



CENTRA

## **Quality Report**

Acute Rehab

Children's Asthma

Heart Attack Care

Heart Catheterizations

Heart Failure

Home Health Measures

Mortality

Nursing Care

Patient Satisfaction

Pneumonia

Skilled Care Facilities

Stroke

Surgery, Heart

Surgical Care



## Quality Report Acute Rehab

Indicator	US National Avg <sup>1</sup>	Region <sup>2</sup> Avg <sup>1</sup>	Centra <sup>1</sup>
Average Change in Functional Independence Measure (FIM)	27.1	27.7	23.1
Average Length of Stay (LOS)	14	13	12
Length of Stay Efficiency <sup>3</sup>	2.44	2.61	2.15
Discharge to Community	76%	75%	82%
Discharge to Acute Care Facility	10%	11%	5%

<sup>1</sup> Source: UDS Pro Central, 2011

<sup>2</sup> Comparison Region includes VA, DC, DE, MD, PA, WV

<sup>3</sup> LOS Efficiency = FIM divided by LOS (Essentially, FIM change per day)



## Quality Report Children's Asthma

Indicator	US Hospital Avg <sup>1</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1</sup>
Percentage of Asthma Inpatients (age 2 years through 17 years) Receiving <a href="#">Asthma Relievers</a>	100%	Not Available	100%
Percentage of Asthma Inpatients (age 2 years through 17 years) Receiving <a href="#">Systemic Corticosteroids</a>	100%	Not Available	100%
Percentage of Asthma Inpatients/Caregivers Receiving a Written Home Management Plan of Care (HMPC) Document with Recommended Guideline Instructions	68%	Not Available	94%

<sup>1</sup> Source: National Avg <http://www.hospitalcompare.hhs.gov>; State comparative data not available. These rates are from data reported for discharges April 2009 through March 2010. Data Last Updated: December 11, 2010



## Quality Report Heart Attack

Indicator	Top US Hospital <sup>1,2</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1</sup>	Centra Southside <sup>1</sup>
Percent of Heart Attack Patients Given Aspirin at Arrival	100%	99%	100%	The number of cases is too small (<25) to show the hospital performance.
Percent of Heart Attack Patients Given Aspirin at Discharge	100%	99%	100%	The number of cases is too small (<25) to show the hospital performance.
Percent of Heart Attack Patients Given <a href="#">ACE Inhibitor or ARB</a> for Left Ventricular Systolic Dysfunction (LVSD)	100%	96%	98%	The number of cases is too small (<25) to show the hospital performance.
Percent of Heart Attack Patients Given Smoking Cessation Advice/Counseling	100%	100%	100%	"0 patients" - No patients met the criteria for inclusion in the measure calculation.
Percent of Heart Attack Patients Given <a href="#">Beta Blocker</a> at Discharge	100%	99%	99%	The number of cases is too small (<25) to show the hospital performance.
Percent of Heart Attack Patients Given <a href="#">PCI</a> Within 90 Minutes Of Arrival	100%	92%	96%	"0 patients" - No patients met the criteria for inclusion in the measure calculation.
<sup>3</sup> Estimated 30-day death (mortality) rates	*16.2% *This is the US National Rate	Not Available	15.7% No Different than US National Rate	15.6% No Different than US National Rate

<sup>1</sup> Source: <http://www.hospitalcompare.hhs.gov>.

The rates are from data reported for discharges April 2009 to March 2010; Data last updated December 11, 2010

<sup>2</sup> Top Hospital represents the top 10% of hospitals nationwide

<sup>3</sup> These percentages were calculated from Medicare data on patients discharged between July 01, 2006 and June 30, 2009. They don't include people in Medicare Advantage Plans (like an HMO or PPO) or people who don't have Medicare. Data last updated: December 11, 2010



## Quality Report Heart Catheterization

Indicator	Centra LGH <sup>1</sup>	
Percentage of <a href="#">PCI</a> patients with door to balloon time less than or equal to 90 minutes.	95.3%	Ranks better than ACC <sup>1</sup> National Average
Risk Adjusted PCI Mortality rate using the <a href="#">ACC-NCDR® risk adjustment model</a> .	1.70%	Ranks less than ACC <sup>1</sup> National Average
Incidence of vascular complications including <a href="#">PCI</a> procedures with access site bleeding.	0.4%	Ranks better than ACC <sup>1</sup> National Average
Percentage of eligible PCI patients who received any type of stent and had <a href="#">thienopyridine</a> (such as clopidogrel or ticlopidine) prescribed at discharge.	97.8%	Ranks less than ACC <sup>1</sup> National Average
Percentage of stented lesions with angiographic success (defined as post- <a href="#">stenosis</a> less ≤ 20% for lesions with a stent implanted).	98.9%	Ranks equals to AAC <sup>1</sup> National Average
Patients having a left heart <a href="#">catheterization</a> (including only patients with the indications of rule out Coronary Artery Disease and and/or arrhythmia) where all coronary branches have < 50% stenosis <sup>2</sup>	40.9%	Ranks better than ACC <sup>1</sup> National Average
Incidence of vascular complications including <a href="#">Diagnostic Cath</a> procedures with access site bleeding.	0.2%	Ranks better than ACC <sup>1</sup> National Average



## Quality Report Heart Catheterization

Indicator

Centra LGH<sup>1</sup>

<sup>1</sup> American College of Cardiology Foundation ACC-NCDR<sup>®</sup> Cath PCI Registry<sup>™</sup>, 4th Qtr 2009 to 3rd Qtr 2010

<sup>2</sup> A low percentage is desirable.



## Quality Report Heart Failure

Indicator	Top US Hospital <sup>1,2</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1</sup>	Centra Southside <sup>1</sup>
Percentage of Heart Failure Patients Receiving Guideline Recommended Discharge Instructions	100%	91%	100%	73%
Percentage of Heart Failure Patients Given an Evaluation of <a href="#">Left Ventricular Systolic (LVS) Function</a>	100%	99%	99%	96%
Percent of Heart Failure Patients Given <a href="#">ACE Inhibitor or ARB</a> for Left Ventricular Systolic Dysfunction (LVSD)	100%	96%	96%	95%
Percent of Heart Failure Patients Given Smoking Cessation Advice/Counseling	100%	99%	100%	97%
<sup>3</sup> Estimated 30-day death (mortality) rates	*11.2%	Not Available	11.0%	11.3%
	*This is the US National Rate		No Different than US National Rate	No Different than US National Rate

<sup>1</sup> Source: <http://www.hospitalcompare.hhs.gov>

These rates are from data reported for discharges April 2009 to March 2010; Data last updated December 11, 2010

<sup>2</sup> Top Hospital represents the top 10% of hospitals nationwide

<sup>3</sup> These percentages were calculated from Medicare data on patients discharged between July 01, 2006 and June 30, 2009.

They don't include people in Medicare Advantage Plans (like an HMO or PPO) or people who don't have Medicare.

Data last updated: December 11, 2010



## Quality Report Home Health

Indicator	US Average <sup>1</sup>	VA State Avg <sup>1</sup>	Centra Home Health <sup>1</sup>
Percentage of patients who get better at walking or moving around <sup>3</sup>	47%	48%	50%
Percentage of patients who get better at getting in and out of bed <sup>3</sup>	54%	56%	69%
Percentage of patients who get better at bathing <sup>3</sup>	65%	64%	67%
How often the home health team checked patients for pain <sup>3</sup>	97%	97%	100%
How often the home health team treated their patients' pain <sup>3</sup>	95%	94%	99%
Percentage of patients who have less pain when moving around <sup>3</sup>	64%	63%	61%
How often the home health team treated heart failure (weakening of the heart) patients' symptoms <sup>3</sup>	97%	97%	97%
Percentage of patients who are short of breath less often <sup>3</sup>	60%	62%	60%
How often patients' wounds improved or healed after an operation <sup>3</sup>	80%	81%	81%



## Quality Report Home Health

Indicator	US Average <sup>1</sup>	VA State Avg <sup>1</sup>	Centra Home Health <sup>1</sup>
How often the home health team checked patients for the risk of developing pressure sores (bed sores) <sup>3</sup>	95%	97%	100%
How often the home health team included treatments to prevent pressure sores (bed sores) in the plan of care <sup>3</sup>	90%	89%	99%
How often the home health team took doctor-ordered action to prevent pressure sores (bed sores) <sup>3</sup>	88%	88%	94%
How often patients had more pressure sores (bed sores) when home health care ended <sup>4</sup>	Not Available	Not Available	Not Available
How often the home health team began their patients' care in a timely manner <sup>3</sup>	87%	87%	87%
How often the home health team taught patients (or their family caregivers) about their drugs <sup>3</sup>	84%	82%	93%
Percentage of patients who get better at taking their medicines correctly by mouth <sup>3</sup>	43%	43%	48%
How often the home health team checked patients' risk of falling <sup>3</sup>	94%	96%	100%



## Quality Report Home Health

Indicator	US Average <sup>1</sup>	VA State Avg <sup>1</sup>	Centra Home Health <sup>1</sup>
How often the home health team checked patients for depression <sup>3</sup>	92%	92%	100%
How often the home health team determined whether patients received a flu shot for the current flu season <sup>3</sup>	66%	69%	86%
How often the home health team determined whether their patients received a pneumococcal vaccine (pneumonia shot) <sup>3</sup>	60%	62%	84%
How often the home health team got doctor's orders, gave foot care, and taught patients with diabetes about foot care <sup>3</sup>	84%	83%	94%
How often patients receiving home health care needed urgent, unplanned medical care in the hospital emergency room (without being admitted to the hospital) <sup>4</sup>	Not Available	Not Available	Not Available
Percentage of patients who had to be admitted to the hospital <sup>4</sup>	29%	27%	23%

<sup>1</sup> Source: [www.medicare.gov/Hhcompare/Home.asp](http://www.medicare.gov/Hhcompare/Home.asp); Data last updated January 28, 2011

<sup>3</sup> Increased rate is desirable

<sup>4</sup> Decreased rate is desirable



## Quality Report Infection Rates

Indicator	NHSN Pooled Mean <sup>1</sup>	Centra LGH/VBH (Jan 2010 - Dec 2010)	Centra Southside (Jan 2010 - Dec 2010)
Rate of central line associated bloodstream infections/1000 central venous catheter days	1.72	0.94	0.00
Rate of ventilator associated pneumonia /1000 ventilator days	3.33	0.29	0.00
Rate of catheter associated urinary tract infections/1000 urinary catheter days	5.01	0.72	2.14

Indicator	NHSN Pooled Rate <sup>1</sup>	Centra LGH/VBH	Centra Southside
Percentage of Coronary Artery Bypass Graft (CABG) Surgical Site Infections/100 CABG procedures	2.83%	1.56%	N/A
Percentage of Other Cardiac Surgery Surgical Site Infections/100 Other Cardiac Procedures	1.29%	0.00%	N/A
Percentage of Laminectomy Surgical Site Infections/100 Laminectomy Procedures	1.02%	0.60%	N/A
Percentage of Hip Prosthesis Surgical Site Infections/100 Hip Prosthesis Procedures	1.27%	0.55%	16.00%*
Percentage of Knee Prosthesis Surgical Site Infections/100 Knee Prosthesis Procedures	0.89%	1.26%	0.00%



## Quality Report Infection Rates

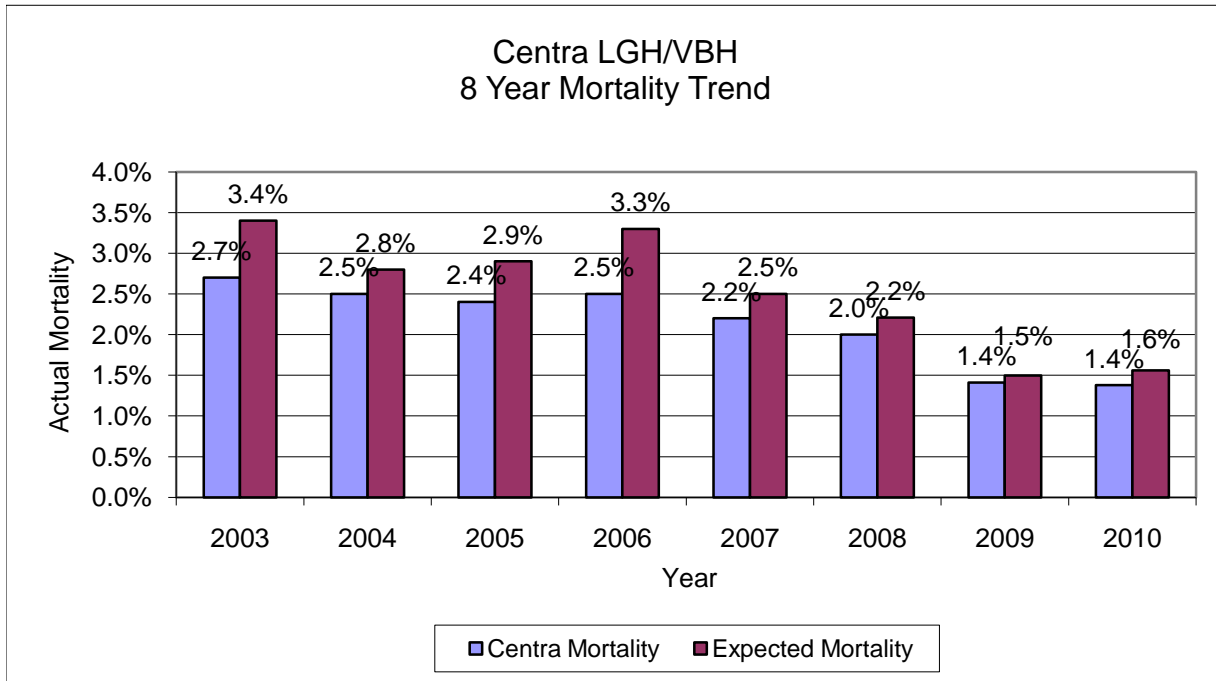
Percentage of C Section Surgical Site Infections/100 C Section Procedures	1.84%	0.48%	0.00%
Percentage of Abdominal Hysterectomy Surgical Site Infections/100 Abdominal Hysterectomy Procedures	1.65%	0.57%	0.00%
Percentage of Vaginal Hysterectomy Surgical Site Infections/100 Vaginal Hysterectomy Procedures	0.87%	0.00%	0.00%
Percentage of Colon Procedure Surgical Site Infections/100 Colon Procedures	5.56%	10.17%	N/A
Percentage of Peripheral Vascular Bypass Graft Procedure Surgical Site Infections/100 Colon Procedures	6.71%	4.84%	N/A

<sup>1</sup> NHSN: National Healthcare Safety Network. (December 2009 report)



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## Quality Report Mortality





## Quality Report Nursing Care

Indicator	Top US Hospital	US Hospital Mean	Centra LGH/VBH <sup>1</sup> (Jan 2010 - Dec 2010)	Centra Southside <sup>1</sup> (Jan 2010 - Dec 2010)
Patient Falls per 1000 Patient Days	Unavailable	Unavailable	4.98	4.78
Patient Falls with Injury per 1000 Patient Days	Unavailable	Unavailable	1.42	0.47
Hospital Acquired <a href="#">Pressure Ulcers</a>	Unavailable	Unavailable	1.03%	0.17%

<sup>1</sup> Centra Health Adult Critical Care Units, 2010 Data

Indicator	NHSN Pooled Mean <sup>2</sup>		Centra LGH/VBH (Jan 2010 - Dec 2010)	Centra Southside (Jan 2010 - Dec 2010)
Rate of central line associated bloodstream infections/1000 central venous catheter days	1.72	Unavailable	0.94	0.00
Rate of ventilator associated pneumonia /1000 ventilator days	3.33	Unavailable	0.29	0.00
Rate of catheter associated urinary tract infections/1000 urinary catheter days	5.01	Unavailable	0.72	2.14

<sup>2</sup> NHSN: National Healthcare Safety Network, Dec 2009 report



## Quality Report Patient Satisfaction

Indicator	US Hospital Avg <sup>1</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1</sup>	Centra Southside <sup>1</sup>
<p>Patients reported how often their nurses <b>"always"</b> communicated well with them during their hospital stay. "Communicated well" means nurses explained things clearly, listened carefully to the patient, and treated the patient with courtesy and respect.</p>	76%	75%	81%	There were discrepancies in the data collection process.
<p>Patients reported how often their doctors <b>"always"</b> communicated well with them during their hospital stay. "Communicated well" means doctors explained things clearly, listened carefully to the patient, and treated the patient with courtesy and respect.</p>	80%	80%	83%	There were discrepancies in the data collection process.
<p>Patients reported how often they were <b>"always"</b> helped quickly when they used the call button or needed help in getting to the bathroom or using a bedpan.</p>	64%	62%	66%	There were discrepancies in the data collection process.
<p>If patients needed medicine for pain during their hospital stay, the survey asked how often their pain was <b>"always"</b> well controlled. "Well controlled" means their pain was well controlled and that the hospital staff did everything they could to help patients with their pain.</p>	69%	69%	73%	There were discrepancies in the data collection process.
<p>If patients were given medicine that they had not taken before, the survey asked how often staff <b>"always"</b> explained about the medicine. "Explained" means that hospital staff told what the medicine was for and what side effects it might have before they gave it to the patient.</p>	60%	58%	63%	There were discrepancies in the data collection process.



## Quality Report Patient Satisfaction

Indicator	US Hospital Avg <sup>1</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1</sup>	Centra Southside <sup>1</sup>
<p>Patients reported how often their hospital room and bathroom were <b>"always"</b> kept clean.</p>	71%	68%	76%	There were discrepancies in the data collection process.
<p>Patients reported how often the area around their room was <b>"always"</b> quiet at night.</p>	58%	57%	59%	There were discrepancies in the data collection process.
<p>The survey asked patients about information they were given when they were ready to leave the hospital. Patients reported whether hospital staff had <b>"always"</b> discussed the help they would need at home. Patients also reported whether they were always given written information about symptoms or health problems to watch for during their recovery.</p>	81%	82%	81%	There were discrepancies in the data collection process.
<p>After answering all other questions on the survey, patients answered a separate question that asked for an overall rating of the hospital. Ratings were on a scale from 0 to 10, where "0" means "worst hospital possible" and "10" means "best hospital possible." Percentage of patients who gave a <b>rating of "9" or "10"</b> (high)</p>	67%	64%	73%	There were discrepancies in the data collection process.
<p>The survey asked patients whether they would <b>"definitely"</b> recommend the hospital to their friends and family.</p>	69%	67%	80%	There were discrepancies in the data collection process.

<sup>1</sup> Source: <http://www.hospitalcompare.hhs.gov>  
 Data reported from patients who had overnight hospital stays from April 2009 through March 2010  
 Data last updated December 11, 2010



## Quality Report Pneumonia

Indicator	Top US Hospital <sup>1,2</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1,3</sup>	Centra Southside <sup>1,3</sup>
Percent of Pneumonia Patients Assessed and Given Pneumococcal (Pneumonia) Vaccination	100%	94%	99%	89%
Percent of Pneumonia Patients Whose Initial Emergency Room <a href="#">Blood Culture</a> Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	100%	96%	95%	96%
Percent of Pneumonia Patients Given Smoking Cessation Advice/Counseling	100%	98%	99%	100%
Percent of Pneumonia Patients Given Initial Antibiotic(s) within 6 Hours After Arrival	100%	96%	95%	97%
Percent of Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	99%	93%	90%	89%
Percent of Pneumonia Patients Assessed and Given Influenza (Flu) Vaccination	100%	94%	95%	93%
<sup>4</sup> Estimated 30-day death (mortality) rates	*11.6%		11.0%	13.1%
	*This is the US National Rate		The LGH/VBH death rate for Pneumonia is not statistically different than the national rate.	The Southside death rate for Pneumonia is not statistically different than the national rate.

<sup>1</sup> Source: <http://www.hospitalcompare.hhs.gov>, data reported for discharges April 2009 to March 2010; data last updated December 11, 2010

<sup>2</sup> Top Hospital represents the top 10% of hospitals nationwide

<sup>3</sup> Data submitted for this measure was based on a sample of cases

<sup>4</sup> These percentages were calculated from Medicare data on patients discharged between July, 2006 and June, 2009; Data last updated December 11, 2010  
They don't include people in Medicare Advantage Plans or people who don't have Medicare



## Quality Report Skilled Care Facilities

Indicator	National Avg <sup>1</sup>	VA State Avg <sup>1</sup>	Fairmont Avg <sup>1</sup>	Guggenhiemer Avg <sup>1</sup>	Summit Avg <sup>1</sup>
Percentage of residents without falls <sup>2</sup>	84%	83%	89%	84%	86%
Percentage of residents without anti-psychotic medication use <sup>2</sup>	71%	76%	82%	76%	84%
Percentage of residents without without acquired physical restraints <sup>2</sup>	98%	99%	100%	100%	100%
Percentage of residents without unplanned weight loss/gain <sup>2</sup>	94%	94%	99%	100%	99%
Percentage of residents without acquired pressure ulcers <sup>2</sup>	97%	96%	96%	98%	98%

<sup>1</sup> Source: My Innerview Database, with over 5000 Nursing Homes Participating; Average Monthly Rate, Jan 2010 to Dec 2010



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## Quality Report Stroke

Indicator	JC PSC Hospital <sup>1</sup>	South Atlantic <sup>2</sup>	Centra LGH <sup>3</sup>
Percent of patients with an Ischemic stroke or a hemorrhagic stroke and who are non-ambulatory who received <a href="#">DVT prophylaxis</a> by end of hospital day two.	88%	89%	94%
Percent of patients with an ischemic stroke prescribed <a href="#">antithrombotic therapy</a> at discharge.	99%	99%	100%
Percent of patients with an ischemic stroke with atrial fibrillation discharged on <a href="#">anticoagulation therapy</a> .	96%	95%	100%
Percent of acute <a href="#">ischemic stroke</a> patients who arrive at the hospital w/in 120 minutes (2 hours) of time last known well and for whom IV t-PA was initiated at this hospital within 180 minutes (3 hours) of time last known well.	73%	69%	91%
Percent of patients with ischemic stroke who receive <a href="#">antithrombotic therapy</a> by the end of hospital day two.	97%	97%	98%



## Quality Report Stroke

Indicator	JC PSC Hospital <sup>1</sup>	South Atlantic <sup>2</sup>	Centra LGH <sup>3</sup>
<p>Percent of Ischemic stroke patients w/ LDL &gt; 100, or LDL not measured, or on cholesterol reducer prior to admission, who are discharged on cholesterol reducing drugs.</p>	93%	92%	91%
<p>Percent of patients with ischemic or hemorrhagic stroke who undergo screening for <a href="#">dysphagia</a> with a simple valid bedside testing protocol before being given any food, fluids, or medication by mouth.</p>	81%	80%	87%
<p>Percent of patients with ischemic or hemorrhagic stroke or their caregivers who were given education or educational materials during the hospital stay addressing ALL of the following: personal risk factors for stroke, warning signs for stroke, activation of emergency medical system, need for follow-up after discharge and medications prescribed.</p>	87%	88%	99%
<p>Percent of patients with ischemic or <a href="#">hemorrhagic stroke</a> with a history of smoking cigarettes, who are, or whose caregivers are, given smoking cessation advice or counseling during hospital stay.</p>	97%	97%	99%



## Quality Report Stroke

Indicator	JC PSC Hospital <sup>1</sup>	South Atlantic <sup>2</sup>	Centra LGH <sup>3</sup>
Percent of patients with an ischemic or hemorrhagic stroke who were assessed for rehabilitation services	98%	97%	100%

<sup>1</sup> Joint Commission Certified Primary Stroke Centers

<sup>2</sup> South Atlantic Region (VA,DC,MD,NC,SC,GA,FL)

<sup>3</sup> Centra Health, Jan 2010 - Dec 2010



## Quality Report Surgery, Heart<sup>1</sup>

Indicator	Centra LGH <sup>2</sup>	STS "Star" Rating <sup>3</sup>
Overall	98%	96%
Avoidance of Mortality	98%	98%
Avoidance of Morbidity including reoperations, renal failure, deep sternal wound, prolonged ventilation, and cerebral vascular accident.	88%	85%
Use of Internal Mammary Artery (IMA) for first time <a href="#">CABG</a>	98%	95%
Medications including Pre-operative <a href="#">Beta Blockade</a> , Discharge <a href="#">Beta Blockade</a> , Discharge <a href="#">Anti-Lipids</a> and Discharge <a href="#">Anti-Plateletes</a>	98%	77%

<sup>1</sup> Heart surgery includes Coronary Artery Bypass Graph (CABG)

<sup>2</sup> The Society of Thoracic Surgeons National Adult Cardiac Surgery Database. (Jul 2009 to Jun 2010)

<sup>3</sup> Approximately 10% of participating hospitals received the "3 star" rating.



## Quality Report Surgical Care

Indicator	Top US Hospital <sup>1,2</sup>	VA State Avg <sup>1</sup>	Centra LGH/VBH <sup>1</sup>	Centra Southside <sup>1</sup>
Percent of surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their surgery	100%	93%	100%	69%
Percent of Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision	100%	97%	99%	88%
Percent of Surgery Patients Who Received the Appropriate Preventative Antibiotic(s) for Their Surgery	100%	98%	99%	97%
Percent of Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery	100%	95%	99%	89%



## Quality Report Surgical Care

Percent of Cardiac Surgery Patients w/ Controlled 6 AM Postoperative Serum Glucose	99%	95%	99%	"0 patients" - No patients met the criteria for inclusion in the measure calculation.
Percent of Surgery Patients with Appropriate Hair Removal	100%	100%	99%	98%
Percent of Surgery Patients Whose Urinary Catheters were Removed on the First or Second Day After Surgery	100%	92%	94%	The number of cases is too small to be sure how well a hospital is performing.
Percent of Surgery Patients Whose Doctors Ordered Treatments to Prevent Blood Clots (Venous Thromboembolism) For Certain Types of Surgeries	100%	95%	98%	98%
Percent of Surgery Patients Who Received Treatment To Prevent Blood Clots Within 24 Hours Before or After Selected Surgeries to Prevent Blood Clots	100%	94%	96%	97%

<sup>1</sup> Source: <http://www.hospitalcompare.hhs.gov>; Data reported for discharges April 2009 through March 2010; Data last updated December 11, 2010



## **Quality Report Surgical Care**

<sup>2</sup> Top Hospitals represents the top 10% of hospitals nationwide

## Definitions

### ACC-NCDR® risk adjustment model

The ACC/National Cardiovascular Data Registry (ACC-NCDR) developed a risk-adjustment model for the adverse event of in-hospital PCI mortality. It analyzes 14 individual risk factors in the ACC-NCDR PCI mortality and estimates mortality for each class an approximated observed mortality for that class.

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### ACE Inhibitor or ARB

ACE (angiotensin converting enzyme) inhibitors and ARBs (angiotensin receptor blockers) are medicines used to treat patients with heart failure and are particularly beneficial in those patients with heart failure and decreased function of the left side of the heart. Early treatment with ACE inhibitors and ARBs in patients who have heart failure symptoms or decreased heart function after a heart attack can also reduce their risk of death from future heart attacks. ACE inhibitors and ARBs work by limiting the effects of a hormone that narrows blood vessels, and may thus lower blood pressure and reduce the work the heart has to perform. Since the ways in which these two kinds of drugs work are different, your doctor will decide which drug is most appropriate for you.

### Angiography

Angiography is a diagnostic test in which dye is injected and an image created to visualize the inner opening of blood filled structures, including arteries, veins and the heart chambers.

### Anticoagulation Therapy

An anticoagulation is a substance that prevents coagulation. It is often prescribed for stroke patients with atrial fibrillation (AF or afib), a cardiac arrhythmia (abnormal heart rhythm) that involves the two upper chambers (atria) of the heart.

### Anti-Lipid Medication

Anti-Lipid Medications is a cholesterol-lowering drug that blocks the production of cholesterol (a type of fat) in the body.

### Anti-Platelet Medication

Anti platelet medicines are used to prevent heart attack, stroke, and other serious vascular events in high vascular risk patients.

### Anti-thrombotic Therapy

Treatment designed to reduce or eliminate blood clots, causing a vascular occlusion

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### Asthma Relievers

Asthma relievers are used to gain control of acute asthma exacerbation and reduce severity as quickly as possible.

### Beta Blocker or Beta Blockade

Beta blockers are a type of medicine that is used to lower blood pressure, treat chest pain (angina) and heart failure, and to help prevent a heart attack. Beta blockers relieve the stress on your heart by slowing the heart rate and reducing the force with which your heart muscles contract to pump blood. They also help keep blood vessels from constricting in your heart, brain, and body.

### Blood Culture

A blood culture is a test that can determine the type of bacteria that may have caused an illness, and which antibiotic should be prescribed.

### Cardiac catheterization (cardiac cath)

A cardiac cath or angiogram is a procedure that identifies possible problems with your heart or its arteries.

### Coronary Artery Bypass Graph (CABG)

A procedure that attaches a vein from a leg or an artery from an arm or chest to a blocked artery, bypassing a blockage, and allowing blood to flow freely to the heart.

### Dysphagia

Dysphagia is the medical term for the symptom of difficulty in swallowing.

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### DVT Prophylaxis

Deep venous thrombosis is a condition in which a blood clot (thrombus) forms in a vein. This clot can limit blood flow, causing swelling, redness and pain. Most commonly, clots occur in the legs, thighs, or pelvis. A number of factors can increase a patient's risk of developing blood clots, but doctors can order preventive treatments called prophylaxis to reduce the risk. Prophylaxis may include blood thinning medications, elastic support stockings, or mechanical air stockings that promote circulation in the legs.

### **Hemorrhagic Stroke**

A Hemorrhagic Stroke is caused by bleeding in the brain. The drug, tPA, should not be used in the event of a hemorrhagic stroke.

### **Ischemic Stroke**

An Ischemic Stroke is caused by a restriction in blood supply, generally due to factors in the blood vessels, with resultant damage or dysfunction of tissue. To be effective, tPA, a drug used to break up clots, must be administered intravenously within the first three hours of the stroke.

### **Left Ventricular Systolic Function**

An important test is to check how your heart is pumping, called an "evaluation of the left ventricular systolic function." It can determine if the left side of your heart is pumping properly.

### **Percutaneous Coronary Interventions (PCI)**

Percutaneous Coronary Interventions (PCI) are procedures that are among the most effective ways to open blocked blood vessels and help prevent further heart muscle damage. A PCI is performed by a doctor to open the blockage and increase blood flow in blocked blood vessels. Improving blood flow to your heart as quickly as possible lessens the damage to your heart muscle. It also can increase your chances of surviving a heart attack.

### **PostOperative Normothermia**

Normothermia is a body temperature of greater than or equal to 96.8° F within the first fifteen minutes after leaving the operating room.

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### **Post-stenosis less ≤ 20%**

After the procedure, the stenosis or narrowing, which restricts blood flow, should be reduced to 20% or less.

### **Pressure Ulcers**

Pressure ulcers are commonly known as bedsores or lesions caused by unrelieved pressure to any part of the body.

### **Stent**

A stent is a small, self-expanding, stainless steel mesh tube that is placed within a coronary artery to keep the vessel open.

**Stenosis**

A narrowing which restricts blood flow

**Systemic Corticosteroids**

Systemic corticosteroids are used to gain control of acute asthma exacerbation and reduce severity as quickly as possible in children with mild, moderate and severe persistent asthma.

**Thienopyridine**

Thienopyridine derivatives (ticlopidine, clopidogrel) are medicines used to prevent stroke and other serious vascular events in high vascular risk patients.

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