STS National Database™

Trusted. Transformed. Real-Time.

Society of Thoracic Surgeons

General Thoracic Surgery Database
Monthly Webinar

July 13, 2022

GTSD Monthly Webinar

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

STS Updates

- **Training Manual for July to be posted by end of day**

- **Spring 2022 Analysis Results Released!**
  - Lung and Esophageal Composite Reports posted within the platform on July 11th
  - Participant Results for Benchmark and Legacy Reports will be released separately
    - Release date for these reports will be coming soon!
    - Communication will be sent when available
  - Updated Analyses Overview
  - Spring 2022 Harvest Composite Quality Ratings Summary now available
  - Report related questions should be directed to gtsdtechsupport@iqvia.com

- **IQVIA Platform Access**
  - Adding new user accounts or deactivating current user access
    - Complete the STS Participant Contact Form (https://www.sts.org/sts-participant-contact-form)
    - Contact STSDB@sts.org for assistance

STS Updates

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
- Fall 2022 Harvest is currently underway
 - Submit your data early and often!!!!!

STS Updates

- **GTSD Public Reporting**
  - Public Reporting Website was updated on July 11th
  - The updated website utilizes results from Fall 2021 Harvest (July 1, 2018– June 30, 2021)
  - Questions should be directed to Sydney Clinton (sclinton@sts.org)

- **2022 Audit Underway**
  - Audit Notification and Instruction Letters have been sent – STS audit webpage has been updated with 2022 audit details
  - Selected sites please reach out to CRS with audit related questions.
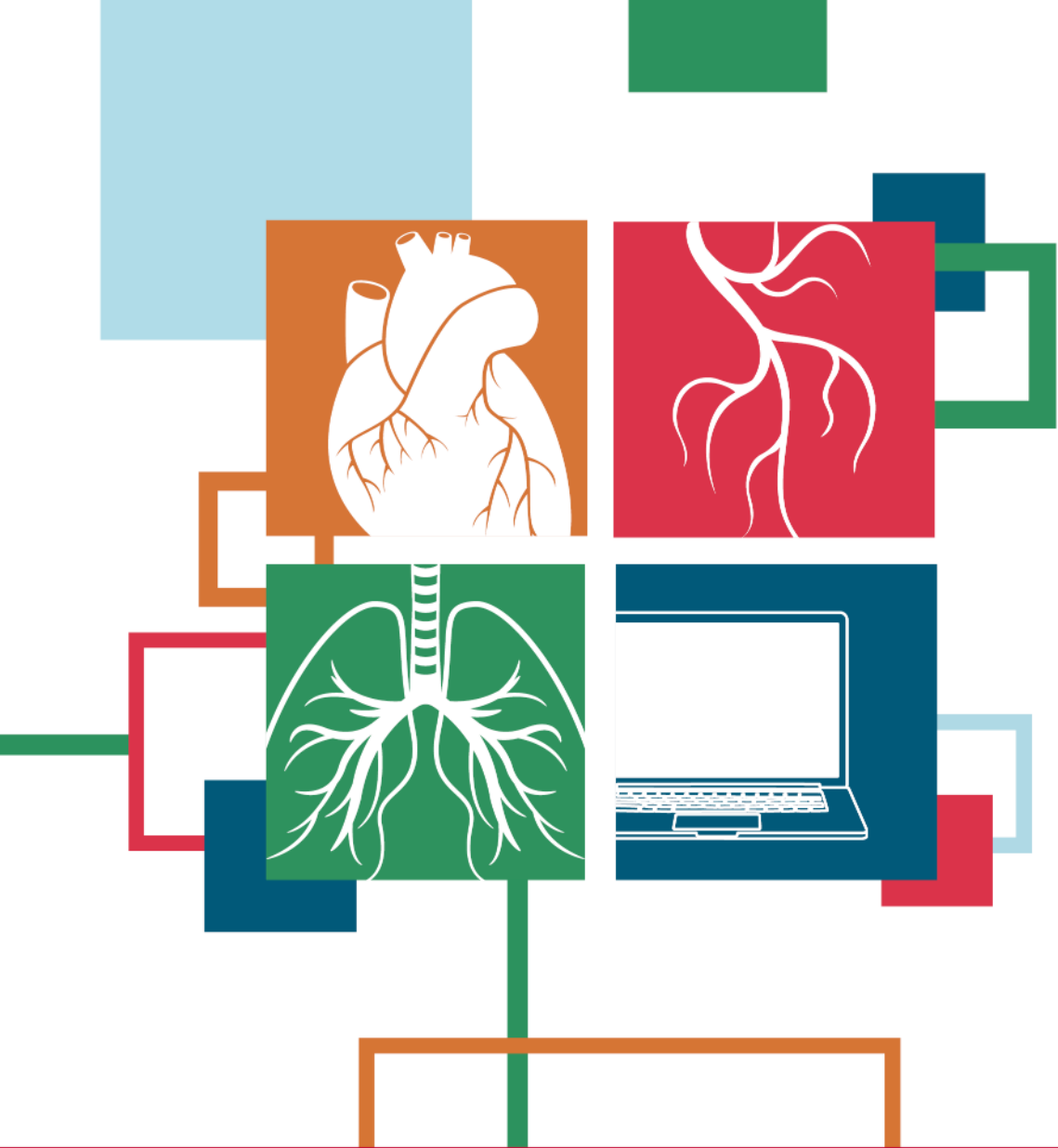
ADVANCES IN QUALITY & OUTCOMES:
A Data Managers Meeting
October 26–28, 2022 ▪ PROVIDENCE, RHODE ISLAND

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

STS National Database™
Trusted. Transformed. Real-Time.

Wednesday, October 26, 2022 – General Thoracic 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	✓	

al Database™
l-Time.

- 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."

STS AQO IS GOING GREEN!!!!!

All materials will be posted and available for download.
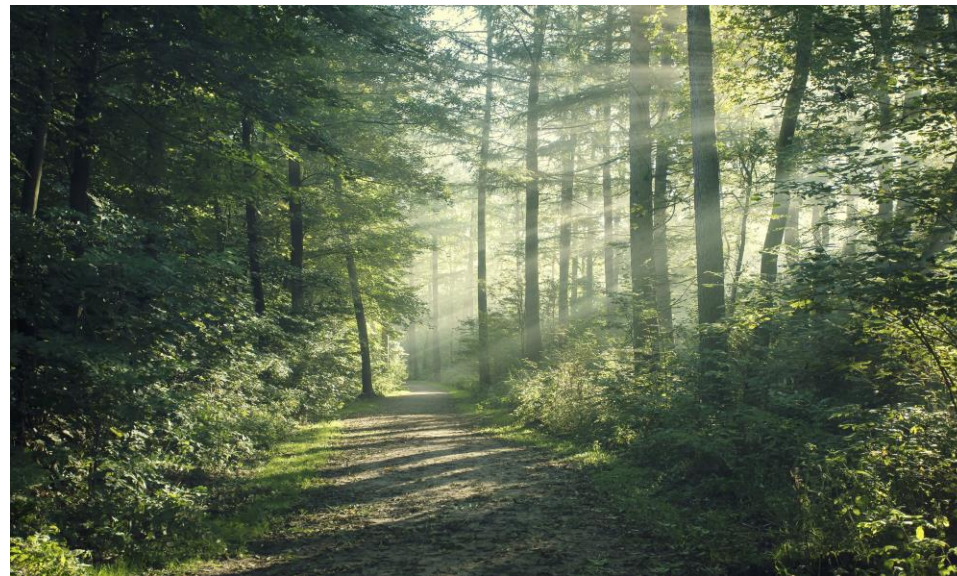
STS Education

Ruth Raleigh

STS GTSD Consultant

St. Joseph Mercy Hospital

FAQ Mailbox Submissions

Please make sure that the email address and database version that you enter are correct and complete. A response may be significantly delayed when these are incorrect.

Full Name *

Email *

Phone *

Participant ID #

Database Version *

- Select -

Sequence 580 - Reop

- July 2022: The May and June 2022 clarifications from above are being restated here in a consolidated format. Answering sequence 580 is a two-step process: 1.Determine if a prior operation was performed in the same anatomic space. It is important to note that the 'thoracic cavity' is broken down into subsections – a patient that had a CABG and is now having a lung resection would NOT be considered to meet the criteria of having an operation performed in the same anatomic space. 2. Review the current operative report for documentation indicating increased difficulty or complexity of the current procedure due to a prior operation in the same cavity. For example, documented lysis of adhesions. If the case being abstracted has both a prior operation in the same anatomic space AND the current procedure was more complex, then code 'yes' to sequence 580.

Sequence 590 - HistCarPulDis

- July 2022: To further clarify the May 2022 guidance above in order to capture regurgitation, it must be graded as moderate or severe.

Sequence 690 - HistPreopMeds

- July 2022: Plaquenil is considered immunosuppressive therapy

Sequence 1470 - Proc

- July 2022: The only instance where the primary procedure coded would not match the primary procedure performed is in the instance where the patient dies intraoperatively before the intended primary procedure is able to be completed (see Mar 2022 clarification above). For example, if a surgeon takes a patient to the OR planning to do a lobectomy but upon entry into the chest cavity notes that there is pleural metastatic disease and chooses convert the planned lobectomy to a pleural biopsy, then this case is not required for abstraction. If a site chooses to enter the case, the primary procedure would be the pleural biopsy.

Sequence 1510 – LungCancer

- July 2022: Given clarification provided in March that the intent of seq 1510 is to capture data on NEW primary lung cancer resections and that 'no' should be coded to seq 1510 for recurrent lung cancers, sites are not required to abstract cases performed for recurrent lung cancer. The STS General Thoracic Registry version 5.21.1 requires submission of all lung resections for NEW primary lung cancer.

Sequence 1510 – LungCancer

- July 2022: Code 'yes' to 1510 for new primary carcinoid tumors of the lung that are therapeutically resected.

Sequence 1510 - LungCancer

- July 2022: If a new primary lung cancer is therapeutically resected, it must be captured. For example, patient had a pneumonectomy for recurrent infections – on final pathology the patient had adenocarcinoma staged mpT1apN0. This case is required for entry.

Sequence 1560 – HiatalHerniaData
Sequence 1800 - LungCaTumorSz

- Seq – 1560:
  - July 2022: Code 'no' to 1560 for paraconduit hiatal hernia repairs.

- Seq – 1800:
  - July 2022: For mixed density lesions with no documented size for the solid component, leave sequence 1800 blank.

Sequence – 1810 ClinStageLungTumor

- July 2022: Additional clinical T Staging information from the IASLC for completely groundglass and mixed denisity lesions has been added below.

- July 2022: Clinical T stage is not based exclusively on the size of the nodule. As noted above, factors such as invasion and obstructive atelectasis also play a role in clinical T stage. If there is discrepancy between a documented clinical T stage by your surgeon and information included in the training manual, please clarify correct clinical T stage with your surgeon. If there is no documented clinical T stage but you have nodule size and are uncertain whether there is visceral pleural involvement, invasion, an obstructive component etc, then please confirm the clinical T stage with your surgeon.

Sequence 1880 - LungNodeAssess

- ~~Mar 2022: Only capture lymph nodes resected during the procedure being abstracted on the DCF. For example, do not include lymph nodes resected during a prior mediastinoscopy.~~ (Strikethrough added July 2022)

- July 2022: Guidance on counting lymph nodes removed via mediastinoscopy and sampled during EBUS. 1. Nodes harvested during mediastinoscopy performed either at a prior separate setting or during the same anesthetic as the lung resection must be included in the final nodal count. 2.Nodes sampled prior to induction therapy of any kind (chemo, XRT, and/or IO) are NOT included in final surgical nodal counts. 3.Nodes sampled during preoperative EBUS (performed either at a separate setting or during the same anesthetic) are NOT included in final surgical resection nodal count

Sequence 2020 - NumMaligNodes

- July 2022: If your final pathology report indicates 'NX because of atypical cells', code the number of malignant nodes as zero. Atypical cells are generally not counted as positive for malignancy.

Sequence 3210 - EGD Done

- July 2022: Code 'no' to EGD done if the EGD is completed at the time the patient is in the OR for hernia repair. The intent of seq 3210 is to capture an EGD that guides a surgeons decision to take a patient to the operating room for repair.

Sequence 3560 – HH1yrFU

- July 2022: Endoflip procedures are not captured as an endoscopic intervention as it is a diagnostic procedure. If symptomatic reocurrence led to the diagnostic procedure, that would be captured as appropriate

Sequence 4270 - ReadmDis

- July 2022: Code 'no' to readmission within 30 days of discharge if the readmission was planned and is unrelated to the thoracic procedure performed. For example, patient has parotid cancer and lung cancer – plan is for lobectomy with discharge to home and then to readmit 3 weeks later for resection of parotid. In this instance, the readmission would not be captured.
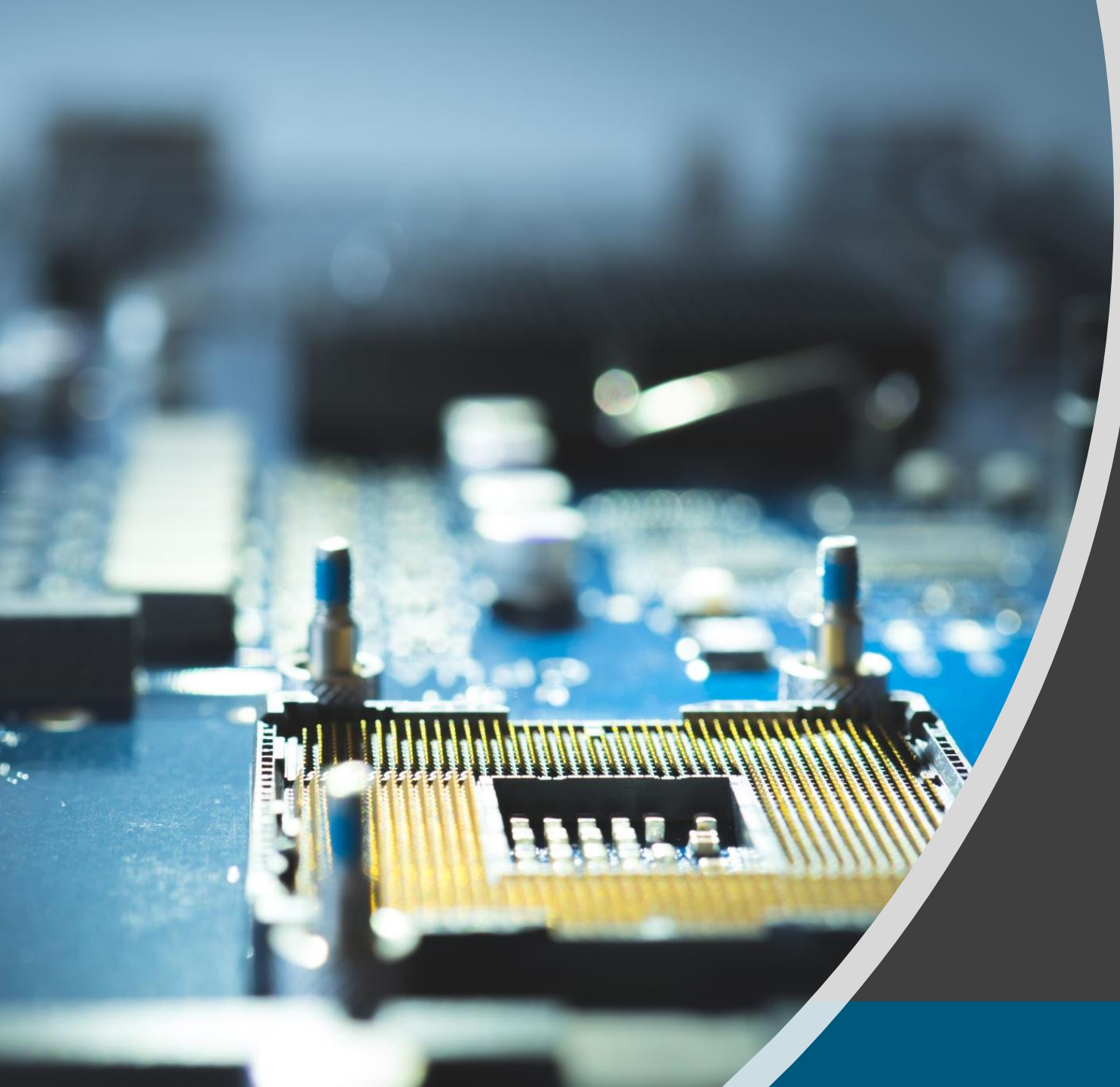
IQVIA Review
Joe Brower

IQVIA Release July 2022

IQVIA Updates - July 2022 Release

Released the weekend of July 9 - GTSD Risk Adjusted Dashboard Report – Spring 2022 Harvest Report

An updated version of the <mark>Analyses Report Overview</mark> is posted to the Library.

The <mark>Spring 2022 GTSD Harvest Composite Quality Ratings Summary</mark> is posted to the Library.

The Lung and Esophageal Cancer Composite results for the Spring 2022 Harvest (OR dates January 1, 2019–December 31, 2021) are now available in the Database platform.

PLEASE NOTE: The Export/Print feature has temporarily been disabled within the application due to the ongoing development for the Other Reports, Benchmark Reports and Legacy Reports.

In the meantime, IQVIA has started distributing the PDF version of the Spring 2022 reports via email to the assigned Primary and Backup users.

IQVIA Release July 2022

IQVIA Updates - July 2022

Released the weekend of July 9

GTSD Risk Adjusted Dashboard Report – Spring 2022 Harvest Results – STS/NIS Comparison Report

STS-8370 – The report logic was updated to include the 5.21.1 data version calculation changes for the Minimally Invasive Calculation. The calculation details are included in the updated Analyses Report Overview which is posted to the Library for reference.

Missing Variable Report

STS-8262 – The MVR Race Fields displayed as missing when the Datavrsn = 5.21.1 and Demographic DataVrsn was lower. This has been corrected.

Registry Data Collection Form/Uploader

STS-7998 – The SSNKnown variable was previously not populating data on the case form when the demographic data version was 2.4 (or lower) and the data version is 5.21.1. This has been corrected.

STS National Database™
Trusted. Transformed. Real-Time.

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.

Contact Information

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

- Ljones@sts.org
- 312-202-5822

Database Operational Questions

- STSDB@sts.org

Upcoming GTSD Webinars

User Group Call

- July 27 @ 2:30CT

Monthly Webinar

- August 10 @ 1:30CT

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!

THANK YOU FOR JOINING!