



calm the storm.

CardiacCare™
Outcome Analysis- Flash Reports
Version 7.08

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Flash reports are useful for a facility in order to gain insight and helpful outcome-based analysis for data entered for patients in their system. Flash Reports are pre-built reports that are included with the software and available to generate based on specifying only a time range and include a wide-range of data available to facilities. The following table lists all Flash Reports available to all CardiacCare customers, including the most current software version's Flash Reports.

Currently, Flash Reports are built for the following registry data forms:

1. ACC CathPCI 4 Reports
2. ACC ACTION Reports
3. STS 2.73 Reports
4. STS General Thoracic Surgery 2.08 Reports
5. CCORP Reports
6. ICD 2 Reports
7. CARE Reports
8. Common Reports
9. ACC 3.0 Reports
10. STS 2.61 Reports

ACC CathPCI 4 Flash Reports

Flash Report Name	Time-Frame Filter Applied	Description
ACC4 Procedure Info - By Procedure Date	Procedure Date	Summary of all patients with procedure dates during the time frame selected, as well as a total patient count. All PCI and Diagnostic cases are reported.
ACC4 Significant Coronary Dissection	Discharge Date	Summary of all patients that had a Significant Dissection answered as YES for the time frame selected, as well as a total patient count.
ACC4 Coronary Perforation	Discharge Date	Summary of all patients that had a Coronary Perforation answered as YES for the time frame selected, as well as a total patient count.
ACC4 Patient Expired List	Discharge	Summary of all patients that had the Discharge Status question answered

	Date	as DECEASED for the time frame selected, as well as a total patient count.
ACC4 Case Volumes	Discharge Date	Summary of the following for the time frame selected: <ul style="list-style-type: none"> • Patient count total • Episode count total • Procedure count total • Total number of PCI cases • Total number of Diagnostic cases • Total number of Diagnostic-only cases • Total number of LHC cases
ACC4 Complications - Trends By Month	Discharge Date	Trend report that displays the entire calendar year, separated by month, giving Complication count totals for each of the complications in ACC4. The report will continue to be added to and additional improvements will be incorporated at a later date.
ACC4 Complications - Trends By Quarter	Discharge Date	Trend report and visual GRAPHS that display the entire calendar year, separated by month, giving Complication count totals for each of the complications in ACC4. Graphs are depicted on separate tabs in the Excel worksheet that opens. The report will continue to be added to and additional improvements will be incorporated at a later date.
ACC4 # of Lesions By Patient	Discharge Date	This report lists each patient with MRN, Arrival Date, Discharge Date, Procedure Date and also gives the count of Lesions Attempted & Lesions Successful. Lesion is considered successful when Post-Stenosis ≤ 50 and Pre minus Post Stenosis is ≥ 20
ACC4 Arrival To First Device Activation Time	Discharge Date	This report displays information for patients with PCI= YES. It lists: <ul style="list-style-type: none"> • First Device Activation Date/Time • STEMI – Subsequent ECG Date/Time • PCI Operator It then computes Arrival to First Device Activation Time in minutes. The time difference (in minutes) is computed for all patients from Arrival Date/Time, unless the patient had STEMI with Subsequent ECG in which case the Subsequent ECG Date/Time is considered for computation.
ACC4 Average LOS - CATH Operator	Discharge Date	This is a graphical representation of the <i>Average Length of Stay</i> for each Cath Lab Operator in the Facility, along with the Facility & ACC Average shown across as Line Graph. <ul style="list-style-type: none"> • The <i>Length of Stay</i> is in days - from <i>Arrival to Discharge Date</i>.
ACC4 Average LOS - PCI Operator	Discharge Date	This is a graphical representation of the <i>Average Length of Stay</i> for each PCI Lab Operator in the Facility, along with the Facility & ACC Average shown across as Line Graph. <ul style="list-style-type: none"> • The <i>Length of Stay</i> is in days - from <i>Arrival to Discharge Date</i>.
ACC4 Complication Count	Procedure Date	Lists the Count of Procedures, Diagnostic Cath Procedures, PCI Procedures & Complications for the given timeframe. <ul style="list-style-type: none"> • No patient information is reported as output - only the counts.
ACC4 Device Summary For PCI	Discharge Date	The report consolidates all data for PCI Procedures done (PCI= YES for patient to be included), and reports the total count and % of PCI for the following: <ul style="list-style-type: none"> • Total Patient Episodes with PCI • Total PCI Procedures • Balloon (cases where Balloon was used – regardless of STENT used or not) • Balloon Only (Balloon cases where no Drug Eluting or Bare Metal Stents were used) • Drug Eluting Stent (DES) Only

		<ul style="list-style-type: none"> • Bare Metal Stent (BMS) Only • Both DES & BMS in the same Procedure • Procedures with Drug Eluting Stent – other Stents may also have been used. • Average # of DES by Procedure • Average # of DES by Episode
ACC4 Intra and Post Procedure Events	Procedure Date	<p>This report lists the patients and their complications that occurred. Aside from the raw list of Intra & Post Procedure Events, it lists:</p> <ul style="list-style-type: none"> • Age • Arrival Date • Procedure Date • Discharge Date • MRN, etc. <p>The responses to each <i>Complication</i> is either YES or NO. No special filters are applied.</p>
ACC4 Intra and Post Procedure Events - Occurred	Procedure Date	<p>This report is very similar to list of Complications, but has an important filter. The report only lists the patients which had at least ONE complication answered as “YES”.</p> <ul style="list-style-type: none"> • This filtered report is useful to obtain the list of patients with some kind of complication during or after the procedure
ACC4 Intra and Post Procedure Events - Occurred (Fewer Fields)	Procedure Date	<p>Similar to the report noted above with Intra & Post Procedure Events – just fewer Demographics & Procedure related fields reported in the output.</p>
ACC4 Lesions and Device Counts By Patients	Discharge Date	<p>Lists the procedure done for each PCI patient and lists:</p> <ul style="list-style-type: none"> • PCI Operator • Total count of Lesions Attempted • Lesions Successful • Devices Used • Stents Used • Balloons Used <p>Lesion is considered successful when Post-Stenosis ≤ 50 and Pre minus Post Stenosis is ≥ 20</p>
ACC4 Lesions and Devices By PCI Operator	Discharge Date	<p>For each PCI Operator, it lists:</p> <ul style="list-style-type: none"> • Lesions Attempted • Lesions Successful • Devices Used • Stents Used <p>Lesion is considered successful when Post-Stenosis ≤ 50 and Pre minus Post Stenosis is ≥ 20</p> <p>No Patient raw data is included in this report- only the total count for each category by PCI Operator.</p>
ACC4 LHC Count (No PCI)	Discharge Date	<p>Displays the count of cases that had <i>Left Heart Cath</i> only and <i>PCI = No or Unspecified</i></p>
ACC4 PCI Count	Discharge Date	<p>Generates the report with total number of cases that had PCI</p>
ACC4 Patients without Discharge Date	Procedure Date	<p>This report lists the patients with missing discharge dates. The report is useful to find any patients without a discharge date within given timeframe.</p> <ul style="list-style-type: none"> • This can be used to catch the potential patients that can be part of the harvest but may be excluded due to a missing core field – Discharge Date. • The output is list of patients with MRN, Arrival Date, Procedure Date, Procedure Type (PCI, Diagnostic Cath, LHC)

ACC4 Physician Report Card - Cath Operator	Discharge Date	A single report with data consolidated for various Indicators in the form of a Report Card. The report lists various indicators for each CATH LAB Operator as well as Facility Aggregates for the following: <ul style="list-style-type: none"> • General Info: Total Patients, Procedures, PCI Admissions, PCI Procedures Performed, and Transfers from Other Facilities. • History & Risk Factor Indicators: CAD Presentation of STEMI, Immediate PCI for STEMI, Cardiogenic Shock, Cardiac Arrest, Intra-Procedure Events – Significant Dissection. • Post Procedure Events: Myocardial Infarction, Cardiogenic Shock, Heart Failure, CVA/Stroke, Tamponade, Dialysis, Bleeding, Unplanned CABG, Deaths, Deaths with STEMI at Admission, Deaths with Cardiogenic Shock w/in 24hrs of PCI
ACC4 Physician Report Card - PCI Operator	Discharge Date	A single report with data consolidated for various Indicators in the form of a Report Card. The report lists various indicators for each PCI Operator as well as Facility Aggregates for the following: <ul style="list-style-type: none"> • General Info: Total Patients, Procedures, PCI Admissions, PCI Procedures Performed, and Transfers from Other Facilities. • History & Risk Factor Indicators: CAD Presentation of STEMI, Immediate PCI for STEMI, Cardiogenic Shock, Cardiac Arrest, Intra-Procedure Events – Significant Dissection. • Post Procedure Events: Myocardial Infarction, Cardiogenic Shock, Heart Failure, CVA/Stroke, Tamponade, Dialysis, Bleeding, Unplanned CABG, Deaths, Deaths with STEMI at Admission, Deaths with Cardiogenic Shock w/in 24hrs of PCI
ACC4 Procedure Info	Discharge Date	This report details a list of each procedure for the patient, listing: <ul style="list-style-type: none"> • Arrival Date • Discharge Date • Procedure Date • Procedure Type – PCI, Diagnostic Cath & LHC
ACC4 Stent Patients Discharged w/o Plavix/Ticlid/Prasugrel (Thienopyridine Eligible)	Discharge Date	For every PCI Patient with a STENT deployed, a patient is considered Thienopyridine Eligible. For these eligible patients, they should be discharged with one of following three medications: Plavix (Clopidogrel), Ticlid (Ticlopidine) or Prasugrel <ul style="list-style-type: none"> • This report can be used to find any potential patients who should have received Plavix, Ticlid or Prasugrel and did not – for further investigation. • The output also includes the standard demographics and procedure info along with the data from the Discharge Medications form.
ACC4 Total Length of Stay	Discharge Date	Patient list with <i>Length of Stay</i> computed from <i>Arrival</i> and <i>Discharge</i> dates. <ul style="list-style-type: none"> • The length of stay is computed in days.
ACC4 Total Length of Stay for PCI Patients	Discharge Date	Patient list with <i>Length of Stay</i> computed from <i>Arrival</i> and <i>Discharge</i> dates for PCI Patients only. <ul style="list-style-type: none"> • The length of stay is computed in days. This report is similar to the LOS report above except for the PCI = YES filter is applied
ACC4 Executive - Aspirin Prescribed At Discharge	Discharge Date	Count of PCI admissions with the discharge medication (prescribed at discharge) of Aspirin at discharge coded as yes. Exclusions: <ul style="list-style-type: none"> • Aspirin coded as contraindicated or blinded • Discharge status of expired • Discharge location of “other acute care hospital”, “hospice” or “against medical advice”

ACC4 Executive - Emergency CABG	Discharge Date	Count of PCI admissions with Emergency CABG at your facility or transferred to another facility for emergency CABG.
ACC4 Executive - Transfusion of Whole Blood or RBC	Discharge Date	Count of PCI procedures with a RBC/whole blood transfusion Exclusions: Patients having CABG or other major surgery during the same admission
ACC4 Executive - Post Procedure Stroke	Discharge Date	Count of PCI procedures with post procedure stroke
ACC4 Executive - Vascular Access Site Injury Requiring Treatment Or Major Bleeding (Diagnostic)	Discharge Date	Count of diagnostic cath procedures with a bleeding event (bleeding at access site, hematomas at access site, and/or a retroperitoneal bleed) and/or major access site related injury requiring treatment (access site occlusion, peripheral embolization, dissection, psuedoaneurysm, AV fistulas) Exclusions: <ul style="list-style-type: none"> • Diagnostic cath procedures with a PCI during the same lab visit. • Patient with CABG or “other major surgery” during admission • Bleeding events that occur 72 hours after the procedure (note major access site related injury requiring treatment does not have this timing restriction). • GI, GU and “Other” bleeding events
ACC4 Executive - Vascular Access Site Injury Requiring Treatment Or Major Bleeding (PCI)	Discharge Date	Count of PCI procedures with a bleeding event (bleeding at access site, hematomas at access site, and/or a retroperitoneal bleed) and/or major access site related injury requiring treatment (access site occlusion, peripheral embolization, dissection, psuedoaneurysm, AV fistulas) Exclusions: <ul style="list-style-type: none"> • Patients with CABG or other major surgery during same admission • Bleeding events that occur 72 hours after the procedure (note major access site related injury requiring treatment does not have this timing restriction). • GI, GU and “Other” bleeding events
ACC4 Executive - Positive Stress Or Imaging Study Prior To Elective PCI	Discharge Date	Count of PCI procedures with an antecedent stress or imaging study performed with a positive result (suggestive of ischemia) or a fractional flow reserve assessed during the PCI procedure. Only accounting for the Effective PCIs Exclusions: Patients with acute coronary syndrome (CAD Presentation=STEMI; NSTEMI or Unstable Angina)
ACC4 Executive - PCI In-Hospital Mortality	Discharge Date	Your hospital’s PCI in-hospital risk adjusted mortality rate for all patients adjusted using the NCDR® risk adjustment model.
ACC4 Executive - Thienopyridine Prescribed at Discharge	Discharge Date	Proportion of patients (without a documented contraindication) with a stent implanted that had a thienopyridine prescribed at discharge. Exclusions: <ul style="list-style-type: none"> • Thienopyridine coded as contraindicated or blinded • Discharge status of expired • Discharge location of “other acute care hospital”, hospice” or “against medical advice”
ACC4 Executive - Lipid Lowering Agent Prescribed At Discharge	Discharge Date	Proportion of patients with a history of dyslipidemia who had a lipid lowering agent prescribed at discharge. Count of PCI admissions with a lipid lowering agent (statin or non-statin) coded as “yes”. Exclusions: <ul style="list-style-type: none"> • Discharge status of expired

		<ul style="list-style-type: none"> Discharge location of “other acute care hospital”, hospice” or “against medical advice” History of Dyslipidemia=No When a statin is blinded, and a non-statin is coded as “no,” the patient record would be excluded in the numerator and denominator because it is unclear whether the patient should have been receiving a non-statin because of the study parameters.
ACC4 Executive - Post Procedure Myocardial Infarction	Discharge Date	<p>Your hospital’s proportion of patients with post procedure MI.</p> <ul style="list-style-type: none"> Submissions with >= 90% of patients with biomarkers (troponin and/or CK) coded post procedure LOS >= 1 day Data from submissions that pass NCDR data inclusion thresholds. 4. Elective PCI <p>Exclusions:</p> <ul style="list-style-type: none"> Submissions with < 90% of patients with biomarkers (troponin and/or CK) coded post procedure LOS <1 day
ACC4 Executive - Composite Death Emergency CABG Stroke or Repeat Target Vessel Revascularization	Discharge Date	<p>Count of PCI admissions with a discharge status of expired; an emergency CABG, stroke or repeat target vessel revascularization prior to discharge.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> Staged PCI during the same admission
ACC4 Executive - Incidence of non-obstructive CAD	Discharge Date	<p>Patients having a diagnostic cath (with coronary angiography) where all major coronary branches have <50% stenosis. (Note: if a vessel is not assessed, its stenosis is assumed as 0).</p> <ul style="list-style-type: none"> Diagnostic cath procedure with coronary angiography Diagnostic cath status = elective <p>Exclusions:</p> <ul style="list-style-type: none"> Previous CABG Graft territories in the coronary anatomy section Cardiac transplant evaluation= donor Pre-op evaluation for non-cardiac surgery Diagnostic cath treatment recommendation=other cardiac therapy without CABG or PCI
ACC4 Executive - Lipid Lowering Agent for Patients with Dyslipidemia	Discharge Date	<p>Count of PCI admissions with a History of Dyslipidemia coded as “yes”.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> Discharge status of expired History of Dyslipidemia=No When a statin is blinded, and a non-statin is coded as “no,” the patient record would be excluded in the numerator and denominator because it is unclear whether the patient should have been receiving a non-statin because of the study parameters.
ACC4 Executive – Acute Kidney Injury	Discharge Date	<p>List of all patients with the following fields: MRN, Arrival Date, Discharge Date, Procedure Date, PCI, Diagnostic Cath, LHC, Cath Lab Operator, PCI Operator, Currently on Dialysis, LOS, Pre-Procedure Creatinine, Post- Procedure Creatinine, Creatinine % Difference. Also will display a count of: # of PCI Procedures and # of PCI Admissions</p>
ACC4 Executive - Aspirin NOT Prescribed At Discharge	Discharge Date	<p>Count of PCI admissions with the discharge medication (prescribed at discharge) of Aspirin at discharge coded as NO.</p>

		<p>Exclusions:</p> <ul style="list-style-type: none"> • Aspirin coded as contraindicated or blinded • Discharge status of expired • Discharge location of “other acute care hospital”, “hospice” or “against medical advice”
ACC4 Executive - Lipid Lowering Agent NOT Prescribed At Discharge	Discharge Date	<p>Proportion of patients with a history of dyslipidemia who had a lipid lowering agent prescribed at discharge. Count of PCI admissions with a lipid lowering agent (statin and non-statin) coded as NO</p> <p>Exclusions:</p> <ul style="list-style-type: none"> • Discharge status of expired • Discharge location of “other acute care hospital”, hospice” or “against medical advice”
ACC4 Executive - Thienopyridine NOT Prescribed At Discharge	Discharge Date	<p>Proportion of patients (without a documented contraindication) with a stent implanted that did not have a thienopyridine prescribed at discharge.</p> <p>Exclusions:</p> <ul style="list-style-type: none"> • Thienopyridine coded as No • Discharge status of expired • Discharge location of “other acute care hospital”, hospice” or “against medical advice”
ACC4 Executive - NO Positive Stress Or Imaging Study Prior To Elective PCI	Discharge Date	<p>Count of PCI procedures with the following filter applied:</p> <p>Stress or Imaging Studies (5100) = No</p> <p>Or Stress Test Results (5201) = Negative</p> <p>Or Stress Echo Imaging Results (5211) = Negative</p> <p>Or SPECT MPI Imaging Results (5221) = Negative</p> <p>Or CMR Imaging Results (5231) = Negative</p> <p>Or Cardiac CTA Results (5241) = No Disease</p> <p>Or Calcium Score (5251) < 101</p> <p>Or Fractional Flow Reserve Ratio (7135) >= 0.8</p>

ACC ACTION Flash Reports

ACTION- AMI Core Measure	Discharge Date	Summary of all AMI Core Measures for each patient, for all patients with a discharge date in the time frame selected.
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STS 2.73 Flash Reports

Flash Report Name	Time-Frame Filter Applied	Description
STS 2.73 Risk Stratification Analysis	Surgery Date	<p>This is the Statistical Analysis report that generates various calculations based on the STS algorithms and numerical methods. The calculations reported are:</p> <ul style="list-style-type: none"> • Sample Size of Study • Observed Mortality in Sample • Observed Percentage Mortality Rate in Sample • 95% Confidence Limits for Observed Mortality - LOWER

		<ul style="list-style-type: none"> • 95% Confidence Limits for Observed Mortality - UPPER • Mean Predicted Mortality in Sample • Observed/Expected Ratio (O/E <1.0 is Favorable)
STS 2.73 Risk Stratification Analysis With Predicted Risk Mortality	Surgery Date	This report is similar to the one above, except it assumes that the STS Predicted Risk Mortality is calculated for all the patients included in the study. The patient records that don't calculate or generate the Predicted Risk of Mortality are ignored.
STS 2.73 Length of Stay Outlier by Patient	Surgery Date	This length of stay report is similar in output but give the result only for the Patients with the effective LOS – Admission to Discharge >= the Outlier value specified. The report is useful in finding the number of cases with LOS more than, for example 10 days
STS 2.73 LOS By Patient	Surgery Date	This length of stay report lists the LOS (all three) for each patient record filtered. This is a raw-data output report
STS 2.73 Length of Stay By Range	Surgery Date	<p>This report generates three different 'Length of Stay' for a group of patients. The three LOS listed are:</p> <ol style="list-style-type: none"> 1. Admission to Surgery 2. Surgery to Discharge 3. Admission to Discharge <p>The report also adds the statistical values such as MEAN, MEDIAN, TOTAL, COUNT, etc. at the bottom of the report for each of the three LOS</p>
STS 2.73 Extubation Time By Surgeon	Surgery Date	A cross-tab report of Extubation Time distributed over the ranges <5Hrs, 5-8Hrs, 9-12Hrs, 13-24Hrs, >24Hrs by each Surgeon in the system.
STS 2.73 Count By Complications	Surgery Date	This is the list of all the complications and their counts for the specified filter criterion
STS 2.73 Blood Utilization Post Op (Statistics)	Surgery Date	The report gives the total patients transfused, total patient and % of patients transfused and its distribution.
STS 2.73 HC4 (Health Care Cost Containment Council) Report	Surgery Date	<p>This is a list of patients categorized by CABG only, Valve only, CAB+Valve, CAB+Valve+Other, etc. The contents of the report include:</p> <ul style="list-style-type: none"> • Patient Name • MRN • Date of Admission • Date of Surgery • OpCAB, OpValve • OpOCard • Creatinine Preop • Cardiogenic Shock • Surgeon, etc.
STS 2.73 Cases By Anesthesiologist	Surgery Date	This report provides a Frequency Report of total number of cases performed by each Anesthesiologist

STS 2.73 Patients By Anesthesiologist	Surgery Date	This report provides a list of patients along with their Anesthesiologist
STS 2.73 Patient Info	Surgery Date	This report displays a list of patients with their Operative Category and Surgery Date.
STS 2.73 Observed vs Expected Risk By Patient	Surgery Date	<p>This report is a patient list providing the observed versus expected risk, comparing the following measures:</p> <ul style="list-style-type: none"> • Mortality • Stroke • Renal Failure • Prolonged Ventilation • Deep Sternal Wound <p>Also included in the report are the following fields:</p> <ul style="list-style-type: none"> • Patient information: Last Name, First Name, MRN, DOB, Age at Surgery • Surgery Date • Surgeon Name

STS General Thoracic Surgery v2.08 Flash Reports

General Thoracic Surgery Report Card	Surgery Date	<p>Report card for Thoracic Surgeons listing several STS indicators and measures including:</p> <ul style="list-style-type: none"> • Mortality and morbidity information • Complication information by Index Case and by System • Case counts, LOS information by surgeon • Status of Operation
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CCORP Flash Reports

CCORP 2.61 Patients Required for STS 2.73 Data Entry	N/A	In order to identify the patients that will require special handling for creating a CCORP 2.73 from a 2.61 data form, a new Flash Report has been created for users. This report will be automatically included in your version if you have CCORP enabled.
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ICD 2.0 Flash Reports

ICD2 – Report Card – Executive Summary - Procedures	Discharge Date	ICD2 Executive Summary report card for ICD physicians listing several procedure related fields from the <i>Implant Explant</i> section, <i>Adverse Events</i> section and <i>Medications and LVEF</i> section
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CARE Flash Reports

CARE – Carotid Artery Stenting Facility Recertification Report	Procedure Date	CMS recertification report including the following fields: Social Security Number, HIC, Data of Birth, Procedure Date, Patient Symptomatic, High Surgical Risk, Pre-procedure Modified Rankin, First Lesion Pre-procedure Percent Stenosis, Embolic Protection Used, Complication During Hospitalization
CARE – Carotid Artery Stenting Facility Recertification Report – With Patient Info	Procedure Date	CMS recertification report including the following fields: Social Security Number, HIC, Data of Birth, Procedure Date, Patient Symptomatic, High Surgical Risk, Pre-procedure Modified Rankin, First Lesion Pre-procedure Percent Stenosis, Embolic Protection Used, Complication During Hospitalization. This report will also include patient specific information.

COMMON Flash Reports

Flash Report Name	Time-Frame Filter Applied	Description
Interface Summary	User identified	This report summarizes the following: <ul style="list-style-type: none"> • When processed • Short Result • Patient info: Last Name, First Name, MRN • Case Number • Record ID • Admission Date • Procedure Date • Number of Saved Fields • Registry Name (ACC, STS, etc.) • Record Type (CathPCI, etc.)
Interface Summary – Failed Messages	User identified	This report summarizes the same fields as the <i>Interface Summary</i> report; however the data is filtered for <u>failed messages only</u> . This provides a quick summary report for messages that failed during processing.
Interface Processing Results	User identified	This report provides detailed information of the results along with other useful IDs such as Record ID, Cedaron Database Patient ID, Unique ID (ACC Patient ID), Family ID, etc.
Interface Processing Results – Failed Messages	User identified	Similar to the <i>Interface Processing Results</i> report; however this report shows data only for <u>failed messages only</u> . This this report provides an extended view of messages & information for messages that failed during processing.

ACC 3.0 Flash Reports

Flash Report Name	Time-Frame Filter Applied	Description
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ACC 3.0 # of Lesions by Patient	Discharge Date	Lists the number of Lesions attempted and successful for each patient record
ACC 3.0 Cardiac Full Export	Discharge Date	Exports all of the ACC 3.0 records – each column represents the questions, and rows represent the patient records with the response
ACC 3.0 CoMorbidity Report	Discharge Date	<p>This report compiles multiple calculations pertaining to the patient records as a group. Some of the items included are:</p> <ul style="list-style-type: none"> • # Admissions with PCI • # PCI Procedures Performed • Mean Age (by ranges) • Gender • Cardiac Status • Proximal LAD Lesion >= 70% • Multivessel disease (>= 50% in 2 or more coronary arteries or major branches including LM) • PCI Status • Indication for PCI Procedure Was Restenosis • Percentage of High Risk Lesions (High/ C category) • History of Diabetes • History of Renal Failure • History of Chronic Lung Disease • History of Peripheral Vascular Disease
ACC 3.0 Complication Count	Discharge Date	<p>This report produces the list of</p> <ul style="list-style-type: none"> • # of Procedures • # of Diagnostic Cath Procedures • # of PCI Procedures • # of Complications
ACC 3.0 Core Measure Report	Discharge Date	<p>The contents of this report compare the patient totals with the average of the facility. The comparison is based on the following parameters:</p> <ul style="list-style-type: none"> • # Admissions with PCI • # PCI Procedures Performed • # Patients with AMI on Admit • Medications on Admit (Goal 100%) <ul style="list-style-type: none"> ○ Aspirin on Admit ○ Beta Blocker on Admit • Time to Treatment • Primary PCI for STEMI • Percentage of cases with "Door to balloon time" <= 90 minutes • Discharge Medications (Goal 100%) <ul style="list-style-type: none"> ○ Ace Inhibitor or ARB on DC ○ Aspirin on DC ○ Beta Blocker on DC • Current Smoker <ul style="list-style-type: none"> ○ Smoking Cessation Counseling on DC • Other Treatments (All PCI Patients) <ul style="list-style-type: none"> ○ Patients that received stents ○ Platelet Inhibitor on DC among patients that received stents ○ Statins on DC
ACC 3.0 Length of Stay	Discharge Date	Average LOS (Length of Stay) and clinical average by physicians
ACC 3.0 LHC Count	Discharge Date	This report displays the # of patients with LHC (Left Heart Cath) as a total count
ACC 3.0 PCI Count	Discharge Date	This report displays the # of PCI patients as a total count

ACC 3.0 Physician Report Card	Discharge Date	A comprehensive report listing combined results of various parameters and calculation by physician. The report is in two parts. First part lists all the parameters for the entire facility. The second part of the report lists the details by each Physician in drill-down manner. The parameters that are evaluated are: <ul style="list-style-type: none"> • # of Admissions with PCI • # of PCI Procedures Performed • Transfers • ST Elevated MI • % of total patients with STEMI • # of patients in Cardiogenic Shock at Admit • Medial LOS for all Patients • Median LOS for STEMI patients • Adverse Events during PCI, Adverse Outcomes – during and/or after PCI • # of Periprocedural MI • CVA, Tamponade • Bleeding • Other complications
ACC 3.0 Post Procedure Length of Stay	Discharge Date	The Length of Stay from Date of Procedure to Date of Discharge
ACC 3.0 Pre Procedure Length of Stay	Discharge Date	The Length of Stay from Admit Date to Discharge Date
ACC 3.0 Site Complications	Discharge Date	This report displays the frequency distribution of: Dissection in Segment, Acute Closure, Successful Reopening, and Perforation. It also prints the list of patients that had Acute Clouse, Successful Reopening, and Perforation
ACC 3.0 Stent Usage by PCI Operator	Discharge Date	This is a cross-tab report of PCI Operators by the # of Cases, # of Lesions, and # of Stents
ACC 3.0 Clinical Outcomes	Discharge Date	This reports list the # of Admissions with PCI, PCI Procedures Performed, Adverse Outcomes before, during and after the Cath Lab Visit. The distribution is count and the percentage.
ACC 3.0 Complications	Discharge Date	This lists all patients who have a complication answered as “YES” in their record.

STS 2.61 Flash Reports

STS 2.61 - Blood Utilization Post Op (Statistics)	Surgery Date	The report gives the total patients transfused, total patient and % of patients transfused and its distribution.
STS 2.61 - Cardiothoracic Surgery - CAB Patients Report	Surgery Date	This report lists various parameters and their counts and % of Total Population. The parameters included for this report are: <ul style="list-style-type: none"> • Total Number of CAB Patients • Status • CABG • VALVE • Single Bypass • Previous Operation • Age • Age by Ranges • Ejection Fractions • COPD

		<ul style="list-style-type: none"> • Risk Factors such as Diabetic, Hypertension, etc. • PVD • Pre-Op Mitral Disease • Creatinine • Pre-Op Dialysis • Post-Op LOS • LOS • LOS by Range • Total # of Patients • Post-Operative Management • Early Post-Op Hemorrhage • Atrial Fibrillation • New Post-Op Onset AF • Chronic or Pre-Op Onset AF • Blood Bank Product Usage • Infection • Deep Sternal, and many more
STS 2.61 - Count By Complications	Surgery Date	This is the list of all the complications and their counts for the specified filter criterion
STS 2.61 - Extubation Time by Surgeon	Surgery Date	A cross-tab report of Extubation Time distributed over the ranges <5Hrs, 5-8Hrs, 9-12Hrs, 13-24Hrs, >24Hrs by each Surgeon in the system.
STS 2.61 - Length of Stay by Range	Surgery Date	<p>This report generates three different 'Length of Stay' for a group of patients. The three LOS listed are:</p> <ol style="list-style-type: none"> 1. Admission to Surgery 2. Surgery to Discharge 3. Admission to Discharge <p>The report also adds the statistical values such as MEAN, MEDIAN, TOTAL, COUNT, etc. at the bottom of the report for each of the three LOS</p>
STS 2.61 - Length of Stay Outlier by Patient	Surgery Date	This LOS report is similar in output but give the result only for the Patients with the effective LOS – Admission to Discharge >= the Outlier value specified. The report is useful in finding the number of cases with LOS more than, for example 10 days
STS 2.61 - LOS by Patient	Surgery Date	This LOS report lists the LOS (all three) for each patient record filtered. This is a raw-data output report
STS 2.61 - Risk Stratification Analysis	Surgery Date	<p>This is the Statistical Analysis report that generates various calculations based on the STS algorithms and numerical methods. The calculations reported are:</p> <ul style="list-style-type: none"> • Sample Size of Study • Observed Mortality in Sample • Observed Percentage Mortality Rate in Sample • 95% Confidence Limits for Observed Mortality - LOWER • 95% Confidence Limits for Observed Mortality - UPPER • Mean Predicted Mortality in Sample • Observed/Expected Ratio (O/E <1.0 is Favorable)
STS 2.61 - Risk Stratification with Predicted Risk Mortality	Surgery Date	This report is similar to the one above, except it assumes that the STS Predicted Risk Mortality is calculated for all the patients included in the study. The patient records that don't calculate or generate the Predicted Risk of Mortality are ignored.
STS 2.61 Cases by Anesthesiologist	Surgery Date	This is a Frequency Report of total number of cases performed by each Anesthesiologist
STS 2.61 Patients by Anesthesiologist	Surgery Date	This is the list of patients along with their Anesthesiologist
STS 2.61 CAB or OPCAB by	Surgery Date	This is a cross-tab report listing all the Surgeons with the count of CAB

Surgeon		and OpCAB cases performed.
STS 2.61 CABG Countdis – DistalAnastomoses Count	Surgery Date	This is a frequency report listing number of cases done by each category of CABG Countdis, with a filter criterion of Operative Category being one of the following: CAB, CAB + Valve, CAB + Valve + Other, CAB + Other (i.e. only patients with CABG cases) The counts are distributed for three possible Countdis: <ul style="list-style-type: none"> • Distal Anastomoses • Proximal Anastomoses • Number of Internal Mammary Artery Distal Anastomoses
STS 2.61 Complications by Patients	Surgery Date	The report contains the list of patients, Gender, DOB, Surgery Date, and list of all the complications marked “YES” or “NO” in each column under the complication name
STS 2.61 Extubation Time by Surgeon	Surgery Date	This report is a cross-tab analysis of range of Extubation time by each Surgeon. The report lists the surgeons on each row, and count of cases distributed over range of Extubation Times. The ranges set for this report are: <5 Hours; 5-8 Hours; 9-12 Hours; 13-24 Hours; >24 Hours
STS 2.61 Mortality by Operative Category	Surgery Date	This is a cross-tab analysis of Mortality by combination of CAB and Valve categories listed below: <ul style="list-style-type: none"> • CAB • CAB + Valve • CAB + Valve + Other • CAB + Other • Valve • Valve + Other • Other The Mortality is depicted in two columns with YES or NO response.
STS 2.61 Mortality by Physician	Surgery Date	A cross-tab report with list of Surgeons alongside the frequency/count of Mortality (YES or NO)
STS 2.61 Mortality by Valve Repair or Replace	Surgery Date	A cross-tab report between Mortality (YES or NO) and combinations of Valve Repair or Replace options, namely: <ul style="list-style-type: none"> • Valve Repair – Aortic • Valve Replace – Aortic • Valve Repair – Mitral • Valve Replace – Mitral • Valve Repair – Tricuspid • Valve Replace – Tricuspid • Valve Repair – Pulmonic • Valve Replace – Pulmonic
STS 2.61 Op Category by Surgeon	Surgery Date	This report displays a cross-tab view between the Surgeons and various combinations of Operative Category: <ul style="list-style-type: none"> • CAB • CAB + Valve • CAB + Valve + Other • CAB + Other • Valve • Valve + Other • Other
STS 2.61 Patient Population	Surgery Date	This report displays a list of patients with their Operative Category and Surgery Date.
HC4 (Health Care Cost Containment Council) Report	Surgery Date	This is a list of patients categorized by CABG only, Valve only, CAB+Valve, CAB+Valve+Other, etc. The contents of the report include: <ul style="list-style-type: none"> • Patient Name • MRN

		<ul style="list-style-type: none"> • Date of Admission • Date of Surgery • OpCAB, OpValve • OpOCard • Creatinine Preop • Cardiogenic Shock • Surgeon, etc.
STS 2.61 Complications	Surgery Date	This lists all patients who have complications
STS-261 - Report Card - CAB Only (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- CAB Only
STS-261 - Report Card - AV Replacement Only (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- AV Replacement Only
STS-261 - Report Card - MV Replacement Only (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- MV Replacement Only
STS-261 - Report Card - AV Replacement + CAB (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- AV Replacement & CAB
STS-261 - Report Card - MV Replacement + CAB (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- MV Replacement & CAB
STS-261 - Report Card - AV Replacement + MV Replacement (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- AV Replacement + MV Replacement
STS-261 - Report Card - MV Repair (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- MV Repair
STS-261 - Report Card - MV Repair + CAB (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- MV Repair + CAB
STS-261 - Report Card - Other Procedures (NQF)	Surgery Date	Comprehensive physician report card with multiple measures, counts and calculated values reported on at the aggregate (or Facility level) and also at the individual physician level for all patients in the timeframe selected- Other Procedures
STS-261 - Report Card – Procedure Counts	Surgery Date	Comprehensive physician report card with counts and percentages of the following procedure types: Isolated CAB, Isolated AV Replacement, Isolated MV Replacement, AV Replacement + CAB, MV Replacement + CAB, AV Replacement + MV Replacement, MV Repair, MV Repair + CAB