Hospital Compare Downloadable Database

This functionality is primarily used by health policy researchers and the media. The data provided in the five tables comes from the data that is displayed in the Hospital Compare Tool and includes additional information about the hospital ownership that is not displayed on the website. The date "Modified" in the zipped file indicates the date of the last refresh of the data. For information about hospitals in a particular geographical area, you should use the Hospital Compare tool instead of downloading the data.

Data Collection Period

The collection period for the starter set measures is 12 months. The collection period for the additional measures varies by measure. Currently, the Hospital Compare quality measures are refreshed the third month of each quarter. The chart below provides the 12-month collection period for the starter set measures in Hospital Compare.

Month Hospital Compare Refresh/Release	Starter Set Measure Collection Dates	
	From	Through
March 2006	July 2004	June 2005
June 2006	October 2004	September 2005
September 2006	January 2005	December 2005
December 2006	April 2005	March 2006
March 2007	July 2005	June 2006
June 2007	October 2005	September 2006
September 2007	January 2006	December 2006
December 2007	April 2006	March 2007

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There are five tables in the Hospital Compare database.

- 1) dbo_vwHQI_FTNT
- 2) dbo_vwHQI_HOSP
- 3) dbo_vwHQI_HOSP_MSR_XWLK
- 4) dbo_vwHQI_PCTL_MSR_XWLK
- 5) dbo_vwHQI_STATE_MSR_AVG

The first table, dbo_vwHQI_FTNT, contains two (2) fields. This table provides the footnote text.

- 1. Footnote (1)
- 2. Footnote Text (varies)

Hospital Compare Footnote values:

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

The second table, dbo_vwHQI_HOSP, contains fourteen (14) fields. This table provides general Hospital information in response to a Hospital Compare search.

- ProvNum: varchar(6) Lists the hospitals by their provider identification number.
- HospitalName: varchar(50) Lists the name of the hospital that corresponds to the provider identification number.
- 3. Address1: varchar(50) Lists the first line of the street address that corresponds to the hospital.
- 4. Address2: varchar(50) Lists the second line of the street address that corresponds to the hospital.
- 5. Address3: varchar(50) Lists the third line of the street address that corresponds to the hospital.
- 6. City: varchar(28) Lists the city in which the Hospital is located.

- 7. State: varchar(2) Lists the 2 letter code representing that state in which the Hospital is located.
- 8. ZIPCode: char(5) Lists the 5 digit numeric zip code that corresponds to the Hospital.
- 9. County Name: char () Lists the county in which the hospital is located.
- PhoneNumber: char(10) Lists the 10-digit numeric telephone number, including area code, that corresponds to the Hospital.
- 11. Hospital Type: char(8) Lists the type of hospital. The values are:
 - Acute Care Hospitals
 - Critical Access Hospitals
- 12. Hospital Ownership: varchar (44)
 - Lists the type of ownership the Hospital falls under. The values are:
 - Government Federal
 - Government Hospital District or Authority
 - Government Local
 - Government State
 - Proprietary
 - Voluntary non-profit Church
 - Voluntary non-profit Other
 - Voluntary non-profit Private
 - Not Available

13. Accreditation: varchar(3)

Returns "Yes" or "No" to specify whether or not the hospital is accredited.

14. Emergency Service MultiNursingHomeOwnership: char(3) Returns "Yes" or "No" to specify whether or not the hospital provides emergency service.

The third table, dbo_vwHQI_HOSP_MSR_XWLK, contains fourteen (7) fields. This table provides the quality measure scores for each hospital that reported information.

- ProvNum: varchar(6) Lists the hospitals by their provider identification number.
- 2. HospitalName: varchar(50) Lists the name of the hospital that corresponds to the provider identification number.

3. Condition: varchar (29)

Lists the clinical condition. The values are: Heart Attack Heart Failure Pneumonia Surgical Infection Prevention

4. Measure Name: varchar (91)

Lists the measure names. The values are:

- Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)
- Patients Given Beta Blocker at Discharge
- Patients Given Beta Blocker at Arrival
- Patients Given Assessment of Left Ventricular Function (LVF)
- Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)
- Patients Given Oxygenation Assessment
- Patients Assessed and Given Pneumococcal Vaccination
- Patients Given Initial Antibiotic(s) within 4 Hours After Arrival
- Patients Given Smoking Cessation Advice/Counseling
- Patients Given Thrombolytic Medication Within 30 Minutes Of Arrival
- Patients Given PCI Within 120 Minutes Of Arrival
- Patients Given Discharge Instructions
- Patients Given Smoking Cessation Advice/Counseling
- Patients Having a Blood Culture Performed Prior to First Antibiotic Received in Hospital
- Patients Given Smoking Cessation Advice/Counseling
- Patients Given the Most Appropriate Initial Antibiotic(s)
- Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision
- Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery
- 5. Score: varchar (4)
 - Lists the score (percentage) for each measure that the hospital submitted.
- 6. Sample: varchar (12) Lists the patient sample size for each measure that the hospital submitted.
- 7. Footnote: (1) Lists the footnote value when appropriate. The values are:
 - 1 The number of cases is too small (n < 25) for purposes of reliably predicting hospital's performance.

- 2 Measure reflects the hospital's indication that its submission was based on a sample of its relevant discharges.
- 3 Rate reflects fewer than the maximum possible quarters of data for the measure.
- 4 Inaccurate information submitted and suppressed for one or more quarters.
- 5 No data is available from the hospital for this measure.

The fourth table, dbo_vwHQI_PCTL_MSR_XWLK, contains four (4)fields. It provides the score achieved by the top ten (10) percent of hospitals and the national average score for each measure.

1. Measure Name: varchar (91)

Lists the measure name. The values are:

- Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)
- Patients Given Beta Blocker at Discharge
- Patients Given Beta Blocker at Arrival
- Patients Given Assessment of Left Ventricular Function (LVF)
- Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)
- Patients Given Oxygenation Assessment
- Patients Assessed and Given Pneumococcal Vaccination
- Patients Given Initial Antibiotic(s) within 4 Hours After Arrival
- Patients Given Smoking Cessation Advice/Counseling
- Patients Given Thrombolytic Medication Within 30 Minutes Of Arrival
- Patients Given PCI Within 120 Minutes Of Arrival
- Patients Given Discharge Instructions
- Patients Given Smoking Cessation Advice/Counseling
- Patients Having a Blood Culture Performed Prior to First Antibiotic Received in Hospital
- Patients Given Smoking Cessation Advice/Counseling
- Patients Given the Most Appropriate Initial Antibiotic(s)
- Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision
- Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery
- 2. Condition: (29) Lists the clinical condition. The values are:

Heart Attack Heart Failure Pneumonia Surgical Infection Prevention

3. Percentitle:

Identifies which score is listed. The values are:

• Top 10% of Hospitals submitting data scored equal to or higher than:

- National Average of Hospitals submitting data:
- 4. Score: (4) Lists the score for each measure, for top 10% and national

The fifth table, dbo_vwHQI_STATE_MSR_AVG, contains (4) fields. This table provides the State average for each measure.

1. State: (2)

Lists the alphabetic postal code used to identify each individual state. All fifty (50) states are listed, as well as:

- DC0 for Washington D.C.
- GU0 for Guam
- MP for Northern Mariana Islands
- PR0 for Puerto Rico
- VI0 for Virgin Islands
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- 2. Condition: (29) Lists the clinical condition. The values are:

Heart Attack Heart Failure Pneumonia Surgical Infection Prevention

3. Measure Name: varchar (91)

Lists the measure name. The values are:

- Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)
- Patients Given Beta Blocker at Discharge
- Patients Given Beta Blocker at Arrival
- Patients Given Assessment of Left Ventricular Function (LVF)
- Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)
- Patients Given Oxygenation Assessment
- Patients Assessed and Given Pneumococcal Vaccination
- Patients Given Initial Antibiotic(s) within 4 Hours After Arrival
- Patients Given Smoking Cessation Advice/Counseling
- Patients Given Thrombolytic Medication Within 30 Minutes Of Arrival
- Patients Given PCI Within 120 Minutes Of Arrival
- Patients Given Discharge Instructions
- Patients Given Smoking Cessation Advice/Counseling
- Patients Having a Blood Culture Performed Prior to First Antibiotic Received in Hospital
- Patients Given Smoking Cessation Advice/Counseling
- Patients Given the Most Appropriate Initial Antibiotic(s)

- Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision
- Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery
- 4. State Average: char(3) Lists the measure average for each State