

# The Society of Thoracic Surgeons

Intermacs & Pedimacs User Group Webinar

March 25, 2026



**STS National Database™**  
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# Today's Agenda

- Welcome and Introductions
- Updates
- ***Intermacs & Pedimacs Forms Training Series***
  - Follow-Up
- Q&A



# The STS Team

Nancy Honeycutt, BSN, RN LSSGBH, National Database Manager for the ACSD, Intermacs and Pedimacs

Carole Krohn, MPH, BSN, RN, LSSGB, Director of the STS National Database

Leighann Jones, BS, National Database Manager for the Congenital and General Thoracic Databases

Emily Conrad, MS, National Database Education Manager

# The Intermacs Data Warehouse Team

Brandon Singletary, PhD, Statistician III, Epidemiologist


Ryan Cantor, PhD, Chief Scientific Officer

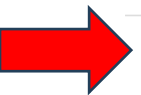
Rama Rudraraju, PhD, Director of Programming

John Pennington, MSHI, Director of Data Management



# When Are The Reports Distributed?

Calendar Quarter	Data Entry Deadline	Coverage Stop Date	Distribution Date
Q1	April 30th	March 31st	June 30th
Q2	July 31st	June 30th	September 30th
Q3	October 31st	September 30th	December 31st
Q4	January 31st	December 31st	March 31st 



# PHI Security Reminder

## Protected Health Information (PHI)



To protect patient privacy, PHI should only be shared via **secure** or **encrypted** email.







Do not send PHI through regular email



If you do not have a way to send a secure email, please reach out to me and I will send you a Neo Certified email that you can respond to



# Upcoming Webinars

-  Intermacs/Pedimacs Quality Assurance Report Overview Quarterly Webinar  
 April 16<sup>th</sup> @ 2PM CT
-  Intermacs/Pedimacs User Group Webinar  
 April 29<sup>th</sup> @ 1PM CT



# Intermacros & Pedimacs Forms Training Series

Session 1: Screening Log & Demographics

Session 2: Preimplant & Implant Forms

★ Session 3: Follow-Up Forms

Session 4: Implant Discharge, 1-Year Post Cessation, Patient Transfer

Session 5 and Beyond: Adverse Events



# Learning Objectives

At the conclusion of this webinar, participants will be able to:

- Determine appropriate follow-up timing and windows for InterMACs data collection
- Apply correct data collection intervals across follow-up visits (1-week, 1-month, 3-month, and beyond)
- Accurately complete follow-up forms, including:
  - Follow-Up Status
  - Hemodynamics
  - Medications, Labs, and Device Details
  - Functional status and Quality of Life



# Follow-Up Form Generation

Once the implant form is complete the 1 Week Follow-up form will generate and so will and the Implant Discharge Form

When the Implant Form is validated and submitted:

- The 1-Week Follow-Up form is automatically generated
- The Implant Discharge form is also generated

<b>Implant</b>	9/17/2025
Complete	

\*Implant form marked complete->follow-up and discharge forms generated

<b>1 Week Followup</b>	9/24/2025	Window: 9/21/2025 to 9/27/2025 Expected Date: 9/24/2025
Complete		
<b>Implant Discharge</b>	10/16/2025	
Complete		



# 1-Week Follow up

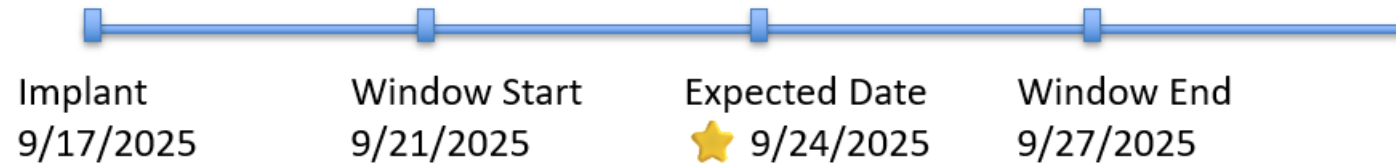
Implant Date (OR Exit): 9/17/2025

Follow-Up Window: 9/21/25-9/27/25 (+/- 3 days)

Expected Date: 9/24/25

- Select date closest to expected date
- Include all data from implant -> Follow-up date

<b>1 Week Followup</b>	<b>9/24/2025</b>	Window: 9/21/2025 to 9/27/2025
Complete		Expected Date: 9/24/2025



# 1-Month Follow up

Implant Date (OR Exit): 9/17/2025

Previous Follow-Up (1-Week): 9/24/2025

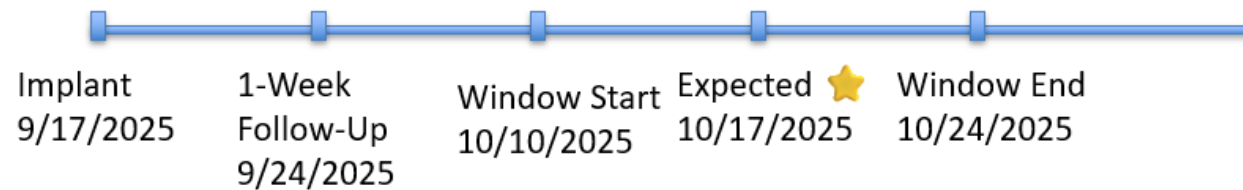
Follow-Up Window: 10/10/2025-10/24/2025 (+/- 7days)

Expected Date: 10/17/2025

Actual Follow-Up Date Used 10/14/2025

- Select the date closest to the expected date (10/17/2025)
- 10/14/2025 is appropriate as it falls within the follow-up window
- Include all data from previous follow-up → current follow-up date
- In this example: 9/24/2025 → 10/14/2025

<u>1 Month Followup</u>	10/14/2025	Window: 10/10/2025 to 10/24/2025 Expected Date: 10/17/2025
Complete		



✓ Used: 10/14/2025

Data Collection: 9/24/2025 → 10/14/2025



# 3-Month Follow up

Implant Date (OR Exit): 9/17/2025

Previous Follow-Up (1-Month): 10/14/2025

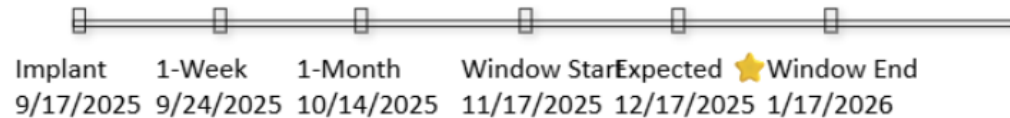
Follow-Up Window: 11/17/2025-1/17/2026 (+/- 1 month)

Expected Date: 12/17/2025

Actual Follow-Up Date Used 1/6/2026

- Select the date closest to the expected date (12/17/2025)
- 1/6/2026 is appropriate as it falls within the follow-up window
- Include all data from previous follow-up → current follow-up date
- In this example: 10/14/2025 → 1/6/2026

<b>3 Month Followup</b>	<b>1/6/2026</b>	Window: 11/17/2025 to 1/17/2026
Complete		Expected Date: 12/17/2025



✓ Used: 1/6/2026

Data Collection: 10/14/2025 → 1/6/2026



# Ongoing Follow-Up Schedule

## Next Follow-Up: 6 Months

- Expected Date: 3/17/2026
- Window: 1/17/2026 – 5/17/2026

## Follow-Up Pattern Moving Forward

- Follow-ups continue at:
  - 6 months, 1 year, 1.5 years, and every 6 months thereafter
- All follow-ups are based on the implant date

## Key Principles (Consistent Across All Follow-Ups)

- Select the date closest to the expected follow-up date
- Use visits within the allowable window
- Include all data from the previous follow-up → current follow-up date

## Big Picture Takeaway

- Follow-up is a continuous process
- Each visit builds on the last and continues for as long as the patient remains on device



# Follow-Up After Device Exchange

## Key Concept: Timeline Resets

- When a patient undergoes a device exchange, the follow-up timeline resets
- The new implant date becomes the reference point for all future follow-ups

## New Follow-Up Schedule

- Follow-ups restart at:
  - 1 Week → 1 Month → 3 Months → then every 6 months

All follow-up windows and expected dates are now based on the new implant date



# Follow-Up Form: Follow-Up Status

## Visit Type

- Select the appropriate follow-up setting:
  - Inpatient, Outpatient, Telehealth, or other applicable options

## Patient Address

- Collected at follow-up
- Carries forward to future follow-ups once entered
- Update only if there is a change

## Device Strategy

Reflects the patient's current device strategy at the time of the visit  
Should be updated if the patient's status has changed

## Additional Clinical Questions

- Includes questions such as:
  - Intubation, dialysis, COVID status, etc.
- These reflect status since implant or last follow-up

## Important Reminder

- Ensure all adverse events since the last follow-up are entered
- (e.g., rehospitalization, infection, bleeding, device issues)

The screenshot shows a web form titled "Followup Status". On the left is a vertical sidebar with green buttons for "Hemodynamics", "Medications", "Laboratory", "Device Details", "Exercise / Trailmaking", "Comorbidities", and "Quality of Life". The main content area has a header "Followup Status" and a dropdown menu labeled "Select one of". Below this are several rows of input fields with labels: "Patient's Home S", "Patient", "State/Terr", and "Patient's H".



# Follow-Up Form: Hemodynamics

## What This Form Captures

- **Vital Signs**  
→ Heart rate, blood pressure, weight
- **Echo Findings**  
→ Valve function, ventricular measurements
- **Swan Hemodynamics (if available)**  
→ Invasive pressures and cardiac measurements

## Best Practice

- When available, align timing of measurements (e.g., vitals, echo, Swan)
- Enter data that is clinically relevant and documented

\*Not all fields are required—use “Not Done” or “Not Recorded” when appropriate

Hemodynamics	
Followup Status	All data collected on this form should be entered. Data may be entered that was collected prior to the date of the follow-up visit.
Hemodynamics	<b>General Hemodynamics</b> General hemodynamics optimally should be collected at the time of the follow-up visit.
Medications	<b>General Hemodynamics</b>
Laboratory	
Device Details	
Exercise / Trailmaking	
Comorbidities	<b>Systolic</b> (millimeters of mercury) should be collected by auscultation or arterial blood pressure measurement.
Quality of Life	<b>Diastolic</b> (millimeters of mercury) should be collected by auscultation or arterial blood pressure measurement.



# Follow-Up Form: Medications

## What This Form Captures

- Medications the patient has been on since the last follow-up visit
- Includes common categories such as:
  - Heart failure therapies
  - Anticoagulation
  - Other relevant medications

## Best Practice

- Review the full interval history (clinic notes, hospitalizations, med lists)
- Ensure medication use is captured accurately across the entire timeframe

## Important Clarification

- If a patient was taking a medication at any point since the last follow-up:
  - Select “Yes”
- Even if the medication was stopped before the current visit, it should still be captured

The image shows a screenshot of a web-based follow-up form. On the right side, there is a vertical sidebar menu with several green buttons labeled: 'Followup Status', 'Hemodynamics', 'Medications', 'Laboratory', 'Device Details', 'Exercise / Trailmaking', 'Comorbidities', and 'Quality of Life'. The 'Medications' button is highlighted. To the right of the sidebar, the main content area is partially visible, showing a header 'Medications' and some text including 'Calcium' and 'Angiotensin rec'.



# Follow-Up Form: Laboratory

## What This Form Captures

- Laboratory values obtained since the last follow-up visit
- Includes labs such as:  
→ CBC, BMP, coagulation labs, and other relevant tests

## Best Practice

- Review all available labs since the previous follow-up

	Laboratory
Followup Status	
Hemodynamics	
Medications	
Laboratory	
Device Details	
Exercise / Trailmaking	
Comorbidities	
Quality of Life	



# Follow-Up Form: Device Details

## What This Form Captures

- Device-specific values from the follow-up visit
- Includes:
  - Pump flow and power
  - Pump speed
  - Device inspection (e.g., auscultation, driveline)

	Device Flow Chart
Followup Status	<b>Device Function</b>
Hemodynamics	
Medications	
Laboratory	
Device Details	
Exercise / Trailmaking	<b>Device Parameters</b>
Comorbidities	
Quality of Life	<b>Device Inspection</b>



# Follow-Up Form: Exercise Function & Trailmaking

## What This Form Captures

- Functional assessments such as:
  - 6-minute walk
  - Gait speed
  - Peak VO<sub>2</sub> (if available)
- Trailmaking status
- NYHA Classification

## NYHA Classification – Important

- Must be documented by a provider
- Should be clearly stated in the medical record
- Do not assign based on interpretation of patient symptoms

	Exercise
Followup Status	This requires an i are instructed to v during the 6 minu covered during th <b>Gait speed test I</b>
Hemodynamics	
Medications	
Laboratory	
Device Details	
<b>Exercise / Trailmaking</b>	
Comorbidities	<b>Ga</b>  Instructions: Reco should be clearly stopwatch. <b>NOTE</b>
Quality of Life	



# Follow-Up Form: Comorbidities

## What This Form Captures

- Patient conditions including:
  - New conditions since last follow-up
  - Chronic conditions
  - Relevant past medical history

## Important Note

- This form reflects the patient's overall clinical profile
- Not limited to new diagnoses, includes ongoing and historical conditions
- This form only appears for patients with a device strategy other than "Currently Listed for Transplant"
- If the patient is listed for transplant, this form will not populate

	Comorbidities
Followup Status	Which comorbidities were present at the time of follow-up?
Hemodynamics	
Medications	
Laboratory	
Device Details	
Exercise / Trailmaking	
Comorbidities	<b>Cardiothoracic Issues</b> If a patient has 3 or more comorbidities, please list them in the following classification: <ul style="list-style-type: none"><li>• Mild: FEV1 60% to 75%</li><li>• Moderate: FEV1 50% to 60%</li><li>• Severe: FEV1 &lt; 50% of predicted</li><li>• CLD present, severity not specified</li><li>• Unknown</li></ul>
Quality of Life	<b>Time Frame:</b> Do not use values from Spirometry results that have been obtained within the last 12 months.



# Follow-Up Form: Quality of Life

## What This Form Captures

- Patient-reported quality of life assessments

Includes:

→ EQ-5D

→ VAD-specific Quality of Life survey

### • Key Points

- Surveys should be completed by the patient when possible
- Reflect the patient's current functional status and well-being
- Ensure forms are completed and documented at required intervals
- Collected starting at the 3-month follow-up
- Continued at subsequent follow-up visits

Quality of Life	
Followup Status	QOL surveys cannot be admin
Hemodynamics	<b>EuroQol (EQ-5D)</b>
Medications	<b>Did the patient com</b>
Laboratory	<b>How was the tes</b>
Device Details	
Exercise / Trailmaking	
Comorbidities	
Quality of Life	<b>Usual Activities (e housework, t</b>



# Contact Us

## **Nancy Honeycutt, BSN, RN**

- *STS National Database Manager, Intermacs and Pedimacs*  
✉ [nhoneycutt@sts.org](mailto:nhoneycutt@sts.org)

## **Patricia Potter, BSN, RN**

- *Intermacs Data Warehouse Director of Clinical Affairs*  
✉ [patricia.potter@kirso.net](mailto:patricia.potter@kirso.net)



# Open Discussion

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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!

