

**Reporting Period for Clinical Process Measures: Third Quarter 2008 through Second Quarter 2009 Discharges**

**150167-ORTHOAEDIC HOSPITAL AT PARKVIEW NORTH LLC**

Address: 11119 PARKVIEW PLAZA DR  
City, State, ZIP: FORT WAYNE, IN 46845  
Phone Number: (260) 672-4050  
County Name: ALLEN

Type of Facility: Short-term  
Type of Ownership: Voluntary non-profit - Private  
Accreditation Status: Yes  
Emergency Service Provided: Yes

Participation in a Systematic Database for:  
Cardiac Surgery: Does Not Have a Program

Hospital Quality Measures		Your Hospital Performance Aggregate Rate for All Four Quarters	10% of All Hospitals Submitting Data Scored Equal to or Higher Than	State Average	National Average
<b>Acute Myocardial Infarction (AMI)</b>					
AMI-1	Aspirin at Arrival	N/A(5)	100%	94%	94%
AMI-2	Aspirin Prescribed at Discharge	N/A(5)	100%	95%	93%
AMI-3	ACEI or ARB for LVSD	N/A(5)	100%	94%	92%
AMI-4	Adult Smoking Cessation Advice/Counseling	N/A(5)	100%	99%	96%
AMI-5	Beta-Blocker Prescribed at Discharge	N/A(5)	100%	94%	94%
AMI-7a	Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival	N/A(5)	100%	31%	45%
AMI-8a	Primary PCI Received Within 90 Minutes of Hospital Arrival	N/A(5)	99%	79%	81%
<b>Heart Failure (HF)</b>					
HF-1	Discharge Instructions	N/A(5)	99%	80%	78%
HF-2	Evaluation of LVS Function	N/A(5)	100%	93%	90%
HF-3	ACEI or ARB for LVSD	N/A(5)	100%	90%	90%
HF-4	Adult Smoking Cessation Advice/Counseling	N/A(5)	100%	95%	92%
<b>Pneumonia (PN)</b>					
PN-2	Pneumococcal Vaccination	N/A(5)	100%	90%	86%
PN-3b	Blood Cultures Performed in the Emergency Department Prior to Initial Antibiotic Received in Hospital	N/A(5)	100%	92%	92%
PN-4	Adult Smoking Cessation Advice/Counseling	N/A(5)	100%	95%	90%
PN-5c	Initial Antibiotic Received Within 6 Hours of Hospital Arrival	N/A(5)	100%	95%	94%
PN-6	Initial Antibiotic Selection for CAP in Immunocompetent Patient	N/A(5)	98%	86%	88%
PN-7	Influenza Vaccination	N/A(5)	100%	88%	85%

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Hospital Quality Measures		Your Hospital Performance Aggregate Rate for All Four Quarters	10% of All Hospitals Submitting Data Scored Equal to or Higher Than	State Average	National Average
<b>Surgical Care Improvement Project (SCIP)</b>					
SCIP-Inf-1	Prophylactic Antibiotic Received Within 1 Hour Prior to Surgical Incision	98% of 192 patients(2)	99%	90%	91%
SCIP-Inf-2	Prophylactic Antibiotic Selection for Surgical Patients	100% of 192 patients(2)	100%	95%	95%
SCIP-Inf-3	Prophylactic Antibiotics Discontinued Within 24 Hours After Surgery End Time	94% of 192 patients(2)	99%	90%	90%
SCIP-Inf-4	Cardiac Surgery Patients With Controlled 6 A.M. Postoperative Blood Glucose	0 patients(2)	99%	91%	89%
SCIP-Inf-6	Surgery Patients with Appropriate Hair Removal	100% of 252 patients(2)	100%	99%	97%
SCIP-Card-2	Surgery Patients on Beta-Blocker Therapy Prior to Admission Who Received a Beta-Blocker During the Perioperative Period	92% of 37 patients(2)	100%	86%	87%
SCIP-VTE-1	Surgery Patients with Recommended Venous Thromboembolism Prophylaxis Ordered	100% of 59 patients(2)	100%	88%	88%
SCIP-VTE-2	Surgery Patients Who Received Appropriate Venous Thromboembolism Prophylaxis Within 24 Hours Prior to Surgery to 24 Hours After Surgery	100% of 59 patients(2)	99%	85%	86%

**Footnote Legend**

**0 patients: No patients met the criteria for inclusion in the measure calculation.**

1. The number of cases is too small (n<25) for purposes of reliably predicting hospital performance.
2. Measure reflects the hospital's indication that its submission was based upon a sample of its relevant discharges.
3. Rate reflects fewer than maximum possible quarters of data.
4. Inaccurate information submitted and suppressed for one or more quarters.
5. No data are available for publication from the hospital for this measure.

**PN-7 is reported by Flu Season ONLY**

**Reporting Period for Outcome Measures:** Third Quarter 2005 through Second Quarter 2008 Discharges

**150167-ORTHOPAEDIC HOSPITAL AT PARKVIEW NORTH LLC**

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 County Name: ALLEN

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 Emergency Service Provided: Yes

Participation in a Systematic Database for:  
 Cardiac Surgery: Does Not Have a Program

**30-Day Risk-Standardized Mortality Measures**

	Hospital Quality Measures	Your Hospital Performance	Your Hospital's Number of Eligible Medicare Admissions	Your Hospital's Risk-Standardized Mortality Rate (Lower Limit, Upper Limit of 95% Interval Estimate)	U.S. National Rate	Number of Hospitals...	Better than U.S. National Rate	No Different than U.S. National Rate	Worse than U.S. National Rate	Number of Cases Too Small*
<b>Acute Myocardial Infarction (AMI)</b>										
MORT-30-AMI	Acute Myocardial Infarction (AMI) 30-Day Mortality Rate	N/A(5)	N/A(5)	N/A(5)	16.6%	in the <b>Nation</b> that Performed ...	131	2814	54	1610
						in the <b>State</b> that Performed ...	3	76	1	37
<b>Heart Failure (HF)</b>										
MORT-30-HF	Heart Failure (HF) 30-Day Mortality Rate	N/A(5)	N/A(5)	N/A(5)	11.1%	in the <b>Nation</b> that Performed ...	213	3812	163	585
						in the <b>State</b> that Performed ...	5	106	5	2
<b>Pneumonia (PN)</b>										
MORT-30-PN	Pneumonia (PN) 30-Day Mortality Rate	N/A(5)	N/A(5)	N/A(5)	11.5%	in the <b>Nation</b> that Performed ...	253	3934	284	343
						in the <b>State</b> that Performed ...	9	100	5	4

Reporting Period for Outcome Measures: Third Quarter 2005 through Second Quarter 2008 Discharges

**150167-ORTHOPAEDIC HOSPITAL AT PARKVIEW NORTH LLC**

**30-Day Risk-Standardized Readmission Measures**

	Hospital Quality Measures	Your Hospital Performance	Your Hospital's Number of Eligible Medicare Discharges	Your Hospital's Risk-Standardized Readmission Rate (Lower Limit, Upper Limit of 95% Interval Estimate)	U.S. National Rate	Number of Hospitals...	Better than U.S. National Rate	No Different than U.S. National Rate	Worse than U.S. National Rate	Number of Cases Too Small*
<b>Acute Myocardial Infarction (AMI)</b>										
READM-30-AMI	Acute Myocardial Infarction (AMI) 30-day Readmission Rate	N/A(5)	N/A(5)	N/A(5)	19.9%	in the <b>Nation</b> that Performed ...	36	2488	52	1944
						in the <b>State</b> that Performed ...	6	62	0	49
<b>Heart Failure (HF)</b>										
READM-30-HF	Heart failure (HF) 30-Day Readmission Rate	N/A(5)	N/A(5)	N/A(5)	24.5%	in the <b>Nation</b> that Performed ...	180	3854	233	520
						in the <b>State</b> that Performed ...	12	103	2	1
<b>Pneumonia (PN)</b>										
READM-30-PN	Pneumonia (PN) 30-Day Readmission Rate	N/A(5)	N/A(5)	N/A(5)	18.2%	in the <b>Nation</b> that Performed ...	88	4199	198	349
						in the <b>State</b> that Performed ...	11	101	1	5

**Footnote Legend**

\*The Number of cases is too small (fewer than 25) to reliably tell how well the hospital is performing.

5. No data are available for publication from the hospital for this measure.

**Hospital Quality Alliance: Improving Care Through Information**  
*Hospital CAHPS(HCAHPS) Survey*

**Reporting Period for HCAHPS Measures: Third Quarter 2008 through Second Quarter 2009 Discharges**

**150167-ORTHOPAEDIC HOSPITAL AT PARKVIEW NORTH LLC**

Address: 11119 PARKVIEW PLAZA DR	Type of Facility: Short-term	Participation in a Systematic Database for:
City, State, ZIP: FORT WAYNE, IN 46845	Type of Ownership: Voluntary non-profit - Private	Cardiac Surgery: Does Not Have a Program
Phone Number: (260) 672-4050	Accreditation Status: Yes	
County Name: ALLEN	Emergency Service Provided: Yes	

**HCAHPS Survey Completion and Response Rate**

<b>Number of Completed Surveys</b>	397
<b>Survey Response Rate</b>	66

**HCAHPS Composites and Items**

		Your Hospital's Adjusted Score			State Average			U.S. Average		
HCAHPS Composites		% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always
Composite 1 (Q1 to Q3)	Communication with Nurses	4	19	77	4	19	77	6	19	75
Composite 2 (Q5 to Q7)	Communication with Doctors	1	10	89	4	15	81	5	15	80
Composite 3 (Q4 & Q11)	Responsiveness of Hospital Staff	8	28	64	8	26	66	11	26	63
Composite 4 (Q13 & Q14)	Pain Management	5	26	69	6	24	70	8	24	68
Composite 5 (Q16 & Q17)	Communication about Medicines	20	18	62	22	19	59	22	19	59
Hospital Environment Items		% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always	% Sometimes to Never	% Usually	% Always
Q8	Cleanliness of Hospital Environment	10	19	71	8	19	73	10	20	70
Q9	Quietness of Hospital Environment	7	28	65	11	33	56	12	31	57
Discharge Information Composite		% Yes		% No		% Yes		% No		
Composite 6 (Q19 & Q20)	Discharge Information	92		8		82		18		

## Hospital CAHPS(HCAHPS) Survey

Reporting Period for HCAHPS Measures: Third Quarter 2008 through Second Quarter 2009 Discharges

**150167-ORTHOPAEDIC HOSPITAL AT PARKVIEW NORTH LLC**

HCAHPS Overall Ratings										
		Your Hospital's Adjusted Score			State Average			U.S. Average		
(Q 21)	Overall Rating of this Hospital	% 0 to 6 rating	% 7 and 8 rating	% 9 and 10 rating	% 0 to 6 rating	% 7 and 8 rating	% 9 and 10 rating	% 0 to 6 rating	% 7 and 8 rating	% 9 and 10 rating
Overall Rating of Hospital (0 = Worst Hospital 10 = Best Hospital)		8	14	78	8	22	70	10	25	65
		Your Hospital's Adjusted Score			State Average			U.S. Average		
(Q 22)	Willingness to Recommend this Hospital	% No: Definitely or Probably Not Recommend	% Yes: Probably Recommend	% Yes: Definitely Recommend	% No: Definitely or Probably Not Recommend	% Yes: Probably Recommend	% Yes: Definitely Recommend	% No: Definitely or Probably Not Recommend	% Yes: Probably Recommend	% Yes: Definitely Recommend
Willingness to Recommend this Hospital		4	14	82	4	25	71	6	26	68

**Footnote Legend**

6. Fewer than 100 patients completed the HCAHPS survey. Use these rates with caution, as the number of surveys may be too low to reliably assess hospital performance.
7. Survey results are based on less than 12 months of data.
8. Survey results are not available for this reporting period.
9. No or very few patients were eligible for the HCAHPS survey. The scores shown, if any, reflect a very small number of surveys.
11. There were discrepancies in the data collection process.