ml of Pump Prime: 🞎 Yes 🞎 No 🞎 Unknown AntifibEpPrimeDose (2863) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | Epsilon Amino-Caproic Acid (Amicar, EACA) Infusion rate mg/kg/hr::  AntifibEpInfRate (2864) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0-200)* | | | | | | | | | | | | | | | |
|  | | | | Tranexamic Acid Used: 🞎 Yes 🞎 No AntifibTranexUse (2865) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | Tranexamic Acid Load  AntifibTranexLoadMG (2866) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 15,000 mg)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | Tranexamic Acid Pump Prime  AntifibTranexPrimeMG (2867) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 15,000 mg)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | *(If AntifibTranexPrime >0)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Was Tranexamic Acid dosed as mg/ml of Pump Prime:  🞎 Yes 🞎 No 🞎 Unknown AntifibTranexPrimeDose (2868) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | Tranexamic Acid Infusion rate mg/kg/hr:  AntifibTranexInfRate (2869) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 1. *- 25.0)* | | | | | | | | | | | | | | | |
|  | | | | Trasylol (Aprotinin) Used: 🞎 Yes 🞎 No AntifibTrasylUse (2870) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | Trasylol (Aprotinin) Load  AntifibTrasylLoadCC (2871) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 400 cc)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | Trasylol (Aprotinin) Pump Prime  AntifibTrasylPrimeCC (2872) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 400 cc)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | Trasylol (Aprotinin) Infusion rate cc/kg/hr:  AntifibTrasylInfRate (2873) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0.0 – 10.0)* | | | | | | | | | | | | | | | |
| Procoagulent Used Intraoperatively: 🞎 Yes 🞎 No ProcoagUsage (2874) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | Factor VIIa (Novoseven) Usage: 🞎 Yes 🞎 No ProcoagFactorVIIa (2875) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | | | | | Factor VIIa (Novoseven) Dose 1: ProcoagFactorVIIa1MCG (2876) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 - 20,000 mcg)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | Factor VIIa (Novoseven) Dose 2: ProcoagFactorVIIa2MCG (2877) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 20,000 mcg)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | *(If Dose 2 > 0 →)* Factor VIIa (Novoseven) Dose 3: ProcoagFactorVIIa3MCG (2878) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 20,000 mcg)* | | | | | | | | | | | | | | | |
|  | | | | Prothrombin Complex Concentrate-4 (PCC-4, KCentra) Usage: 🞎 Yes 🞎 No ProComplxCon4 (2879) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | | | Prothrombin Complex Concentrate-4 (PCC-4, KCentra) Dose 1: ProCmplxCon4Ds1UN (2880) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 - 10,000 units)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | Prothrombin Complex Concentrate-4 (PCC-4, KCentra) Dose 2: ProCmplxCon4Ds2UN (2881) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 10,000 units)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | *(If Dose 2 > 0 →)* Prothrombin Complex Concentrate-4 (PCC-4, KCentra) Dose 3: ProCmplxCon4Ds3UN (2882) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 10,000 units)* | | | | | | | | | | | | | | | |
|  | | | | Prothrombin Complex Concentrate-4 with Factor VIIa (FEIBA) Usage: 🞎 Yes 🞎 No ProComplxCon4W7a (2883) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | | | Prothrombin Complex Concentrate-4 with Factor VIIa (FEIBA) Dose 1: ProCmplxCon4W7a1UN (2884) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 - 20,000 units)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | Prothrombin Complex Concentrate-4 with Factor VIIa (FEIBA) Dose 2: ProCmplxCon4W7a2UN (2885) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 20, 000 units)* | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | *(If Dose 2 > 0 →)* Prothrombin Complex Concentrate-4 with Factor VIIa (FEIBA) Dose 3: ProCmplxCon4W7a3UN (2886) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 20,000 units)* | | | | | | | | | | | | | | | |
|  | | | | Prothrombin Complex Concentrate-3 (PCC-3, ProfilNine-SD) Usage: 🞎 Yes 🞎 No ProComplxCon3 (2887) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Yes →)* | | | | | | | | | | | | | | | Prothrombin Complex Concentrate-3 (PCC-3, ProfilNine-SD) Dose 1: ProCmplxCon3Ds1UN (2888) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 - 2000 units)* | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | Prothrombin Complex Concentrate-3 (PCC-3, ProfilNine-SD) Dose 2: ProCmplxCon3Ds2UN (2889) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 2000 units)* | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | *(If Dose 2 > 0 →)* Prothrombin Complex Concentrate-3 (PCC-3, ProfilNine-SD) Dose 3: ProCmplxCon3Ds3UN (2890) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 2000 units)* | | | | | | | | |
|  | | | | Octaplex Prothrombin Concentrate Usage: 🞎 Yes 🞎 No Octaplex (2891) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | *(If Yes →)* | | | | | | | | | | | | | | | Octaplex Prothrombin Concentrate – units Dose 1: OctaplexDs1 (2892) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 – 6000 units)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | | Octaplex Prothrombin Concentrate – units Dose 2: OctaplexDs2 (2893) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 6000 units)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | | | | | | | *(If Dose 2 > 0 →)* Octaplex Prothrombin Concentrate – units Dose 3: OctaplexDs3 (2894) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 6000 units)* | | | | | | | | | | |
|  | | | | | Fibrinogen Concentrate Usage: 🞎 Yes 🞎 No ProcoagFibrin (2895) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | *(If Yes →)* | | | | | | | | | Fibrinogen Concentrate mg – Dose 1 ProcoagFibrin1MG (2896) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 - 10,000 mg)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | Fibrinogen Concentrate mg – Dose 2 ProcoagFibrin2MG (2897) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 10,000 mg)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | *(If Dose 2 > 0 →)* Fibrinogen Concentrate mg – Dose 3 ProcoagFibrin3MG (2898) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 10,000 mg)* | | | | | | | | | | |
|  | | | | | Antithrombin 3 Concentrate (AT3) Usage: 🞎 Yes 🞎 No ProcoagAntithrom (2899) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | *(If Yes →)* | | | | | | | | | Antithrombin 3 Concentrate (AT3) units Dose 1: ProcoagAntithrom1 (2900) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 – 5000 units)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | Antithrombin 3 Concentrate (AT3) units Dose 2: ProcoagAntithrom2 (2901) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 5000 units)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | *(If Dose 2 > 0 →)* Antithrombin 3 Concentrate (AT3) units Dose 3 ProcoagAntithrom3 (2902) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 5000 units)* | | | | | | | | | | |
|  | | | | | Desmopressin (DDAVP) Usage: 🞎 Yes 🞎 No ProcoagDesmo (2903) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | *(If Yes →)* | | | | | | | | | Desmopressin (DDAVP) - Dose 1: ProcoagDesmo1MCG (2904) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 - 1,000 mcg)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | Desmopressin (DDAVP) - Dose 2: ProcoagDesmo2MCG (2905) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 1,000 mcg)* | | | | | | | | | | |
|  | | | | |  | | | | | | | | | *(If Dose 2 > 0 →)* Desmopressin (DDAVP) - Dose 3: ProcoagDesmo3MCG (2906) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 - 1,000 mcg)* | | | | | | | | | | |
|  | | | | | Humate P usage: 🞎 Yes 🞎 No ProcoagHumateP (2907) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | *(If Yes →)* | | | | | | | | | Humate P Dose 1: ProcoagHumateP1UN (2908) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(1 – 10,000 units)* | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | Humate P Dose 2:ProcoagHumateP2UN (2909) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 10,000 units)* | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | *(If Dose 2 > 0 →)* Humate P Dose3:ProcoagHumateP3UN (2910) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(0 – 10,000 units)* | | | | | | | | | | | | |
| Point of Care Coagulation Testing Used Intraoperatively: 🞎 Yes 🞎 No POCCoagTstUtil (2911) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | *(If Yes →)* | | | | | | | | | Thromboelastography (TEG): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No POCCoagTstTEG (2912) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | ROTEM: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No POCCoagTstROTEM (2913) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | Sonoclot: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No POCCoagTstSon (2914) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | Heparin Concentration (Hepcon, HMS): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No POCCoagTstHep (2915) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | INR/PT/aPPP (iStat or equivalent): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No POCCoagTstINR (2916) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | |  | | | | | | | | | ACT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No POCCoagTstACT (2917) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **CABG PROCEDURES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *If Op Type is CBP or No CBP Cardiovascular ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Coronary Artery Bypass (CAB): OpCAB (2927) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | *(If Yes ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Number of Distal Arterial Anast:DistArt (2928) **\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Number of Distal Vein Anast: **\_\_\_\_\_\_\_\_\_\_**  DistVein (2929) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | Internal Mammary Artery (IMA) Used: IMAArtUs (2930) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Left IMA | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Right IMA | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Both IMAs | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 No IMA | | | | | | | | | | | | | | | | | | |
| **VALVE PROCEDURES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *If Op Type is CBP or No CBP Cardiovascular ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Valve Operation: OpValve (2940) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | *(If Yes ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | Valve Device Explanted and/or Implanted:  ValExImp (3140) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 No | | | | | | | | | | | | | 🞎 Yes, Explanted | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes, Implanted | | | | | | | | | | | | | | | | | | | 🞎 Yes, Explanted and Implanted | | | | | | | | | | | | | | | | | | | |
| *If Yes, Explanted orYes, explanted and Implanted, complete one column per explant ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **EXPLANT(S)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | **Valve Explant #1** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2nd Explant: 🞎 Yes 🞎 No**  ValEx2 (3160) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **3rd Explant: 🞎 Yes 🞎 No**  ValEx3 (3180) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **4th Explant: 🞎 Yes 🞎 No**  ValEx4 (3200) | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Yes ↓ (if no skip to implant)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Yes ↓ (if no skip to implant)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Yes ↓ (if no skip to implant)* | | | | | | | | | | | | | | | | |
|  | | Valve Explant Type #1  ValExType1 (3150) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Explant Type #2  ValExType2 (3170) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Explant Type #3  ValExType3 (3190) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Explant Type #4  ValExType4 (3210) | | | | | | | | | | | | | | | | |
|  | | 🞎 Mechanical | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mechanical | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mechanical | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mechanical | | | | | | | | | | | | | | | | |
|  | | 🞎 Bioprosthetic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Bioprosthetic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Bioprosthetic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Bioprosthetic | | | | | | | | | | | | | | | | |
|  | | 🞎 Homograft/Allograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Homograft/Allograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Homograft/Allograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Homograft/Allograft | | | | | | | | | | | | | | | | |
|  | | 🞎 Autograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Autograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Autograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Autograft | | | | | | | | | | | | | | | | |
|  | | 🞎 Annuloplasty Band/Ring | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Annuloplasty Band/Ring | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Annuloplasty Band/Ring | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Annuloplasty Band/Ring | | | | | | | | | | | | | | | | |
|  | | 🞎 Mitral Clip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mitral Clip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mitral Clip | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mitral Clip | | | | | | | | | | | | | | | | |
|  | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | |
|  | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | |
|  | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | | | | |
|  | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | |
|  | | Valve Explant #1 UDI:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ValExpUDI1 (3151) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Explant #2 UDI:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ValExpUDI2 (3171) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Explant #3 UDI:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ValExpUDI3 (3191) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Explant #4 UDI:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  ValExpUDI4 (3211) | | | | | | | | | | | | | | | | |
|  | | Model #1:\_\_\_\_\_\_\_\_ ValExMod1 (3152) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Model #2:\_\_\_\_\_\_\_\_  ValExMod2 (3172) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Model #3:\_\_\_\_\_\_\_\_  ValExMod3 (3192) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Model #4:\_\_\_\_\_\_\_\_  ValexMod4 (3212) | | | | | | | | | | | | | | | | |
|  | | *If not transcatheter device↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If not transcatheter device↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If not transcatheter device↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If not transcatheter device↓* | | | | | | | | | | | | | | | | |
|  | | Device Size #1: \_\_\_\_  ValExDevSz1 (3153) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Device Size #2: \_\_\_\_  ValExDevSz2 (3173) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Device Size #3: \_\_\_\_  ValExDevSz3 (3193) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Device Size #4: \_\_\_\_  ValExDevSz4 (3213) | | | | | | | | | | | | | | | | |
| *If Yes, Implanted or Yes, Explanted and Implanted, complete one column per implant ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **IMPLANT(S)** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **2nd Implant: 🞎 Yes 🞎 No**  ValImp2 (3270) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **3rd Implant: 🞎 Yes 🞎 No**  ValImp3 (3330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **4th Implant: 🞎 Yes 🞎 No**  ValImp4 (3390) | | | | | | | | | | | | | | | | |
| *If Yes ↓ (if no skip to VAD proc)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Yes ↓ (if no skip to VAD proc)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Yes ↓ (if no skip to VAD proc)* | | | | | | | | | | | | | | | | |
|  | | Valve Implant Location #1  ValImpLoc1 (3220) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Implant Location #2  ValImpLoc2 (3280) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Implant Location #3  ValImpLoc3 (3340) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Implant Location #4  ValImpLoc4 (3400) | | | | | | | | | | | | | | | | |
|  | | 🞎 Aortic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Aortic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Aortic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Aortic | | | | | | | | | | | | | | | | |
|  | | 🞎 Mitral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mitral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mitral | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Mitral | | | | | | | | | | | | | | | | |
|  | | 🞎 Tricuspid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Tricuspid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Tricuspid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Tricuspid | | | | | | | | | | | | | | | | |
|  | | 🞎 Pulmonic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Pulmonic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Pulmonic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Pulmonic | | | | | | | | | | | | | | | | |
|  | | 🞎 Common AV | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Common AV | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Common AV | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Common AV | | | | | | | | | | | | | | | | |
|  | | 🞎 Truncal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Truncal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Truncal | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Truncal | | | | | | | | | | | | | | | | |
|  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | Valve Implant Type #1  ValImpType1 (3230) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Implant Type #2  ValImpType2 (3290) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Implant Type #3  ValImpType3 (3350) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Valve Implant Type #4  ValImpType4 (3410) | | | | | | | | | | | | | | | | |
|  | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Surgeon Fashioned | | | | | | | | | | | | | | | | |
|  | | 🞎 Autograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Autograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Autograft | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Autograft | | | | | | | | | | | | | | | | |
|  | | 🞎 Commercially supplied | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Commercially supplied | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Commercially supplied | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Commercially supplied | | | | | | | | | | | | | | | | |
|  | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Transcatheter device | | | | | | | | | | | | | | | | |
|  | | *If Surgeon fashioned ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Surgeon fashioned ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Surgeon fashioned ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Surgeon fashioned ↓* | | | | | | | | | | | | | | | | |
|  | |  | | | | | | Material #1:  ValImpSFMat1 (3240) | | | | | | | | | | | | | | | | | | | | | | | |  | | | Material #2:  ValImpSFMat2 (3300) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Material #3:  ValImpSFMat3 (3360) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Material #4:  ValImpSFMat4 (3420) | | | | | | | | | | | |
|  | |  | | | | | | 🞎 PTFE (Gore-Tex) | | | | | | | | | | | | | | | | | | | | | | | |  | | | 🞎 PTFE (Gore-Tex) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | 🞎 PTFE (Gore-Tex) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | 🞎 PTFE (Gore-Tex) | | | | | | | | | | | |
|  | |  | | | | | | 🞎 Pericardium | | | | | | | | | | | | | | | | | | | | | | | |  | | | 🞎 Pericardium | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | 🞎 Pericardium | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | 🞎 Pericardium | | | | | | | | | | | |
|  | |  | | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | |  | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | 🞎 Other | | | | | | | | | | | |
|  | | *If Commercially Supplied or Transcatheter ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied or Transcatheter ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied or Transcatheter ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied or Transcatheter ↓* | | | | | | | | | | | | | | | | |
|  | |  | | | | | | Model #1: \_\_\_\_\_\_\_\_  ValImpComMod1 (3250) | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Model #2:\_\_\_\_\_\_\_\_ ValImpComMod2 (3310) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Model #3: \_\_\_\_\_\_\_\_  ValImpComMod3 (3370) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Model #4: \_\_\_\_\_\_\_\_  ValImpComMod4 (3430) | | | | | | | | | | | | | |
|  | |  | | | | | UDI#1\_\_\_\_\_\_\_\_\_\_\_  ValImpUDI1 (3261) | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | UDI#2\_\_\_\_\_\_\_\_\_\_\_\_\_  ValImpUDI2 (3321) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | UDI#3\_\_\_\_\_\_\_\_\_\_\_\_\_  ValImpUDI3 (3381) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | UDI#4\_\_\_\_\_\_\_\_\_\_\_\_\_  ValImpUDI4 (3441) | | | | | | | | | | | | | |
|  | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *If Commercially Supplied↓* | | | | | | | | | | | | | | | | |
|  | |  | | | | | Device Size #1: \_\_\_\_  ValImpComSz1 (3262) | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | Device Size #2: \_\_\_\_  ValImpComSz2 (3322) | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | Device Size #3: \_\_\_\_  ValImpComSz3 (3382) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | Device Size #4: \_\_\_\_  ValImpComSz4 (3442) | | | | | | | | | | | | | |
| **VAD PROCEDURES** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| VAD Explanted and/or Implanted:  VADExImp (3460) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 No | | | | | | | 🞎 Yes, Explanted | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes, Implanted | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes, Explanted and Implanted | | | | | | | | | | | | | | | | | | | | | | | |
| *If Implanted or Explanted and Implanted ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Indication: VADInd (3500) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Bridge to Transplantation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Bridge to Recovery | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Destination | | | | | | | | | | | | | | |
|  | | |  | | | | | | | |  | | | | | | | | | | | | | | | | 🞎 Postcardiotomy Ventricular failure | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Device malfunction | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 End of Life | | | | |
|  | | | First Implant Type: | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 RVAD | | | | | | | | | 🞎 LVAD | | | | | | | | | | | | | | 🞎 TAH (total artificial heart) VImpTy (3550) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | First Implant UDI: | | | | | | | | | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VADImpUDI (3565) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | First Product (choose from VAD List): | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VProdTy (3569) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | *If Implant Type = RVAD or LVAD complete ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | Did the first occurrence involve the implantation of two VAD devices? 🞎 Yes 🞎 No VADImp2 (3571) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | | | | | | | | | | | | | | | | | | | | Second Implant UDI: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** VADImpUDI2 (3573) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | Second Product (choose from VAD List) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ VProdTy2 (3574) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *If Explanted or Explanted and Implanted ↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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|  | | | Explant Reason:  VExpRsn (3610) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Cardiac Transplant | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Recovery | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Device Transfer | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Device Related Infection | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Device Malfunction | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 End of Life | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Explant UDI:  VADExpUDI (3611) | | | | | | | | | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| *If Explanted, Implanted or Explanted and Implanted indicate whether VAD related complications occurred↓* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Intracranial Bleed:  PVCmpBld (3850) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | Embolic Stroke:  PVCmpESt (3860) | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | Driveline/Cannula Infection:  PVCmpDCI (3870) | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | |
|  | | | Pump Pocket Infection:  PVCmpPPI (3880) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | Endocarditis:  PVCmpEnd (3890) | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | Device Malfunction:  PVCmpMal (3900) | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | |
|  | | | Bowel Obstruction:  PVCmpBO (3910) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | Hemolysis:  PVCmpHemo (3920) | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | |  | | |

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| **COMPLICATIONS** Complication (4200)  **Assign complication(s) to the operation that is most closely associated with the complication** | | | | | | | | |
| 🞎 15= No complications *OR select ALL that apply: (↓)* | | | | | | | | |
| 🞎 | 16= No complications during the intraop or postop time periods (No complications prior to discharge & no complications within ≤ 30 days of surgery) | | | | | | | |
| 🞎 | 350= Intraoperative death or intraprocedural death | | | | | | | |
| 🞎 | 360= Unplanned readmission to the hospital within 30 days of surgery or intervention | | | | | | | |
| 🞎 | 370= Multi-System Organ Failure (MSOF) = Multi-Organ Dysfunction Syndrome (MODS) | | | | | | | |
| 🞎 | 30= Unexpected Cardiac arrest during or following procedure (Periop/Periprocedural = Intraop/Intraprocedural and/or Postop/Postprocedural) | | | | | | | |
| 🞎 | 80= Cardiac dysfunction resulting in low cardiac output | | | | | | | |
| 🞎 | 384= Cardiac failure (severe cardiac dysfunction) | | | | | | | |
| 🞎 | 280= Endocarditis-postprocedural infective endocarditis | | | | | | | |
| 🞎 | 110= Pericardial effusion, Requiring drainage | | | | | | | |
| 🞎 | 390= Pulmonary hypertension | | | | | | | |
| 🞎 | 140= Pulmonary hypertensive crisis (PA pressure > systemic pressure) | | | | | | | |
| 🞎 | 130= Pulmonary vein obstruction | | | | | | | |
| 🞎 | 120= Systemic vein obstruction | | | | | | | |
| 🞎 | 240= Bleeding, Requiring reoperation | | | | | | | |
| 🞎 | 102= Sternum left open, Planned | | | | | | | |
| 🞎 | 104= Sternum left open, Unplanned | | | | | | | |
| 🞎 | 22= Unplanned cardiac reoperation during the postoperative or postprocedural time period, exclusive of reoperation for bleeding | | | | | | | |
| 🞎 | 24= Unplanned interventional cardiovascular catheterization procedure during the postoperative or postprocedural time period | | | | | | | |
| 🞎 | 26= Unplanned non-cardiac reoperation during the postoperative or postprocedural time period | | | | | | | |
| 🞎 | 40= Postoperative/Postprocedural mechanical circulatory support (IABP, VAD, ECMO, or CPS) | | | | | | | |
| 🞎 | 72= Arrhythmia requiring drug therapy | | | | | | | |
| 🞎 | 73= Arrhythmia requiring electrical cardioversion or defibrillation | | | | | | | |
| 🞎 | 74= Arrhythmia necessitating pacemaker, Permanent pacemaker | | | | | | | |
| 🞎 | 75= Arrhythmia necessitating pacemaker, Temporary pacemaker | | | | | | | |
| 🞎 | 210= Chylothorax | | | | | | | |
| 🞎 | 200= Pleural effusion, Requiring drainage | | | | | | | |
| 🞎 | 180= Pneumonia | | | | | | | |
| 🞎 | 190= Pneumothorax, Requiring drainage or evacuation | | | | | | | |
| 🞎 | 150= Postoperative/Postprocedural respiratory insufficiency requiring mechanical ventilatory support > 7 days | | | | | | | |
| 🞎 | 160= Postoperative/Postprocedural respiratory insufficiency requiring reintubation | | | | | | | |
| 🞎 | 170= Respiratory failure, Requiring tracheostomy | | | | | | | |
| 🞎 | 230= Renal failure - acute renal failure, Acute renal failure requiring dialysis at the time of hospital discharge | | | | | | | |
| 🞎 | 223= Renal failure - acute renal failure, Acute renal failure requiring temporary dialysis with the need for dialysis not present at hospital discharge | | | | | | | |
| 🞎 | 224= Renal failure - acute renal failure, Acute renal failure requiring temporary hemofiltration with the need for dialysis not present at hospital discharge | | | | | | | |
| 🞎 | 290= Sepsis | | | | | | | |
| 🞎 | 320= Neurological deficit, Neurological deficit persisting at discharge | | | | | | | |
| 🞎 | 325= Neurological deficit, Transient neurological deficit not present at discharge | | | | | | | |
| 🞎 | 300= Paralyzed diaphragm (possible phrenic nerve injury) | | | | | | | |
| 🞎 | 400= Peripheral nerve injury, Neurological deficit persisting at discharge | | | | | | | |
| 🞎 | 331= Seizure | | | | | | | |
| 🞎 | 410= Spinal cord injury, Neurological deficit persisting at discharge | | | | | | | |
| 🞎 | 420= Stroke | | | | | | | |
| 🞎 | 440= Subdural Bleed | | | | | | | |
| 🞎 | 450= Intraventricular hemorrhage (IVH) > grade 2 | | | | | | | |
| 🞎 | 470= Thrombus, Intracardiac | | | | | | | |
| 🞎 | 480= Thrombus, Central vein | | | | | | | |
| 🞎 | 510= Thrombosis/thromboembolism, Pulmonary artery | | | | | | | |
| 🞎 | 490= Thrombus, Peripheral deep vein | | | | | | | |
| 🞎 | 500= Thrombosis, Systemic to pulmonary shunt | | | | | | | |
| 🞎 | 530= Thrombosis, Systemic artery, in situ (central) | | | | | | | |
| 🞎 | 540= Thrombosis, Systemic artery, in situ (peripheral) | | | | | | | |
| 🞎 | 550= Thrombosis, Systemic artery, embolic | | | | | | | |
| 🞎 | 310= Vocal cord dysfunction (possible recurrent laryngeal nerve injury) | | | | | | | |
| 🞎 | 250= Wound dehiscence (sterile) | | | | | | | |
| 🞎 | 255= Wound dehiscence (sterile), Median sternotomy | | | | | | | |
| 🞎 | 520= Sternal instability (sterile) | | | | | | | |
| 🞎 | 261= Wound infection | | | | | | | |
| 🞎 | 262= Wound infection-Deep wound infection | | | | | | | |
| 🞎 | 270= Wound infection-Mediastinitis | | | | | | | |
| 🞎 | 263= Wound infection-Superficial wound infection | | | | | | | |
| 🞎 | 430= Anesthesia – related complication | | | | | | | |
| 🞎 | 460= Complication of cardiovascular catheterization procedure | | | | | | | |
| 🞎 | 902= Compartment syndrome | | | | | | | |
| 🞎 | 900= Other complication; Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CompOthSpecify (4201) | | | | | | | |
| 🞎 | 901= Other operative/procedural complication; Specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ CompOthOpSpecify (4202) | | | | | | | |
| **DISCHARGE/READMISSION** | | | | | | | | |
| Patient remains hospitalized during this episode of care | | | | | | 🞎 Yes 🞎 No EpisodeCarePatInHosp (4210) | | |
| *(If No →)* | | Date of Hospital Discharge: HospDischDt (4220) *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | | | | | | |
|  | | Mortality Status at Hospital Discharge: MtHospDisStat (4230) 🞎 Alive 🞎 Dead | | | | | | |
|  | | *(If Alive →)* | Discharge Location: DisLoctn (4240)  🞎 Home 🞎 Other Acute Care Center 🞎 Other Chronic Care Center | | | | | |
|  | | VAD Discharge Status: VADDiscS(4245) | | | | | | |
|  | | 🞎 No VAD this admission 🞎 Discharged w/ VAD 🞎 VAD removed prior to discharge 🞎 Expired in Hospital | | | | | | |
|  | | Discharged with Nasoenteric Tube? 🞎 Yes 🞎 No NasoTubeDisc (4246) | | | | | | |
|  | | Discharged with Transabdominal Gastrostomy or Jejunostomy Tube? 🞎 Yes 🞎 No TransGasDisc (4247) | | | | | | |
|  | | Date of Database Discharge: DBDischDt (4250) *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ | | | | | | |
|  | | Mortality Status at Database Discharge: MtDBDisStat (4260) 🞎 Alive 🞎 Dead 🞎 Unknown | | | | | | |
|  | | *(If Alive →)* | Readmission within 30 days: 🞎 Yes 🞎 No  Readmit30 (4270) | | | | |  |
|  | |  | *(If Yes →)* | Readmission Date: *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_ ReadmitDt (4280) | | | | |
|  | |  |  | Primary Readmission Reason *(select one↓):*ReadmitRsn (4290) | | | | |
|  | |  |  | | 🞎 Thrombotic Complication | | 🞎 Neurologic Complication | |
|  | |  |  | | 🞎 Hemorrhagic Complication | | 🞎 Respiratory Complication/Airway Complication | |
|  | |  |  | | 🞎 Stenotic Complication | | 🞎 Septic/Infectious Complication | |
|  | |  |  | | 🞎 Arrhythmia | | 🞎 Cardiovascular Device Complications | |
|  | |  |  | | 🞎 Congestive Heart Failure | | 🞎 Residual/Recurrent Cardiovascular Defects | |
|  | |  |  | | 🞎 Embolic Complication | | 🞎 Failure to Thrive | |
|  | |  |  | | 🞎 Cardiac Transplant Rejection | | 🞎 VAD Complications | |
|  | |  |  | | 🞎 Myocardial Ischemia | | 🞎 Gastrointestinal Complication | |
|  | |  |  | | 🞎 Renal Failure | | 🞎 Other Cardiovascular Complication | |
|  | |  |  | | 🞎 Pericardial Effusion and/or Tamponade | | 🞎 Other - Readmission related to this index operation | |
|  | |  |  | | 🞎 Pleural Effusion | | 🞎 Other - Readmission not related to this index operation | |
|  | | | | | | | | |
| Status at 30 days after surgery: Mt30Stat (4300) 🞎 Alive 🞎 Dead 🞎 Unknown | | | | | | | | |
| 30 Day Status Method of Verification: Mt30StatMeth (4310)  🞎 Evidence of life or death in Medical Record 🞎 Contact w/ patient or family  🞎 Contact w/ medical provider 🞎 Office visit to provider ≥ 30 days post op 🞎 SSDMF 🞎Other | | | | | | | | |
| *If Mt30Stat=Alive →*  Status at 365 days after surgery: Mt365Stat (4311) 🞎 Alive 🞎 Dead 🞎 Unknown | | | | | | | | |
| 365 Day Status Method of Verification: Mt365StatMeth (4312) | | | | | | | | |
| 🞎 Evidence of life or death in Medical Record 🞎 Contact w/ patient or family | | | | | | | | |
| 🞎 Contact w/ medical provider 🞎 Office visit to provider ≥ 365 days post op 🞎 SSDMF 🞎Other | | | | | | | | |
| Operative Mortality: MtOpD (4330) 🞎 Yes 🞎 No | | | | | | | | |
| CHSS Eligibility:CHSSElig (4331) | | | | | | | | |
| 🞎 Eligible & Enrolled 🞎 Eligible, but declined enrollment 🞎 Eligible, but not invited to participate  🞎 Eligible, but institution not CHSS participant 🞎 Eligible, but not enrolled, other reason 🞎 Not Eligible | | | | | | | | |

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| **PATIENT PROCESS MEASURES** | | | | | | | | | | | | | | | | | | | | | | | | |
| *(if Op Type CPB , No CPB Cardiovascular , or CPB Noncardiovascular 🡫)* | | | | | | | | | | | | | | | | | | | | |  | | | |
| Patient care discussed at preop multidisciplinary planning conference: 🞎 Yes 🞎 No CareDiscussed(4340) | | | | | | | | | | | | | | | | | | | | | | | | |
| *If No →* | | | Reason care was not discussed:  CareDiscussedRsn (4350) | | | | | | 🞎 Urgent/Emergent/Salvage Case | | | | | | | | | | | 🞎 Patient admitted between conferences | | | | |
|  |  | | | | | | | | 🞎 Program does not routinely discuss all cases | | | | | | | | | | | 🞎 Program does not have regular conferences | | | | |
|  |  | | | | | | | | 🞎 Other | | | | | | | | | | |  | | | | |
| Transesophageal Echo (TEE) available for case: | | | | | | | | | | | | 🞎 Yes 🞎 No TEEAvail (4370) | | | | | | | | | | | | |
| *If Yes →* | | | | | Intraop TEE performed: | | | | | | | 🞎 Yes 🞎 No TEEEpicEchoPerf (4380) | | | | | | | | | | | | |
| Pre-op Antibiotic Prophylaxis given: | | | | | | | | 🞎 Yes 🞎 No 🞎 Patient on ongoing antibiotic therapy, prophylaxis not indicated PreopAntiProph (4400) | | | | | | | | | | | | | | | | |
| *If Yes →* | | | | Cephalosporin  PreopAntiProphCeph (4410) | | | 🞎 Yes 🞎 No | | | | | | | | |  | Penicillin or related med  PreopAntiProphPen (4420) | | | | | 🞎 Yes 🞎 No | | |
|  | | | | Aminoglycoside  PreopAntiProphAmino (4430) | | | 🞎 Yes 🞎 No | | | | | | | | |  | Vancomycin  PreopAntiProphVan (4440) | | | | | 🞎 Yes 🞎 No | | |
|  | | | | Other  PreopAntiProphOth (4450) | | | 🞎 Yes 🞎 No | | | | | | | | |  |  | | | | |  | | |
|  | | | | Antibiotic Start time: *(00:00 – 23:59)* **\_ \_:\_ \_** PreopAntiProphTime (4470) | | | | | | | | | | | | | | | | | | | | |
| Conventional Pre-procedure Time Out:  ConvTimeOut (4480) | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | |
| Surgeon shares essential elements of operative plan:  PreProcBrief (4490) | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | |
| Postprocedure debriefing:  PostProcDebrief (4500) | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | |
| Hand-off protocol at the time of transfer to ICU: HandoffProtocol (4510) | | | | | | | | | | 🞎 Yes- all required team members present | | | | | | | | | | | | |  | |
|  | | | | | | | | | | 🞎 Yes- not all required team members present | | | | | | | | | | | | |  | |
|  | | | | | | | | | | 🞎 No | | | | | | | |  | | | | |  | |
| *If yes-not all required team members present →* | | | | | | Anesthesiologist:  HandoffAnesth (4520) | | | | | | | 🞎 Attended hand-off | | | | | | 🞎 Did not attend hand-off | | | | | |
|  | | | | | | Surgeon:  HandoffSurg (4530) | | | | | | | 🞎 Attended hand-off | | | | | | 🞎 Did not attend hand-off | | | | | |
|  | | | | | | ICU MD:  HandoffPhysStaff (4540) | | | | | | | 🞎 Attended hand-off | | | | | | 🞎 Did not attend hand-off | | | | | |
|  | | | | | | Nurse:  HandoffNursing (4550) | | | | | | | 🞎 Attended hand-off | | | | | | 🞎 Did not attend hand-off | | | | | |
| Patient died or had major postoperative complication(s):  PostOpComp (4560) | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | |
| *If Yes →* | | | | Management and outcomes reviewed:  PostOpReview (4570) | | | | | | | | | 🞎 Reviewed at conference | | | | | | | | | | | |
|  | |  | | | | | | | | | | | 🞎 Scheduled for review at conference | | | | | | | | | | | |
|  | |  | | | | | | | | | | | 🞎 Not reviewed or scheduled for review | | | | | | | | | | | |
|  | |  | | | | | | | | | | | 🞎 Program does not have scheduled conferences | | | | | | | | | | | |
|  | | | | | | *If Reviewed →* | | | | | Review Date: *(mm/dd/yyyy)* \_\_ \_\_ / \_\_ \_\_ / \_\_ \_\_ \_\_ \_\_  PostOpReviewDate (4580) | | | | | | | | | | | | |  |

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| C:\Users\dmcdonald\Pictures\STS_ND_Logo_RGB_large_lowres.jpg | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **ANESTHESIA**  (for sites participating in  CHSD anesthesiology component) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | |
| **ANESTHESIA Administrative** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Anesthesiology data being collected: 🞎 Yes 🞎 No *(If No, skip all Anesthesia sections)* Anesthesia (4581) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Anesthesiologist Present: 🞎 Yes 🞎 No (AnesPresent (4585) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes→)* | | | | | | | | | | | Primary Anesthesiologist Attending: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PrimAnesName (4590) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | Primary Anesthesiologist National Provider Identifier: PrimAnesNPI (4600) **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | Secondary Anesthesiologist Attending: 🞎 Yes 🞎 No SecAnes (4610) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fellow or Resident Present: 🞎 Yes 🞎 No FelRes (4630) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Mid-Level provider CRNA/AA Present: 🞎 Yes 🞎 No CRNA (4640) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ANESTHESIA Preoperative** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Preoperative Medication Category: PreopMedCat (4700) (within 24 hours unless listed otherwise) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | 5= None *(If not None, select all pre-operative medications that apply: ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 10= Amiodarone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 190= Heparin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 20= Angiotension Converting Enzyme (ACE) Inhibitors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 220= Heparin, Low molecular weight | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 760= Angiotension Receptor Blockers (ARB) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 710= Inotropes Not Otherwise Listed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 700= Anti-arrhythmics Not Otherwise Listed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 210= Insulin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 770= Anticoagulents Not Otherwise Listed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 230= Milrinone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 30= Anti-reflux Meds (H2 antagonists,PPI, propulsives) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 240= Narcotics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 40= Anti-seizure medications | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 250= Nitric Oxide | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 50= Aspirin (within 5 days) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 260= Nitroglycerin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 60= Benzodiazepines | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 270= Nitroprusside | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 70= Beta Blockers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 280= Norepinephrine (Levophed) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 80= Birth Control (Oral, IM) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 290= PDE-5 Inhibitors (e.g., Sildenafil) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 200= Bronchodilators, Inhaled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 300= Platelet inhibitors other than Aspirin (e.g.,Plavix) (within 5 days) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 90= Calcium Channel Blockers | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 310= Prostacyclin (e.g., Flolan, Remodulin) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 100= Calcium Chloride Infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 320= Prostaglandin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 750= Clonidine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 330= Psychiatric Medications (including ADHD and antidepressants) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 110= Coumadin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 340= Statins | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 740= Dexmedetomidine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 350= Steroids (oral / IV) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 120= Digoxin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 360= Thyroid Hormone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 130= Direct Thrombin Inhibitors (e.g., argatroban) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 370= Transplant Rejection Inhibition Meds (other than steroids) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 140= Diuretics | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 720= Vasoconstrictors Not Otherwise Listed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 150= Dobutamine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 730= Vasodilators Not Otherwise Listed | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 160= Dopamine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 380= Vasopressin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 170= Endothelin Antagonist (e.g., Bosentan) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 900= Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 🞎 | | | 180= Epinephrine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  |
| Preoperative Sedation PreopSed (4710) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *(If Yes→)* | | | | | | | | | | | | | | | | Preoperative Sedation Route: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 IM 🞎 IV 🞎 Nasal 🞎 PO/GT 🞎 Rectal PreopSedRte (4720) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | *(If Yes, select all pre-operative sedation drugs that apply: ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | Atropine  PreopSedDrugAtro (4730) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Ketamine  PreopSedDrugKet (4770) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | |
|  | | | | | | | | Demerol  PreopSedDrugDem (4740) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Lorazepam  PreopSedDrugLoraz (4780) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | |
|  | | | | | | | | Dexmedetomidine  PreopSedDrugDex(4741) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Midazolam  PreopSedDrugMidaz (4790) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | |
|  | | | | | | | | Diazepam  PreopSedDrugDiaz (4750) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Morphine  PreopSedDrugMorph (4800) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | |
|  | | | | | | | | Fentanyl  PreopSedDrugFent (4751) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Pentobarbital  PreopSedDrugPent (4810) | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | |
|  | | | | | | | | Glycopyrrolate  PreopSedDrugGlyco (4760) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | |  | | | | | | | | |
| Preoperative Oxygen Saturation: PreopO2Sat (4820) \_\_\_\_\_\_\_\_\_ % | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Preoperative Oxygen Supplementation PreopOxygen (4830) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | |
| Date and Time of Transport to Procedure Location Or Anesthesia Start Time:  *mm/ dd/ yyyy hh : mm* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_PLocTransDT (4840) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ANESTHESIA Monitoring** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Arterial Line: 🞎 Yes 🞎 No ArtLine (4850) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)*Type: *(Select all that apply)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | |
|  | | | | | | Radial  ArtLineTypeRad (4860) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Brachial  ArtLineTypeBrach (4870) | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | |
|  | | | | | | Axillary  ArtLineTypeAx (4880) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Femoral  ArtLineTypeFem (4890) | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | |
|  | | | | | | Ulnar  ArtLineTypeUlnar (4900) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Dorsalis Pedis  ArtLineTypeDors (4910) | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | |
|  | | | | | | Posterior Tibial  ArtLineTypePost (4920) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Umbilical  ArtLineTypeCent (4930) | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | |
|  | | | | | | Arterial line in-situ pre procedure:  ArtLinePreProc (4931) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | |
| Cutdown: 🞎 Yes 🞎 No Cutdown (4940) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* Type: *(Select all that apply)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Radial CutdownRad (4950) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Femoral CutdownFem (4960) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | |
|  | | | | | | Ulnar CutdownUln (4970) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Other CutdownOth (4980) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | |
| Percutaneous Central Pressure: 🞎 Yes 🞎 No PercCentPress (4990) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* Location: *(Select all that apply)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | Right Internal Jugular PCPLocRJug (5000) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | Left Internal Jugular PCPLocLJug (5010) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | |
|  | | | | | | Right Subclavian PCPLocRSub (5020) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | Left Subclavian PCPLocLSub (5030) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | |
|  | | | | | | Right Femoral Vein PCPLocRFem (5040) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | Left Femoral Vein PCPLocLFem (5050) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | |
|  | | | | | | PICC PCPLocPICC (5051) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | Other PCPLocOth (5060) | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | |
|  | | | | | | CVP or PICC in situ pre procedure  CVPPICCPreProc (5062) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |
|  | | | | | | CVP Placed by Anesthesia  CVPPlaced (5070) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Surgeon Placed lines INSTEAD of Anesthesia Placed Central Lines: 🞎 Yes 🞎 No SurgMonLines(5071) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Swan-Ganz Catheter  SGCath (5080) | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Oximetric Central Line (ScVO2) ScVO2 (5090) 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Ultrasound Guidance Used for Line Placement: UltraGuide (5100) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 None  🞎 Arterial line only | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Central venous line only  🞎 Both arterial & venous lines | | | | | | | | | | | | | | | | | | |
| Neurologic Monitoring: 🞎 Yes 🞎 No NeuroMonitor (5110) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | |
|  | | *(If Yes →)* | | | | | | | | | | Bispectral Index | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No NeuroMonBIS (5130) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Transcranial Doppler | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No NeuroMonTCD (5140) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| NIRS (Cerebral) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No NeuroMonNIRS (5141) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No NeuroMonOth (5150) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Lowest Recorded Intraoperative Temperature: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | \_\_\_\_\_\_\_\_\_ *° C* LowIntraopTemp (5160) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | |
| Lowest Intraoperative Temperature Site:  IntraopTempSite (5170) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Nasal 🞎 Esophageal 🞎 Bladder 🞎 Rectal  🞎 Axillary 🞎 Skin 🞎 Tympanic 🞎Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Transesophageal Echocardiography  TEE (5180) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | |  | | | | | | | | | | | |
| **ANESTHESIA Anesthetic Technique** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date and Time of Induction: *mm/ dd/ yyyy hh : mm* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ InductionDT (5190) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Induction Type: | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Inhalation | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndTypeInh (5200) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | Sevoflurane | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentInhalSevo (5220) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Isoflurane | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentInhalIso (5230) | | | | | | | | | | | | |
|  | | | Intravenous | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndTypeIV (5240) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | Sodium Thiopental | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVSodT (5260) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Ketamine | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVKet (5270) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Etomidate | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVEtom (5280) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Propofol | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVProp (5290) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Fentanyl | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVFent (5300) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Midazolam | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVMid (5310) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Dexmedetomidine | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVDex (5320) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Sufentanil | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVSuf (5330) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Remifentanil | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIVRem (5340) | | | | | | | | | | | | |
|  | | | Intramuscular (IM) | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndTypeIM (5350) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | | | | Ketamine | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIMKet (5370) | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | Midazolam | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No IndAgentIMMid (5380) | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Regional Anesthetic | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No RegionalAnes (5400) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | | | | | | Regional Anesthetic Site: RegAnesSite (5410) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | 🞎 Thoracic Epidural Catheter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Lumbar Epidural Catheter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Caudal Epidural Catheter | | | | | | | | | | | | | |
|  | | | | | | | | | 🞎 Lumbar Epidural -Single shot | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Caudal Epidural – Single shot | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Lumbar Intrathecal -Single Shot | | | | | | | | | | | | | |
|  | | | | | | | | | 🞎 Paravertebral Block-Single shot | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Paravertebral Block – Catheter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Other | | | | | | | | | | | | | |
| *(If Yes →)* | | | | | | | | | Regional Anesthetic Drug: | | | | | | | | | | | | | Bupivicaine  RegAnesDrugBup (5420) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | Bupivicaine/Fentanyl  RegAnesDrugBupFen (5430) | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | |
|  |  | | | | | | | | *(Select all that apply)* | | | | | | | | | | | | | Clonidine  RegAnesDrugClon (5440) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | Fentanyl  RegAnesDrugFen (5450) | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | |
|  |  | | | | | | | |  | | | | | | | | | | | | | Hydromorphone  RegAnesDrugHydro (5460) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | Lidocaine  RegAnesDrugLido (5470) | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | |
|  |  | | | | | | | |  | | | | | | | | | | | | | Morphine  RegAnesDrugMorph (5480) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | Ropivicaine  RegAnesDrugRop (5490) | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | |
|  |  | | | | | | | |  | | | | | | | | | | | | | Ropivicaine/Fentanyl RegAnesDrugRopFen (5500) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | Tetracaine  RegAnesDrugTetra (5510) | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | |
|  |  | | | | | | | |  | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | Other  RegAnesDrugOth (5520) | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | |
|  |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |
| Intercostal Nerve Infiltration by Surgeon or Anesthesia:  IntNerveInf (5530) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Regional Field Block by Surgeon or Anesthesia:  RegFieldBlock (5540) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ANESTHESIA Airway** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Airway In-situ (ETT or Tracheostomy): 🞎 Yes 🞎 No AirwayInsitu (5550) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | | | | | | | | | | | | | ETT or Tracheostomy Replaced for Procedure: 🞎 Yes 🞎 No AirwayReplaced (5551) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Airway Type: | | | | | | | | | | | | | 🞎 No airway support 🞎 Simple face mask 🞎 Bag-mask 🞎 Nasal cannulae 🞎 Laryngeal Mask Airway (LMA)  🞎 Endotracheal intubation 🞎 Tracheostomy AirwayType (5560) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If LMA →)* | | | | | | | | | | | | | | | | | | | Airway Size *(mm):*  AirwaySizeLMA (5570) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 1.0 🞎 1.5 🞎 2.0 🞎 2.5 🞎 3.0 🞎 4.0 🞎 5.0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Endotracheal intubation →)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Airway Size *(mm):* AirwaySizeIntub (5580) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 2.5 🞎 3.0 🞎 3.5 🞎 4.0 🞎 4.5 🞎 5.0  🞎 5.5 🞎 6.0 🞎 6.5 🞎 7.0 🞎 7.5 🞎 8.0  🞎 Other 🞎 Size not listed (DLETT, Tracheotomy) | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Cuffed: AirwaySizeICuffed (5590) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | *(If Endotracheal intubation or Trach→)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Airway Site: AirwaySite (5600) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Oral 🞎 Nasal 🞎 Tracheostomy | | | | | | | | | | | | | | | | | | | | | | | | |
| Endobronchial Isolation (DLETT, Bronchial Blocker) 🞎 Yes 🞎 No EndobroncIso (5610) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| *(If Yes →)* | | | | | | | | | | Endobronchial Isolation Method: | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Double lumen ETT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Arndt Bronchial Blocker | | | | | | | | | | | | | | | 🞎 Fogarty Catheter | | | | | | | |
|  | | | | | | | | | | EndobronchIsoMeth (5611) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Intentional Mainstem ETT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Uninvent ETT | | | | | | | | | | | | | | | 🞎 Other | | | | | | | |
| ICU Type Ventilator Used Intraop: 🞎 Yes 🞎 No ICUTypeVent (5620) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Anesthesia Ready / End of Induction: *mm/ dd/ yyyy hh : mm* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ EndOfInductDT (5621) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ANESTHESIA Intraoperative Pharmacology (including CPB)** IntraopPharm (6140) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Intraoperative Medications: | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 None *(If not None, select all intra-operative medications that apply: ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 450= 5-HT3 Agents (e.g., Ondansetron) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 190= Magnesium Sulfate | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 520= Acetaminophen | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 210= Milrinone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 20= Adenosine bolus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 430= Narcotic | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 50= Amiodarone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 230= Nesiritide Infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 440= Benzodiazepine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 240= Nicardipine Infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 420= Bronchodilator - Inhaled | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 250= Nitric Oxide inhalation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 70= Calcium Chloride infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 260= Nitroglycerin (Tridil) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 75= Calcium Gluconate infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 270= Nitroprusside (Nipride) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 480= Desflurane | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 180= Norepinephrine (Levophed) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 80= Dexmetetomidine (Precedex) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 280= Phenoxybenzamine bolus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 90= Dobutamine infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 290= Phentolamine (Regitine) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 100= Dopamine infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 300= Phenylephrine infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 110= Epinephrine (Adrenalin) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 500= Procainamide | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 120= Esmolol | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 310= Propofol (Diprivan) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 510= Fenoldopam infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 320= Prostaglandin infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 140= Furosemide | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 470= Sevoflurane | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 370= Inotrope, Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 400= Sodium Bicarbonate bolus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 150= Insulin | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 160= Steroids IV/CPB (Hydrocortisone/Methylprednisolone/Dexamethasone) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 460= Isoflurane | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 340= Thyroid Hormone | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 170= Isoproterenol infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 410= Tromethamine (THAM) bolus | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 490= Ketamine | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 390= Vasoconstrictor, Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 530= Ketorolac | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 380= Vasodilator, Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 540= Levosimendan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | 360= Vasopressin infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Was AT III measured preoperatively? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No ATMeasPreop (6141) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Were any of the following labs checked during CPB? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | Fibrinogen  CPBLabFib (6142) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | If yes → value: \_\_\_\_\_\_\_mg/dL CPBLabFibVal (6143) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | Platelet Count  CPBLabPlatelet (6144) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | If yes → value: \_\_\_\_\_\_\_103/ µL CPBLabPlateletVal (6145) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | TEG on CPB  CBPLabTEG (6146) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | TEG – FF on CPB  CPBLabTEGFF (6147) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | ROTEM on CPB  CPBLabROTEM (6148) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | FIBTEM on CPB  CPBLabFIBTEM (6149) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | SONOCLOT on CPB  CPBLabSONO (6150) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Were any of the following labs checked in the Operating Room after CPB completed? | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | Fibrinogen  PostCPBLabFib (6151) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | If yes → FINAL value: \_\_\_\_\_\_\_mg/dL PostCPBLabFibVal (6152) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | Platelet Count  PostCPBLabPlatelet (6153) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | If yes → FINAL value: \_\_\_\_\_\_\_103/ µL PostCPBLabPlateletVal (6154) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | TEG after CPB  PostCPBLabTEG (6155) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | TEG – FF after CPB  PostCPBLabTEGFF (6156) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | ROTEM after CPB  PostCPBLabROTEM (6157) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | FIBTEM after CPB  PostCPBLabFIBTEM (6158) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | SONOCLOT after CPB  PostCPBLabSONO (6159) | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **ANESTHESIA Pharmacology On Arrival To ICU/PACU** ICUPharm (6170) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Medications Given At Time Of Transfer: | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 None  *(If not None, select all medications that apply: ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | | | 20= Aminocaproic Acid (Amicar) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 170= Muscle Relaxant infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 30= Amiodarone infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 360= Narcotic infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 40= Aprotinin (Trasylol ) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 180= Nesiritide Infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 370= Benzodiazepine infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 190= Nicardipine infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 50= Calcium Chloride infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 200= Nitric Oxide inhalation | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 60= Calcium Gluconate infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 210= Nitroglycerin (Tridil) infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 70= Dexmetetomidine (Precedex) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 220= Nitroprusside (Nipride) infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 80= Dobutamine infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 230= Norepinephrine (Levophed) infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 90= Dopamine infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 240= Phentolamine (Regitine) infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 100= Epinephrine (Adrenalin) infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 250= Phenylephrine infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 340= Esmolol infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 380= Procainamide bolus/infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 390= Fenoldopam infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 260= Propofol (Diprivan) infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 310= Inotrope, Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 270= Prostaglandin infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 120=Insulin infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 280= Thyroid Hormone infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 130= Isoproterenol infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 290= Tranexamic Acid infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 410= Ketamine Infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 330= Vasoconstrictor, Other | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 400= Levosimendan | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 320= Vasodilator, Other | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 350= Local Anesthetic infusion via catheter (On-Q, Pleural catheter) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | 300= Vasopressin infusion | | | | | | | | | | | | | | | | | | | | | | |  | | |
| 🞎 | | | | | | | 150= Milrinone infusion | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | |  | | | | | | | | | | | | | | | | | | | | | | |  | | |
| **ANESTHESIA ICU/PACU Care** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Date and Time of ICU/PACU Arrival: ICUArrDT (6180) *(mm/dd/yyyy 00:00 – 23:59)* \_ \_ / \_ \_ / \_ \_ \_ \_ \_ \_:\_ \_ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Initial FiO2: \_\_\_\_\_\_\_\_\_\_\_  InitialFiO2 (6190) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Mechanical circulatory support(ECMO/VAD) :🞎 Yes 🞎 No MechCircSup (6200) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ICU/PACU Arrival labs  ICUPACULabs (6211) | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No | | | | | | | | | | | | | | | | | | | | | | | | | *(If Yes →)* | | | | | | | | | | | | pH: \_\_\_\_\_  pH (6220) | | | | | | | | | | | | | | | | | | | | | | | | | | pCO2: \_\_\_\_\_  pCO2 (6230) | | | | | | pO2: \_\_\_\_\_  pO2 (6240) | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Base Excess: \_\_\_\_\_  BaseExcess (6250) | | | | | | | | | | | | | | | | | | | | | | | | | Lactate: \_\_\_\_\_  Lactate (6260) | | | | | | Hematocrit: \_\_\_\_\_  Hematocrit (6270) | | | | | | | | | | |
| Initial pulse oximeter \_\_\_\_\_ *%* InitPulseOx (6280) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Temperature on ICU/PACU Arrival: \_\_\_\_\_ *° C* TempICUArr (6290) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Temperature Measurement Site:  TempSite (6300) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Forehead scan 🞎 Tympanic membrane 🞎 Skin 🞎 Rectal 🞎 Bladder  🞎 Oral 🞎 Axillary 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Need for Temporary Pacemaker on Arrival In ICU/PACU: 🞎 Yes 🞎 No TempPace (6310) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | *(If Yes →)* | | | | | | | | | | | Site of Temporary Pace Maker: TempPaceSite (6320) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Epicardial 🞎 Transvenous | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | *(If Yes →)* | | | | | | | | | | | Type of Temporary Pacing: TempPaceType (6330) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Atrial 🞎 Atrio-ventricular 🞎 Ventricular 🞎 Other | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Disposition Under Anesthesia:  DispUnderAnes (6340) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Discharged as planned after PACU/Recovery  🞎 Admit to ICU as planned  🞎 Other location not listed above | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Admit to hospital floor as planned  🞎 Unplanned admit to hospital or ICU  🞎 Patient expired under anesthetic management | | | | | | | | | | | | | | | | | |
| Peri-Anesthetic Demise: (within 24 hr of last anesthetic end time) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 Yes 🞎 No PeriAnesDemise (6350) | | | | | | | | | | | | | | | | | | | | | | | |
| **ANESTHESIA Adverse Events** AnesAdvEvent (6380) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | Additional Intervention Required:  AnesAdvEventInt (6381)  *Circle EACH event that required additional intervention.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Anesthesia adverse events: | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 None | | | | | | | | | | | | | | | | | | | | | | | | | | *(If not None, select all adverse events that apply: ↓)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 20= Oral/Nasal Injury-Bleeding | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 210= Anaphylaxis/Anaphylactoid Reaction | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 30= Respiratory Arrest | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 220= Non-allergic Drug Reaction | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 40= Difficult Intubation/Reintubation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 230= Medication Administration | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 50= Stridor / Sub-glottic Stenosis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 240= Medication Dosage | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 60= Extubation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 250= Intraoperative Recall | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 70= Endotracheal Tube Migration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 260= Malignant Hyperthermia | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 80= Airway Injury | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 270= Protamine Reaction | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 410= Hemoptysis | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 280= Cardiac Arrest - related to anesthesia care | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 450= Laryngospasm requiring medication | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 490= Cardiac Arrest - unrelated to anesthesia care | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 400= Bronchospasm | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 510= Hypercyanotic Episode (Tet Spell) unrelated to manipulation | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 470= Unplanned need to remain intubated post-procedure due to anesthesia factors | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 500= Pulmonary Hypertensive Crisis unrelated to manipulation | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 90= Arrhythmia - Central Venous Line Placement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 290= TEE related esophageal bleeding / rupture | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 100= Myocardial Injury - Central Venous Line Placement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 300= TEE related esophageal chemical burn | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 110= Vascular Compromise - Central Venous Line Placement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 310= TEE related airway compromise | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 120= Pneumothorax - Central Venous Line Placement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 315= TEE related hemodynamic compromise | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 130= Vascular Access | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 320= TEE related extubation | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 140= Hematoma requiring relocation of catheter placement | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 330= Complications during patient transfer | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 150= Arterial Puncture | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 340= Peripheral Nerve Injury due to positioning | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 160= Intravenous/Intra-arterial Air Embolism | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 370= Anesthesia Equipment Malfunction/ Failure | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 350= Arterial Line Placement- Extremity ischemia | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 390= Integument Injury (skin breakdown or dehiscence) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 380= Intravenous Infiltration | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 480= Ocular Injury (corneal abrasion or injury) | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 170= Bleeding - Regional Anesthetic Site | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 420= Postop Nausea/Vomiting requiring admission | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 180= Intrathecal Puncture - Regional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 430= Vomiting or Aspiration on Induction/Emergence | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 190= Local Anesthetic Toxicity - Regional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 440= Emergence Delirium requiring Medication | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 🞎 | | | | | 200= Neurologic Injury - Regional | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | 🞎 | | | | | | | | 900= Other | | | | | | | | | | | | | | | | | | | | | | | | | | |