Data Manager Training Session 4

- Data Submission (Harvest)
- Data Quality Report (DQR)

Melinda Offer, RN, MSN



Learning Objectives:

Upon completion of this session, participant will be able to:

- Identify what a Harvest is
- Know how to do a Harvest
- Verbalize how to clean up your data prior to submission





What is a Harvest and What Do I Need to Know About It?

Harvest is a term that we use for data submission. It is important to know:

- How many Harvest the ACSD has per year
- When the Harvest due dates are
- Which Harvest are Star Rating Harvests
- How to opt out of a Harvest
- How to do a Harvest

✓ ACSD Harvest Deadlines

Note: If you have changed software vendors since you last harvested data to the STS Data Warehouse, or if your 10-digit Hospital NPI number or Hospital Name has changed, complete the <u>Participant Contact Form</u> to make these updates prior to your data submission. Or complete the <u>harvest opt-out form</u>, if necessary.

2025 Harvest

Term	Harvest Submission Window Close	Opt-Out Date	Includes Procedures Performed Through:	Report Posting	Comments
Harvest 1	2/21/2025	2/25/2025	12/31/2024	Spring 2025	Star Rating
Harvest 2	5/232025	5/27/2025	3/31/2025	Summer 2025	
Harvest 3	8/22/2025	8/26/2025	6/30/2025	Fall 2025	Star Rating
Harvest 4	11/21/2025	11/25/2025	9/30/2025	Winter 2025	
Analysis	s for each harvest is	s based on a 36	-month window.		

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

Term

- Identifies which Harvest
- ACSD has 4 per year

Harvest Submission Window Close

- Date the submission is due
- Submission closes at 11:59 EST on that date

Opt-Out Date

• Last date you can Opt-Out of submission

Includes Procedures Performed Through

 Identifies surgery dates of procedures that need to be submitted

Report Posting

 This is when the National Report is expected to be available

Comments

Indicates which Harvest are Star Rating

✓ ACSD Harvest Deadlines

Note: If you have changed software vendors since you last harvested data to the STS Data Warehouse, or if your 10-digit Hospital NPI number or Hospital Name has changed, complete the <u>Participant Contact Form</u> to make these updates prior to your data submission. Or complete the <u>harvest opt-out form</u>, if necessary. 2025 Harvest

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Harvest 1	2/21/2025	2/25/2025	12/31/2024	Spring 2025	Star Rating
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Harvest 3	8/22/2025	8/26/2025	6/30/2025	Fall 2025	Star Rating
Harvest 4	11/21/2025	11/25/2025	9/30/2025	Winter 2025	

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

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

Now let's focus on the continuous open data submission – What does that mean?

Continuous Open Data Submission (Harvest)

- This means you can submit data anytime up until the Harvest due date and time.
- Harvest closes on 11:59 EST on the date listed.

Advantages of a Continuous Open Data Submission (Harvest)

Submit when it is convenient to you

• Easier to work around your work schedule, vacations, holidays, etc.

Submit earlier and more frequently

- Avoids last minute surprises / problems
- Fast feedback

Submit smaller batches of data

- Allows you to focus on problem areas
- Clean up data in smaller batches



What Does it mean to Opt-Out?

- Telling the Data Warehouse not to use your data for this submission (harvest) period
- All data submitted during this submission window will be dropped
- Analysis will revert to what it was at last submission
- By opting out the site acknowledges that they will not be included in analysis and not receive risk adjusted results for this harvest period.



Why Would I Opt-Out

The main reason for a site choosing to opt-out is because the data in the system doesn't reflect their site. This is usually because they realize they have been entering something incorrectly or they are too far behind and have a lot of data that has not been entered yet.

If you choose to Opt-Out, you can access the Opt-Out forms in IQVIA or on the STS Website

Adult Cardiac Surgery Database

The ACSD data collection forms and training manual require a participant login. (*If you need assistance with your login credentials*, <u>contact STS Member</u> services.)



- > Sample Data Analysis Reports
- > Adult Cardiac Multiplier Tables

> ACSD Harvest Deadlines

> Exceptional Risk Exclusion Request

Velcome, ∕lelinda Offer	Library
Currently Viewing	National Report Overview, Data Checks, and Opt-Out Form
ult Cardiac Surgery Database 999 99999	ACSD National Report Analyses Overview - POSTED DEC 23, 2024
DASHBOARD	End of Harvest Review Checklist (ACSD)
	Errors and Warnings UPDATED July 2021
Community Page	Missing Variable Report List Updates v4.20.2 (ACSD)
PLATFORM	STS Harvest Opt Out Request Form

In the Opt-Out Form you will have to acknowledge that your data will be excluded from the current harvest period

On behalf of the Participant ID listed above, I am electing to opt-out of the harvest period referenced in the previous section. By opting out, I acknowledge that the Participant ID listed above will not be included in the data analysis and will not receive risk-adjusted results for the corresponding harvest period. *

Now Let's Discuss How to Do a Harvest

Sometimes I like to treat myself at work and just do one thing at a time.



Educate yourself on how to do the Harvest

• Watch educational videos and know your resources

Collaborate with your Vendor to know how to create a Harvest Upload file

Make sure your Harvest file includes all necessary information on each case submitted:

- Participant ID
- Surgeon NPI
- Hospital NPI
- Primary Anesthesiologist NPI if applicable

Clean up your DQR and Missing Variable Report

Do all the above before 1159 pm EST on the date of Harvest close!

How-To Videos

These videos are on the STS Website under 'For Data Manager' Tab



ACSD Risk Adjusted Dashboard Report



IQVIA Registry Dashboard -General Navigation Training



IQVIA Uploader and DQR Review

STS National Database Website





Once you are in IQVIA there are many other resources available

me, a Offer	Library		
rrently Viewing	National Report Overview, Data Checks, and Opt-Out Form		
rdiac Surgery Database 99999	ACSD National Report Analyses Overview - POSTED DEC 23, 2024		
BOARD	End of Harvest Review Checklist (ACSD) Errors and Warpings LIPDATED, July 2021		
mmunity Page	Missing Variable Report List Updates v4.20.2 (ACSD)		
ORM	STS Harvest Opt Out Request Form		

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Report Overview Documents

Contact List Report (UPDATED) 12052022 COVID-Positive Patients Included in Risk-Adjusted Analysis Database Data Collection Resources (ACSD) Database Transition Resources Direct Data Entry FAQ Longitudinal Outcomes Dashboard Analyzed Overview (ACSD) Missing Variable Report Overview (ACSD) Participant Dashboard Non-Analyzed Report Overview (ACSD) UPDATED 12312021 Risk Adjusted Dashboard Overview (ACSD) STS Database IQVIA Role Mapping ACSD Executive Dashboard Report (NEW) Surgeon Composite Analysis Overview (UPDATED 7.24.2023) Surgeon Composite Report Overview **Uploader Instructions**

Harvest Summary Report Overview 8MAY2024

🗉 🔼 YouTube

Search

STS National Database:

ACSD Preparing for Harvest Close

February 13, 2024

ACSD Preparing for Harvest Close - February 13, 2024

STS National Database

STS National Database

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There is also a video on the STS YouTube site that reviews end of harvest data clean-up

https://www.youtube.com/watch?v=qhjyViiD5A Q&list=PL1hqaVNnwZpWVqNYEpX6x103faLu4bD -H&index=17&pp=iAQB



Harvest Upload File

• If you work with a Vendor, please collaborate with them as to how to generate a file for Upload to the IQVIA Platform

• For Direct data Entry (DDE), the record will be considered for analysis if the record is complete and saved in the DDE form



Make sure your Harvest file includes all necessary information on each record submitted:

- Participant ID
- Surgeon NPI
- Hospital NPI
- Primary Anesthesiologist NPI if applicable

Missing Surgeon, Hospital or Anesthesiologist NPI or Participant ID will cause critical errors, and the record will be rejected

HospNPI and SurgNPI needs to be specified on every record and those values need to match what we have on record for that participant. If the values don't match, then the RECORD is rejected.



Participant ID

- A unique 5 digit number assigned to each STS Database Participant
- If the entire surgeon group changes, a new contract is required which will generate a new Participant ID

National Provider ID

- Individual provider NPI does not change
- Hospitals have multiple NPIs- Choose the right one!
- Hospital NPI could change

Making Sense of the Numbers



National Provider ID (NPI)

- A unique identification number for covered health care providers
- A 10-position, intelligence-free numeric identifier (10-digit number)

https://npiregistry.cms.hhs.gov/search

Hospital NPI

łospital NPI: 🚺 🚺 🚺 Duplicate NPI Verified

- Each Hospital has one NPI on file at STS

 provided by the participant
- Two hospitals may have the same NPI, as in the case of adult and pediatric hospitals or a hospital with two campuses
- This NPI is used to generate hospital level reports

General Overview of the STS IQVIA Uploader

Table of Contents

Link to the STS/IQVIA platform: <u>https://sts.irp.iqvia.com/login</u>

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The IQVIA Uploader Functionality

The Uploader is a tool that provides users with the flexibility to upload files that contain patient record data.



Uploader History Report Section After a user performs an upload, the status (Failed/Success) of that upload will be automatically displayed under the uploader interface termed as the "upload history report". The upload history section will also display respective upload entries regarding past file uploads.

Record Processing Count Confirmation – The system will display a count of the total number of records that are accepted into the data warehouse and the count of the total number of records included in the uploaded file. Example, **25/25 indicates that there were 25 records which were successfully accepted into the data warehouse and 25 records that were included in the uploaded file.**



Uploader History Entries or Card Details

The uploader history report will display each upload that is attempted by all users that are assigned and has access to upload files for the respective participant group. The upload entry will display the following details:

File Status icon

- Success: The system will display a green checkmark icon 🥝
- Failure: The system will display a red (x) icon 😣

Date/Time - The system will display the date and time of the upload entry

Upload ID – Automatic system assigned ID

Facility – The system will display the participant identifier (participant ID)

Processing Status - They system will display the uploaded file status: Failure, Completed

File Name: Name of the file uploaded (success or failure will display file name)

Uploader Username – Name of the user that attempted or completed the upload action

0	Upload ID: 798	×A
11/26/2020	Facility: STS_Conf_Demo_1 40401 Processing Status: File Upload Completed	25/25
05:08:49	File Name: 40401adt_demo.dat	View Reports







Critical errors

 The system will display a red (x) icon to indicate there were critical errors
 identified and the flagged records will not be uploaded to the data warehouse. These errors can be reviewed on the DQR for further details and will have to be corrected within the source software vendor system and re-uploaded to the IQVIA application.

- Errors ^{*} The system will display a yellow (x) icon to indicate there were errors identified in the uploaded file. These errors are validating against the STS identified edit checks. The IQVIA application will not make changes to the data for these edit checks. Users will review the DQR for that uploaded file to determine further details regarding the items that are flagged as errors.
- Warnings ▲ They system will display a blue triangle icon to indicate there were warnings identified in the uploaded file. These warnings are validating against the STS identified consistency checks.

0	Upload ID: 798	× A
	Facility:STS_Conf_Demo_1 40401	25/25
1/26/2020	Processing Status: File Upload Completed	ZJIZJ
05:08:49	File Name: 40401adt_demo.dat	View Reports

Example below **shows 0/28** which indicates that there were 0 records added to the data warehouse and 28 records were included in the uploaded file.



IQVIA resources available

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come, nda Offer	Library
Currently Viewing	National Report Overview, Data Checks, and Opt-Out Form
Cardiac Surgery Database 99999	ACSD National Report Analyses Overview - POSTED DEC 23, 2024
HBOARD	End of Harvest Review Checklist (ACSD)
	Errors and Warnings UPDATED July 2021
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Report Overview Documents

Contact List Report (UPDATED) 12052022 COVID-Positive Patients Included in Risk-**Adjusted Analysis** Database Data Collection Resources (ACSD) Database Transition Resources Direct Data Entry FAQ Longitudinal Outcomes Dashboard Analyzed Overview (ACSD) Missing Variable Report Overview (ACSD) Participant Dashboard Non-Analyzed Report Overview (ACSD) UPDATED 12312021 Risk Adjusted Dashboard Overview (ACSD) STS Database IQVIA Role Mapping ACSD Executive Dashboard Report (NEW) Surgeon Composite Analysis Overview (UPDATED 7.24.2023) Surgeon Composite Report Overview

Uploader Instructions

Harvest Summary Report Overview 8MAY2024

Target Variable Field Name 🔻	Validation Nam 🔻	Message	
particid	QAC023	Participant ID does not match.	
admitdt	admitdt_CE01	Admit Date must not be after Hospital Discharge Date.	
admitdt	admitdt_CE02	Admit Date must not be before Date of Birth.	
disonsetdt	disonsetdt_CE01	Dissection Onset Date must not be after OR Exit Date And Time.	
dob	dob_CE01	Date of birth must not be after Date of Surgery.	
mtdate	mtdate_CE01	Mortality – Date must not be before Date of Surgery.	
prentrydt	orentrydt_CE01	OR Entry Date and Time must not be after Skin Incision Start Date and Time.	
prexitdt	orexitdt_CE01	OR Entry Date and Time must not be after OR Exit Date and Time.	
prexitdt	orexitdt_CE02	OR Exit Date and Time must not be before Skin Incision Stop Date And Time.	
sistartdt	sistartdt_CE01	Skin Incision Start Date and Time must not be after Skin Incision Stop Date and Time.	
surgdt	surgdt_CE01	Date of Surgery must not be before Admit Date.	
mtopd	QAC1107	Discharge/Mortality Status is 'Discharged alive, Died after discharge', Operative Mortality is 'Yes' but mortality date is more than 30 days after surgery. Please review.	
mtopd	QAC1110	Discharge/Mortality Status is 'Discharged alive, Died after discharge', Operative Mortality is 'No' and mortality date is less than 30 days after surgery. Please review.	
mtopd	QAC1123	Discharge/Mortality Status is 'Discharged to Hospice' and Operative Mortality is 'No'. Please review.	
surgnpi	QAC4875	Surgeon NPI is required. Please enter a value.	
hospnpi	QAC4876	Hospital NPI is required. Please enter a value.	
orimanesnpi	QAC4878	Primary Anesthesiologist NPI is required. Please enter a value.	
admitdt	AdmitDt_CC1	Total post-operative ventilation hours is more than the number of hours between Admit Date and Discharge Date, these values may be inconsistent	
admitdt	AdmitDt_CC2	Additional Hours Ventilated is more than the number of hours between Admit Date and Discharge Date, these values may be inconsistent	
prexitdt	ORExitDt_CC2	Initial ICU Hours is more than the number of hours between OR Exit Date and Discharge Date, these values may be inconsistent	
prexitdt	ORExitDt_CC3	Additional ICU Hours is more than the number of hours between OR Exit Date and Discharge Date, these values may be inconsistent	
sistopdt	SIStopDT_CE01	Skin Incision Stop Date can't be greater than OR Exit Date	
dob	DOB_CE02	Date Of Birth must not be after Admit date. Please review.	
mtdate	MtDate_CE02	Mortality date must not be before Hospital Discharge Date. Please review.	

Critical error



Errors

Target Variable Field Name	Message
age	Patient Age must not be missing and must equal the number of years between Date Of Birth and Date of Surgery.
dialysis	RF-Renal Fail-Dialysis is Yes, but this conflicts with Post-Op-Renal-Renal Failure being marked Yes.
dischdt	Hospital Discharge Date must not be after Mortality - Date.
prevvad	Patient Admitted with VAD is marked Yes, but this conflicts with Previous Other Cardiac being marked No.
prioraorta	Prior Aortic Intervention is marked Yes, but this conflicts with Other Previous Cardiac Interventions being marked No.
urgemergrsn	Urgent, Emergent or Emergent Salvage Reason is Endocarditis, but this conflicts with Endocarditis not being marked Yes.
urgemergrsn	Urgent, Emergent or Emergent Salvage Reason is marked PCI Incomplete without clinical deterioration, but this conflicts with Previous PCI Not being marked Yes.
urgemergrsn	Urgent, Emergent or Emergent Salvage Reason is marked PCI or attempted PCI with clinical deterioration, but this conflicts with Previous PCI not being marked Yes.
urgemergrsn	Urgent, Emergent or Emergent Salvage Reason is marked Syncope, but this conflicts with Syncope not being marked Yes.
valexp	Valve Prosthesis Explant is marked Yes, but this conflicts with Previous Valve being marked No.
valexpet	First Valve Explant Etiology is marked Endocarditis, but this conflicts with Endocarditis being marked No.
valexpet2	Second Valve Explant Etiology is marked Endocarditis, but this conflicts with Endocarditis being marked No.
valexpet3	Third Valve Explant Etiology is marked Endocarditis, but this conflicts with Endocarditis being marked No.
vdaoprimet	Aortic Valve Disease Primary Etiology is marked Endocarditis, native valve with root abscess, but this conflicts with Endocarditis being marked No.
vdaoprimet	Aortic Valve Disease Primary Etiology is marked Endocarditis, native valve without root abscess, but this conflicts with Endocarditis being marked No.
vdaoprimet	Aortic Valve Disease Primary Etiology is marked Primary Aortic Disease, Hypertensive Aneurysm, but this conflicts with Hypertension being marked No.
vdaoprimet	Aortic Valve Disease Primary Etiology is marked Reoperation - Failure of previous AV repair or replacement, but this conflicts with Previous Valve being marked No.



These used to be called 'consistency' errors

Warnings

•		
QAC1127	The value entered on Patient Age seems to be lesser or greater than the usual range(18-100). Please review.	age < 18 or age > 100
0.01100	The value entered on Height (cm) seems to be lesser or greater than the usual range(122.0-	
QAC1128	213.0). Please review.	heightcm < 122.0 or heightcm > 213.0
	The value entered on Weight (kg) seems to be lesser or greater than the usual range(30.0-	
QAC1129	181.8). Please review.	weightkg < 30.0 or weightkg > 181.8
	The value entered on Calculated BMI seems to be lesser or greater than the usual range(18.0-	
QAC1130	50.0). Please review.	calculatedbmi < 18.0 or calculatedbmi > 50.0
	The value entered on WBC Count seems to be lesser or greater than the usual range(2.00-	
QAC1131	40.00). Please review.	wbc < 2.00 or wbc > 40.00
	The value entered on Hemoglobin seems to be lesser or greater than the usual range(6.00-	
QAC1132	20.00). Please review.	rfhemoglobin < 6.00 or rfhemoglobin > 20.00
	The value entered on Hematocrit seems to be lesser or greater than the usual range(20.00-	
QAC1133	53.00). Please review.	hct < 20.00 or hct > 53.00
	The value entered on Platelet Count seems to be lesser or greater than the usual	
QAC1134	range(150000-600000). Please review.	platelets < 150000 or platelets > 600000
	The value entered on Total Albumin seems to be lesser or greater than the usual range(3.50-	
QAC1135	5.00). Please review.	totalbumin < 3.50 or totalbumin > 5.00
	The value entered on Last A1C Level seems to be lesser or greater than the usual range(4.00-	
QAC1136	13.00). Please review.	a1clvl < 4.00 or a1clvl > 13.00



After you have completed your data upload, next move on to data clean-up



What is the difference between the Data Quality Report (DQR) and the Harvest Summary Report?

- They are essentially the same with one exception
- The difference is that if you have a critical error when you submit your data, you won't be able to run the Harvest Summary Report because the critical error will prevent the data from being uploaded to the Harvest Summary Report.
- The Harvest Summary Report only shows errors and warnings.



If you have a Critical Error, click View Reports to view your DQR to address the critical errors

Example below shows 0/28 which indicates that there were 0 records added to the data warehouse and 28 records were included in the uploaded file.







critical : caseform-age_regi Patient Age is required. Ple.. Record V12188 is referencing an invalid Anesthesiologi...

If you have no critical errors, then you can view your DQR or Harvest Summary Report using one of 2 methods

\odot	Upload ID: 798 Eacility: STS_Conf_Demo_1.40401	× 🔺
01/26/2020	Processing Status: File Upload Completed	25/25
05:08:49	File Name: 40401adt_demo.dat	View Reports
PM	Uploader Username: Test. Testuser	

Welcome, Melinda Offer	Operational Reports
 Currently Viewing 	ACSD Reports
Adult Cardiac Surgery Database 99999 99999	Missing Variable Report This report identifies important field-specific data quality issues that affect the completeness of your harvest and may impact analysis and reporting of your data in the
DASHBOARD	National Report. The data version, surgery year, short name and field name are shown for each issue to help you target and prioritize your data review and clean-up activity. Information on missing data is only reported for variables used in reports or risk-adjustment models.
✿ Community Page	Harvest Summary Report
PLATFORM	This report will allow users to see the current status of system validations on all active records saved in the database based on the identified surgery data range entered.
Notifications 12	ACSD Participant Dashboard Report
ANALYTICS	This participant dashboard report will display NON-ANALYZED data results
C Operational Reports	ACSD Risk Adjusted Dashboard Report

		Data Quality Report				
File Based Issue		Validation Alert Summary		Alerts by Uple	oaded Records	
VALIDATION ALERT Passed	MESSAGE File Upload Completed		VALIDATION ALERT	Record ID	Source Reco ID V297892	warning
			warning	2	V297782	497
				3	V297837	554
				4	V297944	651
				5	V297779	647
				6	V297838	919
				7	V297780	510
				8	V297781	473
				9	V297893	531
				10	V297946	556
				11	V297835	522
		N		12	V297836	523
		3		13	V297894	660
				14	V297943	597
				15	V297945	428
				16	V297834	592
				17	V297890	668
				18	V297891	576
		warning (96.9 %)		19	V297783	559

Records Level Validation

Validation Status	Error Type	MESSAGE	Source Patie	Access Case
warning	ValidationError	warning : QAC0204 The value entered seems to be lesser or greater than the usual range(V2911101670	https://sts-dev1.irp.invia.com/plat
warning	ValidationError	warning : QAC0200 The value entered seems to be lesser or greater than the usual range(V2911101670	https://sts-dev1.irp.krvla.com/plat
warning	ValidationError	warning : QAC0201 The value entered seems to be lesser or greater than the usual range(V2911101670	https://sts.dev1.irp.iovia.com/blat
warning	ValidationStat	warning : COLAC024 Enter a value on Other Non-Cardiac Procedure	V2911101670	https://sts-dev1.irp.kovia.com/stat
warning	ValidationStat	warning : COLAC028 Enter a value on 2nd device implanted?	V2911101670	https://sts.dev1.irp.iovia.com/plat
warning	ValidationStat	warning : COLAC004 Enter value on Graft(s) Present	V2911101670	https://sts-dev1.irp.igvia.com/blatt
warning	ValidationStat	warning : COLAC023 Enter a value on Other Cardiac Procedure, Aortic	V2911101670	https://sts.dev1.irp.igvia.com/plat
warning	ValidationStat	warning : COLAC004 Enter value on Graft(s) Present	V2911101670	https://sts.dev1.irp.igvia.com/plat
warning	ValidationStat	warning : COLAC007 Enter value on Was case previously attempted during this admision,	V2911101670	https://sts-dev1.irp.iovia.com/plat
warning	ValidationError	warning : QAC0188 The value entered seems to be lesser or greater than the usual range(V2911101670	https://sts-dev1.irp.invia.com/blat
warning	ValidationError	warning : QAC0203 The value entered seems to be lesser or greater than the usual range(V2911101670	https://sta-dev1.irp.ktvia.com/blat

form/acsdreoistry/tacill. form/acadreoistry/Tacilit form/acadregistry/facilit form/acsdreoistry/laciit form/acadreoistry/facilit form/acsdregistry/Tecilit form/acsdregistry/facilit. form/acsdregistry/facilit form/acadregistry/Tacilit form/acsdregistry/lacilit form/acsdregistry/facilit

Data Quality Report



You can also export and maximize visualization by right clicking on the report

	Source Patient ID	Access Case			
Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://ds.devil.irp.ky/a.com/statform/acsdregisfry/facifit			
00-100). Please review	V2911101670	https://ata.doy/17	n invix contributions/second-weinder/Kanild		
45.0-54.0) Please review	V2911101670	hillon //hts-dep	Unculination to DOF	Energy D	
nt Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	httes://hts.dej	T I PORTAGON TO P OT		
nt Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://ats-sht	Visualization to image	Microsoft® Excel® Export	
nt Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://sta-dep			
15.0-30.0) Please review.	V2911101670	billos Jinta das	Export table	Maximize visualization	
Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	hika.//sta-des			
Interies Used (2675) is not missing. Please correct.	V2911101670	Mips //Ms-On	Export table (without value formatting)		
cent Native Artery Stenosis Known (1175) is Yes. Please correct	V2911101670	hites lists drives	D. STATA CONTRACTOR AND DESCRIPTION OF		
ed. since Percent Native Artery Stenosis Known (1175) is Yes	V2911101670	tition //sta-dev1 in	n inna comititationniacadeeoninvitacilit		

Once you have maximized visualization you can see all the rows for the selected file

Data Quality Report

		Navigation tools					
File			-				
Records Level Vali	dation	6.3.5					
Validation Status	Error Type	MESSAGE	Source Patient ID	Access Case			
Error	ValidationError	error PotStenLMain Percent Stenosis - Left Main (1195) should be entered, since Percent Native Artery Stenosis Known (1175) is Ves. Please correct.	V2911101670	https://sts-dev1.irp.icv/a.com/b/atform/acsdregistry/facili			
warning	ValidationError	warning : QAC0204 The value entered seems to be lesser or greater than the usual range(86(100)). Please review.	V2911101670	https://pts-dev1.irp.kova.com/platform/acadregistry/Tacili			
warning	ValidationError	warning: QAC0200 The value entered seems to be lesser or greater than the usual range(45.0-54.0). Please review.	V2911101670	https://sts-dev1.vp.kovia.com/stattorm/acadreoistry/facilit			
Error	ValidationError	error: PctStenCircftx Percent Stenosis - Circumflex (1335) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://sts-dev1.en.kovia.com/stattern/acadreoistry/tacili			
Error	ValidationError	error : PctStenDiag2 Percent Stenosis - Diagonal 2 (1295) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://sts.dev1.im.iouia.com/blatform/acadreoistry/facilit			
Error	ValidationError	error : PctStenDiag3 Percent Stenosis - Diagonal 3 (1315) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://ats-dev1.im.knvia.com/platform/acadreoistry/Tacill			
warning	ValidationError	warning: QAC0201 The value entered seems to be lesser or greater than the usual range(15.0-30.0). Please review.	V2911101670	https://sts.dev1.im.jovia.com/platform/acsdredistry/facilit			
Error	ValidationError	error : PctStenRamus Percent Stenosis - Ramus (1415) should be entered, since Percent Native Artery Stenosis Known (1175) is Vies. Please correct.	V2911101670	https://sts-dev1.im.kovia.com/biatform/acsdreoistry/facilit			
Error	ValidationError	error NumRadDA Radial Dist Anast # (2680) should be entered, since Number of Radial Arteries Used (2675) is not missing. Please correct.	V2911101670	titles lists devit iro iquia constriattam/acadreoistry/facili			
Error	ValidationError	error PctStenDistLAD Percent Stenosis - Distal LAD (1255) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	titles //ets-dev1 im knvis com/bialform/acadeooistry/facilit			
Error	ValidationError	error PctStenPDA Percent Stenosis - Posterior Descending (PDA) (1475) should be entered, since Percent Native Artery Stenosis Known (1175) is Ves	V2911101670	https://ste.dev1.irp.kovia.com/ulattorn/acadeedistry/tackii			
warning	ValidationStat	warning : COLAC024 Enter a value on Other Non-Cardiac Procedure	V2911101670	https://sta-dev1.ap.kovia.com/stattorm/acadeexistry/facilit			
warning	ValidationStat	warning : COLAC028 Enter a value on 2nd device implanted?	V2911101670	https://sts.dev1.im.jovia.com/biattern/acadreoistryTacili			
warning	ValidationStat	warning : COLAC004 Enter value on Graftis) Present	V2911101670	https://sts-dev1.irg.igvia.com/platform/acsdregistry/facilit			
warning	ValidationStat	warning: COLAC023 Enter a value on Other Cardiac Procedure, Aortic	V2911101670	https://sta.dev1.irp.kovia.com/btatform/acadredistry/facili			
warning	ValidationStat	warning : COLAC004 Enter value on Graft(s) Present	V2911101670	https://sta-dev1.iro.jovia.com/biatform/acadreoustry/Tacili			
warning	ValidationStat.	warning : COLAC007 Enter value on Was case previously attempted during this admision, but canceled	V2911101670	https://sis-dex1.es.kovia.com/biatform/acadreoistry/tacili			
Error	ValidationError	error : PctStenPLB Percent Stenosis - Posterolateral (PLB) (1495) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please	V2911101670	https://sts-dev1.im.imia.com/platform/acadreoistry/facili			
warning	ValidationError	warning : QAC0188 The value entered seems to be lesser or greater than the usual range(39.0-53.0). Please review.	V2911101670	https://do.dev1.im.kovia.com/biatform/acsdregistry/facilit			
Error	ValidationError	error : PctStenProxLAD Percent Stenosis - Proximal LAD (1215) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please c	V2911101670	https://sta-dev1.irp.iov/a.com/biattorm/acsdregistry/facili			
Error	ValidationError	error : IntubateDT_CE01 Initial Intubation Date can't be greater than Initial Extubation Date	V2911101570	Mos Job devil im invia combistionniaced existentacili			
warning	ValidationError	warning: QAC0203 The value entered seems to be lesser or greater than the usual range(30.0-53.0). Please review	V2911101670	billes //sta-dev1.im.kmia.com/c/attorn/acadrosolity/Tacili			
Error	ValidationError	error : PctStenAM Percent Stenosis - Acute Marginal (AM) (1455) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please c	V2911101670	https://als.dev1.kg.keria.com/bfattpm/acadreoiatryffacilit			
Error	ValidationError	error : PctStenMidLAD Percent Stenosis - Mid LAD (1235) should be enfered, since Percent Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101570	https://sta-dev1.im.kovia.com/stafform/acadepointryffacili			
warning	ValidationError	warning . QAC0109 The value entered seems to be lesser or greater than the usual range(150000-400000). Please review	V2911101570	https://sta-dev1.ep.jovia.com/biatform/acsdragis/rvffacili			
Error	ValidationError	error : PctStenOM2 Percent Stenosis - Obtuse Marginal 2 (1375) should be entered, since Percent Native Artery Stenosis Known (1175) is Ves. Please c	V2911101570	https://sta-dex1.ire.iov/a.com/bialform/acadreoialev/facili			
Error	ValidationError	error : PctStenOM1 Percent Stenosis - Obtuse Marginal 1 (1355) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please c	V2911101670	https://ds.dev1.iro.kovia.com/bialform/acadregistry/facilit			
Error	ValidationError	error : PctStenDiag1 Percent Stenosis - Diagonal 1 (1275) should be entered, since Percent Native Artery Stenosis Known (1175) is Yes. Please correct.	V2911101670	https://ats-dev1.irp.ktv/a.com/biattern/acadrosiatry/tacili			
Error	ValidationError	error : PctStenOM3 Percent Stenosis - Obtuse Marginal 3 (1395) should be entered, since Percent Native Artery Stenosis Known (1175) is Ves. Please c	V2911101670	https://sts.devif.ap.kovia.com/stattom/acadreoistryffacili			
warning	ValidationError	warning: QAC0202 The value entered seems to be lesser or greater than the usual range(11.0-15.0). Please review.	V2911101670	bthus. //sta-dev1.im.kn/sa.com/s/afform/acadeeoiatry/fac8/			
warning	ValidationStat	warning : COLAC029 Enter a value on 3rd Device implanted?	V2911101570	https://sts.dev1.irp.kovia.com/bfattorm/acsdreoistryff.acili			
warning	ValidationStat	warning : FCAC0117 Enter value on Disease Of Aorta	V2911101670	https://sts-dev1.irp.iovia.com/bialform/acsdregistry/facilit			
warning	ValidationStat	warning : COLAC004 Enter value on Graft(s) Present	V2911101670	https://ste-dev1.an.knisa.com/blatform/acsdreoistry/facilit			
warning	ValidationStat.	warning: FCAC00296 Enter a value on Diagnosis 2	V2911101670	https://sto-dev1.ins.kovia.com/platform/acadeepistry/facilit			
warning	ValidationStat.	warning : FCAC0117 Enter value on Disease Of Aorta	V2911101670	https://hts.dev1 ks.kv/a.com/stathem/acadreoletryffacilit			
warning	ValidationStat	warning : FCAC0115 Enter value on Aorta Etiology 1	V2911101670	https://sta-dev1.im.iovia.combiattermiacadreoistry/facili			
warning	ValidationStat	warning : COLAC030 Enter a value on VAD-Explant #1	V2911101670	titles. Asts dev1 im kovia com/blatform/acadeeoistry/facili			
warning	ValidationStat	warning : FCAC0207 Enter a value on Intra-Aortic Balloon Pump (IASP)	V2911101670	https://sts-dev1.im.kn/a.com/s/attorm/acschoolsiny/facilit			
warning	ValidationStat	warning : FCAC0158 Enter a value on Explant Device Known	V2911101670	titips //sts-dev1 irp joins combilationn/acadregistryffacilit			
warning	ValidationStat	warning : COLAC020 Enter a value on Valve Surgery	V2911101670	https://sts.dov1.ex.kovia.com/siations/acadeosistryTactio			
warning	ValdationStat	warning . FCAC0105 Enter a value on Procedure Performed	V2911101570	https://sts.devit.ep.kouta.com/stattions/acadeepidevitacili			
warning	ValidationStat.	warning : FCAC0222 Enter a value on Previous VAD Explanted During This Admission	V2911101670	titles //sta-dex1.im.iorita.com/statform/acadeepistry/facilit			
warning	ValidationStat	warning : FCAC0104 Enter value on Tricuspid Annular Measurement Available	V2911101670	titles //sis-dev1.so.kovia.com/blattom/acadregistry/facili			
warning	ValidationStat.	warning FCAC0117 Enter value on Disease Of Aorta	V2911101570	tittes //sts-dev1 are konia conversitionm/acadreoistry facili			

If you want to view the DCF, click on the 'Access Case' link.

- Direct Data Entry Users will be able to update and save the record.
- Uploader Users will can view (read-only) the record only. If updates are required, the user will have to access their software vendor system to make the changes and export the new file with the changes and upload to the STS Database to apply the change(s).



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warning : COLAC028 Enter a value on 2nd device implanted

warning : COLAC023 Enter a value on Other Cardiac Procedure. Aprtic

ValidationError... warning : QAC0203 The value entered seems to be lesser or greater than the usual range(....

warning : COLAC007 Enter value on Was case previously attempted during this admision.

ValidationError... warning : QAC0188 The value entered seems to be lesser or greater than the usual range(... V2911101670

warning : COLAC004 Enter value on Graft(s) Present

warning : COLAC004 Enter value on Graft(s) Present



Harvest Summary Report Components

The Harvest Report is separated into the following sections:

- Report Date Range
- Total Number of Records for Surgery Date Range
- Submission Summary Graph
- Alerts by Submitted Record
- Record Level Validation



Date Range and Total Number of Records

The Report Date Range will display the dates entered on the report parameter page

The Total Number of Records for Surgery Date Range will display the total number of records submitted to the database.

• Please Note: Records that encountered a critical error at any time of uploading will not be included in the total number of records for surgery date range.

	Andress Sciences Street		
Date Range: 01/01/2022-12/31/2022	Total Number of Records for Surgery Date Range: 499		
Received States and Street Street			

Submission Summary

The Harvest Report Submission Summary displays a graph with the percentage breakdown of the types of validations that are Outstanding or Not Outstanding.

The system can display up to 3 different types of validations that can appear on a record.

- 1. No Validations Outstanding
- 2. Outstanding Errors
- 3. Outstanding Warnings

Users can select the graph to interact with the report. When the user select a section on the pie graph or selects the items in the report legend, the report will highlight the Alerts by Submitted Record and will display the records in the Record Level Validation section.

		HARVEST SUMMARY	REPORT				
Date Range: 01/01/2022-12/31/2022	Total Number of Records for Surgery Date Range: 499		Alerts by Su	bmitted Rec	ord		
Submission Summary			Source Patient ID	Record ID	Error	Warning	No Validations Outstanding
oublinesion outlind y			V121016915	V59AC1109		1	
		 No Validations Outstanding 	V121081980	V59AC1254			1
		 Outstanding Errors 	V121082034	V59AC1560	-	-	1
		 Outstanding Warnings 	V121103942	V59AC1490			1
			V12907457	V59AC1298			1
	10.15		V12959390	V59AC1544	-	2	-
	51.7%		V30886046724	V59AC1176		1	
			V30925893586	V59AC1520			1
			V598586	V59AC1277	-	-	1
			V598670	V59AC1180		3	
			V598875	V59AC1484		3	1.1
			V599000	V59AC1185		2	
Record Level Validation							
Validation Statue Record ID	Chort Name MECCACE	Source Patient ID Access Cor					

Record Level Validation

The Record Level Validation section of the report will display the records that have an outstanding error or warning message.

Users can select the Access Case link to navigate directly to the record to review.

- Direct Data Entry Users will be able to update and save the record.
- Uploader Users will can view (read-only) the record only. If updates are required, the user will
 have to access their software vendor system to make the changes and export the new file with
 the changes and upload to the STS Database to apply the change(s).







Alert Counts

Users can review the list of patient IDs and Record IDs that have associated warnings and confirmation for records that have no validations outstanding.

The numbers that display with each associated warning or error will represent the count of outstanding validations that are associated with the record.

Once the user selected the cell under the column for either the Warning or Error, the respective patient records will display in the Record Level Validation section on the report.

Please Note: The count of 1 will always display for records that have No Validations Outstanding. This allows the records to be counted within the **Total Number of Records for Surgery Date Range** count.

Alerts by Submitted Record

Source Patient	Record ID	Warning	No Validations Outstanding
V1210222	V1211617	2	
V121060895	V1210974	5	
V12107205	V1211094		1
V1210795	V1211608	3	
V1210930	V1211090		1
V12113271	V1211778	2	
V121137555	V1210929		1
V12115599	V1210884	1	•
V1211632	V1211767	1	
V12118376	V1211378	2	
V12119489	V1210982	3	
V12119762	V1211598		1



The Community Page dates will update to the next harvest once the current harvest closes

Current Harvest %Missing Composite Rating

Current Harvest	Missing /	Unknown	% for	Composite	Rating
------------------------	-----------	---------	-------	-----------	--------

Main Category	Procedure	Year	#Missing	#Eligible	% Percent
Mortality Analysis	Isolated CABG	2021	0	146	0.00
		2022	1	203	0.49
		2023	4	212	1.89
	Isolated AVR	2021	0	69	0.00
		2022	0	85	0.00
		2023	1	71	1.41
	Isolated MVR or MV Repair	2021	0	138	0.00
		2022	0	105	0.00

Go To Reports

 Mortality Analysis includes the following variables: Status at Hospital Discharge, Status at 30 days After Surgery, Operative Mortality
 Outcomes and Process Measures Analysis includes the following variables: Internal Artery Mammary Used, Preoperative Beta Blocker, Discharge Anti-platelet, Discharge Beta Blocker, Discharge Anti-lipid

 In addition to meeting required data completeness thresholds, sites must meet the below case count requirements for the 36-month analytical window to be included into analysis.

CABG - 50 cases; AVR - 10 cases; AVR+CAB - 10 cases; MVRR - 36 cases; MVRR+CAB - 25 cases

- Color Code Legend

Red - Does not meet requirement for inclusion into composite ratings Yellow - At risk of not meeting requirement for inclusion in composite

Current Harvest %Missing Composite Rating

Current Harvest Missing / Unknown % for Composite Rating

Main Category	Procedure	Year	#Missing	#Eligible	% Percent
Mortality Analysis	Isolated CABG	2021	0	146	0.00
		2022	1	203	0.49
		2023	4	212	1.89
	Isolated AVR	2021	0	69	0.00
		2022	0	85	0.00
		2023	1	71	1.41
	Isolated MVR or MV Repair	2021	0	138	0.00
		2022	0	105	0.00

Go To Rep

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 In addition to meeting required data completeness thresholds, sites must meet the below case count requirements for the 36-month analytical window to be included into analysis.

CABG - 50 cases; AVR - 10 cases; AVR+CAB - 10 cases; MVRR - 36 cases; MVRR+CAB - 25 cases

- Color Code Legend Red - Does not meet requirement for inclusion into composite ratings Yellow - At risk of not meeting requirement for inclusion in composite



Must have <u>less than 2%</u> missing/unknown for mortality fields for each calendar year in the time period.

If the percentage is 2% or higher, you will not receive a star rating.

Current Harvest Missing / Unknown % Composite Rating

Current Harvest Missing / Unknown % Composite Rating

Main Category	Procedure	Year	#Missing	#Eligible	% Percent
Mul CAB	Multivalve + CABG	01/01/2022 - 12/31/2022	0	5	0.00
		01/01/2023 - 12/31/2023	0	2	0.00
		01/01/2024 - 12/31/2024	0	1	0.00
Outcomes and Process Measures Analysis	Isolated CABG	All years	0	1104	0.00
Number of Cases Still In Hospital	All Procedures	All years	-	0	0.00

Go To Repor

Mortality Analysis includes the following variables: Status at Hospital Discharge, Status at 30 days After Surgery, Operative Mortality
Outcomes and Process Measures Analysis includes the following variables: Internal Artery Mammary Used, Preoperative Beta Blocker, Discharge Anti-platelet, Discharge Beta Blocker, Discharge Anti-lipid

 In addition to meeting required data completeness thresholds, sites must meet the below case count requirements for the 36-month analytical window to be included into analysis.

CABG - 50 cases; AVR - 10 cases; AVR+CAB - 10 cases; MVRR - 36 cases; MVRR+CAB - 25 cases



Isolated CABG Only

Participants will be excluded from analysis if they had more than 5% missing data on any of the following process measures:

- IMA Usage
- Preoperative beta blockade therapy
- Discharge beta blockade therapy
- Discharge anti-platelet medications
- Discharge anti-lipid medication

The complete metric details are available at: https://www.sts.org/sites/default/files/ACSD%20NQ F-Endorsed%20Measures%204.20.2%2008122021.pdf

Current Harvest %Missing Composite Rating

Current Harvest Missir	ng / Unknown % for C	omposite Rating				
Main Category	Procedure	Year	#Missing	#Eligible	% Percent	
Mortality Analysis	Isolated CABG	2021	0	146	0.00	
		2022	1	203	0.49	
		2023	4	212	1.89	
	Isolated AVR	2021	0	69	0.00	
		2022	0	85	0.00	
		2023	1	71	1.41	
	Isolated MVR or MV Repair	2021	0	138	0.00	
		2022	0	105	0.00	

Go To Report

Mortality Analysis includes the following variables: Status at Hospital Discharge, Status at 30 days After Surgery, Operative Mortality
Outcomes and Process Measures Analysis includes the following variables: Internal Artery Mammary Used, Preoperative Beta Blocker, Discharge Anti-platelet, Discharge Beta Blocker, Discharge Anti-lipid

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 In addition to meeting required data completeness thresholds, sites must meet the below case count requirements for the 36-month analytical window to be included into analysis.

CABG - 50 cases; AVR - 10 cases; AVR+CAB - 10 cases; MVRR - 36 cases; MVRR+CAB - 25 cases

 Color Code Legend Red - Does not meet requirement for inclusion into composite ratings Yellow - At risk of not meeting requirement for inclusion in composite



Minimum Data Thresholds by Procedure ID

CABG	50
AVR/AVR + CABG	10
MVRR	36
MVRR + CABG	25
MultiValve/MultiValve + CABG	No minimum data thresholds
Multiprocedural	100 across all procedure IDs

Current Harvest %Missing Composite Rating

Current Harvest Missir	ng / Unknown % for C	omposite Rating				
Main Category	Procedure	Year	#Missing	#Eligible	% Percent	
Mortality Analysis	Isolated CABG	2021	0	146	0.00	
		2022	1	203	0.49	
		2023	4	212	1.89	
	Isolated AVR	2021	0	69	0.00	
		2022	0	85	0.00	
		2023	1	71	1.41	
	Isolated MVR or MV Repair	2021	0	138	0.00	
		2022	0	105	0.00	



Go To Report

- Outcomes and Process Measures Analysis includes the following variables: Internal Artery Mammary Used, Preoperative Beta Blocker, Discharge Anti-platelet, Discharge Beta Blocker, Discharge Anti-lipid

 In addition to meeting required data completeness thresholds, sites must meet the below case count requirements for the 36-month analytical window to be included into analysis.

CABG - 50 cases; AVR - 10 cases; AVR+CAB - 10 casès; MVRR - 36 cases; MVRR+CAB - 25 cases

- Color Code Legend

Red - Does not meet requirement for inclusion into composite ratings Yellow - At risk of not meeting requirement for inclusion in composite ratings

Green - Meets requirement for inclusion into composite ratings







Current Harve	st Missing / Unki	nown % Compos	ite Rating	2 ⁸ 3
Main Category	Procedure	Year	#Eligible	% Percent
		01/01/2023 - 12/31/2023	0	0.00
		01/01/2024 - 12/31/2024	0	0.00
Outcomes and Process Measures Analysis	Isolated CABG	All years	229	0.00
Number of Cases Still In Hospital	All Procedures	All years	0	0.00

Number of Cases Still in Hospital

- Please check to make sure that these are correct numbers
- Cases still in hospital are not analyzed



Welcome, Melinda Offer

Ourrently Viewing

Adult Cardiac Surgery Database 99999 -- 99999

DASHBOARD

A Community Page

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A Notifications

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Operational Reports

ACSD Reports

Missing Variable Report

This report identifies important field-specific data quality issues that affect the completeness of your harvest and may impact analysis and reporting of your data in the National Report. The data version, surgery year, short name and field name are shown for each issue to help you target and prioritize your data review and clean-up activity. Information on missing data is only reported for variables used in reports or risk-adjustment models.

Harvest Summary Report

This report will allow users to see the current status of system validations on all active records saved in the database based on the identified surgery data range entered.

ACSD Participant Dashboard Report

This participant dashboard report will display NON-ANALYZED data results

ACSD Risk Adjusted Dashboard Report

The electronic ACSD Risk Adjusted Report includes analyzed harvest data results in place of the previous harvest reports provided as PDF to participants. This report allows participants to compare their risk-adjusted performance to that of similar participants (Like Group) and against the STS overall for the same time period along with some unadjusted Regional Outcomes.

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	Generate the Entire List of Cases for All Missing Variables	.8
	Exporting the Report	.9

Missing Variable Summary

Missing Variable Report Missing Variable Report Parameters Date Range 12/31/2019 01/01/2019 10

Once you enter the Missing Variable Report, you will be able to select the date parameters

The Missing Variable Report will generate and display the variables for the respective reporting period



Missing Variable Summary

Missing Variable Summary

Data Version	Surgery Year	Shortname	Name	Missing %	Ν
4.20.2	2024	ABXDISC	APPROPRIATE ANTIBIOTIC DISCONTINUATION [3]	2	1/63
		ABXSELECT	APPROPRIATE ANTIBIOTIC SELECTION [3]	2	1/63
		ABXTIMING	APPROPRIATE ANTIBIOTIC ADMINISTRATION TIMING	2	1/63
		ANTYPE	ANEURYSM - TYPE	25	1/4
		AOARCVIS	AORTIC ARCH VISUALIZED	3	2/60
		AORTOCCL	AORTIC OCCLUSION	2	1/63
		ARCATHMO	AORTIC ARCH ATHEROMA MOBILITY	2	1/58
		ARCHDISCSITE	OPEN ARCH PROCEDURE - DISTAL SITE	100	1/1
		ASCAOASSESSED	ASCENDING AORTA ASSESSED	3	2/60
		ASCASYMDIL	ASCENDING ASYMMETRIC DILATION	25	1/4
		ASCPROXGR	ASCENDING PROXIMAL CORONARY BYPASS GRAFTS	25	1/4
		CAB02	CAB 02	3	1/32
		CABCONDUIT01	CAB CONDUIT 01	3	1/32
		CABDISTPOS01	CAB DISTAL POSITION 01	3	1/32
		CABDISTSITE01	CAB DISTAL SITE 01	3	1/32



sts.org

Missing Variable Summary

Missing Variable Summary

Data Version	Surgery Year	Shortname	Name	Missing %	N
4.20.2	2024	ABXDISC	APPROPRIATE ANTIBIOTIC DISCONTINUATION [3]	2	1/63
		ABXSELECT	APPROPRIATE ANTIBIOTIC SELECTION [3]	2	1/63
		ABXTIMING	APPROPRIATE ANTIBIOTIC ADMINISTRATION TIMING	2	1/63
		ANTYPE	ANEURYSM - TYPE	25	1/4
		AOARCVIS	AORTIC ARCH VISUALIZED	3	2/60
		AORTOCCL	AORTIC OCCLUSION	2	1/63
		ARCATHMO	AORTIC ARCH ATHEROMA MOBILITY	2	1/58
		ARCHDISCSITE	OPEN ARCH PROCEDURE - DISTAL SITE	100	1/1
		ASCAOASSESSED	ASCENDING AORTA ASSESSED	3	2/60
		ASCASYMDIL	ASCENDING ASYMMETRIC DILATION	25	1/4
		ASCPROXGR	ASCENDING PROXIMAL CORONARY BYPASS GRAFTS	25	1/4
		CAB02	CAB 02	3	1/32
		CABCONDUIT01	CAB CONDUIT 01	3	1/32
		CABDISTPOS01	CAB DISTAL POSITION 01	3	1/32
		CABDISTSITE01	CAB DISTAL SITE 01	3	1/32

Missing Variable Summary Columns

- Shortname Short name description for the data variable
- Name Full field name description for data variable
- Missing % Indicates the percentage of missing data for the identified fields that will require further review
- N The number of records with this item missing / the number of records for which a value is expected
- Report Indicators The below data variables are used in reports, mortality calculations, and/or risk models and will display an assigned bracketed number after the field name on the report.
 - Risk Adjustment Model [2]
 - National Quality Forum [3]
 - Procld [4]

ACSD Reports

Missing Variable Report

File Edit Data Visualizations View Tools User

Export

	-
Missing Variable	Summan
missing variable	Journman

Data Version

Report Description:	Data
Use this report to determine which variables are missing data for the date range selected.	4.20.2
All Risk Adjustment Models Process and Outcomes Measures Procld	

Date Range: 10/01/2024-12/31/2024

ble Summar	у
Surgery Year	Shortname
2024	ADEVDELMETH01
	ADEVLOC01
	ADEVLOC02
	ADEVMODEL01
	ADEVOUT01
	ADEVUDI01
	ADEVUDI02
	ARCHPATIMA
	AVAVCOMPGRIMPLUDIAO
	DISCHMTPTTRNFACUTEHOSPDT
	DISTTREATZONEAVAILMETH
	HIGHINTRAGLU



Report Description

The report description displays within this section to notify the user the intended use of the report.

Date Range

Displays the entered reporting date range that was entered on the Parameters page.

Report Filtering

Users will have the ability to filter the report based on the following data variable categories:

• All

- Risk Adjustment Models
- National Quality Forum
- Procld

File Edit Data Visualizatio	ns View Tool	s User								
Export	Missing Var	iable Sumn	nary							
Report Description:	Data Version	Surgery Yea	r		Shortn	ame	Name	Missing %	N	
Use this report to determine which variables are	4.20.2	2024	ADE	VDELMETH01	1		AORTA DEVICE - DELIVERY METHOD #01	11	1/9	
missing data for the date range selected.			ADE	VLOC01			AORTA DEVICE - LOCATION #01	11	1/9	
			ADE	VLOC02			AORTA DEVICE - LOCATION #02	11	1/9	
			ADE	VMODEL01			AORTA DEVICE - MODEL NUMBER #01	11	1/9	
All Disk Adjustment Models			ADE	VOUT01			AORTA DEVICE - OUTCOME #01	11	1/9	
Process and Outcomes Measures			ADE	VUDI01			AORTA DEVICE - UNIQUE DEVICE IDENTIFIER #01	100	9/9	
Procld			ADE	VUDI02			AORTA DEVICE - UNIQUE DEVICE IDENTIFIER #02	100	3/3	
Date Range: 10/01/2024-12/31/2024			ARC	HPATIMA			ARCH - PATENT INTERNAL MAMMARY ARTERY BYPASS GRAFT	11	1/9	
Date Kunge. 10/01/2024 12/01/2024			AVA	VCOMPGRIM	PLUDIAO		AORTIC VALVE OR AORTIC VALVE COMPOSITE GRAFT IMPLANTED	100	6/6	
			DIS	HMTPTTRNF	FACUTEHO	SPDT	PATIENT TRANSFER TO ACUTE CARE HOSPITAL - DATE	100	1/1	
			DIS	TREATZONE	AVAILMET	Н	DISTAL TO TREATED ZONE(S) (LARGEST DIAMETER) AVAILABLE	14	1/7	
			HIG	HINTRAGLU			HIGHEST INTRA-OP GLUCOSE	3	3/91	
			INR				RF-INR [2]	8	7/91	
			LWS	THCT			LOWEST HEMATOCRIT	3	3/91	
			LWS	TINTRAHEMO	0		LOWEST INTRA-OP HEMOGLOBIN	3	3/91	
	Case List									
	RECORDID	Data Version	Surgery Y	ear Name		PATIENT_DISPLAY_ID	Access Case			
	V1231165	4.20.2	2	24 RF-INR	[2]	V121551786	https://sts.irp.iqvia.com/			
	V1231157	4.20.2	2	24 RF-INR	[2]	V121354072	https://sts.irp.iqvia.com/			
	V1231119	4.20.2	2	24 RF-INR	[2]	V121534638	https://sts.irp.iqvia.com/			
	V123114/	4.20.2	2	24 KE-INR	[2]	V120/3/20	ntips://sts.irp.iqvia.com/			
	V1231171	4.20.2	2	24 RF-INR	[2]	V12716654	https://sts.irp.igvia.com/			

V121637152

https://sts.irp.iqvia.com/

4.20.2

V1231181

2024 RF-INR [2]

Case List Display Columns

The user will have the ability to drill down to view the cases that have been identified as having missing data. The report will display the following columns:

Operation ID

- Data Version
- Surgery Year

Short name for the data variable that is missing an expected value

Field name for the data variable that is missing an expected value

Patient Display ID will display the assigned software vendor ID assigned to the patient record

Access Case hyperlink will display the navigational link to display the identified case record

Interacting with the Missing Variable Report

Open Report in Full Screen

Users can open the Missing Variable Report in full screen mode by right selecting the Missingness tab located at the bottom left side of the report. A menu option will display indicating to Open page in new window. A new browser window will open and display the MVR.

NOTE: You will not have access to the parameters page from the new window. You will have to navigate back to the original report page to access the parameters page.





Missing Variable Report Missing Variable Report File Edit Visualizations View Tools Us NFC Miss Export Filters Type to search filters Q Report Dat: Description: Use this report to determine which variables are missing data for the date range selected. Cas All RECOF Risk Adjustment M V3814 w57771 Open page in new window Missin

Generate the Entire List of Cases for All Missing Variables

Users can generate the entire case list for all identified missing data variables by selecting the Missing % and N columns on the Missing Variable Summary section of the report.

- In the Missing Variable Summary section of the report, right click using your mouse and highlight the Missing % and N columns.
- The highlighted cells will display in a dark blue color indicating they are active cells.

Data Version	Surpery Year	Shortname	Name	Missing %	N
9	2019	CCANCCASE	CURRENT CASE CANCELED [1][9][4]	0	1/2257
	COPRECTH	POST-OP-REOP OTHER CARD [3]	0	2/1063	
	DISCHDT	DATE OF DISCHARGE [3]	0	1/2153	
	DISCHMORTSTA	DISCHMORTSTAT	DISCHARGE / MORTALITY STATUS [3]	0	1/2257
		MEDBETA	MEDS-BETA BLOCKERS WITHIN 24 HOURS [3]	0	1/2257
		MT30STAT	MORT-30D STATUS [3]	1	14/2257
		OPOCARD	OTHER CARD [3]	0	1/2257



Once the cells are highlighted, the Case List section of the report will display the results for the highlighted cells.

RECORDID	Data Version	Surgery Year	Name	PATIENT_DISPLAY_ID	Access Case
V381400269	2.9	2019	VD-PULMONIC	V380010352	https://sts.irp.iqvia.com/
v572230666	2.9	2019	VD-PULMONIC	v57122228	https://sts.irp.igvia.com/
v572011435	2.9	2019	VD-PULMONIC	v57310180	https://sts.irp.iqvia.com/
v572159997	2.9	2019	VD-PULMONIC	v57146022	https://sts.irp.iqvia.com/_
v572338539	2.9	2019	VD-PULMONIC	v57197389	https://sts.irp.iqvia.com/
v572089567	2.9	2019	VD-PULMONIC	v57427326	https://sts.irp.iqvia.com/_
v572167817	2.9	2019	VD-PULMONIC	v57437978	https://sts.irp.iqvia.com/_
v572031188	2.9	2019	VD-PULMONIC	v57416238	https://sts.irp.iqvia.com/
	2.0	2010	MOD DE LA ADALLO		Address Walks from Tanular second P

Exporting the Missing Variable Report

There are 2 options for Export – Excel or PDF

Export to Microsoft Excel

Select File > Export > Microsoft Excel® Export

_	fever is lef sevel.		Missing Variable Summary					
for t and	Expert 4 Dave 4 Vectors Autors afternation Process Data Research	Maxiation to Inspe. Weaklander to Str. Ber Te Riff. Sectored Rear Ford Part Microsoft Dariell Darie		Separy New 2018	CORECASE CORECTS DISCHORT DISCHORTSTAR MCDUTA MCDUTA OFFICARD	Berliane	cover one provide the provided of the provided	
			Case List					

- The Export to Excel menu will display the export options.
- On the Export menu, select the Active Page. No other selections or changes are required on this dialog window.
- Select the Export button to generate the Excel report.

	And and a state of the state of									
escription; of to Arteriose station manip sale for To-Tolk ed.	Data Vienzan Ed	Arrent Teal (2011)	DOMEDAS OVPRODU	Baber	CORRECT CARE CONCULTO IT END		Mining S	1/12 1/12		
				Export to E	acel			×		
Tapat (Line	100 V	. Seature					v 1012/154/12	2		
						File satisfies				
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Formatting +										
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Export to PDF

- · Select the 'Export' button in the filter panel to export to a pdf file.
- . Using this option will provide screen captures of the report in a PDF format.

Missing Variable Report	ort			
File Edit Visualizations	View Tools User			
Export	Missing Variable Summary			
Report Description:	Shortname			
are missing data for the date range selected.	ABLDGASMGT			

Figure 10 - Default Export to PDF Button

- NOTE: If you would like to include a list of all cases related to the full list of data variables, you
 will have to select the Missing % and N columns to populate the Case List section of the report.
- To select the columns in the report, right select using your mouse and highlight the columns. The column cells will highlight in dark blue to indicate the cells are selected.
- . The Case List will display a list of all cases once all desired cells are highlighted.

1 / Fee Lot	visualizations view 1008 UBEr						10	н
Export	Missing Variable Summary							
Report Description:	Shortname	Name	Missing %	N	-1			
se this report to determine	ABLDGASMGT	ARTERIAL BLOOD GAS MANAGEMENT DURING COOLING	1 65	1/87 82/127				
ata for the date range	AIRWAYINSITU	AIRWAY IN-SITU (ETT OR TRACHEOSTOMY) [3]						
selected.	AIRWAYTYPE	AIRWAY TYPE [3]	65	83/127				
	ANTENATALDIAG	ANTENATAL DIAGNOSIS OF CONGENITAL HEART DISEASE	1	1/127				
ate Range: 01/01/2019 - 2/31/2019	ANTIFIBEPLOAD	EPSILON AMINO-CAPROIC ACID (AMICAR, EACA) LOAD MO/KG	100	17/17				

Figure 11 - Highlighted Cells Display Dark Blue

 There are additional export options available for you to review and to extract report visualizations and elements. Please review the File ->Export menu to see the additional options that are available.



Data Manager Training Webinars

Session 1 – Tuesday Feb 25th at 12 pm CST – ACSD Educational Resources and Navigation of the STS Website (1.5 hr)

Session 2 – Tuesday March 4th at 12 pm CST - Overview of Data Specs, Software Specs, Risk Model Variables (2 hr)

Session 3 – Tuesday March 11th at 12 pm CST - Case Inclusion and Choosing the Index Procedure, PROC ID chart (1.5 hr)

Session 4 – Thursday March 20th at 12 pm CST - Harvesting your Data and the DQR report (1.5 hr)

Session 5 – Tuesday March 25th at 12 pm CST - National Report Overview and Process / Outcome Measures (1.5 hr)

Session 6 – Tuesday April 1st at 12 pm CST - Updating site forms, STS Helpdesk, and RedCap forms (1.5 hr)

Session 7 – Tuesday April 8th at 12 pm CST - IQVIA Reporting Overview (1.5 hr)



Thank you for your attention!

