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Society of Thoracic Surgeons

General Thoracic Surgery Database Monthly Webinar

March 9, 2022

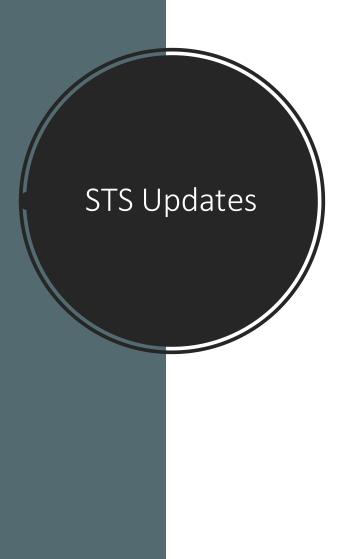
GTSD Monthly Webinar

- Welcome and Introductions
- STS Update
- STS Education (Ruth Raleigh, GTSD Consultant)
- IQVIA Update
- User Feedback
 - Include Ticket Number/Case Number



STS Updates

- Training Manual for March to be posted this week
- Fall 2021 Analysis Results
 - Released on Friday, February 25th
 - Official STS communication was sent via email to GTSD Participants
 - Pulmonary Resection for Lung Cancer Reports to be released end of March
 - Report related questions should be directed to <u>gtsdtechsupport@iqvia.com</u>
- GTSD Public Reporting
 - Next update is scheduled for this Spring
 - Will utilize results from Fall 2021 Harvest (July 1, 2018 June 30, 2021)
 - Questions should be directed to Sydney Clinton (sclinton@sts.org)
- GTSD Task Force Update
 - New Task Force Chair Dr. Chris Seder, Rush University Medical Center
 - Assuming role from Dr. Benjamin Kozower
 - Effective January 1, 2022



General Thoracic Surgery Database - 2022

	Harvest Submission Window Close	Opt-Out Date	Includes Procedures Performed Through:	Report Posting	Comments
Spring 2022	3/4/2022	3/8/2022	12/31/2021	Summer 2022	Star Rating
Fall 2022	9/9/2022	9/13/2022	6/30/2022	Winter 2022	Star Rating

- 2022 Harvest Schedule
- Spring 2022 Harvest is currently underway
 - Submit your data early and often

Ruth Raleigh GTSD Consultant/Core Group St. Joseph Mercy Hospital



Surgeon performs a robotic wedge resection with mediastinal lymph nodes that are sent for frozen. If lymph nodes are negative, a lobectomy is performed. If lymph nodes are positive, a lobectomy is not performed at that time.

How would you code clinstagmeth for seq 1620?

- 1. I would capture invasive mediastinal staging
- 2. I would not capture invasive mediastinal staging
 - 3. Not sure, this is a tricky one



Surgeon performs a VATS lymphadenectomy, nodes are sent for frozen. If lymph nodes are negative, a anatomical lung resection will be performed. If lymph nodes are positive, anatomical lung resection will not be performed at that time. The lymph nodes return negative and a segmenectomy is completed. How would you code clinstagmeth (seq. 1620)

- \uparrow 1. I would capture invasive mediastinal staging
 - 2. I would not capture invasive mediastinal staging
 - 3. Really Ruth, another tricky one, please help!



Surgeon performs a mediastinoscopy, nodes are sent for frozen. The patient has a single positive N1 lymph node. Surgical resection is performed, and additional lymph nodes are resected at that time.

Are the lymph nodes removed via mediastinoscopy captured in seq 1880 Lung Cancer Nodes Assessed?

- 1. Yes, they sure are
- ★2. No, they were removed BEFORE the surgical resection and additional lymph node resections were performed
 - 3. Not quite sure on this one, please explain further



Surgeon performs a mediastinoscopy, nodes are sent for frozen. The patient has a single positive N1 lymph node. Surgical resection is performed, and additional lymph nodes are resected at that time.

Are the lymph nodes removed via mediastinoscopy captured in seq 2040 PathStageLungN?





3. Maybe so, not quite sure

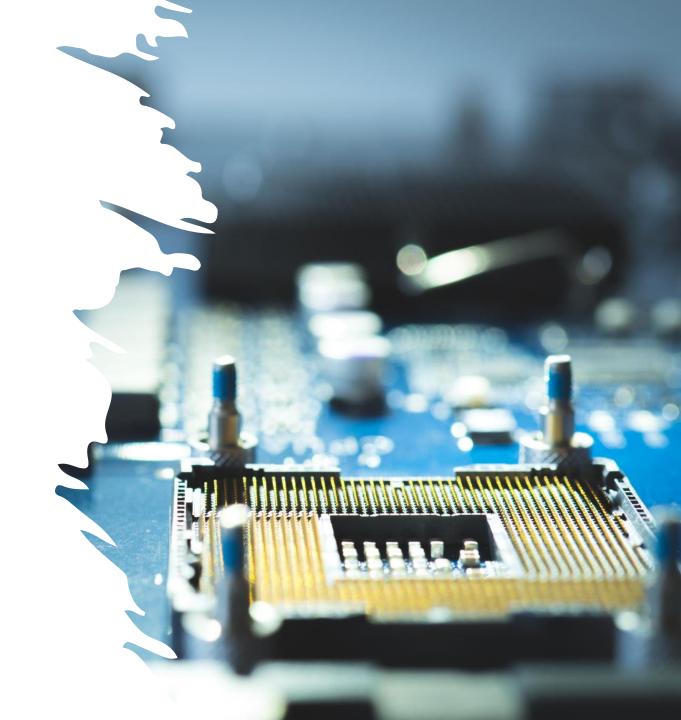


Patient is scheduled for a VATS lobectomy/LND for a T2N0M0 adenocarcinoma of the lung. Intraoperatively, the patient decompensates and dies prior to resection of the lung.

What do you code for primary procedure?

- 1. I would code Thoracoscopy, surgical; with lobectomy (32663) as the Primary Procedure. This procedure still counts because the patient was in the OR with the intent to perform an analyzed procedure.
 - 2. If an analyzed procedure was not completed, I would not enter this case
 - 3. I would code the minor procedures completed prior to patient expiration
 - 4. I don't know the answer to this one, please go over it again.

IQVIA Review Joe Brower



IQVIA Release February 2022



IQVIA Updates - February 2022 Release

The below items were released to production the weekend of March 5, 2022.

Uploader/Data Quality Report

STS-7504 – Critical validation checks have been added for non-analyzed cases where the following fields are identified as missing/null: **Participant ID**, **Record ID**, **Patient ID**, **Data Version**, **Demographic Data Version**. All records that are accepted into the data warehouse should include data for the noted fields.

STS-6935 – An incorrect validation error is firing when for the MortDate variable. The demographic data version of the record was previous to the implementation of the MortDate variable and therefore should not display on the DQR. The report logic will be updated, and this issue will be resolved.

Case Form

STS-7238 - Parent/Child relationship change - remove the parent field from the Mortality Date variable.

WHY: In the V5.21.1 data specifications, the field "Mortality Date" (MortDate) is located on the Demographics table, but the parent field "Hospital Discharge Status" (MtDCStat) is located on the Operations table.

If a patient has more than one operation, there could be conflicting parent values for the child field. To correct this issue, the parent should be removed from the Mortality Date field, making the field available to the user for data entry.

IQVIA Release February 2022

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IQVIA Updates - February 2022 Release

The below items were released to production the weekend of March 5, 2022.

Missing Variable Report

STS-7348 – The MVR report logic will be updated to flag the MT30STAT variable as missing if the "Unknown" status is selected.

STS-7302 – A difference was identified in the denominator count when compared to the participant dashboard, the report filter logic will be corrected to resolve this issue.

Harvest Summary Report

STS-7734 – Missing TINs are triggering errors and warnings for Direct Data Entry sites on the harvest summary report. Code logic will be updated to resolve this issue.

Participant Dashboard Report

STS-7686 - RaceDocumented (Seq. 200) is missing on the case form but not displaying as missing on the Participant Dashboard Report. The report logic will be updated to resolve this issue.

IQVIA Release March 2022

IQVIA Updates - March 2022 Release

GTSD Risk Adjusted Dashboard Report – Lung Cancer Resection Reports

The Lung Cancer Resection Reports are currently in development and testing. The beta testing phase for these results will begin soon.

Official communication will be provided to the GTSD community on the release timing for the Lung Cancer Resection results.



IQVIA Update Known Issues

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IQVIA Updates - March 2022

Known Issues

GTSD Risk Adjusted Dashboard Report – Fall 2021 Harvest Results – Legacy Reports

STS-7983 - All Legacy Report Results are displaying a limited number of available results. The IQVIA development team is actively working to resolve the impacted report calculations. Currently the impacted fields are displaying a dash (-) in the result field. IQVIA will post a follow up notification this week regarding the resolution availability of this issue on the platform.

STS-6909 – The Minimally Invasive Lobectomy for Clinical Stage I Lung Cancer calculation will be updated on the STS/NIS Comparison report per updated requirements confirmed with STS. IQVIA will post a follow up notification this week regarding the resolution availability of this issue on the platform.

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 to be targeted for an upcoming release. Those items will be posted to the Notifications section.

Analysis Report Questions

- Please contact IQVIA Support
 - <u>gtsdtechsupport@i</u> <u>qvia.com</u>

 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

Database Operational Questions

• Ljones@sts.org

• STSDB@sts.org

• 312-202-5822

User Group Call

- March 23 @ 2:30CT
 - April 27 @2:30CT

Monthly Webinar

- April 13 @ 1:30CT
- May 11 @ 1:30CT



Upcoming

GTSD Webinars

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!

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THANK YOU FOR JOINING!