

Table Notes

Heart Attack – Angioplasty/Stent

Total Number of Cases includes all inpatient hospitalizations, after exclusions, for patients 18 years and older who underwent an angioplasty/stent procedure for heart attack. Patients who were transferred to another acute care hospital or left against medical advice were excluded.

Mortality represents patients who died during the hospital stay.

Readmission represents patients who were readmitted to a Pennsylvania general or specialty general acute care hospital within 30 days of the discharge date of the original hospitalization. Out-of-state residents were excluded because readmission data was not available for patients readmitted to a non-Pennsylvania hospital. Planned readmissions were not counted.

Average Hospital Charge represents the entire length of stay and is trimmed and case-mix adjusted. Professional fees were not included. In almost all cases, hospitals typically receive actual payments from private insurers or government payers that are considerably less than the listed charge.

These procedures are used to open narrowed or blocked coronary (heart) arteries to restore blood flow to the heart muscle by inserting a catheter (thin tube) through the skin of the upper thigh or arm. An angioplasty is performed by inflating a small balloon at the end of the catheter to widen the narrowed or blocked area in the artery. Angioplasty procedures are often combined with the placement of a stent (permanent metallic mesh tube) to prevent the artery from narrowing again. Only patients who had a myocardial infarction (heart attack) are included.

Understanding the Symbols

The symbols displayed in this report represent a comparison of a hospital's actual *mortality (or readmission)* rate to what is expected, after accounting for patient risk.

- **Rate was significantly lower than expected.** Fewer patients died (or were readmitted) than could be attributed to patient risk and random variation.
- **Rate was not significantly different than expected.** The number of patients who died (or were readmitted) was within the range anticipated based on patient risk and random variation.
- **Rate was significantly higher than expected.** More patients died (or were readmitted) than could be attributed to patient risk and random variation.

See **About the Report** section or **Technical Notes** for further details.