

STS National Database:  
ACSD Monthly Webinar  
November 6, 2024

# Agenda

Welcome and Introductions

STS Updates

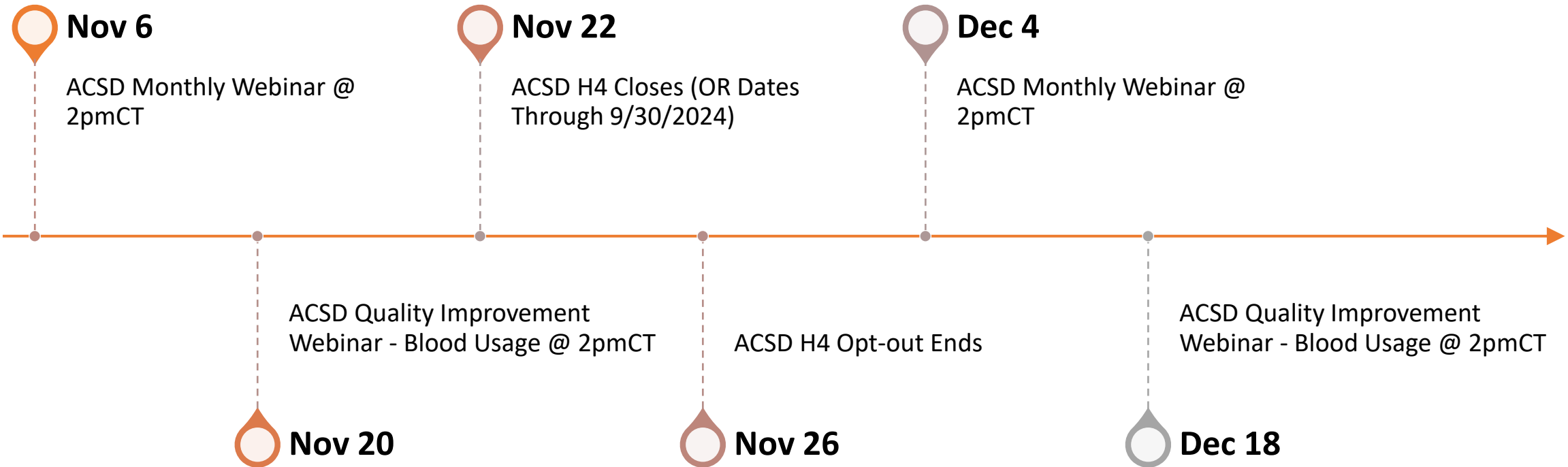
Multi Valve +/- CABG

STS Updates

September Training  
Manual Posted

Important Dates

# Important Dates

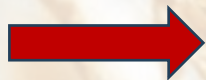




# Harvest 2024 Dates

## 2024 Harvest

Term	Harvest Submission Window Close	Opt-Out Date	Includes Procedures Performed Through:	Report Posting	Comments
Harvest 1	2/23/2024	2/27/2024	12/31/2023	Spring 2024	Star Rating
Harvest 2	6/7/2024	6/11/2024	3/31/2024	Summer 2024	
Harvest 3	10/4/2024	10/8/2024	6/30/2024	Fall 2024	Star Rating
Harvest 4	11/22/2024	11/26/2024	9/30/2024	Winter 2024	



*Data Submission Open is continuous for all harvest terms. Submission Close occurs at 11:59 p.m. Eastern on the date listed.*



## Harvest Schedule for 2025

### ACSD

Harvest	Close	Opt-Out	Includes procedures performed through	Report Posting	Comments
H1 2025	February 21	February 25	December 31, 2024	Spring 2025	Star Rating
H2 2025	May 23	May 27	March 31, 2025	Summer 2025	
H3 2025	August 22	August 26	June 30, 2025	Fall 2025	Star Rating
H4 2025	November 21	November 25	September 30, 2025	Winter 2025	

Analysis for each harvest is based on a 36-month window.

# AQO 2024

**Thank you to all our amazing speakers and attendees!**

- ✓ The deadline to complete your online evaluation and claim continuing education credit for AQO 2024 is Friday, December 13, 2024.
- ✓ Recordings of lectures and discussions are available on the virtual platform, and you can view them through Friday, November 15, 2024.
- ✓ After November 15, all recorded content will be moved to the STS Learning Center until AQO 2025.



Don't Forget  
Our New  
Facebook  
Group!





# Multi-Valve +/- CABG



# Multi-Valve +/- CABG

## What Is Included?

### Proc ID 9 Multi-Valve

- Aortic Valve Replacement + Mitral Valve Replacement **OR** Repair (planned or unplanned due to unsuspected disease or anatomy)
- With or Without Tricuspid Valve Repair (planned or unplanned)
- Unplanned CABG due to surgical complication

### Proc ID 10 Multi-Valve + CABG

- Aortic Valve Replacement + Mitral Valve Replacement **OR** Repair (planned or unplanned due to unsuspected disease or anatomy)
- With or Without Tricuspid Valve Repair (planned or unplanned)
- Planned CABG
- Unplanned CABG due to unsuspected disease or anatomy



# Multi-Valve +/- CABG May Also Include...

- Atrial Fibrillation Procedures, both epicardial and intracardiac
- PFO, Primary closure
- ASD Repair, Primary closure or patch
- Pacemaker Insertions
- Lead Insertions



# Multi-Valve +/- CABG May Also Include...

## VAD Implants Occurring:

- Pre-operatively, during same hospitalization but not during this procedure
- Intra-operatively, same trip to the OR-Unplanned
- Post-operatively, during reoperation



# Multi-Valve +/- CABG Not Included

- Tricuspid Valve Replacement OR Tricuspid Prosthetic Valve Intervention (not explant of prosthetic valve) OR Valvectomy
- Pulmonic Valve Procedures
- Aorta Procedures
- Lead Extractions
- Other Non-Cardiac Procedures

Unless unplanned due to surgical complication!





# Multi-Valve +/- CABG Not Included

- Transcatheter Valve Procedures
- Endovascular Procedures
- Previous VAD explanted during this procedure
- Other Cardiac Other Procedures (OCarOthr) – Note: If unplanned due to surgical complication, please see coding instructions in the Training Manual
- Arrhythmia Devices other than pacemakers (ICD, ICD with CRT, Implantable Recorder, Pacemaker with CRT)
- Lead Extractions, planned and unplanned due to unsuspected disease or anatomy



# Multi-Valve +/- CABG Not Included

- Subaortic Stenosis Resection
- Pulmonary Thrombolectomy
- LV Aneurysm Repair
- Transmyocardial Revascularization
- Heart Transplant
- Cardiac Tumor
- Cardiac Trauma
- Acquired VSD Repair



# Multi-Valve +/- CABG

## New Risk Model Variables

Multi-Valve +/- CABG	Operative Mortality	Stroke	Renal Failure	Prolonged Ventilation	Deep Stern Inf	Reop	Mortality/ Mortality	Leng of Stay>14	Length of Stay<6
<b>B. Demographics</b>									
Age (70)	x	x	x	x		x	x	x	x
Gender (75)	x	x	x	x		x	x	x	x
RaceBlack (160)	x	x	x	x		x	x	x	x
RaceAsian (165)	x	x	x	x		x	x	x	x
RaceNativeAm (170)	x	x	x	x		x	x	x	x
RacNativePacific (175)	x	x	x	x		x	x	x	x
Ethnicity (185)	x	x	x	x		x	x	x	x
<b>C. Hospitalization</b>									
SurgDt (310)	x	x	x	x		x	x	x	x
PayorPrim (291)	x	x	x	x		x	x	x	x
PayorSecond (293)	x	x	x	x		x	x	x	x
<b>D. Risk Factors</b>									
WeightKg (335)	x	x	x	x		x	x	x	x
HeightCm (330)	x	x	x	x		x	x	x	x
Diabetes (360)	x	x	x	x		x	x	x	x
DiabCtrl (365)	x	x	x	x		x	x	x	x
Hct (575)	x	x	x	x		x	x	x	x
WBC (565)	x	x	x	x		x	x	x	x
Platelets (580)	x	x	x	x		x	x	x	x
TotAlbumin (585)	x	x	x	x		x	x	x	x
CreatLst (585)	x	x	x	x		x	x	x	x
TotBlrbn (610)	x	x	x	x		x	x	x	x
INR (615)	x	x	x	x		x	x	x	x

- Total Albumin
- Total Bilirubin
- INR





## Isolated Aortic Valve Replacement Procedure Risk-Adjusted Data Summary

Participant: 99999

STS Period Ending Dec 2023



### Mortality Risk-Adjustment

Outcome		My Site 2021	My Site 2022	My Site 2023	Like Group 2023	Region 2023	STS 2023
In-hospital Mortality	OR (95% CI)	0.74 (0.22-2.54)	0.82 (0.34-1.94)	0.81 (0.29-2.31)	1.36 (1.01-1.82)	1.00 (-)	1.00
	O/E (95% CI)	0.00 (0.00-3.57)	0.00 (0.00-2.64)	0.58 (0.03-2.98)	1.17 (0.94-1.42)	1.00 (0.62-1.55)	1.00
	Risk-adjusted Rate (95% CI)	0.00%	0.00%	0.88% (0.05-4.56)	1.79% (1.44-2.18)	1.53% (0.94-2.38)	1.53%
	Observed Rate	-	-	-	1.72%	1.48%	1.48%
Operative Mortality	OR (95% CI)	0.96 (0.38-2.40)	0.76 (0.32-1.79)	0.94 (0.40-2.20)	1.36 (1.05-1.75)	1.00 (-)	1.00
	O/E (95% CI)	0.73 (0.04-3.78)	0.00 (0.00-1.98)	0.85 (0.15-2.85)	1.17 (0.97-1.38)	0.90 (0.59-1.35)	1.00
	Risk-adjusted Rate (95% CI)	1.70%	0.00%	1.76% (0.31-5.90)	2.42% (2.01-2.87)	1.87% (1.21-2.79)	2.07%
	Observed Rate	-	-	-	2.44%	1.81%	2.07%

### Complications (not adjusted)

Outcome		My Site 2021	My Site 2022	My Site 2023	Like Group 2023	Region 2023	STS 2023
Deep Sternal Infection / Mediastinitis	Observed Rate	-	-	-	0.21%	0.16%	0.14%
Major Complications or Op. Mortality	Observed Rate	-	-	-	10.11%	8.14%	10.15%
Permanent Stroke	Observed Rate	-	-	-	1.29%	1.23%	1.15%
Prolonged Ventilation	Observed Rate	-	-	-	5.92%	4.69%	6.15%
Renal Failure	Observed Rate	-	-	-	1.99%	1.88%	1.99%
Reoperation	Observed Rate	-	-	-	3.78%	2.22%	3.79%

# ACSD Risk Adjusted Dashboard Report

## Benchmark Reports Morbidity/Mortality-Example

		My Site 2021	My Site 2022	My Site 2023	Like Group 2023	STS 2023
<b>Any Complication</b>	<b>Any Complications</b>	54.76%	36%	54.83%	42.10%	41.37%
<b>Any Major Complications / Operat...</b>	<b>Any Major Complications / Operative Mortality</b>	7.14%	8%	12.90%	9.10%	10.15%
<b>Operative Complications</b>	<b>Any Reoperation (NQF Definition)</b>	7.14%	2%	9.67%	3.76%	3.79%
	Reoperation for Bleeding	7.14%	2%	9.67%	3.10%	2.98%
	Reoperation for Valvular Dysfunction	-	-	-	0.12%	0.09%
	Aortic Reintervention	-	-	-	0.04%	0.06%
	Reoperation for Other Cardiac	-	-	-	0.46%	0.67%
	Reoperation for Other Non-Cardiac	-	-	-	0.88%	1.06%
	<b>Any Reoperation</b>	7.14%	2%	9.67%	4.50%	4.63%
	Reoperation for Graft Occlusion (Discontinued from v2.9)	-	-	-	-	-
<b>Infection Complications</b>	<b>Any Infection</b>	-	2%	-	1.51%	1.59%
	Deep Sternal Infection/Mediastinitis	-	-	-	0.22%	0.14%
	Septicemia/Sepsis	-	-	-	0.68%	0.74%
	Conduit Harvest or Cannulation Site	-	-	-	-	3.61%
<b>Neurological Complications</b>	<b>Coma</b>	-	-	-	-	-
	Encephalopathy	-	-	-	1.22%	1.28%
	Transient Ischemic Attack	-	-	-	-	-
	Paralysis	-	-	-	-	0.02%
	Postoperative Stroke	-	-	-	0.95%	1.15%
<b>Pulmonary Complications</b>	<b>Prolonged Ventilation</b>	2.38%	-	12.90%	5.08%	6.15%
	Pneumonia	-	2%	3.22%	1.27%	1.68%
	Venous Thromboembolism	-	-	-	-	-
	Pulmonary Thromboembolism	-	-	-	0.04%	0.09%
	Pleural Effusion Requiring Drainage	2.38%	6%	9.67%	4.15%	3.86%
	Deep Venous Thrombosis	-	-	-	0.58%	0.76%
	Pneumothorax Requiring Intervention	-	-	-	1.54%	1.64%
<b>Vascular Complications</b>	<b>Acute Limb Ischemia</b>	-	-	-	0.22%	0.20%
<b>Other Complications</b>	<b>New Onset Atrial Fibrillation</b>	50%	27.08%	35.48%	29.46%	27.91%
	Cardiac Arrest	-	-	-	0.97%	1.47%
	Anticoagulant Complication	-	-	-	0.17%	0.14%
	Tamponade	-	-	-	0.17%	0.19%
	Gastro-Intestinal Complication	-	4%	-	2.05%	2.20%
	Multi-System Failure	-	-	-	-	-
<b>Mortality Summary</b>	<b>In-hospital Mortality</b>	-	-	-	0.81%	1.48%
	<b>Operative Mortality</b>	-	2%	-	1.37%	2.07%





# Additional Information

- Multi-Valve +/- CABG will be reported out with Harvest 3.
- Multi-Valve +/- CABG is low volume.
  - Fewer than half of participants have more than 10 Multi-Valve patients.
- There will be no Star Rating for Multi-Valve +/- CABG.
- Multi-Valve +/- CABG will be included, along with the other analyzed procedures, in the Multi-Procedure Composite Measure.
- The Multi-Procedure Composite will replace the All category.
- The Multi-Procedure Composite will be reported out beginning with Harvest 1, 2025 and will be a Star Rating.
  - Note: New star ratings are reported out for one year prior to being included in Public Reporting.



# Resources

- STS National Database Webpage
- [STSDB\\_Helpdesk@sts.org](mailto:STSDB_Helpdesk@sts.org) (Uploader, DQR, Missing Variable, Dashboard, Password and Login )
- 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*
  - [ckrohn@sts.org](mailto:ckrohn@sts.org)



# Open Discussion



Please use the  
raise-hand  
function.

Please use the  
Q&A Function.

We will answer as  
many questions as  
possible.

We encourage  
your feedback and  
want to hear from  
you!