



The Congenital Heart Collaborative

University Hospitals
Rainbow Babies & Children's
Nationwide Children's Hospital

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University Hospitals Rainbow Babies & Children's Hospital and Nationwide Children's Hospital have formed an affiliation for the care of patients with congenital heart disease from the fetus through adulthood. The innovative collaboration provides families with access to one of the most extensive and experienced heart teams – highly skilled in the delivery of quality clinical services, novel therapies and a seamless continuum of care.



"This affiliation is a completely new and different enterprise," says Timothy Feltes, MD, co-director of The Congenital Heart Collaborative. *"Both institutions are all in, and driven for best outcomes for our patients."*

The Congenital Heart Collaborative team shares a common mission in education, quality of care and the advancement of the field through research. The goal for the collaboration is to provide a superior level of pediatric and adult congenital heart care to families across northern Ohio. The collaborative positions the team to better grow clinical research, recruit talented physicians, fellows and allied medical staff, and meet the goal of high patient, physician and staff satisfaction.

"Taking care of children with complex heart abnormalities and the high-risk procedures needed to care for them is not something that can, or should, be done everywhere," says Mark Galantowicz, MD, chief of cardiothoracic surgery and co-director of The Congenital Heart Collaborative. "This work is too important to dabble in, which is why we came together to create a system that builds on the strengths of both institutions to make the biggest impact for these patients."



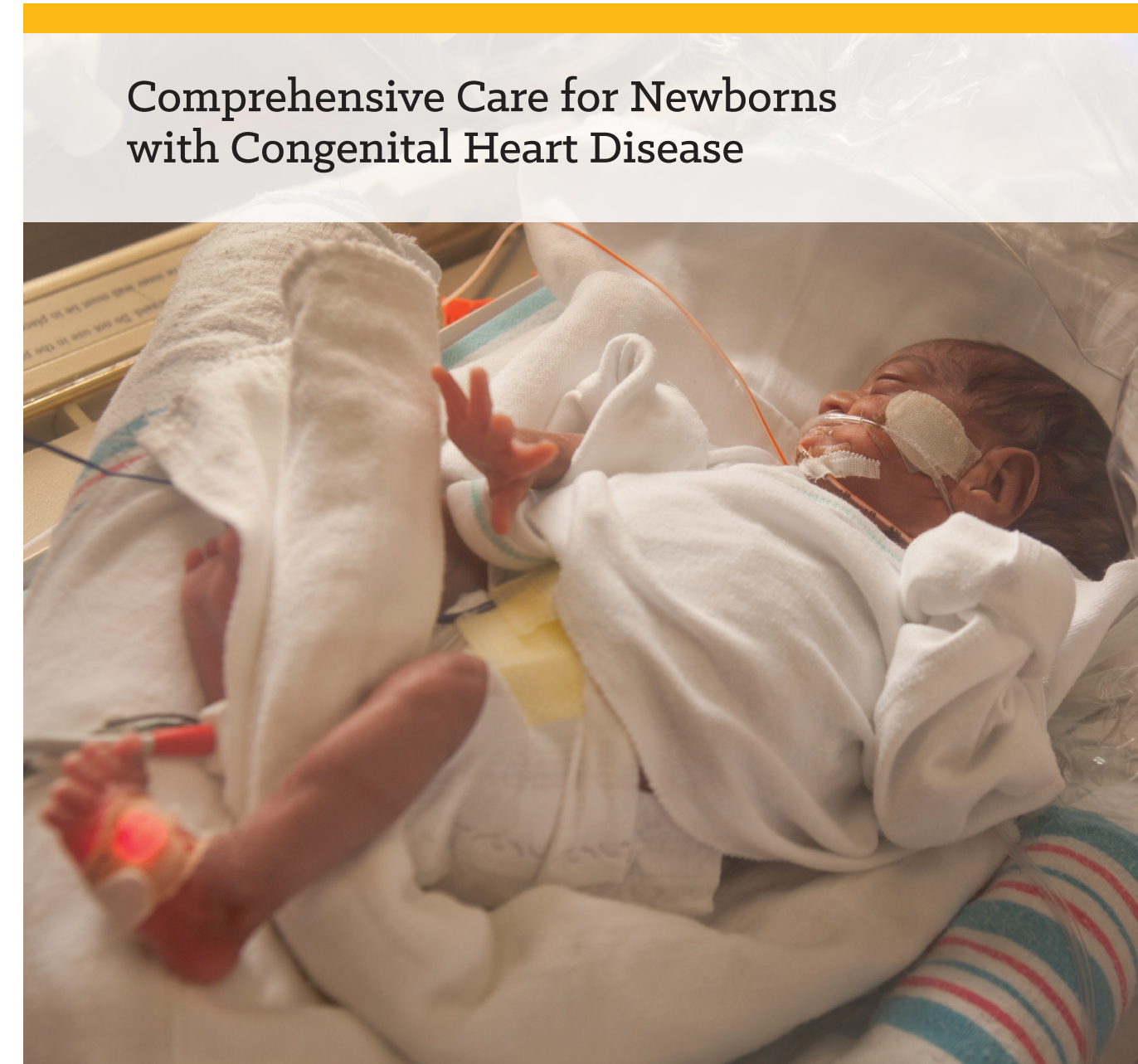
Physician-to-Physician Consultation Line

216-UH4-ADOC (216-844-2362)

Physician Access Line

(Patient transfers, admissions referrals, emergency department referrals, appointments)
216-UH4-PEDS (216-844-7337)

Rainbow.org



Comprehensive Care for Newborns with Congenital Heart Disease





The Quentin & Elisabeth Alexander NICU at UH Rainbow Babies & Children’s holds a Level IIIc designation – the highest available at the state level. This designation is reserved for NICU facilities equipped to care for the most fragile patients, including critically ill infants in need of emergency surgery or born weighing less than two pounds. The unit is ranked third in the nation by U.S. News & World Report and boasts a 96 percent survival rate.

“Our national ranking and low mortality rate set us apart and are indicative of our leadership in neonatal care,” says Jonathan Fanaroff, MD, JD, co-medical director of the NICU at UH Rainbow Babies & Children’s Hospital.

This internationally renowned neonatal care team works closely with nationally recognized maternal fetal medicine specialists from UH MacDonald Women’s Hospital and cardiologists from The Congenital Heart Collaborative to provide highly integrated, state-of-the-art prenatal diagnosis, fetal intervention and seamless transition from fetal to neonatal care – all under one roof.

“With advanced imaging, structural abnormalities in the heart can be detected as early as 12 weeks gestation,” says Christopher Snyder, MD, division chief of pediatric cardiology at UH Rainbow Babies & Children’s. “Our multidisciplinary team is designed to care for our patients and their families from the moment of diagnosis throughout their whole life.”

The one-team approach that is essential to The Congenital Heart Collaborative extends to their partners. Maternal and fetal medicine specialists work closely with the pediatric specialties at UH Rainbow Babies & Children’s.

“When faced with a fetal diagnosis, our patients are not faced with multiple silos of care teams – cardiology, obstetrics, cardiothoracic surgery,” explains Honor Wolfe, MD, division chief of maternal and fetal medicine at UH MacDonald Women’s Hospital. “We’re one team focused on the care of mother and child, and we’re all under one roof. In fact, the mother recovers on the same floor as the NICU.”

“Preconception care, including fetal echocardiography, is increasingly important as more women with medical conditions such as diabetes mellitus, seizures, inflammatory bowel disease and autoimmune diseases and advanced maternal age are becoming pregnant. When combined with a single-site seamless transition from high-risk pregnancy care to renowned Level IIIc neonatal care and advanced heart care, available at University Hospitals main campus, it represents a continuity of care that places families first in every possible way.”

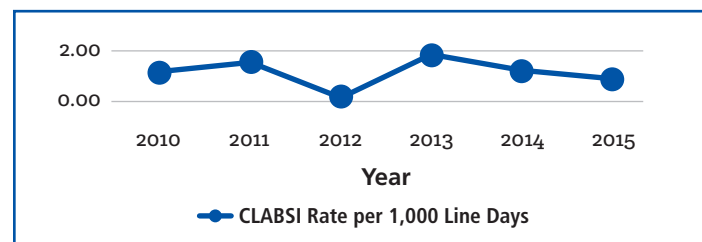
– Patricia DePompei, RN, MSN, president of UH Rainbow Babies & Children’s Hospital and UH MacDonald Women’s Hospital

Quality and Innovation

UH Rainbow Babies & Children’s Hospital, UH MacDonald Women’s Hospital and The Congenital Heart Collaborative are working to provide advanced care for the most fragile patients and best outcomes through research and quality improvement projects. Whether in the delivery room, the NICU, the operating room or the catheterization suite, amazing things are happening.

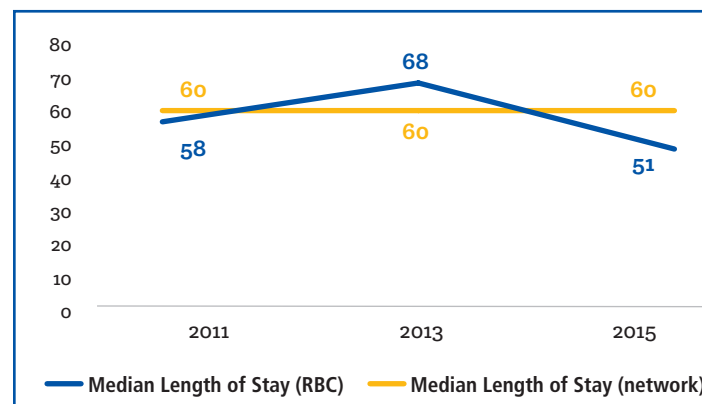
In 2015, UH MacDonald Women’s Hospital celebrated 3,939 live births and reported cesarean rates of 29 percent for primary cesarean deliveries and 11 percent for repeat cesarean deliveries.

UH Rainbow Babies & Children’s NICU CLABSI Event Rate per 1,000 Line Days



Central line-associated blood stream infections (CLABSI) are among the potentially deadly hospital-associated complications faced by institutions in the United States. The rates of CLABSI at the UH Rainbow Babies & Children’s Hospital NICU are remarkably low because of the priority on prevention.

Median NICU Length of Stay (all patients)



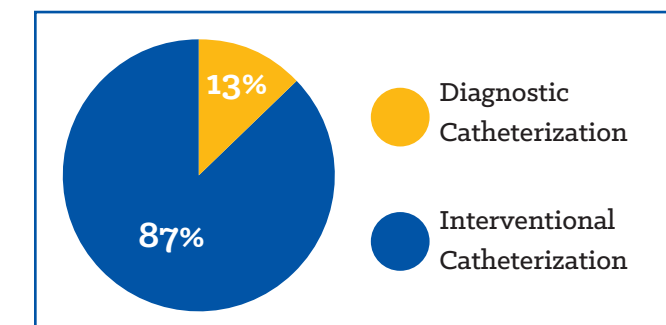
The most important part of a stay in the NICU is going home. As a Level IIIc NICU caring for the most fragile patients, the care team supports and understands the needs of families facing significant hospital stays. Additionally, quality initiatives to reduce length of stay have resulted in more infants going home sooner in 2014.

Cardiothoracic Surgical Survival Rates by Complexity of Procedure (STAT Category 1 – 5: Level 5, most complex)

STAT Level	2012		2013		2014	
	Surgeries	Death 30 Days	Surgeries	Death 30 Days	Surgeries	Death 30 Days
STAT Level 1	8	0	114	0	118	1
STAT Level 2	94	1	93	2	101	2
STAT Level 3	36	0	29	1	34	0
STAT Level 4	53	7	70	3	67	4
STAT Level 5	27	2	39	3	38	4
Total	296	10	345	9	358	11

The Heart Center at Nationwide Children’s is designated a high-volume center, with outcomes rankings among the best in the nation. According to the Society of Thoracic Surgeons (STS), The Heart Center’s mortality rate for the most complex surgery level is 13 percent – compared to the all-participants average of 16 percent.

Newborn Catheterizations



Because we use less-invasive modalities for diagnosis as often as possible, 87 percent of neonates who have catheterization procedures are getting therapeutic catheterizations. The smallest patient to receive a heart catheterization at The Heart Center was a 700-gram premature infant.

Through the unique collaboration between surgery and interventional cardiology found at The Congenital Heart Collaborative, some cases are able to be resolved through therapeutic catheterization without the need for open heart surgery. This innovation and collaboration leads to improved outcomes for our youngest and most fragile patients.