SPONSOR HOME PAGE

This page would be the normal home page of whatever group is releasing the report in a particular state or community. The group might be, for example, the State Health Department. The page would have a direct link to the Report Home Page. We are thinking about using the following language to introduce the Report. Note that throughout this document we will refer to the entire template as “the Report” but it is presumed that the name of the report will be chosen by the sponsor.

Announcing!

(sponsor name) is proud to introduce a new tool to help the people and hospitals of (insert location) learn about and improve the quality of health care in our (community/state). The Report provides information that lets you compare how well our hospitals perform when they take care of patients with a wide range of health problems.

Whether you are choosing a hospital for yourself or a loved one, or just want to see where a particular hospital performs well and how it might improve its care, take advantage of this new resource. Go to Report Home Page Note: this can be a “tab” on the website in addition to having a link here

National experts in medicine and hospital quality, led by the federal government’s lead agency for health care quality, provided the building blocks for this tool. They identified the most readily available information that can give an accurate picture of the quality and safety of care at different hospitals. Click here to get Technical Details about the Quality Information in the Report Note: this can be a “tab” on the website in addition to having a link here

They also asked people like you if this was information they would like to have, and their answer was “yes!”

We hope you find this tool valuable. If you have questions, or want to share your feedback on the tool, please email us at (insert email address or provide link to feedback form).
Report on Hospital Quality in [community/state]

Quality in health care, including in hospitals, can be described as “doing the right thing, at the right time, in the right way -- and having the best possible results.”

This report provides information on how well all the hospitals in (insert location) care for patients with a wide range of health problems. It can:

- help you choose a hospital for yourself,
- provide useful information for your loved ones if they need hospital care,
- encourage hospitals to improve their quality, and
- help everyone learn more about hospital quality.

Why should you look at this information?

Don’t people get good care in any hospital their doctor recommends? Here are the facts:

- All hospitals do not provide the same quality of care. Some hospitals are better than others.
- A particular hospital might do a very good job on some health problems and not such a good job on other health problems.
- Whenever anyone goes to the hospital, they risk getting a new health problem while getting medical care for an existing problem. Hospitals vary in how well they protect patients from these risks.
- Your doctor, or the specialist or surgeon he or she recommends, may be highly skilled, but hospital quality also depends on how well all the hospital staff, such as the nurses, take care of you, and on how well the hospital is organized.

Given those facts, our goal is to give you information you can use to increase your chances of getting the best possible hospital care when you need it.

What Information is available in the Report?

There are three types of information in this Report:

- how often patients had various medical complications while in the hospital
- how often patients died while in the hospital for certain health conditions and operations
- the number of times certain operations were done the way experts think they should be done.

This information is provided about [insert #] hospitals to help you compare them to each other.

There are many ways to judge hospital quality. We are reporting this information because experience shows it is accurate, easily available for most hospitals from their administrative records, and of interest to members of the public.

Click here to start comparing hospitals’ results
Getting Started…

The information in this Report is organized into [insert number] topics that relate to different types of health problems. We have information on how well [insert number] hospitals performed on these indicators. Let’s get started!

Step One: Choose one or more hospitals to compare

Sponsors: This is where you set up a search function through which users will be able to enter information, such as a zip code or city/state, and then view a list of the hospitals in your area which are included in the report.

Go to Health Topics Selection Page
HEALTH TOPICS SELECTION PAGE

Step Two: Pick the health care quality topic you want to learn about.

Quality information is available for ten topics. Some of the topics will be interesting to many people; others will be interesting only to some. For example, if you or a loved has a heart problem, you will probably be interested in the “Heart Conditions” topic. On the other hand, anyone facing a hospital stay should be interested in the topic “Medical complications of all patients” since it discusses problems that can occur for any hospital patient. With the exception of “Medical care for children” and some information in “Childbirth,” all information refers to adult patients.

Within each topic we have information on several different quality indicators. A quality indicator is a piece of information, usually a number, that shows how often patients had a particular experience when they received medical care. These experiences reflect a particular aspect of hospital quality. Each health topic is briefly described below, with examples of quality indicators for that topic. To learn about all the indicators we present for each topic, click on the link at the end of the topic description. You can return to this page and pick another topic whenever you like.

• **Heart conditions:** This section includes items such as how many patients died while hospitalized for heart attacks, and how often a hospital performs certain heart-related surgeries or procedures. [Click here to see Quality Indicators for Heart Conditions](#)

• **Operations for cancer of the esophagus and pancreas:** This section includes items related to cancer of the esophagus (the tube leading from the throat to the stomach) and the pancreas (a digestive organ). [Click here to see Quality Indicators for Cancer of the Esophagus and Pancreas](#)

• **Brain and nervous system:** This section includes indicators of how many patients died while hospitalized for a stroke, and how often hospitals did an operation to remove blockage in the arteries leading to the brain. [Click here to see Quality Indicators for the Brain and Nervous System](#)

• **Childbirth:** This section includes items such as how often a birth-related injury occurs to either the mother or the infant. [Click here to see Quality Indicators for Childbirth](#)

• **Hip replacement and hip fracture:** This section includes how many patients died in the hospital following hip replacement surgery or a hip fracture. [Click here to see Quality Indicators for Hip Replacement and Hip Fracture](#)

• **Other surgeries:** This section includes how many patients died when getting a repair of an abnormally enlarged artery supplying blood to lower half of the body, and how often the hospital performs this and selected other surgeries. [Click here to see Quality Indicators for Other Surgeries](#)

• **Other health conditions:** This section includes items such as how many patients died while hospitalized for pneumonia, and how often patients died after they came in with heavy bleeding in their stomach or intestines. [Click here to see Quality Indicators for Other Health Conditions](#)
• **Medical complications of patients having an operation:** This section discusses problems or complications patients can face after surgery. Examples are complications from anesthesia, and how often patients were infected following surgery. [Click here to see Quality Indicators for Safety of Patients having Surgery](#)

• **Medical complications of all patients:** This section includes items related to problems or complications that can be experienced by any hospital patient. Examples are how often patients get bed sores and how often patients die after developing a complication that should have been identified and treated. [Click here to see Quality Indicators for Safety of All Patients](#)

• **Medical care for children:** This section includes items such as how often children under the age of 18 have problems breathing after surgery, have a bad reaction to transfused blood or die after heart surgery. [Click here to see Quality Indicators for Children’s Medical Care](#)
Quality of care for heart conditions

Information is available in the Report about five indicators of quality of care for heart conditions. Definitions of each of the indicators are provided below.

Please check the box next to each indicator you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Death rate for heart attack patients
Deaths in the hospital of patients who came in because they had a heart attack (which is called an acute myocardial infarction).

☐ Death rate for patients with congestive heart failure
Deaths in the hospital of patients who came in because they had heart failure (which is called congestive heart failure).

☐ Death rate for patient having a coronary artery bypass graft (CABG)
Deaths in the hospital following an operation (called a coronary artery bypass graft, or CABG), which is designed to provide a way around clogged arteries in the heart.

☐ Death rate for patient having a percutaneous transluminal coronary angioplasty (PTCA)
Deaths in the hospital following a procedure (called a percutaneous transluminal coronary angioplasty, or PTCA) in which clogged arteries of the heart are opened up, and then kept open using wire mesh tubes or “stents.”

☐ Rate of cardiac catheterization procedures on both sides of the heart
Many patients undergo a “cardiac catheterization” to learn how well the heart is working. Usually, this is done by putting tubes in the arteries on one side of the heart. This indicator shows how many patients getting this procedure have tubes put into the arteries on both sides of the heart (called a bi-lateral cardiac catheterization), which experts believe puts them at greater risk for complications.

Additional information: Number of operations

Information is also available about the number of times coronary artery bypass grafts (CABG) and percutaneous transluminal coronary angioplasties (PTCA) were done at individual hospitals. Research shows that, in general, when hospitals do these operations frequently, they are more likely to have good results. However, experts do not always agree on the minimum number needed to achieve high quality. You will find graphs for these indicators on the same page as the death rate.
Compare hospital scores on heart conditions

When you are choosing a hospital, you should look for the hospital that does **Better than average** on the topics that are most important to you, or on as many items as possible.

Click on the indicator names to see detailed results on how each hospital performed.

<table>
<thead>
<tr>
<th>Heart Conditions</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death rate for heart attack patients</td>
<td><strong>Better Than average</strong></td>
<td>Average</td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 2 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Death rate for patients with congestive heart failure</td>
<td><strong>Better Than average</strong></td>
<td><strong>Worse Than average</strong></td>
<td>Average</td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 4 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Death rate for patients having CABG (coronary artery bypass graft)</td>
<td>Average</td>
<td><strong>Worse Than average</strong></td>
<td>Average</td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 3 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Death rate for patients having PTCA (percutaneous transluminal coronary angioplasty)</td>
<td><strong>Better Than average</strong></td>
<td><strong>Worse Than average</strong></td>
<td><strong>Better Than average</strong></td>
<td>Average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 10 for every 1,000 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rate of patients having cardiac catheterization procedures on both sides of the heart</td>
<td><strong>Better Than average</strong></td>
<td><strong>Better Than average</strong></td>
<td><strong>Worse Than average</strong></td>
<td>Average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 7 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Death rate for heart attack patients

This graph shows you the percent of patients admitted to each hospital after having a heart attack (called an *acute myocardial infarction*), who died during their hospital stay. This information is for patients admitted during [insert year].

When you are choosing a hospital, you should look for the hospital that has a lower number of deaths. A **lower** number is shown by a **shorter** bar on the graph below.

**Average of hospitals across the state:** The average rate of patients who died after having a heart attack, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Death rate of patients with congestive heart failure

This graph shows you the percent of patients who were admitted to a hospital because they had heart failure (called congestive heart failure), who died during their hospital stay. This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a lower number of deaths. A **lower** number is shown by a **shorter** bar on the graph below.

**Average of hospitals across the state:** The average rate of patients who died after being admitted because they had congestive heart failure in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Coronary artery bypass graft (CABG) – death rate and number of operations

The two graphs on this page show you the quality of hospital care related to coronary artery bypass grafts (CABG), a procedure designed to restore the natural flow of blood in the heart. This information is for patients admitted during [insert year].

The graph on the left side of the page shows you how often patients died after they had a CABG. The graph on the right shows you the number of times a hospital performed a CABG. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations (right graph) will have lower death rates (left graph).

Death rate for coronary artery bypass graft

When choosing a hospital, look for the hospital that has a lower number of deaths. A lower number is shown by a shorter bar on the graph below.

Number of coronary artery bypass grafts

When choosing a hospital, look for the hospital that has a higher number of operations. A higher number is shown by a longer bar on the graph below.

Average of hospitals across the state: The average rate of patients who died after this operation in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.

Average of hospitals across the state: The average number of operations done by hospitals across your state. This number is included so you have a better idea of what is typical for your state.
Percutaneous transluminal coronary angioplasty (PTCA) – death rate and number of procedures

The two graphs on this page show you the quality of hospital care related to percutaneous transluminal coronary angioplasty (PTCA), a procedure in which clogged arteries of the heart are opened up, and then kept open using wire mesh tubes or “stents.” This information is for patients admitted during [insert year].

The graph on the left side of the page shows you how often patients died after having a PTCA. The graph on the right shows you the number of times a hospital performed this procedure. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of procedures (right graph) will have lower death rates (left graph).

Death rate for percutaneous transluminal coronary angioplasty

When choosing a hospital, you should look for the hospital that has a lower number of deaths. A lower number is shown by a shorter bar on the graph below.

Number of percutaneous transluminal coronary angioplasties

When choosing a hospital, you should look for the hospital that has a higher number of operations. A higher number is shown by a longer bar on the graph below.

Average of hospitals across the state: The average rate of patients who died after this procedure in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.

Average of hospitals across the state: The average number of procedures done by hospitals across your state. This number is included so you have a better idea of what is typical for your state.
Rate of cardiac catheterization procedures on both sides of the heart

This graph shows you how often each hospital performs a “cardiac catheterization” to measure how well the heart is working, by putting tubes in the arteries on both sides of the heart rather than on just one side. (This is called a bi-lateral cardiac catheterization.) Most experts believe that it is better to put tubes only on one side of the heart (a uni-lateral catheterization), so they would look for low scores on this indicator. This information is for patients admitted during [insert year].

When you are choosing a hospital, look for the hospital that has a lower rate of bilateral cardiac catheterization. A lower rate is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of patients who had cardiac catheterization procedures on both sides of the heart, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Quality of care for operations for cancer of the esophagus & pancreas

Information is available in the Report about two quality indicators for cancers of the esophagus and the pancreas. Definitions of each of the indicators are provided below.

Please check the box next to each indicator you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Death rate for operations to remove part or all of the esophagus
How often patients died in the hospital after an operation to remove part or all of their esophagus (the tube leading from the throat to the stomach). (This is called esophageal resection.)

☐ Death rate for operations to remove part or all of the pancreas
How often patients died in the hospital after an operation to remove part or all of their pancreas (a digestive organ). (This is called pancreatic resection.)

Additional information: Number of operations

Information is also available about the number of times these operations were done at individual hospitals. Research shows that, in general, when hospitals do these operations frequently, they are more likely to have good results. However, experts do not always agree on the minimum number needed to achieve high quality.

You will find graphs for these indicators on the same page as the death rate.

Compare Hospital Scores
**Compare hospital scores on operations for cancer of the esophagus & pancreas**

When you are choosing a hospital, you should look for the hospital that does Better than average on the topics that are most important to you, or on as many items as possible.

**Click on the indicator names for detailed results on how each hospital performed.**

<table>
<thead>
<tr>
<th>Death rate is the percent of patients who had a particular procedure who died while in each hospital during [insert year].</th>
<th>A hospital’s score is calculated in comparison to the average of hospitals across the state.</th>
<th>Average is about the same as the average of hospitals across the state.</th>
<th>Better than average is better than the average of hospitals across the state.</th>
<th>Worse than average is worse than the average of hospitals across the state.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Operations for cancer of the esophagus &amp; pancreas</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Death rate for operations to remove part or all of the esophagus</strong>&lt;br&gt;The average rate of death for hospitals across the state is 9 for every 1,000 patients.</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Better than average</td>
<td>average</td>
</tr>
<tr>
<td><strong>Death rate for operations to remove part or all of the pancreas</strong>&lt;br&gt;The average rate of death for hospitals across the state is 7 for every 100 patients.</td>
<td>average</td>
<td>Worse than average</td>
<td>Better than average</td>
<td>average</td>
</tr>
</tbody>
</table>
Removal of part or all of the esophagus – death rate and number of operations

The two graphs on this page show you the quality of hospital care for operations to remove part of the esophagus (the tube leading from the throat to the stomach), usually because of cancer. This information is for patients admitted during [insert year].

The graph on the left side of the page shows how often patients died following this operation. The graph on the right side of the page shows the number of times a hospital performed this operation. This is a rare procedure. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations (right graph) will have lower death rates (left graph).

Death rate for operations to remove part or all of the esophagus

When choosing a hospital, you should look for the hospital that has a lower number of deaths. A lower number is shown by a shorter bar on the graph below.

Number of operations to remove part or all of the esophagus

When choosing a hospital, you should look for the hospital that has a higher number of operations. A higher number is shown by a longer bar on the graph below.

Average of hospitals across the state: The average rate of patients who died following this operation in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.

Average of hospitals across the state: The average number of operations done by hospitals across your state. This number is included so you have a better idea of what is typical for your state.
Removal of part of the pancreas – death rate and number of operations

The two graphs on this page show you the quality of hospital care for operations to remove part of the pancreas (a digestive organ), usually because of cancer. This information is for patients admitted during [insert year].

The graph on the left side of the page shows you how often patients died following this surgery. The graph on the right side of the page shows you the number of times a hospital performed this operation. This is a rare procedure. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations (right graph) will have lower death rates (left graph).

Death rate for operations to remove part or all of the pancreas

When choosing a hospital, you should look for the hospital that has a lower number of deaths. A lower number is shown by a shorter bar on the graph below.

Number of operations to remove part or all of the pancreas

When choosing a hospital, you should look for the hospital that has a higher number of operations. A higher number is shown by a longer bar on the graph below.

Average of hospitals across the state: The average rate of patients who died following this operation in hospitals across your state. This number is included so you have:

• a better idea of what is typical for your state.
• a basis for comparing individual hospitals’ performance.

Average of hospitals across the state: The average number of operations done in hospitals across your state. This number is included so you have a better idea of what is typical for your state.
Quality in care of the brain and nervous system

Information is available in the Report about three indicators related to quality of care for conditions relating to the brain and nervous system. Definitions of each of the indicators are provided below.

Please check the box next to each indicator you care about. You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

[Select All Indicators]

☐ Death rate for an operation to remove blockage arteries to the brain
How often patients died in the hospital after an operation to remove blockage in the arteries leading to the brain. (This is called carotid endarterectomy).

☐ Death rate for brain surgery
How often patients died in the hospital following brain surgery. (This is called craniotomy).

☐ Death rate for stroke
How often patients died in the hospital who came in after having a stroke.

Additional information: Number of operations

Information is also available about the number of times the operation to remove blockage in brain arteries was done at individual hospitals. Research shows that, in general, when hospitals do these operations frequently, they are more likely to have good results. However, experts do not always agree on the minimum number needed to achieve high quality.

You will find a graph for this indicator on the same page as the death rate.

[Compare Hospital Scores]
Compare hospital scores on the brain and nervous system

When you are choosing a hospital, you should look for the hospital that does Better than average on the topics that are most important to you, or on as many items as possible.

Click on the indicator names for detailed results on how each hospital performed.

<table>
<thead>
<tr>
<th>Death rate is the percent of patients who were treated for a particular illness or had a particular procedure who died while in each hospital during [insert year].</th>
<th>A hospital’s score is calculated in comparison to the average of hospitals across the state. Average is about the same as the average of hospitals across the state. Better than average is better than the average of hospitals across the state. Worse than average is worse than the average of hospitals across the state.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Brain and nervous system</strong></td>
<td><strong>Hospital A</strong></td>
</tr>
<tr>
<td>Death rate for operation to remove blockage in arteries to the brain</td>
<td>Better than average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 7 for every 1,000 patients.</td>
<td></td>
</tr>
<tr>
<td>Death rate for brain surgery</td>
<td>average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 6 for every 100 patients.</td>
<td></td>
</tr>
<tr>
<td>Death rate for stroke</td>
<td>Better than average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 10 for every 100 patients.</td>
<td></td>
</tr>
</tbody>
</table>
Removal of blockage in arteries to the brain—death rate and number of operations

The two graphs on this page show you the quality of hospital care related to an operation to remove blockage of the arteries leading to the brain, called a carotid endarterectomy. This information is for patients admitted during [insert year].

The graph on the left side of the page shows you how often patients died after having this operation. The graph on the right shows you the number of times a hospital performed this operation. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations (right graph) will have lower death rates (left graph).

**Death rate for an operation to remove blockage in arteries to the brain**

When you are choosing a hospital, you should look for the hospital that has a **lower** number of deaths. A **lower** number is shown by a **shorter** bar on the graph below.

**Number of operations to remove blockage in arteries to the brain**

When you are choosing a hospital, you should look for the hospital that has a **higher** number of operations. A **higher** number is shown by a **longer** bar on the graph below.

Average of hospitals across the state: The average rate of patients who died following this operation in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Death rate for brain surgery

This graph shows you the percent of patients who died after brain surgery (called a *craniotomy*). This information is for patients admitted during [insert year].

When you are choosing a hospital, you should look for the hospital that has a lower number of deaths for this operation. A lower number is shown by a shorter bar on the graph below.

![Graph showing death rates for different hospitals and an average across the state.]

**Average of hospitals across the state:** The average rate of patients who died in the hospital after brain surgery, across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Death rate for stroke patients

This graph shows you the percent of patients who died after being admitted to the hospital because they had a stroke. This information is for patients admitted during [insert year].

When you are choosing a hospital, you should look for the hospital that has a **lower** number of deaths. A **lower** number is shown by a **shorter** bar on the graph below.

---

**Average of hospitals across the state:** The average rate of patients who died after being admitted because they had a stroke, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Quality of childbirth

Information is available in the Report about four indicators of childbirth quality and safety. Definitions of each of the indicators are provided below.

Please check the box next to each indicator you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Rate of birth injury or infection to newborn
How often a newborn infant experiences a problem during the birth process (labor or delivery) such as a broken collarbone, an infection, or a head injury.

☐ Rate of obstetric tearing – vaginal delivery with medical instruments
How often a woman experiences a tear (trauma) to her perineum – the area between her vagina and rectum – while giving birth, when a health care provider is helping to deliver her baby using a forceps or other medical instrument. Such tears are often preventable.

☐ Rate of obstetric tearing – vaginal delivery without medical instruments
How often a woman experiences a tear (trauma) to her perineum – the area between her vagina and rectum – while giving birth. Such tears, which can happen even when medical instruments are not used, are often preventable.

☐ Rate of obstetric tearing – Cesarean delivery
How often a woman experiences a tear (trauma) in her perineum – the area between her vagina and rectum – or to any of the birth-related organs inside her body, during a Cesarean (surgical) delivery of a baby. Such tears are often preventable.

Compare Hospital Scores

Utilization rates for Cesarean section and vaginal birth after Cesarean (VBAC)

Information is also available about the proportion of deliveries in a hospital that are performed by Cesarean section, which involves surgery, and the proportion of deliveries in which a woman who previously had a Cesarean section give birth normally (vaginally). These are not quality indicators, but if you are interested in learning about these rates, Click here for Utilization Rates.
**Compare hospital scores on childbirth**

When you are choosing a hospital, you should look for the hospital that does **Better than average** on the topics that are most important to you, or on as many items as possible.

**Click on the indicator names for detailed results on how each hospital performed.**

<table>
<thead>
<tr>
<th>Rate is the percent of mothers or babies who experienced a particular problem during childbirth during [insert year].</th>
<th>A hospital’s score is calculated in comparison to the average of hospitals across the state. Average is about the same as the average of hospitals across the state. Better than average is better than the average of hospitals across the state. Worse than average is worse than the average of hospitals across the state.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rate of birth injury or infection in newborns</strong>  The average rate for hospitals across the state is 6 for every 1,000 patients.</td>
<td><strong>Better than average</strong>  <strong>Better than average</strong>  <strong>Better than average</strong></td>
</tr>
<tr>
<td><strong>Rate of obstetric tearing, vaginal delivery, without instruments</strong>  The average rate for hospitals across the state is 46 for every 1,000 patients.</td>
<td><strong>Worse than average</strong>  <strong>Average</strong>  <strong>Better than average</strong>  <strong>Average</strong></td>
</tr>
<tr>
<td><strong>Rate of obstetric tearing, vaginal delivery, with instruments</strong>  The average rate for hospitals across the state is 191 for every 1,000 patients.</td>
<td><strong>Worse than average</strong>  <strong>Average</strong>  <strong>Better than average</strong>  <strong>Better than average</strong></td>
</tr>
<tr>
<td><strong>Rate of obstetric tearing, Cesarean section</strong>  The average rate for hospitals across the state is 4 for every 1,000 patients.</td>
<td><strong>Better than average</strong>  <strong>Better than average</strong>  <strong>Average</strong>  <strong>Average</strong></td>
</tr>
</tbody>
</table>
Rate of birth injury or infection in newborns

This graph shows you the percent of newborn babies who experienced an injury or other problem during the birth process (labor or delivery) such as a broken collarbone or head injury. This information is for newborns delivered in hospitals in [insert year].

When choosing a hospital, look for the hospital that has lower numbers for this indicator. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of birth injuries or infections in newborns in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of obstetric tearing - vaginal delivery with medical instrument

This graph shows you the percent of women who experienced a tear in their pelvic area or pelvic organ (obstetric trauma) while giving birth, when a health care provider was helping to deliver the baby using a forceps or other medical instrument. This information is for patients admitted to a hospital in [insert year].

When choosing a hospital, you should look for the hospital that has lower numbers for this indicator. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of obstetric tearing, in vaginal deliveries using medical instruments, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of obstetric tearing – vaginal delivery without medical instrument

This graph shows you the percent of women who experienced a tear in their pelvic area or pelvic organ (obstetric trauma) while giving birth, even though no forceps or other medical instruments were used. This information is for patients admitted to a hospital in 2004.

When choosing a hospital, you should look for a hospital that has lower numbers on this indicator. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of obstetric tearing, in vaginal deliveries without using medical instruments, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of obstetric tearing – Cesarean delivery

This graph shows you the percent of women who experienced a tear in their pelvic area or any of the birth-related organs inside her body (obstetric trauma), during a Cesarean (surgical) delivery of a baby.

When choosing a hospital, you should look for a hospital that has lower numbers for this indicator. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of obstetric tearing during Cesarean deliveries, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Additional information on childbirth:

Utilization rates* for Cesarean section

The following information relates to Cesarean section (childbirth involving an operation). These are not indicators of quality, since health experts don’t know which utilization rates are better or worse for these procedures. However, if a woman has a strong preference either for having or avoiding a Cesarean section, and her doctor confirms that her preference is safe for her, these utilization rates may provide some useful information.

*The utilization rate is the number of times a hospital did a particular medical procedure during [insert year].

Please check the box next to each utilization rate you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Utilization Rates

☐ Utilization rate for Cesarean section delivery
   How often babies in the hospital are delivered using Cesarean section, which involves an operation, instead of by normal/vaginal delivery.

☐ Utilization rate for Cesarean section delivery, first birth
   How often babies in the hospital are delivered using Cesarean section, which involves an operation, instead of by normal/vaginal delivery – where this is the mother’s first birth.

☐ Rate of vaginal birth after Cesarean (VBAC) among women at low risk of needing a Cesarean section
   How often babies in the hospital are delivered normally – meaning with a vaginal birth – when the mother previously delivered by Cesarean section (involving an operation), and she is not facing a high risk of needing another Cesarean for other medical reasons.

☐ Rate of vaginal birth after Cesarean (VBAC), all
   How often babies in the hospital are delivered normally – meaning with a vaginal birth – where the mother has previously delivered by Cesarean section (involving an operation). The difference between this indicator and the one above it is that this one counts all VBACs, no matter how much the mother was at risk of needing another Cesarean.

Note to sponsor: Choose only one of the two VBAC rates to report, not both.

Compare Utilization Rates
Utilization rate for Cesarean section delivery

This graph shows you the percent of babies in each hospital who were delivered using Cesarean section, which involves an operation, instead of by normal (vaginal) delivery. This information is for patients admitted to a hospital during [insert year].

Average of hospitals across the state: The average rate of babies delivered using Cesarean section across your state. This number is included so you have a better idea of what is typical for your state.
Rate for Cesarean section delivery, first birth

This graph shows you the percent of babies in each hospital delivered using Cesarean section, which involves an operation, instead of by normal (vaginal) delivery – where this is the mother’s first (primary) birth. This information is for patients admitted to a hospital during [insert year].

Average of hospitals across the state: The average number of babies delivered by Cesarean section, where this is the mother’s first birth, across your state. This number is included so you have a better idea of what is typical for your state.
Rate of vaginal birth after Cesarean (VBAC) among women at low risk of needing a Cesarean section

This graph shows you the percent of babies in each hospital who were delivered normally – meaning with a vaginal birth – when the mother delivered an earlier baby by Cesarean section (involving an operation), and she is not facing a high risk of needing another Cesarean for other reasons. This information is for patients admitted to a hospital during [insert year].

Average of hospitals across the state: The average rate of uncomplicated vaginal births after a Cesarean section, across your state. This number is included so you have a better idea of what is typical for your state.
Rate of vaginal birth after Cesarean (VBAC), all

This graph shows you the percent of babies who were delivered normally – meaning with a vaginal birth – where the mother previously delivered by Cesarean section (involving an operation). The difference between this indicator and the previous one is that this one counts all VBACs, even those where a complication occurred during childbirth. This information is for patients admitted to a hospital during [insert year].

Average of hospitals across the state: The average rate of vaginal births after a Cesarean section, across your state. This number is included so you have a better idea of what is typical for your state.
Quality of care for hip replacement and hip fracture

Information is available in the Report about two indicators for care for hip replacement and hip fracture. Definitions of each of the indicators are provided below.

Please check the box next to each indicator you care about. You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Death rate for patients with a broken hip
   How often patients died in the hospital who came in with a broken hip (hip fracture).

☐ Death rate for hip replacement surgery
   How often patients died in the hospital after an operation to replace a bad hip.

Compare Hospital Scores
Compare hospital scores for hip replacement and hip fracture

When you are choosing a hospital, you should look for the hospital that does Better than average on the topics that are most important to you, or on as many items as possible.

Click on the indicator names for detailed results on how each hospital performed.

<table>
<thead>
<tr>
<th>Death rate is the percent of patients who were treated for a particular illness or had a particular procedure who died while in each hospital during [insert year].</th>
<th>A hospital’s score is calculated in comparison to the average of hospitals across the state.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average is about the same as the average of hospitals across the state.</td>
<td>Better than average is better than the average of hospitals across the state.</td>
</tr>
<tr>
<td>Worse than average is worse than the average of hospitals across the state.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Hip replacement and hip fracture</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death rate for patients with a broken hip</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>average</td>
<td>average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 3 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Death rate for hip replacement surgery</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>average</td>
<td>average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 3 for every 1,000 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Death rate for patients with a broken hip

This graph shows you the percent of patients who died in the hospital, who came in with a broken hip (hip fracture). This information is for patients admitted during [insert year].

Deaths due to a broken hip are very rare. When choosing a hospital, you should look for the hospital with a lower number for this condition. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of patients who died after being admitted with a broken hip, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Death rate for hip replacement surgery

This graph shows you the percent of patients who died after surgery to replace a bad hip. This is a fairly common operation that is not usually complicated. Death rates should be extremely low. This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a lower number of deaths. A lower number is shown by a shorter bar on the graph below.

### Average of hospitals across the state:
The average rate of patients who died in the hospital after hip replacement surgery, across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals' performance.
Quality of care for other surgeries

Information is available in the Report about three indicators of quality related to other surgical procedures. Definitions of each of the indicators are provided below.

Please check the box next to each indicator you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Death rate for surgical repair of an aortic aneurysm
How often patients died in the hospital after an operation (called an abdominal aortic aneurysm repair) to repair an enlarged blood vessel supplying blood to the lower half of the body.

☐ Rate of gallbladder removal using minimally-invasive (laparoscopic) surgery
How often a hospital did an operation to remove a patient’s gallbladder using a “laparoscopic” approach. (This is called a laparoscopic cholecystectomy.) This approach involves less cutting and is considered a better choice where possible, since it results in fewer complications and a faster and less painful recovery.

☐ Rate of healthy appendix removal in the elderly
How often a healthy appendix was removed from an elderly person in the hospital, during an operation for another medical problem. (This is called an incidental appendectomy). Health experts believe this should be avoided, but some surgeons still do it.

Additional information: Number of operations
Information is also available about the number of times operations to repair an enlarged blood vessel supplying blood to the lower half of the body were done at individual hospitals. Research shows that, in general, when hospitals do these operations frequently, they are more likely to have good results. However, experts do not always agree on the minimum number needed to achieve high quality.

You will find a graph for this indicator on the same page as the death rate.
Compare hospital scores for other surgeries

When you are choosing a hospital, you should look for the hospital that does Better than average on the topics that are most important to you, or on as many items as possible.

Click on the indicator names for detailed results on how each hospital performed.

<table>
<thead>
<tr>
<th>Other Surgeries</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td>Death rate for surgical repair of an aortic aneurysm</td>
<td>Better than average</td>
<td>Average</td>
<td>Average</td>
<td>Better than average</td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 10 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rate of gallbladder removal using minimally-invasive (laparoscopic), surgery</td>
<td>Better than average</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Worse than average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is 76 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rate of healthy appendix removal in the elderly</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Average</td>
<td>Worse than average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is 2 for every 100 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Death rate is the percent of patients who had a particular procedure who died while in each hospital during [insert year].

Rate is the percent of patients having a particular kind of surgery during [insert year], who were operated on using one approach to the surgery rather than another.

A hospital’s score is calculated in comparison to the average of hospitals across the state.

Average is about the same as the average of hospitals across the state.

Better than average is better than the average of hospitals across the state.

Worse than average is worse than the average of hospitals across the state.
Surgical repair of an aortic aneurysm – death rate and number of operations

The two graphs on this page show you the quality of hospital care related to the surgical repair of an enlarged artery or vein supplying blood to the lower half of the body. This is sometimes called an *abdominal aortic aneurysm repair*. This information is for patients admitted during [insert year].

The graph on the left side of the page shows you how often patients died after having this operation. The graph on the right shows you the number of times a hospital performed this operation. This procedure is somewhat rare. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations (right graph) will have lower death rates (left graph).

**Death rate for surgical repair of an aortic aneurysm**

When you are choosing a hospital, you should look for the hospital that has a **lower** number of deaths. A **lower** number is shown by a **shorter** bar on the graph below.

**Number of surgical repairs of an aortic aneurysm**

When you are choosing a hospital, you should look for the hospital that has a **higher** number of operations. A **higher** number is shown by a **longer** bar on the graph below.

---

**Average of hospitals across the state**: The average number of deaths following this operation in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of gallbladder removal using minimally-invasive (laparoscopic) surgery

This graph shows you the number of times a hospital did an operation to remove a patient’s gallbladder, using a “laparoscopic” approach. (This is called a *laparoscopic cholecystectomy.*) This information is for patients admitted during [insert year].

A laparoscopic approach involves smaller incisions and a quicker healing time. Most experts believe that if at all possible, the laparoscopic approach is better for the patient. Therefore, when choosing a hospital, you should look for the hospital with a **higher** number for this indicator. A **higher** number is shown by a **longer** bar on the graph below.

**Average of hospitals across the state:** The average number of gallbladder removals done using laparoscopy, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of healthy appendix removal in the elderly

This graph shows you the number of times a hospital removed a healthy appendix from an elderly person, during an operation for another medical problem (called an *incidental appendectomy*). This information is for patients admitted during [insert year].

A healthy appendix is removed when an adult is having some other kind of abdominal surgery, to prevent future problems with the appendix or to make sure the appendix is not a source of abdominal pain. However, this additional procedure is not recommended for people aged 65 and older. Therefore, when choosing a hospital, you should look for the hospital with a lower number for this indicator. A lower number is shown by a shorter bar on the graph below.

### Rate of healthy appendix removal in the elderly

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Rate for every 100 operations, [insert year]</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSPITAL A</td>
<td>1</td>
</tr>
<tr>
<td>Average of hospitals across the state</td>
<td>2</td>
</tr>
<tr>
<td>HOSPITAL C</td>
<td>3</td>
</tr>
<tr>
<td>HOSPITAL D</td>
<td>4</td>
</tr>
<tr>
<td>HOSPITAL B</td>
<td>4</td>
</tr>
</tbody>
</table>

**Average of hospitals across the state:** The average number of healthy appendix removals in the elderly done in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Quality of care for other health conditions

Information is available in the Report about two quality indicators for other health conditions. Definitions of each indicator are provided below.

Please check the box next to each indicator you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Death rate for pneumonia
Deaths in the hospital of patients who came in with pneumonia.

☐ Death rate for patients with GI (gastrointestinal) bleeding
How often patients died after they came in with heavy bleeding in their stomach or intestines (called gastrointestinal bleeding).

Compare Hospital Scores
**Compare hospital scores on other health conditions**

When you are choosing a hospital, you should look for the hospital that does Better than average on the topics that are most important to you, or on as many items as possible.

**Click on the indicator names for detailed results on how each hospital performed.**

<table>
<thead>
<tr>
<th>Other Health Conditions</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Death rate</strong> is the percent of patients who were treated for a particular illness who died while in each hospital during [insert year].</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Average</td>
<td>Better than average</td>
</tr>
<tr>
<td><strong>Death rate</strong> is the percent of patients who were treated for a particular illness who died while in each hospital during [insert year].</td>
<td>A hospital’s score is calculated in comparison to the average of hospitals across the state.</td>
<td>Average is about the same as the average of hospitals across the state.</td>
<td>Better than average is better than the average of hospitals across the state.</td>
<td>Worse than average is worse than the average of hospitals across the state.</td>
</tr>
<tr>
<td><strong>Death rate for pneumonia patients</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 8 for every 100 patients.</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Average</td>
<td>Better than average</td>
</tr>
<tr>
<td><strong>Death rate for patients with GI (gastrointestinal) bleeding</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is 3 for every 100 patients.</td>
<td>Average</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Worse than average</td>
</tr>
</tbody>
</table>
**Death rate for pneumonia patients**

This graph shows you the percent of patients admitted to a hospital because they had pneumonia, who died during their hospital stay. This information is for patients who were admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a **lower** number for this condition. A **lower** number is shown by a **shorter** bar on the graph below.

![Graph showing death rate for pneumonia patients](image)

**Average of hospitals across the state:** The average rate of patients with pneumonia who died in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Death rate for patients with GI bleeding

This graph shows you the percent of patients who died after being admitted to the hospital because of bleeding into their stomach or intestines (which is called gastrointestinal, or GI, bleeding). This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a lower rate of deaths for this condition. A lower number is shown by a shorter bar on the graph below.

**Average of hospitals across the state:** The average rate of patients who died after being admitted with GI bleeding, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Medical complications for patients having operations

This Report includes ten indicators showing how often patients experienced a complication or problem as a result of having an operation. These complications can be serious, even fatal. Each of them can be prevented if steps are taken to make care safer. Definitions of each indicator are provided below.

Please check the box next to each indicator you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/Left)

Select All Indicators

☐ Rate of complications of anesthesia
How often patients experienced problems as a result of having anesthesia, i.e. being “put to sleep” before having an operation or procedure.

☐ Rate of hip fracture after an operation
How often hospital patients broke a hip bone from a fall following any kind of operation.

☐ Rate of too much bleeding or blood clots after an operation
How often patients bled too much (called hemorrhaging) or developed a large blood clot after an operation (which is called a hematoma).

☐ Rate of abnormal changes in body functions after an operation
How often hospital patients experienced problems with blood sugar control (if they have diabetes) or kidney failure (if they did not have previous kidney trouble) after having an operation (these problems are called postoperative physiologic and metabolic derangements).

☐ Rate of breathing failure after an operation
How often patients became unable to breathe on their own following an operation, and needed a ventilator (a machine that helps someone breathe), at least temporarily. (This is called postoperative respiratory failure.)

☐ Rate of blood clots in the lung or a large vein, after an operation
How often hospital patients developed a blood clot that ends up in the lungs (which is called a pulmonary embolism) or in a large vein (which is called deep vein thrombosis), after an operation.

☐ Rate of bloodstream infection following an operation
How often hospital patients got a serious bloodstream infection following an operation (which is called postoperative sepsis).

☐ Rate of splitting open of a surgical wound after an operation on the stomach or pelvis
How often a surgical wound in the stomach or pelvic area split open after an operation. (This is called postoperative wound dehiscence in abdominopelvic surgical patients.)
Rate of surgical instrument or tool accidentally left in a patient’s body
How often a surgical instrument or tool (called a *foreign body*), such as a scalpel or a sponge, was accidentally left in a patient’s body during an operation.

Rate of patients having air leaking out of their lung
How often air leaks out of the patient’s lung because someone accidentally punctured during a medical procedure or operation (a complication called *iatrogenic pneumothorax*).

**Compare Hospital Scores**
Compare hospital scores on medical complications for patients having operations

When you are choosing a hospital, you should look for the hospital that does **Better than average** on the topics that are most important to you, or on as many items as possible.

Click on the indicator names for detailed results on how each hospital performed.

<table>
<thead>
<tr>
<th>Rate is the percent of surgical patients who experienced a particular problem following their operation during [insert year].</th>
<th>A hospital’s score is calculated in comparison to the average of hospitals across the state. Average is about the same as the average of hospitals across the state. <strong>Better than average</strong> is better than the average of hospitals across the state. <strong>Worse than average</strong> is worse than the average of hospitals across the state.</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Medical Complications for Patients Having Operations</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rate of complications of anesthesia</strong></td>
<td>Better than average</td>
<td>Average</td>
<td>Worse than average</td>
<td>Better than average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is <strong>8</strong> for every <strong>10,000</strong> patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of hip fracture after an operation</strong></td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Average</td>
<td>Average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is <strong>3</strong> for every <strong>10,000</strong> patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of too much bleeding or blood clots after an operation</strong></td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Average</td>
<td>Average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is <strong>2</strong> for every <strong>1,000</strong> patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of abnormal changes in body function after an operation</strong></td>
<td>Better than average</td>
<td>Better than average</td>
<td>Average</td>
<td>Better than average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is <strong>10</strong> for every <strong>10,000</strong> patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of breathing failure after an operation</strong></td>
<td>Worse than average</td>
<td>Average</td>
<td>Worse than average</td>
<td>Better than average</td>
</tr>
<tr>
<td>The average rate for hospitals across the state is <strong>9</strong> for every <strong>1,000</strong> patients.</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Condition</td>
<td>Average Rate</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Better than average</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
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<td>--------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td><strong>Rate of blood clots in the lung or large vein, after an operation</strong></td>
<td>10 for every 1,000 patients</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of bloodstream infection following an operation</strong></td>
<td>11 for every 1,000 patients</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Better than average</td>
</tr>
<tr>
<td><strong>Rate of splitting open of a surgical wound after an operation on the stomach or pelvic area</strong></td>
<td>11 for every 10,000 patients</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Better than average</td>
</tr>
<tr>
<td><strong>Rate of surgical instrument or tool accidentally left in a patient’s body</strong></td>
<td>3 for every 100,000 patients</td>
<td>Better than average</td>
<td>Better than average</td>
<td>Worse than average</td>
</tr>
<tr>
<td><strong>Rate of patients having air leaking out of the lung</strong></td>
<td>9 for every 10,000 patients</td>
<td>Better than average</td>
<td>Worse than average</td>
<td>Average</td>
</tr>
</tbody>
</table>
Rate of complications of anesthesia

This graph shows you the percent of patients who experienced problems as a result of having anesthesia, meaning being “put to sleep” before having an operation or medical procedure. This information is for patients admitted during [insert year]. Please note: this is a very rare event.

When choosing a hospital, you should look for the hospital that has a lower rate of complications from anesthesia. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of complications from anesthesia of patients in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of hip fracture after an operation

This graph shows you the percent of patients who broke a hip from a fall following any kind of operation. A fall can happen for different reasons, such as being given too much pain medication, or having too little supervision when trying to walk after an operation. Or, it may just happen. This information is for patients admitted during [insert year]. Please note that this is a very rare event.

When choosing a hospital, you should look for the hospital that has a lower rate of postoperative hip fractures. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of patients with hip fractures after an operation, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of too much bleeding or blood clots after an operation

This graph shows you how often patients bled too much (called hemorrhaging) or developed a large blood clot (called a hematoma) after an operation. All of these complications involved another operation to stop the bleeding or remove the blood clots. This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a lower rate for this complication. A lower rate is shown by a shorter bar on the graph below.

![Graph showing rate of too much bleeding or blood clots after an operation]

**Average of hospitals across the state**: The average rate of patients who had too much bleeding, or blood clots after an operation, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of abnormal changes in body functioning after an operation

This graph shows you the percent of patients experienced problems with blood sugar control (if they have diabetes) or kidney failure (if they did not have previous kidney trouble) after having an operation (these complications are called *postoperative physiologic and metabolic derangements*). This information is for patients admitted during [insert year]. Please note that this is a very rare event.

When you are choosing a hospital, you should look for the hospital that has a *lower* rate for this complication. A *lower* number is shown by a *shorter* bar on the graph below.

### Average of hospitals across the state:
The average rate of patients with abnormal changes in body functioning, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of breathing failure after an operation

This graph shows you the percent of patients who became unable to breathe on their own following an operation, and who needed a ventilator, which is a machine that helps someone breathe, at least temporarily (which is called *postoperative respiratory failure*). This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has lower rates for this complication. A lower number is shown by a shorter bar on the graph below.

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Rate for every 1,000 patients, [insert year]</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSPITAL D</td>
<td>6</td>
</tr>
<tr>
<td>HOSPITAL B</td>
<td>9</td>
</tr>
<tr>
<td>Average of hospitals across the state</td>
<td>9</td>
</tr>
<tr>
<td>HOSPITAL A</td>
<td>11</td>
</tr>
<tr>
<td>HOSPITAL C</td>
<td>14</td>
</tr>
</tbody>
</table>

**Average of hospitals across the state:** The average rate of patients with breathing failure after an operation, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of blood clots in the lung or large veins after an operation

This graph shows you the percent of patients who developed a blood clot in the lungs (which is called a pulmonary embolism) or in a large vein (which is called deep vein thrombosis) following an operation. This information is for patients admitted during [insert year].

These clots can be life-threatening. When you are choosing a hospital, you should look for the hospital that has lower rates for this complication. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of patients with blood clots in the lung or large veins after an operation, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of bloodstream infection following an operation

This graph shows you the percent of patients who got a bloodstream infection following an operation (which is called *postoperative sepsis*). This information is for patients admitted during [insert year].

When you are choosing a hospital, you should look for the hospital that has lower rates for this complication. A lower number is shown by a shorter bar on the graph below.

**Average of hospitals across the state:** The average rate of patients with bloodstream infections following an operation, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of splitting open of a surgical wound after an operation on the stomach or pelvic area

This graph shows you the percent of patients having an operation in their stomach or pelvic area whose wound split open after an operation (which is called *postoperative wound dehiscence*). All of these complications were treated with another major operation to fix the wound. This information is for patients admitted during [insert year]. **Please note that this is a very rare event.**

When choosing a hospital, you should look for the hospital that has **lower** rates for this complication. A **lower** number is shown by a **shorter** bar on the graph below.

**Average of hospitals across the state:** The average rate of patients with splitting open of a surgical wound after an operation on the stomach or pelvis splitting, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of surgical instrument or tool accidentally left in a patient’s body

This graph shows you how often a surgical instrument or tool (called a foreign body), such as a scalpel or sponge, was accidentally left in a patient’s body after an operation. This information is for patients admitted during [insert year]. Please note: this is a very rare event.

Even though a patient may not feel anything, having a surgical instrument or tool left behind can cause infection or cuts and be very dangerous. When choosing a hospital, you should look for the hospital that has lower rates for this indicator. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate at which surgical tools were accidentally left in a patient’s body, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of patients having air leaking out of the lung

This graph shows you how often air leaks out of the lung because someone accidentally punctured it as a result of a medical procedure (called *iatrogenic pneumothorax*). Iatrogenic pneumothorax sometimes requires putting a tube into a patient’s chest to remove the extra air. This information is for patients who were admitted during [insert year]. Please note that this is a very rare event.

When choosing a hospital, look for the hospital that has a **lower** rate for this complication. A **lower** rate is shown by a **shorter** bar on the graph below.

### Rate of patients having air leaking out of the lung

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Rate for every 10,000 patients, [insert year]</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSPITAL D</td>
<td>2</td>
</tr>
<tr>
<td>HOSPITAL A</td>
<td>3</td>
</tr>
<tr>
<td>HOSPITAL C</td>
<td>9</td>
</tr>
<tr>
<td>Average of hospitals across the state</td>
<td>9</td>
</tr>
<tr>
<td>HOSPITAL B</td>
<td>14</td>
</tr>
</tbody>
</table>

**Average of hospitals across the state**: The average rate of patients with this complication in hospitals across your state. This number is included so you have:
- a better idea of what is normal for your state.
- a basis for comparing individual hospitals’ performance.
Medical complications in the hospital, for adult patients

This Report includes nine indicators showing how often adult hospital patients experienced a medical complication or problem during a hospital stay. These complications can be serious, even fatal. Each of them can be potentially prevented if steps are taken to make care safer.

Please check the box next to each indicator you care about. You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Death rate from failure to identify and treat a serious complication
   How often patients died after developing a complication that should have been identified quickly and treated (called failure to rescue).

☐ Death rate for patients with health problems that rarely result in death
   How often patients died in the hospital when they had been admitted for a health problem that rarely results in death. (This is called death in low mortality DRGs, i.e. diagnosis-related groups.)

☐ Rate of infections due to medical care
   How often patients got certain types of infections as a result of the care they received in the hospital.

☐ Rate of patients with bed sores
   How often patients developed a bed sore (called a decubitus ulcer), which is a sore or wound on the skin. This can occur because people are lying in one position for too long.

☐ Rate of blood transfusion reaction
   How often patients in the hospital had a reaction because they received the wrong type of blood. (This is called a transfusion reaction).

☐ Rate of accidental cuts and tears
   How often patients were accidentally cut, making an unnecessary or dangerous hole or tear in an organ of the body (called an accidental puncture and laceration), while receiving medical care in the hospital.

Compare Hospital Scores
Compare hospital scores on medical complications, for adult patients

When you are choosing a hospital, you should look for the hospital that does **Better than average** on the topics that are most important to you, or on as many items as possible.

Click on the indicator names for detailed results on how each hospital performed.

<table>
<thead>
<tr>
<th>Medical complications, for adult patients</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Death rate</strong> is the percent of patients who were treated for a particular illness or had a particular procedure who died while in each hospital during [insert year].</td>
<td><strong>Better than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td><strong>Rate</strong> is the percent of patients who experienced a particular problem while in the hospital during [insert year].</td>
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<tr>
<td>A hospital’s score is calculated in comparison to the average of hospitals across the state.</td>
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<tr>
<td>Average is about the same as the average of hospitals across the state.</td>
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<tr>
<td><strong>Better than average</strong> is better than the average of hospitals across the state.</td>
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</tr>
<tr>
<td><strong>Worse than average</strong> is worse than the average of hospitals across the state.</td>
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<td></td>
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</tr>
<tr>
<td><strong>Death rate from failure to identify and treat a serious complication</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
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<tr>
<td>The average rate of death for hospitals across the state is 12 for every 100 patients.</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td><strong>Death rate for patients with health problems that rarely result in death</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Worse than average</strong></td>
</tr>
<tr>
<td>The average rate of death for hospitals across the state is</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of patients with bed sores</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td>The average rate for hospitals across the state is 3 for every 100 patients.</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of infections due to medical care</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td>The average rate for hospitals across the state is 3 for every 1,000 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of blood transfusion reaction</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Worse than average</strong></td>
</tr>
<tr>
<td>The average rate for hospitals across the state is 5 for every 1,000,000 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Rate of accidental cuts and tears</strong></td>
<td><strong>Average</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Average</strong></td>
</tr>
<tr>
<td>The average rate for hospitals across the state is 2 for every 1,000 patients.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Death rate from failure to identify and treat a serious complication

This graph shows you the percent of patients who died because they developed a complication that should have been identified quickly and treated by hospital staff (which is called failure to rescue). This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has **lower** death rates for this indicator. A **lower** number is shown by a **shorter** bar on the graph below.

![Death rate from failure to identify and treat a serious complication](chart)

**Average of hospitals across the state**: The average rate of patients who died from failure to identify and treat a serious complication, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Death rate for patients with health problems that rarely result in death

This graph shows you how often patients died in the hospital when they were admitted for a health problem or condition that rarely results in death. (This is called death in low mortality DRGs.) This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a lower rate of deaths for this indicator. A lower rate is shown by a shorter bar on the graph below.

---

**Average of hospitals across the state:** The average rate of deaths for patients admitted to the hospital with health problems that rarely result in death in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of patients with bed sores

This graph shows you the percent of patients who developed bed sores, which are sores or wounds on the skin (called a *decubitus ulcer*), during their hospital stay. Usually this happens when patients are lying in one position for too long and can often be prevented. This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a **lower** rate for this complication. A **lower** number is shown by a **shorter** bar on the graph below.

**Average of hospitals across the state:** The average rate of patients with bed sores in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of infections due to medical care

This graph shows you the percent of patients who got certain types of infections as a result of care they received while in the hospital. These include infections related to intravenous tubes and fluids, treatment of kidney failure, transfusions, and other types of shots. This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a **lower** rate for this topic. A **lower** number is shown by a **shorter** bar on the graph below.

**Average of hospitals across the state:** The average rate of patients with certain types of infections due to medical care, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of blood transfusion reaction

This graph shows you the percent of patients who had a reaction because they received the wrong type of blood (which is called a *transfusion reaction*). This situation can largely be avoided if the blood is tested correctly beforehand and the right blood is given to the right patient. This information is for patients admitted during [insert year]. Please note this is a very rare event.

A blood transfusion reaction can be very serious. When choosing a hospital, you should look for the hospital that has lower rates for this indicator. A lower number is shown by a shorter bar on the graph below.

<table>
<thead>
<tr>
<th>Hospital</th>
<th>Rate for every 1,000,000 patients, [insert year]</th>
</tr>
</thead>
<tbody>
<tr>
<td>HOSPITAL B</td>
<td>1</td>
</tr>
<tr>
<td>HOSPITAL A</td>
<td>3</td>
</tr>
<tr>
<td>Average of hospitals across the state</td>
<td>5</td>
</tr>
<tr>
<td>HOSPITAL C</td>
<td>5</td>
</tr>
<tr>
<td>HOSPITAL D</td>
<td>6</td>
</tr>
</tbody>
</table>

**Average of hospitals across the state**: The average rate of patients who had a blood transfusion reaction, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of accidental cuts and tears

This graph shows you the percent of patients who were accidentally cut or injured, making a hole or tear in an organ of the body, while receiving medical care (which is called *accidental puncture and laceration*). This information is for patients admitted during [insert year].

When choosing a hospital, you should look for the hospital that has lower rates for this complication. A lower number is shown by a shorter bar on the graph below.

---

**Average of hospitals across the state:** The average rate of patients who had accidental cuts and tears, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Quality of medical care, for children

Information is available in the Report about eight indicators of the quality of care for children in the hospital. The information does not cover what happens to anyone over the age of 18. Definitions of each of the indicators are provided below.

Please check the box next to each topic you care about.
You can return to this page and pick another overall score whenever you like, using the tabs on the (top/left)

Select All Indicators

☐ Rate of breathing failure among children after an operation
How often children became unable to breathe on their own following an operation, and needed a ventilator (a machine that helps someone breathe), at least temporarily (which is called postoperative respiratory failure.)

☐ Rate of splitting open of a surgical wound among children after an operation on the stomach or pelvis
How often a surgical wound in the stomach or pelvic area of a child split open after an operation (which is called postoperative wound dehiscence in abdominopelvic surgical patients.)

☐ Rate of too much bleeding or blood clots after an operation, among children
How often children bled too much (called hemorrhaging), or developed a large blood clot (called a hematoma) after an operation.

☐ Rate of bed sores in hospitalized children
How often children in the hospital developed a bed sore (called a decubitus ulcer), which is a sore or wound on the skin. This can occur because children are lying in one position for too long.

☐ Rate of blood transfusion reaction in hospitalized children
How often children in the hospital had a reaction because they received the wrong type of blood (which is called a transfusion reaction).

☐ Rate of surgical instrument or tool accidentally left in a child’s body
How often a surgical instrument or tool (called a foreign body), such as a scalpel or a sponge, was accidentally left in a child’s body during an operation.

☐ Rate of children other than newborns having air leaking out of their lung
How often air leaked out of a child’s lung because someone accidentally punctured it as a result of a medical procedure (which is callediatrogenic pneumothorax). This rate is for children other than newborns.

☐ Death rate of children having heart operations
How often children died in the hospital following heart operations.

Additional information: Number of operations
Information is also available about the number of times heart operations on children were done at individual hospitals. Research shows that, in general, when hospitals do these operations frequently, they are more likely to have good results. However, experts do not always agree on the minimum number needed to achieve high quality.

You will find a graph for this indicator on the same page as the death rate.
### Compare hospital scores on medical care for children

When you are choosing a hospital, you should look for the hospital that does **Better than average** on the topics that are most important to you, or on as many items as possible.

Click on any of the indicators to see details on how each hospital performed on that particular indicator.

<table>
<thead>
<tr>
<th><strong>Rate</strong> is the percent of children who experienced a particular medical problem as a result of the care they received in each hospital during [insert year].</th>
<th><strong>A hospital’s score is calculated in comparison to the average of hospitals across the state.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Death rate</strong> is the percent of children who had a particular procedure and who died while in each hospital during [insert year].</td>
<td><strong>Average</strong> is about the same as the average of hospitals across the state. <strong>Better than average</strong> is better than the average of hospitals across the state. <strong>Worse than average</strong> is worse than the average of hospitals across the state.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Medical care for children</th>
<th>Hospital A</th>
<th>Hospital B</th>
<th>Hospital C</th>
<th>Hospital D</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Rate of breathing failure in children following an operation</strong>&lt;br&gt;The average rate for hospitals across the state is 14 for every 1,000 child patients.</td>
<td><strong>Better than average</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Worse than average</strong></td>
</tr>
<tr>
<td><strong>Rate of splitting open of a surgical wound after an operation on the stomach or pelvis of a child</strong>&lt;br&gt;The average rate for hospitals across the state is 8 for every 10,000 child patients.</td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td><strong>Rate of too much bleeding or blood clots in children following an operation</strong>&lt;br&gt;The average rate for hospitals across the state is 2 for every 1,000 child patients</td>
<td><strong>Better than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Average</strong></td>
</tr>
<tr>
<td><strong>Rate of bed sores in hospitalized children</strong>&lt;br&gt;The average rate for hospitals across the state is 3 for every 1,000 child patients</td>
<td><strong>Better than average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td><strong>Rate of blood transfusion reaction in hospitalized children</strong>&lt;br&gt;The average rate for hospitals across the state is 2 for every 1,000,000 child patients</td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td><strong>Rate of surgical instrument or tool accidentally left in child’s body</strong>&lt;br&gt;The average rate for hospitals across the state is 3 for every 100,000 child patients</td>
<td><strong>Worse than average</strong></td>
<td><strong>Average</strong></td>
<td><strong>Worse than average</strong></td>
<td><strong>Better than average</strong></td>
</tr>
<tr>
<td>Rate of children having air leaking out of their lung</td>
<td>Better than average</td>
<td>Average</td>
<td>Worse than average</td>
<td>Better than average</td>
</tr>
<tr>
<td>-----------------------------------------------------</td>
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</tr>
<tr>
<td>The average rate for hospitals across the state is 2 for every 10,000 child patients</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Death rate for children having heart operations</th>
<th>Better than average</th>
<th>Better than average</th>
<th>Worse than average</th>
<th>Better than average</th>
</tr>
</thead>
<tbody>
<tr>
<td>The average rate of death for hospitals across the state is 5 for every 100 child patients.</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Rate of breathing failure among children after an operation

This graph shows you how often children having any kind of operation became unable to breathe on their own right afterwards, and needed a ventilator, which is a machine that helps someone breathe, at least temporarily (a complication that is called *postoperative respiratory failure*). This information is for patients under 18 admitted during [insert year].

When choosing a hospital, you should look for the hospital that has lower rates for this topic. A lower number is shown by a shorter bar on the graph below.

**Average of hospitals across the state:** The average rate of children with breathing failure after an operation, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of splitting open of a surgical wound after an operation on the stomach or pelvic area among children

This graph shows you the percent of children having an operation in their stomach or pelvic area whose wound split open after an operation (which is called *postoperative wound dehiscence*). All of these complications were treated with another major operation to fix the wound. This information is for patients admitted during [insert year]. **Please note that this is a very rare event.**

When choosing a hospital, you should look for the hospital that has **lower** rates for this complication. A **lower** number is shown by a **shorter** bar on the graph below.

![Graph showing rates of splitting open of surgical wounds for different hospitals and the average across the state.]

**Average of hospitals across the state:** The average rate of children who had surgical wounds in the stomach or pelvis split open after an operation, in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of too much bleeding or blood clots after an operation, among children

This graph shows you how often children bled too much (called hemorrhaging) or developed a large blood clot (called hematoma) after an operation. All of these complications involved another operation to stop the bleeding or remove the blood clots. This information is for patients under 18 admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a lower rate for this complication. A lower rate is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of children with too much bleeding or blood clots in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance
Rate of hospitalized children with bed sores

This graph shows you how often children in the hospital developed a bed sore (which is called a *decubitus ulcer*), which is a sore or wound on the skin. This can occur because children are lying in one position for too long. This information is for patients under 18 admitted during [insert year].

When choosing a hospital, you should look for the hospital that has a **lower** rate for this complication. A **lower** number is shown by a **shorter** bar on the graph below.

**Average of hospitals across the state**: The average rate of children with bed sores in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance
Rate of blood transfusion reaction among children

This graph shows you how often children in the hospital had a reaction because they received the wrong type of blood. (This is called a \textit{transfusion reaction}.) This situation can largely be avoided if the blood is tested correctly and the right blood is given to the right patient. A blood transfusion reaction can be very serious. This information is for patients under 18 admitted during [insert year]. \textbf{Please note this is a very rare event.}

When choosing a hospital, you should look for the hospital that has \textbf{lower} rates for this indicator. A \textbf{lower} number is shown by a \textbf{shorter} bar on the graph below.

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{rate_of_blood_transfusion_reaction}
\caption{Rate of blood transfusion reaction among children}
\end{figure}

\textbf{Average of hospitals across the state:} The average rate of children who had a blood transfusion reaction, in hospitals across your state. This number is included so you have:
\begin{itemize}
\item a better idea of what is typical for your state.
\item a basis for comparing individual hospitals’ performance.
\end{itemize}
Rate of surgical instrument or tool accidentally left in a child’s body

This graph shows you how often a surgical instrument or tool (called a foreign body), such as a scalpel or a sponge, was accidentally left in a child’s body during an operation. This information is for patients under 18 admitted during [insert year]. Please note: this is a very rare event.

Having a surgical instrument or tool left behind can cause infection or cuts and be very dangerous. When choosing a hospital, you should look for the hospital that has lower rates for this indicator. A lower number is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate at which surgical tools were accidentally left in a child’s body, in hospitals across your state. This number is included so you have:
- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Rate of children (other than newborns) having air leaking out of their lung

This graph shows you how often air leaks out of a child’s lung because someone accidentally punctured it during a medical procedure (a complication which is called iatrogenic pneumothorax). Iatrogenic pneumothorax sometimes requires putting a tube into a child’s chest to remove the extra air. This information is for patients under 18, other than newborns, who were admitted during [insert year]. Please note that this is a very rare event.

When choosing a hospital, look for the hospital that has a lower rate for this complication. A lower rate is shown by a shorter bar on the graph below.

Average of hospitals across the state: The average rate of patients with this complication in hospitals across your state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
Heart operations performed on children – Death rate and number of operations

The two graphs on this page show you the quality of hospital care related to heart operations performed on children. This information is for patients under 18 admitted during [insert year].

The graph on the left side of the page shows you how often children died following this operation. The graph on the right shows the number of times a hospital performed this operation. Research shows that, in general, when hospitals do these procedures frequently, they are more likely to have good results. Often, but not always, a hospital that has a higher number of operations (right graph) will have lower death rates (left graph).

Death rate of children having heart operations

When choosing a hospital, look for the hospital that has a lower number of deaths. A lower number is shown by a shorter bar on the graph below.

Number of heart operations performed on children

When choosing a hospital, look for the hospital that has a higher number of operations. A higher number is shown by a longer bar on the graph below.

Average of hospitals across the state: The average number of deaths in children following this operation in the hospitals across the state. This number is included so you have:

- a better idea of what is typical for your state.
- a basis for comparing individual hospitals’ performance.
How should you use the Report?

How can this information help you? First and foremost, if you or someone you care about expects to be admitted to a hospital in the near future, you can use this information to help you choose a hospital. The information can help you rule out certain hospitals because the information indicates they do not perform well. It can help you find a hospital that is especially good at treating the conditions you face, or especially good at avoiding complications. The report can also help you make a final choice between two or three hospitals with good reputations.

The best way to use this particular report is also to look for patterns in the scores. Some hospitals may do very well across the board; others may do well in some areas and not in others; still others may really show problems in a wide range of areas. Look carefully for these patterns. At the same time, if there is a particular surgery, or medical condition, or complication that is of particular concern to you, you will want to give more weight to information related to those concerns.

Several factors go into making a hospital choice. For example, you may have to use the specific hospitals in the “network” of your health plan. If you have to go to a hospital in the network whose scores in this report are troubling to you, bring the information to your doctor to discuss it. You may want to ask your doctor to be especially vigilant to ensure that certain problems that are worrying you are avoided.

Second, you can only be admitted to a hospital by a doctor, and doctors typically have “admitting privileges,” the right to admit patients, at one or a few hospitals. So when you choose a doctor, and especially when you choose a specialist, you may actually be choosing a hospital at the same time. So when your regular doctor refers you to a specialist, ask the question “Where can this specialist admit patients?” Then, before committing yourself to a particular specialist, check out their hospital in this report. Again, if the information troubles you, bring it back to your doctor and see if you can be referred to a specialist who practices at a hospital that performs well on the topics that are important to you.

Remember, it’s your life, and your health. Most physicians and hospitals are happy to talk with patients about information from reliable sources, and they care about your preferences. You certainly have the right to raise issues with them and get answers to your questions.
A few things to keep in mind as you use the Report

This Report is a starting point for looking at the quality of care at a particular hospital. The overall scores and specific topic results are not the final word. There are a few things to keep in mind when looking at this report.

• Neither the summary scores nor the specific topics cover all health conditions or surgeries.

As new information becomes available, this report may be updated.

• The Report doesn’t address all aspects of quality.

For example, this report does not include information on what patients say about their care in the hospital, or information on whether hospitals consistently follow steps known to lead to better results. Information like this is available for many American hospitals on a federal government website called Hospital Compare. [Click here to go to the Hospital Compare website.]

The Report also does not include information on the specific services provided by a hospital. That information is best obtained directly from the hospital itself. [Click here for a list of hospitals included in this Report and how to contact them.]

• Don’t presume that because a hospital does well (or poorly) in one area of health care, that it will do well (or poorly) in all areas.

Hospitals can have strengths and weaknesses in providing different types of care. For example, there are many different kinds of cancers, each of which is treated differently. A hospital that has good scores on surgery involving cancer of the pancreas may not do so well with a different type of cancer.

• In some cases, the specific topics track serious failures in a hospital’s performance which happen only once in a great while.

You have to be careful when comparing hospitals on these very rare events. The numbers are so small that it is hard to know when a difference means something or just happens by chance. An example would be a reaction to a blood transfusion, which happens in only a handful of cases out of a million people each year.
• Don’t give too much weight to small differences between hospitals.

Even on more common events, be careful not to give too much weight to small differences. If in one hospital, 25 people out of a thousand had too much bleeding after surgery, and in another hospital, 26 people out of a thousand did, that’s a really small difference and you shouldn’t worry about it.

• Some differences in scores may reflect the age of patients or how sick patients are rather than the care provided by the hospital.

Hospitals vary in quality, but they also vary in terms of their patients. Their patients can be differ in terms of their age, or in terms of how sick they are. If one hospital takes care of people who happen to be older, or sicker, that hospital’s patients are more likely to die or have certain complications, no matter how good the hospital is.

We want to show you differences that relate to how hospitals actually perform, rather than differences that relate to how old or sick their patients are. So to the extent possible, the information in this Report takes account of differences between hospitals in the age of their patients, and how sick they are. The scores in this report have been calculated to try to take account of these differences. For details about how the scores in this report were developed, Click here for Technical Details about the Quality Information in this Report
Hospital Quality: What is it? Where can I find learn more about it?

Quality in health care, including in hospitals, can be described as “doing the right thing, at the right time, in the right way -- and having the best possible results.”

The Institute of Medicine recently stated that high quality health care is:

- **Effective:** Treatment uses scientific knowledge and medical experience to increase the chances of getting the best results, and decrease the chance of getting bad results, including death.
- **Safe:** Treatment does not result in medical complications or cause harm to the patient that can be prevented.
- **Patient-centered:** Doctors, nurses, and other medical staff treat patients with respect, dignity and compassion, and are responsive to patients’ needs, values, and preferences.
- **Timely:** Patients get the care they need without harmful delays.
- **Efficient:** Treatment does not waste doctors’ or patients’ time or money.
- **Equitable:** The same level of care is available to everyone, including men, women and children of all cultures, incomes, education level, social status or any other characteristic.

Where to learn more about Hospital Quality

The information in this Report deals with the first two aspects of hospital quality described above – effective care and safe care. If you are interested in other aspects of quality care, here are some resources that can help. We also list websites with materials to help you think through the process of choosing a hospital.

**Hospital Compare – Department of Health and Human Services**

- *Hospital Compare* is a website with quality information on almost all hospitals in the US. Current information includes measures of timely and effective care for three conditions: heart attack, heart failure and pneumonia. There is also a measure of safe care, the surgical infection prevention rate.

  In the next year or so, the website will add two kinds of new information: information similar to this report about death rates for patients admitted for different operations and medical conditions, and information about patients’ experiences in hospitals, such as how well doctors and nurses communicate with patients and how responsive hospital staff are to patient needs. Go to [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov).

  In addition, the *Hospital Compare* website provides a *Hospital Checklist* that you can use to think through a range of issues to consider in choosing a hospital. Go to [http://www.hospitalcompare.hhs.gov/Hospital/Static/About-HospChecklist.asp](http://www.hospitalcompare.hhs.gov/Hospital/Static/About-HospChecklist.asp)
Agency for Healthcare Research & Quality (AHRQ)


- Be an Active Health Care Consumer ([http://www.ahrq.gov/path/beactive.htm](http://www.ahrq.gov/path/beactive.htm)), an AHRQ web page that includes a list of quality tools and information for people who want to take an active role in their health care. Among the resources is a booklet, *Guide to Health Care Quality: How to Know it When You See It*

To contact AHRQ by mail write to:
Agency for Healthcare Research and Quality
Office of Communications and Knowledge Transfer
540 Gaither Road, Suite 2000
Rockville, MD 20850.

To reach them by phone, call (301) 427-1364

Joint Commission on the Accreditation of Healthcare Organizations

This organization (JCAHO) is the primary group that reviews and accredits hospitals in the United States.

- Quality Check ([http://www.qualitycheck.org/consumer/searchQCR.aspx](http://www.qualitycheck.org/consumer/searchQCR.aspx)), a site of the Joint Commission on the Accreditation of Healthcare Organizations, on which you can look up hospitals that meet this organization’s patient safety and quality standards.

To reach JCAHO with a general question, call 630-792-5000.

To order JCAHO publications, call 877-223-6866
If you have concerns and complaints about your care

If you have a complaint about the quality of the medical care you or a loved one received at a hospital, first contact the hospital’s patient advocate. You can usually reach the patient advocate through the hospital’s telephone operator.

If you still need help, there are two agencies in every state that work on hospital quality.

- **The Quality Improvement Organization or QIO.** This is the organization to contact if you are not satisfied after calling the hospital’s patient advocate.
- **The State Survey Agency.** This is the organization to call if you have other complaints about a health care facility.

The phone numbers for the State Survey Agency and the Quality Improvement Organization in your state can be found at [www.medicare.gov/Contacts/Home.asp](http://www.medicare.gov/Contacts/Home.asp) Additional information about hospitals may be found on websites of these state agencies.

You can also contact the Complaint Hotline at the Joint Commission on the Accreditation of Healthcare Organizations (JCAHO).
Phone: 1-800-994-6610
E-mail: [complaint@jointcommission.org](mailto:complaint@jointcommission.org).
Technical details about the quality information in this Report

The quality indicator scores in this report are based on standardized information that all hospitals in our state are required to submit to (insert name of state agency). Hospitals have to demonstrate that the information they provide is accurate and complete. The (agency) actually calculates the scores, not the hospitals.

The specific indicators in this report were developed by the Agency for Healthcare Research and Quality (AHRQ), and are called the AHRQ Quality Indicators. AHRQ is a federal government agency whose mission is to improve the quality and safety of health care in the United States.

AHRQ saw a need for a set of hospital quality indicators that could be collected easily, based on information that was gathered in exactly the same way from hospital to hospital. Dozens of experts in health services research, internal medicine and pediatrics, statistics, and health care quality measurement worked together to develop and test these indicators to make sure they were medically meaningful, accurate and reliable. The indicators are regularly reviewed and updated. Click here for detailed information about the AHRQ Quality Indicators

AHRQ has developed several kinds of indicators. The ones in this Report include what are called Inpatient Quality Indicators, Patient Safety Indicators, and Pediatric Quality Indicators. Both of these sets of indicators relate primarily to the results of hospital care for patients.

Click here for detailed information about the AHRQ Inpatient Quality Indicators

Click here for detailed information about the AHRQ Patient Safety Indicators

Click here for detailed information about the AHRQ Pediatric Quality Indicators

How we analyzed the data and calculated scores

In this section of the website, the sponsor should present information about the methods they used in analyzing the data and calculating scores. For example, this is the place to explain how some hospitals were identified as being “better” or “worse” than average, additional details about risk-adjustment methods, and whether or not the data were smoothed, or combined for several years.