

# Hospital Name Clarification Report Congenital Heart Surgery Database

Please take care in completing this form.  
We are dependent on you for accurate information.

To: Christopher Smith

Participant ID: 12345

**Important: This report MUST be completed and returned to the STS Data Warehouse in order to complete the process of the CURRENT Harvest. Please make any changes needed directly on this form. All changes should be made in your database as well.**

Listed below are the Hospital Names associated with your Participant ID from the data files that have been submitted within the past five years and will be used in the 2003 analyses.

**One of the following option(s) must be circled for each Hospital Name listed:**

- **No Change** - If the Hospital Name should be used in the analysis as it appears.
- **Change To** - Enter on the designated line the correct Hospital Name to be used in the analysis.
  - Please spell out abbreviations.
  - Misspellings or name variations must be corrected
  - Hospital Names that are <Missing> must be changed to the appropriate name.

Hospital Name as it appears in the Database

Current Facility / Hospital Name

Catholic Medical Center

No Change

/ Change To → \_\_\_\_\_

CMC

No Change /

Change To

→ Catholic Medical Center

- **Sign and date the form below. Fax this completed form to the STS Data Warehouse at (919) 668-7074.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_