

Society of Thoracic
Surgeons

General Thoracic Surgery
Database
Monthly Webinar

February 10, 2021

The logo for the STS National Database is centered within a large white circle. It features the text "STS National Database" in a bold, sans-serif font, with "STS" in red and "National Database" in dark blue. A small trademark symbol (TM) is positioned to the upper right of the word "Database". Below this, the tagline "Trusted. Transformed. Real-Time." is written in a smaller, dark blue, sans-serif font.

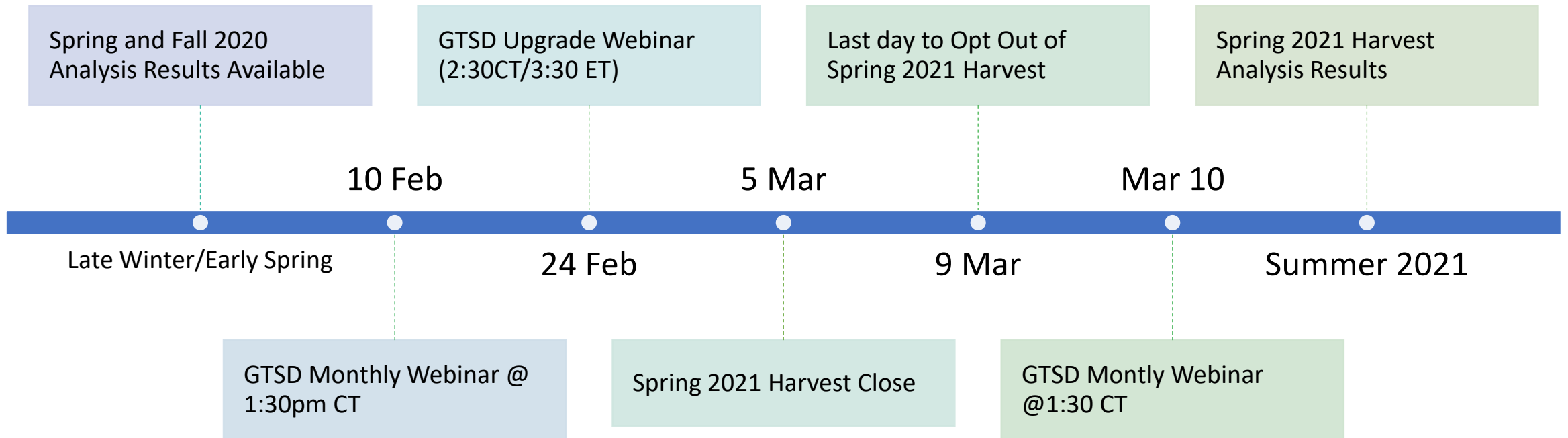
STS National DatabaseTM
Trusted. Transformed. Real-Time.

Agenda

- Welcome and Introductions
- STS Update
- IQVIA Update
- User Feedback
 - Include Ticket Number/Case Number



Important Dates for General Thoracic



STS Updates

Data Version 5.21 Update

- Go live is July 1, 2021
- Data Specifications sent to vendors in December 2020
- Upgrade webinars began on January 27
 - Encourage all data managers and staff abstracting data to attend
 - All upgrade webinars will be recorded and posted on STS webinars page
- 5.21 Data Collection form is posted on the STS website
 - **Note: this is a near final "draft" version**
- STS creating "on save" checks to be implemented into your software
 - For example: OR Entry and Exit Times are inconsistent, Surgery Date is > Discharge Date, Mortality Date is < Discharge Date
- Training Manual development is underway
 - Revamping current format (similar to ACSD)
 - Send suggestions to ljones@sts.org

What Does it Mean to Opt Out of a Harvest ??

- In the past, opting out meant you chose to NOT have your data submitted during a given harvest period included in analysis.
 - Participant would not receive a PDF Report
 - Historical data is included in the overall analysis dataset for STS Benchmark purposes
 - No Star Ratings
 - Not able to see or have access to STS Benchmarks



What Does Opt Out Mean Today??

- Spring 2021 Harvest Close date is **Friday, March 5th (11:59pmET)**
- Deadline to opt out of the 2020 Harvest is **Tuesday, March 9th**
 - <https://www.sts.org/form/harvest-opt-out-form>
- Opting out means you choose to NOT have your data submitted during a given harvest period included in the analysis data set.
 - Your historical data is included in the overall analysis dataset for STS Benchmark/Risk Adjusted purposes
 - No Star Ratings
 - Will show as “null” on the Risk Adjusted Dashboard
 - Participants WILL have access to STS Benchmarks within the Benchmark Dashboard
 - ‘My site’ #’s will comprise of any data that you have previously submitted that encompasses the 3 year analytic period.
 - STS National Benchmark numbers include the current 3 year analytic period



Did you know about The STS Patient Website?

- <https://ctsurgerypatients.org/>
- Offers immediate and easy access to expert multimedia content on cardiothoracic diseases and operations.
- If you interact with patients at your institution, please share this valuable resource




The screenshot shows the homepage of "The Patient Guide to Heart, Lung, and Esophageal Surgery" website. The header is blue with the STS logo and navigation links for English and Spanish. The main title is "The Patient Guide to Heart, Lung, and Esophageal Surgery" with a subtitle "A Website Presented by Cardiothoracic Surgeons Committed to Improving Patient Care". Below the title is a navigation bar with links: "Adult Heart Disease", "Pediatric and Congenital Heart Disease", "Lung, Esophageal, and Other Chest Diseases", "Procedures", "Before, During, and After Surgery", and "BLOG News & Trending Topics What is a Cardiothoracic Surgeon? Resources". The main content area features three large tiles: "Podcast Series Same Surgeon, Different Light" (Surgical Hot Topics), "How Will COVID-19 Impact My Upcoming Surgery?" (PRE- & POST- OPERATIVE CARE), and "Find an STS Surgeon" (PRE- & POST- OPERATIVE CARE). Below these tiles are three smaller boxes: "STS PUBLIC REPORTING: Access data for various heart, lung, and esophageal surgeries", "February Health Observances: American Heart Month, World Cancer Day, CHD Awareness Week, National Donor Day, and National Heart Valve Disease Awareness Day", and "Video: Why You Should Become a Cardiothoracic Surgeon".

The Gastroesophageal Reflux Disease Page

- Provides detailed information on causes and symptoms, diagnosis and treatment options
- Information on what to expect after surgery
- Downloadable handouts available for patients
- STS patient website contact is Jennifer Bagley (jbagley@sts.org)



**The Society of Thoracic Surgeons**English | Spanish

The Patient Guide to Heart, Lung, and Esophageal Surgery

A Website Presented by Cardiothoracic Surgeons Committed to Improving Patient Care

[Adult Heart Disease](#)[Pediatric and Congenital Heart Disease](#)[Lung, Esophageal, and Other Chest Diseases](#)[Procedures](#)[Before, During, and After Surgery](#)[BLOG
News & Trending Topics
What is a Cardiothoracic Surgeon?
Resources](#)

Gastroesophageal Reflux Disease

Gastroesophageal Reflux Disease

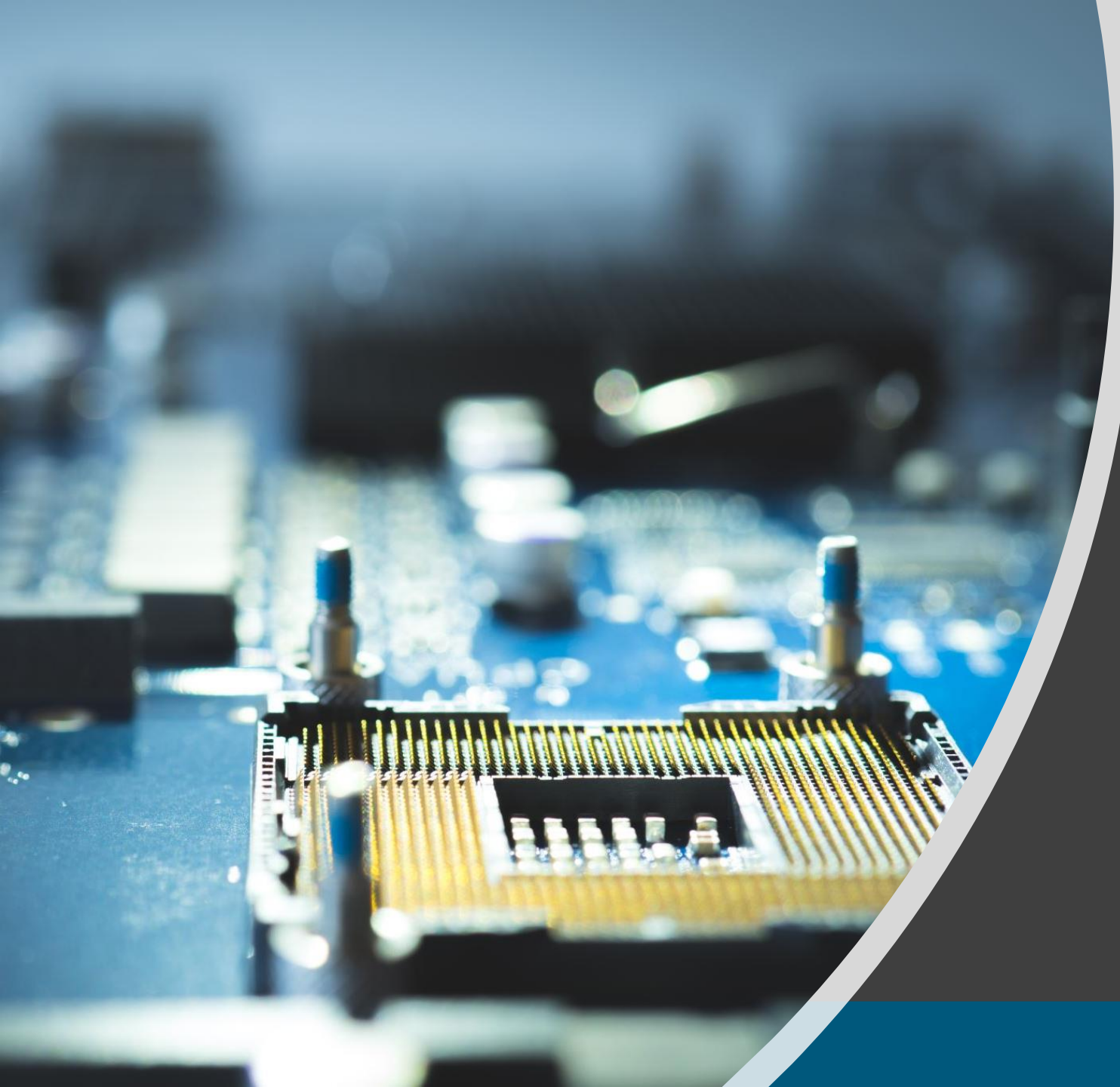
The esophagus (ě-sof´ah-gus) is the hollow, muscular tube that moves food and liquid from your mouth to your stomach. A ring of muscle fibers at the bottom of the esophagus keeps the stomach contents from moving backward.

In some people, the muscles don't work properly so the contents of their stomach flow backward into their esophagus and causes problems, such as heartburn or reflux. If this happens more than twice per week, you may have gastroesophageal reflux disease (GERD).

The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) estimates that one in 20 people has GERD. The disease can affect anyone, including infants and children, but it is most likely to occur among those who are overweight, pregnant, smoke, or take certain medicines.



The diagram illustrates the anatomy of the esophagus and stomach. It shows the esophagus leading into the stomach, with the lower esophageal sphincter (LES) at the junction. The diagram is divided into two parts: 'Normal' and 'Lower esophageal sphincter (open)'. In the 'Normal' state, the LES is closed, preventing backflow. In the 'Lower esophageal sphincter (open)' state, the LES is open, allowing for the backflow of acid and stomach contents into the esophagus, which is labeled as 'Backflow of acid and stomach'.



IQVIA Update

Joe Brower



IQVIA February 2021 Released Items

The below item is targeted for the February 13, 2021

Data Quality Report

STS-5554 – Updating validation severity on identified error messages to display as critical severity messages.

NOTE: The full list of updated validations will be posted to the Library in the platform.

Examples of validation severity updates:

- Mortality Date cannot be later than current date
- Mortality Date is less than Discharge Date
- Mortality Date is less than Surgery Date
- Admit date is greater than Discharge Date
- DOB is greater than Surgery Date

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.

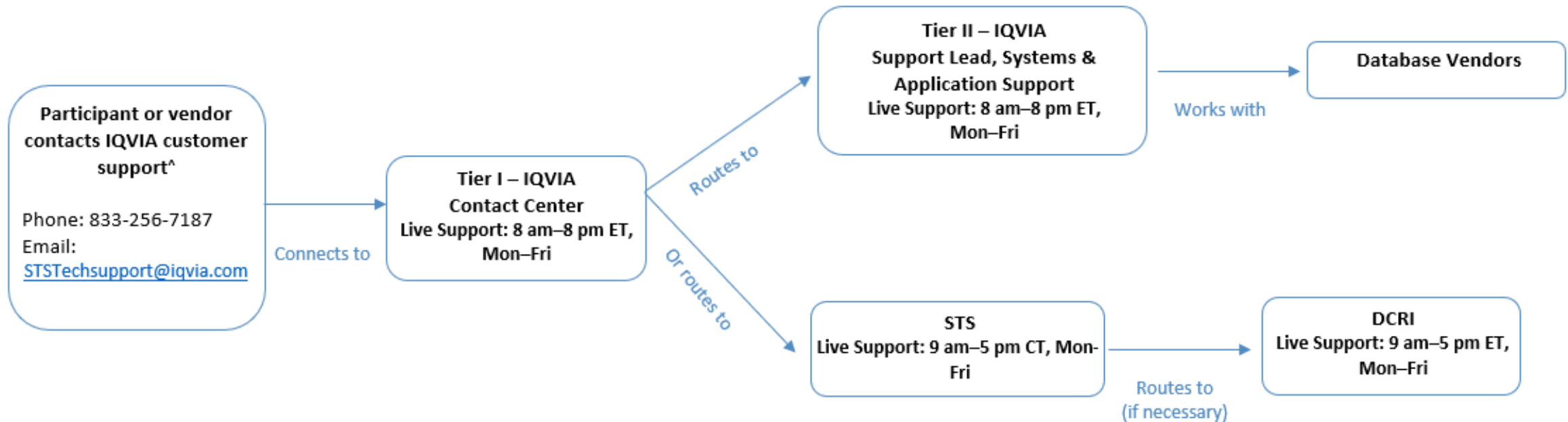
The IQVIA Team is currently reviewing items that will be released in January 2021. Those items will be posted to the Notifications section.

STS/IQVIA Support Plan



IQVIA's Support Plan

****Please include your 5 digit Participant ID**



^ Inquiries received outside live support hours will require a 24-hour turnaround window (i.e., one business day) for responses.



Resources

- [STS National Database Webpage](#)
- STSTechSupport@IQVIA.com (Uploader, DQR, Missing Variable, Dashboard, Password and Login)
- Phone Support: 1-833-256-7187
- [STS National Database Feedback Form](#)
- Resource Documents
 - Contact Information
 - Webinar Information
 - FAQ Document
 - Go-Live Checklist
 - Tiered-level Support Document
 - *Training Videos*
 - *Link to IQVIA*

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

5.21 Upgrade Webinar

- February 24 @ 2:30 CT

Monthly Webinar

- March 10 @ 1:30pm 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!