

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |                                      |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|--------------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                             | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| AL    | Dothan       | SOUTHEAST ALABAMA MEDICAL CENTER†    | 010001                         | 94.63%  | 97.97%  | 88.11%   | 88.32%  | 87.41%   | 97.01%  | 89.03%                              | 80.18%  | 540              |
| AL    | Opelika      | EAST ALABAMA MEDICAL CENTER AND SNF† | 010029                         | 99.32%  | 99.71%  | 97.56%   | 88.46%  | 87.06%   | 98.40%  | 100.00%                             | 96.83%  | 1450             |
| AR    | Batesville   | WHITE RIVER MEDICAL CENTER†          | 040119                         | 95.39%  | 93.82%  | 87.71%   | 91.06%  | 90.70%   |   | 100.00%                             | 69.37%  | 483              |
| AR    | Pine Bluff   | JEFFERSON REGIONAL MED CENTER-AR†◆   | 040071                         | 96.53%  | 97.41%  | 95.95%   | 98.76%  | 98.76%   | 96.30%  | 100.00%                             | 99.43%  | 1274             |
| CA    | Apple Valley | ST MARY MEDICAL CENTER               | 050300                         | 96.63%  | 96.19%  | 88.74%   | 55.96%  | 56.87%   | 96.34%  | 99.86%                              | 98.05%  | 803              |
| CA    | Bakersfield  | SAN JOAQUIN COMMUNITY HOSPITAL       | 050455                         | 89.58%  | 91.59%  | 82.02%   | 84.17%  | 79.66%   | 74.71%  | 99.59%                              | 89.89%  | 486              |
| CA    | Escondido    | PALOMAR MEDICAL CENTER†              | 050115                         | 96.43%  | 97.65%  | 96.51%   | 83.97%  | 82.44%   | 93.88%  | 100.00%                             | 99.24%  | 629              |
| CA    | Fullerton    | ST JUDE MEDICAL CENTER†              | 050168                         | 98.84%  | 97.92%  | 94.57%   | 92.65%  | 88.89%   | 96.52%  | 99.84%                              | 96.46%  | 638              |
| CA    | Gilroy       | SAINT LOUISE REGIONAL HOSPITAL†◆     | 050688                         | 96.75%  | 97.54%  | 96.72%   | 94.79%  | 95.79%   |   | 100.00%                             | 86.36%  | 191              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |                                     |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|-------------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                            | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| CA    | Glendale     | GLENDALE ADVENTIST MEDICAL CENTER†◆ | 050239                         | 94.61%  | 98.38%  | 85.91%   | 89.01%  | 87.82%   | 95.83%  | 97.27%                              | 81.08%  | 795              |
| CA    | Los Angeles  | WHITE MEMORIAL MEDICAL CENTER†      | 050103                         | 96.65%  | 96.69%  | 93.14%   | 82.57%  | 81.48%   | 96.61%  | 93.99%                              | 76.92%  | 369              |
| CA    | Los Angeles  | SAINT VINCENT MEDICAL CENTER†◆      | 050502                         | 94.88%  | 99.13%  | 93.87%   | 87.12%  | 84.05%   | 90.77%  | 99.86%                              | 83.46%  | 738              |
| CA    | Lynwood      | ST FRANCIS MEDICAL CENTER†          | 050104                         | 93.92%  | 96.67%  | 94.34%   | 90.23%  | 88.64%   | 88.10%  | 99.36%                              | 69.57%  | 316              |
| CA    | Orange       | ST JOSEPH HOSPITAL†                 | 050069                         | 97.85%  | 98.82%  | 94.71%   | 89.42%  | 90.00%   | 96.27%  | 100.00%                             | 96.15%  | 601              |
| CA    | Paradise     | FEATHER RIVER HOSPITAL†             | 050225                         | 96.82%  | 98.19%  | 98.10%   | 95.83%  | 96.64%   |   | 100.00%                             | 88.89%  | 327              |
| CA    | Poway        | POMERADO HOSPITAL†◆                 | 050636                         | 97.36%  | 97.37%  | 96.12%   | 71.60%  | 74.36%   |   | 100.00%                             | 97.50%  | 378              |
| CA    | Saint Helena | ST HELENA HOSPITAL†                 | 050013                         | 99.62%  | 97.76%  | 91.44%   | 93.33%  | 92.98%   | 100.00%   | 100.00%                             | 95.18%  | 367              |
| CA    | San Jose     | O'CONNOR HOSPITAL†                  | 050153                         | 95.34%  | 97.54%  | 94.50%   | 88.89%  | 87.50%   | 94.44%  | 98.68%                              | 80.85%  | 459              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |                |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|----------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City           | Hospital                               | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| CA    | Simi Valley    | SIMI VALLEY HOSPITAL & HEALTH CARE SVC | 050236                         | 77.98%  | 94.42%  | 83.81%   | 88.89%  | 87.78%   |   | 98.45%                              | 73.81%  | 330              |
| CA    | Sonora         | SONORA REGIONAL MEDICAL CENTER†        | 050335                         | 97.69%  | 96.92%  | 98.14%   | 86.79%  | 85.71%   |   | 99.40%                              | 95.00%  | 502              |
| CO    | Grand Junction | ST MARYS HOSPITAL AND MEDICAL CENTER†  | 060023                         | 97.51%  | 98.71%  | 95.41%   | 93.50%  | 90.72%   | 93.94%  | 98.27%                              | 93.02%  | 1522             |
| FL    | Clearwater     | MORTON PLANT HOSPITAL†                 | 100127                         | 96.62%  | 97.32%  | 98.17%   | 97.99%  | 97.49%   | 98.64%  | 99.76%                              | 96.40%  | 1279             |
| FL    | Dunedin        | MEASE HEALTHCARE DUNEDIN†              | 100043                         | 94.78%  | 95.52%  | 94.40%   | 92.31%  | 89.66%   |   | 95.75%                              | 91.03%  | 260              |
| FL    | Hollywood      | MEMORIAL REGIONAL HOSPITAL*†           | 100038                         | 98.29%  | 98.63%  | 96.35%   | 97.14%  | 92.86%   | 99.25%  | 99.47%                              | 98.57%  | 573              |
| FL    | Homestead      | HOMESTEAD HOSPITAL*†                   | 100125                         | 98.21%  | 96.55%  | 100.00%  | 100.00%   | 98.80%   |   | 100.00%                             | 100.00%   | 213              |
| FL    | Jacksonville   | BAPTIST MEDICAL CENTER†                | 100088                         | 94.23%  | 96.07%  | 93.38%   | 86.18%  | 82.12%   | 89.01%  | 99.41%                              | 79.18%  | 1043             |
| FL    | Miami          | SOUTH MIAMI HOSPITAL†                  | 100154                         | 96.86%  | 98.76%  | 94.98%   | 98.36%  | 97.54%   | 94.87%  | 100.00%                             | 93.65%  | 494              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |                  |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City             | Hospital                                   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| FL    | Miami            | BAPTIST HOSPITAL OF MIAMI INC†             | 100008                         | 99.50%  | 98.54%  | 94.21%   | 93.98%  | 90.98%   | 98.55%  | 100.00%                             | 93.79%  | 596              |
| FL    | Miami Beach      | MOUNT SINAI MEDICAL CENTER†◆               | 100034                         | 96.66%  | 97.30%  | 91.01%   | 88.05%  | 86.04%   | 95.31%  | 99.66%                              | 99.41%  | 1173             |
| FL    | Naples           | NAPLES COMMUNITY HOSPITAL†                 | 100018                         | 94.33%  | 93.77%  | 82.61%   | 97.35%  | 97.35%   | 94.55%  | 97.99%                              | 57.59%  | 805              |
| FL    | New Port Richey  | MORTON PLANT NORTH BAY HOSPITAL            | 100063                         | 92.31%  | 87.29%  | 89.22%   | 86.24%  | 81.48%   |   | 100.00%                             | 90.48%  | 228              |
| FL    | Pembroke Pines   | MEMORIAL HOSPITAL PEMBROKE*†               | 100230                         | 99.49%  | 99.50%  | 96.74%   | 100.00%   | 100.00%  |   | 99.33%                              | 100.00%   | 316              |
| FL    | Pembroke Pines   | MEMORIAL HOSPITAL WEST*†                   | 100281                         | 96.65%  | 99.05%  | 96.92%   | 97.33%  | 96.00%   |   | 100.00%                             | 100.00%   | 350              |
| FL    | Plant City       | SOUTH FLORIDA BAPTIST HOSPITAL†◆           | 100132                         | 96.09%  | 90.96%  | 96.30%   | 80.51%  | 78.26%   |   | 100.00%                             | 95.00%  | 298              |
| FL    | Safety Harbor    | MORTON PLANT MEASE HEALTHCARE COUNTRYSIDE† | 100265                         | 90.86%  | 94.22%  | 92.57%   | 89.72%  | 85.05%   |   | 94.09%                              | 96.52%  | 501              |
| FL    | Saint Petersburg | ST ANTHONY'S HOSPITAL†◆                    | 100067                         | 96.82%  | 97.39%  | 94.48%   | 77.54%  | 75.36%   |   | 99.79%                              | 95.45%  | 503              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |                |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|----------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City           | Hospital                                   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| FL    | Tampa          | ST JOSEPH'S HOSPITAL†◆                     | 100075                         | 98.16%  | 96.19%  | 93.42%   | 87.14%  | 81.16%   | 98.32%  | 100.00%                             | 90.04%  | 959              |
| FL    | Tavernier      | MARINERS HOSPITAL†                         | 100160                         | 85.00%  | 100.00%   | 94.74%   | 100.00%   | 100.00%  |   | 100.00%                             | Low Sample (10 or less)   | 55               |
| FL    | Winter Haven   | WINTER HAVEN HOSPITAL†                     | 100052                         | 97.85%  | 99.29%  | 95.84%   | 93.87%  | 91.14%   | 92.51%  | 99.77%                              | 97.18%  | 907              |
| GA    | La Grange      | WEST GEORGIA MEDICAL CENTER, INC*†         | 110016                         | 99.57%  | 99.13%  | 94.47%   | 96.51%  | 93.02%   |   | 99.74%                              | 100.00%   | 392              |
| GA    | Savannah       | MEMORIAL HEALTH UNIVERSITY MEDICAL CENTER† | 110036                         | 90.08%  | 96.75%  | 94.00%   | 96.49%  | 96.47%   | 92.57%  | 99.57%                              | 87.10%  | 709              |
| GA    | Savannah       | CANDLER HOSPITAL                           | 110024                         | 86.61%  | 89.23%  | 70.97%   | 82.69%  | 83.50%   |   | 95.78%                              | 87.50%  | 240              |
| GA    | Savannah       | ST. JOSEPH'S HOSPITAL†                     | 110043                         | 95.45%  | 94.75%  | 86.74%   | 82.47%  | 80.41%   | 87.68%  | 98.99%                              | 84.85%  | 494              |
| HI    | Kailua         | CASTLE MEDICAL CENTER†                     | 120006                         | 97.55%  | 98.77%  | 91.03%   | 84.82%  | 82.14%   |   | 100.00%                             | 85.71%  | 285              |
| IA    | Council Bluffs | ALEGENT HEALTH MERCY HOSPITAL*†            | 160028                         | 98.45%  | 99.66%  | 98.40%   | 98.66%  | 98.66%   |   | 100.00%                             | 98.31%  | 805              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |               |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|---------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City          | Hospital                               | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| IA    | Mason City    | MERCY MEDICAL CENTER-NORTH IOWA†◆      | 160064                         | 98.09%  | 98.80%  | 96.04%   | 92.23%  | 90.67%   | 97.60%  | 100.00%                             | 93.66%  | 818              |
| ID    | Coeur D'Alene | KOOTENAI MEDICAL CENTER†◆              | 130049                         | 93.58%  | 95.98%  | 90.47%   | 89.26%  | 79.73%   | 98.72%  | 99.68%                              | 92.13%  | 620              |
| IL    | Chicago       | MT SINAI HOSPITAL MEDICAL CENTER†◆     | 140018                         | 96.18%  | 99.36%  | 91.24%   | 100.00%   | 96.33%   | 89.66%  | 97.83%                              | 88.46%  | 286              |
| IL    | Elmhurst      | ELMHURST MEMORIAL HOSPITAL†            | 140200                         | 98.70%  | 97.44%  | 93.77%   | 97.16%  | 93.36%   | 97.80%  | 100.00%                             | 91.27%  | 561              |
| IL    | Lincoln       | ABRAHAM LINCOLN MEMORIAL HOSPITAL*†    | 141322                         | 100.00%   | 97.50%  | 94.59%   | 100.00%   | 100.00%  |   | 100.00%                             | 100.00%   | 70               |
| IL    | Peoria        | METHODIST MEDICAL CENTER OF ILLINOIS†◆ | 140209                         | 97.02%  | 99.03%  | 97.34%   | 92.86%  | 91.30%   | 91.67%  | 99.66%                              | 90.82%  | 927              |
| IL    | Springfield   | MEMORIAL MEDICAL CENTER*†              | 140148                         | 98.87%  | 98.82%  | 97.33%   | 98.51%  | 95.90%   | 91.23%  | 99.83%                              | 96.19%  | 1798             |
| IL    | Taylorville   | TAYLORVILLE MEMORIAL HOSPITAL†         | 141339                         | 97.50%  | 87.50%  | 82.05%   | Low Sample (10 or less)   | Low Sample (10 or less)  |   | 100.00%                             | Low Sample (10 or less)   | 53               |
| KS    | Kansas City   | PROVIDENCE MEDICAL CENTER†◆            | 170146                         | 99.34%  | 97.81%  | 96.96%   | 83.61%  | 75.41%   | 100.00%   | 99.52%                              | 94.16%  | 624              |

SURGICAL CARE IMPROVEMENT PROJECT  
CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6  
Participants in Isolated Surgical Care Improvement Project (SCIP)

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |               |                                       |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|---------------|---------------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City          | Hospital                              | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| KS    | Leavenworth   | SAINT JOHN HOSPITAL                   | 170009                         | 86.36%  | 95.45%  | 86.36%   | 73.08%  | 73.08%   |   | 100.00%                             | 90.91%  | 59               |
| KS    | Topeka        | ST FRANCIS HEALTH CENTER†◆            | 170016                         | 95.16%  | 99.75%  | 96.44%   | 95.03%  | 94.41%   | 93.20%  | 98.63%                              | 97.86%  | 1035             |
| KY    | Ashland       | OUR LADY OF BELLEFONTE HOSPITAL†      | 180036                         | 97.83%  | 99.04%  | 99.18%   | 84.62%  | 84.62%   |   | 100.00%                             | 100.00%   | 593              |
| KY    | Bowling Green | THE MEDICAL CENTER AT BOWLING GREEN†◆ | 180013                         | 97.15%  | 98.12%  | 95.12%   | 84.18%  | 80.89%   | 90.50%  | 99.23%                              | 86.47%  | 1445             |
| KY    | Murray        | MURRAY-CALLOWAY COUNTY HOSPITAL       | 180027                         | 86.21%  | 93.75%  | 81.07%   | 84.80%  | 84.68%   |   | 97.77%                              | 91.07%  | 272              |
| MA    | Fall River    | SOUTHCOAST HOSPITAL GROUP, INC†       | 220074                         | 94.78%  | 94.96%  | 94.61%   | 89.30%  | 85.63%   | 95.11%  | 99.63%                              | 95.23%  | 2483             |
| MA    | Pittsfield    | BERKSHIRE MEDICAL CENTER INC*†        | 220046                         | 98.50%  | 99.57%  | 98.69%   | 96.15%  | 96.15%   | Low Sample (10 or less)   | 100.00%                             | 100.00%   | 784              |
| MA    | Springfield   | BAYSTATE MEDICAL CENTER*†             | 220077                         | 98.39%  | 98.57%  | 97.67%   | 99.35%  | 99.35%   | 97.13%  | 100.00%                             | 92.11%  | 913              |
| MD    | Baltimore     | BON SECOURS HOSPITAL                  | 210013                         | 70.45%  | 90.91%  | 58.14%   | 75.32%  | 72.22%   |   | 97.78%                              | 57.14%  | 141              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |                  |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City             | Hospital                                 | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| MD    | Frederick        | FREDERICK MEMORIAL HOSPITAL†             | 210005                         | 94.92%  | 98.06%  | 89.88%   | 90.00%  | 88.89%   |   | 99.22%                              | 91.49%  | 396              |
| MD    | Salisbury        | PENINSULA REGIONAL MEDICAL CENTER†       | 210019                         | 93.37%  | 97.80%  | 92.93%   | 75.89%  | 75.00%   | 93.23%  | 99.65%                              | 80.12%  | 567              |
| MI    | Lapeer           | LAPEER REGIONAL MEDICAL CENTER*†         | 230193                         | 99.18%  | 99.18%  | 97.41%   | 98.95%  | 98.94%   |   | 100.00%                             | 94.29%  | 482              |
| MN    | Burnsville       | FAIRVIEW RIDGES HOSPITAL†                | 240207                         | 96.90%  | 98.83%  | 95.69%   | 87.13%  | 82.18%   |   | 100.00%                             | 94.20%  | 393              |
| MN    | Edina            | FAIRVIEW SOUTHDAL E HOSPITAL†◆           | 240078                         | 97.95%  | 99.15%  | 95.43%   | 96.85%  | 93.04%   | 90.41%  | 78.34%                              | 95.71%  | 2174             |
| MN    | Minneapolis      | UNIVERSITY OF MINNESOTA MEDICAL CENTER,† | 240080                         | 97.42%  | 97.69%  | 94.02%   | 91.23%  | 88.60%   | 89.13%  | 99.69%                              | 94.74%  | 696              |
| MN    | Princeton        | FAIRVIEW NORTHLAND REGIONAL HOSPITAL*†   | 240141                         | 97.26%  | 98.64%  | 95.80%   | 97.14%  | 97.14%   |   | 100.00%                             | 100.00%   | 196              |
| MN    | Saint Louis Park | METHODIST HOSPITAL†                      | 240053                         | 97.63%  | 99.38%  | 97.15%   | 93.41%  | 92.78%   | 92.15%  | 100.00%                             | 87.56%  | 861              |
| MN    | Winona           | WINONA COMMUNITY MEMORIAL HOSPITAL†◆     | 240044                         | 98.47%  | 97.74%  | 92.97%   | 95.06%  | 95.06%   |   | 100.00%                             | 100.00%   | 165              |



**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                                 | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| MN    | Wyoming      | FAIRVIEW LAKES REGIONAL HEALTH CARE†     | 240050                         | 97.01%  | 98.52%  | 97.47%   | 100.00%   | 98.77%   |   | 100.00%                             | 91.07%  | 434              |
| MO    | Blue Springs | ST. MARY'S MEDICAL CENTER†               | 260193                         | 97.78%  | 97.78%  | 97.21%   | 96.61%  | 97.44%   |   | 100.00%                             | 89.66%  | 273              |
| MO    | Kansas City  | ST. JOSEPH MEDICAL CENTER†               | 260085                         | 95.84%  | 95.30%  | 92.44%   | 83.45%  | 81.16%   | 91.67%  | 99.79%                              | 95.71%  | 498              |
| MO    | Saint Joseph | HEARTLAND REGIONAL MEDICAL CENTER*†      | 260006                         | 99.61%  | 99.71%  | 98.99%   | 98.58%  | 97.63%   | 90.97%  | 100.00%                             | 98.53%  | 1274             |
| MS    | Meridian     | RUSH FOUNDATION HOSPITAL*†               | 250069                         | 99.68%  | 99.05%  | 96.23%   | 98.87%  | 97.74%   | 100.00%   | 100.00%                             | 98.68%  | 477              |
| MT    | Billings     | ST VINCENT HEALTHCARE*†                  | 270049                         | 99.66%  | 99.75%  | 99.39%   | 99.60%  | 98.42%   | 94.25%  | 100.00%                             | 98.63%  | 1471             |
| MT    | Butte        | ST JAMES HEALTHCARE*†                    | 270017                         | 99.60%  | 98.78%  | 97.83%   | 99.06%  | 97.17%   |   | 100.00%                             | 93.02%  | 361              |
| MT    | Miles City   | HOLY ROSARY HEALTHCARE†                  | 270002                         | 97.85%  | 94.68%  | 92.47%   | 97.78%  | 97.78%   |   | 100.00%                             | Low Sample (10 or less)   | 118              |
| MT    | Missoula     | ST PATRICK HOSPITAL AND HEALTH SCIENCES† | 270014                         | 99.01%  | 99.05%  | 97.42%   | 96.75%  | 95.12%   | 95.88%  | 97.95%                              | 94.95%  | 607              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |                                   |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|-----------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                          | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| NC    | Albemarle    | STANLY REGIONAL MEDICAL CENTER†   | 340119                         | 96.36%  | 97.27%  | 91.00%   | 90.54%  | 80.82%   |   | 100.00%                             | 90.00%  | 222              |
| NC    | Asheboro     | RANDOLPH HOSPITAL†                | 340123                         | 94.12%  | 97.83%  | 91.20%   | 87.72%  | 86.73%   |   | 100.00%                             | 87.93%  | 251              |
| NC    | Asheville    | MISSION HOSPITALS, INC†           | 340002                         | 96.36%  | 99.47%  | 96.60%   | 96.81%  | 94.62%   | 98.22%  | 100.00%                             | 94.72%  | 2422             |
| NC    | Boone        | WATAUGA MEDICAL CENTER†◆          | 340051                         | 97.32%  | 99.56%  | 88.10%   | 96.15%  | 93.27%   |   | 100.00%                             | 100.00%   | 320              |
| NC    | Burlington   | ALAMANCE REGIONAL MEDICAL CENTER† | 340070                         | 96.23%  | 96.47%  | 92.47%   | 93.09%  | 93.01%   |   | 99.71%                              | 89.21%  | 722              |
| NC    | CLYDE        | HAYWOOD REGIONAL MEDICAL CENTER†  | 340184                         | 80.61%  | 94.80%  | 93.78%   | 92.86%  | 90.82%   |   | 100.00%                             | 92.54%  | 401              |
| NC    | Durham       | DURHAM REGIONAL HOSPITAL*†        | 340155                         | 97.54%  | 99.35%  | 98.09%   | 97.61%  | 95.22%   | 98.33%  | 99.69%                              | 91.63%  | 964              |
| NC    | Durham       | DUKE UNIVERSITY HOSPITAL†         | 340030                         | 95.93%  | 98.26%  | 96.67%   | 100.00%   | 99.52%   | 97.41%  | 94.05%                              | 99.24%  | 700              |
| NC    | Fayetteville | CAPE FEAR VALLEY MEDICAL CENTER†  | 340028                         | 98.03%  | 98.71%  | 91.80%   | 81.56%  | 76.43%   | 92.71%  | 99.84%                              | 95.28%  | 638              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |            |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City       | Hospital                                   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| NC    | Gastonia   | CAROMONT HEALTH GASTON MEMORIAL HOSPITAL*† | 340032                         | 99.79%  | 99.28%  | 97.73%   | 99.69%  | 97.82%   | 100.00%   | 100.00%                             | 99.33%  | 1493             |
| NC    | Goldsboro  | WAYNE MEMORIAL HOSPITAL†                   | 340010                         | 92.66%  | 93.58%  | 91.75%   | 95.56%  | 88.06%   |   | 97.19%                              | 90.48%  | 363              |
| NC    | Hickory    | CATAWBA VALLEY MEDICAL CENTER†             | 340143                         | 95.03%  | 99.80%  | 94.12%   | 97.90%  | 96.85%   |   | 99.72%                              | 98.51%  | 756              |
| NC    | Lumberton  | SOUTHEASTERN REGIONAL MEDICAL CENTER†      | 340050                         | 96.96%  | 96.28%  | 92.55%   | 97.74%  | 88.14%   | 96.77%  | 99.77%                              | 92.11%  | 434              |
| NC    | Pinehurst  | FIRSTHEALTH MOORE REGIONAL HOSPITAL†       | 340115                         | 98.01%  | 98.29%  | 97.23%   | 95.48%  | 94.96%   | 95.39%  | 99.42%                              | 95.93%  | 2311             |
| NC    | Raleigh    | DUKE HEALTH RALEIGH HOSPITAL†              | 340073                         | 94.68%  | 98.18%  | 94.94%   | 95.32%  | 93.25%   | Low Sample (10 or less)   | 98.99%                              | 88.11%  | 910              |
| NC    | Shelby     | CLEVELAND REGIONAL MEDICAL CENTER†         | 340021                         | 98.77%  | 97.32%  | 95.24%   | 93.91%  | 90.43%   |   | 100.00%                             | 93.20%  | 556              |
| NC    | Sylva      | HARRIS REGIONAL HOSPITAL, INC†◆            | 340016                         | 95.29%  | 99.48%  | 94.22%   | 94.12%  | 84.56%   |   | 100.00%                             | 97.37%  | 241              |
| NC    | Wilmington | NEW HANOVER REGIONAL MEDICAL CENTER†       | 340141                         | 93.81%  | 96.22%  | 90.23%   | 96.83%  | 96.09%   | 96.99%  | 91.04%                              | 90.61%  | 884              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |            |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City       | Hospital                                 | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| NC    | Wilson     | WILSON MEDICAL CENTER†                   | 340126                         | 98.62%  | 97.35%  | 80.28%   | 94.32%  | 91.95%   |   | 98.77%                              | 96.43%  | 334              |
| NE    | Fremont    | FREMONT AREA MEDICAL CENTER†             | 280077                         | 97.39%  | 99.22%  | 90.84%   | 100.00%   | 100.00%  |   | 100.00%                             | 93.59%  | 507              |
| NE    | Omaha      | ALEGENT HEALTH-BERGAN MERCY MEDICAL CTR† | 280060                         | 94.76%  | 98.92%  | 96.09%   | 96.97%  | 95.96%   | 98.64%  | 100.00%                             | 95.22%  | 1665             |
| NE    | Omaha      | ALEGENT HEALTH IMMANUEL MEDICAL CTR*†    | 280081                         | 98.23%  | 98.95%  | 95.54%   | 99.26%  | 97.78%   | 100.00%   | 100.00%                             | 94.79%  | 429              |
| NE    | Papillion  | ALEGENT HEALTH-MIDLANDS COMM HOSP*†      | 280105                         | 94.38%  | 97.78%  | 100.00%  | 97.92%  | 97.92%   |   | 100.00%                             | 100.00%   | 158              |
| NJ    | Hackensack | HACKENSACK UNIVERSITY MEDICAL CENTER†    | 310001                         | 99.29%  | 98.38%  | 94.01%   | 90.45%  | 87.18%   | 94.40%  | 100.00%                             | 90.91%  | 700              |
| NY    | Bay Shore  | SOUTHSIDE HOSPITAL*†                     | 330043                         | 98.08%  | 99.62%  | 97.56%   | 99.02%  | 97.56%   |   | 99.76%                              | 97.85%  | 422              |
| NY    | Brockport  | LAKESIDE MEMORIAL HOSPITAL*†             | 330037                         | 98.53%  | 100.00%   | 92.06%   | 100.00%   | 100.00%  |   | 100.00%                             | 100.00%   | 119              |
| NY    | Bronx      | ST BARNABAS HOSPITAL†                    | 330399                         | 89.11%  | 97.94%  | 90.22%   | 97.50%  | 92.44%   | Low Sample (10 or less)   | 100.00%                             | 86.21%  | 217              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |               |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|---------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City          | Hospital   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| NY    | Elmira        | ARNOT OGDEN MEDICAL CENTER†                      | 330090                         | 98.77%  | 98.49%  | 95.90%   | 97.87%  | 96.81%   | 89.00%  | 98.30%                              | 100.00%   | 481              |
| NY    | Forest Hills  | NS-LIJ HS-NORTH SHORE UNIV HOSP AT FOREST HILLS† | 330353                         | 99.21%  | 98.82%  | 93.70%   | 98.84%  | 93.06%   |   | 99.75%                              | 95.18%  | 408              |
| NY    | Glen Cove     | NS-LIJ HS-NORTH SHORE UNIV HOSP AT GLEN COVE*†   | 330181                         | 97.88%  | 98.94%  | 98.92%   | 100.00%   | 98.76%   |   | 99.68%                              | 94.83%  | 308              |
| NY    | Huntington    | HUNTINGTON HOSPITAL†                             | 330045                         | 94.58%  | 98.74%  | 95.13%   | 98.62%  | 97.93%   |   | 100.00%                             | 97.35%  | 396              |
| NY    | Manhasset     | NS-LIJ HS-NORTH SHORE UNIVERSITY HOSPITAL†       | 330106                         | 97.32%  | 97.51%  | 95.24%   | 99.70%  | 99.11%   | 96.91%  | 100.00%                             | 95.83%  | 986              |
| NY    | New Hyde Park | LONG ISLAND JEWISH MEDICAL CENTER†               | 330195                         | 98.76%  | 96.73%  | 94.87%   | 98.45%  | 98.95%   | 95.03%  | 100.00%                             | 89.05%  | 683              |
| NY    | Plainview     | NS-LIJ HS-NORTH SHORE UNIV HOSP AT PLAINVIEW*†   | 330331                         | 99.63%  | 98.89%  | 97.67%   | 98.73%  | 97.47%   | Low Sample (10 or less)   | 100.00%                             | 100.00%   | 444              |
| NY    | Port Jervis   | BON SECOURS COMMUNITY HOSPITAL†◆                 | 330135                         | 93.88%  | 97.96%  | 93.62%   | 98.11%  | 94.23%   |   | 100.00%                             | 86.36%  | 127              |
| NY    | Rochester     | ROCHESTER GENERAL HOSPITAL*†                     | 330125                         | 98.62%  | 99.33%  | 98.98%   | 99.51%  | 99.01%   | 97.60%  | 99.91%                              | 93.60%  | 2354             |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |               |                                      |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|---------------|--------------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City          | Hospital                             | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| NY    | Staten Island | STATEN ISLAND UNIVERSITY HOSPITAL†   | 330160                         | 96.62%  | 98.09%  | 97.69%   | 99.48%  | 99.48%   | 93.08%  | 100.00%                             | 94.93%  | 581              |
| NY    | Suffern       | GOOD SAMARITAN HOSPITAL OF SUFFERN†◆ | 330158                         | 96.20%  | 94.08%  | 87.45%   | 72.66%  | 70.63%   | 96.84%  | 99.55%                              | 98.97%  | 678              |
| NY    | Valley Stream | FRANKLIN HOSPITAL MED CTR†◆          | 330372                         | 96.50%  | 97.00%  | 96.22%   | 96.49%  | 93.57%   | Low Sample (10 or less)   | 99.70%                              | 96.92%  | 340              |
| NY    | Warwick       | ST ANTHONY COMMUNITY HOSPITAL†       | 330205                         | 96.43%  | 99.11%  | 91.74%   | 98.18%  | 96.36%   |   | 100.00%                             | 87.50%  | 174              |
| OH    | Akron         | SUMMA HEALTH SYSTEMS HOSPITALS†      | 360020                         | 95.37%  | 98.34%  | 90.20%   | 97.85%  | 95.70%   | 82.88%  | 98.81%                              | 56.74%  | 678              |
| OH    | Dayton        | GRANDVIEW HOSPITAL & MEDICAL CENTER† | 360133                         | 98.41%  | 97.55%  | 94.81%   | 96.81%  | 94.68%   | 87.23%  | 100.00%                             | 94.62%  | 897              |
| OH    | Kettering     | KETTERING MEDICAL CENTER*†           | 360079                         | 99.50%  | 99.50%  | 98.96%   | 99.51%  | 98.78%   | 95.43%  | 99.61%                              | 97.58%  | 2567             |
| OH    | Miamisburg    | SYCAMORE HOSPITAL*†                  | 360239                         | 99.03%  | 99.35%  | 98.99%   | 100.00%   | 98.79%   |   | 100.00%                             | 97.52%  | 474              |
| OH    | Springfield   | SPRINGFIELD REGIONAL MEDICAL CENTER† | 360086                         | 96.78%  | 98.39%  | 94.72%   | 83.85%  | 78.85%   | 98.89%  | 99.53%                              | 97.06%  | 1080             |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |                                       |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|---------------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                              | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| OH    | Toledo       | ST. VINCENT MERCY MEDICAL CENTER†     | 360112                         | 95.69%  | 98.61%  | 93.55%   | 96.24%  | 91.73%   | 97.98%  | 99.76%                              | 93.39%  | 860              |
| OK    | BROKEN ARROW | ST. FRANCIS HOSPITAL SOUTH*†          | 370218                         | 99.53%  | 99.07%  | 98.56%   | 100.00%   | 96.55%   |   | 100.00%                             | 93.18%  | 269              |
| OK    | Tulsa        | SAINT FRANCIS HOSPITAL, INC†          | 370091                         | 94.66%  | 96.73%  | 92.07%   | 95.78%  | 91.82%   | 97.14%  | 99.91%                              | 90.67%  | 2283             |
| OR    | Medford      | ROGUE VALLEY MEDICAL CENTER†◆         | 380018                         | 98.47%  | 99.40%  | 98.44%   | 99.29%  | 97.86%   | 87.24%  | 99.25%                              | 86.60%  | 813              |
| OR    | Portland     | ADVENTIST MEDICAL CENTER†◆            | 380060                         | 93.98%  | 95.15%  | 90.77%   | 89.26%  | 89.86%   |   | 99.49%                              | 100.00%   | 400              |
| PA    | Bethlehem    | ST. LUKES HOSPITAL NETWORK†           | 390049                         | 98.17%  | 97.74%  | 95.78%   | 97.54%  | 96.64%   | 96.64%  | 99.73%                              | 88.25%  | 1896             |
| PA    | Bryn Mawr    | MAIN LINE HEALTH-BRYN MAWR HOSPITAL*† | 390139                         | 99.09%  | 99.18%  | 99.07%   | 99.40%  | 96.39%   | 95.45%  | 99.59%                              | 98.50%  | 1460             |
| PA    | Erie         | SAINT VINCENT HEALTH CENTER†          | 390009                         | 97.97%  | 99.46%  | 96.34%   | 97.51%  | 96.96%   | 93.29%  | 100.00%                             | 93.32%  | 1833             |
| PA    | Meadville    | MEADVILLE MEDICAL CENTER†             | 390113                         | 97.71%  | 99.05%  | 95.01%   | 92.12%  | 90.24%   |   | 100.00%                             | 95.00%  | 724              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |   |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|---|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                                      | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| PA    | Paoli        | MAIN LINE HOSPITALS-PAOLI MEMORIAL HOSPITAL†◆ | 390153                         | 98.57%  | 97.87%  | 97.53%   | 96.55%  | 93.68%   | 96.97%  | 99.77%                              | 94.38%  | 886              |
| PA    | Philadelphia | FRANKFORD HOSPITAL†                           | 390115                         | 91.55%  | 96.25%  | 90.91%   | 97.30%  | 97.30%   | 94.38%  | 98.94%                              | 96.45%  | 592              |
| PA    | Philadelphia | ALBERT EINSTEIN MEDICAL CENTER*†              | 390142                         | 97.90%  | 98.43%  | 97.05%   | 99.15%  | 99.15%   | 91.40%  | 100.00%                             | 97.14%  | 675              |
| PA    | Philadelphia | THOMAS JEFFERSON UNIVERSITY HOSPITAL*†        | 390174                         | 98.28%  | 98.71%  | 97.56%   | 95.96%  | 95.08%   | 86.03%  | 100.00%                             | 99.18%  | 3244             |
| PA    | Wynnewood    | MAIN LINE HEALTH-LANKENAU HOSPITAL†◆          | 390195                         | 99.01%  | 98.58%  | 97.11%   | 95.78%  | 92.41%   | 97.20%  | 99.93%                              | 91.73%  | 1346             |
| SC    | Anderson     | ANMED HEALTH SYSTEM†◆                         | 420027                         | 95.39%  | 99.21%  | 97.40%   | 95.41%  | 92.09%   | 85.23%  | 99.90%                              | 90.76%  | 991              |
| SC    | Columbia     | PALMETTO HEALTH BAPTIST†                      | 420086                         | 98.87%  | 98.31%  | 94.60%   | 97.76%  | 95.99%   |   | 99.92%                              | 94.84%  | 1490             |
| SC    | Columbia     | PALMETTO HEALTH RICHLAND*†                    | 420018                         | 99.34%  | 98.91%  | 96.77%   | 99.41%  | 99.02%   | 100.00%   | 99.76%                              | 97.33%  | 2104             |
| SC    | Conway       | CONWAY MEDICAL CENTER†◆                       | 420049                         | 97.92%  | 99.17%  | 96.83%   | 98.01%  | 97.35%   |   | 96.91%                              | 90.14%  | 365              |



**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |                                  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|----------------------------------|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                         | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| SC    | Easley       | PALMETTO HEALTH BAPTIST EASLEY*† | 420015                         | 99.55%  | 99.55%  | 98.03%   | 96.51%  | 93.02%   |   | 100.00%                             | 95.83%  | 337              |
| SC    | Florence     | MCLEOD REGIONAL MEDICAL CENTER†  | 420051                         | 95.87%  | 98.73%  | 89.01%   | 94.87%  | 89.10%   | 81.20%  | 83.45%                              | 94.57%  | 558              |
| SC    | Greenville   | GREENVILLE MEMORIAL HOSPITAL†    | 420078                         | 100.00%   | 99.32%  | 96.35%   | 98.94%  | 95.77%   | 97.66%  | 98.71%                              | 87.73%  | 717              |
| SC    | Greenville   | ST FRANCIS HOSPITAL†             | 420023                         | 97.34%  | 98.59%  | 95.44%   | 77.78%  | 73.28%   | 95.24%  | 99.21%                              | 89.21%  | 634              |
| SC    | Greenwood    | SELF REGIONAL HEALTHCARE†        | 420071                         | 97.01%  | 99.37%  | 95.94%   | 97.08%  | 97.08%   | 85.57%  | 99.37%                              | 80.72%  | 811              |
| SC    | Greer        | GREER MEMORIAL HOSPITAL†         | 420033                         | 97.77%  | 98.67%  | 99.07%   | 99.21%  | 96.06%   |   | 100.00%                             | 73.97%  | 372              |
| SC    | Simpsonville | HILLCREST HOSPITAL*†             | 420037                         | 99.15%  | 99.16%  | 98.29%   | 100.00%   | 97.44%   |   | 100.00%                             | 88.24%  | 165              |
| SD    | Aberdeen     | AVERA ST. LUKE'S†                | 430014                         | 94.38%  | 97.82%  | 95.19%   | 78.95%  | 81.75%   |   | 99.77%                              | 88.89%  | 477              |
| SD    | Mitchell     | AVERA QUEEN OF PEACE*†           | 430013                         | 100.00%   | 96.77%  | 99.33%   | 98.72%  | 98.72%   |   | 100.00%                             | 95.12%  | 241              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo- embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|--|--------------------------------|---|---|--|--|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital                                   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received  | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| SD    | Rapid City   | RAPID CITY REGIONAL HOSPITAL†              | 430077                         | 93.08%  | 98.50%  | 90.31%   | 97.45%   | 96.92%   | 99.11%  | 96.46%                              | 88.72%  | 485              |
| SD    | Sioux Falls  | AVERA MCKENNAN HOSP&UNIVERSITY HLTH CT†    | 430016                         | 98.17%  | 97.13%  | 93.48%   | 93.04%   | 92.36%   | Low Sample (10 or less)   | 100.00%                             | 96.81%  | 546              |
| SD    | Yankton      | AVERA SACRED HEART HOSPITAL†               | 430012                         | 96.55%  | 96.60%  | 96.31%   | 91.67%   | 89.58%   |   | 93.78%                              | 100.00%   | 391              |
| TN    | Elizabethton | SYCAMORE SHOALS HOSPITAL†◆                 | 440018                         | 98.37%  | 97.60%  | 96.64%   | 93.33%   | 92.00%   |   | 100.00%                             | 86.96%  | 214              |
| TN    | Johnson City | JOHNSON CITY MEDICAL CENTER†               | 440063                         | 98.65%  | 99.34%  | 77.78%   | 85.53%   | 83.65%   | 86.67%  | 99.69%                              | 92.94%  | 662              |
| TN    | Kingsport    | INDIAN PATH MEDICAL CENTER†◆               | 440176                         | 97.07%  | 97.50%  | 91.71%   | 97.21%   | 95.53%   |   | 98.41%                              | 94.87%  | 381              |
| TN    | Memphis      | METHODIST HEALTHCARE MEMPHIS HOSPITALS†    | 440049                         | 97.89%  | 95.77%  | 92.71%   | 94.03%   | 90.15%   | 92.34%  | 99.65%                              | 91.09%  | 2897             |
| TX    | Allen        | TEXAS HEALTH PRESBYTERIAN HOSPITAL ALLEN   | 450840                         | 87.02%  | 90.08%  | 88.10%   | 73.53%   | 70.59%   |   | 100.00%                             | 85.00%  | 212              |
| TX    | Arlington    | TEXAS HEALTH ARLINGTON MEMORIAL HOSPITAL†◆ | 450064                         | 98.20%  | 97.95%  | 93.13%   | 97.77%   | 96.63%   | 91.01%  | 99.08%                              | 83.20%  | 549              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |            |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo- embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------|--|--------------------------------|---|---|--|--|--|---|-------------------------------------|---|------------------|
| State | City       | Hospital   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received  | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| TX    | Azle       | TEXAS HEALTH HARRIS METHODIST HOSPITAL AZLE†                 | 450419                         | 100.00%   | 95.65%  | 95.35%   | 95.24%   | 95.24%   |   | 100.00%                             | 100.00%   | 72               |
| TX    | Bedford    | TEXAS HEALTH HARRIS METHODIST HOSPITAL HURST-EULESS-BEDFORD† | 450639                         | 94.12%  | 99.02%  | 93.36%   | 93.88%   | 90.31%   | 100.00%   | 100.00%                             | 86.73%  | 499              |
| TX    | Cleburne   | TEXAS HEALTH HARRIS METHODIST HOSPITAL CLEBURNE†             | 450148                         | 98.44%  | 100.00%   | 95.24%   | 97.12%   | 94.23%   |   | 100.00%                             | 88.57%  | 282              |
| TX    | Dallas     | METHODIST CHARLTON MEDICAL CENTER†                           | 450723                         | 98.02%  | 98.43%  | 95.45%   | 90.77%   | 83.85%   |   | 99.73%                              | 92.50%  | 373              |
| TX    | Dallas     | TEXAS HEALTH PRESBYTERIAN HOSPITAL DALLAS†                   | 450462                         | 97.53%  | 99.35%  | 93.33%   | 89.31%   | 86.16%   | 87.50%  | 99.56%                              | 84.62%  | 699              |
| TX    | Dallas     | METHODIST DALLAS MEDICAL CENTER†                             | 450051                         | 98.58%  | 98.03%  | 96.74%   | 91.14%   | 79.62%   | 96.04%  | 99.81%                              | 93.27%  | 541              |
| TX    | Fort Worth | TEXAS HEALTH HARRIS METHODIST HOSPITAL FORT WORTH†           | 450135                         | 98.70%  | 95.26%  | 92.58%   | 89.04%   | 85.19%   | 79.47%  | 99.71%                              | 98.41%  | 709              |
| TX    | Fort Worth | TEXAS HEALTH HARRIS METHODIST HOSPITAL SOUTHWEST FORT WORTH† | 450779                         | 98.13%  | 96.73%  | 95.52%   | 92.42%   | 90.05%   |   | 100.00%                             | 93.94%  | 376              |
| TX    | Harlingen  | VALLEY BAPTIST MEDICAL CENTER                                | 450033                         | 93.59%  | 86.82%  | 85.29%   | 86.82%   | 86.82%   | 75.29%  | 98.29%                              | 90.27%  | 479              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |              |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|--------------|--|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City         | Hospital   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| TX    | Kaufman      | TEXAS HEALTH PRESBYTERIAN HOSPITAL KAUFMAN†◆         | 450292                         | 99.13%  | 98.26%  | 91.67%   | 100.00%   | 100.00%  |   | 100.00%                             | 88.89%  | 150              |
| TX    | Livingston   | MEMORIAL MEDICAL CENTER LIVINGSTON                   | 450395                         | 95.53%  | 95.00%  | 34.66%   | 80.17%  | 79.28%   |   | 94.98%                              | 81.13%  | 243              |
| TX    | Lufkin       | MEMORIAL MEDICAL CENTER OF EAST TEXAS†◆              | 450211                         | 86.27%  | 90.66%  | 91.56%   | 94.56%  | 88.36%   | 88.24%  | 96.45%                              | 91.57%  | 411              |
| TX    | Plano        | TEXAS HEALTH PRESBYTERIAN HOSPITAL PLANO             | 450771                         | 94.81%  | 97.99%  | 94.10%   | 65.07%  | 63.01%   | 88.89%  | 98.61%                              | 70.51%  | 507              |
| TX    | Stephenville | TEXAS HEALTH HARRIS METHODIST HOSPITAL STEPHENVILLE† | 450351                         | 98.05%  | 97.42%  | 95.39%   | 87.14%  | 87.14%   |   | 100.00%                             | 85.29%  | 221              |
| TX    | Victoria     | CITIZENS MEDICAL CENTER†                             | 450023                         | 98.17%  | 96.95%  | 92.15%   | 99.41%  | 98.53%   | 87.72%  | 99.90%                              | 100.00%   | 989              |
| TX    | Winnsboro    | TEXAS HEALTH PRESBYTERIAN HOSPITAL WINNSBORO         | 450224                         | 100.00%   | 100.00%   | 72.22%   | 79.31%  | 85.19%   |   | 100.00%                             | Low Sample (10 or less)   | 43               |
| VA    | Chesapeake   | CHESAPEAKE GENERAL HOSPITAL†                         | 490120                         | 97.29%  | 99.33%  | 91.98%   | 98.18%  | 96.97%   |   | 99.77%                              | 82.76%  | 441              |
| VA    | Galax        | TWIN COUNTY REGIONAL HOSPITAL†◆                      | 490115                         | 99.12%  | 98.26%  | 93.88%   | 85.15%  | 82.18%   |   | 100.00%                             | 100.00%   | 204              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |                |   |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|----------------|---|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City           | Hospital                                      | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| VA    | Gloucester     | RIVERSIDE WALTER REED HOSPITAL                | 490130                         | 90.65%  | 87.77%  | 94.70%   | 66.67%  | 66.10%   |   | 93.51%                              | 85.37%  | 187              |
| VA    | Mechanicsville | BON SECOURS - MEMORIAL REGIONAL MEDICAL*†     | 490069                         | 99.02%  | 98.20%  | 97.08%   | 96.60%  | 96.12%   | 97.33%  | 100.00%                             | 100.00%   | 865              |
| VA    | Newport News   | RIVERSIDE REGIONAL MEDICAL CENTER†            | 490052                         | 97.61%  | 97.61%  | 86.35%   | 92.16%  | 90.85%   | 92.31%  | 99.83%                              | 90.37%  | 584              |
| VA    | Newport News   | BON SECOURS - MARY IMMACULATE HOSPITAL†       | 490041                         | 91.56%  | 98.51%  | 91.47%   | 95.93%  | 93.50%   |   | 99.66%                              | 97.60%  | 1189             |
| VA    | Norfolk        | BON SECOURS-DEPAUL MEDICAL CENTER†            | 490011                         | 97.08%  | 99.28%  | 95.86%   | 95.65%  | 95.65%   |   | 99.75%                              | 98.18%  | 419              |
| VA    | Portsmouth     | BON SECOURS MARYVIEW MEDICAL CENTER†          | 490017                         | 93.95%  | 96.02%  | 93.83%   | 97.31%  | 96.41%   | 95.83%  | 100.00%                             | 100.00%   | 755              |
| VA    | Richmond       | BON SECOURS - ST MARYS HOSPITAL OF RICHMOND*† | 490059                         | 98.67%  | 98.85%  | 97.21%   | 97.74%  | 97.36%   | 99.24%  | 99.95%                              | 96.58%  | 2035             |
| VA    | South Hill     | COMMUNITY MEM HEALTHCENTER                    | 490098                         | 93.10%  | 96.72%  | 89.66%   | 66.27%  | 66.67%   |   | 97.73%                              | 88.89%  | 132              |
| VA    | Tappahannock   | RIVERSIDE TAPPAHANNOCK HOSP INC*†             | 490084                         | 100.00%   | 100.00%   | 100.00%  | 100.00%   | 100.00%  |   | 100.00%                             | 85.71%  | 138              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |             |   |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo - embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|-------------|---|--------------------------------|---|---|--|---|--|---|-------------------------------------|---|------------------|
| State | City        | Hospital                                    | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received   | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| WA    | Colville    | MOUNT CARMEL HOSPITAL†◆                     | 501326                         | 94.87%  | 100.00%   | 100.00%  | 95.00%  | 95.00%   |   | 100.00%                             | 88.89%  | 82               |
| WA    | Spokane     | SACRED HEART MEDICAL CENTER†                | 500054                         | 97.69%  | 96.59%  | 88.12%   | 95.80%  | 95.10%   | 96.48%  | 99.68%                              | 73.04%  | 635              |
| WA    | Spokane     | HOLY FAMILY HOSPITAL†                       | 500077                         | 97.83%  | 97.86%  | 96.38%   | 85.29%  | 85.29%   |   | 98.85%                              | 75.51%  | 355              |
| WA    | Walla Walla | ST MARY MEDICAL CENTER†                     | 500002                         | 98.08%  | 99.68%  | 93.16%   | 86.61%  | 87.30%   |   | 100.00%                             | 98.31%  | 459              |
| WI    | Burlington  | MEMORIAL HOSPITAL OF BURLINGTON*†           | 520059                         | 98.96%  | 96.41%  | 98.33%   | 97.75%  | 95.51%   |   | 100.00%                             | 98.25%  | 324              |
| WI    | Elkhorn     | AURORA LAKELAND MED CTR†                    | 520102                         | 97.48%  | 92.56%  | 96.12%   | 94.64%  | 91.07%   |   | 100.00%                             | 97.78%  | 223              |
| WI    | Green Bay   | AURORA BAYCARE MED CTR†                     | 520193                         | 98.51%  | 98.53%  | 97.55%   | 82.42%  | 80.22%   | 100.00%   | 97.87%                              | 94.96%  | 473              |
| WI    | Hartford    | AURORA MEDICAL CENTER OF WASHINGTON COUNTY† | 520038                         | 96.62%  | 96.62%  | 98.59%   | 94.74%  | 89.47%   |   | 99.57%                              | 96.08%  | 231              |
| WI    | Kenosha     | AURORA MED CTR KENOSHA†                     | 520189                         | 95.00%  | 97.50%  | 92.86%   | 98.88%  | 96.63%   |   | 100.00%                             | 91.43%  | 256              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † **Hospital received Attainment Award**
- \* **Hospital received Top Performer Award**
- ◆ **Hospital received Improvement Award**

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |            |  |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo- embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------|--|--------------------------------|---|---|--|--|--|---|-------------------------------------|---|------------------|
| State | City       | Hospital                                   | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received  | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| WI    | Madison    | ST MARYS HSPTL MED CTR†                    | 520083                         | 94.81%  | 99.53%  | 92.96%   | 97.58%   | 95.47%   | 93.30%  | 99.56%                              | 92.57%  | 2052             |
| WI    | Milwaukee  | AURORA HEALTH CARE METRO INC†              | 520138                         | 98.34%  | 97.53%  | 94.33%   | 92.68%   | 91.02%   | 96.20%  | 99.14%                              | 96.69%  | 1194             |
| WI    | Sheboygan  | AURORA SHEBOYGAN MEMORIAL MEDICAL CENTER*† | 520035                         | 98.50%  | 99.00%  | 98.46%   | 98.39%   | 93.44%   |   | 99.35%                              | 92.98%  | 310              |
| WI    | Two Rivers | AURORA MEDICAL CENTER MANITOWOC COUNTY†    | 520034                         | 97.08%  | 100.00%   | 96.27%   | 91.89%   | 91.89%   |   | 99.58%                              | 92.31%  | 241              |
| WI    | West Allis | WEST ALLIS MEMORIAL HOSPITAL†              | 520139                         | 97.21%  | 97.21%  | 92.12%   | 92.72%   | 88.74%   |   | 100.00%                             | 95.00%  | 380              |
| WV    | Bluefield  | BLUEFIELD REGIONAL MEDICAL CENTER†◆        | 510071                         | 95.12%  | 95.12%  | 86.62%   | 96.49%   | 70.18%   |   | 99.69%                              | 82.61%  | 362              |
| WV    | Charleston | CHARLESTON AREA MEDICAL CENTER†            | 510022                         | 98.87%  | 98.66%  | 93.88%   | 93.80%   | 92.73%   | 91.11%  | 98.91%                              | 92.25%  | 3248             |
| WV    | Clarksburg | UNITED HOSPITAL CENTER*†                   | 510006                         | 98.10%  | 99.62%  | 97.74%   | 96.36%   | 95.91%   |   | 100.00%                             | 100.00%   | 706              |
| WV    | Huntington | CABELL HUNTINGTON HOSPITAL†                | 510055                         | 96.79%  | 96.42%  | 95.47%   | 97.35%   | 96.46%   |   | 99.76%                              | 96.47%  | 437              |

**SURGICAL CARE IMPROVEMENT PROJECT**  
**CMS/Premier Hospital Quality Incentive Demonstration Project - Year 6**  
**Participants in Isolated Surgical Care Improvement Project (SCIP)**

- † Hospital received Attainment Award
- \* Hospital received Top Performer Award
- ◆ Hospital received Improvement Award

Date range = Acute care inpatient discharges from October 1, 2008 - September 30, 2009  
Low Sample (10 or Less) = Hospital provided service, but had ten (10) eligible patients or less during this date range  
Data sorted by State (ascending order) then City (ascending order)

|       |            |                                      |                                | Prophylactic antibiotic received within 1 hour prior to surgical incision | Prophylactic antibiotic selection for surgical patients | Prophylactic antibiotic discontinued within 24/48 hours after surgery end time | Surgery patients with recommended venous thrombo- embolism (VTE) prophylaxis ordered | Surgery patients who received appropriate VTE prophylaxis within 24 hours prior to surgery up to 24 hours after surgery end time | Cardiac Surgery Patients with controlled 6 A.M. Postoperative Blood Glucose | Surgical Patients with Hair Removal | Patients on Beta-Blocker Therapy who Receive Beta-Blocker during Perioperative Period | Total Case Count |
|-------|------------|--------------------------------------|--------------------------------|---|---|--|--|--|---|-------------------------------------|---|------------------|
| State | City       | Hospital                             | CMS Certification Number (CCN) | % Patients Received   | % Patients Received                                     | % Patients Received  | % Patients Received  | % Patients Received  | % Patients Received   | % Patients Received                 | % Patients Received   |                  |
| WV    | Huntington | ST MARY'S MEDICAL CENTER†            | 510007                         | 97.29%  | 98.79%  | 96.99%   | 94.47%   | 87.94%   | 97.68%  | 99.71%                              | 93.77%  | 1053             |
| WV    | Morgantown | WEST VIRGINIA UNIVERSITY HOSPITALS*† | 510001                         | 97.23%  | 99.66%  | 96.43%   | 100.00%  | 99.61%   | 89.06%  | 100.00%                             | 100.00%   | 1109             |
| WV    | Morgantown | MONONGALIA COUNTY GENERAL HOSPITAL†  | 510024                         | 95.71%  | 98.55%  | 96.91%   | 95.92%   | 96.91%   | 95.29%  | 100.00%                             | 85.91%  | 1178             |
| WV    | Weirton    | WEIRTON MEDICAL CENTER†◆             | 510023                         | 97.32%  | 95.00%  | 88.67%   | 94.40%   | 93.55%   |   | 99.12%                              | 98.57%  | 362              |