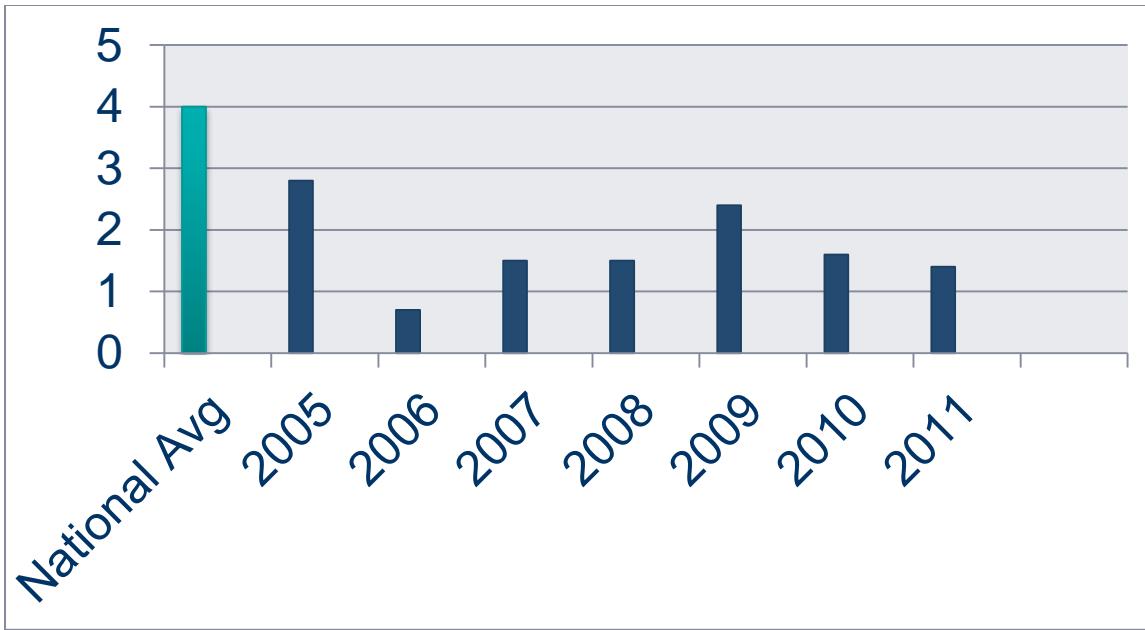


OUR OUTCOMES:

Our program is predicated upon the mission statement: "***We wish to provide ridiculously wonderful care to children and families affected by congenital heart disease.***" We refer to this mission statement often and have kept its meaning and intent as the guiding principle in how we have planned and produced our programmatic growth. We realize the only manner in achieving this mission is to treat congenital cardiac disease with a multidisciplinary "team sport" approach. As such, we provide 24/7 coverage in regards to cardiology, cardiac surgery, anesthesia, pediatric and neonatal intensive care unit physicians as well as child life and other ancillary services. We place critical importance on a multidisciplinary approach to all academic and clinical conferences as well as in the manner by which every discussion is had with family members.

Our program has grown in overall surgical volumes by 49% over the past 5 years. We currently perform some 350-375 surgical procedures per year, which place us within the context of moderate to high volume programs within the United States. As a reference, over 65% of congenital cardiac surgical programs perform less than 200 cases per year. To build our program, we have directed over 25 outreach trips and visits during these past 5 years to solidify relationships locally as well as within both South and West Texas. We currently receive approximately 30-35 percent of our volume from outside Bexar County. In addition, approximately 45% of our volume is in the arena of neonatal care. Our commitment to organize these trips has been a successful example of how a service line can partner with the hospital to work towards programmatic volume growth.

Overall mortality for congenital cardiac surgery is 3.9% nationwide as seen in a study by Pasquali et. al published in Pediatrics (Jan, 2012) where they evaluated 68 centers and 35,6776 operations from 2006-2009. This table represents recent mortality statistics for our program.

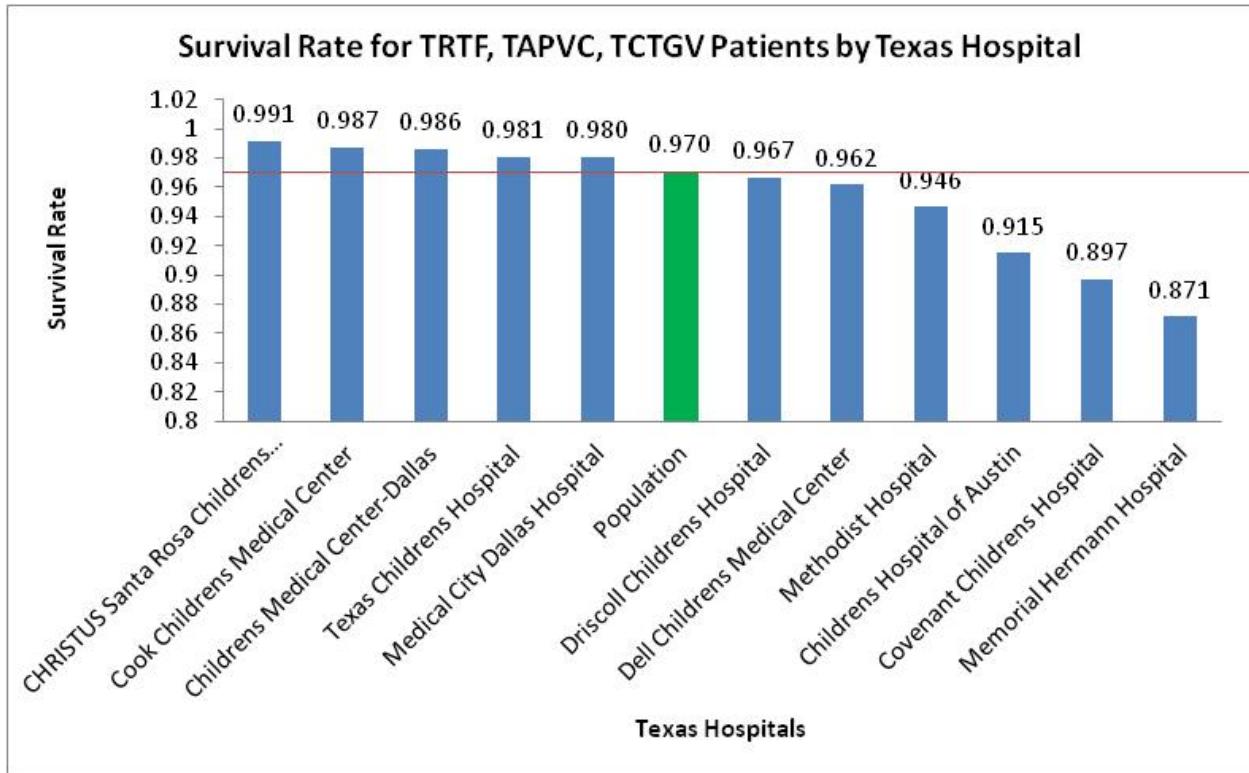


Our mortality has been under 2.5% every year for the past six years and in both 2011 and 2102 was 1.4%.

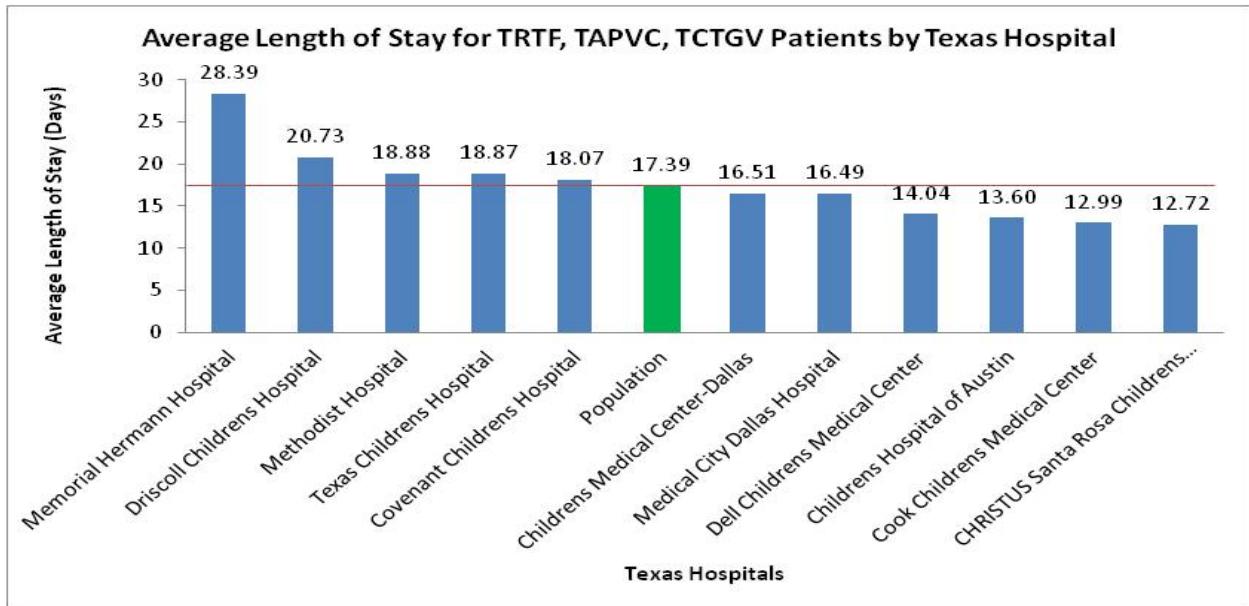
Recently, we looked at three life-threatening congenital heart defects that require surgical repair, Tetralogy of Fallot (TRTF), Total Anomalous Pulmonary Venous Return (TAPVC) and Transposition of the Great Arteries (TCTGV) to compare our outcomes to other Texas hospitals.

All data was obtained via public use discharge data files as made available by the Texas Department of Health. This data source revealed that 11 programs were performing congenital heart surgical procedures around the state. We place significant importance upon the concept of self-critique and evaluations and thus wanted to harvest data to determine how we were performing as a program not only in comparison with local and regional programs, but also with those around the entire state of Texas.

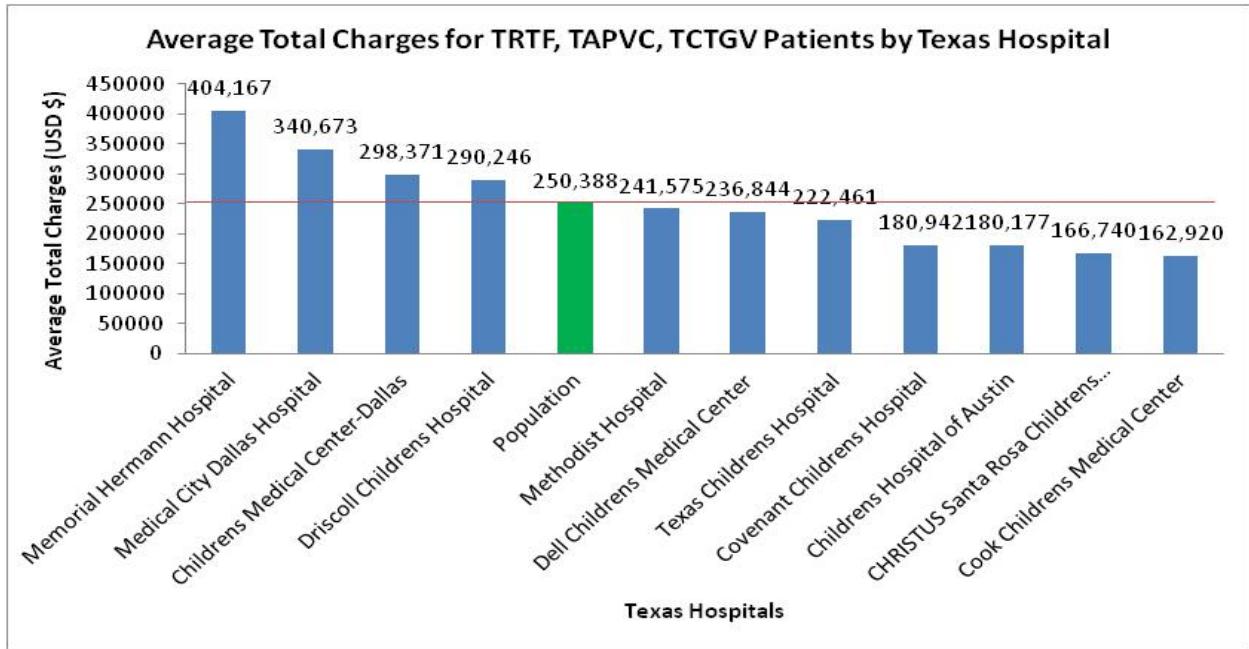
Survival for reparative surgery for these diseases in our program is represented on this table:



Building on that experience and demonstrating a commitment to high-quality, effective, patient-centered care, the overall experience for the patient and family is further demonstrated by the following length of stay table:



As might be expected, excellent, efficient care also translates into real savings for health care payers as demonstrated on this hospital charges table:



Our program in comparison to all congenital cardiac surgical programs in the state of Texas ranks number one when looking at survival, length of stay and second in terms of hospital charges data for these three commonly lesions as noted in the Texas Department of Health Inpatient Discharge Database. This data was recently presented at the Society of Thoracic Surgeons International Conference and was awarded the top Congenital Poster Abstract. With the highest survival rates and lowest length of stay and charges, our “value index” ranks highest amongst all programs statewide. The philosophy of economic responsibility and a focus towards creating “valued programs” resonates with referring physicians and entities as well as in creating a regional and national reputation.

In addition, the importance of academic recognition and the manner in which our program can be a steward for scholarly success has been well defined. Over the past 5 years, our surgical program has produced 11 peer- reviewed publications, 5 book chapters and numerous invitations to speak at national and international conferences dedicated to the academic components of congenital heart disease. Recently, our program was also part of a Congenital Heart Surgeons Society study that won the top manuscript award at the 2013 Society of Thoracic Surgeons Conference. We are participating in current national studies looking at the geographical and genetic influences upon incidence of congenital heart disease as well as being the lead institution in a multi-institutional study involving 10 programs (including, Duke, Boston Children’s and the University of Michigan) to evaluate factors contributing to sternal wound infections. In particular, our Cardiothoracic Surgery Department Chair, Dr. John Calhoun is currently the Chairman of the American Board of Thoracic Surgery, the highest position that can be held in the field of academic cardiac surgery. As such, we continue find significant value in promoting our efforts and those

UTHSCSA on a national and international level. In addition to clinical excellence, it is through these avenues that a children's hospital can obtain a national identity and in turn begin to receive national recognition.

Our program also recognizes the importance of philanthropic support and community partnerships. We have completed submission to the William Randolph Hearst Foundation an application for a 1 million dollar endowed chair for congenital cardiac surgery. This project has been the product of significant efforts on the parts of Dr. John Calhoon and Dr. Tom Mayes as well as support from the President's Office. If awarded this chair, we will use these funds to promote a visionary single ventricle program at UTHSCSA.

As we look towards the future, our UTHSCSA congenital heart program is committed to continuing the volume and value growth over the past two plus decades. During that time, despite being aligned with two different healthcare systems that were not ideally suited to the care of pediatric populations, our program developed certain key principles that promote successful and valuable congenital heart care. Members of the UT CHN are broadly recognized for excellence with recognition in every doctor recognition program. The leadership of the UT CHN is universally recognized at the national level for innovation, leadership, and excellence in care delivery and academic medicine.