

STS General Thoracic Audit Instructions

Thank you for your participation in The Society of Thoracic Surgeons (STS) General Thoracic Surgery Database (GTSD) audit. The purpose of the audit is to evaluate the consistency in data collection processes and validate the data contained in the database.

Our company is Cardiac Registry Support (CRS) and we have been contracted by the STS to conduct the STS General Thoracic Audit for 2017 & 2018 cases. CRS has been abstracting and auditing data across various registries since 2009. By adhering to the STS Training Manual, it is the goal of CRS to provide an educational experience with feedback that will assure integrity of the data collected.

The audit process includes data abstraction performed by Cardiac Registry Support on 20 lung cancer cases or esophageal cancer cases performed for cancer resection between **7/1/2017 and 6/30/2018** and submitted to Duke Clinical Research Institute (DCRI).

Below you will find the steps required to complete the audit process. If at any time you have audit related questions or concerns contact us at <u>GenThoracic@cardiacregistrysupport.com</u> Please include your STS Participant ID in <u>all</u> communication with CRS.

Step 1: Complete the Questionnaire

You will find an attachment titled "CRS GTSD Questionnaire" in the email in which you received this document.

Email your auditor at <u>GenThoracic@cardiacregistrysupport.com</u> to set up a pre-audit phone call. The purpose of the phone call is to assist you in completing the questionnaire and answer any questions you may have regarding the gathering of the medical records for the audit. During the phone call, you will be provided a username and password to the CRS secure file portal.

Alternatively, you may thoroughly complete the questionnaire independently and email it to <u>GenThoracic@cardiacregistrysupport.com</u>. Upon receipt of your questionnaire, CRS will email you your username and password to the CRS secure file portal.

Step 2: Obtain Medical Record Documents and OR Case Log Data

Attached is the list of patients that will be audited, in Excel format. Each case is listed by Record ID, which is a de-identified number that links the case to the STS Database and corresponds to a field in your vendor software. The audit variables can be found in Appendix A on page 4-5. Contact your Medical Records and/or IT department to assist with obtaining the required medical record documents. The documents must be provided in PDF format with bookmarks denoting each section. Attached is a Sample PDF with bookmarks to use as a guide in creating your medical records document.



Read through the instructions in the Sample PDF carefully. Each section provides guidance on what documents to include for the audit. Work closely with your Medical Records and/or IT departments to assemble this PDF. It is critical to the success of your audit that you provide the information requested in this document. PDFs that do not include the requested information or are not bookmarked in a usable manner will be returned to you and you will be asked to re-create the PDF.

Sites will have 5 business days to make the changes to the PDF files and re-upload to the portal. If documentation is missing, the site will be notified and asked to upload the requested documents. If CRS does not receive the missing files within 5 business days, the data element will be considered a mismatch. The portal will then be closed.

Operating Room Case Log Comparison

To evaluate the comprehensiveness of the database, the auditor performs a comparison of surgical cases that were performed during 2017 & 2018 (7/1/2017 - 6/30/2018) to cases that were submitted to DCRI. Upload the Operating Room generated Case Log (list) of **all primary lobectomy and esophagectomy cases** into the folder titled "OR Case Log" located in the CRS Portal.

The OR Case Log should list all primary lobectomy and esophagectomy cases and include the STS Record ID for each procedure. The OR Case Log should be provided in an Excel spreadsheet format and include the following fields: STS Record ID, Surgery Date, Primary Procedure (CPT Code), Procedure Description, Discharge Date, and Date of Birth for each procedure. It is not necessary to upload medical records for these cases, only a list of all surgical cases performed. Do not include procedures other than primary lobectomy and esophagectomy cases.

RecordID	SurgDt	Primary Proc	ProcDesc	DischDt	DOB
V111111	2/7/2018	32480	Lobectomy	2/11/2018	1/5/1952
V111112	3/14/2018	43107	Esophagectomy	3/28/2018	12/8/1948
V111113	4/15/2018	32663	Lobectomy	4/23/2018	5/15/1963

OR Case Log Format Example

The following is the list of procedures (CPT codes) that DCRI uses to generate their list of cases. This information may be helpful to your IT Department in generating your OR Case Log.

Lobectomy

Removal of Lung, single lobe (lobectomy) (32480) Removal of Lung, two lobes (bilobectomy) (32482) Removal of Lung, sleeve lobectomy (32486) Thoracoscopy, surgical; with lobectomy, total or segmental (32663)

Esophagectomy

Transhiatal-Total esophagectomy, without thoracotomy, with cervical (43107) Three hole-Total esophagectomy with thoracotomy; with cervical esophagogastrostomy (43112) Ivor Lewis-Partial esophagectomy, distal two-thirds, w/thoracotomy & abdominal incision (43117) Thoracoabdominal-Partial esophagectomy, thoracoabdominal approach (43122) Minimally invasive three-hole esophagectomy (43XXX) Minimally invasive esophagectomy, Ivor Lewis approach (43XXX) Minimally invasive esophagectomy, Abdominal and neck approach (43XXX)



Total esophagectomy w/o thoracotomy; w/colon or small intestine reconstruction (43108) Total esophagectomy w/thoracotomy; w/colon or small intestine reconstruction (43113) Partial esophagectomy, cervical, w/free intestinal graft, incl. microvascular anastomosis (43116) Partial esophagectomy, w/thoracotomy & abdominal incision w/colon or small intestine (43118) Partial esophagectomy, distal two-thirds, with thoracotomy only (43121) Partial esophagectomy, thoracoabdominal with colon interposition or small intestine (43123) Total or partial esophagectomy, without reconstruction with cervical esophagostomy (43124)

Step 3: Upload Medical Record Documents and OR Case Log

After receiving your login and password to the secure CRS portal, upload the requested medical record documents.

Your uploaded files are maintained in designated access control locations that employ encryption to protect data at rest. All access to the designated locations are audited and monitored. Transmission of the data is conducted using compliant encryption algorithms and verified certificates meeting Health Insurance Portability and Accountability Act of 1996 (HIPAA) standards.

Instructions on how to access and use our secure portal can be found on pages 6 and 7

Notify CRS via e-mail at <u>GenThoracic@cardiacregistrysupport.com</u> when all files have been uploaded and are ready for audit. Be sure to include your Participant ID.

Step 4: Audit is Performed

Once CRS has received all required medical record documents, the audit will be performed. During this time, you may be contacted regarding any questions or missing information to ensure a thorough and accurate audit.

Step 5: Audit Review and Summary Report

At the conclusion of the audit CRS will review the audit results and prepare a summary report. The Audit Summary Report will be sent to STS.

Step 7: Final Report

STS will send the final audit report to your Primary Data Contact and Surgeon Representative.



Appendix A: General Thoracic 2019 Audit Variables

V 2.3 Seq #	Field
10	RecordID
30	PatID
290	AdmitDt
150	HospName
570	PriorCTS
580	PreopChemoCur
500	PreopXRT
640	Diabetes
650	DiabCtrl
730	CigSmoking
760	PFT
790	FEVPred
310	DLCOPred
320	Zubrod
330	LungCancer
390	PET or PET/CT
930	ClinStageLungT
1120	ClinStageLungN
.300	CategoryPrim
1340	SurgDt
1390	ProcStartT
1400	ProcEndT
1480	Proc
1530	PatDisp
1540	PathStageLungT
1550	PathStageLungN
1570	LungCANodes
1571	LungCANodStat
1580	LungCAPathMarg
1720	ReturnOR
1780	Pneumonia
.880	AtrialArryth
1840	Vent
1972	Delayed conduit emptying requiring intervention
2100	Recurrent Laryngeal Nerve Paresis
2190	DischDt
2200	MtDCStat
2210	DisLoctn
2220	CTubeDis
2230	Readm30Dis
2240	Mt30Stat
2330	DVT Prophylaxis Measures
2340	SmokCoun



For Esophageal Cases

V 2.3 Seq #	Field
10	RecordID
80	PatID
290	AdmitDt
450	HospName
570	PriorCTS
580	PreopChemoCur
600	PreopXRT
730	CigSmoking
810	DLCOPred
820	Zubrod
1140	EsophCancer
1180	ClinStagEsophEUS
1250	ClinStageEsophT
1251	ClinStageEsophNode
1300	CategoryPrim
1340	SurgDt
1390	ProcStartT
1400	ProcEndT
1480	Proc
1530	PatDisp
1590	PathStageEsophT
1600	PathStageEsophN
1640	EsophCANodes
1650	EsophCAPathMarg
1720	ReturnOR
1780	Pneumonia
1840	Vent
1880	AtrialArryth
1972	Delayed conduit emptying requiring intervention
2100	Recurrent Laryngeal Nerve Paresis
2190	DischDt
2200	MtDCStat
2210	DisLoctn
2220	CTubeDis
2230	Readm30Dis
2240	Mt30Stat
2330	DVT Prophylaxis Measures
2340	SmokCoun



CRS Portal Instructions

Go to: www.crshome.net

Click "LOGIN" in the upper right-hand corner.



LOGIN

Enter your email address and the supplied password. **NOTE: username and password are case sensitive.**

jmorris@sterling-databases.com

After your 1st login, you will be required to change your password.

Reset Password	
E-Mail Address	jmorris@sterling-databases.com
Password	
Confirm Password	

After you update your password, login in again with your new password. On the main page, click on the Record ID you wish to upload data for.

Patients	
r winntner	
OR Case Log	
v12345	
v23456	
v34567	

On the Patient detail page, drag the files you wish to upload to the upload area.



You can drag and drop as many files as are needed into this area. You can leave this Patient detail page and re-enter at any time to upload more files.

< Back			
Uploads	Finished Uploading Data?	Uploaded Files for patient #v12345	
Drop files he	ere to upload		

You will see all of the file names you have uploaded on the right-hand side.



Once you are completely finished uploading data for this patient, Click the "Finished Uploading Data?" button to close uploads and inform us that you are done with that patient data.



When complete notify CRS at Genthoracic@cardiacregistrysupport.com.