

NORTHWEST SURGICAL ASSOCIATES
Cardiothoracic Surgery Division

April 19, 2010

Richard Stenson
President and CEO
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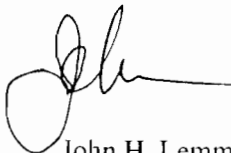
Dear Mr. Stenson:

Enclosed please find a summary of Northwest Surgical's cardiac surgery mortality outcomes at Tuality community Hospital for the calendar year 2009. In addition, the results of our entire 5-hospital program (NWSA) are provided. The predicted outcomes are based upon the data submitted from 60 hospitals (and over 70,000 patients) in the U.S. for the years 2001-2005. Unfortunately, an updated database for this purpose is not currently available. Bayesian models are used, and these are described in detail on the Health Data Research web site: www.healthdataresearch.com. The data collection and report generation was achieved with the excellent assistance of our Data Manager, Amy Piwowski.

As you can see, at Tuality Community Hospital we have a very high-risk patient profile. Despite being a small program, however, our results are excellent. The predicted operative mortality for the 57 Tuality open-heart operations we performed last year was 4.4% but our actual (Observed) operative mortality was only 1.8%. This provides an Observed to Predicted (O/P) ratio of 0.41. Also in the attached tables are data with regard to Isolated CABG, Isolated Valve, and CABG +/- Valve. For added perspective, our three year (2007-2009) results are included on a separate sheet.

We are hopeful that this information is of value to you. Northwest Surgical believes the collection and analysis of our surgical results data is of great importance for the improvement of patient care. We appreciate Tuality's commitment to support our Data Manager position and can provide focused data reports to you, if desired. If you have any questions, or wish to discuss these or other issues in more detail, please contact Dr. Hill or me. If desired, we would be pleased to meet with you personally to discuss these or any other matters.

Sincerely,



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2009 TCH Mortality Report

All Cases*

	TCH n=57	NWSA n=1131
Operative Mortality (<30 days + In-hospital; O)	1.8%	2.3%
Predicted Mortality (P)	4.4%	4.4%
O/P Ratio	0.41	0.53

Isolated CABG

	TCH n=34	NWSA n=689
Operative Mortality (<30 days + In-hospital; O)	2.9%	2.0%
Predicted Mortality (P)	2.5%	2.9%
O/P Ratio	1.1	0.69

Isolated Valve

	TCH n=6	NWSA n=195
Operative Mortality (<30 days + In-hospital; O)	0.0%	1.0%
Predicted Mortality (P)	10.7%	6.7%
O/P Ratio	0.0	0.15

CABG +/- Valve

	TCH n=17	NWSA n=186
Operative Mortality (<30 days + In-hospital; O)	0.0%	3.8%
Predicted Mortality (P)	5.9%	6.9%
O/P Ratio	0.0	0.55

*Aortic Dissections are NOT included in the "All Cases" table

2007-2009 TCH Mortality Report

All Cases*

	TCH n=193	NWSA n=3470
Operative Mortality (<30 days + In-hospital; O)	4.1%	3.6%
Predicted Mortality (P)	7.2%	5.1%
O/P Ratio	0.57	0.71

Isolated CABG

	TCH n=123	NWSA n=2115
Operative Mortality (<30 days + In-hospital; O)	3.3%	2.4%
Predicted Mortality (P)	4.8%	3.4%
O/P Ratio	0.69	0.71

Isolated Valve

	TCH n=22	NWSA n=540
Operative Mortality (<30 days + In-hospital; O)	4.5%	3.5%
Predicted Mortality (P)	12.3%	7.1%
O/P Ratio	0.37	0.49

CABG +/- Valve

	TCH n=41	NWSA n=609
Operative Mortality (<30 days + In-hospital; O)	7.3%	7.9%
Predicted Mortality (P)	10.1%	8.3%
O/P Ratio	0.72	0.95

*Aortic Dissections are NOT included in the "All Cases" table

