

# Accreditation Quality Report





# Emerson Hospital 133 Old Road to Nine Acre Corner, Concord, MA

Welcome to the Joint Commission's Quality Report. We know how important reliable information is to you and your family when making health care decisions. This Quality Report will help you make the right decisions to meet your needs. Since 1951, the Joint Commission has been the national leader in setting standards for health care organizations. When a health care organization seeks accreditation, it demonstrates commitment to giving safe, high quality health care and to continually working to improve that care.

The Quality Report is only one way to determine whether a health care organization can meet your needs. Discuss this report with your doctor or with other professional acquaintances before making a care decision. In addition to the accreditation status of the organization, the Quality Report uses checks, pluses, and minuses in each of the following key areas to help you compare a health care organization with similar accredited organizations.

- National Patient Safety Goals safety guidelines that target the
  prevention of medical errors such as surgery on the wrong side of
  the body and safe medication use.
- National Quality Improvement Goals measures the care of patients with specific conditions such as heart failure or pregnancy.

Not all measures are relevant to or available for all types of health care organizations. The Joint Commission will add relevant measures of health care quality as more measures become available. Your comments are just as important to us. The content and format of the Quality Report will be updated from time to time based on changes in the health care industry and your suggestions. Please call Customer Service at 630-792-5800 or e-mail the Joint Commission at qualityreport@jointcommission.org with your comments and suggestions.









# **Summary of Quality Information**

Accreditation Programs	<b>Accreditation Decision</b>	Effective Date	Last Full Survey Date	Last On-Site Survey Date
Home Care	Accredited	11/18/2022	11/17/2022	11/17/2022
Hospital	Accredited	12/7/2022	12/6/2022	12/6/2022

Accreditation programs recognized by the Centers for Medicare and Medicaid Services (CMS)

Hospital

<b>Advanced Certification</b>	<b>Certification Decision</b>	<b>Effective</b>	Last Full Review	v Last On-Site
Programs		Date	Date	<b>Review Date</b>
Primary Stroke Center	Certification	5/26/2022	4/1/2022	4/1/2022

#### **Special Quality Awards**

2015 Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program 2013 Silver Plus Get With The Guidelines - Stroke

		Compared to other Joint Commission Accredit Organizations	
		Nationwide	Statewide
Home Care	2022National Patient Safety Goals	Ø	<b>₩</b>
Hospital	2022National Patient Safety Goals	Ø	<b>₩</b> A *
	National Quality Improvement Goals:		
Reporting Period:	Hospital-Based Inpatient Psychiatric Services	© 2	<b>№</b> 0 <sup>2</sup>
Apr 2020 - Mar 2021	Perinatal Care	ND 2	<b>№</b> <sup>2</sup>

The Joint Commission only reports measures endorsed by the National Quality Forum.

#### Symbol Key

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- Not displayed

#### Footnote Key

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- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- The measure meets the Privacy Disclosure Threshold rule.
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- The Measure results are based on a sample of patients.
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- 10. Test Measure: a measure being evaluated for reliability of the individual data elements or awaiting National Quality Forum Endorsement.
- 11. There were no eligible patients that met the denominator criteria.







### **Locations of Care**

#### \* Primary Location

#### Locations of Care

# Emerson Hospital \* 133 Old Road to Nine Acre Corner Concord, MA 01742

#### **Available Services**

#### **Joint Commission Advanced Certification Programs:**

• Primary Stroke Center

#### Services:

- Addiction Services/Adult) (Non-detox - Adult)
- Behavioral Health (24-hour Acute Care/Crisis Stabilization - Adult)
- Chemical Dependency (Day Programs - Adult) (Non 24 Hour Care - Adult) (Partial Hospitalization -Adult) (Non-detox - Adult)
- CT Scanner (Imaging/Diagnostic Services)
- Ear/Nose/Throat Surgery (Surgical Services)
- EEG/EKG/EMG Lab (Imaging/Diagnostic Services)
- Gastroenterology (Surgical Services)
- GI or Endoscopy Lab (Imaging/Diagnostic Services)
- Gynecological Surgery (Surgical Services)
- Gynecology (Inpatient)
- Hazardous Medication Compounding (Inpatient)
- Inpatient Unit (Inpatient)
- Interventional Radiology (Imaging/Diagnostic Services)
- Labor & Delivery (Inpatient)
- Magnetic Resonance Imaging (Imaging/Diagnostic Services)
- Medical /Surgical Unit (Inpatient)
- Medical ICU (Intensive Care Unit)
- Neurosurgery (Surgical Services)

- Non-Sterile Medication Compounding (Inpatient)
- Normal Newborn Nursery (Inpatient)
- Nuclear Medicine (Imaging/Diagnostic Services)
- Ophthalmology (Surgical Services)
- Orthopedic Surgery (Surgical Services)
- Outpatient Clinics (Outpatient)
- Pediatric Unit (Inpatient)
- Plastic Surgery (Surgical Services)
- Positron Emission Tomography (PET) (Imaging/Diagnostic Services)
- Post Anesthesia Care Unit (PACU) (Inpatient)
- Radiation Oncology (Imaging/Diagnostic Services)
- Sleep Laboratory (Sleep Laboratory)
- Sterile Medication Compounding (Inpatient)
- Surgical ICU (Intensive Care Unit)
- Teleradiology (Imaging/Diagnostic Services)
- Ultrasound (Imaging/Diagnostic Services)
- Urology (Surgical Services)
- Vascular Surgery (Surgical Services)

#### Emerson Hospital Center for Specialty Care 54 Baker Avenue

Concord, MA 01742

#### Services:

- Administration of High Risk Medications (Outpatient)
- Outpatient Clinics (Outpatient)
- Perform Invasive Procedure (Outpatient)

Org ID: 5540









# **Locations of Care**

* Primary Location	
Locations of Care	Available Services
Emerson Hospital Health Center 133 Littleton Road Westford, MA 01886	Services:  • Outpatient Clinics (Outpatient)
Emerson Hospital Health Center At Groton 100 Boston Road Groton, MA 01450	Services:  • Outpatient Clinics (Outpatient)
Emerson Hospital Home Care 310 Baker Ave Concord, MA 01742	Services:      • Home Health Aides     • Home Health, Non-Hospice     Services     • Medical Social Services     • Occupational Therapy
Emerson Medical @ Sudbury 490 Boston Post Road Sudbury, MA 01776	Services:  • Outpatient Clinics (Outpatient)
Hermel Breast Health Center 747 Main Street Concord, MA 01742	Services:  Outpatient Clinics (Outpatient) Perform Invasive Procedure (Outpatient)
The Clough Center for Rehabilitative and Sports Therapy 310 Baker Avenue Concord, MA 01742	Services:  • Outpatient Clinics (Outpatient)







# **2022 National Patient Safety Goals**

#### **Symbol Key**

- The organization has met the National Patient Safety Goal.
  - The organization has not met the National Patient Safety Goal.
- The Goal is not applicable for this organization.

For further information and explanation of the Quality Report contents, refer to the "Quality Report User Guide."

## **Home Care**

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the safety of using medications.	Reconciling Medication Information	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
Reduce the risk of patient harm resulting from falls.	Implementing a Fall Reduction Program	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Risks Associated with Home Oxygen	Ø







# **2022 National Patient Safety Goals**

#### **Symbol Key**

The organization has met the National Patient Safety Goal.

The organization has not met the National Patient Safety Goal.

The Goal is not applicable for this organization.

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# Hospital

Safety Goals	Organizations Should	Implemented
Improve the accuracy of patient identification.	Use of Two Patient Identifiers	Ø
Improve the effectiveness of communication among caregivers.	Timely Reporting of Critical Tests and Critical Results	Ø
Improve the safety of using medications.	Labeling Medications	Ø
	Reducing Harm from Anticoagulation Therapy	Ø
	Reconciling Medication Information	Ø
Reduce the harm associated with clinical alarm systems.	Use Alarms Safely on Medical Equipment	Ø
Reduce the risk of health care-associated infections.	Meeting Hand Hygiene Guidelines	Ø
The organization identifies safety risks inherent in its patient population.	Identifying Individuals at Risk for Suicide	Ø
Universal Protocol	Conducting a Pre-Procedure Verification Process	$\bigcirc$
	Marking the Procedure Site	$\bigcirc$
	Performing a Time-Out	Ø





Measure Area

Hospital-Based

Services

Inpatient Psychiatric





# **National Quality Improvement Goals**

Reporting Period: April 2020 - March 2021

Compared to other Joint **Accredited Organizations** 

Nationwide Statewide **№** 2

This category of evidenced based measures assesses the



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		Compared to other Joint Commission Accredited Organizations				n
		١	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Overall Rate	This measure reports the overall number of patients screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	98% of 178 eligible Patients	100%	96%	100%	98%

Explanation

overall quality of care given to psychiatric patients.

- The Joint Commission only reports measures endorsed by the National Quality Forum.
- This information can also be viewed at www.hospitalcompare.hhs.gov
- Null value or data not displayed.

Measure Area

Services

Hospital-Based

Inpatient Psychiatric









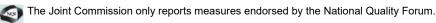
# **National Quality Improvement Goals**

Reporting Period: April 2020 - March 2021

Compared to other Joint **Accredited Organizations** 

Nationwide Statewide Explanation This category of evidenced based measures assesses the **№** 2 overall quality of care given to psychiatric patients.

		Compared to other Joint Commission Accredited Organizations				on
		N	lationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Children (1-12 years)	This measure reports the number of children age (1-12 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	ND 3	100%	97%	100%	97%



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Measure Area

Services

Hospital-Based

Inpatient Psychiatric









# **National Quality Improvement Goals**

Reporting Period: April 2020 - March 2021

Compared to other Joint **Accredited Organizations** 

Statewide

Nationwide

**№** 2

**№** 2

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		Nationwide Statewide				wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adolescent (13-17 years)	This measure reports the number of adolescent age (13-17 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	ND 3	100%	97%	100%	99%

Explanation

This category of evidenced based measures assesses the

overall quality of care given to psychiatric patients.

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Compared to other Joint









# **National Quality Improvement Goals**

#### Reporting Period: April 2020 - March 2021

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Col	npared to c	other Joint ed Organiz		n
			Accredit Nationwide	eu Organiz	alions State	wide
Measure	Evalenation			Averege		
weasure	Explanation	Hospital Results	Scored	Average Rate:	Top 10% Scored	Average Rate:
		Results	at Least:	Nate.	at Least:	Nate.
Assessment of violence risk, substance use disorder, trauma and patient strengths completed - Adult (18-64 years)	This measure reports the number of adults age (18-64 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	98% of 121 eligible Patients	100%	95%	100%	98%

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Compared to other Joint









# **National Quality Improvement Goals**

#### Reporting Period: April 2020 - March 2021

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Col	mpared to o			on
				ed Organiz		a called as
			Nationwide	_	State	
Measure	Explanation	Hospital		Average		Average
		Results	Scored at Least:	Rate:	Scored at Least:	Rate:
Assessment of violence risk,	This measure reports the number of		at Loast.		at Loast.	
substance use disorder, trauma and patient strengths completed - Older Adult (>= 65 years)	older adult (>= 65 years) screened for violence risk to self and others, substance and alcohol use, psychological trauma history and patient strengths. Screening for violence risk to self determines if patients are likely to harm themselves. Screening for violence risk to others determines if patients are likely to harm others. Screening for substance and alcohol use determines if patients need help for their use. Screening for psychological trauma history determines if patients have experienced terrible events in their lives which have left them fearful or anxious and unable to handle their feelings. Screening for patient strengths identifies positive things such as family support, a steady job, housing, etc. which are used to help the patient recover.	98% of 57 eligible Patients	100%	95%	100%	99%

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Compared to other Joint









# **National Quality Improvement Goals**

#### Reporting Period: April 2020 - March 2021

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Compared to other Joint Commission Accredited Organizations				on
		N	Nationwide	eu Organiz		ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Overall Rate	This is a proportion measure. A proportion measure is a measure which shows the number of occurrences over the entire group within which the occurrence should take place. The numerator is expressed as a subset of the denominator. This measure reports the overall number of patients discharged on two or more antipsychotic medications. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a persons capacity to meet lifes everyday demands.	67% of 6 eligible Patients	100%	59%	100%	71%
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Children Age 1 - 12	This measure reports the number of patients age 1 through 12 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication to one antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.	<b>№</b> 03 ————	100%	42%	3	3

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Org ID: 5540







# **National Quality Improvement Goals**

#### Reporting Period: April 2020 - March 2021

Measure Area

Explanation

Measure Area

Explanation

Nationwide

Statewide

This category of evidenced based measures assesses the Inpatient Psychiatric Services

This category of care given to psychiatric patients.

		Compared to other Joint Commission Accredited Organizations				on
		1	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adolescents Age 13 - 17	This measure reports the number of patients age 13 through 17 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication is also being treated with Clozapine.	3 	100%	47%	100%	40%

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Compared to other Joint









# **National Quality Improvement Goals**

#### Reporting Period: April 2020 - March 2021

**Accredited Organizations** Measure Area Nationwide Statewide Explanation Hospital-Based This category of evidenced based measures assesses the **№** 2 Inpatient Psychiatric overall quality of care given to psychiatric patients. Services

		Compared to other Joint Commission Accredited Organizations				n
		١	lationwide			ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Adults Age 18 - 64	This measure reports the number of patients age 18 through 64 years discharged on two or more antipsychotic medications for which there was an appropriate justification. Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medication or the addition of an antipsychotic medication or the addition when the patient is also being treated with Clozapine.	80% of 5 eligible Patients	100%	60%	100%	76%

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# **National Quality Improvement Goals**

#### Reporting Period: April 2020 - March 2021

		Compared to other Joint Commission Accredited Organizations			n	
		N	Nationwide		State	ewide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Multiple Antipsychotic Medications at Discharge with Appropriate Justification Older Adults Age 65 and Older	This measure reports the number of patients age 65 and older discharged on two or more antipsychotic medications for which there was an appropriate justification.  Antipsychotic medications are a group of drugs used to treat psychosis. Psychosis is a mental illness that markedly interferes with a person's capacity to meet life's everyday demands. Appropriate justifications include previous attempts to control psychosis with one antipsychotic medication, a plan to reduce the number of antipsychotic medications to one antipsychotic medication or the addition of an antipsychotic medication is also being treated with Clozapine.	——————————————————————————————————————	100%	55%	100%	69%

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- There were no eligible patients that met the denominator criteria.









# **National Quality Improvement Goals**

Reporting Period: April 2020 - March 2021

Compared to other Joint Commission						
Accredited Organizations						
Nationwide	Statewide					

Measure Area	Explanation	Nationwide	Statewide
Perinatal Care	This category of evidenced based measures assesses the care of mothers and newborns.	<b>№</b> 2	<b>№</b> 2

		Compared to other Joint Commission Accredited Organizations				
		Nationwide Statewide			wide	
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Cesarean Birth	This measure reports the number of first-time moms with a full-term, single baby in a head-down position who delivered the baby by cesarean section.	<b>⊕</b>	16%	25%	18%	25%
Elective Delivery	This measure reports the overall number of mothers who had elective vaginal deliveries or elective cesarean sections at equal to and greater than 37 weeks gestation to less than 39 weeks gestation. An elective delivery is the delivery of a newborn(s) when the mother was not in active labor or presented with spontaneous ruptured membranes prior to medical induction and/or cesarean section.	0% of 30 eligible Patients	0%	2%	0%	1%
Exclusive Breast Milk Feeding	This measure reports the overall number of newborns who are exclusively breast milk fed during the newborns entire hospitalization.  Exclusive breast milk feeding is when a newborn receives only breast milk and no other liquids or solids except for drops or syrups consisting of vitamins, minerals, or medicines.	73% of 177 eligible Patients	71%	50%	73%	47%
Unexpected Complications in Term Newborns per 1000 livebirths - Moderate Rate	The moderate rate equals the number of patients with moderate complications.	1730% of 809 eligible Patients	212%	1780%	1030%	1974%
Unexpected Complications in Term Newborns per 1000 livebirths - Overall Rate	This measure looks at the number of full-term single babies with a normal birth weight and with no preexisting conditions, these are babies that are expected to do well and routinely go home with the mother.	3461% of 809 eligible Patients	1508%	3084%	2137%	3366%

- The Joint Commission only reports measures endorsed by the National Quality Forum.
- This information can also be viewed at www.hospitalcompare.hhs.gov Null value or data not displayed.

#### **Symbol Key**

- This organization achieved the best ossible results
- This organization's performance is above the target range/value.
- This organization's performance is Ø similar to the target range/value.
- This organization's performance is
- below the target range/value.
- lot displayed

#### Footnote Key

- The Measure or Measure Set was not reported.
- The Measure Set does not have an overall result.
- The number of patients is not enough for comparison purposes.
- The measure meets the Privacy Disclosure Threshold rule.
- The organization scored above 90% but was below most other organizations.
- The Measure results are not statistically valid.
- The Measure results are based on a sample of patients.
- The number of months with Measure data is below the reporting requirement.
- The measure results are temporarily suppressed pending resubmission of updated data.
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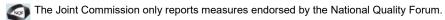


# **National Quality Improvement Goals**

# Reporting Period: April 2020 - March 2021

Compared to other Joint **Accredited Organizations** Measure Area Nationwide Statewide Explanation Perinatal Care This category of evidenced based measures assesses the care of mothers and newborns.

		Compared to other Joint Commission Accredited Organizations				
		1	Nationwide		State	wide
Measure	Explanation	Hospital Results	Top 10% Scored at Least:	Average Rate:	Top 10% Scored at Least:	Average Rate:
Unexpected Complications in Term Newborns per 1000 livebirths - Severe Rate	The severe rate equals the number of patients with severe complications.	1730% of 809 eligible Patients	501%	1303%	744%	1392%



This information can also be viewed at www.hospitalcompare.hhs.gov

Null value or data not displayed.

#### Symbol Kev

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