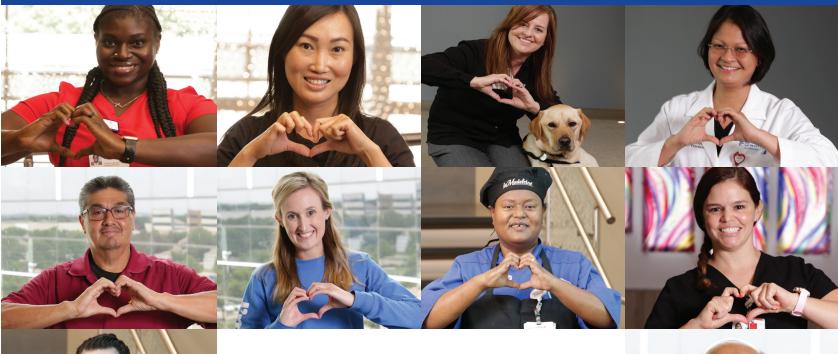


2021 OUTCOMES BOOK





FULFILLING OUR DUTY TO SERVE...







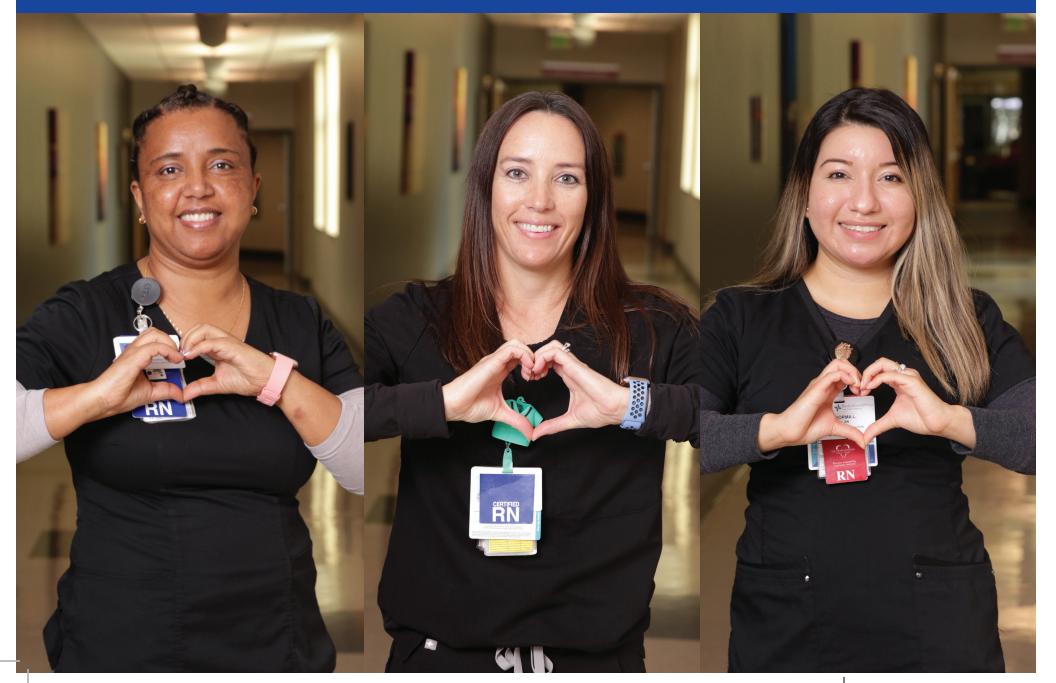


DENTON • MCKINNEY • PLANO

Joint ownership with physicians



...WITH HEART



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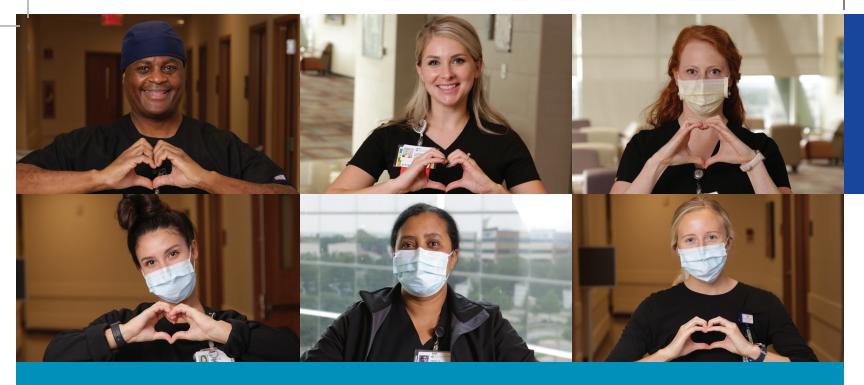
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WELCOME LETTER

The purpose of this book is to provide insight into some of the unexpected tasks that Covid-19 brought, as well as to provide a transparent look into the cardiovascular care provided by The Heart Hospital teams during the pandemic. Cardiovascular disease did not take a holiday during the pandemic and **our care providers were required to manage both with safety and compassion.** Open heart surgery is heavily scrutinized, and rightly so. But as you will see, The Heart Hospital performed the highest volume of open heart surgeries in North Texas. Many of these patients were predicted to be at high risk, but in fact the mortality rate was much lower than the national average. We report our outcomes based on the January 2020 to December 2020 time frame to allow the reader to follow our progress as medical care has moved in the direction of normal. We are proud and grateful for the dedication to the principles of excellence and humanity exhibited by the BSWH Care Teams during this difficult and unique time.

Mark a. Valetin



Mark A. Valentine

President

Baylor Scott & White The Heart Hospital - Denton

Baylor Scott & White The Heart Hospital - McKinney

Baylor Scott & White The Heart Hospital - Plano

Mulfalow w



David L. Brown, MD

President of Medical Staff Affairs

Baylor Scott & White The Heart Hospital - Denton

Baylor Scott & White The Heart Hospital - McKinney

Baylor Scott & White The Heart Hospital - Plano

ABOUT COVID-19

The pivot was instantaneous. The Heart Hospitals in Plano and Denton immediately began providing complex hospital care needed by critically ill patients within our community to combat the pandemic. As Covid-19 progressed, eventually hundreds of patients needed hospitalization systemwide, including 46 critically ill patients on Extra-Corporal Membrane Oxygenators (ECMO) to have any chance of survival. Miraculously, 28 of these desperately ill patients survived their respiratory failure.



They and we are thankful for the collaboration of the multi-disciplinary team, including all staff on 6 CUB where these guests were cared for, Respiratory Therapy (RT), Occupational Therapy (OT), Speech Therapy (ST) and those who made up the entire Heart Hospital team that supported this mission, giving their dedication and energy to save these patients in such dire need.

The fight continues.

NEVER GIVE UP



"I'm a living testament that miracles do happen." Joe Bohling



"Joe was on ECMO for 94 days...a record," says his wife Tammy. "Oh, my gosh. The staff, the team, they were so supportive emotionally. When I was not there, they really helped Joe through it all mentally, emotionally; they kept him motivated."

"Because they knew how important it was to get him up and doing physical therapy as quickly as possible."

"I can't say enough about the team of doctors, nurses, therapists, the whole staff at The Heart Hospital," says Tammy.

January 2021

The entire Bohling family came down with Covid the weekend of January 23rd," Tammy says. "Everybody was fine until that Saturday. Then Joe got up and didn't feel well. His temperature was 104 and we soon found out his oxygen was in the 80s."

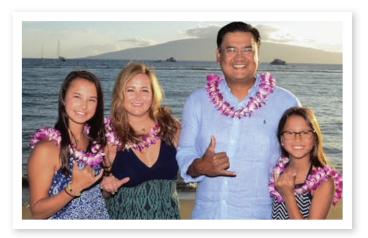
Joe was rushed to a local ER. Tammy admits they never imagined it would be six months before he'd be home again. It was at the other hospital— "a very scary time" says Tammy—when Joe was put on a ventilator. "We read everything. We knew the outcome might not be good."

"A specialist had worked with the doctors of the hospital where Joe was and together with them decided Joe should come to The Heart Hospital for ECMO." He told Tammy he believed it was Joe's best shot.

Joe adds, "What I think is it's their methodology. I call it multi-dimensional. **They truly find a balance between physical, mental, emotional, spiritual,** and then how those dimensions react to us...well, me but also my family. Quite frankly, amazing."

It worked. July 15, 2021, Joe Bohling went home. Physical therapy is the future. Healing. Gaining strength.

"It has made what was the most horrible experience of my life really into an opportunity to grow...from a spiritual standpoint in terms of my walk with God and building my faith and then coupled with that faith was the strengthening of my relationships with my wife and family and what's really important in life."



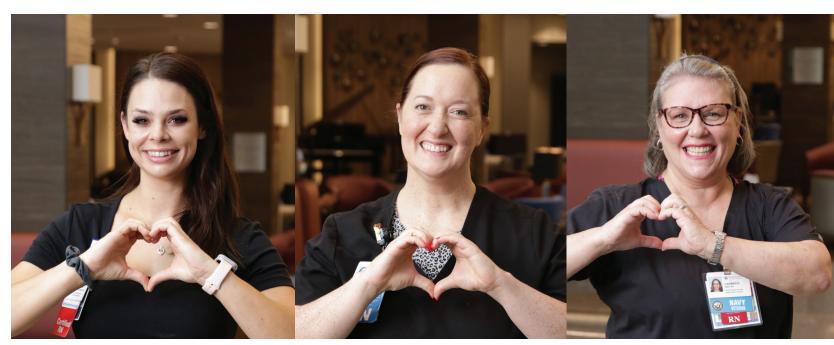




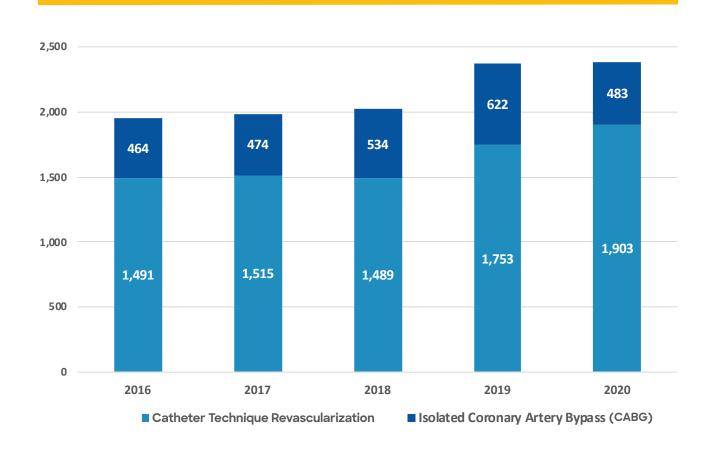
"I'm thankful and blessed to be alive."

CORONARY ARTERY DISEASE

During the Covid-19 shutdown, we acted only on urgent and emergent cases, setting up a workflow to allow a core group of physicians to handle these cases. This was done for uniform patient care. As one could imagine, the logistics and rules changed frequently. Today, we continue to monitor patient flow with the addition of Covid-19 testing prior to all procedures and more frequent discussions about proper care of patients. Volumes were low but all indications are we will be back to previous volume soon.



REVASCULARIZATION VOLUMES

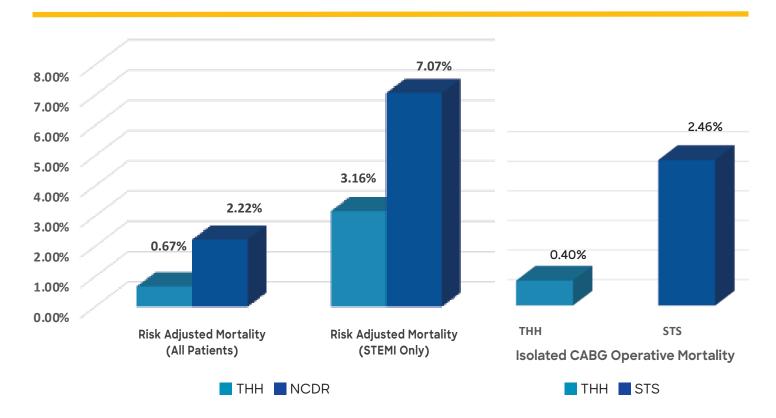


"We improved our PCI quality by forming a team that is available 24/7 for second opinions and discussion concerning high-risk cases."

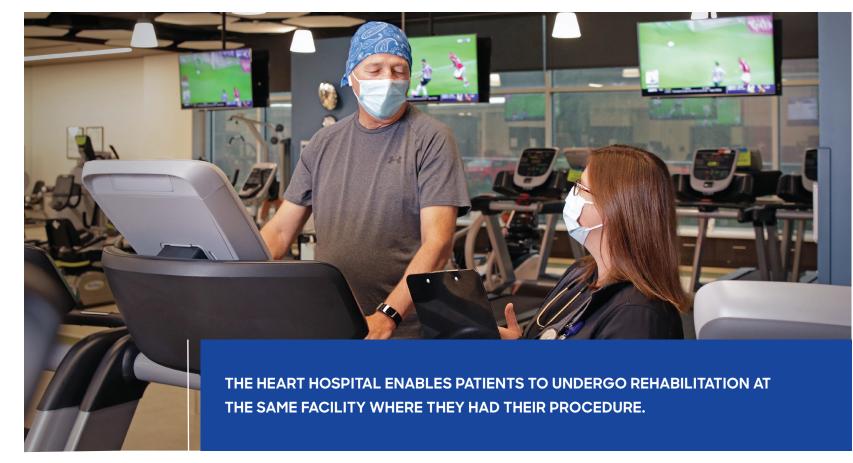
Srinivasa P . Potluri, M.D.Medical Director, Invasive Cardiology



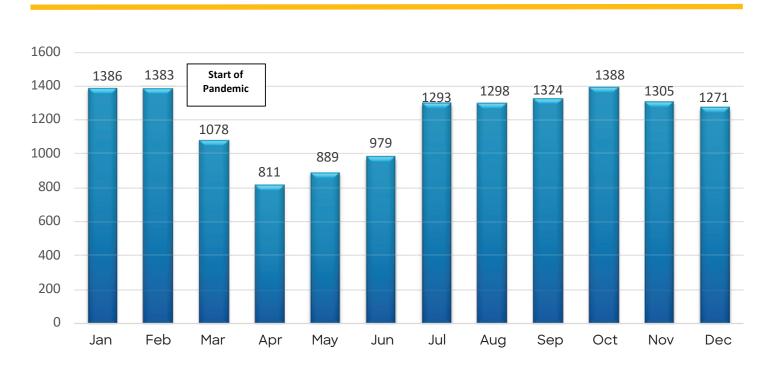
2020 PUBLISHED REPORT / PLANO



SAFETY OF CATHETER-BASED AND OPEN PROCEDURES FOR CORONARY ARTERY DISEASE IS BETTER THAN THE NATIONAL AVERAGES.



CARDIAC REHAB PHASE 2 VISITS / JAN-DEC 2020

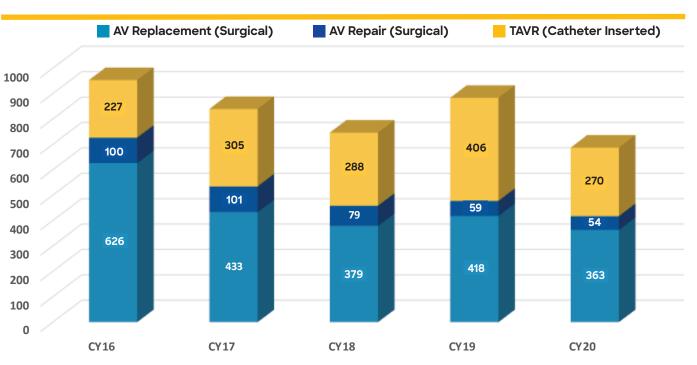


VALVE & STRUCTURAL HEART DISEASE

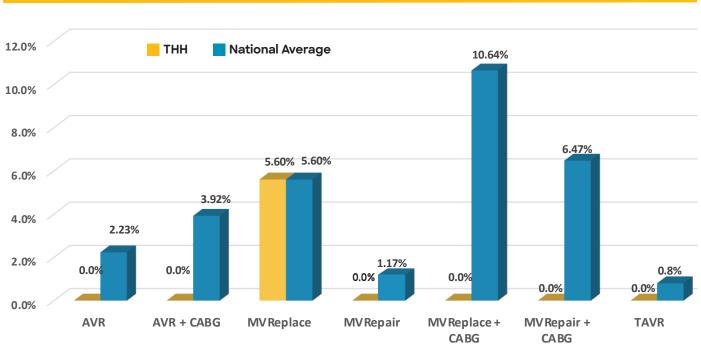
Both open heart surgery and catheter-based interventional procedures are used to replace or repair heart valves. The surgeons and interventional cardiologists on our medical staff are experienced with both strategies and work together to choose the best technique for each patient. Because we have experience with all procedures and perform them well, the highest levels of quality and safety have been achieved. We have been recognized by the Society of Thoracic Surgeons with a three star rating in Aortic Valve Replacement and Aortic Valve Replacement combined with bypass grafting. Fewer than 5% of hospitals in America achieve this rating.



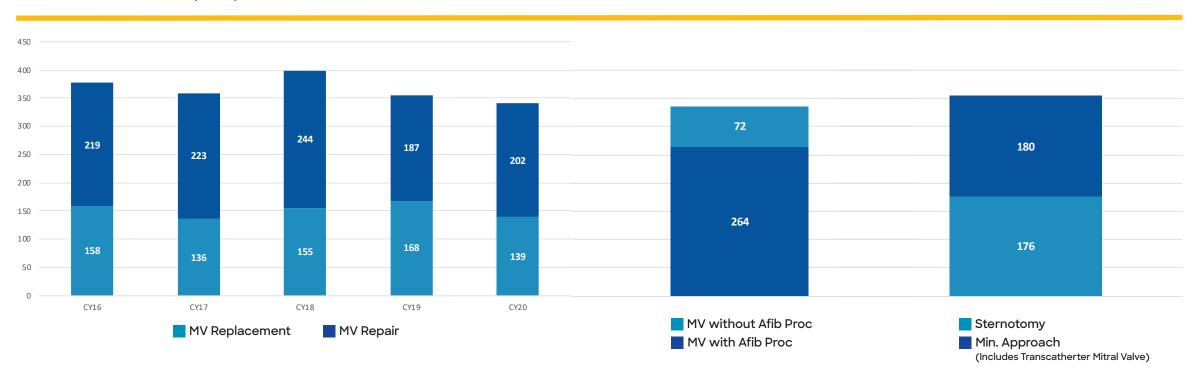
AORTIC VALVE (AV) VOLUMES / PLANO



VALVE MORTALITY / PLANO



MITRAL VALVES (MV) CY2020 / PLANO



OUR SURGEONS ARE FOCUSED ON REPAIRING THE MITRAL VALVE BOTH BY OPEN PROCEDURES AND TRANSCATHETER PROCEDURES WHENEVER POSSIBLE. THIS ACHIEVES CONTINUOUS SUCCESS.

"Our team simply continued to forge ahead following the most recent Covid-19 protocols, thus providing the quality care for our patients despite dire circumstances."

Bruce Lytle, MD

Chairman of Cardiovascular Strategic Development and Planning for Cardiovascular Medicine and Surgery



THORACIC AORTIC DISEASE

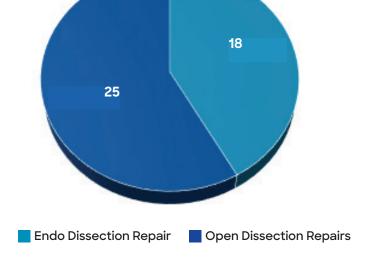
Elective aortic surgeries are extremely safe. However, when an aortic catastrophe does occur, such as an aortic dissection, the risk increases. At The Heart Hospitals, **our safety record shows better than the national average** for mortalities regardless of whether the aortic surgery is elective or emergent. In short, with aortic surgery, experience counts.



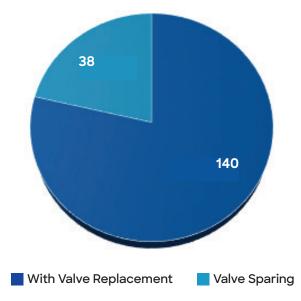
"Whether it's elective valve sparing aortic root surgery or urgent aortic dissection cases, our team is available 24/7 to deliver innovative care."

William T. Brinkman, MDMedical Director, Thoracic Aortic Surgery

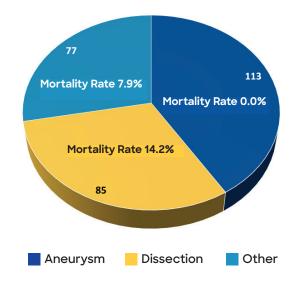
OPEN VS ENDOVASCULAR REPAIR



AORTIC SURGICAL PROCEDURES / VALVE OR VALVE SPARING



2020 AORTIC VOLUMES AND MORTALITIES



LEADING THE WAY IN LVAD

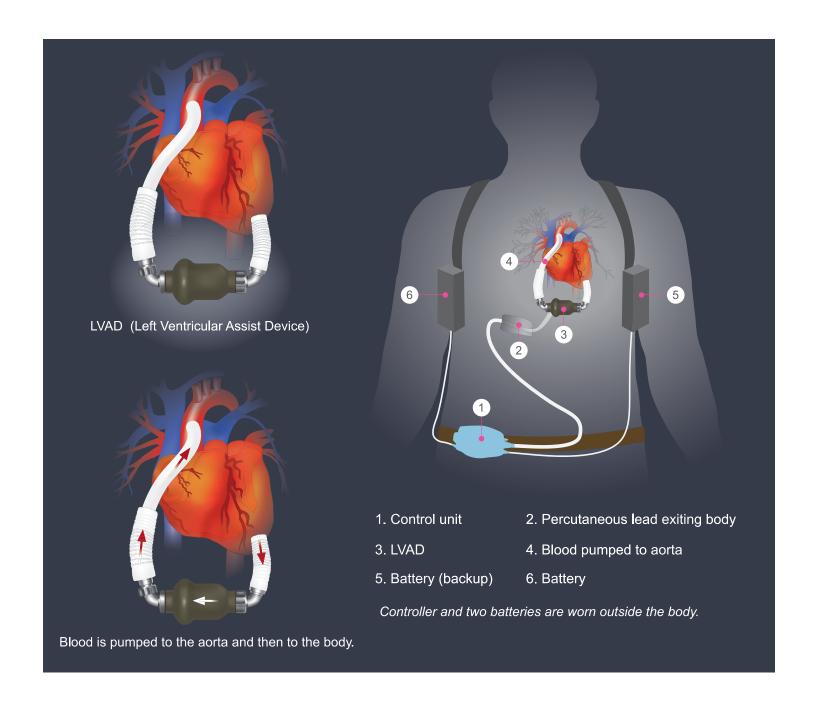
From 2010 - 2018, Baylor Scott & White The Heart Hospital-Plano implanted 31 LVAD devices. In two years, 2019 and 2020, The Heart Hospital implanted 45 devices. With our continued strong commitment, The Heart Hospital believes we will see additional strong growth in the future.

In two years, we have made strides toward becoming one of the largest destination therapy LVAD centers in the country.

We continue to improve outcomes, particularly decreasing length of stay by developing systems for earlier referrals.

We remain an active thought leader in mechanical circulatory support.

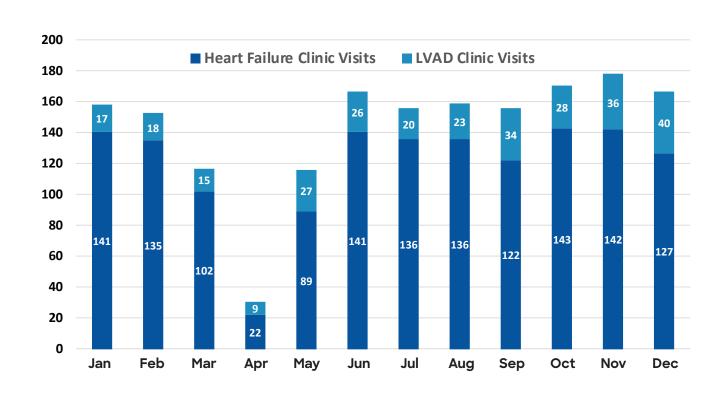
SEVERAL YEARS AGO, WE MADE A CONSCIOUS DECISION TO REINVIGORATE AND GROW OUR LVAD PROGRAM. ALTHOUGH THE HEART HOSPITAL HAS ALWAYS MAINTAINED A PROGRAM, WE RECOGNIZED THE HISTORIC VOLUME WAS INADEQUATE TO PRODUCE THE EXCELLENT OUTCOMES FOR WHICH THE HOSPITAL IS SO WELL KNOWN.



SEVERE CARDIO HEART FAILURE

We ranked as the sixth largest Destination Therapy LVAD Center in the country in 2020 with our strong programs growth. We currently rank as the second largest Destination Therapy LVAD Center in the country (2021). This increase in volume has allowed us to achieve reproducibly excellent outcomes, participate in major research trials, and most importantly, provide exceptional care to patients throughout North Texas.

ADVANCED HEART FAILURE CLINIC VISITS / PLANO 2020



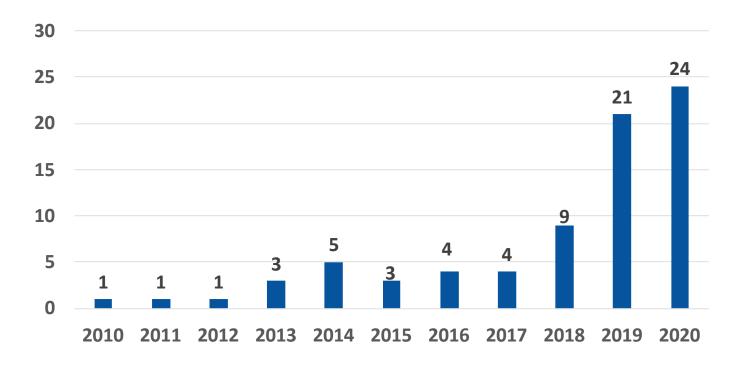
20

"End stage heart failure remains an under-treated problem. We plan to grow our program in order to meet this need."

Timothy George, MD

Medical Director, Mechanical Circulatory System

LVAD GROWTH / PLANO



We continue to grow the mechanical circulatory support service line by increasing LVAD volume, expanding our cardiogenic shock program, and growing our heart failure footprint throughout Texas and beyond.



A life saved. A career started. A ring created.

Merinda Mulhollen had about a year left in nursing school. Up until that time, she had always thought she would be a labor and delivery nurse. Then her dad got sick. "He's as tough as they come," says Merinda. "Just not the greatest or easiest patient."

But a patient he was at Baylor Scott & White The Heart Hospital. That's when Merinda's new dream began to take shape. She tells us, "I'm over at the heart hospital watching my dad go through his cardiac diagnosis. He's about to receive a pacemaker along with a defibrillator. Right there, I fell in love with the field. And then I fell in love with this hospital."

Confirmation came when "not the easiest patient" who had coded twice, been through a major operation and was headed toward a rather long recovery awakened with his first words being, "you gotta work here." He was so enthralled with The Heart Hospital, he designed his own Baylor Heart Ring, a tribute to his wife's steadfast determination to see him through this crisis as well as to commemorate Baylor Scott & White The Heart Hospital.



The Heart Hospital Ring

Today, Merinda is one of two LVAD Coordinators here and in charge of an ever-changing roster of guests. And to say she knows it top to bottom is an understatement since she was even a patient once, having had an ablation performed a few years back.

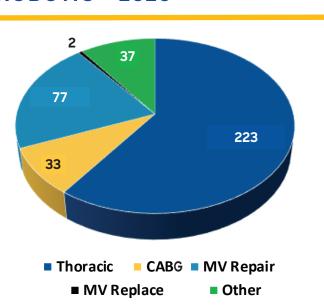
As Merinda says, "I absolutely love it here. Back before I worked here, I would say the nurses here were different, but different in the best way."

THEY STILL ARE.

ROBOTICS

Efficacy and efficiency are why robotics continues to set the standard for surgical procedures. It's simply a fact that using robotics creates smaller incisions, leading to less blood loss, which ultimately means a shorter hospital stay for our patients. With 2020 being no different, the surgeons on the medical staff here at **Baylor Scott & White The Heart Hospital continue to excel** at these procedures.

ROBOTIC - 2020



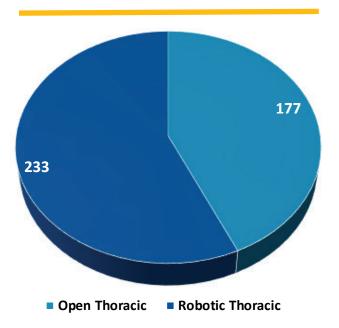
THORACIC

The worldwide pandemic meant we had to adapt yet get back to business as normal as quickly as possible. Which we did. What we have seen is continued development of the Robotics program with esophageal and foregut cases.

Our thoracic Robotics cases increased about 25%. We're about to launch into a new arena—a robotic platform for bronchoscopy; it's a new platform, not being used many places, to diagnose and treat pulmonary nodules.

We've continued to expand our national exposure and finally we're about to celebrate our 10th anniversary for the Robotics program.

VOLUME BREAKDOWN THORACIC SURGERY



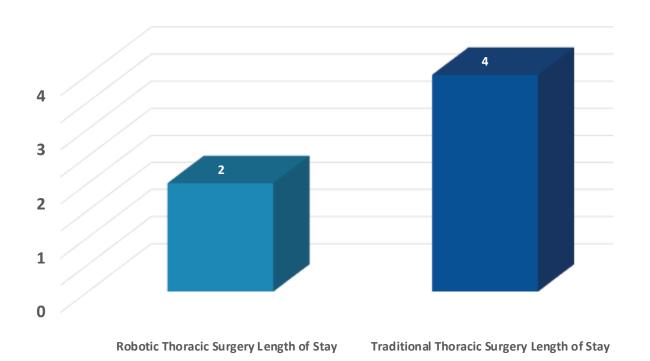
"It's been a mutually beneficial experience for us to have people come and train because we can help them develop a program and provide a service that's really needed elsewhere, but the more complex cases will come back to us."

G. Kimble Jett, MD

Medical Director, Thoracic Surgery



MEDIAN LENGTH OF STAY THORACIC (DAYS)



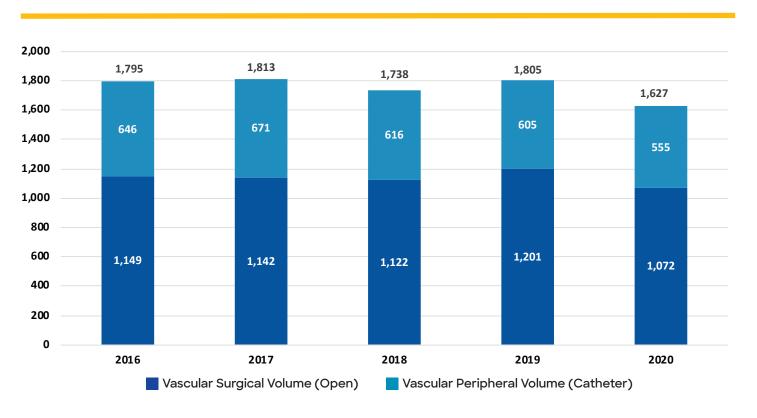
VASCULAR DISEASE

Amid the challenges of Covid-19, we maintained a fairly normal volume of patients. What's more, for most vascular procedures, no mortality occurred. We are still the only center in the region with a formal program like it. As you can imagine, we are constantly taking transfers from other hospitals. Even more gratifying is that **our work is being recognized nationally** as we are one of only two centers in the U.S. to be awarded with the Vascular Verification Program, an honor bestowed by The Society of Vascular Surgery and American College of Surgeons.





VASCULAR VOLUMES / PLANO



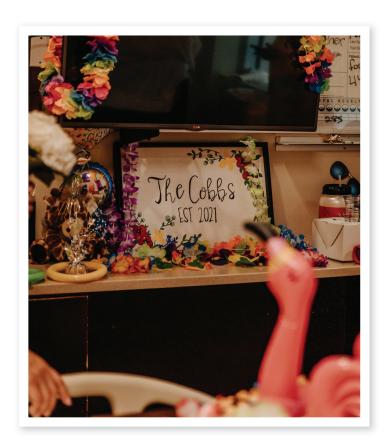
ZERO MORTALITY IN THESE VASCULAR PROCEDURES / PLANO

0.0% 0.0% 0.0% 0.0%

Carotid Stents Carotid Endarterectomy Non-Urgent Endo AAA Open AAA (including urgent)

PULMONARY EMBOLISM RESPONSE TEAM (PERT). THIS IS A MULTI-DISCIPLINARY GROUP (INTENSIVISTS, CARDIOLOGISTS, VASCULAR AND CARDIAC SURGEONS) THAT GIVES US THE CAPABILITY OF NOT ONLY ASSESSING PATIENTS BUT OF TREATING THEM IMMEDIATELY AS WELL.

"They redecorated the entire room like it's a tropical island. There's plastic grass hanging down. There are balloons. It's like a Hawaiian-themed room. It's just incredible."



Reggie Cobb

Reggie Cobb and his fiancée, Sally, were to be married the first week of June. The ceremony was going to be on the rooftop of El Fenix restaurant, then off to Hawaii for a honeymoon. Friends and family were committed. It was a go.

A few weeks before the big day, Reggie and Sally enjoy a Saturday of shopping. They get home. They go to sleep. Then.

"Next thing I know, I wake up and there's paramedics in my room," says Reggie. Sally adds, "you were writhing in your sleep. Foam coming out of your mouth."

They head to the ER. Even though there was one closer, Reggie says, "probably the best decision I've ever made, we decide to go to The Heart Hospital." A battery of tests ensues. What was once a heart condition that should be monitored was now a here's the situation, here's what we can and should do and it needs to happen, well, immediately.

"Can I still go to Hawaii and get married?" Reggie asked. A prompt "no" followed.

Instead, two days before he was to be wed, Reggie was getting prepped for bypass surgery. It was during this prep time that Reggie also began to know the The Heart Hospital team. "We'd talk about music, Al Green, how I was supposed to be getting married. Everything. But they were all, well they just made you feel like family."

So, when a 45-minute window opened up in the almost always-full schedule of The Heart Hospital chapel, Reggie and Sally grabbed it, inviting as many friends and family as possible. Although wheeled down to the chapel, Reggie emphasizes, "I stood for all of it, had a jacket on over my gown. Fluids going into my system. But I stood up."

"You know your wedding day is emotional anyway. I'm sure there are plenty of photos of me crying. We come back up on the third floor and all the staff, everyone, row after row, like I'd just come back from a war zone and they're all standing and clapping. I turn the corner and there are more. I get to the room and I'm a puddle. Just a puddle."

Reggie is currently a very happy husband, continuing his rehab.







"Probably the best decision I've ever made, we decide to go to The Heart Hospital."

HEART RHYTHM DISEASE

Trials and investigative studies continued apace of previous years, even showing growth in this admittedly disruptive time. As always, with **patient-centric care as our ultimate guide**, we pressed on, diligently making progress whether the treatment required specialized medicines, implanted devices, catheter-based procedures—or in some cases a combination of one or more. Perhaps most gratifying, though, is the reputation we have garnered that **makes us a sought-after resource** in heart rhythm disorders.

"If there is one word that captured the rapid growth of our excellence in electrophysiology, it's simply collaboration."

Brian DeVille, MD

Co-Medical Director, Electrophysiology



ELECTROPHYSIOLOGY

Quality and safety have always been the watchwords within the Electrophysiology Laboratory here at The Heart Hospital. Every member of our team strives to uphold **high standards** by closely monitoring safety metrics, especially in this time of Covid-19. Even during this disruption, we perform our daily reviews of case outcomes with an active electrophysiology physician, allied health professional, and administrative team; meeting regularly **to ensure our standards are maintained as always.**

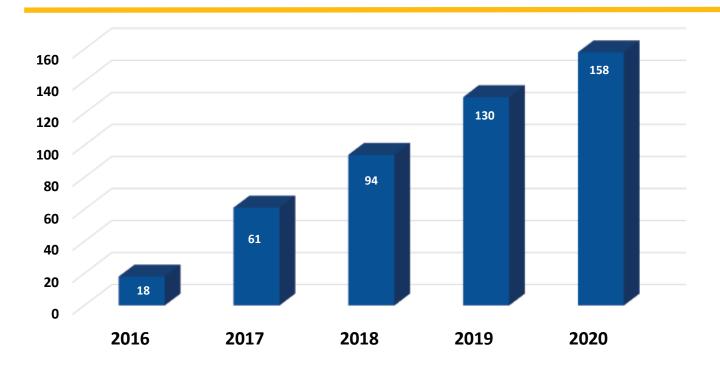
TOTAL ELECTROPHYSIOLOGY VOLUME / PLANO



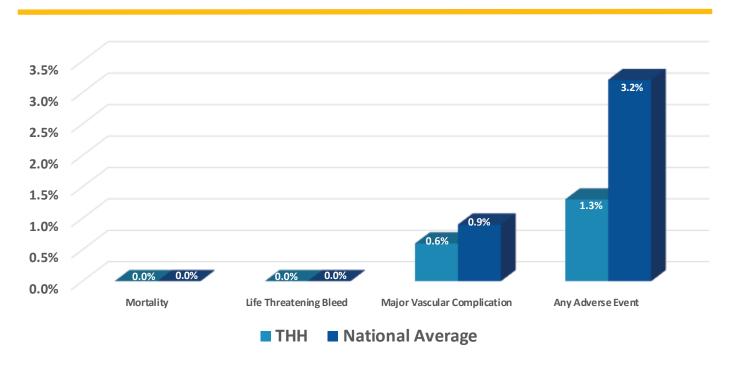
ELECTROPHYSIOLOGY



LEFT ATRIAL APPENDAGE OCCLUSION (LAAO) VOLUMES / PLANO



LAAO OUTCOMES / PLANO



"The most up-to-date mapping systems, patient protection devices, ultrasound imaging, catheter ablation tools, and CIED devices are available for our physicians on our medical staff to use for the benefit of our patients."

Adam R. Shapira, MD Medical Director, Electrophysiology

LOCATIONS

A world-renowned reputation for quality heart and vascular care, awardwinning patient care and a relentless pursuit to expand cardiovascular knowledge to a new generation. One vision. Three locations. We are Baylor Scott & White The Heart Hospital - Plano, Denton and McKinney.

PLANO

Where we began. Where we continue to grow. Baylor Scott & White The Heart Hospital - Plano has and continues to set the standard for cardiovascular care. What's more, we constantly strive to exceed that standard-in Plano, in Denton and in our latest location in McKinney. A staff of thousands works tirelessly each and every day so that each of our hospitals is renowned for being a go-to center for cardiovascular needs. Our hospitals offer an ever-expanding roster of new treatments and procedures—among the many key reasons why we are ranked by U.S. News & World Report as the 27th Best in America in Cardiology & Heart Surgery.



*Combined Category

3 Stars is the Highest Star Rating awarded by The Society of Thoracic Surgeons (STS)



OVERVIEW / CY2020

EXPERTISE IN ALL CARDIOVASCULAR PROCEDURES - PLANO

PROCEDURALLY AND MEDICALLY MANAGED 43,577

29,951 Patient Visits

5.060 Admissions

105 **Beds**

3,425 - Surgical Procedures

Open Heart Procedures - 1,648 Thoracic - 410 Open Vascular - 1,072 Other - 295

7,753 – Cardiovascular Procedures

Interventional and Non-Interventional - 5,031 Coronary Diagnostic - 2,584 Coronary Interventional - 1,507 Peripheral Diagnostic - 209 Peripheral Interventional - 543 Structural Heart - 154 Other - 34

Electrophysiology Procedures - 2,722 EP Diagnostic - 125 EP Interventional - 1,062 Pacemaker - 699 Implantable Cardioverter Defibrillator - 406 Other - 430



DENTON

While the North Texas region continues to grow exponentially (even amid a global pandemic), Baylor Scott & White The Heart Hospital - Denton expands its medical expertise and cardiovascular services as well—in patients treated and procedures completed.



3 Stars is the Highest Star Rating awarded by The Society of Thoracic Surgeons (STS)



OVERVIEW / CY2020

EXPERTISE IN ALL CARDIOVASCULAR PROCEDURES - DENTON

PROCEDURALLY AND MEDICALLY MANAGED

8,882

3,060
Patient
Visits

703Admissions

22 Beds

406 – Surgical Procedures

Open Heart Procedures – 304 Thoracic – 26 Open Vascular – 47 Other – 29

1,571 – Cardiovascular Procedures

Interventional and
Non-Interventional – 979
Coronary Diagnostic - 545
Coronary Interventional - 337
Peripheral Diagnostic - 26
Peripheral Interventional - 49
Other - 22

Electrophysiology
Procedures – 592
EP Diagnostic - 16
EP Interventional - 306
Pacemaker - 155
Implantable Cardioverter
Defibrillator - 57
Other - 58





MCKINNEY

Baylor Scott & White The Heart Hospital - McKinney is certainly proud to have become an even larger part of the McKinney community. As North Texas continues to grow, we do as well-providing services ranging from prevention to innovative treatments and technology. Supported by a health care system whose reputation for excellence is unparalleled. The simple fact is, when it comes to advanced, personalized cardiovascular care, when you're with us, your heart is in the right place.

OVERVIEW / CY2020

EXPERTISE IN ALL CARDIOVASCULAR PROCEDURES - MCKINNEY

PROCEDURALLY AND MEDICALLY MANAGED

7,973

905 Patient Visits

414 Admissions

4 Beds

Cardiovascular Procedures

Interventional and Non-Interventional – 1,460

Coronary Diagnostic - 1,028 Coronary Interventional - 403 Peripheral Diagnostic - 2 Peripheral Interventional - 12 Other - 15 Electrophysiology Procedures – 529

EP Diagnostic - 9
EP Interventional - 126
Pacemaker - 225
Implantable Cardioverte

Implantable Cardioverter Defibrillator - 111 Other - 58



FELLOWSHIP TRAINING PROGRAM

As you might expect, we at The Heart Hospital have fellowship programs in all aspects of cardiology. Ours are extremely successful in the fact that not only do we have a General Cardiology Fellowship, but we also have matched Interventional Cardiology as well as Advanced Cardiac Imaging and EP to go along with the structural valve program. These new fellowships have been introduced within the last three years, which is almost unheard of because we had them come and do a site visit two years early, so we could indeed add them. Finally, we have installed new Cardiovascular, Thoracic and Vascular Programs with fellows here at The Heart Hospital.

"Even through the disruptions that Covid-19 has caused, our fellows have presented at all the major cardiology programs."

Molly A. Szerlip, MDFellowship Program Director



NURSING

During one of the most impactful large-scale public health challenges ever, a team of health care professionals stepped up to the task admirably and yes, courageously. The efforts of our nurses throughout this historic pandemic have been nothing short of remarkable. It appears others have noticed as well since The Heart Hospital received the distinction of being in the Top 1% of 100 Safe Care Hospitals of 2021.



We applaud our team.

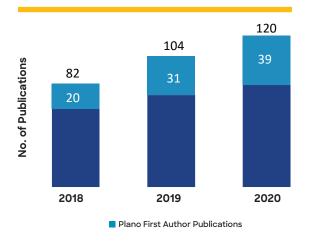
RESEARCH

While certainly Covid-19 presented the occasional impediment, we maintained a robust portfolio of cardiovascular studies and trials. We continued to publish in the major scientific journals as well as presented our findings in conferences and meetings around the globe.

2020

JOURNAL	Impact Factor	No. of Publications
JACC	20.6	8
JAMA Cardiology	12.8	3
New England Journal of Medicine	74.7	5
Circulation.	23.6	2
European Heart Journal	22.7	2
Cardiovascular Interventions	11.2	2
Circulation. Arrhythmia and Electrophysiology	6.6	1
Circulation. Heart Failure	8.9	1
European Journal of Heart Failure	15.5	1
Heart	5.4	1
Journal of the American Heart Association	5.5	1
Journal of the American Society of Echocardiography	6.9	1
The Journal of Heart and Lung Transplantation	10.3	1

PLANO PUBLICATIONS



"It's rewarding that the work we do, the research and studies we so often initiate, makes its way into better care for patients across the country and truly, around the world."

Michael DiMaio, MD

Medical Director, Residency Fellowship Program, Public Relations and Postgraduate Cardiovascular Training

MEDICAL STAFF

ANATOMIC PATHOLOGY

Hale, Daniel A., MD Reed, Jason T., MD Swartz, Brandon R., MD

ANATOMIC PATHOLOGY AND CLIN PATH

Bannister, Paul, MD Black, Michael E., MD Bredeweg, Arthur C., DO Campbell, Jaime A., MD Dobson, Robin Wynn Sage, MD Lang, Benjamin J., MD Le, Don Kim, DO Ledav. Temekka Ve'S.. MD Middleman, Benton R., MD Punar, Metin, MD Savino, Daniel A., MD Simon, Walter B., MD Wenceslao, Stella M., MD

ANESTHESIOLOGY

Adams, Thomas, MD Aycock, Ronald L., MD Beck, Kathryn A., MD Boehler, Lillian M., MD Boulanger, Kristine S., MD Bunting, Bryant F., DO Cheng, David Hong-Zhi, MD Chi, Lei, MD Cohen, Seth, DO Coleman, Robyn G., MD Colquitt, John A., MD Couch, Michael C., MD Daniel, Jerry, MD Davis, Brad R., MD Dullye, Larry J., DO Gathe-Ghermay, Joy C., MD Gill, Nicholas W., MD Gilly, Michael D., MD Griffin, Julia, MD Hastie, David G., MD Higgins, Jennifer Blackwell, MD Hoffman, William J., MD Huss, Michael G., MD Jahani, Minoo, DO Jahani, Mehrnoosh, DO Kamali, Amin, DO

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INTERVENTIONAL RADIOLOGY & DIAGNOSTIC RADIOLOGY

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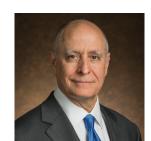
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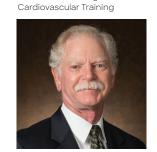
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DATA SOURCES/APPENDIX

THE NCDR®

An initiative of the American College of Cardiology Foundation®, the National Cardiovascular Data Registry (NCDR) began in 1997 to help healthcare provider groups and institutions respond to increasing requirements to document their processes and outcomes of care in the cath lab setting. Today, the NCDR is the most comprehensive outcomes-based quality improvement program in the United States, encompassing both hospital-based registries and a practice-based program.

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THE SOCIETY OF THORACIC SURGEONS (STS) NATIONAL DATABASE

The Society of Thoracic Surgeons is a notfor-profit organization representing more than 5,800 surgeons, researchers and allied health professionals worldwide who are dedicated to ensuring the best possible heart, lung, esophageal and other surgical procedures for the chest. The Society of Thoracic Surgeons offers outcome programs in the areas of adult cardiac, general thoracic and congenital surgery. By committing to collecting outcomes data for the STS National Database, surgeons are helping to improve the quality of care that their cardiothoracic surgery patients receive. Since 1994, more than 40 publications have come from the STS National Database. These studies have been published in a variety of professional journals and textbooks. The STS National Database has recently served as the basis for a federally funded national quality improvement randomized trial, as well as research in targeted areas of cardiac surgery.

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