

Public Reporting Consent Forms Due March 12

STS Adult Cardiac Surgery Database (ACSD), Congenital Heart Surgery Database (CHSD), and General Thoracic Surgery Database (GTSD) participants who did not take advantage of the last public reporting opportunity but wish to be included in the next round (summer release) **must [submit a consent form](#) by March 12, 2018**. Through this opportunity, ACSD participants can publicly report their overall scores and star ratings for isolated CABG surgery, isolated AVR, and/or combined AVR+CABG. CHSD participants can publicly report their hospital-level overall operative mortality results and star rating. GTSD participants can publicly report their overall scores and star ratings for lobectomy for lung cancer. For more information, contact Sydney Clinton at scClinton@sts.org.

AQO Online Now Available

AQO Online is available for those who attended the 2017 Advances in Quality & Outcomes meeting or those who purchased access. AQO Online provides unlimited, on-demand viewing of meeting presentations with audio and is compatible with computers and mobile devices. [Access the online product](#) with either your STS member username and password or the same login credentials that were used to register for the meeting or purchase the product. If you haven't already purchased access to AQO Online, you can do so via these links:

- [Adult Cardiac Surgery Database](#)
Members: \$275; Non-Members: \$375
- [General Thoracic Surgery Database](#)
Members: \$250; Non-Members: \$350
- [Congenital Heart Surgery Database](#)
Members: \$250; Non-Members: \$350
- [Complete Set](#)
Members: \$700; Non-Members: \$1,000

Learn more about the 2018 AQO meeting below.

Access ACSD Surgeon Worksheets

Surgeons participating in the ACSD are encouraged to use the worksheets that have been developed to assist with data collection. These worksheets take only a few minutes to complete and will help assure that important details are captured accurately and completely for your data managers to input. To access the worksheets, visit the [ACSD Data Collection webpage](#) and click on the arrow for version 2.9. Worksheets are available for:

- [Procedures of the Aorta](#)
- [Aortic Valve](#)
- [Coronary Artery Bypass](#)
- [Intraoperative TEE Post-Procedures](#)
- [Mitral Valve](#)
- [Tricuspid and Pulmonic Valve](#)
- [Atrial Fibrillation/Maze Procedures](#)

These worksheets also will satisfy the "surgeon participation" field in version 2.9.

New FAQs Added to Website

[Frequently asked questions and answers](#) in each cardiothoracic surgery discipline have been added to the STS website. If you have a question, fill out the [Clinical Question Request Form](#). (Please note: If you send an email directly to the FAQ mailbox, *do not send secured or encrypted messages*. They cannot be opened, and you will not receive a response.)

Staging Tables Assist with AJCC 8th Edition

Use of the *American Joint Committee on Cancer (AJCC) 8th Edition Cancer Staging Manual* started on January 1. However, the GTSD Data Collection Form will not be updated to match 8th edition staging until July 1. To assist data managers in the interim, STS has developed mapping tables for [lung cancer staging](#) and [esophageal cancer staging](#).

Clarifications for ACSD Data Collection

- Aortic section, sequence 4975: The [training manual](#) wording was updated to clarify that the section is for “Open Surgical Procedure” of the aorta, not just arch procedures. This wording cannot be changed on the Data Collection Form or in the vendor’s software, so please note the clarification within the training manual.
- Sequence 470: Marijuana should not be captured as an illicit drug and has been removed from the definition.
- Wedge resections done for [biopsy](#) should not be captured within the ACSD.
- Adult congenital cases may be included in the CHSD or the ACSD, depending on the surgeon’s participation status.
- Data Quality Report Risk Match Variance: Proc ID 1, 4, 5, and 8 will now include Unplanned CAB for unsuspected disease or anatomy. This change was very recently implemented in the programming at DCRI. Notification will be sent to sites and vendors with a detailed explanation. Please note that this affected less than 1% of cases. The change will occur at DCRI and may appear as risk score mismatches on your Data Quality Report.

Clarifications for CHSD Data Collection

- Preoperative Factor field #470, “Mechanical ventilation to treat cardiorespiratory failure,” is defined as “This patient was supported with mechanical ventilation to treat cardiorespiratory failure during the hospitalization of this operation and prior to OR Entry Date and Time.” The intent of this field is to code patients who are *intubated (or trach’d) with a mechanical ventilator for cardiorespiratory failure*. Hi-flow gases, VapoTherm, and other “noninvasive” forms of respiratory support (up to and including BiPap without an endotracheal tube) do not meet this definition.
- Beginning with the Fall 2017 Feedback Report, which was released last month, mortality reporting for the CHSD is based on the episode of care. [Read a detailed explanation](#) of how the mortality is calculated.

Thank You for Submitting AQO Feedback

Several AQO attendees completed course evaluations and provided excellent feedback regarding how the meeting could be improved. Below are updates regarding some common requests:

- Beginning next year, the meeting format will be revised. CHSD and GTSD sessions will no longer be held at the same day and times, exciting breakout sessions will be offered for the ACSD, and the meeting may be extended into Friday afternoon.
- Many attendees requested additional time for Q&A during the meeting. This request will be evaluated, but keep in mind that if more Q&A time is added to the agenda, the number of CEUs available will decrease, as CEUs are not provided for Q&A sessions. You will have an opportunity this summer to submit questions that you would like addressed at the meeting.
- Having slides and case studies available prior to the meeting is a common request. Unfortunately, this is not possible, as our volunteer presenters are frequently preparing and/or updating their slides up until the time of their presentation. Please keep in mind that slides will be provided in [AQO Online](#).

The [next AQO meeting](#) will be held September 26-28 in Hollywood, California. If you are interested in helping with planning and/or being a speaker, contact Emily Conrad at econrad@sts.org.

New DCRI Contact Information

The Duke Clinical Research Institute has created Database-specific email addresses through which you can correspond with Data Submission Coordinators:

- ACSD: STSAultDB@dm.duke.edu
- GTSD: STSThoracicDB@dm.duke.edu
- CHSD: STSCongenitalDB@dm.duke.edu