

Hospital Results

Procedure Descriptions & Table Notes

Procedure Descriptions

Spinal Fusion is a procedure used to join two or more bones of the spine (vertebrae) using various artificial (e.g., metal screws, rods, plates) components and bone graft material to fixate (stabilize) the spine while allowing time for the vertebrae to fuse together.

Total Hip Replacement is a procedure used to replace the two damaged parts of the hip joint, the upper end of the thigh bone (femur/femoral head) and the socket (acetabulum). Both damaged parts are replaced with various artificial (e.g., metal, plastic) components.

Total Knee Replacement is a procedure used to replace the three damaged parts of the knee joint, the lower end of the thigh bone (femur), the upper end of the shin bone (tibia), and the kneecap (patella). All three damaged parts are replaced with various artificial (e.g., metal, plastic) components.

Table Notes

Measures Reported in the Hospital Results

Number of Cases represents inpatient acute care cases, after exclusions, for patients 18 years and older who underwent the procedure. The number of cases represents separate hospitalizations, not individual patients. Note that because of the excluded cases, the number of cases reported in the **Hospital Results** section of the report is typically lower than the “Total Number of Cases” displayed in the **Volume Results** section of the report.

Complication represents patients who had a *total hip replacement* or *total knee replacement* and 1) developed a complication or died during the hospital stay the procedure was performed or 2) developed a complication that led to a readmission to a Pennsylvania acute care hospital within 7, 30, or 90 days (depending on the complication) of being discharged from the hospital stay in which the procedure was performed. A complication is only counted when the complication was the principal reason for readmission.

In-Hospital Complication represents patients who had a *spinal fusion* and developed a complication or died during the hospital stay the procedure was performed.

Readmission for Complication represents patients who had a *spinal fusion* and developed a complication that led to a readmission to a Pennsylvania acute care hospital within 7, 30, or 90 days (depending on the complication) of being discharged from the

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hospital stay in which the procedure was performed. A complication is only counted when the complication was the principal reason for readmission.

Extended Postoperative Length of Stay represents patients whose length of stay in the hospital following the procedure was significantly longer than expected, after accounting for patient risk.

Average Hospital Charge represents the entire length of stay and is trimmed and case-mix adjusted. Professional fees were not included. While charges are what the hospital reports on the billing form, hospitals typically receive actual payments from private insurers and government payers that are considerably less than the listed charge.

Understanding the Symbols

The symbols displayed in the **Hospital Results** section of this report represent a comparison of actual complication and extended postoperative length of stay rates to what is expected, after accounting for patient risk.

Using the risk-adjusted complication measure as an example:

- **Rate was significantly lower than expected.** Fewer patients experienced a complication than could be attributed to patient risk and random variation.
- ◉ **Rate was not significantly different than expected.** The number of patients who experienced a complication was within the range anticipated based on patient risk and random variation.
- **Rate was significantly higher than expected.** More patients experienced a complication than could be attributed to patient risk and random variation.

See **About the Report** and **Technical Notes** for further details.