



Society of Thoracic Surgeons

General Thoracic Surgery Database  
Monthly Webinar

August 10, 2022

# GTSD Monthly Webinar

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



# STS Updates

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- **Training Manual for August to be posted by end of day**
- **Spring 2022 Analysis Results Released**
  - Lung and Esophageal Composite Reports posted within the platform on July 11<sup>th</sup>
  - Participant Results for Benchmark and Legacy Reports will be released separately
    - Planned for this weekend's release
  - Report related questions should be directed to [gtsdtechsupport@iqvia.com](mailto:gtsdtechsupport@iqvia.com)
- **IQVIA Platform**
  - Participant ID specific Contact List now available
  - 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](mailto: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

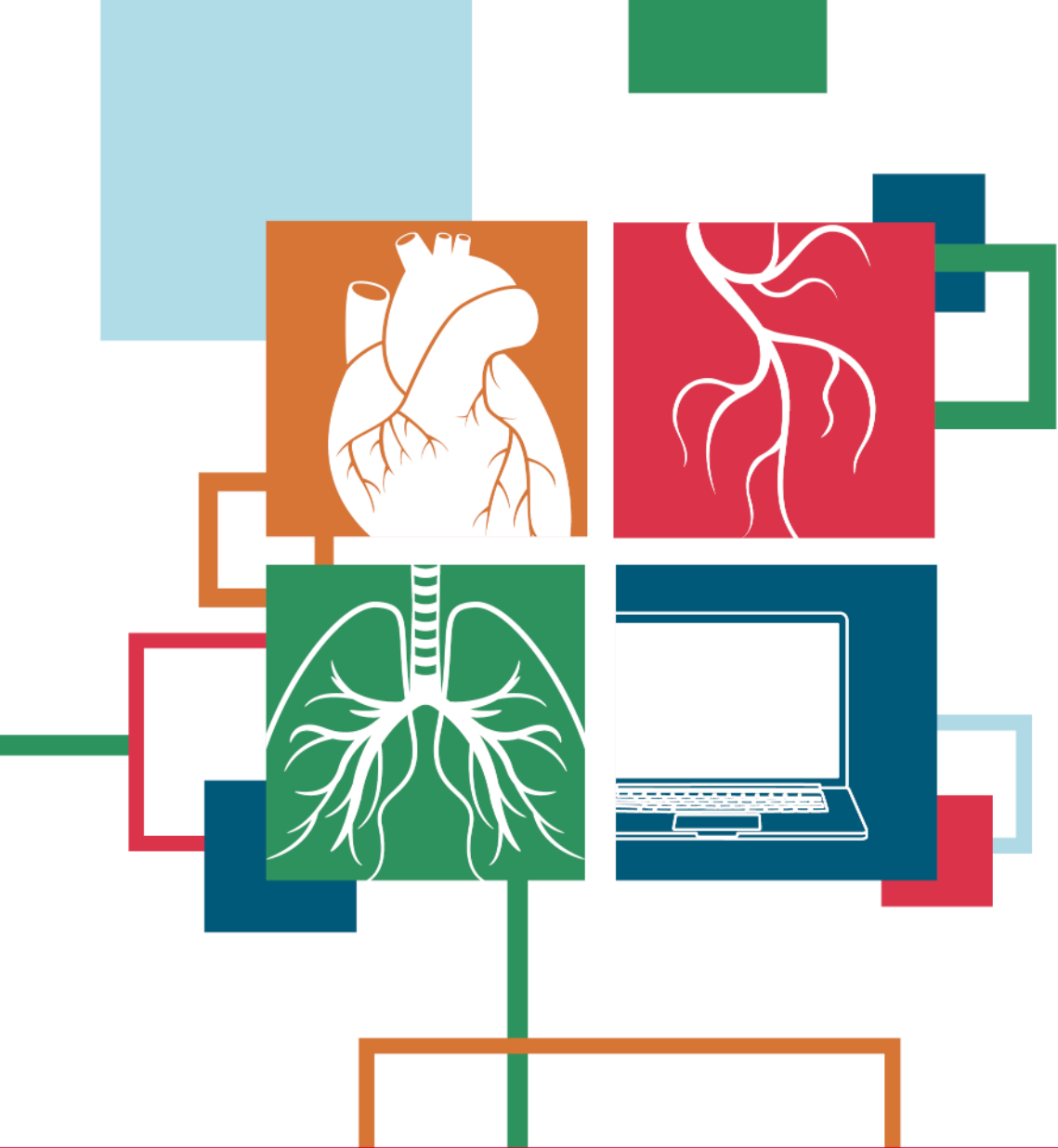
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- **GTSD Public Reporting**

- Public Reporting Website was updated on July 11<sup>th</sup>
- 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](mailto: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



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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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# 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	✓	





**The Society  
of Thoracic  
Surgeons**

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



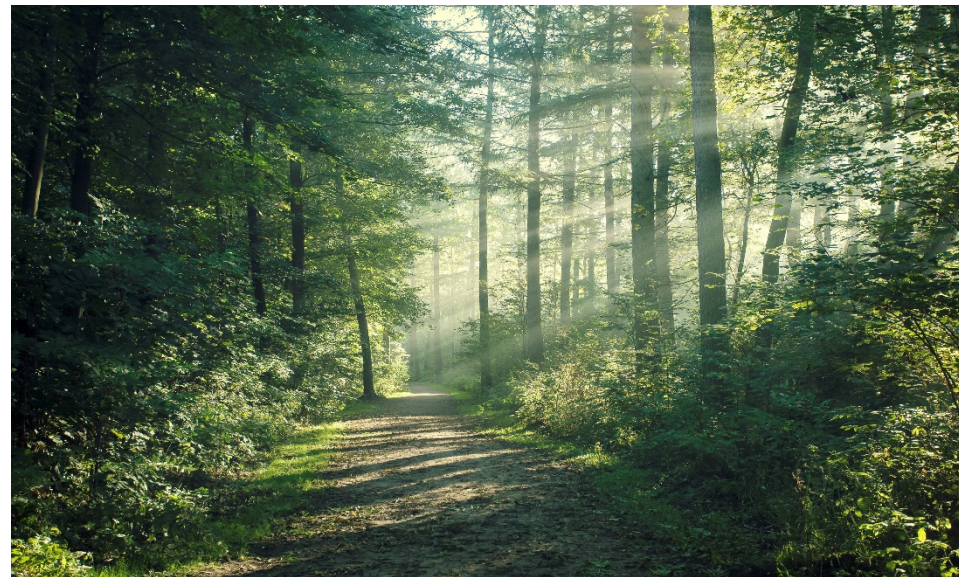
- Educational sessions and social events will take place at the Rhode Island Convention Center (1 Sabin St, Providence, RI 02903).
- A block of rooms have been reserved at the Omni Providence Hotel (1 West Exchange St., Providence, RI 02903). The special AQO group rate of \$259, plus state and local 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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STS AQO IS GOING GREEN!!!!  
All materials will be posted and  
available for download.



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# STS Education

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Ruth Raleigh

STS GTSD Consultant

St. Joseph Mercy Hospital

## FAQ Mailbox Submissions

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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 \***

# Seq 610: History of Vascular Disease

Documented peripheral arterial disease would be captured with major aortic or peripheral vascular disease.

## Peripheral artery disease

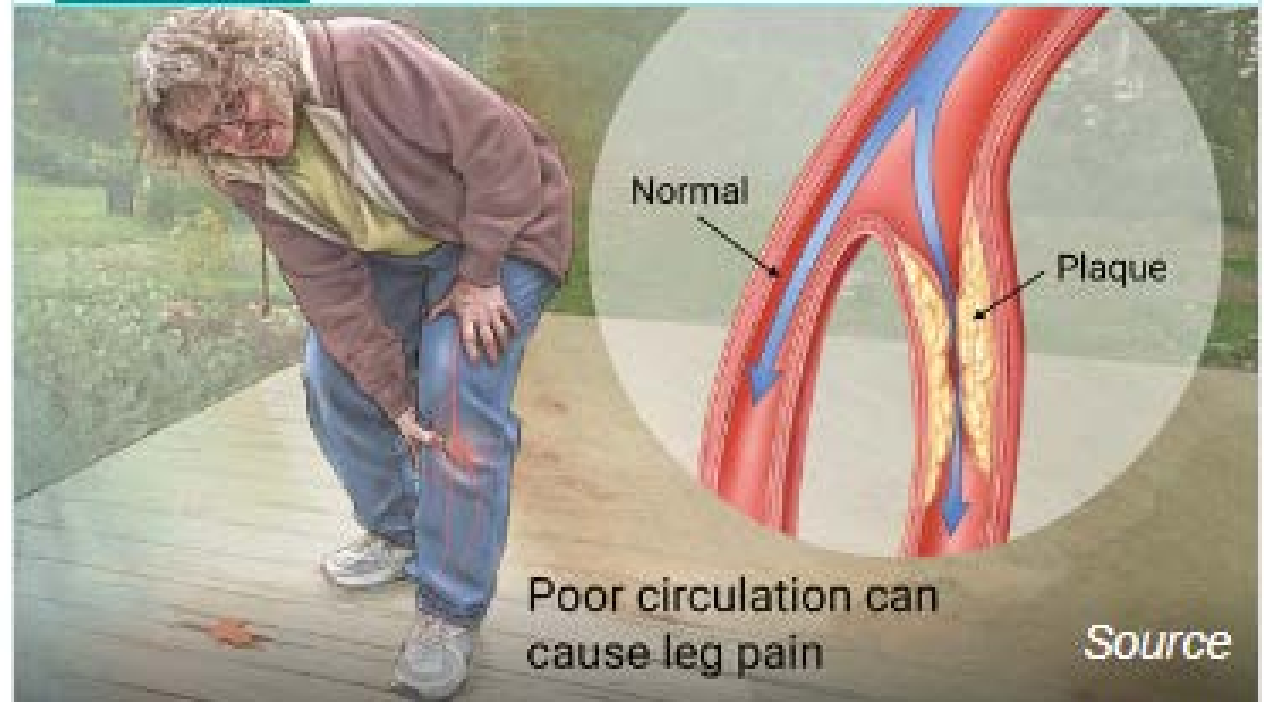
Also called: peripheral vascular disease

OVERVIEW

SYMPTOMS

TREATMENTS

SPEC



# Seq 650: History of Cancer

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**Aug 2022:** 'Coexisting Cancer' is intended to capture patients being actively treated OR actively surveyed for an active primary malignancy that is not related to the thoracic disease. Clarification added to 2.d. above.

2. **Coexisting Cancer** – the patient is being treated or surveyed for an active primary malignancy that is not related to the thoracic disease being evaluated and treated by the thoracic surgeon. Examples:
  - a. The patient is undergoing a lung resection for lung cancer and has known lymphoma for which they are being observed.
  - b. Patient with lung cancer undergoing resection with known bladder cancer for which a staged procedure is planned.
  - c. Patient diagnosed with lung cancer and rectal cancer at the same time, undergoing therapy for both simultaneously.
  - d. Does ~~not~~ (strikethrough added Aug 2022) include previously treated cancers that have completed treatment and are in active surveillance
  - e. Does not include synchronous primary lung cancers
  - f. Must be another primary cancer (not metastases)
  
1. **None** - The patient is not currently being treated or surveyed for an active malignancy not related to the thoracic disease being evaluated and treated by the thoracic surgeon.

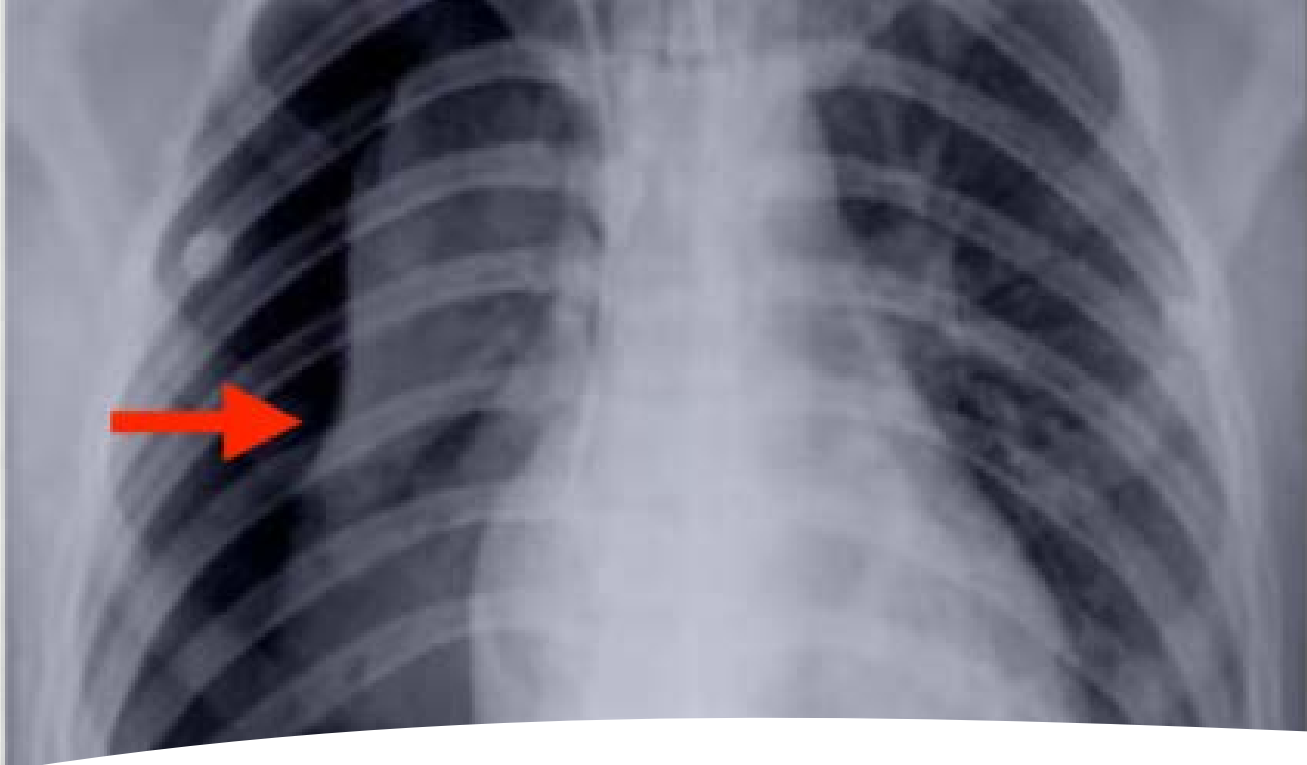
# Seq 685: Preoperative Thoracic Radiation Therapy

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## Intent/Clarification:

1. Same disease,  $\leq 6$  months – Indicate if the patient received preoperative thoracic radiation therapy for the same disease within the last 6 months
2. Same disease,  $> 6$  months - Indicate if the patient received preoperative thoracic radiation therapy for the same disease greater than 6 months before current procedural date
3. Unrelated disease,  $\leq 6$  months – Indicate if the patient received thoracic radiation therapy for an unrelated disease withing the last 6 months.
4. Unrelated disease,  $>6$  months - Indicate if the patient received thoracic radiation therapy for an unrelated disease greater than 6 months before current procedural date.

**Aug 2022:** If a patient has synchronous primary lung cancers and one is treated with SBRT and the other is surgically resected – select the appropriate ‘unrelated disease’ option for seq 685.



# Pneumothorax

Abnormal collection of air in  
pleural space

“Collapsed Lung”

Seq 3800:  
Pneumothorax  
req CT

Aug 2022: Code ‘yes’ to 3800 if chest tube insertion is required for a pneumothorax that was caused by a patient accidentally or intentionally dislodging a chest tube that was routinely placed in the OR.



# Seq 4270: Readmission within 30 days of Discharge

**July 2022:** Code 'no' to readmission within 30 days of discharge if the readmission was planned and is unrelated to the thoracic procedure performed. (~~strikethrough added in Aug 2022~~). 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.

**Aug 2022:** Also code 'no' to readmissions within 30 days of discharge if the readmission was planned pre-operatively and IS related to the thoracic procedure performed. For example, a pre-operatively planned readmission for chemotherapy following a lung resection.

**\*\*\*Please note planning must be pre-operative not post-operative\*\*\***

# Seq 1470: Procedure

**Aug 2022:** Esophagectomies that are completed with a minimally invasive approach with the exception of only the neck portion are to be coded as minimally invasive.

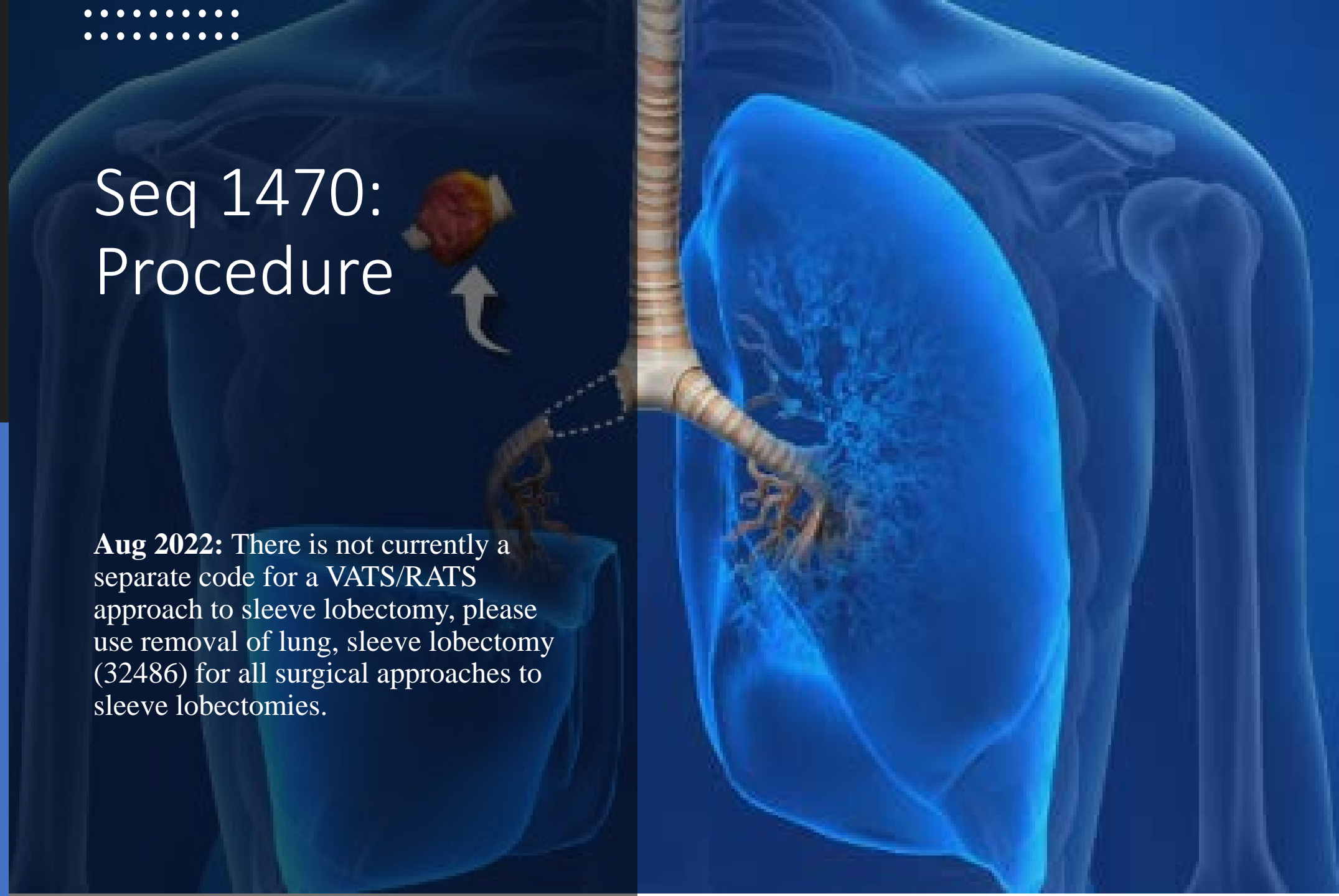
	and remaining esophagus within the right chest.
3370	Minimally invasive esophagectomy, Abdominal and neck approach (43286)
	Removal of the entire esophagus laparoscopy and a left neck incision. Intestinal continuity is restored by the formation of a gastric tube with an anastomosis between the gastric tube and remaining cervical esophagus within the neck.

4190	Minimally invasive three incision esophagectomy (McKeown) (43288)
	The three-hole technique consists of thoracic mobilization of the esophagus, laparoscopic construction of a gastric conduit and a cervical esophagogastrostomy via minimally invasive approach.



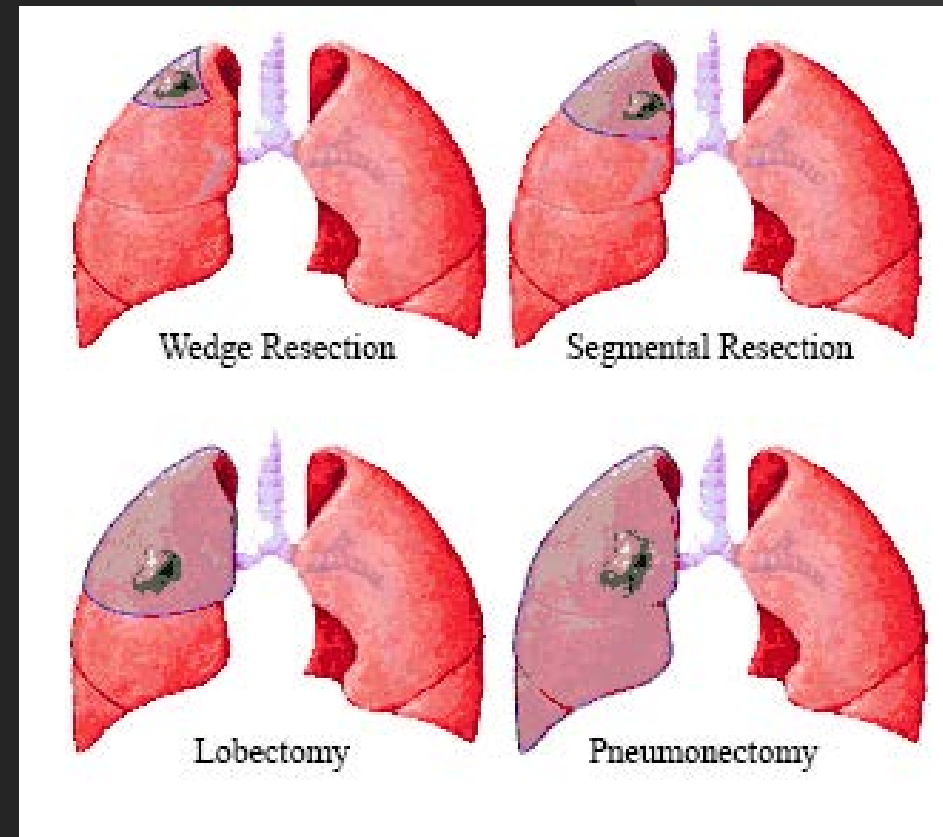
# Seq 1470: Procedure

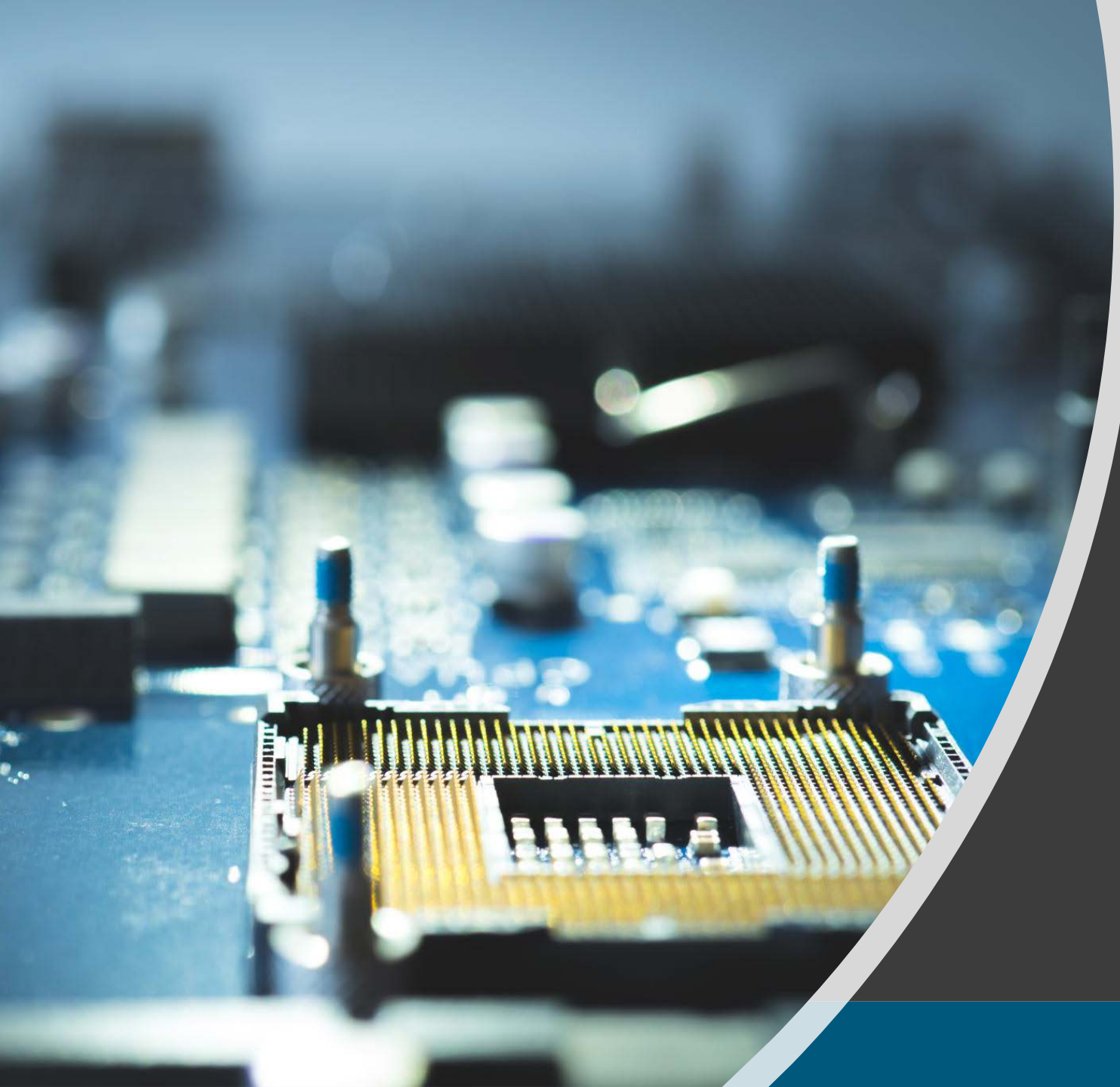
**Aug 2022:** There is not currently a separate code for a VATS/RATS approach to sleeve lobectomy, please use removal of lung, sleeve lobectomy (32486) for all surgical approaches to sleeve lobectomies.



# Seq 1510: Primary Lung Cancer Resection Performed

**Aug 2022:** If a wedge resection is completed for a new primary lung cancer – it can be either therapeutic or diagnostic depending on the extent of the disease at the time of resection. If you are unsure, it is helpful to discuss with your surgeon and document your conversation for your records.





# IQVIA Review

## Joe Brower

# IQVIA Release August 2022

## **IQVIA Updates - August 2022 Release**

**The items below will be released on August 12**

**A notification will be posted to confirm the availability of the reports.**

### **GTSD Risk Adjusted Report Updates**

- The GTSD Risk Adjusted Report will be updated to re-enable the Other Reports, Benchmark Reports and Legacy Reports on all harvest reports.
- The Print / Export Button will be enabled on all Harvest Reports.

**Please Note: Release Notes will be posted in the Notifications to review the full list of updates to the reports.**

# IQVIA Known Issues August 2022

## **IQVIA Known Issues - August 2022**

**The items below will be released on August 12**

### **GTSD Risk Adjusted Dashboard Report – Spring 2022 Harvest Results**

**STS-8562 – (Lung Cancer Staging Procedures)** The report logic will be updated to include the 5.21.1 data version changes for identified variables which were discontinued and replaced.

**STS-8563 – (Esophageal Cancer Staging Procedures)** The report logic will be updated to include the 5.21.1 data version changes for identified variables which were discontinued and replaced.

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

Database Operational  
Questions

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

# Upcoming GTSD Webinars

## User Group Call

- August 24 @ 2:30CT

## Monthly Webinar

- September 14 @ 1:30CT

## New Data Manager Webinar

- September 28 @ 2:30 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**<sup>™</sup>  
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**THANK YOU FOR JOINING!**