

Society of Thoracic Surgeons

Congenital Heart Surgery Database Monthly Webinar

April 12, 2022

# CHSD Monthly Webinar

- Welcome and Introductions
- STS Update
- STS Education (Chasity Wellnitz, CHSD Consultant)
- IQVIA Update
- User Feedback
  - Include Ticket
     Number/Case Number



# STS Updates

#### April Training Manual posted

#### 2021 Harvest Update

- Analysis results expected to be available end of April
- Official STS Notification to be sent when available

#### Spring 2022 Harvest Update

- Harvest Close: Monday, May 16 @ 11:59pm ET
- Opt out: Wednesday, May 18

#### Database Version Upgrade

- Official communication sent 4/1
- Go live delayed until January 1, 2023

#### • IQVIA Primary Procedure Mismatch Report

- As of 3/26 this report now incorporates the updated STAT Scores as well as the new rules for Glenn/Hemi Fontan, PVR and Ross procedures
- Appendix C (pdf) is posted on STS website
- Excel version to be posted this week





# Webinar Discussion Topics

- Primary ProcedureDetermination
  - Primary Procedure Mismatch Report update
  - STAT Score Update
- Missing data clarification

# Primary procedure determination in a multicomponent operation

## Primary Procedure Determination

#### **Factors to Consider**

- STAT scores
- Exception rules

#### **Reference STS Website Document:**

https://www.sts.org/sites/default/files/Database%20Manuals/Determination%20of%20Primary%20Diagnosis%20and%20Primary%20Procedure 3 14 2022.pdf

Refer to CHSD webinar dated 06/15/21 for a more specific review

# Recent Updates within the CHSD Database

#### **STAT Scores Updated**

- Paper published 2021
   <a href="https://doi.org/10.1177/2150135121991528">https://doi.org/10.1177/2150135121991528</a>
- Applied in Spring 2022 harvest (2018-2021)
- Appendix C

https://www.sts.org/sites/default/files/Database%20Manuals/Appendix%20C%20-%202022 3.1.2022.pdf

#### **New Exception Rules**

- Rule #15: Glenn/Hemifontan + Transplant
- Rule #16: PVR procedures
- Rule #17: Ross procedures
- STS Reference

https://www.sts.org/sites/default/files/Database%20Manual s/Determination%20of%20Primary%20Diagnosis%20and%20 Primary%20Procedure 3 14 2022.pdf

# Appendix C Updates

- Existing procedures with newly assigned STAT Mortality Category/Score
- Existing procedures with an increase in STAT Mortality Category/Score
- Existing procedures with a decrease in STAT Mortality Category/Score

#### Appendix C Updates Continued

Appendix C: The Society of Thoracic Surgeons - European Association for Cardio-Thoracic Surgery Congenital Heart Surgery Mortality Categories (STAT Mortality Categories) (March 1, 2022)

Procedure Harvest Code	Procedure Name	STAT Mortality Score	2020 STAT Mortality Score	STAT Mortality Category	2020 STAT Mortality Category
780	Aortic stenosis, Subvalvar, Repair	0.2	0.1	1	1
600	Valve replacement, Pulmonic (PVR)	0.3	0.1	1	1
**2110	ASD Repair, Patch + PAPCV Repair	0.2	0.1	1	1
30	ASD repair, Patch	0.1	0.1	1	1
	AVC (AVCD) repair Intermediate (Transitional)				



White columns denote <u>previous</u> STAT Mortality Score and Category

#### Appendix C Updates Continued

Appendix C: The Society of Thoracic Surgeons - European Association for Cardio-Thoracic Surgery Congenital Heart Surgery Mortality Categories (STAT Mortality Categories) (March 1, 2022)

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30	ASD repair, Patch	0.1	0.1	1	1
	AVC (AVCD) repair Intermediate (Transitional)				



Yellow columns denote <u>updated</u> STAT Mortality Score and Category

# Appendix C Updates Continued

Procedure Harvest Code	Procedure Name	STAT Mortality Score	2020 STAT Mortality Score	STAT Mortality Category	2020 STAT Mortality Category
*2170	Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA)	2.5	2.7	4	5
5019	Pulmonary venous stenosis repair + ASD partial closure		2.8		5
*2180	Hybrid Approach "Stage 1", Stent placement in arterial duct (PDA) + application of RPA and LPA bands	3.1	3	5	5
5030	Ebstein's repair + PDA closure, Surgical		3		5
5017	Damus-Kaye-Stansel procedure (DKS) (creation of AP anastomosis without arch reconstruction) + Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)		3.2		5



Blue columns indicate fields for Version 6.22 (6.23) & cannot be used until surgery dates on or after version go live

#### Software Vendor Notes

- Currently vendors are not required to maintain STAT scores within software
- Those with STAT scores are not required to update scores between data versions

When updating primary procedures may not look correct in software

Updates to software come from the vendor

#### Primary Procedure Mismatch Report

Identifies if your entered Primary Procedure is following the STS rules for identifying the Primary Procedure

Recommended to update your procedures to match the report

Rules added overtime so Primary Procedure determination may change overtime

# Primary Procedure Mismatch Report Updates

#### **Update Implications:**

- New mismatches for previous surgery years
- Recommended to update primary procedure mismatches
  - Refer to updated Appendix C

https://www.sts.org/sites/default/files/Database%20Manuals/Appendix%20C%20-%202022 3.1.2022.pdf

### Future Implications

Anticipate more changes with version upgrade:

-- Combination procedures with retrospective application

-- Version procedures

I now have 50 primary procedure mismatches in the Primary Procedure Mismatch Report. Can this be true?

#### Yes

 The number of mismatches depends on your surgical program's procedures completed

I changed a procedure in a previous harvest and now it says to change it again. How do I handle this?

#### Update the mismatches

- Review the reason for mismatch:
  - STAT score update
  - New exception rule
- Update the primary procedure in your local software and resubmit your data file to IQVIA

My surgeon feels a different procedure is primary than what the Primary Procedure Mismatch Report lists. How do I handle this?

#### Educate the Surgeon

- Utilize resources:
  - CHSD rules for determining primary diagnosis/procedure
  - Appendix C
  - Send an FAQ to the Core Group

Know the correct procedure will still be analyzed but will not match your local data

How do I verify the Primary Procedure Report is correct?

#### Utilize your Resources

CHSD rules for determining primary diagnosis/procedure

https://www.sts.org/sites/default/files/Database%20Manuals/Determination %20of%20Primary%20Diagnosis%20and%20Primary%20Procedure 3 14 202 2.pdf

Appendix C

https://www.sts.org/sites/default/files/Database%20Manuals/Appendix%20C%20-%202022 3.1.2022.pdf

Send an FAQ to the Core Group

The Primary
Procedure Mismatch
report states a
procedure without a
STAT score is primary.
Is this correct?

#### Remember what Updated

- There are existing procedures that now have an associated STAT Mortality
   Score and Category
- Vendor software may not have the STAT scores updated

# Missing Data Clarifications -Analysis Report Overview

## Fields Required for Mortality Analysis

#### If any listed fields missing, the case is excluded from all mortality analyses

- Date of admission
- Primary Diagnosis
- Primary Procedure

- Mortality status hospital DC
- Mortality status 30 days
- Mortality status database DC

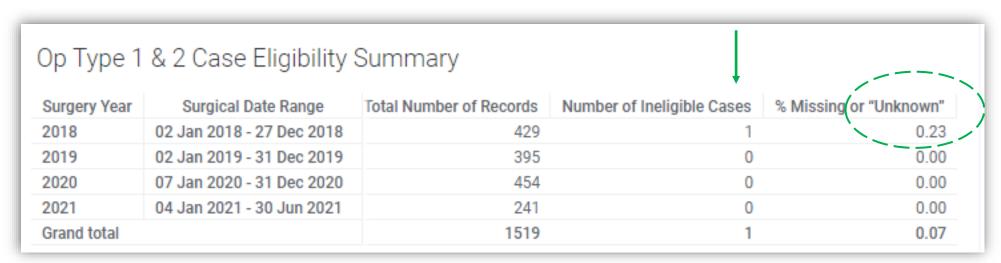
And if >10% missing within the participant data file, the participant is excluded

And if >2% missing per analysis year within the participant data file, the participant is excluded

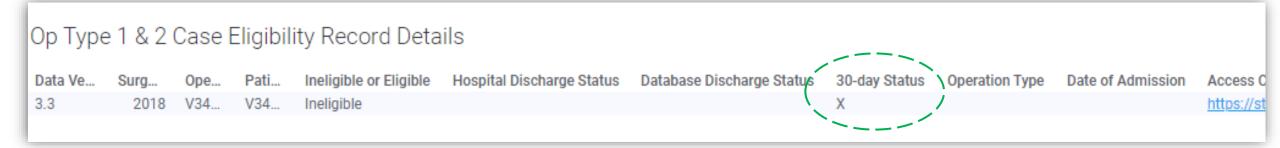
**Source:** IQVIA Library - CHSD Analyses Overview

Determination of Case Eligibility for Inclusion in Mortality Analysis

## Mortality Eligibility Summary Report



Identifies
missing
thresholds
for
participant
exclusion by
year



Reports identify missing only – does not apply logic applied in the analysis (i.e., analysis exclusions)

# **Analysis Report Overview Clarified**

• Thresholds for each surgical year in the analytic window must be met to be included in the mortality / risk adjusted analysis

#### **Mortality Status at:**

#### **Database Discharge / Hospital Discharge / 30 Days after Surgery**

01/01/18 – 12/31/18 Participant must have 2% or less missing /unknown for the mortality fields AND

01/01/19 – 12/31/19 Participant must have 2% or less missing /unknown for the mortality fields AND

01/01/20 – 12/31/20 Participant must have 2% or less missing /unknown for the mortality fields AND

01/01/21 – 12/31/21 Participant must have 2% or less missing /unknown for the mortality fields

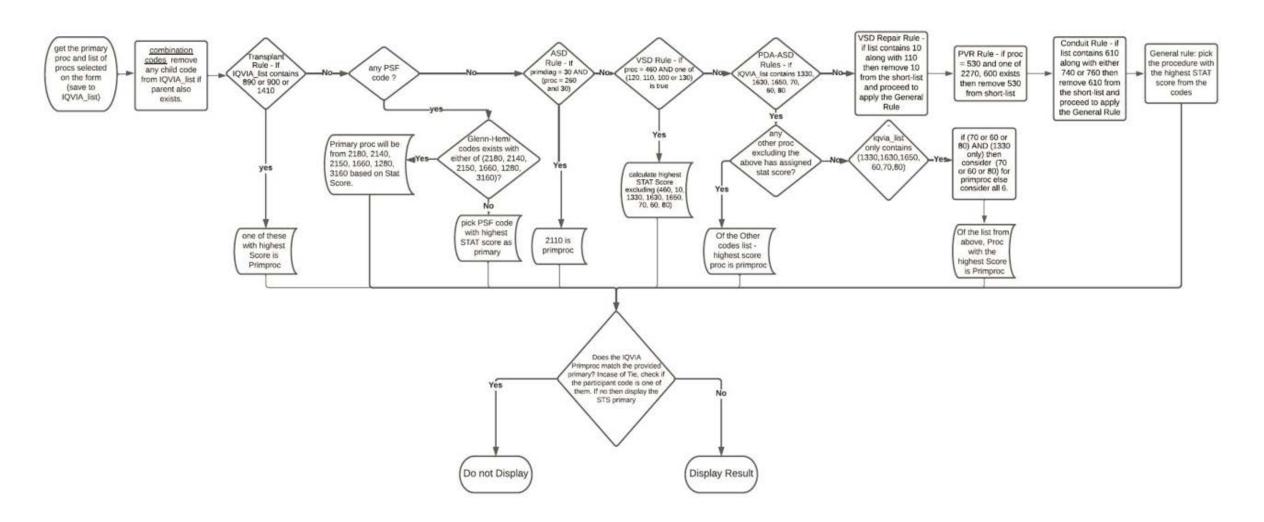
For one of the 12 month periods in the analytic window I have 2.1% missing, however my overall missing is <2%. Will I still be excluded from the mortality analysis or receive a table 16?

#### Mortality Exclusion: YES

- The % missing thresholds must be met for each year within the analytic window
- Refer to the Analysis Overview posted in the IQVIA Library



#### Primary Procedure Technical Process Flow



#### IQVIA Known Issues & Updates

Please access the Library to review the March 2022 Known Issues and Updates list in the platform for the related CHSD items.

The development team is reviewing additional items and will post an updated version for April 2022.

#### IQVIA Update

Please note: Submitted tickets are currently under review and the IQVIA support team will follow up on resolution and/or target release confirmation.

The IQVIA Team is currently reviewing items that will be released in an upcoming release. Those items will be posted to the Notifications section.



### Analysis Report Questions

- Please contact IQVIA Support
  - chsdtechsupport@iqvia.com
- STS/DCRI will be looped in as needed when tickets are escalated to Tier 2



#### **Contact Information**

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Congenital and General
Thoracic

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- 312-202-5822

Database Operational Questions

STSDB@sts.org

# **Upcoming CHSD Webinars**

# Monthly Webinar

• May 17@ 12pm CT

# Upgrade Webinar

•April 19 @ 12pm CT



#### Open Discussion



Please use the Q&A Function.



We will answer as many questions as possible.



We encourage your feedback and want to hear from you!

# **STS National Database**

Trusted. Transformed. Real-Time.



# THANK YOU FOR JOINING!