

Participating Hospitals & Publicly Released COAP Data

Welcome to the hospital outcomes section of the Clinical Outcomes Assessment Program (COAP) web site where you can find detailed information on the performance of Washington State hospitals in the area of cardiac care. ***What you will learn on this site is that all Washington State hospitals are doing a very good job in cardiac care, and our state is out-performing the national average in many areas.*** We hope that this site will be used by hospitals for their internal quality improvement initiatives; and by heart patients and their loved ones as information to discuss with their doctor.

COAP is a truly unique and ground-breaking collaborative. This physician-led quality improvement activity is aimed at improving the quality of care for patients with heart disease who are treated in Washington hospitals. Through COAP, hospitals have been working together since 1997 to share and learn from comparative cardiac care performance information—and they have steadily improved. ***There have been significant improvements in many areas, and Washington State hospitals have much to be proud of!*** We are very fortunate to live in a state where we can be assured that every hospital is dedicated to making sure that you are getting the best possible care by participating in quality improvement efforts such as COAP. ***To keep the momentum going, and to work for even greater improvement, we are now making COAP data publicly available for several key clinical measures.***

In Washington State, there are 34 hospitals that perform Percutaneous Coronary Interventions (PCI), 18 of which also perform Coronary Artery Bypass Graft (CABG) and Valve surgeries. ***Hospitals have voluntarily agreed to make information about their performance available publicly. The few that are not disclosing data at this time may have chosen not to for a variety of reasons, which can be discussed with your physician or surgeon.*** Data from CABG & Valve surgeries and PCI are included on this site. COAP measures are all “outcomes” measures, meaning that they measure the end result of the treatment—how patients fared.

In the following table, you will see whether your hospital performed better, not as good as, or within the range of the state average for each of the measures. You will also see comparisons to the statewide average. ***It is very important to note that there are many reasons why one hospital’s results might look different from another’s and that while a hospital may not be currently performing within the range of the state average, they may still be significantly better than the national average.*** We encourage you to discuss this information with your physician or surgeon. The data reported is from the 2013 annual risk-adjusted clinical reports. It highlights outcomes from 2013 for PCI and CABG surgery. Because of the relatively small number of valve surgeries performed, valve surgery outcomes are reported as 3-year averages for 2011-2013.

For up to date results on a variety of metrics, see the COAP Public Reporting Platform accessed from the link on the left side of the home page, or visit:

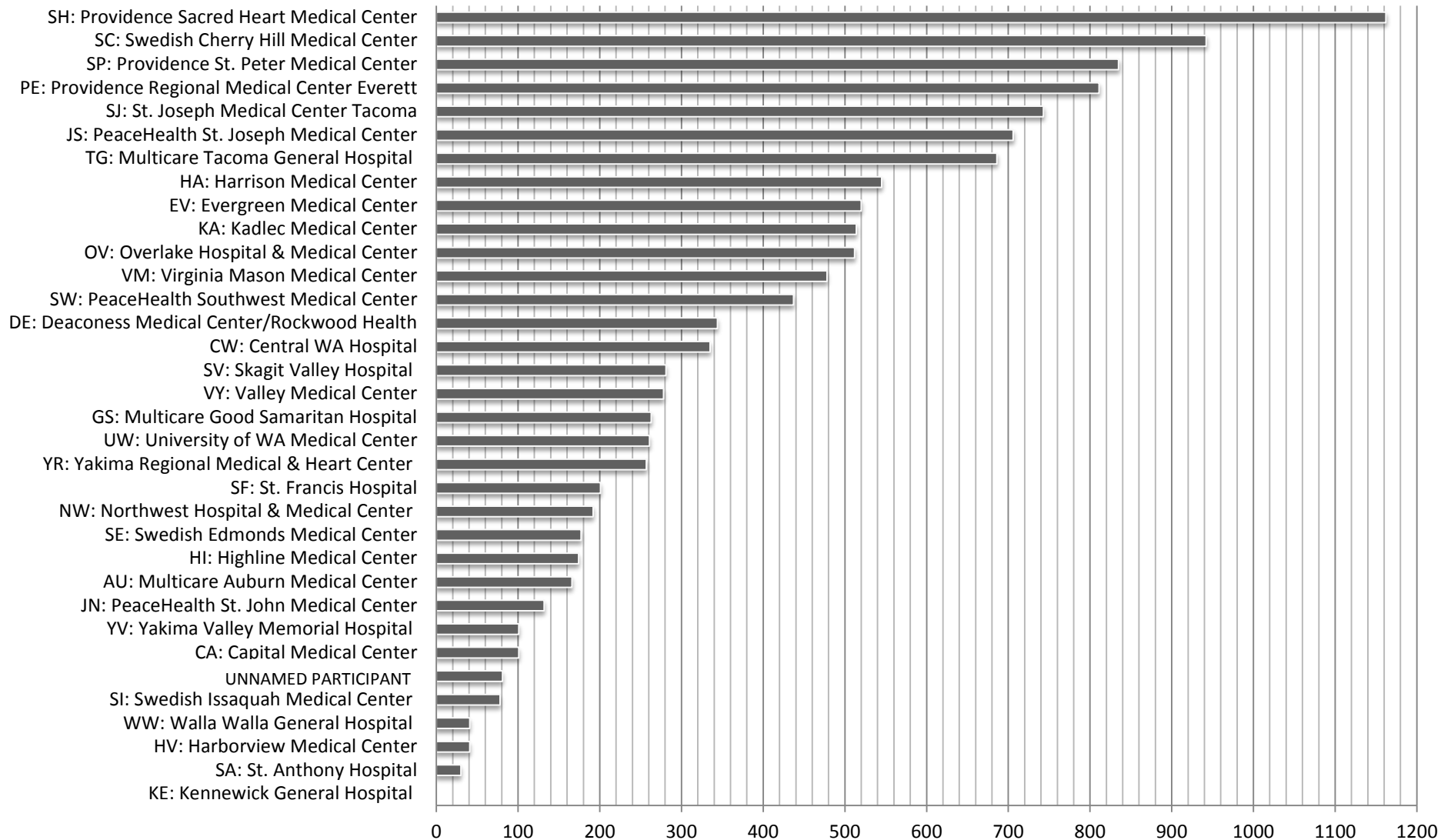
<http://www.coap.org/COAPPublicReporting/>

If you are interested in information on select *general surgical procedures*, visit the Surgical Care & Outcomes Assessment Program (SCOAP) website: <http://www.scoap.org/public/index.html>

Volume of PCI Cases 2013



CLINICAL **OUTCOMES ASSESSMENT** PROGRAM
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Percutaneous Coronary Intervention (PCI) Outcomes – 2013 Annual

- ① Risk-Adjusted Mortality - PCI 2013 State Average = [1.9%](#)
 ② Median Door to Balloon Time – PCI 2013- State Average = [57 Minutes](#); Benchmark = [46 minutes](#)
 ③ Insufficient Information – Non Acute PCI 2013 – State Average = [27%](#)

Symbols Key:	PCI Metrics	
<ul style="list-style-type: none"> ⊙ Hospital results for 2013 are within the range of the statewide average for that metric + Hospital results for 2013 are statistically better than the risk adjusted statewide average for that metric and/or have contributed to setting the benchmark for this measure ● Hospital results for 2013 are statistically not as good as the statewide average for that metric ◆ No data available for this hospital or no procedures done for this time period xxx Hospital is not currently releasing their data 	① Mortality	② Door to Balloon Time
<p>Black = Hospitals currently in full compliance with COAP's quality standards; Blue = hospitals currently in partial compliance with COAP's quality standards; Red = Hospitals currently out of compliance with COAP's quality standards</p>		
Auburn Regional Medical Center, Auburn	⊙	⊙
Capital Medical Center, Olympia	⊙	⊙
Central Washington Hospital, Wenatchee	⊙	⊙
Deaconess Medical Center, Spokane	⊙	⊙
Evergreen Hospital Medical Center, Kirkland	⊙	⊙
Good Samaritan Hospital, Puyallup	⊙	⊙
Harborview Medical Center, Seattle	⊙	⊙
Harrison Medical Center, Bremerton	⊙	⊙
Highline Medical Center, Burien	⊙	⊙
Kadlec Medical Center, Richland	+	+
Madigan Army Medical Center, Fort Lewis	xxx	xxx
Northwest Hospital & Medical Center, Seattle	⊙	⊙
Overlake Hospital Medical Center, Bellevue	⊙	⊙
PeaceHealth Southwest Washington Medical Center, Vancouver	⊙	⊙
Peace Health St. John, Longview	⊙	+
Peace Health St. Joseph Hospital, Bellingham	⊙	⊙
Providence Regional Medical Center, Everett	⊙	⊙
Providence Sacred Heart Medical Center, Spokane	⊙	⊙
Providence St. Peter Hospital, Olympia	⊙	+
Skagit Valley Hospital, Mt. Vernon	+	⊙
St. Anthony Hospital, Gig Harbor	⊙	⊙
St. Francis Hospital, Federal Way	⊙	⊙
St. Joseph Medical Center, Tacoma	⊙	⊙
Swedish Health Services, Cherry Hill, Seattle	⊙	+
Swedish Health Services, Edmonds	⊙	⊙
Swedish Health Services, Issaquah	⊙	
Tacoma General Hospital, Tacoma	⊙	⊙
University of Washington Medical Center, Seattle	⊙	⊙
Valley Medical Center, Renton	⊙	⊙
Veteran's Affairs Medical Center, Seattle	xxx	xxx
Virginia Mason Medical Center, Seattle	⊙	+
Yakima Regional Medical & Heart Center, Yakima	⊙	⊙
Yakima Valley Memorial Hospital, Yakima	⊙	⊙
Walla Walla Hospital, Walla Walla	⊙	+

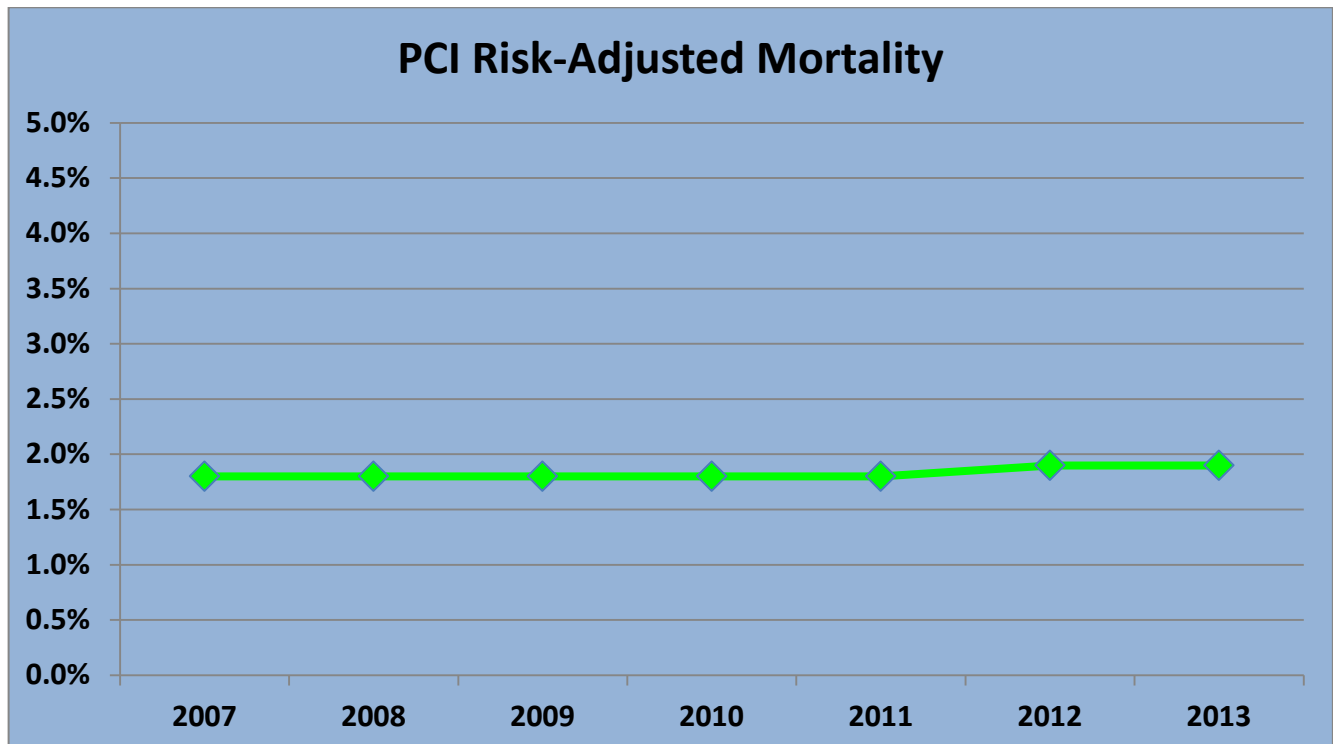
Percutaneous Coronary Intervention (PCI) Outcomes

PCI Risk-Adjusted Mortality Rate

34 hospitals in Washington State perform percutaneous coronary interventions, or PCI. PCI is a method of restoring blood flow to the heart muscle by reopening clogged arteries. Mortality rate is the percentage of patients who died before being discharged from the hospital following PCI for both elective and emergent procedures. All surgical procedures involve some risk. Additionally, all patients have their own particular risk factors such as previous medical and family history, current state of overall health, how long they have had their coronary disease, how long it has taken between onset of symptoms to treatment in an acute situation, and many others. Mortality rates for a hospital can be impacted by many things. For example, if a hospital does a low volume of this particular type of surgery, even one unavoidable death can make a significant impact on their mortality rate.

Results for this measure refer to the percentage of patients in Washington State that died during or following percutaneous coronary intervention (PCI). *Since 2007, the risk-adjusted statewide average has stayed very steady.* Overall, hospitals in Washington State are doing a very good job in keeping their mortality rates low. Individual hospital risk-adjusted results for 2013 range from a low of 0.0% to a high of 3.8%.

TRENDS:



Ask your physician about mortality rates for percutaneous coronary interventions at your hospital and specific risks associated with your particular case. Encourage them to examine their COAP report regarding mortality rates so they know you care!

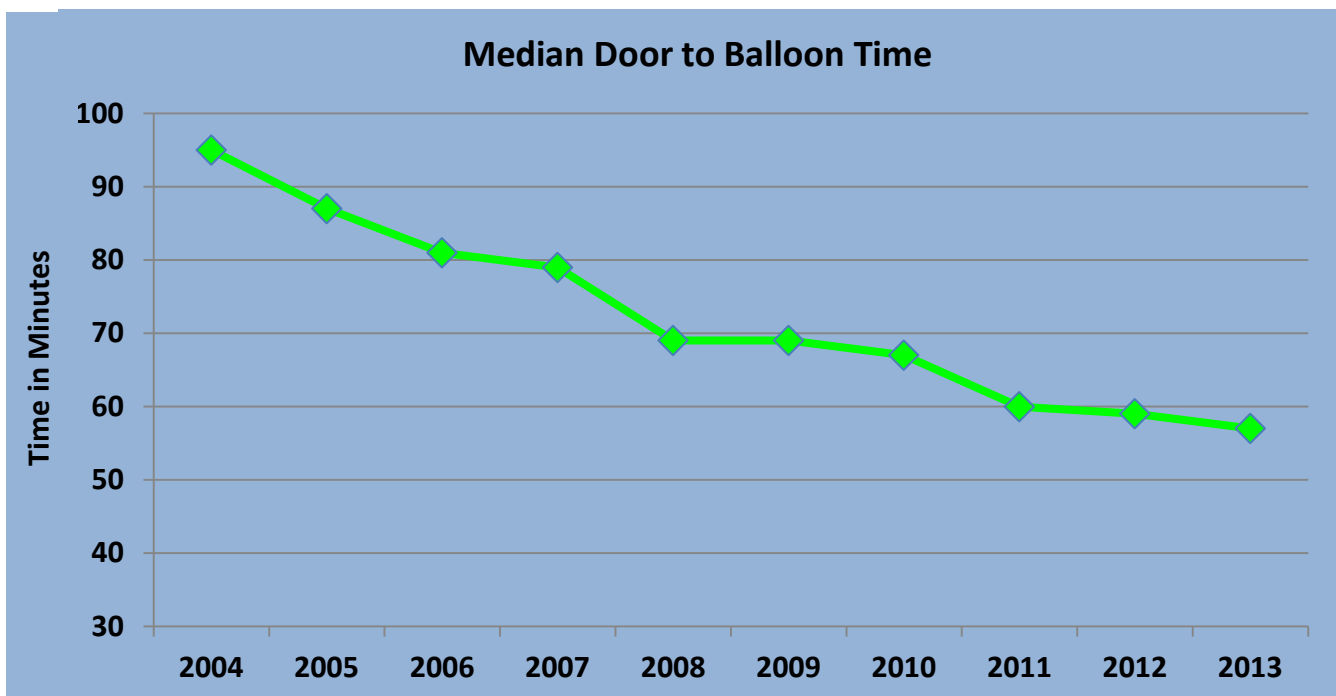
Median Time from Emergency Room Arrival to Balloon Inflation: “Door-to-Balloon Time”

34 hospitals in Washington State perform percutaneous coronary interventions, or PCI. PCI is a method of restoring blood flow to the heart muscle by reopening clogged arteries. This is often done by inflating a tiny balloon at the site of the blockage, and sometimes putting in a small metal device called a stent to hold the artery open. Experts agree that when a patient is having an acute heart attack, the quicker this happens, the better. The longer blood does not flow to the heart muscle during a heart attack, the more likely there could be damage to that muscle.

Door-to-Balloon Time is a measurement of the time between when a patient having an acute heart attack comes through the “door” of the emergency room and when the “balloon” is first inflated in the clogged artery. The *American Heart Association* and the *American College of Cardiology* along with many other national agencies recommend that this time interval be no more than 90 minutes. All 34 of these hospitals participate in COAP, a statewide cardiac quality improvement program, and they are working to reduce their door-to-balloon times.

Results for this measure refer to the median door-to-balloon time for all Washington hospitals that perform PCI. **The statewide median has decreased from 95 minutes in 2004 to 57 minutes in 2013, which is outstanding!** Individual hospital results for Washington State in 2013 range from a low of 42.5 minutes to a high of 85 minutes. **Six hospitals in Washington have significantly lower door to balloon times than the state average, and as such have set what we call a “benchmark” for all hospitals to try to achieve.**

TRENDS:



Ask your physician about door-to-balloon times at your hospital. Encourage them to examine their COAP report regarding door-to-balloon time so they know you care!

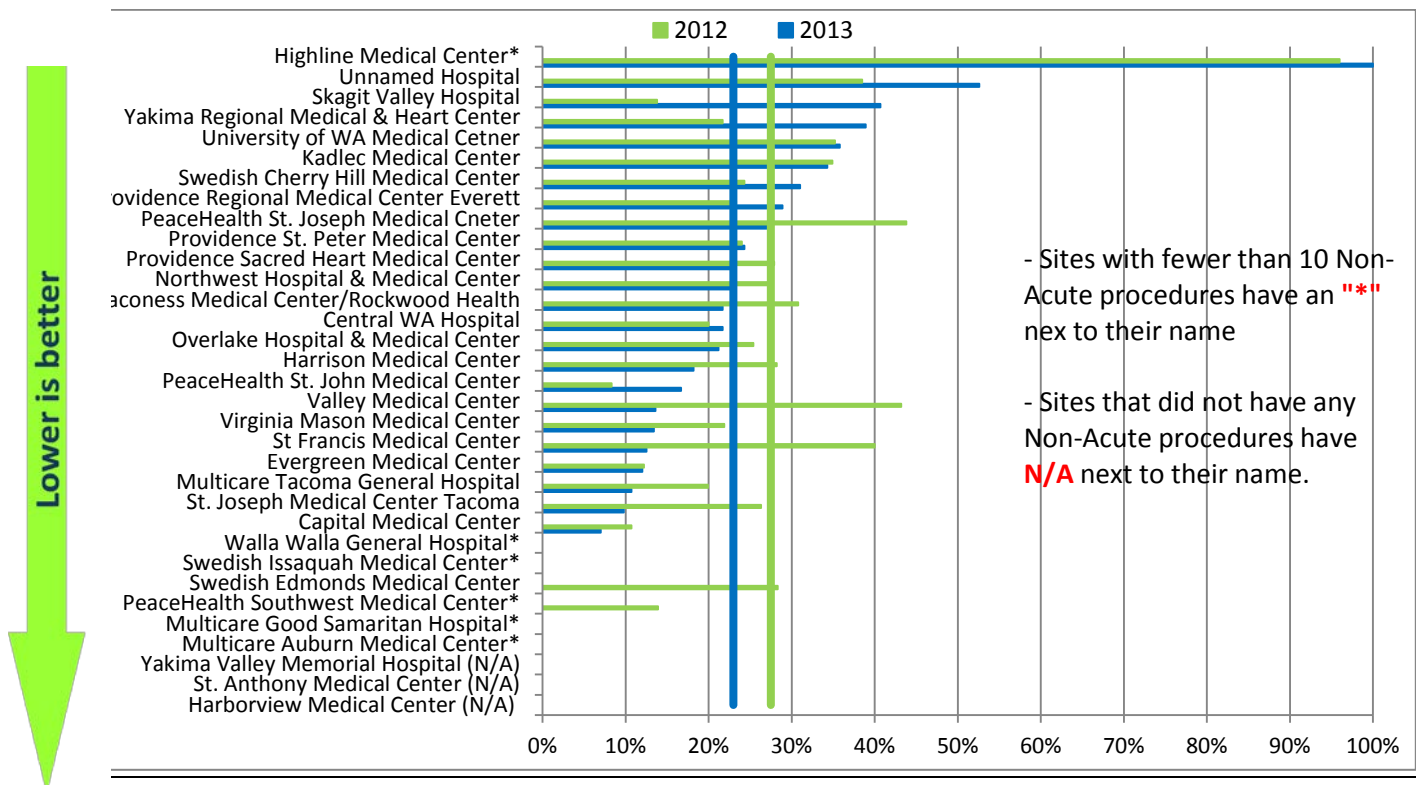
Appropriate Use Measures for Percutaneous Coronary Intervention (PCI)

PCI is a critical tool in the management of coronary disease. For patients experiencing an acute MI (myocardial infarction or “heart attack”), PCI is known to reduce mortality and recurrent MI. In patients with stable coronary artery disease, PCI offers significant symptom relief in appropriately selected patients. PCI is considered “appropriate” when the expected benefits, in terms of survival or health outcomes (reduction of symptoms, improvement in the quality of life, etc), exceed the expected negative consequences of the procedure. COAP, along with other national organizations, has begun using a complex process based on widely agreed upon criteria, to evaluate the appropriateness of each PCI procedure done in the state of Washington.

The majority of PCI’s are done for acute reasons and in Washington State as well as nationally, this is almost always (99% of the time) the most appropriate form of treatment. For the non-acute, or “elective” procedures however, PCI is not always the best option for treatment at that time. In this case, those procedures would be classified as “inappropriate”. There is wide variation among hospitals as to the frequency that this occurs. Reducing the incidence of those “inappropriate” procedures is a goal that Washington hospitals have set, and COAP is helping them work on this.

Certain information must be available in order to evaluate whether a procedure can be classified as “appropriate” and it should be collected for every patient and every procedure. Again, there is wide variation among hospitals as to whether all of that information is routinely collected and/or documented. *Put simply, if the data used to evaluate the appropriateness of the procedure is missing, the appropriateness of the procedure can’t be measured.*

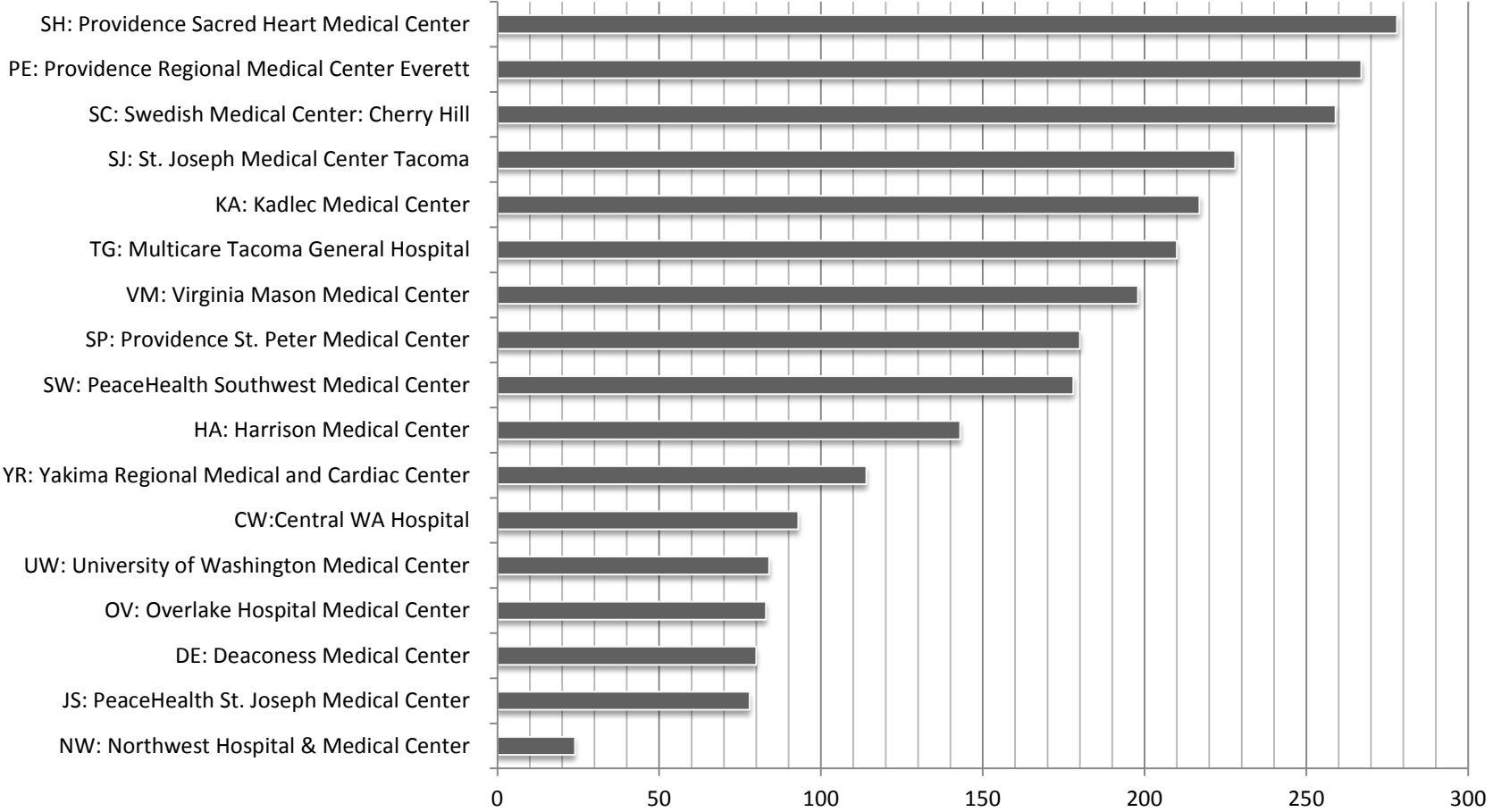
One of the ways that COAP is helping hospitals to work toward the goal of reducing inappropriate procedures is to help them reduce the amount of “insufficient information”. The following graph represents the percentage of non-acute or elective PCI procedures that were “not able to be classified” or in other words, did not have enough information documented in order to be evaluated. All PCI centers in Washington are represented on this graph. The hospitals that have agreed to share their data with the public are listed here. Those that are not sharing their data publicly at this time say “un-named”. Hospitals are ranked below in order of their performance for 2013...in this instance, the lower the better. The comparison with 2012 is provided so that you can see whether that hospital is improving. If the blue line (2013) is shorter than the green line (2012), the hospital has made improvements in the collection and documentation of the data needed to determine whether a non-acute PCI Procedure was appropriate.



Volume of Isolated CABG Cases 2013



CLINICAL OUTCOMES ASSESSMENT PROGRAM
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Coronary Artery Bypass Graft (CABG) Surgery Outcomes - 2013 Annual

- ① Mortality - CABG Surgery 2013 State Average = **2.0%**
- ② Renal Insufficiency – CABG Surgery 2013 State Average = **1.5%**; Benchmark = **0.6%**
- ③ Stroke – CABG Surgery 2013 State Average = **2.0%**; Benchmark = **0.9%**
- ④ Arterial Graft Use – CABG Surgery 2013 State Average = **99.8%**; Benchmark = **100%**
- ⑤ Deep Sternal Wound Infection – CABG Surgery 2013 State Average = **0.2%**; Benchmark = **0%**
- ⑥ Blood Use – CABG Surgery 2013 State Average = **23.1%**; Benchmark = **12.4%**

Symbols Key:	CABG Metrics					
<ul style="list-style-type: none"> ⊙ Hospital results for 2013 are within the range of the statewide average for that metric + Hospital results for 2013 are statistically better than the risk adjusted Statewide average for that metric and/or have contributed to setting the benchmark for this measure ● Hospital results for 2013 are statistically not as good as the statewide average for that metric 	① Mortality	② Renal Insufficiency	③ Stroke	④ Arterial Graft Use	⑤ Wound Infection	⑥ Blood Use
Black = Hospitals in full compliance with COAP's quality standards; Blue = hospitals in partial compliance with COAP's quality standards; Red = Hospitals out of compliance with COAP's quality standards						
Central Washington Hospital, Wenatchee	⊙	+	⊙	+	+	⊙
Deaconess Medical Center, Spokane	⊙	⊙	⊙	+	⊙	⊙
Harrison Medical Center, Bremerton	⊙	⊙	⊙	+	+	⊙
Kadlec Medical Center, Richland	⊙	⊙	●	+	+	⊙
Multicare Tacoma General Hospital, Tacoma	⊙	+	+	⊙	+	⊙
Northwest Hospital & Medical Center, Seattle	⊙	+	●	+	+	⊙
Overlake Hospital Medical Center, Bellevue	⊙	⊙	⊙	+	+	⊙
PeaceHealth Southwest Washington Medical Center, Vancouver	⊙	⊙	+	⊙	+	⊙
PeaceHealth St. Joseph Hospital, Bellingham	⊙	⊙	⊙	+	●	⊙
Providence Regional Medical Center, Everett	⊙	⊙	⊙	+	⊙	+
Providence Sacred Heart Medical Center, Spokane	⊙	⊙	⊙	⊙	+	⊙
Providence St. Peter Hospital, Olympia	⊙	⊙	⊙	+	+	⊙
St. Joseph Medical Center, Tacoma	⊙	+	⊙	+	+	+
Swedish Health Services, Cherry Hill, Seattle	⊙	+	⊙	+	⊙	⊙
University of Washington Medical Center, Seattle	⊙	⊙	⊙	+	+	⊙
Veteran's Affairs Medical Center, Seattle	XXX	XXX	XXX	XXX	XXX	XXX
Virginia Mason Medical Center, Seattle	⊙	+	⊙	+	+	⊙
Yakima Regional Medical & Heart Center, Yakima	⊙	+	⊙	+	+	⊙

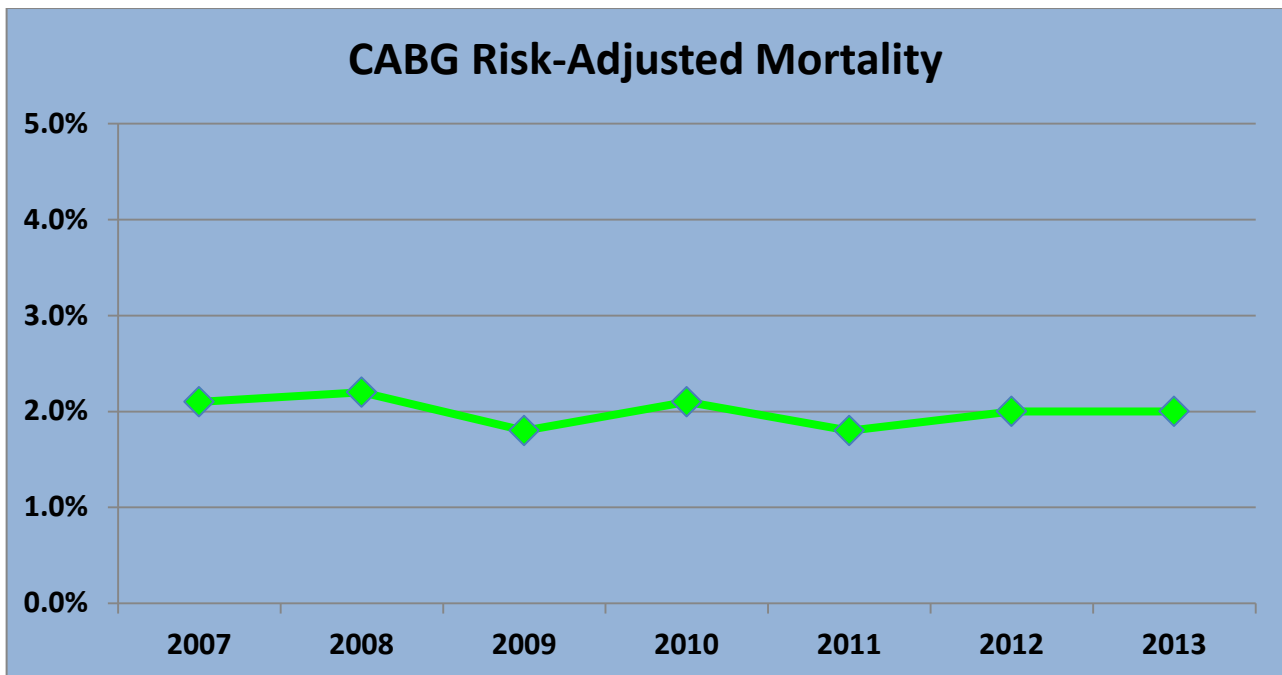
Coronary Artery Bypass Graft (CABG) Surgery Outcomes

CABG Risk-Adjusted Mortality Rate

Mortality rate is the percentage of patients who died before being discharged from the hospital following Coronary Artery Bypass Graft Surgery (CABG) for both elective and emergent procedures. All surgical procedures involve some risk. Additionally, all patients have their own particular risk factors such as previous medical and family history, current state of overall health, how long they have had their coronary disease, how long it has taken between onset of symptoms to treatment in an acute situation, and many others. Mortality rates for a hospital can be impacted by many things. For example, if a hospital does a low volume of this particular type of surgery, even one unavoidable death can make a significant impact on their mortality rate.

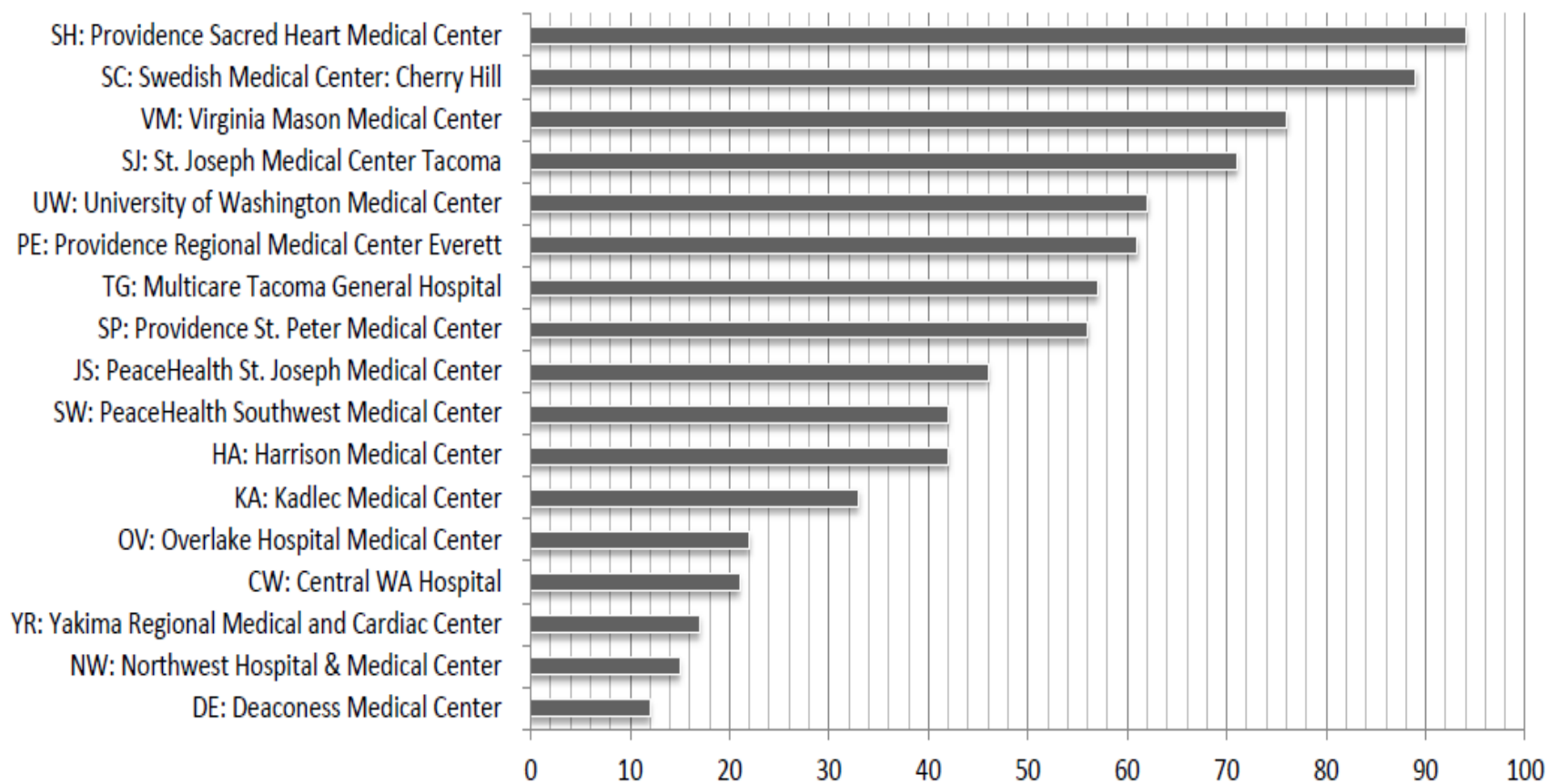
Results for this measure refer to the percentage of patients in Washington State that died during or following coronary artery bypass graft (CABG) surgery before being discharged from the hospital. **The statewide risk-adjusted average has varied between 1.8% and 2.2% since 2007.** Overall, hospitals in Washington State are doing a good job in keeping their mortality rates low, and are consistent with the national averages. Individual hospital results for Washington State in 2013 range from a low of 0.0% to a high of 4.1%. When adjusted for high risk cases, all Washington hospitals fall within the statewide mean for 2013.

TRENDS:



Ask your surgeon about mortality rates for coronary artery bypass surgery at your hospital and specific risks associated with your particular case. Encourage them to examine their COAP report regarding mortality rates so they know you care!

2013 Aortic Valve Replacement Volume



Aortic Valve Replacement (AVR) Surgery 3-Year Outcomes 2011 - 2013

- ① Mortality - AVR Surgery 3 Year Average = [1.8%](#)
- ② Renal Failure – AVR Surgery 3 Year Average = [2.5%](#)
- ③ Stroke – AVR Surgery 3 Year Average = [1.6%](#)
- ④ Deep Sternal Wound Infection – AVR Surgery 3 Year Average = [0.1%](#)
- ⑤ Blood Use – AVR Surgery 3 Year Average = [27.3%](#)

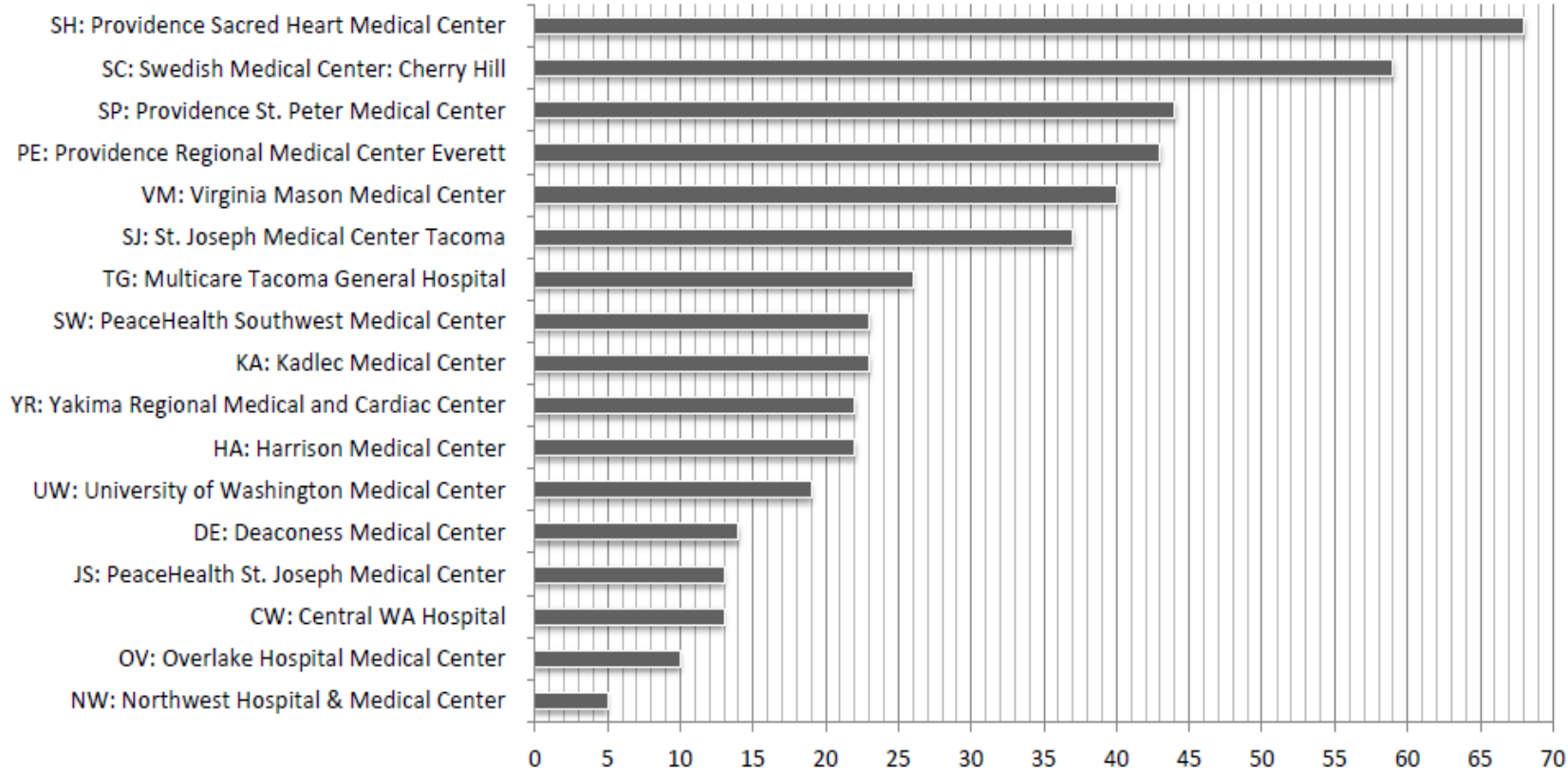
Symbols Key:	AVR Metrics				
<ul style="list-style-type: none"> ⊙ Hospital results for 3 year average are within the range of the statewide average for that metric + Hospital results for 3 year average are statistically better than the risk adjusted Statewide average for that metric ● Hospital results for 3 year average are statistically not as good as the statewide average for that metric 	① Mortality	② Renal Failure	③ Stroke	④ Wound Infection	⑤ Blood Use
Black = Hospitals in full compliance with COAP's quality standards; Blue = hospitals in partial compliance with COAP's quality standards; Red = Hospitals out of compliance with COAP's quality standards					
Central Washington Hospital, Wenatchee	⊙	⊙	⊙	⊙	⊙
Deaconess Medical Center, Spokane	⊙	⊙	⊙	⊙	⊙
Harrison Medical Center, Bremerton	⊙	⊙	⊙	⊙	⊙
Kadlec Medical Center, Richland	⊙	⊙	⊙	⊙	⊙
Northwest Hospital & Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙
Overlake Hospital Medical Center, Bellevue	⊙	⊙	⊙	⊙	⊙
Providence Regional Medical Center, Everett	⊙	⊙	⊙	⊙	+
Providence Sacred Heart Medical Center, Spokane	+	⊙	⊙	⊙	⊙
Providence St. Peter Hospital, Olympia	⊙	⊙	⊙	⊙	+
St. Joseph Hospital, Bellingham	⊙	⊙	⊙	⊙	⊙
St. Joseph Medical Center, Tacoma	⊙	⊙	⊙	⊙	⊙
Southwest Washington Medical Center, Vancouver	⊙	⊙	⊙	⊙	⊙
Swedish Health Services, Cherry Hill, Seattle	⊙	⊙	⊙	⊙	⊙
Tacoma General Hospital, Tacoma	⊙	⊙	⊙	⊙	⊙
University of Washington Medical Center, Seattle	+	+	●	⊙	⊙
Veteran's Affairs Medical Center, Seattle	XXX	XXX	XXX	XXX	XXX
Virginia Mason Medical Center, Seattle	⊙	+	⊙	⊙	⊙
Yakima Regional Medical & Heart Center, Yakima	⊙		⊙	⊙	⊙

Volume of Aortic Valve + CABG Cases 2013



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2013 Aortic Valve Replacement + CABG Volume



CABG + Aortic Valve Replacement (AVR) Surgery 3-Year Outcomes 2011-2013

- ① **Mortality – CABG + AVR Surgery 3 Year Average = 3.5%**
- ② **Renal Failure – CABG + AVR Surgery 3 Year Average = 3.9%**
- ③ **Stroke – CABG + AVR Surgery 3 Year Average = 2.6%**
- ④ **Arterial Graft Use – CABG + AVR Surgery 3 Year Average = 92.5%**
- ⑤ **Deep Sternal Wound Infection – CABG + AVR Surgery 3 Year Average = 0.5%**
- ⑥ **Blood Use – CABG + AVR Surgery 3 Year Average = 46.5%**

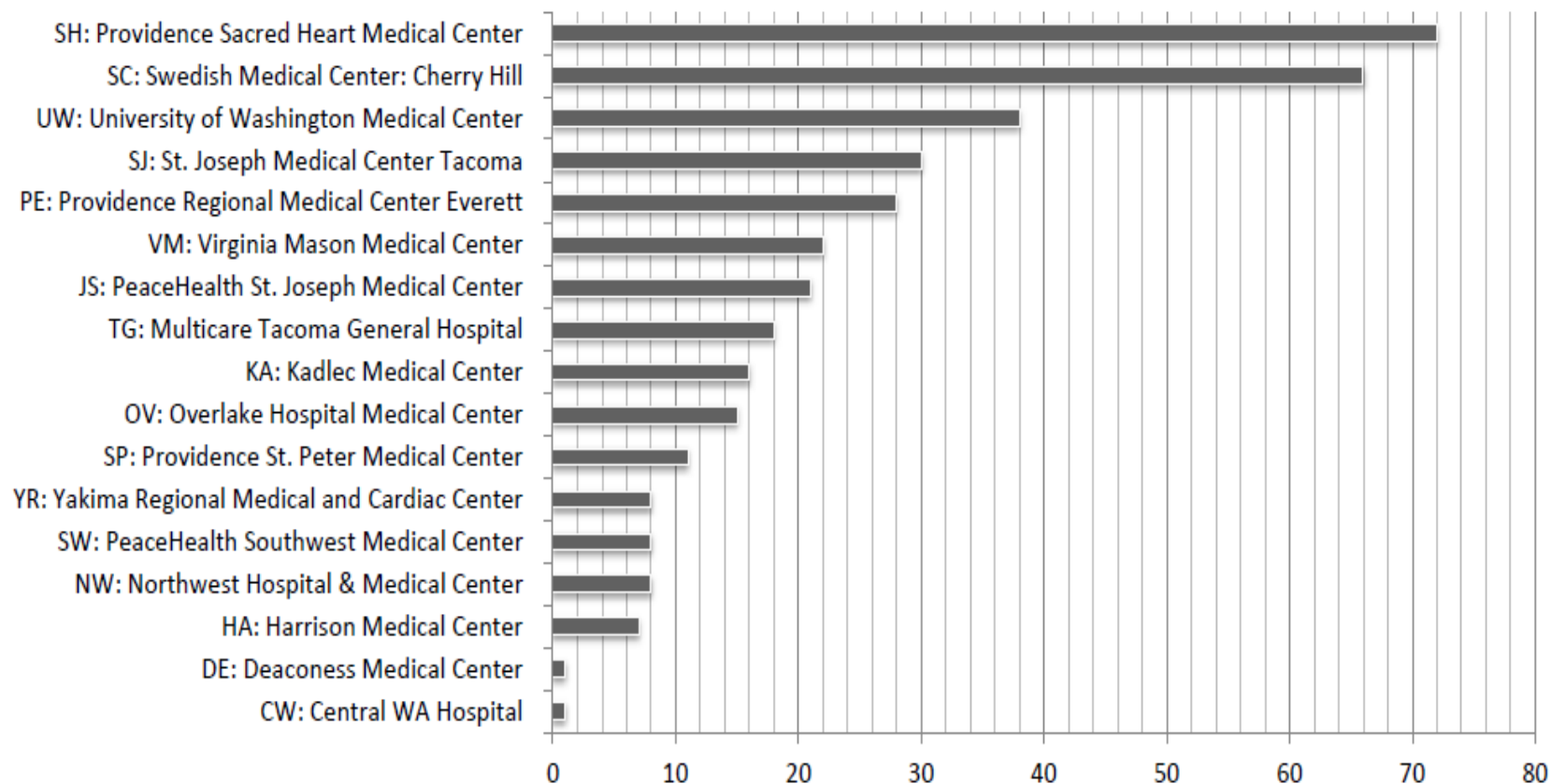
Symbols Key:

- ⊙ Hospital results for 3 year average are within the range of the statewide average for that metric
- + Hospital results for 3 year average are statistically **better** than the risk adjusted Statewide average for that metric
- Hospital results for 3 year average are statistically **not as good** as the statewide average for that metric

CABG + AVR Metrics

	① Mortality	② Renal Failure	③ Stroke	④ Arterial Graft Use	⑤ Wound Infection	⑥ Blood Use
Black = Hospitals in full compliance with COAP's quality standards;						
Blue = hospitals in partial compliance with COAP's quality standards;						
Red = Hospitals out of compliance with COAP's quality standards						
Central Washington Hospital, Wenatchee	⊙	⊙	⊙	⊙	⊙	⊙
Deaconess Medical Center, Spokane	⊙	⊙	⊙	⊙	⊙	⊙
Harrison Medical Center, Bremerton	⊙	⊙	⊙	⊙	⊙	⊙
Kadlec Medical Center, Richland	⊙	⊙	⊙	⊙	⊙	⊙
Northwest Hospital & Medical Center, Seattle	⊙	⊙	●	⊙	⊙	⊙
Overlake Hospital Medical Center, Bellevue	⊙	⊙	⊙	⊙	⊙	⊙
Providence Regional Medical Center, Everett	⊙	⊙	⊙	⊙	⊙	+
Providence Sacred Heart Medical Center, Spokane	+	+	⊙	⊙	⊙	⊙
Providence St. Peter Hospital, Olympia	⊙	⊙	⊙	⊙	⊙	+
St. Joseph Hospital, Bellingham	⊙	⊙	⊙	⊙	⊙	⊙
St. Joseph Medical Center, Tacoma	⊙	⊙	⊙	⊙	⊙	⊙
Southwest Washington Medical Center, Vancouver	⊙	⊙	⊙	+	⊙	⊙
Swedish Health Services, Cherry Hill, Seattle	⊙	⊙	⊙	⊙	⊙	⊙
Tacoma General Hospital, Tacoma	⊙	+	⊙	⊙	⊙	⊙
University of Washington Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙	⊙
Veteran's Affairs Medical Center, Seattle	XXX	XXX	XXX	XXX	XXX	XXX
Virginia Mason Medical Center, Seattle	⊙	+	⊙	+	⊙	⊙
Yakima Regional Medical & Heart Center, Yakima	⊙	+	⊙	⊙	⊙	⊙

2013 Mitral Valve Repair/Replacement Volume

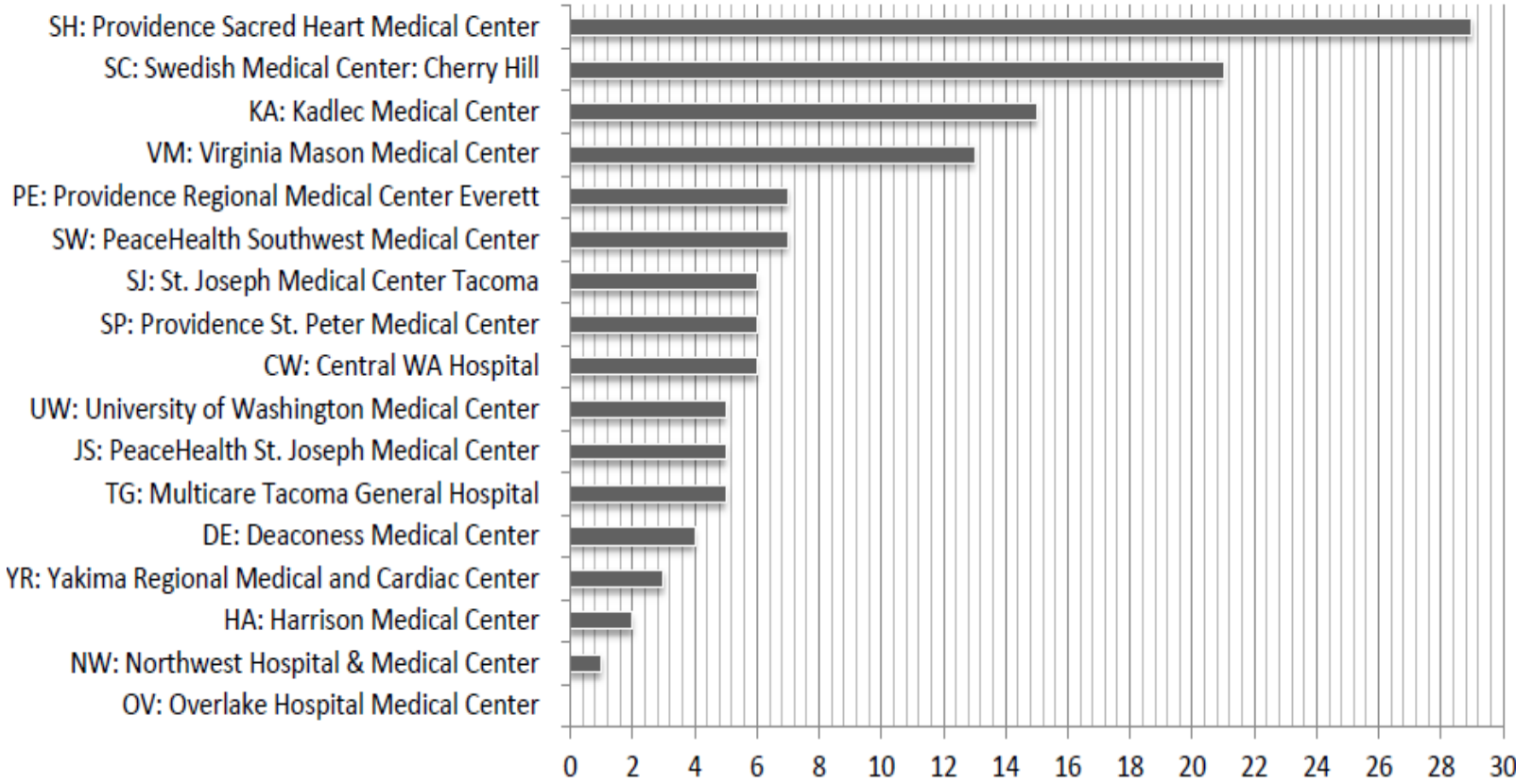


Mitral Valve Repair or Replacement (MVRR) Surgery 3-Year Outcomes 2011 - 2013

- ① Mortality - MVRR Surgery 3 Year Average = [2.1%](#)
- ② Renal Failure – MVRR Surgery 3 Year Average = [2.3%](#)
- ③ Stroke – MVRR Surgery 3 Year Average = [0.8%](#)
- ④ Deep Sternal Wound Infection – MVRR Surgery 3 Year Average = [0.2%](#)
- ⑤ Blood Use – MVRR Surgery 3 Year Average = [25.9%](#)

Symbols Key:	MVRR Metrics				
<ul style="list-style-type: none"> ⊙ Hospital results for 3 year average are within the range of the statewide average for that metric + Hospital results for 3 year average are statistically better than the risk adjusted Statewide average for that metric ● Hospital results for 3 year average are statistically not as good as the statewide average for that metric 	① Mortality	② Renal Failure	③ Stroke	④ Wound Infection	⑤ Blood Use
Black = Hospitals in full compliance with COAP's quality standards; Blue = hospitals in partial compliance with COAP's quality standards; Red = Hospitals out of compliance with COAP's quality standards					
Central Washington Hospital, Wenatchee	⊙	⊙	⊙	⊙	⊙
Deaconess Medical Center, Spokane	⊙	⊙	⊙	⊙	⊙
Harrison Medical Center, Bremerton	⊙	⊙	⊙	⊙	⊙
Kadlec Medical Center, Richland	⊙	⊙	⊙	⊙	⊙
Northwest Hospital & Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙
Overlake Hospital Medical Center, Bellevue	⊙	⊙	⊙	⊙	⊙
Providence Regional Medical Center, Everett	⊙	⊙	⊙	⊙	+
Providence Sacred Heart Medical Center, Spokane	⊙	⊙	⊙	⊙	+
Providence St. Peter Hospital, Olympia	⊙	●	⊙	⊙	⊙
St. Joseph Hospital, Bellingham	⊙	⊙	⊙	⊙	⊙
St. Joseph Medical Center, Tacoma	⊙	⊙	⊙	⊙	⊙
Southwest Washington Medical Center, Vancouver	⊙	⊙	⊙	⊙	⊙
Swedish Health Services, Cherry Hill, Seattle	⊙	⊙	⊙	⊙	⊙
Tacoma General Hospital, Tacoma	⊙	⊙	⊙	⊙	⊙
University of Washington Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙
Veteran's Affairs Medical Center, Seattle	XXX	XXX	XXX	XXX	XXX
Virginia Mason Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙
Yakima Regional Medical & Heart Center, Yakima	⊙	⊙	⊙	⊙	⊙

2013 Mitral Valve Repair/Replacement + CABG Volume



CABG + Mitral Valve Repair or Replacement (MVRR) Surgery 3-Year Outcomes 2011-2013

- ① **Mortality – CABG + MVRR Surgery 3 Year Average = 6.0%**
- ② **Renal Failure – CABG + MVRR Surgery 3 Year Average = 8.9%**
- ③ **Stroke – CABG + MVRR Surgery 3 Year Average = 2.3%**
- ④ **Arterial Graft Use – CABG + MVRR Surgery 3 Year Average = 96.7%**
- ⑤ **Deep Sternal Wound Infection – CABG + MVRR Surgery 3 Year Average = 0.0%**
- ⑥ **Blood Use – CABG + MVRR Surgery 3 Year Average = 47.3%**

Symbols Key:

- ⊙ Hospital results for 3 year average are within the range of the statewide average for that metric
- + Hospital results for 3 year average are statistically **better** than the risk adjusted Statewide average for that metric
- Hospital results for 3 year average are statistically **not as good** as the statewide average for that metric

CABG + MVRR Metrics

	① Mortality	② Renal Failure	③ Stroke	④ Arterial Graft Use	⑤ Wound Infection	⑥ Blood Use
<i>Black = Hospitals in full compliance with COAP's quality standards; Blue = hospitals in partial compliance with COAP's quality standards; Red = Hospitals out of compliance with COAP's quality standards</i>						
Central Washington Hospital, Wenatchee	⊙	⊙	⊙	⊙	⊙	⊙
Deaconess Medical Center, Spokane	⊙	⊙	⊙	⊙	⊙	⊙
Harrison Medical Center, Bremerton	⊙	⊙	⊙	⊙	⊙	⊙
Kadlec Medical Center, Richland	⊙	⊙	⊙	⊙	⊙	⊙
Northwest Hospital & Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙	+
Overlake Hospital Medical Center, Bellevue	⊙	⊙	⊙	⊙	⊙	⊙
Providence Regional Medical Center, Everett	⊙	⊙	⊙	⊙	⊙	+
Providence Sacred Heart Medical Center, Spokane	⊙	⊙	⊙	⊙	⊙	+
Providence St. Peter Hospital, Olympia	⊙	⊙	⊙	⊙	⊙	⊙
St. Joseph Hospital, Bellingham	⊙	⊙	⊙	⊙	⊙	⊙
St. Joseph Medical Center, Tacoma	⊙	⊙	⊙	⊙	⊙	⊙
Southwest Washington Medical Center, Vancouver	⊙	⊙	⊙	⊙	⊙	⊙
Swedish Health Services, Cherry Hill, Seattle	⊙	⊙	⊙	⊙	⊙	⊙
Tacoma General Hospital, Tacoma	⊙	⊙	⊙	⊙	⊙	⊙
University of Washington Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙	⊙
Veteran's Affairs Medical Center, Seattle	XXX	XXX	XXX	XXX	XXX	XXX
Virginia Mason Medical Center, Seattle	⊙	⊙	⊙	⊙	⊙	⊙
Yakima Regional Medical & Heart Center, Yakima	⊙	⊙	⊙	⊙	⊙	⊙