

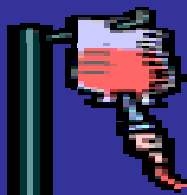


NetCAP E-Newsletter

<< Apr-Jun 2008 >>

Summer Edition

“Network – A group engaged as a supportive system of sharing information and services.”



In this Issue -

- **New York State Adult Cardiac Surgery Outcome**

New York State Adult Cardiac Surgery Outcome 2003 - 2005

In April this year, New York State's Department of Health released its outcome report on adult cardiac surgery. Only a few states monitor outcome for hospitals and cardiac surgeons, so the New York report is always eye-opening. For those not familiar with the NYDOH, it is one of the largest state health bureaucracies, regulating every detail of health care delivery. The report is generated by hospitals sharing information with the Cardiac Advisory Committee (CAC) via the New York State Cardiac Surgery Reporting System; they gather information on each patient's demographic and clinical characteristics, the procedure performed, and the outcomes. Data collection and analyses are conducted under the guidance of the CAC, comprised of nationally prominent cardiologists, cardiac surgeons and other medical specialists. Notably, risk management adjustment, the hallmark of outcomes analyses, modulates the data by figuring several comorbidities into the analysis. The report is quite detailed in that data for cardiac surgeons who work at several hospitals are also pooled and reported in Table 6. For a copy of the report and other data, go to: <http://www.health.state.ny.us/statistics/diseases/cardiovascular/>.

**ADULT
CARDIAC
SURGERY**
in
New York State
2003 – 2005

Richard Daines, MD, the State Health Commissioner stated that “cardiac patients and their families continue to reap the benefits”, although this is debatable. While institutional reporting might be helpful to the consumer, individual data on surgeons can be misleading to lay persons not familiar with statistics. That being said, the report highlights are;

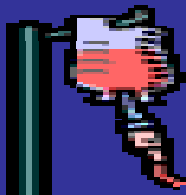
- The 2005 in-hospital mortality rate for cardiac bypass surgery – at 1.56 percent – is the lowest since reporting began in 1989 and slightly down from 1.61 percent in 2004.
- The 2005 combined in-hospital/30-day mortality rate of 2.07 percent for cardiac bypass surgery decreased slightly from the 2004 rate of 2.09 percent.
- The 2003-2005 in-hospital mortality rate for valve and combined valve and bypass surgeries was 5.59 percent, down from 6.04 percent for 2002-2004. The combined in-hospital/30-day mortality rate was 6.26 percent for these procedures in 2003-2005.
- In 2005, there were 12,146 cardiac bypass surgeries performed in New York State compared to a high of 20,220 performed in 1997. Cardiac bypass surgeries have decreased because many patients are now

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• Network of Cardiac Anesthesia Professionals

• An e-information network for professionals involved in cardiac anesthesia

• NetCAP is sponsored by NCAC, PA



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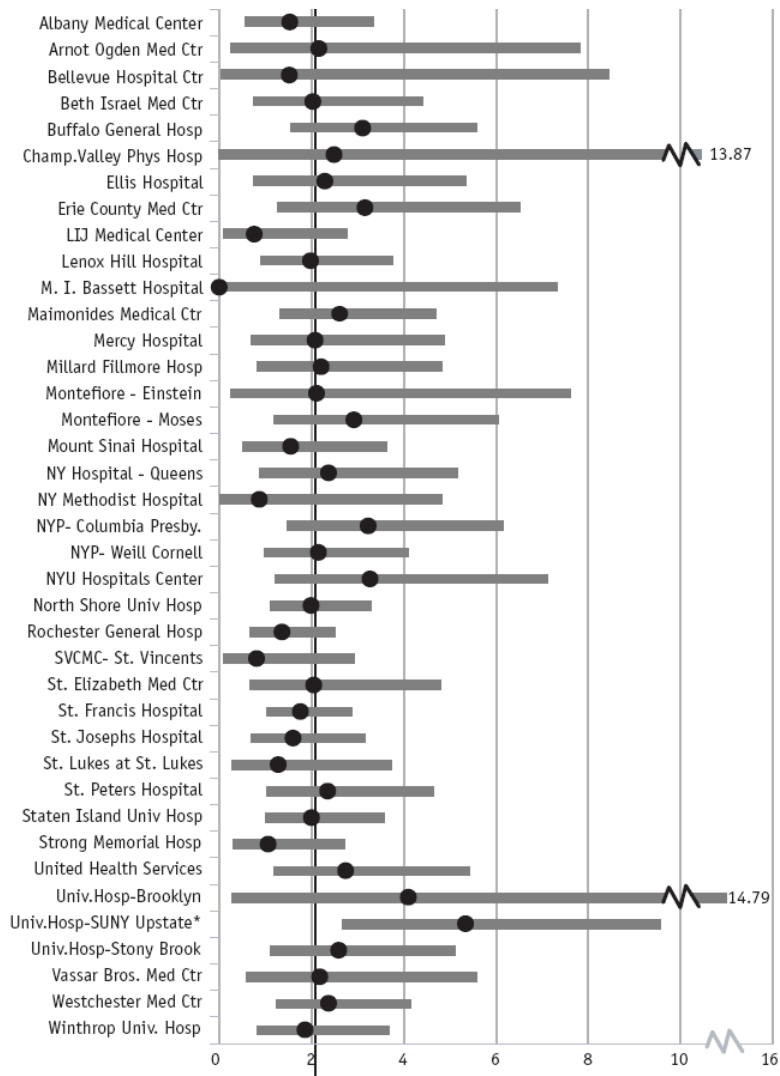
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undergoing percutaneous coronary interventions (PCI).

- For 2003-2005, there were 20,627 valve and combined valve/bypass surgeries performed, slightly above the 20,309 performed for 2002-2004.

Below is a sample from the report; 30-day risk adjusted mortality rate (RAMR) for isolated CABG surgery for 2005 (the central dot is the RAMR, the bar represents the "potential margin of statistical error").



And ...

This Newsletter contains information, views and judgments expressed exclusively by Paul G. Loubser, M.D. Since judgments are subjective in nature, they should be interpreted with some caution.



Every effort will be made to be conscientious about reporting accurate and reliable information. Feedback is welcome on any subject matter. The newsletter is also posted on our website.