



**NCDR**<sup>®</sup>

NATIONAL CARDIOVASCULAR DATA REGISTRY

**ACTION Registry**<sup>®</sup> – GWTG<sup>™</sup>

**Version 2.4.1**

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**Institutional Outcomes Report  
2015Q3**

**National Outcomes Report  
999997**

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**National Cardiovascular Data Registry**

**ACTION Registry**<sup>®</sup> – GWTG<sup>™</sup>

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# Executive Summary

**ACTION Registry®-GWTG™**

**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

## Section IA: Composite Measures

STEMI/NSTEMI Composite Measures			Distribution of Hospital Performance					
			10th percentile	90th percentile				
1	<p><b>Overall AMI performance composite</b></p> <table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>95.8%</td> <td>99.2%</td> </tr> </tbody> </table> <p>Includes all 11 acute and discharge performance measures. Proportion of performance measure opportunities that were met among eligible opportunities.</p> <p>Measures include:                      Aspirin at Arrival                      Evaluation of LV Systolic Function                      Reperfusion Therapy (STEMI only)                      Time to Fibrinolytics (STEMI only)                      Time to Primary PCI (STEMI only)                      Aspirin at Discharge                      Beta Blocker at Discharge                      ACE-I or ARB for LVSD at Discharge                      Statin at Discharge                      Adult Smoking Cessation Advice                      Cardiac Rehab Referral [Detail Line:1002]</p>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		95.8%	99.2%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl						
	95.8%	99.2%						
2	<p><b>Overall defect free care</b></p> <table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>78.1%</td> <td>95.2%</td> </tr> </tbody> </table> <p>The proportion of patients that receive "perfect care" based upon their eligibility for each performance measure. If a patient fails to receive even one therapy for which he or she is eligible, that patient fails to meet the "defect-free" criteria and will be removed from the numerator. That patient will still be included in the denominator however. [Detail Line:1003]</p>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		78.1%	95.2%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl						
	78.1%	95.2%						
3	<p><b>STEMI performance composite</b></p> <table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>97.3%</td> <td>99.7%</td> </tr> </tbody> </table> <p>Includes all 11 acute and discharge performance measures for STEMI patients. Proportion of performance measure opportunities that were met among eligible opportunities.</p> <p>Measures include:                      Aspirin at Arrival                      Evaluation of LV Systolic Function                      Reperfusion Therapy (STEMI only)                      Time to Fibrinolytics (STEMI only)                      Time to Primary PCI (STEMI only)                      Aspirin at Discharge                      Beta Blocker at Discharge                      ACE-I or ARB for LVSD at Discharge                      Statin at Discharge                      Adult Smoking Cessation Advice                      Cardiac Rehab Referral [Detail Line:1004]</p>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		97.3%	99.7%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl						
	97.3%	99.7%						
4	<p><b>NSTEMI performance composite</b></p> <table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>94.6%</td> <td>98.9%</td> </tr> </tbody> </table> <p>Includes all 8 acute and discharge performance measures for NSTEMI patients. Proportion of performance measure opportunities that were met among eligible opportunities.</p> <p>Measures include:                      Aspirin at Arrival                      Evaluation of LV Systolic Function                      Aspirin at Discharge                      Beta Blocker at Discharge                      ACE-I or ARB for LVSD at Discharge                      Statin at Discharge                      Adult Smoking Cessation Advice                      Cardiac Rehab Referral [Detail Line:1005]</p>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		94.6%	98.9%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl						
	94.6%	98.9%						

# Executive Summary

**ACTION Registry®-GWTG™**

**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

## Section IA: Composite Measures

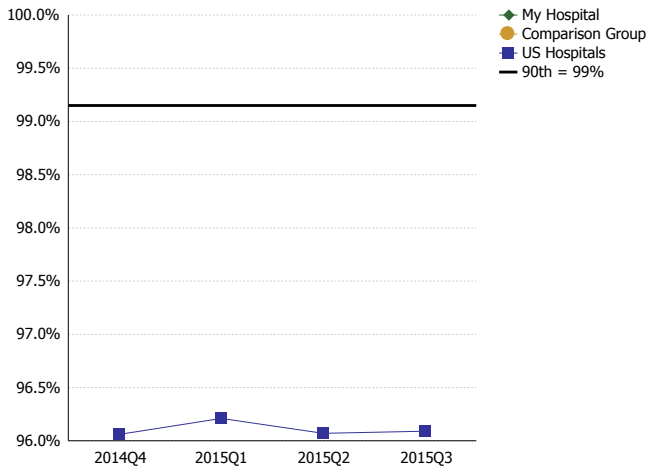
5	<p><b>Acute AMI performance composite</b></p> <table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>97.5%</td> <td>99.5%</td> </tr> </tbody> </table> <p>Includes all 5 acute composite performance measures for all AMI patients. Proportion of AMI patients with perfect adherence to the performance measures among all eligible care opportunities for those patients.</p> <p>Measures include:                      Aspirin at Arrival                      Evaluation of LV Systolic Function                      Reperfusion Therapy (STEMI only)                      Time to Fibrinolytics (STEMI only)                      Time to Primary PCI (STEMI only) [Detail Line:1006]</p>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		97.5%	99.5%	<table border="1"> <caption>Acute AMI Performance Data</caption> <thead> <tr> <th>Measure</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr> <td>Target (US Hospitals 50th Pctl)</td> <td>97.5</td> </tr> <tr> <td>Performance (My Hospital)</td> <td>99.5</td> </tr> </tbody> </table>	Measure	Value (%)	Target (US Hospitals 50th Pctl)	97.5	Performance (My Hospital)	99.5
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl												
	97.5%	99.5%												
Measure	Value (%)													
Target (US Hospitals 50th Pctl)	97.5													
Performance (My Hospital)	99.5													
6	<p><b>Discharge AMI performance composite</b></p> <table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>95.0%</td> <td>99.3%</td> </tr> </tbody> </table> <p>Includes all 6 discharge performance measures for all AMI patients. Proportion of performance measure opportunities that were met among eligible opportunities.</p> <p>Measures include:                      Aspirin at Discharge                      Beta Blocker at Discharge                      ACE-I or ARB for LVSD at Discharge                      Statin at Discharge                      Adult Smoking Cessation Advice                      Cardiac Rehab Referral [Detail Line:1007]</p>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		95.0%	99.3%	<table border="1"> <caption>Discharge AMI Performance Data</caption> <thead> <tr> <th>Measure</th> <th>Value (%)</th> </tr> </thead> <tbody> <tr> <td>Target (US Hospitals 50th Pctl)</td> <td>95.0</td> </tr> <tr> <td>Performance (My Hospital)</td> <td>99.3</td> </tr> </tbody> </table>	Measure	Value (%)	Target (US Hospitals 50th Pctl)	95.0	Performance (My Hospital)	99.3
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl												
	95.0%	99.3%												
Measure	Value (%)													
Target (US Hospitals 50th Pctl)	95.0													
Performance (My Hospital)	99.3													

# Executive Summary

**ACTION Registry®-GWTG™**  
**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

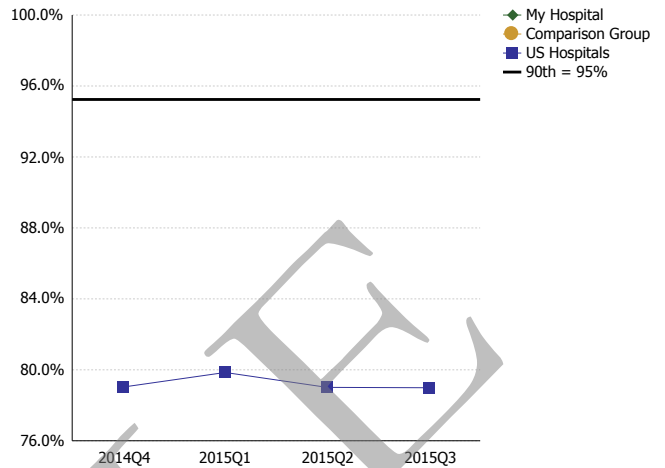
## Section IB: Composite Measures Graphs

**Overall AMI Performance Composite: 2014Q4 - 2015Q3**



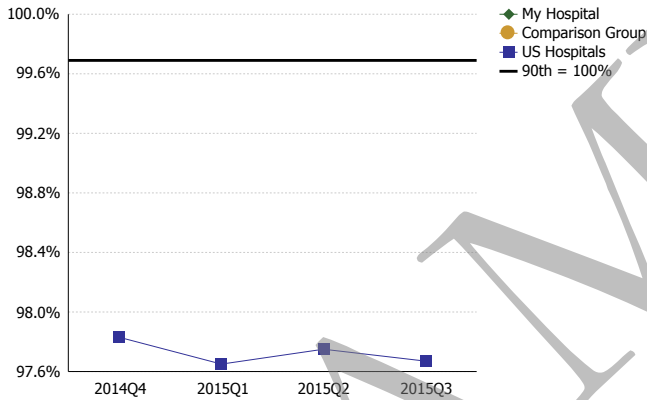
Hospital Score

**Overall Defect Free Care: 2014Q4 - 2015Q3**



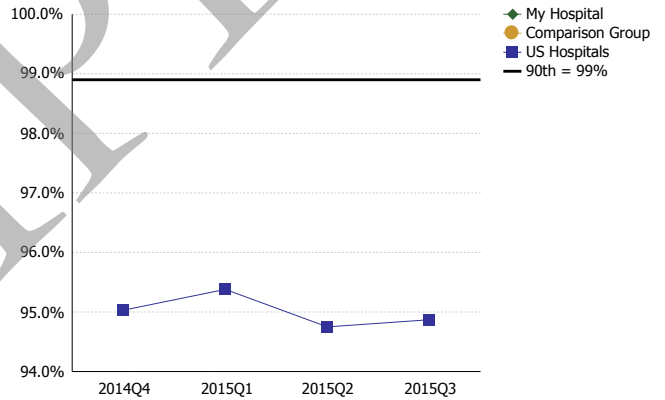
Hospital Score

**STEMI Performance Composite: 2014Q4 - 2015Q3**



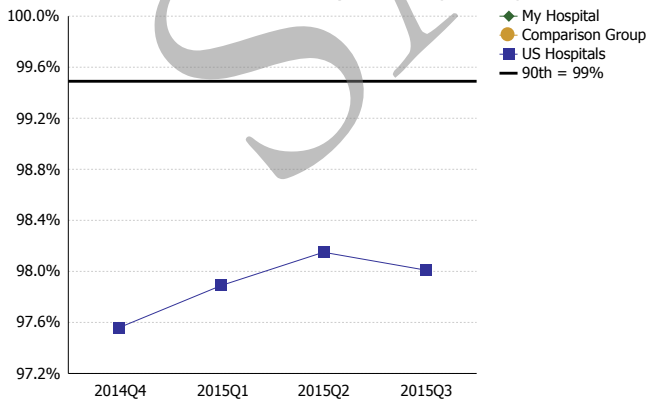
Hospital Score

**NSTEMI Performance Composite: 2014Q4 - 2015Q3**



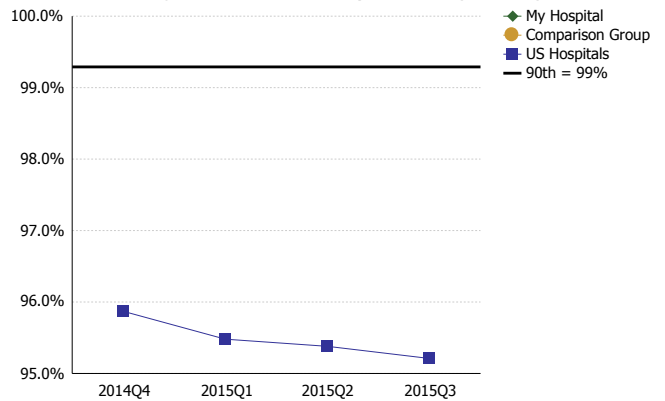
Hospital Score

**Acute AMI Performance Composite: 2014Q4 - 2015Q3**



Hospital Score

**Discharge AMI Performance Composite: 2014Q4 - 2015Q3**



Hospital Score

# Executive Summary

**ACTION Registry®-GWTG™**

**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

## Section IIA: AMI Performance Measures

Krumholz HM, Anderson JL, Bachelder BL, Fesmire FM, Fihn SD, Foody JM, Ho PM, Kosiborod MN, Masoudi FM, Nallamothu BK. ACC/AHA 2008 performance measures for adults with ST-elevation and non-ST-elevation myocardial infarction: a report of the American College of Cardiology/American Heart Association Task Force on Performance Measures (Writing Committee to Develop Performance Measures for ST-Elevation and Non-ST-Elevation Myocardial Infarction). J Am Coll Cardiol 2008;52:2046 –99

STEMI/NSTEMI Performance Measures			Distribution of Hospital Performance	
			10th percentile	90th percentile
9	<b>Beta-blocker prescribed at discharge</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		98.3%	100.0%	
	Proportion of patients prescribed a beta-blocker at discharge. [Detail Line: 1009]			
				90.1 95.3 98.3 100.0
10	<b>Statin prescribed at discharge</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		99.7%	100.0%	
	Proportion of patients prescribed a statin at discharge. [Detail Line:1010]			
				97.1 98.7 99.7 100.0
11	<b>Evaluation of LV systolic function</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		97.5%	100.0%	
	Proportion of patients evaluated for LV systolic function. [Detail Line:1011]			
				90.9 94.7 97.5 99.0 100.0
12	<b>ACE-I or ARB for LVSD at discharge</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		92.9%	100.0%	
	Proportion of patients prescribed an ACE-I or ARB for LVSD at discharge. [Detail Line:1012]			
				71.8 82.9 92.9 100.0
13	<b>Proportion of STEMI patients receiving fibrinolytics within 30 minutes</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		17.1%	100.0%	
	Proportion of STEMI patients with a time from your hospital arrival (or subsequent ECG if ST elevation first noted on subsequent ECG) to fibrinolytics <= 30 minutes. [Detail Line:1013]			
				2.9 7.2 17.1 100.0
14	<b>Median time in minutes to fibrinolytic therapy for STEMI patients</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		33.5	18.8	
	Your hospital's median time in minutes from hospital arrival to fibrinolytics for STEMI patients. [Detail Line:1014]			
				101.0 57.9 33.5 25.2 18.8
15	<b>Proportion of STEMI patients receiving primary PCI within 90 minutes</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		97.0%	100.0%	
	Proportion of STEMI patients with a time from your hospital arrival (or subsequent ECG if ST elevation first noted on subsequent ECG) to primary PCI <= 90 minutes. [Detail Line:1015]			
				87.9 93.4 97.0 100.0
16	<b>Median Time in minutes to primary PCI for STEMI patients</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		58.9	46.9	
	Your hospital's median time in minutes from hospital arrival to primary PCI for STEMI patients. [Detail Line:1016]			
				69.7 64.6 58.9 52.6 46.9

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## Section IIA: AMI Performance Measures

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17	<b>Reperfusion therapy</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>100.0%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		100.0%	100.0%	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>100.0%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		100.0%	100.0%	Proportion of STEMI patients that received either fibrinolytics or a primary PCI. [Detail Line:1017]	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	100.0%	100.0%															
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	100.0%	100.0%															
18	<b>Time in minutes from ED arrival at STEMI referral facility to ED discharge from STEMI referral facility in patients transferred for PCI</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>45.1</td> <td>29.0</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		45.1	29.0	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>45.1</td> <td>29.0</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		45.1	29.0	Your hospital's median time in minutes from ED arrival at referral facility to ED discharge at referral facility among patients transferred for a primary PCI. [Detail Line:1018]	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	45.1	29.0															
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	45.1	29.0															
19	<b>Time in minutes from ED arrival at STEMI referral facility to Primary PCI at STEMI receiving facility among transferred patients</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>105.9</td> <td>81.1</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		105.9	81.1	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>105.9</td> <td>81.1</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		105.9	81.1	Your hospital's median time in minutes from arrival at STEMI referring facility to primary PCI at STEMI receiving facility among patients transferred for a primary PCI. [Detail Line:1019]	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	105.9	81.1															
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	105.9	81.1															
20	<b>Adult smoking cessation advice counseling</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>100.0%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		100.0%	100.0%	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>100.0%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		100.0%	100.0%	Proportion of patients that received smoking cessation advice/counseling among those that have smoked within the past year. [Detail Line:1020]	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	100.0%	100.0%															
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	100.0%	100.0%															
21	<b>Cardiac rehabilitation patient referral from an inpatient setting</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>85.3%</td> <td>99.6%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		85.3%	99.6%	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>85.3%</td> <td>99.6%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		85.3%	99.6%	Proportion of patients that received a cardiac rehab referral. [Detail Line: 1021]	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	85.3%	99.6%															
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl															
	85.3%	99.6%															

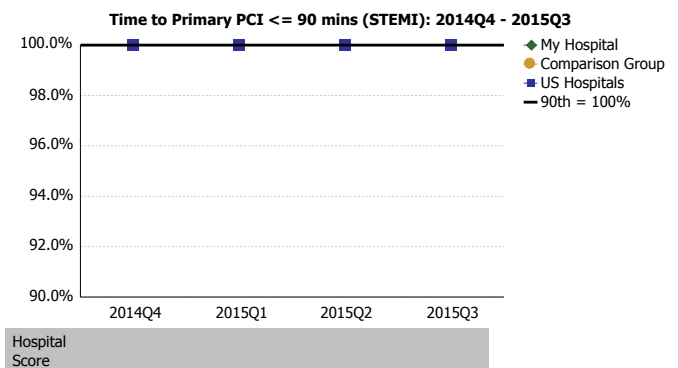
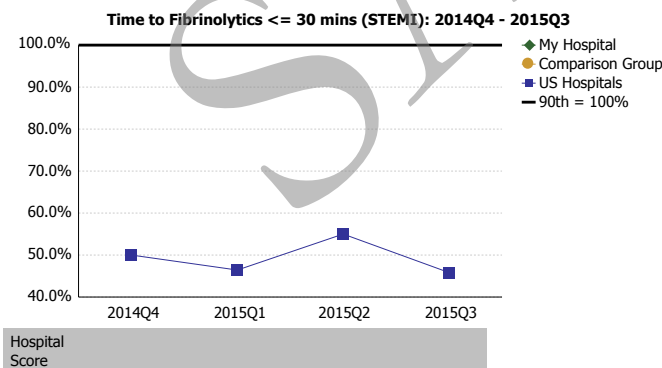
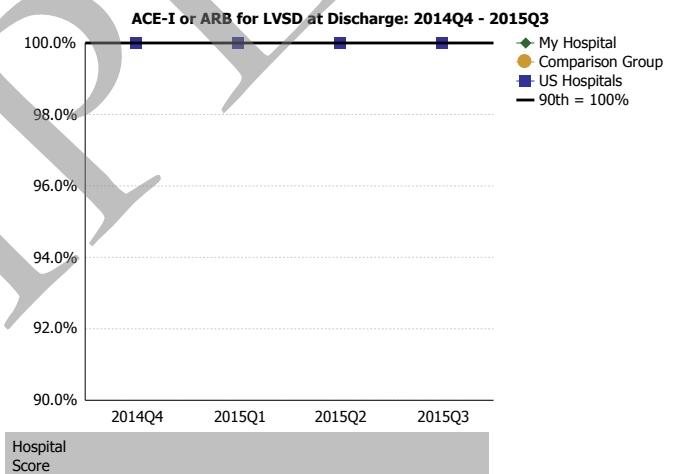
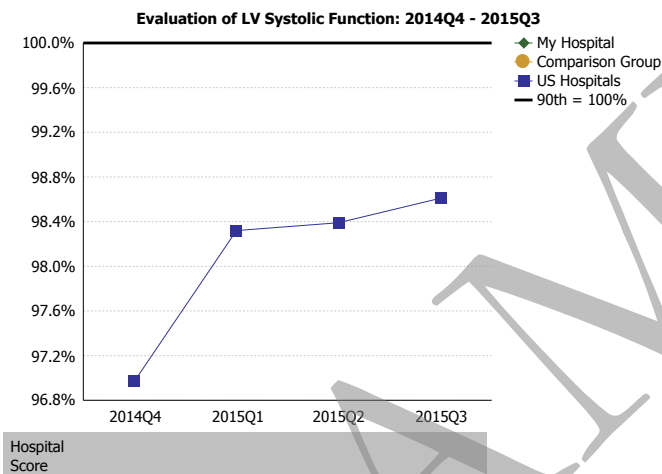
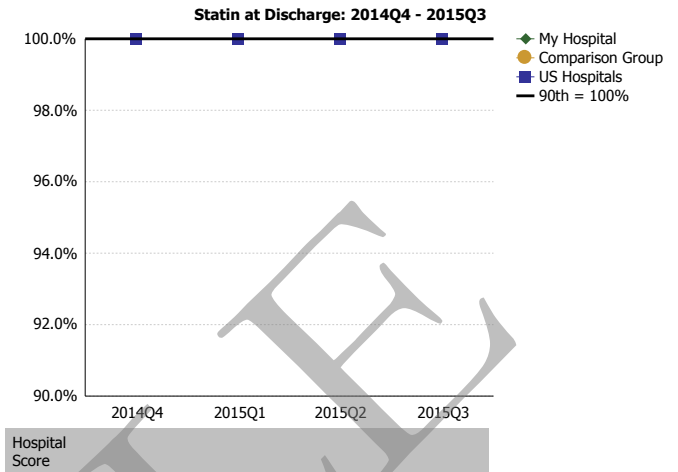
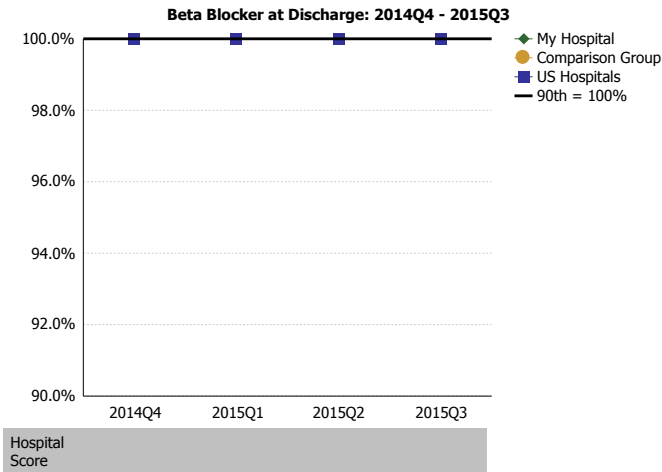
## Executive Summary Footnotes

<sup>1</sup>IMPORTANT INTERPRETATION NOTE: Median times by quarter are plotted in the graph, thus downward slope indicates improvement as shorter times are preferable

# Executive Summary

**ACTION Registry®-GWTG™**  
**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

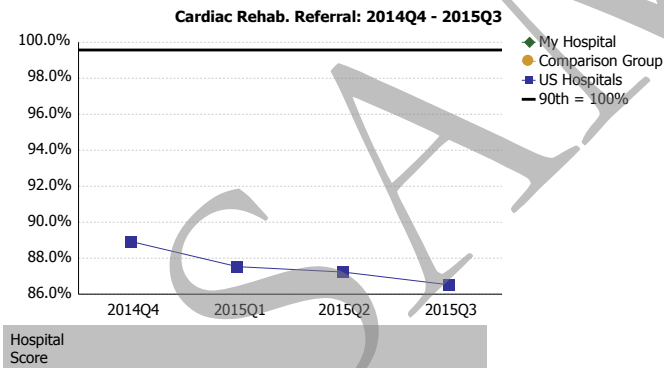
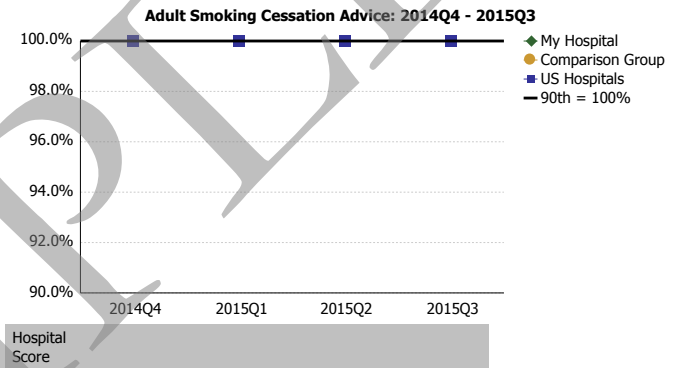
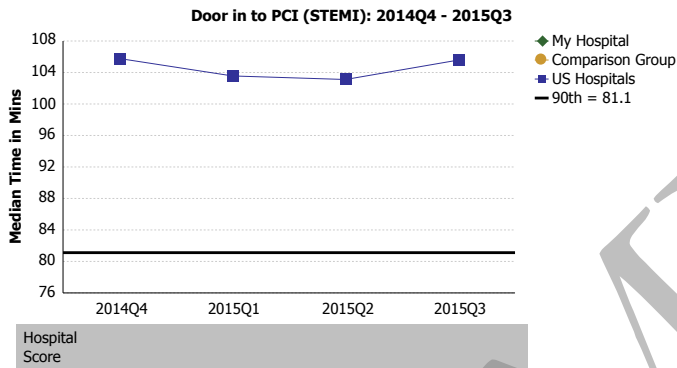
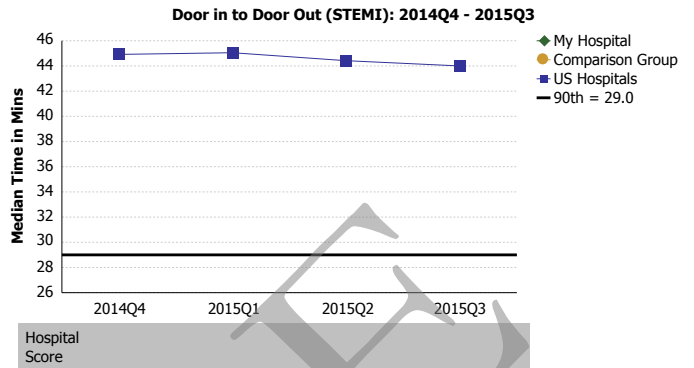
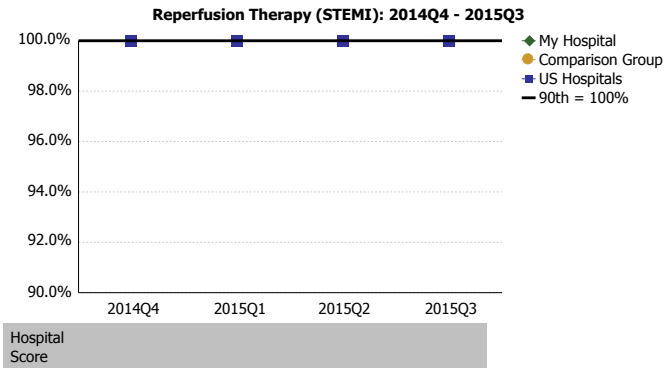
## Section IIB: AMI Performance Measures Graphs



# Executive Summary

**ACTION Registry®-GWTG™**  
**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

## Section IIB: AMI Performance Measures Graphs





# Executive Summary

ACTION Registry®-GWTG™

National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3

## Section III: Quality Metrics

Quality Metrics			Distribution of Hospital Performance	
			10th percentile	90th percentile
22	<b>Door to 1st ECG</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		69.7%	86.3%	
	Proportion of AMI patients that received an ECG within 10 minute of arrival at participating hospital. [Detail Line:1023]			
				47.0 59.7 69.7 79.2 86.3
23	<b>Acute ADP receptor inhibitor therapy among STEMI patients</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		96.9%	100.0%	
	Proportion of STEMI patients prescribed ADP Receptor Inhibitors 24 hours prior to or after 1st hospital arrival. [Detail Line:1024]			
				87.7 92.9 96.9 100.0
24	<b>Acute anticoagulant agent for NSTEMI</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		94.4%	100.0%	
	Proportion of NSTEMI patients prescribed unfractionated heparin, enoxaparin, bivalirudin 24 hours prior to or after 1st hospital arrival. [Detail Line:1025]			
				85.3 90.3 94.4 97.0 100.0
25	<b>Excessive initial unfractionated heparin (UFH) dose</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		55.5%	18.4%	
	Proportion of AMI patients who received: <ul style="list-style-type: none"> <li>An initial bolus dose of UFH &gt;70 units per kilogram OR</li> <li>A total initial bolus dose exceeding 4000 units OR</li> <li>An initial infusion &gt;12 units per kilogram per hour OR</li> <li>A total initial infusion &gt; 1000 units per hour. [Detail Line:1026]</li> </ul>			
				18.4 30.8 55.5 79.3 93.8
26	<b>Excessive initial enoxaparin dose</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		7.1%	0.0%	
	Proportion of AMI patients that received an initial dose of subcutaneous Enoxaparin >1.05 mg per kilogram. [Detail Line:1027]			
				22.9 14.1 7.1 0.0
27	<b>Excessive initial GPIIb-IIIa inhibitor therapy</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		4.9%	0.0%	
	Proportion of AMI patients that received GPIIb-IIIa (Full dose of Tirofiban if CrCL <30 cc/min and/or dialysis = yes or full dose of Eptifibatide if CrCL <50 cc/min and /or dialysis = yes) [Detail Line:1028]			
				16.6 10.2 4.9 0.0
29	<b>ADP receptor inhibitors prescribed at discharge for medically treated AMI patients</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		57.3%	85.2%	
	Proportion of AMI medically treated patients prescribed an ADP receptor inhibitor at discharge. [Detail Line:1029]			
				36.4 47.1 57.3 69.2 85.2
30	<b>Aldosterone blocking agents for LVSD at discharge</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		10.5%	39.1%	
	Proportion of AMI patients prescribed an aldosterone blocking agent at discharge. [Detail Line:1030]			
				1.5 10.5 24.1 39.1
32	<b>Aspirin at arrival for all patients</b>			
	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl	
		99.2%	100.0%	
	Proportion of patients that received an aspirin on arrival. [Detail Line:1031]			
				94.2 97.6 99.2 100.0

# Executive Summary

**ACTION Registry®-GWTG™**

**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

## Section III: Quality Metrics

33	<b>Aspirin at arrival</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>99.5%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		99.5%	100.0%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	99.5%	100.0%							
<p>Proportion of patients prescribed aspirin at arrival excluding patients transferred in and out. [Detail Line:1032]</p>									
34	<b>Aspirin prescribed at discharge</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>99.4%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		99.4%	100.0%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	99.4%	100.0%							
<p>Proportion of patients prescribed aspirin at discharge. [Detail Line:1033]</p>									
35	<b>AMI revascularized patients discharged on ADP receptor inhibitors</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>99.0%</td> <td>100.0%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		99.0%	100.0%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	99.0%	100.0%							
<p>Proportion of AMI revascularized patients prescribed an ADP receptor inhibitor at discharge. [Detail Line:1034]</p>									
36	<b>High Intensity Statin Therapy for all AMI Patients</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>65.7%</td> <td>92.9%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		65.7%	92.9%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	65.7%	92.9%							
<p>Proportion of all AMI patients that received intensive statin therapy (includes Rosuvastatin 20 to 40 mg, or Atorvastatin 40 to 80 mg) at discharge [Detail Line:1035]</p>									
37	<b>FMC to Primary PCI (Device Activation) for Non-transferred STEMI patients</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>81.6%</td> <td>96.9%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		81.6%	96.9%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	81.6%	96.9%							
<p>Proportion of STEMI patients that were not transferred that had a First Medical Contact to Device time of &lt;90 minutes or less. [Detail Line:1036]</p>									
38	<b>Median time to primary PCI from FMC for Non-transferred STEMI patients</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>72.8</td> <td>60.9</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		72.8	60.9	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	72.8	60.9							
<p>Median time from first medical contact to primary percutaneous coronary intervention (PCI) in acute myocardial infarction patients that were not transferred to another acute care facility [Detail Line:1037]</p>									
39	<b>Median Time from Emergency Department (ED) Arrival at STEMI Referral to discharge from STEMI Referral facility in patients transferred for Primary PCI</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>57.0</td> <td>29.9</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		57.0	29.9	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	57.0	29.9							
<p>Your hospital's median time in minutes from ED arrival at referral facility to ED discharge at referral facility among patients transferred for a primary PCI. [Detail Line:1038]</p>									
40	<b>Pre-Hospital ECG</b>	<table border="1"> <thead> <tr> <th>My Hospital</th> <th>US Hospitals 50th Pctl</th> <th>US Hospitals 90th Pctl</th> </tr> </thead> <tbody> <tr> <td></td> <td>73.8%</td> <td>94.2%</td> </tr> </tbody> </table>	My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl		73.8%	94.2%	
My Hospital	US Hospitals 50th Pctl	US Hospitals 90th Pctl							
	73.8%	94.2%							
<p>Proportion of AMI patients that received a pre-hospital ECG. [Detail Line: 1039]</p>									

# Executive Summary

**ACTION Registry®-GWTG™**

**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

## Section IV: Outcome Metrics

Outcome Metrics			Distribution of Hospital Performance	
			10th percentile	90th percentile
41	<b>In-hospital Risk Adjusted Mortality</b>			
	My Hospital	US Hospitals 50th Pctl		
		3.8	3.0	
In-hospital risk adjusted rate of deaths (all patients) [Detail Line:1374]				
42	<b>In-hospital Risk Adjusted Bleeding</b>			
	My Hospital	US Hospitals 50th Pctl		
		3.5	2.6	
In-hospital risk adjusted rate of bleeding events (all patients) [Detail Line: 1407]				

SAMPLE

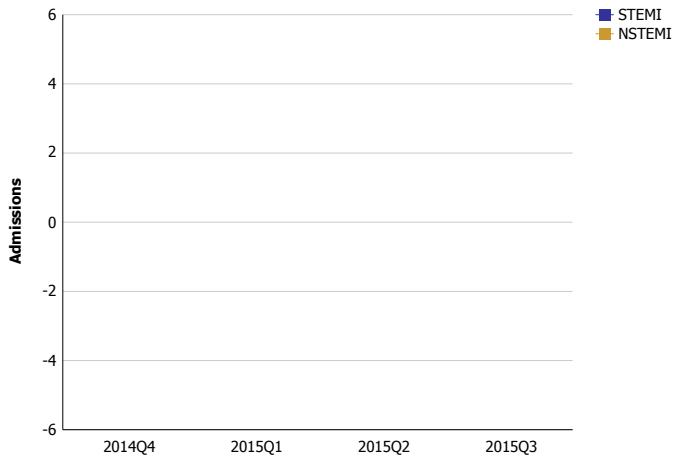
# Executive Summary

**ACTION Registry®-GWTG™**

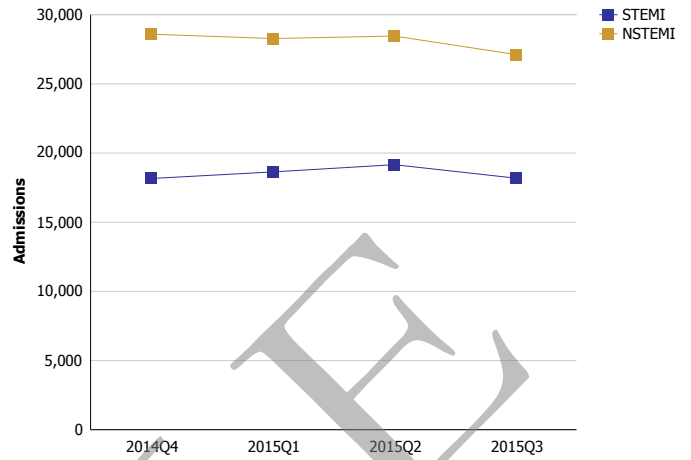
National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3

## Section V: Participant Graphs

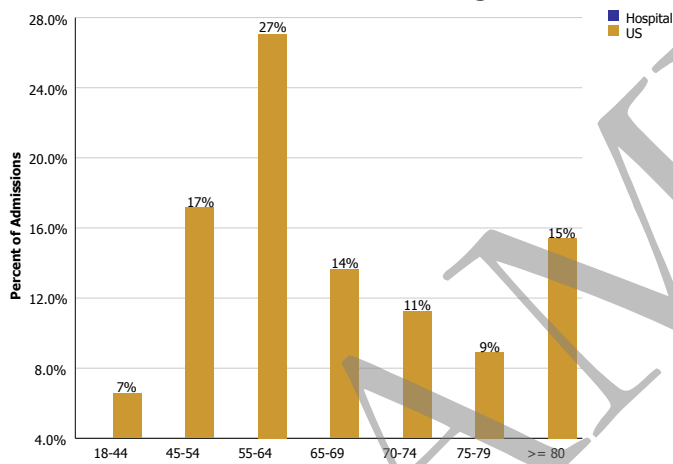
**Site Admission Trend**



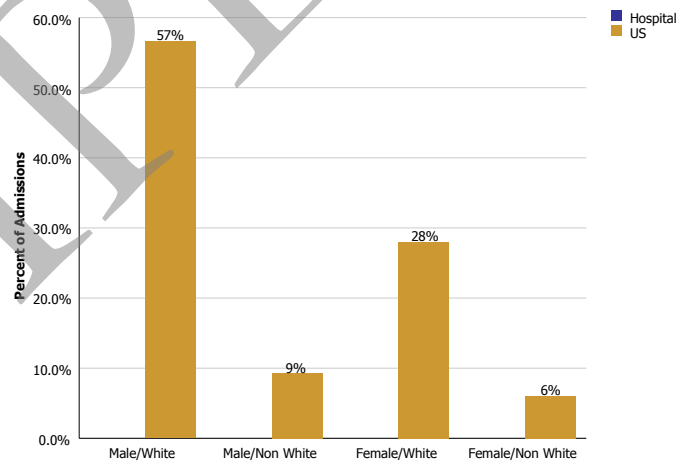
**US Admission Trend**



**Distribution of Patient Age**



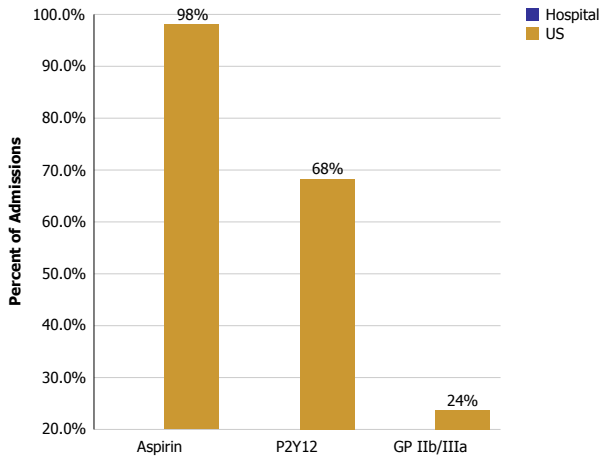
**Distribution of Race and Gender**



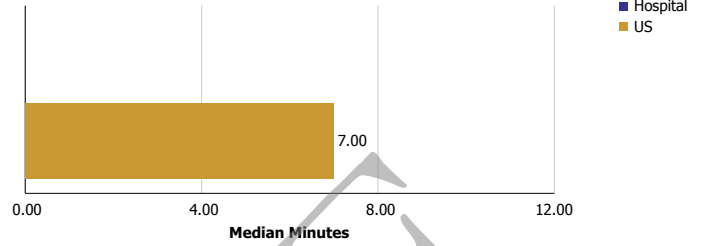
# Executive Summary

**ACTION Registry®-GWTG™**  
**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

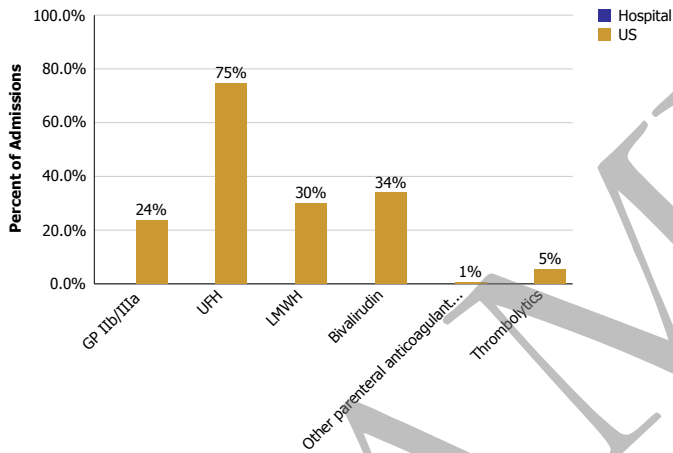
## Acute Medications (w/in 24h of Hospital Presentation)



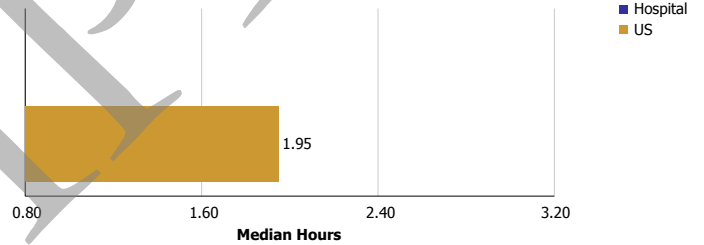
## Time from Hospital Presentation to ECG



## In-Hospital Antithrombin Medications



## Time from Symptom Onset to Hospital Presentation

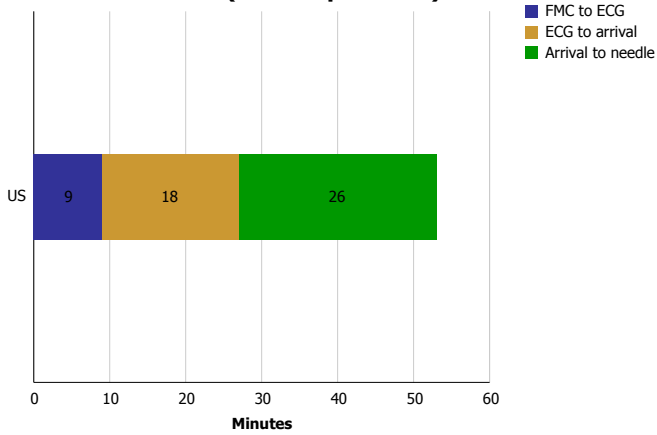


# Executive Summary

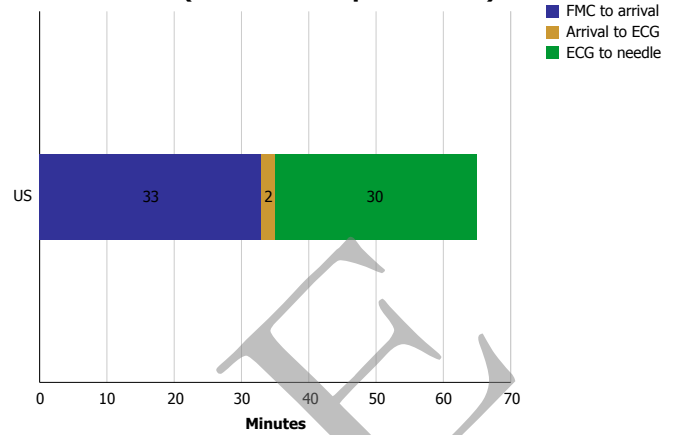
ACTION Registry®-GWTG™

National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3

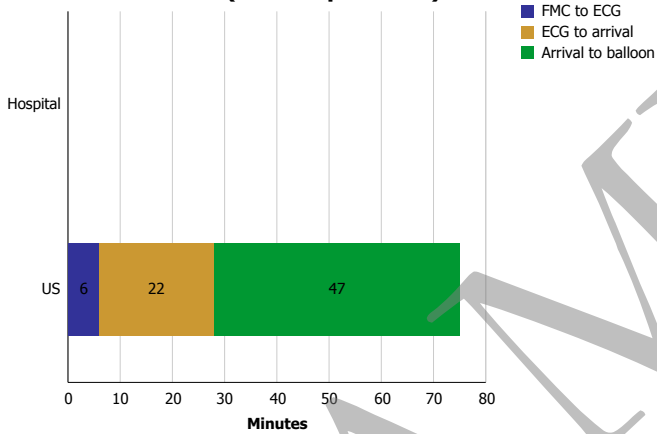
**First Medical Contact to ECG to Hospital Arrival to Needle (Pre-Hospital ECG)**



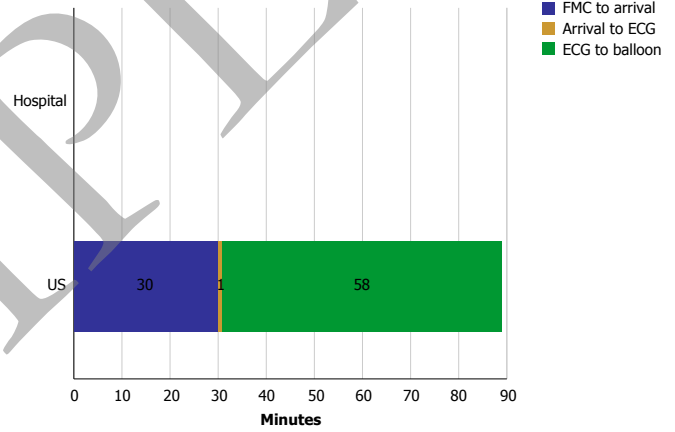
**First Medical Contact to Hospital Arrival to ECG to Needle (ECG After Hospital Arrival)**



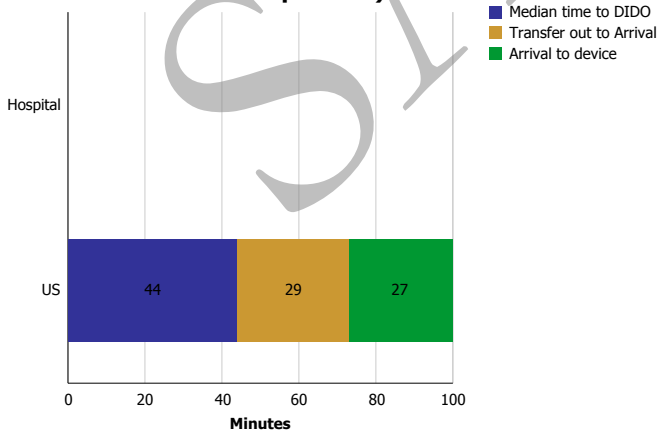
**First Medical Contact to ECG to Hospital Arrival to Balloon (Pre-Hospital ECG)**



**First Medical Contact to Hospital Arrival to ECG to Balloon (ECG After Hospital Arrival)**



**Arrival at First Facility to Transfer to Device (Transfer-in patients)**

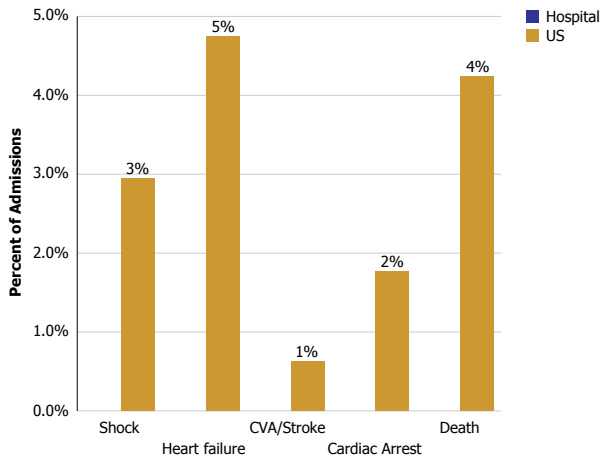


# Executive Summary

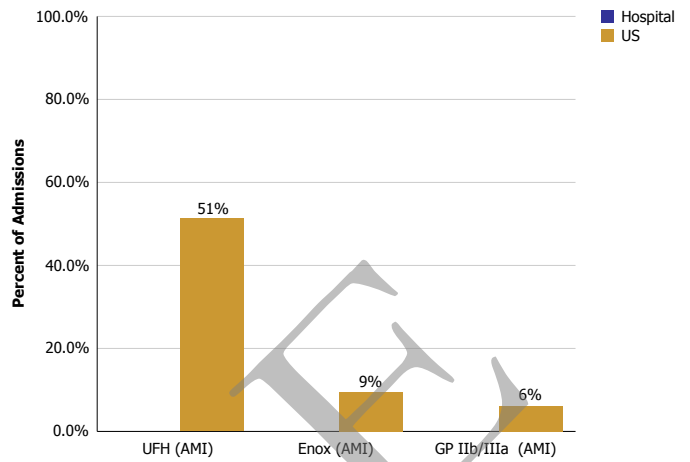
**ACTION Registry®-GWTG™**

**National Outcomes Report (999997) compared to Rolling Four Quarters (R4Q) for US Hospitals ending 2015Q3**

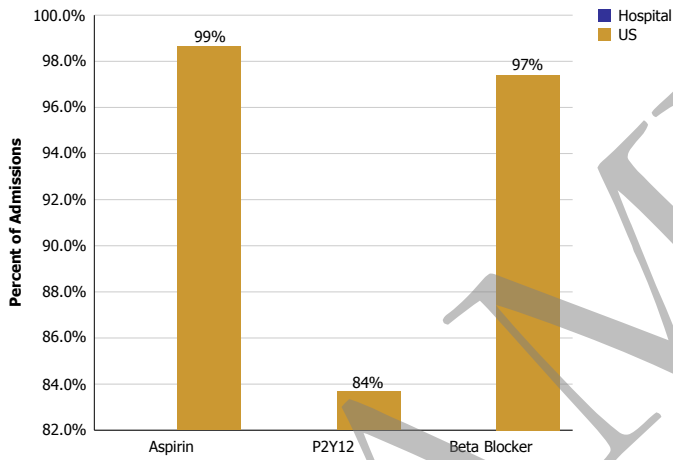
## In-hospital Clinical Events



## Dosing Errors



## Discharge Medications



## Discharge Medications

