



Society of Thoracic Surgeons

Congenital Heart Surgery Database  
Monthly Webinar

August 16, 2022

# CHSD Monthly Webinar

- Welcome and Introductions
- STS Update
- AQO 2022
- Education (Chasity Wellnitz)
- User Feedback
  - Include Ticket Number/Case Number

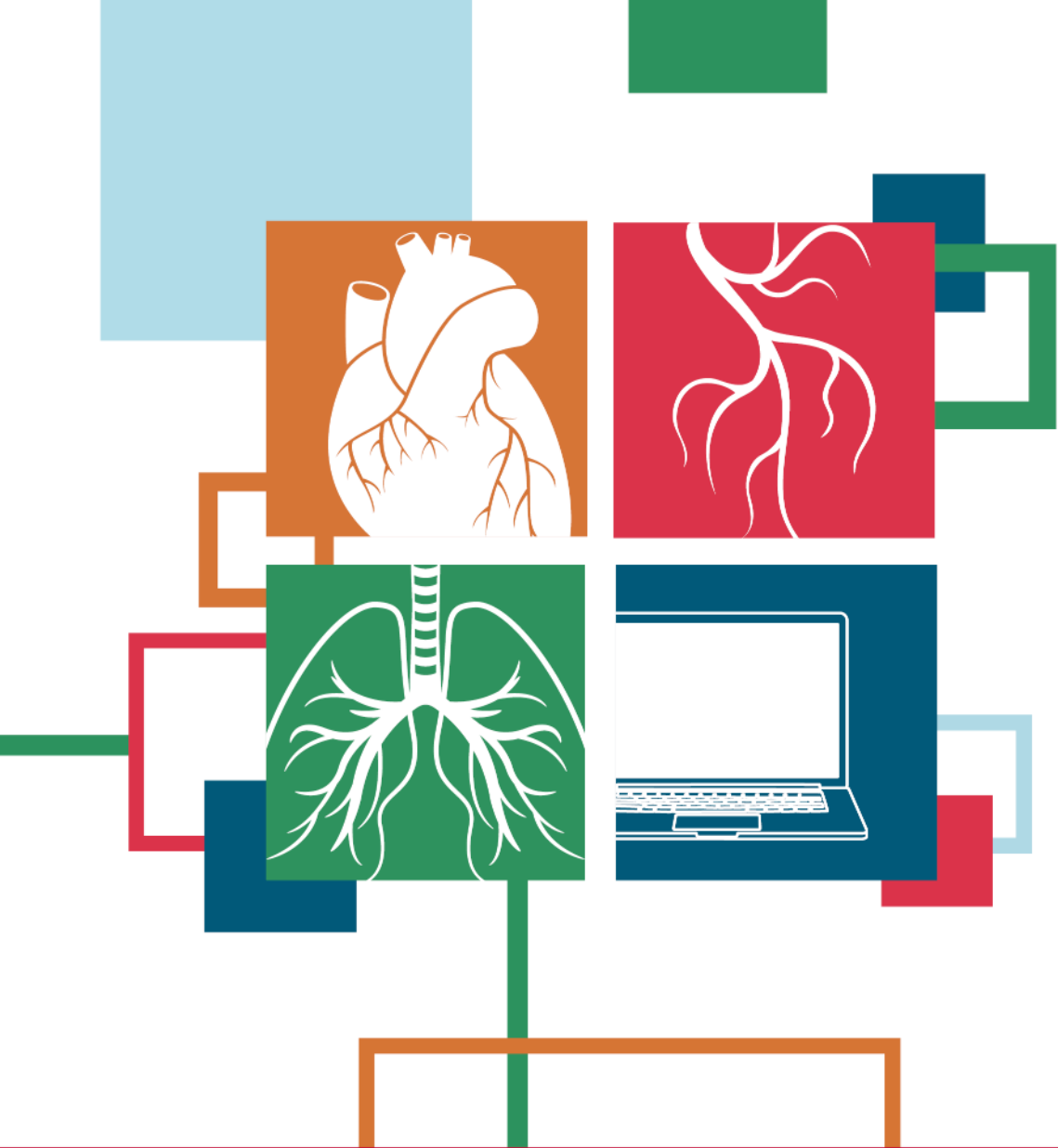


# STS Updates

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- **August Training Manual posted**
- **2022 Harvest Update**
  - Task Force decision to conduct only the Fall 2022 Harvest (OR dates up through June 30, 2022)
  - Harvest close date is scheduled for **September 16 @ 11:59pm ET**
  - Opt Out by **September 20<sup>th</sup>**
  - **Updated STAT Scores will be implemented in Analysis**
    - **Reporting period of 7/1/2018 – 6/30/2022**
- **Public Reporting Update**
  - Website to be updated by the end of August
  - Will utilize results from the Fall 2021 Harvest Analysis
  - Questions should be directed to Sydney Clinton (sclinton@sts.org)
- **2022 Audit Update**
  - 7/15 - Email Notification Letters sent (PDFC and Surgeon Rep) to selected sites
  - For those selected sites, audit related questions should be directed to CRS





# ADVANCES IN QUALITY & OUTCOMES: A Data Managers Meeting

October 26-28, 2022 ■ PROVIDENCE, RHODE ISLAND



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# ADVANCES IN QUALITY & OUTCOMES: A Data Managers Meeting

October 26-28, 2022 ■ PROVIDENCE, RHODE ISLAND

## AQO Registration is Open!

## Receive Early Bird Registration Pricing through Friday, August 26.

STS MEMBER	Early Bird (August 26, 2022)	Standard
One Track	\$550	\$650
Two Tracks	\$900	\$1,100
Multi-Day (Three Tracks)	\$1,150	\$1,450
Virtual Pass	\$300	\$300

NON-MEMBER	Early Bird (August 26, 2022)	Standard
One Track	\$650	\$750
Two Tracks	\$1,100	\$1,300
Multi-Day (Three Tracks)	\$1,450	\$1,750
Virtual Pass	\$400	\$400



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# Friday, October 28, 2022 – Congenital Session

	In Person	Virtual Pass
• In-person sessions with live Q&A	✓	
• On-demand content (available mid-October)	✓	✓
• Recorded archive of in-person sessions (available mid-November)	✓	✓
• Breakfast, lunch, and refreshment breaks	✓	
• Personal interactions and networking with peers	✓	
• Networking Reception with speakers, vendors, and colleagues	✓	
• Face-to-face time with exhibitors	✓	
• Complete exhibitor listing	✓	✓
• Exhibit Hall giveaways and Passport to Prizes	✓	
• AQO Hot Topics Webinar (in January)	✓	✓
• Digital conference materials (PowerPoint presentations, handouts, and case scenarios)	✓	✓
• Opportunity to view and vote on your favorite e-poster	✓	✓
• Continuing Education/CEU Credits	✓	✓
• Explore the sights and sounds of Providence, Rhode Island	✓	



**The Society  
of Thoracic  
Surgeons**

**ADVANCES IN QUALITY & OUTCOMES:  
A Data Managers Meeting**  
October 26-28, 2022 ■ PROVIDENCE, RI



- Educational sessions and social events will take place at the Rhode Island Convention Center (1 Sabin St, Providence, RI 02903).
- A block of rooms have been reserved at the Omni Providence Hotel (1 West Exchange St., Providence, RI 02903). The special AQO group rate of \$259, plus state and local taxes, is guaranteed through **Tuesday, October 4**, or until the group block is sold out.
  - [Reserve online](#)
  - Call 401-598-8000. Be sure to reference “AQO” or “Advances in Quality and Outcomes.”



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# Education

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Chasity Wellnitz  
CHSD Consultant/Core Group  
Phoenix Children's Hospital



# Webinar Discussion Topics

- **Education**  
Norwood source of pulmonary  
blood flow
- **Definition Update**  
Fontan, Other procedure
- **Harvest Tools**

# Norwood Procedure:

*Source of pulmonary  
blood flow coding*

# Norwood Procedure and Source of Pulmonary Blood Flow

**When coding (870) Norwood procedure, the second procedure must be the source of pulmonary blood flow**

Procedures:

1. (870) Norwood procedure
2. Source of pulmonary blood flow
3. Other completed procedures

**Norwood procedures without a source of pulmonary blood flow will not be analyzed**

# Sources of Pulmonary Blood Flow

*The source of pulmonary blood flow must come from the following list:*

1. Shunt, Systemic to pulmonary, Modified Blalock-Taussig Shunt (MBTS)
2. Shunt, Systemic to pulmonary, Central (from aorta or to main pulmonary artery)
3. Shunt, Systemic to pulmonary, Other
4. Conduit placement, RV to PA
5. Conduit placement, LV to PA
6. Conduit placement, Ventricle to aorta
7. Bidirectional cavopulmonary anastomosis (BDCPA) (bidirectional Glenn)
8. Glenn (unidirectional cavopulmonary anastomosis) (unidirectional Glenn)
9. Bilateral bidirectional cavopulmonary anastomosis (BBDCPA) (bilateral bidirectional Glenn)
10. HemiFontan

# Sources of Pulmonary Blood Flow + Procedure Codes

*The source of pulmonary blood flow must come from the following list:*

(1590) Shunt, Systemic to pulmonary,  
Modified Blalock-Taussig Shunt (MBTS)

(1600) Shunt, Systemic to pulmonary, Central  
(from aorta or to main pulmonary  
artery)

(1610) Shunt, Systemic to pulmonary, Other

(610) Conduit placement, RV to PA

(620) Conduit placement, LV to PA

(1774) Conduit placement, Ventricle to aorta

(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

# Sources of Pulmonary Blood Flow + Long List Terms

*The source of pulmonary blood flow must come from the following list:*

1. Palliation, Shunt - systemic-to-pulmonary, Blalock-Taussig (BTS), (Classic BTS)
2. Palliation, Shunt - systemic-to-pulmonary, Blalock-Taussig (BTS), (Classic BTS), Left
3. Palliation, Shunt - systemic-to-pulmonary, Blalock-Taussig (BTS), (Classic BTS), Right
4. Palliation, Shunt - systemic-to-pulmonary, Blalock-Taussig (BTS), Modified Blalock-Taussig (MBTS) (deLeval shunt) (GOS shunt)
5. Palliation, Shunt - systemic-to-pulmonary, Blalock-Taussig (BTS), Modified Blalock-Taussig (MBTS) (deLeval shunt) (GOS shunt), Left (MBTSL)
6. Palliation, Shunt - systemic-to-pulmonary, Blalock-Taussig (BTS), Modified Blalock-Taussig (MBTS) (deLeval shunt) (GOS shunt), Right (MBTSR)
7. Palliation, Shunt - systemic-to-pulmonary, Central (from aorta or to main pulmonary artery [or both])
8. Palliation, Shunt - systemic-to-pulmonary, Central with tube graft (from aorta or to main pulmonary artery [or both])
9. Palliation, Shunt - systemic-to-pulmonary, Central with tube graft (from aorta to left pulmonary artery)
10. Palliation, Shunt - systemic-to-pulmonary, Central with tube graft (from aorta to main pulmonary artery)
11. Palliation, Shunt - systemic-to-pulmonary, Central with tube graft (from aorta to right pulmonary artery)
12. Palliation, Shunt - systemic-to-pulmonary, Potts - Smith type (descending aorta to pulmonary artery)
13. Palliation, Shunt - systemic-to-pulmonary, Waterston type (ascending aorta to pulmonary artery)

# Sources of Pulmonary Blood Flow + Long List Terms

*The source of pulmonary blood flow must come from the following list.*

14. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification (RV to PA valveless conduit)
15. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification (RV to PA valveless conduit), No proximal shunt patch + Distal shunt patch
16. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification (RV to PA valveless conduit), No proximal shunt patch + No distal shunt patch
17. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification (RV to PA valveless conduit), Proximal shunt patch + Distal shunt patch
18. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification (RV to PA valveless conduit), Proximal shunt patch + No distal shunt patch
19. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification with valve (RV to PA valved conduit)
20. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification with valve (RV to PA valved conduit), No proximal shunt patch + Distal shunt patch
21. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification with valve (RV to PA valved conduit), No proximal shunt patch + No distal shunt patch
22. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification with valve (RV to PA valved conduit), Proximal shunt patch + Distal shunt patch
23. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, "Sano" modification with valve (RV to PA valved conduit), Proximal shunt patch + No distal shunt patch
24. Norwood (Stage 1)-modifier, Source of pulmonary blood flow, Neo-aorta to PA anastomosis + intervening fenestrated baffle
25. Palliation, Cavopulmonary anastomosis (SVC to PA), Bidirectional (BDCPA) (Modified Glenn)
26. Palliation, Cavopulmonary anastomosis (SVC to PA), Bidirectional (BDCPA) (Modified Glenn), Left

# Sources of Pulmonary Blood Flow + Long List Terms

*The source of pulmonary blood flow must come from the following list:*

27. Palliation, Cavopulmonary anastomosis (SVC to PA), Bidirectional (BDCPA) (Modified Glenn), Right
28. Palliation, Cavopulmonary anastomosis (SVC to PA), Unidirectional Glenn anastomosis
29. Palliation, Cavopulmonary anastomosis (SVC to PA), Unidirectional Glenn anastomosis, Left
30. Palliation, Cavopulmonary anastomosis (SVC to PA), Unidirectional Glenn anastomosis, Right
31. Palliation, Cavopulmonary anastomoses (SVC's to PA), Bilateral Bidirectional (BBDCPA)
32. Palliation, Hemi-Fontan
33. Conduit placement, Conduit: LV to PA
34. Conduit placement, Conduit: LV to PA, Homograft
35. Conduit placement, Conduit: LV to PA, Nonhomograft conduit reconstruction
36. Conduit placement, Conduit: Other
37. Conduit placement, Conduit: Other, Homograft
38. Conduit placement, Conduit: Other, Nonhomograft conduit reconstruction



# Different from Procedure Specific Factors -

*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



*Also specified in the PSF section under Norwood – for Norwoods to be analyzed, must code as the second procedure (removed in V.6.23)*



*Fontan, Other Procedure  
Coding*

( 1030)  
Fontan,  
Other

***Current TM definition:***

Other Fontan procedure not specified in procedure codes. *May include takedown of a Fontan procedure.* “The Fontan” is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart.

( 1030)  
Fontan,  
Other

***Updated TM definition:***

Other Fontan procedure not specified in procedure codes. ~~May include takedown of a Fontan procedure.~~ “The Fontan” is defined as an operation or intervention that results in caval flow from both the upper and lower body draining to the pulmonary circulation in a patient with a functionally univentricular heart.

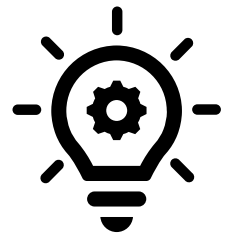
# How to Code Fontan Takedown?

## Current 3.41

- Code (2010) Cardiac procedure, Other
- Can go back and update prior cases where a Fontan takedown was performed

## Future 6.23

- Code (3600) Fontan, Takedown
- Cannot code until date of version go-live





# *Harvest Tool Review*

# Available Harvest Reports / Tools

Data Quality  
Report

Harvest Summary  
Report

Missing Variable  
Report

Primary  
Procedure  
Mismatch Report

Mortality  
Eligibility  
Summary Report

# Available Harvest Reports/Tools

Data Quality  
Report

Harvest Summary  
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Missing Variable  
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Primary  
Procedure  
Mismatch Report

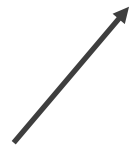
Mortality  
Eligibility  
Summary Report



# Data Quality Report (DQR)



Click *View Reports* to  
access (2) reports



- Location: Upload screen
- Use to identify:
  - errors & warnings
  - combination code errors

***Note: reporting only for the  
uploaded file at that  
date/time***

# Data Quality Report (DQR)

← Click on the pie to see the errors/warnings

**CRITICAL ERROR:**  
Missing Primary Procedure



Records Level Validation				
Validat...	Error Type	O...	Short ...	Message
Critical	Warning/Error occurred w...	V3...		Cannot save form with Critical error(s)
Critical	ValidationErrors occurred ...	V3...	primproc	critical : caseform-primproc_reqi Primary P
Critical	Warning/Error occurred w...	V3...		Cannot save form with Critical error(s)
Critical	ValidationErrors occurred ...	V3...	primproc	critical : caseform-primproc_reqi Primary P
Critical	Warning/Error occurred w...	V3...		Cannot save form with Critical error(s)
Critical	ValidationErrors occurred ...	V3...	primproc	critical : caseform-primproc_reqi Primary P

Records Level Validation				
Validat...	Error Type	O...	Short ...	Message
warning	ValidationErrors occurred ...	V3...	proced...	warning : QCH4888 You have selected the proc...

↑ **WARNING:** Combo Code error

## Data Quality Report (DQR)

### Example: Combination Code Warning

warning : QCH4888 You have selected the procedure 'Arterial switch operation (ASO)' and one of the procedures 'VSD repair, Primary closure' or 'VSD repair, Patch' or 'VSD repair, Device' or 'VSD, Multiple, Repair', but not 'Arterial switch operation (ASO) and VSD repair'. Please review.

← *Go back to software and enter the combo code then re-upload file*

# Note – Fontan + AV Valvuloplasty

## Missed coding was omitted from the warning list

- Analyzed appropriately - DCRI changed the separate procedures to the combination procedure
- IQVIA working to rectify

Use local software to identify missed combination codes

# Note – Fontan + AV Valvuloplasty

## If any of the following Fontan procedures:

- 950 - Fontan, Atrio-pulmonary connection
- *or* 960 - Fontan, Atrio-ventricular connection
- *or* 970 - Fontan, TCPC, Lateral tunnel, Fenestrated
- *or* 980 - Fontan, TCPC, Lateral tunnel, Nonfenestrated
- *or* 1000 - Fontan, TCPC, External conduit, Fenestrated
- *or* 1010 - Fontan, TCPC, External conduit, Nonfenestrated
- *or* 2780 - Fontan, TCPC, Intra/extracardiac conduit, Fenestrated
- *or* 2790 - Fontan, TCPC, Intra/extracardiac conduit, or Nonfenestrated
- *or* 3310 - Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Fenestrated
- *or* 3320 - = Fontan, TCPC, External conduit, hepatic veins to pulmonary artery, Nonfenestrated
- *or* 1025 - Fontan revision or conversion (Re-do Fontan)
- *or* 1030 - Fontan, Other

## is completed with one of the listed AV valvuloplasty procedures:

- 2300 - Valvuloplasty, Common atrioventricular valve
- *or* 460 - Valvuloplasty, Tricuspid
- *or* 830 - Valvuloplasty, Mitral

**code combination procedure (2340)  
Fontan + Atrioventricular  
Valvuloplasty**

# Critical Summary Report

## Submission Summary

Submission Date	Upload ID	First Surgery Date	Last Surgery	File Status	Total Records	Number of Successful Records	Number of Failed Records	Number of Records Not Changed	Data Qu...
08/11/2022 05:5...	148660	07/01/2022	07/12/2022	Passed	26	26	0	25	<a href="https://st...">https://st...</a>
08/11/2022 05:5...	148659	07/11/2022	07/12/2022	Passed	8	8	0	8	<a href="https://st...">https://st...</a>
08/11/2022 04:4...	148650	07/01/2022	08/05/2022	Passed	74	71	3	0	<a href="https://st...">https://st...</a>

- Housed within DQR
- Lists all DQRs within entered date range
- Useful if uploaded multiple data files during the harvest period

Click on the DQRs to access

Enter date range and click Run Report

# Available Harvest Reports / Tools

Data Quality  
Report

Harvest  
Summary  
Report

Missing Variable  
Report

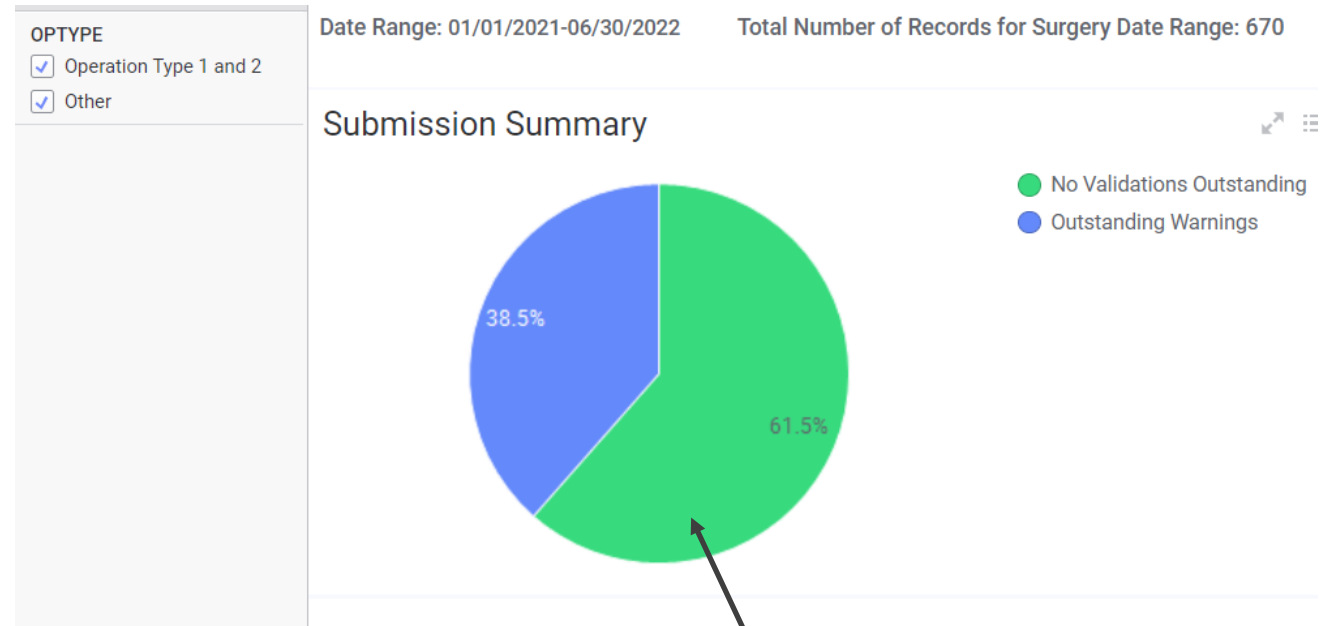
Primary  
Procedure  
Mismatch Report

Mortality  
Eligibility  
Summary Report

# Harvest Summary Report

- Location: Operational Reports
- Use to identify:
  - All warnings

*Note: reporting for entered surgical date range*



Click on the pie to see the case list



# Available Harvest Reports / Tools

Data Quality  
Report

Harvest Summary  
Report

Missing  
Variable  
Report

Primary  
Procedure  
Mismatch Report

Mortality  
Eligibility  
Summary Report

# Missing Variable Report (MVR)

Parameters: Enter surgery date range and Yes/No Index Ops

[Export](#)

**Report Description:**  
Use this report to determine which variables are missing data for the date range selected.

Date Range: 07/01/2022 - 08/12/2022

All  
Mortality  
Anesthesia  
Risk Model

Operation Type  
 OPERATION TYPE 1 AND 2

### Missing Variable Summary

Shortname	Name	Missing %	N
ABLDGASMGT	ARTERIAL BLOOD GAS MANAG...	22	7/32
ADMITFROMLOC	LOCATION FROM WHICH PATIE...	3	1/38
AIRWAYINSITU	AIRWAY IN-SITU (ETT OR TRAC...	43	15/35
AIRWAYSIZESINTUB	AIRWAY SIZE - ENDOTRACHEAL...	5	1/19
AIRWAYTYPE	AIRWAY TYPE [3]	43	15/35
ANESADVEVENT	ANESTHESIA ADVERSE EVENT [3]	14	5/35
ANESTHESIA	ANESTHESIOLOGY DATA COLLE...	3	1/38
ANTENATALDIAG	ANTENATAL DIAGNOSIS OF CO...	5	2/38
ANTICOAGUSED	ANTICOAGULANT USED	25	8/32
ANTIFIBUSAGE	ANTIFIBRINOLYTIC USED INTRA...	3	1/38
APGARKNOWN	APGAR SCORES KNOWN	5	2/38
ARTLINE	ARTERIAL LINE [3]	43	15/35

- Location: Operational Reports
- Use to identify:
  - Missing fields
- Filters available:
  - Risk model variables
  - Mortality variables
  - Op types 1 & 2 vs. all others

# Missing Variable Report (MVR)

Filter for Risk Model  
missing variables →

↑  
Identifies cases with missing variables from the  
risk model / missing percent / number of cases

Filter for Mortality  
missing variables ↘

↑  
Identifies cases with missing variables from the  
mortality analysis / missing percent / number of cases

# Available Harvest Reports / Tools

Data Quality  
Report

Harvest Summary  
Report

Missing Variable  
Report

Primary  
Procedure  
Mismatch Report

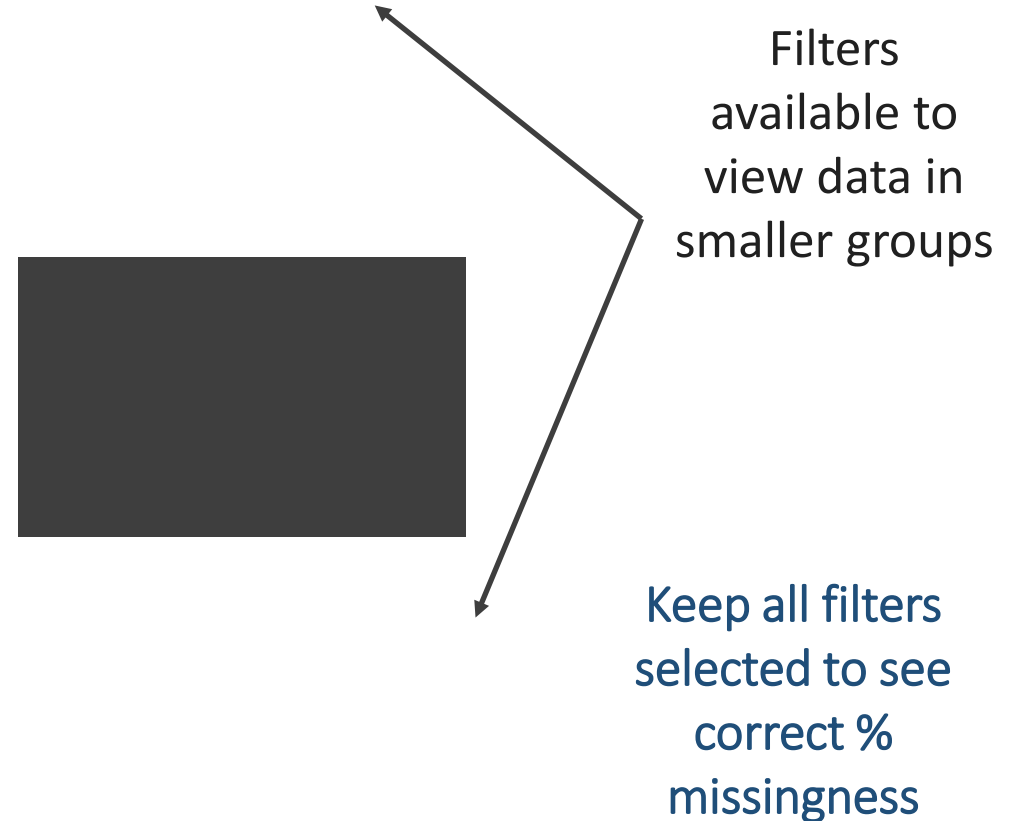
Mortality  
Eligibility  
Summary Report

# Mortality Eligibility Summary Report

- Location: Operational Reports
- Use to identify missing fields for mortality analysis
- Mortality status at:
  - Hospital discharge
  - Database discharge
  - 30 days after surgery

Note: Must also have Surgdt, PrimDiag, PrimProc – if these are missing, will not show up in this report  
(Identified as critical errors)

Parameters: Harvest surgery date range



# Mortality Eligibility Summary Report

## Op Type 1 & 2 Case Eligibility Summary

Surgery Year	Surgical Date Range	Total Number of Records	Number of Ineligible Cases	% Missing or "Unknown"
2018	02 Jan 2018 - 27 Dec 2018	429	1	0.23
2019	02 Jan 2019 - 31 Dec 2019	395	0	0.00
2020	07 Jan 2020 - 31 Dec 2020	454	0	0.00
2021	04 Jan 2021 - 30 Jun 2021	241	0	0.00
Grand total		1519	1	0.07

Identifies missing thresholds for participant exclusion by year

## Op Type 1 & 2 Case Eligibility Record Details

Data Ve...	Surg...	Ope...	Pati...	Ineligible or Eligible	Hospital Discharge Status	Database Discharge Status	30-day Status	Operation Type	Date of Admission	Access C
3.3	2018	V34...	V34...	Ineligible			X			<a href="https://st">https://st</a>

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

# Available Harvest Reports / Tools

Data Quality  
Report

Harvest Summary  
Report

Missing Variable  
Report

Primary  
Procedure  
Mismatch Report

Mortality  
Eligibility  
Summary Report

# 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

Once changed in software, upload a new data file

## Primary Procedure Mismatch Record Details

Data Version	Surgery Year	O...	P...	Participant Primary	Participant Primary Procedure Description	STS Primary	STS Primary Procedure Description	Access
3.41	2022	V3...	V...	590	Valvuloplasty, Pulmonic	510	RVOT procedure	<a href="https://">https://</a>

Entered/uploaded primary procedure



STS defined primary procedure



## Question:

How do I know if I have missed coding the available combination codes?

## *Data Quality Report*

- If you have coded both procedures that make up the combination, the DQR will report as a **warning**
- Refer to STS Procedure Codes document under Add'l Resources

[https://www.sts.org/registries-research-center/sts-national-database/congenital-heart-surgery-database/data-collection/STS Combination Procedure Codes](https://www.sts.org/registries-research-center/sts-national-database/congenital-heart-surgery-database/data-collection/STS%20Combination%20Procedure%20Codes)

## Question

How do I know what the error/warning message is telling me?

## *IQVIA Library*

- Refer to posted document:  
Errors and Warnings Reference List

## Question:

How do I determine if I have missing mortality fields used in analysis?

## *Missing Variable Report (MVR)* + *Mortality Eligibility Summary*

- MVR will identify all missing fields, and can be filtered for fields used in risk model & mortality analyses for the entered surgical date range
- Mortality Eligibility Summary will identify missing fields used for mortality analysis for the harvest date range

## Question:

The MVR is saying a field is missing; however, I am seeing the field completed in my software. How do I rectify?

## *Work with your vendor*

- IQVIA is not receiving the data you have entered into your software
- Contact your vendor first to see if they can identify an upload or file transfer issue



**IQVIA Update**  
**Joe Brower**

# IQVIA Important Updates July 2022

The below items were resolved and deployed to the production environment.

**Notifications were posted to the platform to inform users for the noted items.**

## **Risk Adjusted Report – Fall 2021 Harvest Report**

**STS-8576** – An error is appearing on Table 1 and Table 7 when selecting a result entry on the report. The error displays, *“Could not load on-demand data for Table(x)\_CaseList.”*

## **Uploader**

**STS-8555** – The uploader is displaying a critical error on records that have a surgery date of 7/1/2022 or later. The application displays, *“Core date does not match any form version.”* Operation records prior to 7/1/2022 are not impacted and will upload as expected.

# IQVIA Important Updates July 2022

The below items were resolved and deployed to the production environment.

**Notifications were posted to the platform to inform users for the noted items.**

## **Risk Adjusted Report – Fall 2021 Harvest Report Con't**

**STS-8578 – Print/Export** - The STS aggregate column results for Table 1 and Table 18 are displayed on a separate page in the PDF report. This has been corrected and the STS results are displayed on the same page with the participant results for the impacted tables.



# IQVIA Updates August 2022

**The below items are currently under review by the IQVIA Development Team:**

**STS-8510** - CHSD Non-Analyzed Dashboard, update the STAT category to reflect latest changes to the Appendix C updates on the parameter selection page.

# 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
  - [chsdsupport@iqvia.com](mailto:chsdsupport@iqvia.com)
- STS/DCRI will be looped in as needed when tickets are escalated to Tier 2



# Contact Information

Leigh Ann Jones, STS  
National Database Manager,  
Congenital and General  
Thoracic

- [Ljones@sts.org](mailto:Ljones@sts.org)
- 312-202-5822

Database Operational  
Questions

- [STSDB@sts.org](mailto:STSDB@sts.org)

# Upcoming CHSD Webinars

## User Group Call

- September 6 @ 12pm CT

## Monthly Webinar

- September 20 @ 12pm CT

## New Data Manager Webinar – Note new date

- September 8 @ 1pm 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™

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THANK YOU FOR JOINING!