

The STS Public Reporting System of Congenital Heart Surgery Outcomes May Not be Useful to Guide Referrals for Practicing Pediatric Cardiac Providers

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Background

The current STS public reporting system in congenital heart surgery has received considerable attention; however, it is unclear if pediatric cardiac providers use this data to guide surgical referrals.

Methods

We surveyed members of the American Academy of Pediatrics Section on Cardiology and Cardiac Surgery and the PediHeart.Net community regarding their use and beliefs of the current STS public reporting system. Respondents did not receive any incentive for participating in this study. All responses remained anonymous.

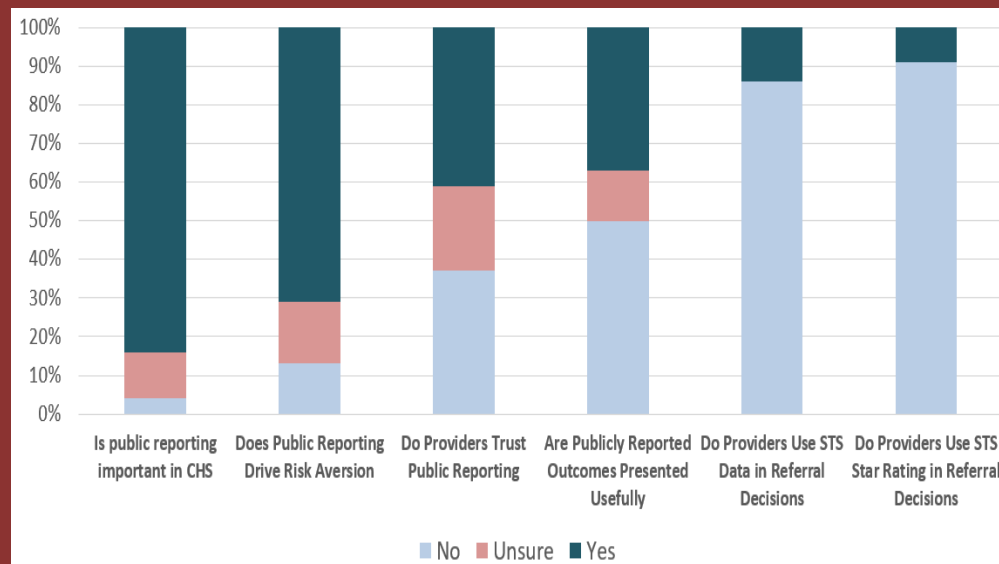
Conclusion

Pediatric cardiac providers believe that public reporting of outcomes is important; however, most feel that the existing STS public reporting system is of limited value to guide surgical referrals.

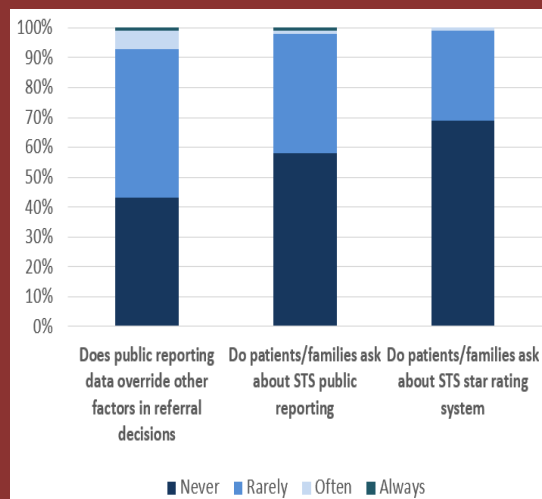
1. Respondent demographics

Field of Practice, n (%)	Pediatric Cardiology	134 (90)
	Cardiac surgery	10 (7)
	Pediatric Intensive Care	3 (2)
	Cardiac Intensive Care	2 (1)
Years of Practice	Median (IQR)	13.5 (6–24.5)
Practice Type, n (%)	Academic	117 (75)
	Private	29 (19)
	Other	9 (6)
Size of Practice, n (%)	Solo	5 (3)
	2-10 Partners	42 (27)
	11-20 partners	46 (30)
	20+ partners	62 (40)
Practice affiliation with surgical center, n (%)	Formal affiliation	118 (77)
	Close affiliation	21 (14)
	Not formally	14 (9)
Do providers refer patients to OSH for surgery, n (%)	Never/Rarely	135 (89)
	Often/Always	17 (11)
Annual surgical center volume, n (%)	<300	71 (46)
	>300	82 (54)

2. Providers think public reporting is important, but rarely use it to guide referrals



3. STS data never/rarely overrides other factors in referral decision



4. Larger centers are less likely to use the STS data to guide referrals

