

**The Society of Thoracic Surgeons
Data Managers' Electronic Abstract Submission Form**

(Electronic Deadline: August 15, 2003, Midnight CDT)

ID# 02 (for internal STS use only)

1. **Authors' Information:** Please provide full name and title for each participating author.

Corresponding Author's Name: Martin Kleinbart, DPM
Author's Title: Director, Planning and Decision Support
E-mail address: mkleinbart@hoaghospital.org
Telephone #:
Fax #:

Senior Author's Name: Patti Andre, RN, MSN
Author's Title: Cardiac Surgery Nurse Practitioner

Author's Name: Susan Goldberg, RN, MSN
Author's Title: Vice President of Cardiovascular Services

Author's Name: _____
Author's Title: _____

Author's Name: _____
Author's Title: _____

For additional authors please submit a second form.

2. **Institution(s) Information:** Please provide name of Institution(s).

Institution Name: Hoag Memorial Hospital Presbyterian
City and State of Institution: Newport Beach, CA

Institution Name: _____
City and State of Institution: _____

Institution Name: _____
City and State of Institution: _____

For additional institutions please submit a second form.

3. **Title of Abstract:**

Title: Provide the title of the abstract. Please provide a short and specific title which indicates the nature of the study. Please use the following formatting guidelines; title case, no periods, no abbreviations. Example: This is a Properly Formatted Title

Improving the Utilization of Internal Mammary Artery Conduits Through the Use of the Society of Thoracic Surgeons Comparative Data

4. Abstracts are limited to 250 words and must be typed and electronically submitted. The 250 limit does not include the title of the abstract or the author(s) name or title(s).

I. **Background:** A brief statement of the purpose of the study and the current state of research in the field.

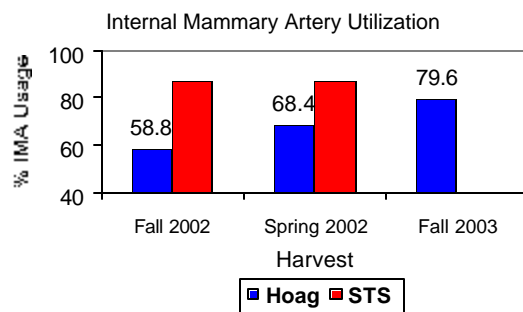
The selection of graft conduits is vitally important in Coronary Artery Bypass Graft (CABG) surgery because both long and short-term patency of the grafts is closely related to cardiac morbidity and mortality. According to ACC/AHA's 1999 guidelines for CABG surgery, the use of the in-situ internal mammary artery (IMA) conduit combined with saphenous vein graft (SVG) conduits is considered the standard of care. Starting in January 2002, Hoag Hospital began STS data collection and submission. Prior to our participation in STS' database, our program did not systematically track, measure or report data regarding the use of an IMA in our CABG population.

II. **Methods or Study Population:** The methods of study or experimental approach clearly, but briefly, defined.

After receiving our first STS data report, FALL HARVEST 2002, several opportunities for improvement were identified. The increased use of IMA grafts in our CABG population was identified as a priority for a quality improvement initiative. Once we received our reports along with STS benchmarks, we were able to disseminate comparative IMA information for our facility along with physician specific numbers.

III. **Results:** A summary of the results of the study, including sufficient details to support the conclusions made. To summarize results you may include one table (not to exceed 10 columns, 10 rows), or one graph, or one illustration (jpg file not to exceed 4" x 3" at 300 dpi).

FALL HARVEST 2002 (N=119) 58.8% IMA (National 87.4%)
FINAL HARVEST 2002 (N=236) 63.6% IMA (National 87.5%) – SPRING HARVEST 2003 (N=117) 68.4%
FALL HARVEST 2003 (N=93) <-pending report 79.6% IMA>
Our IMA utilization is increasing dramatically after comparative data was made available to the surgeons.



IV. **Conclusion:** A statement concerning the significance of the work and its implication for further research.

The STS database provided specific information comparing our data to national numbers. Having this data, the CV team was able to identify a key opportunity in improvement in IMA grafts utilized and initiate change based merely on the dissemination of this information.