

# Table Notes

## Hip Replacement

**Total Number of Cases** includes all hospitalizations for patients 18 years and older who underwent a hip replacement prior to exclusion of clinically complex cases. The total number of cases includes inpatient hospital discharges from July 1, 2017 through June 30, 2018.

**Complication** represents patients who 1) developed a complication or died during the hospital stay in which the procedure was performed *or* 2) developed a complication that led to a readmission (within 7, 30 or 90 days depending on the complication), where the complication was the primary reason for the readmission.

**Extended Postoperative Length of Stay** represents patients whose length of stay following hip replacement was significantly longer than expected, after accounting for patient risk.

**Average Hospital Charge** represents the entire length of stay and is trimmed and case-mix adjusted. In almost all cases, hospitals typically receive actual payments from private insurers or government payers that are considerably less than the listed charge.

*The hip joint consists of two parts: the upper end of the thigh bone (femur/femoral head) and a socket (acetabulum) located in the pelvis. In a total hip replacement procedure, the damaged parts are removed and replaced with various artificial (e.g., metal or plastic) components or implants.*

### Understanding the Symbols

The symbols displayed in this report represent a comparison of actual *complication* and *extended postoperative length of stay* rates to what is expected, after accounting for patient risk.

Using complications as an example:

- **Rate was significantly lower than expected.** Fewer patients experienced a complication than could be attributed to patient risk and random variation.
- ◉ **Rate was not significantly different than expected.** The number of patients who experienced a complication was within the range anticipated based on patient risk and random variation.
- **Rate was significantly higher than expected.** More patients experienced a complication than could be attributed to patient risk and random variation.

See **About the Report** section or **Technical Notes** for further details.