Sequoia NSQIP QA Computer Surgical Infection, Takeback and Enterotomy rates:^{1,2} Accurate, but must compare me with Gyn Oncology data

Dr. Chandrasena's computer-generated NSQIP record of my takeback complications shows my takeback rate was 3.54%, excellent, and expectedly higher than rates for General Gynecologists in the NSQIP database rate of 1.26 to 1.68.

Compared with General Gynecologists, the conclusion as shown below was that I "need improvement."

07/01/2014 - 06/30/2	ACS NSQIP Semiannual Report: Site Summar								e Summary	
Sequoia Hospital									Site Nu	mber: 2040
• •	Total	Obser	ved	Pred**	Expected	Odds	C.L.	***	Outlier Decile	Comment*
	Cases	Events	Rate	Obs, Rate	Rate	Ratio	Lower	Upper		
SS Gynecology Morbidity	254	16	6.30%	5.72%	4.49%	1,30	0.82	2.05	9	As expected
SS Generality (11)	253	3	1.19%	1.41%	1.64%	0.85	0,41	1.79	3	As expected
S9 Bynerology S1	254	9	3.54%	2.72%	1.69%	1.64	0.89	301	10	Needs Improvement
AS Giracology BDR	254	9	3.54%	1.93%	1.26%	1,54	0.87	2.73	10	Needs Improvement
SS Gynecology Readmission	254	7	2.76%	3 16%	3.40%	0.93	0.61	1,41	3	As expected

The chart below from Dr. Chandrasena's slide presentation of my takeback rates shows (14/484) 2.9%, excellent, but she compared my NSQIP data with General Gynecologists.

Retur	ned to	o Su	rge	ry								
Returned to Surgery	1/1/2014- 12/31/2014 MD Rate	Sequoia GYN Rate	All NSQIP GYN Rate	1/1/2015- 12/31/2015 MD Rate	Sequoia GYN Rate	All NSQIP GYN Rate	1/1/2016- 12/31/2016 MD Rate	Sequoia GYN Rate	All NSQIP GYN Rate	1/1/2017- 6/30/2017 MD Rate	Sequoia GYN Rate	All NSQIP GYN Rate
ROR Rate	1.9%	2.0%	1.5%	4.7%	2.8%	1.5%	3.4%	2.4%	1.5%	0%	0%	1.4%
ROR Numerator	3	5		7	8		4	5		0	0	
ROR Denominator	158	256	55,501	149	284	65,932	117	205	78,027	<mark>60</mark>	95	46,511

<u>My takeback cases</u> = takeback rate, % Total cases annually

 $\frac{3}{158} + \frac{7}{149} + \frac{4}{117} + \frac{0}{60} = \frac{14}{484} = \frac{2.9\%}{484}$

We Gynecologic Oncologists have higher-risk procedures and higher-risk patients.³ Dr. Chandrasena was advised to obtain Gyn Oncology specific NSQIP publications that she was told were available, but she did not, and falsely alleged "there was no Gyn-Oncology specific data comparison outside of research."

The 14 GynOnc-specific reports in international surgery journals, such as Gynecologic Oncology, show:The Scope Return to Surgery Rate: $1.7 - 5.6\%^{4.5}$ The Open Return to Surgery Rate: $3.6 - 12\%^{6.10}$ The Total Return to Surgery Rate: $1.5 - 6.1\%^{4.5,11}$

Sequoia's QA NSQIP computer showed my Takeback rate was 2.9%, which falls well within the published normal NSQIP range compared with GynOnc specific data nationwide.

NSQIP Infections

Deep and Organ Space SSI	1/1/2014- 12/31/2014 MD Rate	Sequoia GYN Rate	All NSQIP GYN Rate	1/1/2015- 12/31/2015 MD Rate	Sequoia GYN Rate	All NSQIP GYN Rate	1/1/2016- 12/31/2016 MD Rate	Sequoia GYN Rate	All NSQIP GYN Bate	1/1/2017- 6/30/2017 MD Rate	Sequoia GYN Rate	All NSQIP GYN Bate
SSI Rate	2.5%	2.3%	1.1%	<mark>3.4%</mark>	2.1%	1.2%	5.1%	2.9%	1.2%	1.7%	1.1%	1.1%
SSI Numerator	4	6	624	5	6	791	6	6	996	1	1	532
SSI Denominator	<mark>15</mark> 8	256	55,501	<mark>149</mark>	284	65,932	117	205	78,027	60	95	46,511

The NSQIP data in Dr. Chandrasena's slide show are accurate, but she should have compared them to a comparable Gynecologic Oncology practice, as listed below:

	NSQIP Literature:	My practice:
Scope literature:	$2-9\%^{4,12-14}$	1.4%
Open literature:	4-25%6,7,9,10,15-23	5.0%
Total NSQIP Gyn Oncology rate:	2.6-15% ²⁴	3.3%

Sequoia's QA NSQIP computer showed my Infection rate was 3.3%, which falls well within the published normal NSQIP range compared with GynOnc specific data nationwide.

NSQIP Enterotomies

An enterotomy, the partial or full thickness hole in the bowel wall requiring closure. This can occur in a Gynecologic Oncology practice *incidentally* to removing cancer from the bowel wall or to separating adherent loops of bowel; or *accidentally* by trocar misplacement or inadvertent dissection.

The Sequoia record below reveals that 4.687% of my patients had an enterotomy, with 2.9% takebacks to the Operating Room.

	PSI	-15	PSI-15 Accidental Puncture/ laceration rate - Total
	1/15-	1/16-	1/15-9/16
	12/15	9/16	1,13-5,10
MD 0898 rate	76.923	0	46.87
Sequoia	75	0	46.15
Dignity Health	31.37	14.45	24.77

Counting 24 operative reports with "closure of enterotomy" in the title, 21 were *incidental* to either adhesiolysis or ovary cancer debulking, and are not complications, but 3 of the 24 enterotomies were accidental, and are listed as intestinal complications.

Enterotomy	Total	In	Out		
# enterotomys	24	14	10		
Total cases	628	79	549		
Rate	3.8%	18%	1.8%		

In a comparable 2020 NSQIP review of 4,965 Gynecologic Oncology surgeries, **8.3% of patients had enterotomies**, and 6.1% takebacks.²³

Sequoia's QA NSQIP computer showed my Enterotomy rate was 4.7%, which falls well within the published normal NSQIP range compared with GynOnc specific data nationwide. 1. Birkmeyer JD, Hamby LS, Birkmeyer CM, Decker MV, Karon NM, Dow RW. Is unplanned return to the operating room a useful quality indicator in general surgery? *Arch Surg*. Apr 2001;136(4):405-11.

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OPEN CANCER	SEQUOIA QA O'Hanlan NSQIP 80% hyst 88% scope n=484	SEC O' 85 Op	QUOIA QA 'Hanlan AHC W OvCa ven only n=93	Ri N: 60%0 0 n=	vard SQIP DvEndo Open 1094	Barbe NSQIF Ov Ca Open n=280	r Patankar P NSQIP a Ov Ca o Open 6 n=2870	Bernard I NSQIP Ov Ca Open n=4965	arasimhul NSQIP Ov Ca Open+CR n=1434
NSQIP Infections:	3.3		4	1	.4.5		18	8.1	
NSQIP Any complication			9	6	1.3		39		9.3
NSQIP Severe	4.7		5	4	0.3	10.9	18		8.1
NSQIP takebacks:	2.9		5				6	3.6	6.1
	SEQUOIA O'Hanla NSQI 80% hy	QA an P /st	SEQUOI AH(100% so 45% ca	A QA C cope ncer	O'Ha JMIG 100% s 45% c	nlan 2007 scope ancer	O'Hanlan JSLS 2019 100% scope 45% cancer	Teoh NSQIP 72% Hyst	Szender NSQIP
Laparoscopic	88% scc	ре	80% h	yst	100%	hyst	100% Hyst	35% Staging	All onc
	<mark>n=484</mark>	4	n=550 s	соре	n=8	30	n=2266	n=876	n=628
NSQIP Infections:	3.3		1.4		2	2	1.3	2.6	
NSQIP Any complication	on <mark>18*</mark>		4		9.	9	6.8	11.4	13.7
NSQIP Severe	4.7		2		6.	3	4.1	8.1	2.9
NSQIP takebacks:	2.9		2.0		4.	7	2.7		1.8