STS LETTER WITH PCTAP REQUESTS	REQUIRED BY STATUTE	REQUESTED BY THE PCTAP MEMBERS	ACTION COMPLETE	ACCOUNTED FOR IN THE REPORT MOCKUP
The Agency for Health Care Administration (Agency), as Florida's state Agency for health facility licensure, regulation, and transparency, is seeking to partner with the national Society of Thoracic Surgeons (STS) for data sharing and public transparency related to the state's ten licensed pediatric cardiac surgery programs.	~	✓		
Florida Statutes were amended in 2018, adding a requirement that the Agency "Contract with the Society of Thoracic Surgeons and the American College of Cardiology to obtain data reported for publication on the agency's website in a manner that will allow consumers to be informed of aggregate data and to compare pediatric cardiac programs."	~	~		
Additionally, the statutory changes established a <i>Pediatric Cardiac Technical Advisory Panel</i> ( <i>PCTAP</i> ) to assist the Agency in developing procedures and standards for measuring outcomes of pediatric cardiac catheterization programs and pediatric cardiovascular openheart surgery programs in the state.	~	✓	$\checkmark$	~
The panel members are pediatric cardiac surgeons and pediatric cardiologists; and their directive is to make recommendations to the Agency regarding standards for quality of care and data reporting among hospitals that provide pediatric cardiac services.	✓	~	$\checkmark$	✓
The Agency is required to implement administrative rules based on the panel recommendations to include, at a minimum:	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
a. Standards for pediatric cardiac catheterization services and pediatric cardiovascular surgery including quality of care, personnel, physical plant, equipment, emergency transportation, data reporting, and appropriate operating hours and timeframes for mobilization for emergency procedures;	~	✓	$\checkmark$	✓
b. Outcome standards consistent with nationally established levels of performance in pediatric cardiac programs; and	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$
<ul> <li>c. Specific steps to be taken by the agency and licensed facilities when the facilities do not meet the outcome standards within a specified time, including time required for detailed case reviews and the development and implementation of corrective action plans.</li> </ul>	~	$\checkmark$	$\checkmark$	$\checkmark$
The members of the PCTAP, led by a dedicated Public Reporting and Transparency Subcommittee, have outlined the following descriptors to assist in framing our initial request for data sharing:	<ul> <li>✓</li> </ul>	✓	$\checkmark$	✓

1. Require hospitals to submit data every six months. Publish the outcome data on the Agency website in one-year and four-year rolling averages, updated with each six-month		1		
submission.	•	•		•
2. Reported datasets from each hospital should include:	$\checkmark$	$\checkmark$		$\checkmark$
a. Overall mortality	$\checkmark$	$\checkmark$		$\checkmark$
b. Number of cases and mortality broken down by each STAT mortality category	$\checkmark$	$\checkmark$		$\checkmark$
c. Number of cases and mortality broken down by each benchmark operation	$\checkmark$	$\checkmark$		$\checkmark$
3. Each dataset should also include other quality indicators such as:	$\checkmark$	$\checkmark$		$\checkmark$
a. Average/Median length of stay for each STAT mortality category and benchmark operation	$\checkmark$	$\checkmark$		$\checkmark$
b. Postoperative ECMO for each STAT mortality category and benchmark operation	$\checkmark$	$\checkmark$		$\checkmark$
c. Extubation in the OR for each STAT mortality category and benchmark operation	$\checkmark$	$\checkmark$		$\checkmark$
d. Other major postoperative complications for each STAT mortality category and benchmark	$\checkmark$	$\checkmark$		✓
e. Early Readmissions for each STAT mortality category and benchmark operation	$\checkmark$	$\checkmark$		$\checkmark$
The request is for STS to provide both the appropriately risk adjusted mortality data with the risk adjustment methodology as well as the raw, unadjusted mortality.	✓	✓	$\checkmark$	✓
The information, in possession of the Agency, would be subject to all applicable Federal and State of Florida confidentiality and public records laws and regulations.	$\checkmark$		$\checkmark$	
The PCTAP has also requested information regarding estimated costs for STS performance of a data audits among our Florida programs with a breakdown as follows:	~	✓	$\checkmark$	
One Florida program per year (minimum)		$\checkmark$		
Three Florida programs per year		$\checkmark$		
Ten Florida programs per year		$\checkmark$		

We'd like to schedule an introductory conversation with your team to review options regarding scalability, learn more about STS data reporting, and next steps.	$\checkmark$	$\checkmark$	$\checkmark$	
We look forward to working with STS toward our mutual goals of ensuring the highest quality care possible for Floridians.	$\checkmark$	$\checkmark$	$\checkmark$	$\checkmark$

#### STS Congenital Heart Surgery Database Florida Regional Report

### EXHIBIT A

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Table 1 - All Patients - Data Summary - STAT Discharge Mortality

Last 4 years - January 2008 - December 2011

	•	-												
	Operations	Disc	charge Mortality		Category 1		Category 2		Category 3		Category 4		Category 5	
Hospita	in Analysis	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	
Region	x,xxx	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	
STS	xx,xxx	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	
1	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
2	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
3	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
4	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
5	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	

Figure 1: STAT Category 1 - Last 4 years - January 2008 - December 2011

Funnel Plot STAT Category 1

Figure 2: STAT Category 2 - Last 4 years - January 2008 - December 2011

Funnel Plot STAT Category 2

Figure 3: STAT Category 3 - Last 4 years - January 2008 - December 2011

Funnel Plot STAT Category 3

Figure 4: STAT Category 4 - Last 4 years - January 2008 - December 2011

Funnel Plot STAT Category 4

Figure 5: STAT Category 5 - Last 4 years - January 2008 - December 2011

Funnel Plot STAT Category 5

# Table 2 – Pediatric and Congenital Heart Benchmark Operations - Discharge Mortality

Last 4 years - January 2008 - December 2011

	١	/SD Repair		TOF Repair	Comple	te AV Canal Repair	A	rterial Switch	Arterial	Switch + VSD Repair	т	runcus Repair		Norwood	Superior Ca	vopulmonary Connection		Fontan
Hospital	# / Eligible	% of Patients (95% CI	) # / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)
REGION	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x, x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)
STS	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	X,XXX /	x.x (x.x , x.x)	X,XXX /	x.x (x.x , x.x)	X,XXX /	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)
1	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)
2	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)
3	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)
4	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)
5	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)

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Figure 6: VSD Repair - Last 4 years - January 2008 - December 2011

Funnel Plot - VSD Repair

Figure 7: TOF Repair - Last 4 years - January 2008 - December 2011

Funnel Plot - TOF Repair

Figure 8: Complete AV Canal Repair - Last 4 years - January 2008 - December 2011

Funnel Plot - Complete AV Canal Repair

Figure 9: Arterial Switch - Last 4 years - January 2008 - December 2011

Funnel Plot - Arterial Switch

Figure 10: Arterial Switch + VSD Repair - Last 4 years - January 2008 - December 2011

Funnel Plot - Arterial Switch + VSD Repair



Figure 11: Truncus Repair - Last 4 years - January 2008 - December 2011

Funnel Plot - Truncus Repair

Figure 12: Norwood - Last 4 years - January 2008 - December 2011

Funnel Plot - Norwood

Figure 13: Superior Cavopulmonary Connection - Last 4 years - January 2008 - December 201

Funnel Plot - Superior Cavopulmonary Connection

Figure 14: Fontan - Last 4 years - January 2008 - December 2011

Funnel Plot - Fontan

# Table 3 – Neonates Risk Adjusted Discharge Mortality - Discharge Mortality Last 4 years - January 2008 - December 2011

Hospital	# / Eligible	Observed	Expected	Observed/E xpected (95% CI)	Adjusted Rate (95% CI)
REGION	xxx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
STS	x,xxx / xx,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
1	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
2	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
3	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
4	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
5	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)

# STS Congenital Heart Surgery Database Florida Regional Report

#### Table 4 - All Patients - Data Summary - STAT Discharge Mortality Last 1 year - January 2011 - December 2011

Lasti	year - Ja	nuary 20	II - December 20	/										
	Operations	Disc	charge Mortality		Category 1		Category 2		Category 3		Category 4		Category 5	
Hospital	in Analysis	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	
Region	x,xxx	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	
STS	XX,XXX	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x, x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	
1	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
2	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
3	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
4	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	
5	x,xxx	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	

#### Figure 15: STAT Category 1 - Last 1 year - January 2011 - December 2011

Funnel Plot STAT Category 1

Figure 16: STAT Category 2 - Last 1 year - January 2011 - December 2011

Funnel Plot STAT Category 2

Figure 17: STAT Category 3 - Last 1 year - January 2011 - December 2011

Funnel Plot STAT Category 3



Figure 18: STAT Category 4 - Last 1 year - January 2011 - December 2011

Funnel Plot STAT Category 4

Figure 19: STAT Category 5 - Last 1 year - January 2011 - December 2011

Funnel Plot STAT Category 5

Table 5 – Pediatric and Congenital Heart Benchmark Operations - Discharge Mortality

Last 1 year - January 2011 - December 2011

-	-	VSD Repair		TOF Repair	Comple	ete AV Canal Repair	A	rterial Switch	Arterial	Switch + VSD Repair	т	runcus Repair		Norwood	Superior Ca	vopulmonary Connection	1	Fontan
Hospital	# / Eligible	% of Patients (95% CI	l) # / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible	% of Patients (95% CI)	# / Eligible %	6 of Patients (95% CI)
REGION	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x, x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)	xxx / x,xxx	x.x (x.x , x.x)

STS	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	X,XXX /	x.x (x.x , x.x)	x,xxx /	x.x (x.x , x.x)	x,xxx /	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)	x,xxx / xx,xxx	x.x (x.x , x.x)
1	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x, x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)
2	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)
3	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)
4	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)
5	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)	xx / x,xxx	x.x (x.x , x.x)

Figure 20: VSD Repair - Last 1 year - January 2011 - December 2011

Funnel Plot - VSD Repair

SPI

Figure 21: TOF Repair - Last 1 year - January 2011 - December 2011

Funnel Plot - TOF Repair

Figure 22: Complete AV Canal Repair - Last 1 year - January 2011 - December 2011

Funnel Plot - Complete AV Canal Repair

Figure 23: Arterial Switch - Last 1 year - January 2011 - December 2011

Funnel Plot - Arterial Switch

Figure 24: Arterial Switch + VSD Repair - Last 1 year - January 2011 - December 2011

Funnel Plot - Arterial Switch + VSD Repair

Figure 25: Truncus Repair - Last 1 year - January 2011 - December 2011

Funnel Plot - Truncus Repair

Figure 26: Norwood - Last 1 year - January 2011 - December 2011

Funnel Plot - Norwood

Figure 27: Superior Cavopulmonary Connection - Last 1 year - January 2011 - December 201

Funnel Plot - Superior Cavopulmonary Connection

Figure 28: Fontan - Last 1 year - January 2011 - December 2011

Funnel Plot - Fontan



## Table 6 – Neonates Risk Adjusted Discharge Mortality - Discharge Mortality Last 1 year - January 2011 - December 2011

Hospital	# / Eligible	Observed	Expected	Observed/E xpected (95% CI)	Adjusted Rate (95% CI)
REGION	xxx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
STS	x,xxx / xx,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
1	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
2	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
3	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
4	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)
5	xx / x,xxx	x.x%	x.x%	x.x (x.x , x.x)	x.x (x.x , x.x)

		h	ttp://pediatric	heartsurgery.com	/realtimeoutcome	s/cvperformance.aspx		
erformance Analysis By Age								
Il fields below are dynamic - up	dated in real-ti	me from the ca	rdiac program	electronic medic	al record. except b	lue fields which contain fixed	values from the medical literat	ure.
	dure Recorded				•		CAN BE FILTERED ON LIVE SITE	
Category	Number Of Patients			Number Of Non CPB	Number Of Mortalities	Procedure Mortality	STS Last 1 Year Mortality (1/2017-12/2017)	STS Last 4 Year Mortality (1/201 12/2017)
Neonates (0-30 Days)	1,094	1,094	857	237	84	7.70%	7.40%	8.30%
Infants (31 Days - 1 Year)	1,519	1,581	1,353	228	27	1.70%	2.60%	2.80%
Children (>1 Year - <18 Years)	1,543	1,677	1,491	186	15	0.90%	1.10%	1.00%
Adults (18 Years and above)	179	202	144	58	3	1.50%	1.30%	1.40%
Totals:	4,335	4,554	3,845	709	129	2.80%	2.80%	3.00%
erformance Analysis By Procedu	ire and Comple	exity						
II fields below are dynamic - up	dated in real-ti	me from the ca	rdiac program	electronic medic	al record, except b	lue fields which contain fixed	values from the medical literat	ure. References
Last Procedure	e Recorded on 2	1/17/2019		<b>Currently Selecte</b>	d Date Range: 1/1	/2001 - 1/17/2019 <mark>(DATE RAN</mark>	GE CAN BE FILTERED ON LIVE S	SITE)
Category	Number Of	Median Age	Number Of	Percent	STS Last 4 Year	Median Length of PostOp	STS Median PostOp Stay	
	Patients	In Days	Mortalities	Mortality	Mortality (1/2014- 12/2017)	Stay (Days)	(Days)	
VSD Repair	409	161	1	0.20%	0.50%	5	8	1
TOF Repair	264	117	1	0.40%	1.30%	6	11	1
Arterial Switch	132	5	1	0.80%	2.20%	9	17	1
Complete AV Canal Repair	131	143	0	0.00%	2.50%	7	17	1
Arterial Switch + VSD Repair	42	7	1	2.40%	4.60%	9	18	1
Fontan	306	1422	4	1.30%	1.00%	10	13	]
Truncus Repair	38	14	1	2.60%	9.50%	15	28	
Norwood	185	6	22	11.90%	15.00%	16	45	
Performance Comparison by 1	The Society of T	horacic Surgeo	ons - European	Association for C	ardio-Thoracic Sur	gery Congenital Heart Surgery	Mortality Categories (STAT	
All fields below are dynamic -	updated in rea	Il-time from th	e cardiac prog	ram electronic me	dical record, exce	ot blue fields which contain fix	ed values from the medical	
Last Procedure Record	ed on1/17/201	9	Currently Sele	ected Date Range:	1/1/2001 - 1/17/2	2019 (DATE RANGE CAN BE FIL	TERED ON LIVE SITE)	
STAT Category	Number Of	Median Length Of	Median Age	Number Of Mortalities	Percent Mortality	STS Last 1 Year Mortality (1/2017-12/2017)	STS Last 4 Year Mortality (1/2014-12/2017)	

1	1,378	4	773	2	0.10%	0.40%	0.40%
2	1,324	7	308	19	1.40%	1.30%	1.60%
3	448	9	89	4	0.90%	2.10%	2.30%
4	819	13	12	62	7.60%	6.20%	6.40%
5	237	17	7	30	12.70%	11.90%	14.60%

STAT category is the STS Risk Assessment Scale. Higher numbers are higher risk.

The tables above follow STS definitions. References to the STS methodology and definitions may be found here. Operative mortality is defined as in hospital or 30 day mortality. Only operations Performance Sparkline

Each tick mark in the graphic below represents a cardiac surgical procedure. Surviving patients are indicated by upward tick marks and mortalities are indicated by the downward tick marks in the

# Performance Sparkline

Each tick mark in the graphic below represents a cardiac surgical procedure. Surviving patients are indicated by upward tick marks and mortalities are indicated by the downward tick marks in the sequence. Every 250 cases the graphic wraps to the next line for comparison. The sparkline is read like a book from left to right and from top to bottom.

## Currently Selected Date Range: 1/1/2001 - 1/17/2019

100,000,000,000,000,000,000,000,000 ANT, MINIMUM , MIN HULLING, MULLING AND ADDRESS OF A DOLLARS 10,000,0,000 1100 100100 11140311103,000 101-08 11,10101 **Outcomes Data and Choosing a Cardiac Program** 

In deciding where your child or other family member should be cared for it is important to ask questions. These are some of the questions we encourage parents and patients to ask of us at Nicklaus 1. How many patients with similar diagnosis are seen in the center in a year, the past four years, and the past ten years?

2. How many open heart operations does the program do a year? How many of the type of operation that your child requires are done a year, the past four years, and the past ten years?

3. Where does the volume of the program stand in relation to the volume of other programs in the area? • What are the outcomes? Are they publicly available?

4. What are the outcomes in relation to the publicly available outcomes of other centers in the area, in the region, in the country?

5. It is completely appropriate to insist to see the relevant Society of Thoracic Surgeons Congenital Heart Surgery Database tables so you can compare actual outcomes rather than vague

6. There are other outcome measures that are relevant in some cases. What is the rate of complications like renal failure, tracheostomy, gastrostomy, and pacemaker placement?

7. Ask about the resources available.

8. Are there two or more surgeons on site? What is their training and experience?

9. What is the experience and training of the other physicians on the cardiac team: echocardiographers, intensivists, interventional cardiologists, electrophysiologists?

10. What is the programmatic experience? How stable is program? Are the results being reported the results for the people currently in the program?

11. Is there a dedicated Cardiac Intensive Care Unit that cares only for cardiac patients with in house physician coverage 24/7? Are the physicians dedicated to caring only for patients with congenital

12. Are there dedicated pediatric echocardiographers who routinely perform intraoperative transesophageal echocardiography?

13. Is there a dedicated pediatric cardiac MRI program?

14. Is there a dedicated pediatric cardiac catheterization laboratory that specializes in congenital heart disease? Or are children with congenital heart disease catherized in an adult laboratory?

15. Is there a dedicated cardiac anesthesia team?

16. Is there a dedicated perfusion (heart lung machine) team that specializes in congenital heart disease?

17. Is there a High Risk Clinic for at risk patients after neonatal palliative surgery?

18. Are there dedicated contact people available before, during and after surgery? Ask to meet those contact persons.

19. Meet the surgeons. Ask questions. Ask for a tour.

20. Expect and demand the highest level of care for your child or family member.

**Analyzing Outcomes Data** 

In evaluating programmatic results it is very important to recognize that every child and every patient is different. Outcomes data is an aggregation of patients: we care for individual patients with The outcomes data above is an aggregation of patients and the risk stratification presented is based on type of operation only. More complex risk stratification methods are also used by the Society of

We are hopeful that you find the information useful. Should you require more specific outcomes data or more information regarding our program, please do not hesitate to contact us at 305-663-

American College of Cardiology - National Cardiovascular Data Registry -
IMPACT Registry for Florida Report

<b>C</b> οι	Count of Isolated Procedures (R4Q column for each year x4)											
Facility Name	2016	2017	2019	2020								
Facility A												
Facility B												
Facility C												
Facility D												
Facility E												
Facility F												
Facility G												
Facility H												
Facility I												
Facility J												

Count of All Inclusive procedures (R4Q column for each year x 4)											
Facility Name	2016	2017	2018	2019	2020						
Facility A											
Facility B											
Facility C											
Facility D											
Facility E											
Facility F											
Facility G											
Facility H											
Facility I											
Facility J											

Section III: Test Metrics #32 Risk Standardized Adverse Event Rate											
Facility Name         2016         2017         2018         2019         202											
Facility A											
Facility B											
Facility C											

Facility D			
Facility E			
Facility F			
Facility G			
Facility H			
Facility I			
Facility J			

From Executive Summary Detail lines Table: Column "My Hospital R4Q" reported in Q4 (hence calendar year) for each institution and US registry pts RQ4 (same time period)										
Facility Name	2016	2017	2018	2019	2020					
Facility A										
Facility B										
Facility C										
Facility D										
Facility E										
Facility F										
Facility G										
Facility H										
Facility I										
Facility J										

\* Data request from ACC-NCDR (American College of Cardiology - National Cardiovascular Data Registry) IMPACT Registry for Florida report

\*Requested elements to be reported as Yearly (Q4) reports for most recent 4 years in tabular form by institution in Florida.

The Society of Thoracic Surgions STS Public Reporting Online										
Operative and Adjusted Operative Mortality, Last 4 Years (January 2014 - December 2017)										
Operative and Adjusted Operative Mortancy, Last 4 Tears (January 2014 - December 2017)										
	https://publicreporting.sts.org/c									
Hospital Name Overall Star Rating*	Population: Neonates, Infants, Children & Adults	#	Eligible	Observed	Expected	O/E Ratio (95% CI)	Adj. Rate (95% CI)			
Arnold Palmer Medical Center 🛛 🛧 🛧	Overall STAT Mortality Category 1 STAT Mortality Category 2 STAT Mortality Category 3 STAT Mortality Category 4 STAT Mortality Category 5	11 0 2 1 5 3	463 120 175 53 78 37	2.40% 0% 1.10% 1.90% 6.40% 8.10%	4% 0.50% 2% 3.40% 6.60% 19.70%	0.6 (0.3, 1.07) 0 (0, 6.48) 0.58 (0.07, 2.06) 0.55 (0.01, 2.96) 0.96 (0.32, 2.16) 0.41 (0.09, 1.11)	1.7 (0.9, 3.1) 0 (0, 2.5) 0.9 (0.1, 3.2) 1.3 (0, 7) 6.2 (2, 13.8) 6 (1.3, 16.1)			
Florida Hospital for Children 🛛 🖈 🖈	Overall STAT Mortality Category 1 STAT Mortality Category 2 STAT Mortality Category 3 STAT Mortality Category 4 STAT Mortality Category 5	14 1 3 1 9 0	428 126 183 38 74 7	3.30% 0.80% 1.60% 2.60% 12.20% 0%	2.20% 0.30% 1.30% 2.20% 6.60% 13.90%	1.46 (0.81, 2.43) 2.42 (0.06, 13.26) 1.23 (0.25, 3.54) 1.17 (0.03, 6.16) 1.84 (0.87, 3.31) 0 (0, 2.94)	4.2 (2.3, 7) 0.9 (0, 5.2) 1.9 (0.4, 5.6) 2.8 (0.1, 14.5) 11.8 (5.5, 21.1) 0 (0, 42.7)			
Jackson Memorial Hospital 🛛 🖈 🖈	Overall STAT Mortality Category 1 STAT Mortality Category 2 STAT Mortality Category 3 STAT Mortality Category 4 STAT Mortality Category 5	12 2 1 0 8 1	332 123 110 22 70 7	3.60% 1.60% 0.90% 0% 11.40% 14.30%	2% 0.30% 1.10% 2.40% 4.80% 14%	$\begin{array}{c} 1.84 \ (0.96,  3.18) \\ 5.23 \ (0.64,  18.51) \\ 0.8 \ (0.02,  4.38) \\ 0 \ (0,  6.39) \\ 2.38 \ (1.05,  4.42) \\ 1.02 \ (0.03,  4.13) \end{array}$	5.3 (2.8, 9.2) 2.1 (0.2, 7.3) 1.3 (0, 6.9) 0 (0, 15) 15.2 (6.7, 28.3) 14.8 (0.4, 59.9)			
Joe DiMaggio Children's Hospital 🛛 🖈 🖈	Overall STAT Mortality Category 1 STAT Mortality Category 2 STAT Mortality Category 3 STAT Mortality Category 4	21 2 4 2 8	569 169 182 55 136	3.70% 1.20% 2.20% 3.60% 5.90%	2.90% 0.30% 1.60% 2.50% 6.50%	1.28 (0.8, 1.94) 3.99 (0.48, 14.2) 1.4 (0.38, 3.51) 1.46 (0.18, 5.04) 0.9 (0.4, 1.73)	3.7 (2.3, 5.6) 1.6 (0.2, 5.6) 2.2 (0.6, 5.5) 3.4 (0.4, 11.8) 5.8 (2.5, 11.1)			

		STAT Mortality Category 5	5	27	18.50%	10.50%	1.77 (0.6, 3.63)	25.6 (8.7, 52.7)
Johns Hopkins all Children's Hospital	**	Overall	25	705	3.50%	2.90%	1.21 (0.78, 1.77)	3.5 (2.3, 5.1)
					<b>e</b> • (	0.400/		
		STAT Mortality Category 1	0	185	0%	0.40%	0 (0, 4.72)	0 (0, 1.9)
		STAT Mortality Category 2	3	263	1.10%	1.40%	0.82 (0.17, 2.37)	1.3 (0.3, 3.7)
		STAT Mortality Category 3	4	58	6.90%	2.50%	2.72 (0.76, 6.61)	6.4 (1.8, 15.5)
		STAT Mortality Category 4	12	156	7.70%	6.30%	1.22 (0.64, 2.07)	7.8 (4.1, 13.2)
		STAT Mortality Category 5	6	43	14%	11.60%	1.21 (0.46, 2.42)	17.5 (6.6, 35)
Nemours Children's Hospital	**	Overall	1	110	0.90%	1%	0.95 (0.02, 5.21)	2.8 (0.1, 15.1)
		STAT Mortality Category 1	0	61	0%	0.20%	0 (0, 23.89)	0 (0, 9.4)
		STAT Mortality Category 2	0	22	0%	1.40%	0 (0, 11.01)	0 (0, 17.3)
		STAT Mortality Category 3	0	9	0%	1.60%	0 (0, 20.97)	0 (0, 49.3)
		STAT Mortality Category 4	1	18	5.60%	2.50%	2.25 (0.06, 11.04)	14.4 (0.4, 70.6)
				_				4
Nicklaus Children's Hospital	**	Overall	36	952	3.80%	3%	1.28 (0.9, 1.76)	3.7 (2.6, 5.1)
		STAT Mortality Category 1	1	293	0.30%	0.40%	0.88 (0.02, 4.87)	0.3 (0, 1.9)
		STAT Mortality Category 2	5	351	1.40%	1.60%	0.89 (0.29, 2.05)	1.4 (0.5, 3.2)
		STAT Mortality Category 3	0	73	0%	2.20%	0 (0, 2.27)	0 (0, 5.3)
		STAT Mortality Category 4	20	185	10.80%	6.60%	1.63 (1.02, 2.45)	10.5 (6.5, 15.7)
		STAT Mortality Category 5	10	47	21.30%	16.10%	1.32 (0.66, 2.21)	19.2 (9.6, 32.1)
St. Josph's Children's Hospital BayCare Health System	**	Overall	12	512	2.30%	2.40%	1 (0.52, 1.73)	2.9 (1.5, 5)
		STAT Mortality Category 1	0	162	0%	0.30%	0 (0, 7.25)	0 (0, 2.8)
		STAT Mortality Category 2	2	190	1.10%	1.30%	0.84 (0.1, 2.99)	1.3 (0.2, 4.7)
		STAT Mortality Category 3	2	52	3.80%	2.10%	1.8 (0.22, 6.19)	4.2 (0.5, 14.5)
		STAT Mortality Category 4	7	95	7.40%	6.40%	1.14 (0.47, 2.27)	7.3 (3, 14.5)
		STAT Mortality Category 5	1	13	7.70%	14.80%	0.52 (0.01, 2.44)	7.6 (0.2, 35.4)
UF Health Shands Children's Hospital	***	Overall	7	824	0.80%	2.20%	0.39 (0.16, 0.81)	1.1 (0.5, 2.3)
		STAT Mortality Category 1	0	227	0%	0.30%	0 (0, 4.74)	0 (0, 1.9)

	STAT Mortality Category 2 STAT Mortality Category 3 STAT Mortality Category 4 STAT Mortality Category 5	3 0 2 2	291 69 218 19	1% 0% 0.90% 10.50%	1.10% 2.10% 4.60% 11.90%	0.9 (0.19, 2.6) 0 (0, 2.52) 0.2 (0.02, 0.71) 0.89 (0.11, 2.79)	1.4 (0.3, 4.1) 0 (0, 5.9) 1.3 (0.2, 4.6) 12.8 (1.6, 40.4)
Tatala		120	4005				
Totals		139	4895				