A Mortality Risk Model to Adjust for Case Mix in UK Paediatric Cardiac Surgery

Pagel C, Brown K, Crowe S, Utley M, Cunningham D, Tsang V

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Citation

Authors' objectives
To establish whether or not a risk model can be developed that is fit for the purpose of adjusting for case mix severity to facilitate routine monitoring of outcomes for paediatric cardiac surgery in the UK and to assess whether or not and how diagnostic information can augment procedural information in risk adjustment.

Authors' conclusions
For the first time diagnostic information has been successfully incorporated into risk adjustment for short-term outcomes in this patient group, which added discriminatory power. The risk model is fit for purpose, although the underestimation of risk in recent neonates is an important caveat. Several centres have expressed an interest in piloting the risk model and the accompanying monitoring tool. Future work includes developing software to generate variable life-adjusted display charts within units using the risk model; using the risk model to explore trends in case mix over time; and informing future work in evaluating long-term outcomes for children with CHD.

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Address for correspondence
HS&DR Programme, National Institute for Health Research, Evaluation, Trials and Studies Coordinating Centre, University of Southampton, Alpha House, Enterprise Road, Southampton, SO16 7NS, UK Tel: +44 23 8059 4304 Email: hsdrinfo@southampton.ac.uk

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