

AQI: Where Data Becomes Value

Registries are the modern-day method to remain vigilant, ensure high-quality patient care, and demonstrate value.



NACOR
Anesthesia Quality Institute®

2008
Year Started

105 M
Cases and Growing

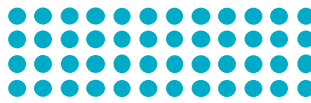
58,000
Participating Clinicians
(Since Establishment)

Breakdown of Practices Reporting:



21%

Small (1-25)



33%

Medium (26-75)



31%

Large (76-250)



14%

Mega (251+)

Report for Business

Demonstrate your value in tangible ways to patients, hospitals, payers, malpractice carriers, and surgical colleagues.

291 Groups Benchmarking Across These Areas:

Outcomes

Number of cases

Percent of physical status classifications

Payment types

Patient demographics

Report for Compliance

Report on quality measures specific to the anesthesia specialty, allowing you to tailor your performance to better meet patient care.

Providers Reporting }



45% Anesthesiologists

55% Anesthesia Care Team



of which **85%** are ASA members

Report for Academia

NACOR data helps propel scientific advancement and improves the quality and safety of patient care.

48 Articles Published Across Anesthesia-related Journals



Cited in **484** peer-reviewed papers



AIRS

Anesthesia Quality Institute®

The first nationwide reporting system for collecting **individual adverse events** from anesthesia, pain management, and perioperative care that helps anesthesia providers **learn from the experiences of their colleagues.**

Top Reasons for Reporting:

- Drug shortage
- Unusual reaction to anesthetic medication
- Unusual manifestation of patient disease/surgery
- Challenging diagnostic situation
- Novel or unexpected system failure

4 Specialty Modules:



Respiratory depression



Drug shortage



Obstetrics



Pediatrics

CLOSED CLAIMS

Anesthesia Quality Institute®

Created to **analyze closed malpractice claims** and improve patient safety by identifying major safety concerns, patterns of injury, and prevention strategies for anesthesiologists working in pain management, operating rooms, labor floor, remote locations, and critical care.

1984 Year Started **110+** Peer-reviewed journal articles Studies cited over **1600** times