Appendix II: STS Version 2.61 definitions for postoperative outcomes:

Diabetes: A history of diabetes, regardless of duration of disease or need for anti-diabetic agents.

Complications: Indicate whether a postoperative event occurred during the hospitalization for surgery. This includes the entire postoperative period up to discharge, even if over 30 days.

Myocardial Infarction (MI): (0-24 hours post-op) Indicate the presence of a peri-operative Myocardial Infarction (MI) (0-24 hours post-op) as documented by the following criteria:

- The CK-MB (or CK if MB not available) must be greater than or equal to 5 times the upper limit of normal, with or without new Q waves present in two or more contiguous ECG leads. No symptoms required.
- (> 24 hours post-op) Indicate the presence of a perioperative MI (> 24 hours post-op) as documented by at least one of the following criteria:
  1. Evolutionary ST- segment elevations
  2. Development of new Q- waves in two or more contiguous ECG leads
  3. New or presumably new LBBB pattern on the ECG
  4. The CK-MB (or CK if MB not available) must be greater than or equal to 3 times the upper limit of normal.

Reoperations (cardiac): Operative re-intervention was required for bleeding/ tamponade, valvular dysfunction, graft occlusion and or other complications.

Sternum infection: Indicate whether the patient, within 30 days postoperatively, had a deep sternal infection involving muscle, bone, and/or mediastinum REQUIRING OPERATIVE INTERVENTION. Must have ALL of the following conditions:

1. Wound opened with excision of tissue (I&D) or re-exploration of mediastinum
2. Positive culture
3. Treatment with antibiotics
**Pneumonia:** Indicate whether the patient had Pneumonia diagnosed by any of the following:
Positive cultures of sputum, transtracheal fluid, bronchial washings, and/or clinical findings consistent with the diagnosis of pneumonia (which may include chest x-ray diagnostic of pulmonary infiltrates).

**Renal failure:** Indicate whether the patient had acute or worsening renal failure resulting in one or more of the following:
1. Increase of serum creatinine to > 2.0, and 2x most recent preoperative creatinine level.

**Stroke:** Indicate whether the patient has a postoperative stroke (i.e., any confirmed neurological deficit of abrupt onset caused by a disturbance in cerebral blood supply) that did not resolve within 24 hours.

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