



Tableau User Guide

New York State Department of Health

Sepsis Improvement Initiative

2026 Reports

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Introduction

This guide provides information on how to access and use the 2026 Adult and Pediatric Quarterly and Data Quality Reports for the New York State Sepsis Care Improvement Initiative. The Quarterly and Data Quality reports are hosted on Tableau and are generated from data submitted by hospitals to the New York State (NYS) Sepsis Data Collection Portal.

The purpose of the Quarterly Report is to support monitoring and improvement of quality of care and patient outcomes. Quarterly Reports are generated using hospital-submitted data on severe sepsis and septic shock cases reported to the New York State Department of Health (the Department). A detailed description of the case inclusion and exclusion criteria, including how transferred cases are handled, is available in the Report Specifications section of this report.

The purpose of the Data Quality Report is to provide information on the completeness and accuracy of hospital-submitted data for hospitals to monitor and improve data submissions. Hospital-level and statewide patterns of missing data and case-level results are included in the report.

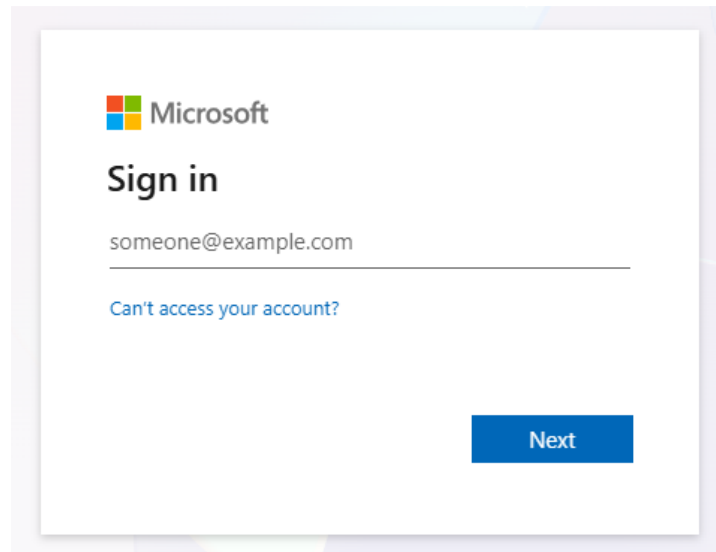
It is important to note that the Quarterly and Data Quality Reports delivered via IPRO's Tableau Webserver include patient **Protected Health Information (PHI)** and **Personally Identifiable Information (PII)** to allow users to drill down on specific cases for further analysis. Users of this report must exercise caution and follow Health Insurance Portability and Accountability Act (HIPAA) guidelines when accessing this report to ensure limiting exposure of PHI/PII to authorized individuals only.

Accessing Tableau Reports

Tableau is a business intelligence platform which enables data reporting and visualization. To access the report, you will need to access IPRO's Tableau Webserver, a secure online platform. Reports can be accessed at <https://ny-tableau.ipro.org> using any web browser. To log in, users must be authorized to access IPRO's Webserver and have a Microsoft account with multi-factor authentication (MFA). Information on account authorization and setting up MFA can be found in the '[Tableau Multi-factor Authentication User Guide](#).'

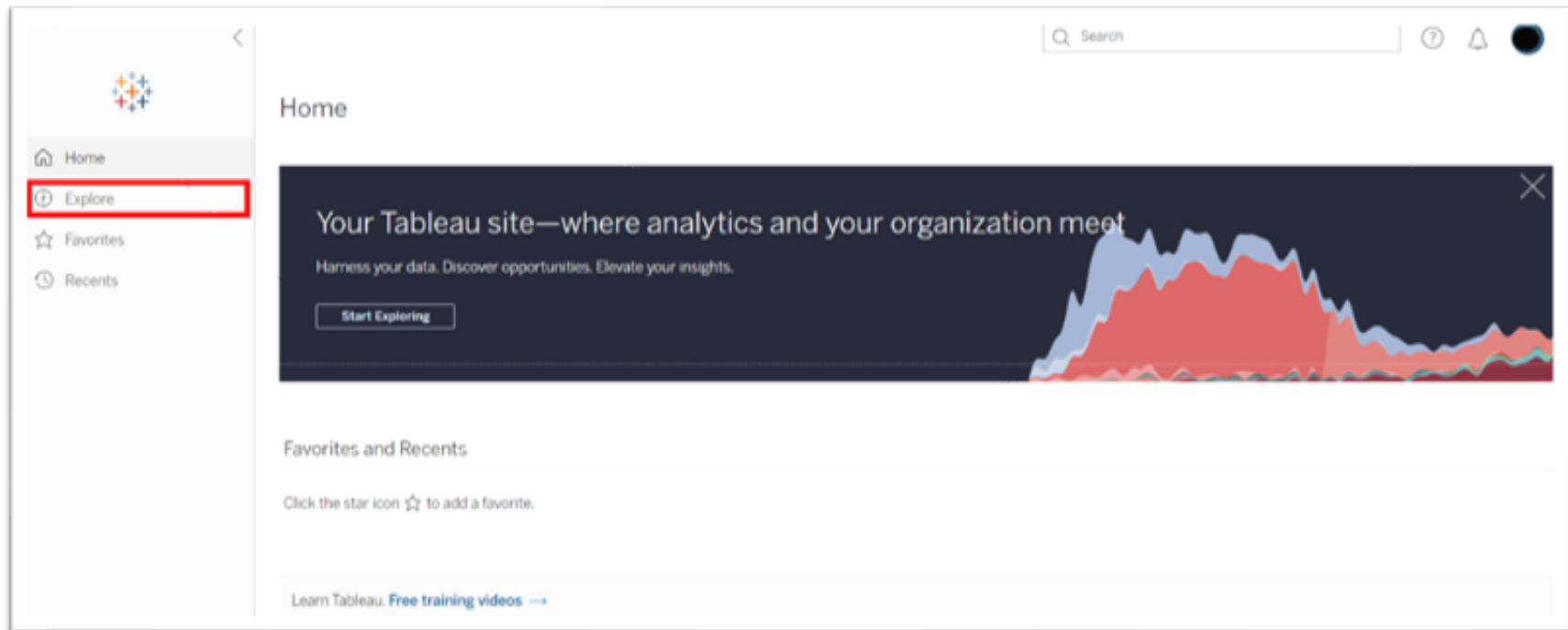
Tableau Report User Guide

The link to IPRO's Tableau Webserver will direct users to the Microsoft sign-in page for the Webserver, as shown below. When prompted, users should enter their email address and password and verify their identity using MFA.



Navigation to Reports

Once the user is logged into their Tableau account, the user will be taken to the Home Page. To access the hospital's report, click on the 'Explore' option in the left side column. This will open the Explore page.



2025 and 2026 Report Folders

On the Explore page, users will see two folders, one for the 2025 reports, and one for the 2026 Reports. Each folder contains the Adult and Pediatric Quarterly and Data Quality Reports.

Explore Top-Level Projects ▾

New ▾

Select All

Sort By: Name (a-z) ↑ ▾ ▮ ▾ ▾

Type	↑ Name	Actions	Projects	Workbooks	Views	Data sources	Owner	Created
☐	☐ ☐ 2025 Reports	...	1	4	18	0		Oct 17, 2025, 10:19 AM
☐	☐ ☐ 2026 Reports	...	1	4	18	0		Oct 17, 2025, 10:19 AM

2025 Reports

The 2025 Reports folder contains reports that include data for 2025 Q1-Q4. These reports are based on the Data Dictionaries for discharges in 2025 (Adult D6.0 and D6.0.1; Pediatric D5.0 and 5.0.1). Please review the [2025 Tableau User Guide](#) and the specifications in each tab of the reports for more details.

Explore / 2025 Reports

2025 Reports ☐ ☐ ☐

Owner 👤

New ▾

Select All

Content Type: All ▾ Sort By: Type ▾ ▮ ▾ ▾

Type	Name	Actions	Value	Owner	Modified
☐	☐ ☐ Adult Sepsis Data Quality Report (2025 Q1-Q4)	...		👤	Mar 21, 2024, 12:43 PM
☐	☐ ☐ Adult Sepsis Quarterly Report (2025 Q1-Q4)	...		👤	Mar 21, 2024, 12:43 PM
☐	☐ ☐ Pediatric Sepsis Data Quality Report (2025 Q1-Q4)	...		👤	Mar 21, 2024, 12:43 PM
☐	☐ ☐ Pediatric Sepsis Quarterly Report (2025 Q1-Q4)	...		👤	Mar 21, 2024, 12:43 PM

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2026 Reports

The 2026 Reports folder contains reports based on the Data Dictionaries for discharges in 2026 (Adult D7.0; Pediatric D6.0). Please review the specifications in each tab of the reports for more details.

Explore / 2026 Reports

2026 Reports

Owner: TISH REEDER

New

Select All

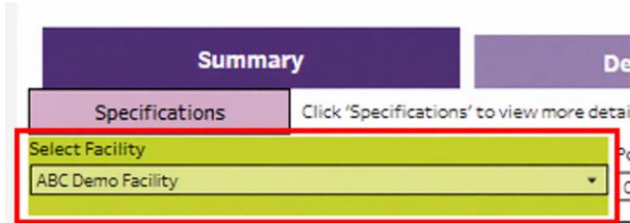
Content Type: All

Sort By: Type

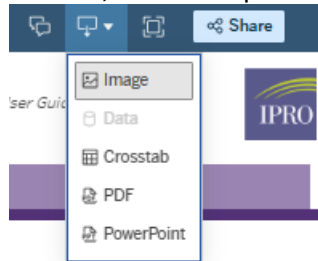
Type	Name	Actions	Value	Owner	Modified
☐	☆ 2026 Adult Sepsis Data Quality Report	...		TISH REEDER	Mar 21, 2024, 12:43 PM
☐	☆ 2026 Adult Sepsis Quarterly Report	...		TISH REEDER	Mar 21, 2024, 12:43 PM
☐	☆ 2026 Pediatric Sepsis Data Quality Report	...		TISH REEDER	Mar 21, 2024, 12:43 PM
☐	☆ 2026 Pediatric Sepsis Quarterly Report	...		TISH REEDER	Mar 21, 2024, 12:43 PM

Tableau Navigation and Tool Tips

- **Select Hospital:** If the user account has access to reports for multiple hospitals, there will be an option to select a facility at the top of each tab. Upon selecting a facility, the report will populate with data for that facility only.



- **Printing:** At the top right of each tab, there is an option to download the tab as either an image, data, crosstab, PDF, or PowerPoint. When filters are applied, only what is displayed on the screen will be displayed on the downloaded file. If desired, users can print the downloaded file (PDF, PowerPoint) to obtain a hard copy of the desired report display.



- **Specifications:** For more detailed information on the calculation of displayed metrics, click the 'Specifications' link located below the tab selection bar.

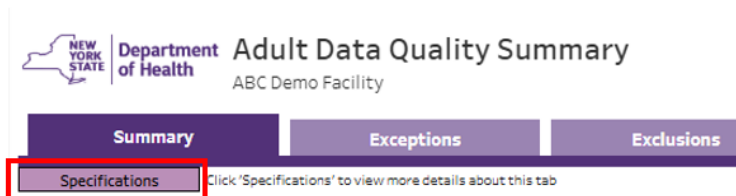
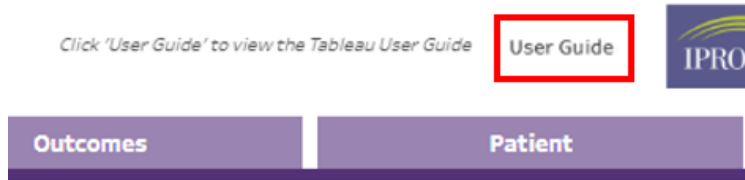
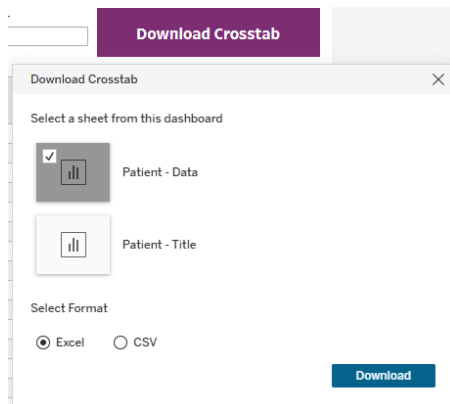


Tableau Report User Guide

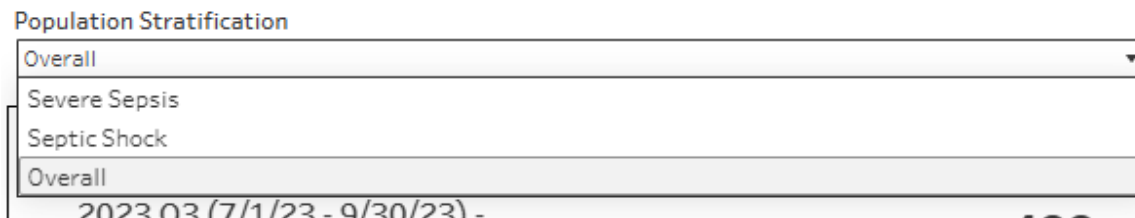
- **User Guide:** To access the User Guide from any page of the report, click the 'User Guide' link located in the top right of each tab of the report.



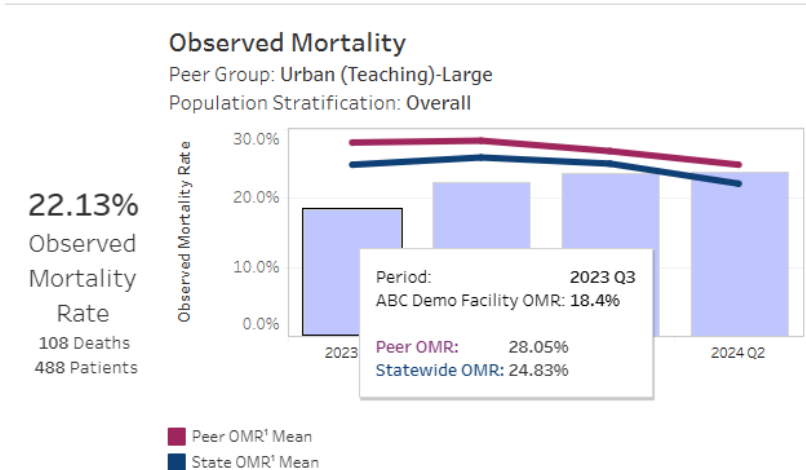
- **Download Crosstab:** On pages of the report where patients are listed in a table, users have the option to download the table in CSV or Excel format. To do this, users should click 'Download Crosstab' on the page of interest and follow the prompts to download the file.



- **Filters:** Interactive tabs contain filters, which allow a user to customize the report to fit their specific needs. These filters allow a user to drill down into specific subsets of data. Once a filter is selected, the graph will update to reflect a user's specifications. Filters will not affect the original report. For some graphs, users can click on a plot to selectively filter the graph for a selected element. Users can revert to the original, unfiltered graph by re-clicking the selected plot. All filter boxes (for example, Population Stratification, Age Group) and search engines (i.e., Search Unique ID) are available on the report tabs



- **Hover-over:** Hover over graphs, trend lines, and cells to see more detail about the selected data.



- **Sorting:** At the top of each column, there are either three bars or an 'A->Z' symbol that will sort the data in ascending or descending order.

	Patients
American Indian or Alaska Native, NH	0
Asian or Pacific Islander, NH	28

Updates to 2026 Reports

The 2026 reports feature several changes from the 2025 reports. A summary of the changes can be found below. Please review the specifications on each tab of the reports for additional details.

The report inclusion criteria for the 2026 reports has been updated from the 2025 reports.

- Cases discharged in 2026 are considered to meet the report inclusion criteria only if they have R65.20 (Severe sepsis without septic shock), R65.21 (Severe sepsis with septic shock), and/or T81.12XA (Postprocedural septic shock, initial encounter) reported for the Severe Sepsis/Septic Shock Inclusion ICD-10-CM Code variable.
- Cases discharged in 2025 are considered to meet the report inclusion criteria only if they have R65.20 (Severe sepsis without septic shock), R65.21 (Severe sepsis with septic shock), and/or T81.12XA (Postprocedural septic shock, initial encounter) reported for the ICD-10-CM Code (n) variable.

2026 Quarterly Reports

- **All tabs**
 - The report inclusion criteria has been updated as described above.
- **Demographics Tab**
 - Mapping for the Discharge Status, Race Ethnicity, and Source of Admission (Pediatric report only) has been updated. Please review the specifications for additional details.
- **Patient Tab**
 - Mapping for the Discharge Status, Race Ethnicity, and Source of Admission (Pediatric report only) has been updated.
 - The Advance Directives column has been removed, as the Patient Care Considerations and Patient Care Considerations Date variables have been removed from the Data Dictionary beginning with cases discharged in 2026.

2026 Data Quality Reports

- **Summary Tab**
 - The logic defining 'Cases Meeting Inclusion Criteria' in the Data Quality Case Summary table has been updated as described above.
 - The 'Uploaded Cases' and 'Cases Not Meeting Inclusion Criteria' rows have been removed from the Data Quality Case Summary table.

Tableau Report User Guide

- Logic defining missing and/or invalid values for transfer cases has been updated. This affects the Missing Demographic Case Summary and Invalid Demographic Case Summary tables on this tab. Please review the specifications for additional details.
- **Exclusions Tab**
 - The Exclusions tab has been removed, as all cases included in the 2026 reports meet the report inclusion criteria.
- **Variables Tab**
 - Logic defining missing and/or invalid values for transfer cases has been updated. This affects the Missing Demographics and Invalid Demographics tables on this tab. Please review the specifications for additional details.
 - The Comorbidity/Risk-Factor Variables table has been removed, as the Patient Care Considerations and Patient Care Considerations Date variables have been removed from the Data Dictionary beginning with cases discharged in 2026.
- **Informational Tab**
 - The Missing Datetime flag has been removed, as the Patient Care Considerations and Patient Care Considerations Date variables have been removed from the Data Dictionary beginning with cases discharged in 2026.

The purpose of this tab is to provide a high-level summary of each hospital's data, including the number of reported cases and the observed mortality rate (OMR), along with statewide and peer group comparisons. The 'Population Stratification' filter at the top of the tab defaults to the overall population but allows for filtering by severe sepsis and/or septic shock cases. Hospital and comparison data throughout the tab will adjust to the selected population.



Tableau Report User Guide

The '12-Month Summary' table shows the number of patients and the observed mortality rate for each hospital. The timeframe is the rolling year, i.e., the past 12 months for which data are available.

12-Month Summary		
2025 Q2 (4/1/25 - 6/30/25) - 2026 Q1 (1/1/26 - 3/31/26)	1,329 Patients	23.18% 12-Month Observed Mortality Rate

The filters above the Observed Mortality chart and OMR Comparison tables affect the display of the data on the Observed Mortality chart and OMR Comparison tables only. The 'Display Data By' filter allows users to view data by month or by quarter. The 'Date Range' dropdown menu options allow users to select individual months, or submission periods based on the selection in the 'Display Data By' filter. Selections for the 'Date Range' filter affect the Observed Mortality chart and OMR Comparison tables. On the adult report, the 'Benchmark Selected' filter allows users to select whether to view statewide comparisons only, peer group comparisons only, or both statewide and peer group comparisons together in the Observed Mortality chart and OMR Comparison tables.

Display Data By

Submission Period

Date Range

(All)

Benchmark Selected

☐ Statewide

☐ Peer

☒ Statewide & Peer

The observed mortality rate (OMR) for the selected population can be viewed in the Observed Mortality chart and OMR Comparison tables on the bottom of the tab. The tables on the right provide statewide and peer group comparison data showing the 25th percentile, median, 75th percentile, and the mean. Hospital-level, statewide and peer group comparison data are also displayed on the graphs on the left. Please note that peer group comparison data is only available on the adult report.

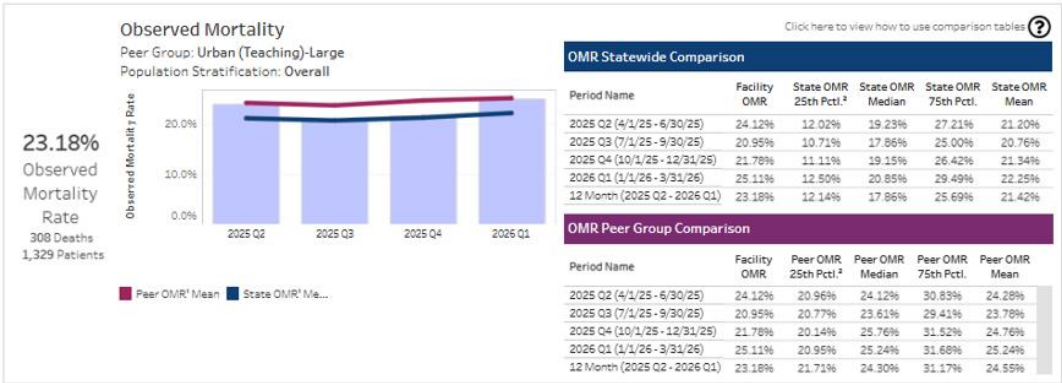
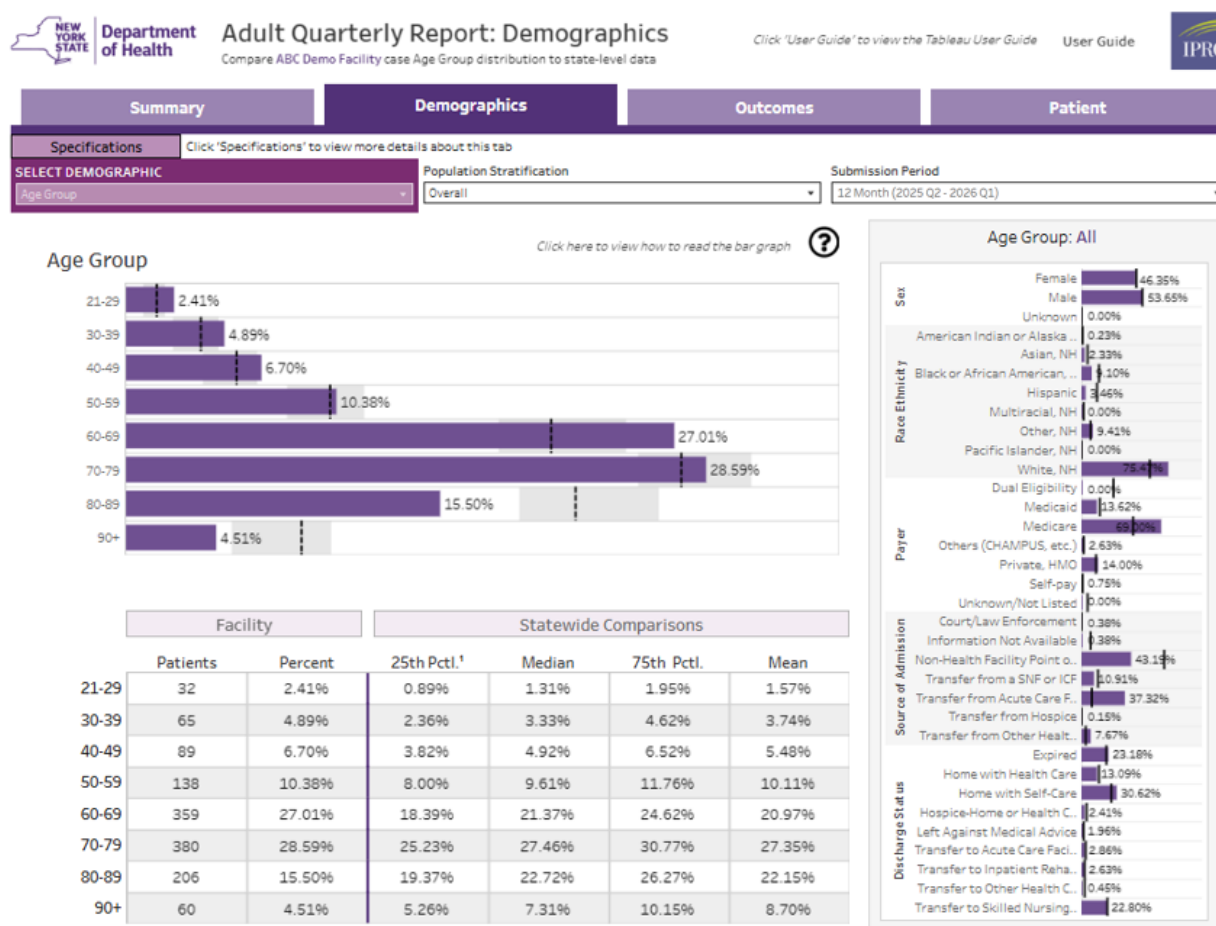


Tableau Report User Guide

Peer groups are determined by the hospital's Healthcare Cost and Utilization Project (HCUP) hospital size category, taking into account hospital size, inpatient bed count, residential density (urban vs. rural) and teaching vs. nonteaching hospitals. More information can be found at: https://www.hcup-us.ahrq.gov/db/vars/hosp_bedsiz/kidnote.jsp.

Demographics Tab

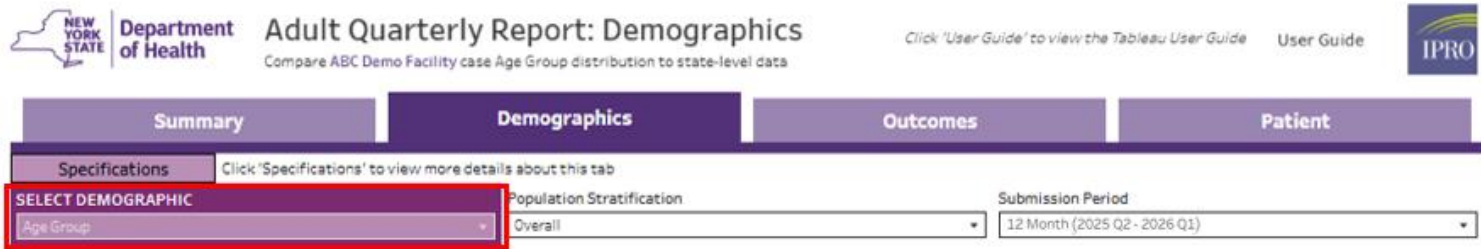
The purpose of this tab is to allow users to view the demographic breakdown of their patient population, and compare their patient population to hospitals statewide. The 'Population Stratification' filter at the top of the tab defaults to the overall population but allows for filtering by severe sepsis and/or septic shock cases. The 'Submission Period' filter allows for filtering by the latest four submission periods, or for the past 12 months aggregated. The demographic variables displayed on this tab include age group, sex, race and ethnicity, payer, source of admission, and discharge status.

¹ Pctl : Percentile

² Counts and percentages may differ between the 2025 and 2026 reports due to changes in the mapping for the Discharge Status and Race Ethnicity categories. Please refer to the specifications for additional details, and refer to the 2025 reports to view the original mapping.

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To view detailed reports for specific demographics, select a demographic category using the ‘Select Demographic’ filter in the top left of the tab. After selecting a demographic category, the report will populate with a bullet chart and table based on the user selection.



- The bullet chart displays the data for the selected variable and population filter. The purple bar shows the hospital’s percentage, the black dashed bar represents the mean percentage based on statewide data for the selected performance period, and the gray bars represent the statewide interquartile range for each group.

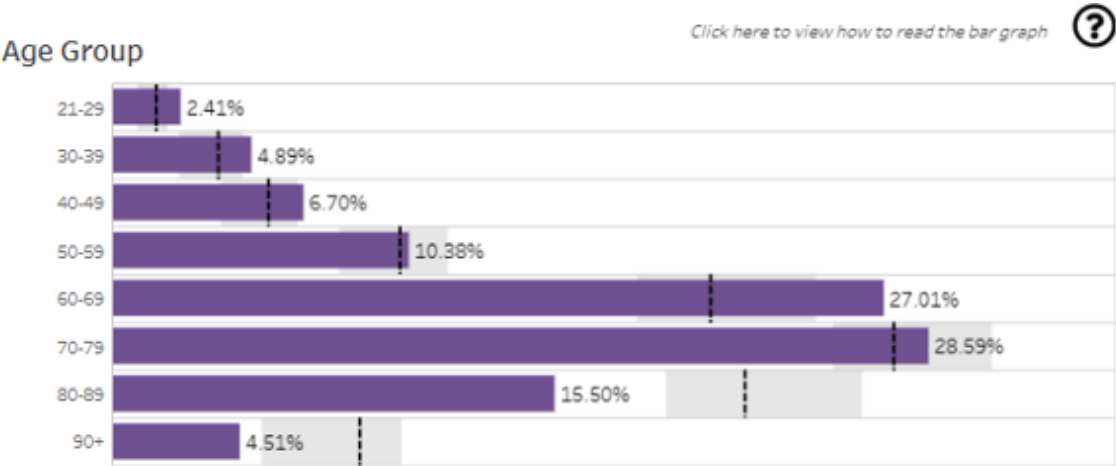
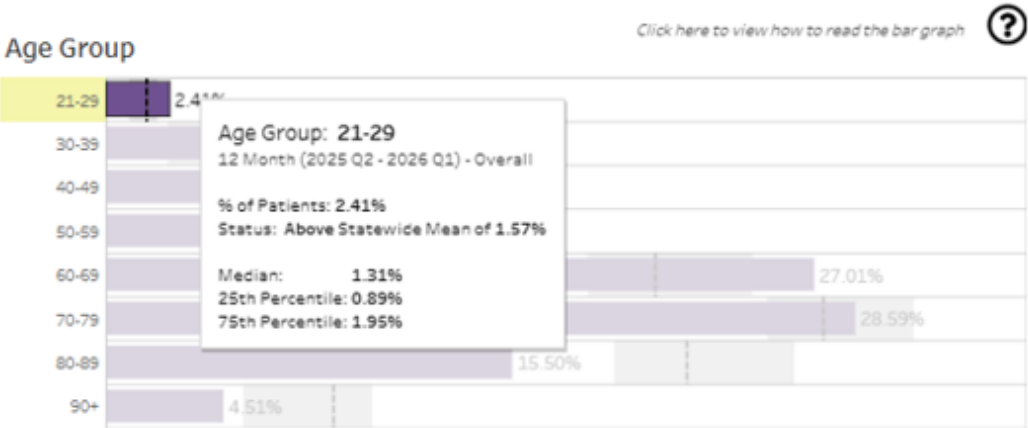


Tableau Report User Guide

- Hover over the purple bar to view the number and percentage of cases for a given group.



- The table at the bottom of the tab displays the count and percentage of cases within each demographic group under the ‘Facility’ label, and displays the 25th percentile, median, 75th percentile, and mean for hospitals statewide under the ‘Statewide Comparisons’ label. Only hospitals with at least 10 cases for the selected submission period are included in the calculation of 25th percentile, median, and 75th percentile.

	Facility		Statewide Comparisons			
	Patients	Percent	25th Pctl. ¹	Median	75th Pctl.	Mean
21-29	32	2.41%	0.89%	1.31%	1.95%	1.57%
30-39	65	4.89%	2.36%	3.33%	4.62%	3.74%
40-49	89	6.70%	3.82%	4.92%	6.52%	5.48%
50-59	138	10.38%	8.00%	9.61%	11.76%	10.11%
60-69	359	27.01%	18.39%	21.37%	24.62%	20.97%
70-79	380	28.59%	25.23%	27.46%	30.77%	27.35%
80-89	206	15.50%	19.37%	22.72%	26.27%	22.15%
90+	60	4.51%	5.26%	7.31%	10.15%	8.70%

Tableau Report User Guide

- The right-hand panel displays the distribution of additional patient demographics for the selected population.

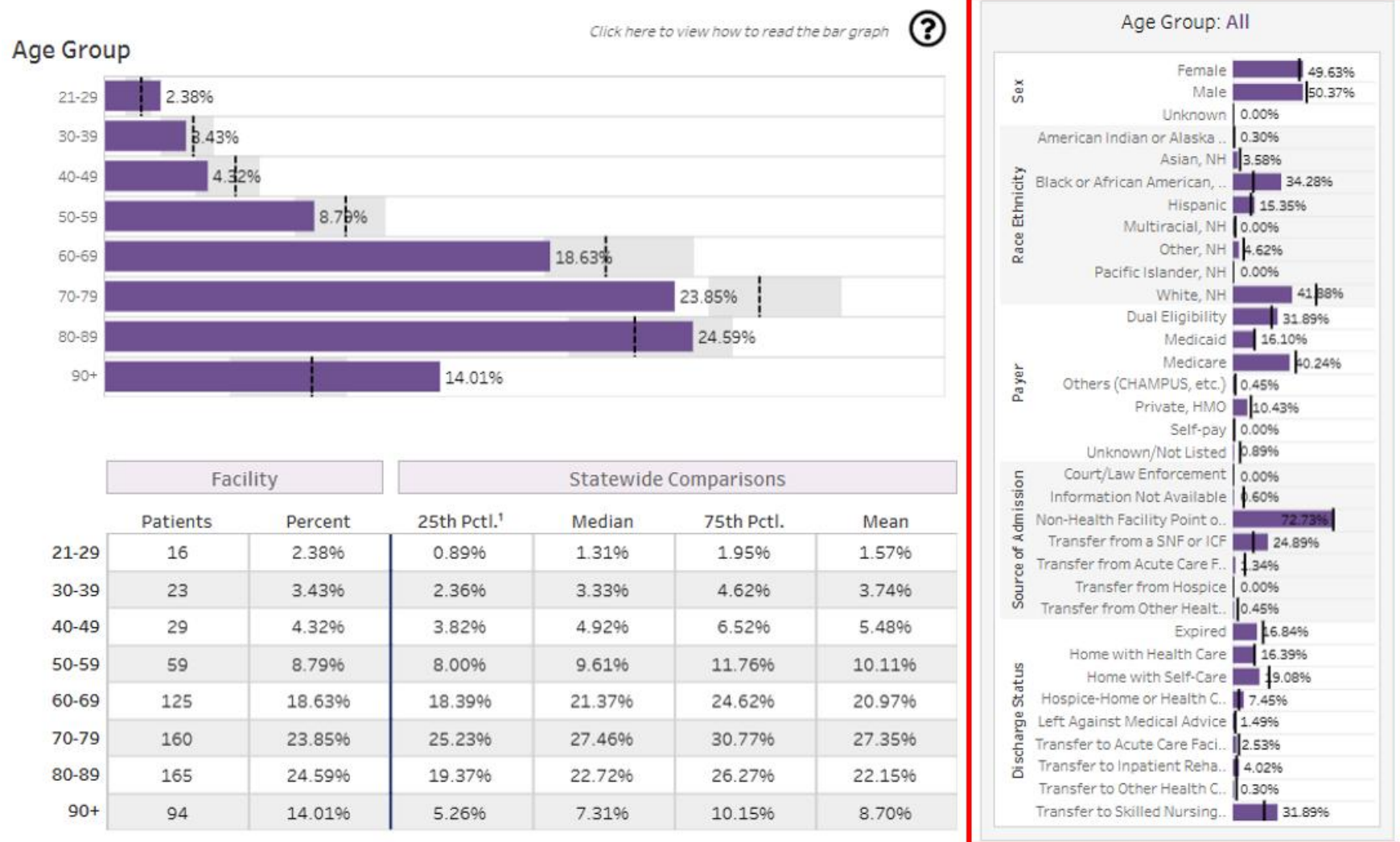
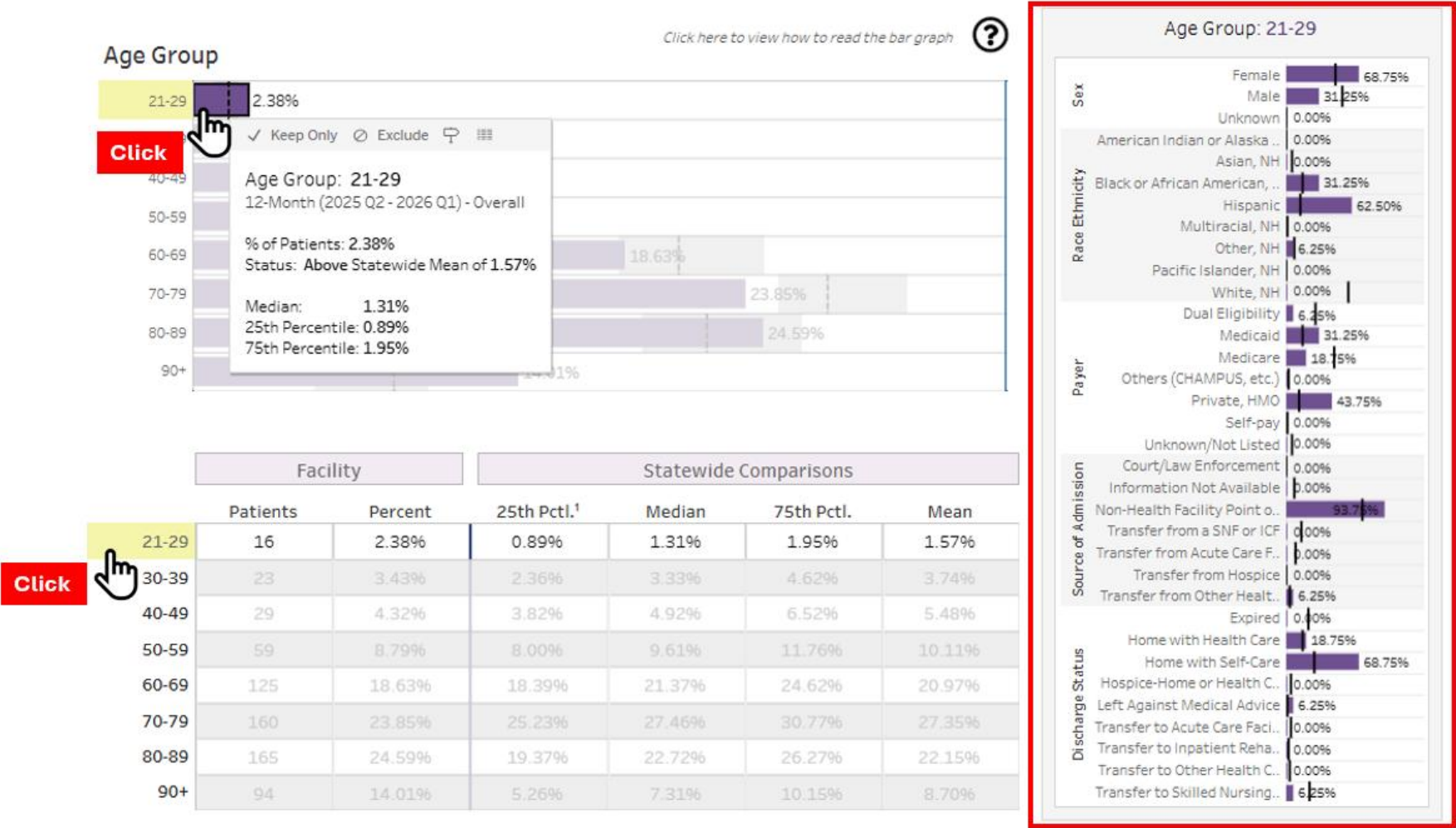


Tableau Report User Guide

- The right-hand panel defaults to the entire population, but users can view data for a subset of the population by clicking either the purple bar in the chart or the row label in the table corresponding with the subset of interest. The screenshot below demonstrates where to click to update the right-hand panel to only display data for Age Group 21-29. In this example, all charts in the right-hand panel updates to display data only for patients aged 21-29.



Outcomes Tab

The purpose of this tab is to allow users to view data on patient outcomes over time.

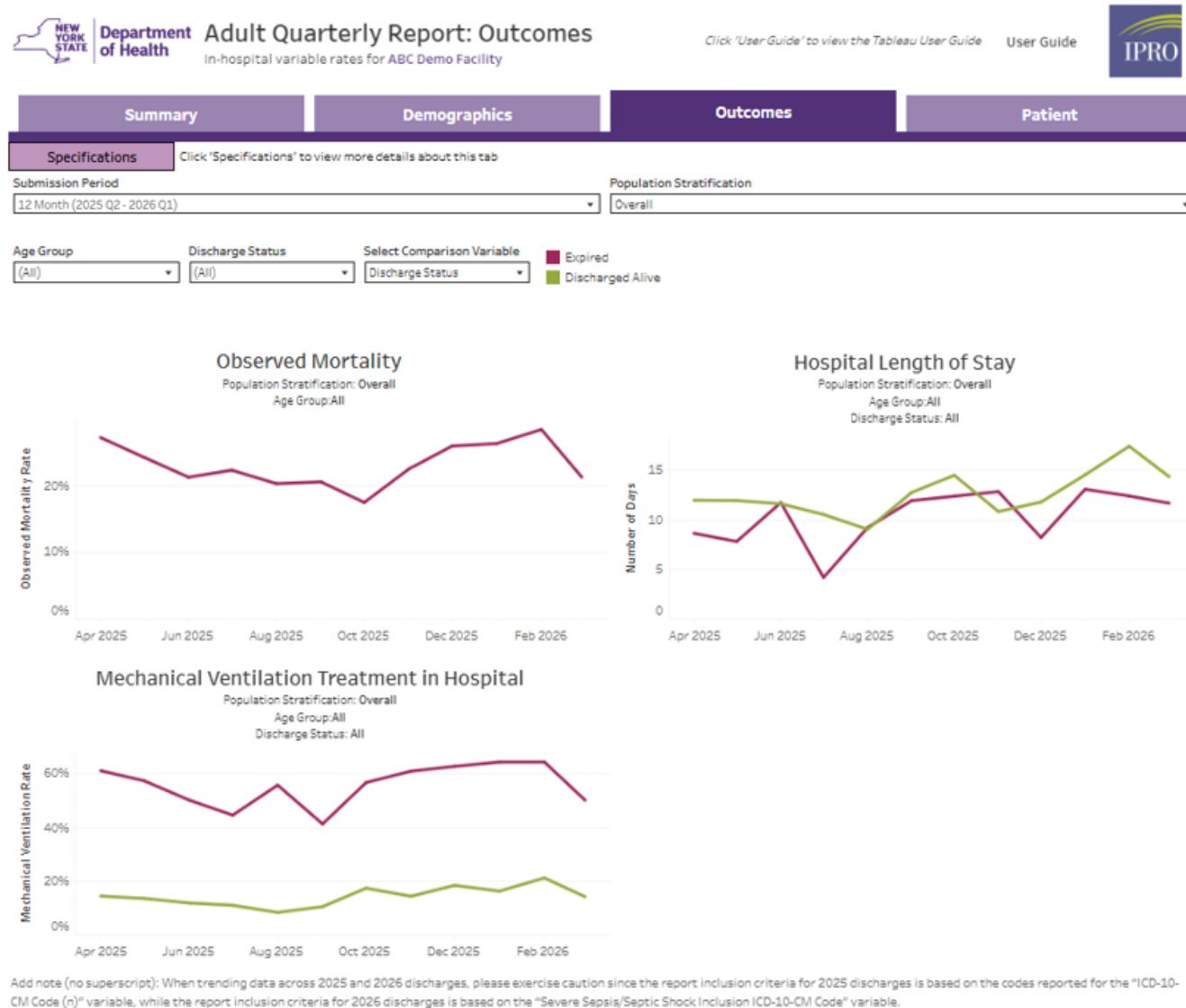


Tableau Report User Guide

This tab focuses on three key outcomes:

- In-hospital observed mortality rate (%),
- Mechanical ventilation rate (%), and
- Hospital length of stay (# of days).

The 'Submission Period' filter at the top left of the tab allows for filtering by the latest four submission periods, or for the past 12 months aggregated. The 'Population Stratification' filter defaults to the overall population but allows for filtering by severe sepsis and/or septic shock cases.

The 'Age Group' and 'Discharge Status' filters allow for filtering data displayed in the charts by specific age groups or discharge status. The 'Select Comparison Variable' filter allows users to select whether to view data stratified by either discharge status (Expired' vs. 'Discharge Alive') or age group.



The image shows three filter controls in a row. The first is 'Age Group' with a dropdown menu showing '{All}'. The second is 'Discharge Status' with a dropdown menu showing '{All}'. The third is 'Select Comparison Variable' with a dropdown menu showing 'Discharge Status'. To the right of these controls is a legend with two items: 'Expired' represented by a purple square and 'Discharged Alive' represented by a green square.

The graphs display the hospital's data for observed mortality rate, mechanical ventilation rate, and the hospital length of stay.

Patient Tab

The purpose of this tab is to allow users to view detailed information on cases that have been submitted, consistent with the information provided on the specifications tab.



Department of Health

Adult Quarterly Report: Patient

Detailed case information for ABC Demo Facility

Click 'User Guide' to view the Tableau User Guide

User Guide



Summary

Demographics

Outcomes

Patient

Specifications

Click 'Specifications' to view more details about this tab

Submission Period

Population Stratification

Sort By

Unique Personal Identifier (search)

Download Crosstab

Medical Record Number	Patient Control Number	Unique Personal Identifier	Facility Name	Age	Sex	Race Ethnicity	Payer
M0001	P0001	U0001	ABC Demo Facility	82	Male	White, NH	Medicare
M0002	P0002	U0002	ABC Demo Facility	66	Male	Hispanic	Medicare
M0003	P0003	U0003	ABC Demo Facility	71	Female	Black or African American, NH	Dual Elig
M0004	P0004	U0004	ABC Demo Facility	52	Female	White, NH	Medicaid
M0005	P0005	U0005	ABC Demo Facility	56	Male	Other, NH	Others (CI
M0006	P0006	U0006	ABC Demo Facility	78	Male	Black or African American, NH	Medicare
M0007	P0007	U0007	ABC Demo Facility	77	Female	White, NH	Dual Elig
M0008	P0008	U0008	ABC Demo Facility	54	Female	Black or African American, NH	Medicaid
M0009	P0009	U0009	ABC Demo Facility	53	Male	Hispanic	Private, H
M0010	P0010	U0010	ABC Demo Facility	72	Male	Black or African American, NH	Medicare
M0011	P0011	U0011	ABC Demo Facility	96	Female	Black or African American, NH	Medicare
M0012	P0012	U0012	ABC Demo Facility	59	Female	White, NH	Medicaid
M0013	P0013	U0013	ABC Demo Facility	67	Male	Black or African American, NH	Medicare
M0014	P0014	U0014	ABC Demo Facility	92	Male	White, NH	Medicare
M0015	P0015	U0015	ABC Demo Facility	67	Female	Hispanic	Dual Elig
M0016	P0016	U0016	ABC Demo Facility	66	Female	White, NH	Medicare
M0017	P0017	U0017	ABC Demo Facility	96	Female	White, NH	Dual Elig
M0018	P0018	U0018	ABC Demo Facility	67	Male	Black or African American, NH	Dual Elig
M0019	P0019	U0019	ABC Demo Facility	77	Female	American Indian or Alaska Native, NH	Medicare
M0020	P0020	U0020	ABC Demo Facility	79	Female	Black or African American, NH	Medicare
M0021	P0021	U0021	ABC Demo Facility	59	Male	White, NH	Private, H
M0022	P0022	U0022	ABC Demo Facility	73	Male	Black or African American, NH	Medicare
M0023	P0023	U0023	ABC Demo Facility	91	Male	White, NH	Medicare
M0024	P0024	U0024	ABC Demo Facility	95	Female	White, NH	Medicare
M0025	P0025	U0025	ABC Demo Facility	83	Female	Black or African American, NH	Medicare
M0026	P0026	U0026	ABC Demo Facility	75	Female	Black or African American, NH	Dual Elig
M0027	P0027	U0027	ABC Demo Facility	101	Female	White, NH	Medicare
M0028	P0028	U0028	ABC Demo Facility	33	Female	Other, NH	Medicaid
M0029	P0029	U0029	ABC Demo Facility	95	Female	Hispanic	Dual Elig
M0030	P0030	U0030	ABC Demo Facility	83	Male	White, NH	Medicare
M0031	P0031	U0031	ABC Demo Facility	33	Male	Black or African American, NH	Private, H
M0032	P0032	U0032	ABC Demo Facility	64	Female	Asian, NH	Dual Elig
M0033	P0033	U0033	ABC Demo Facility	70	Male	Hispanic	Medicare

The 'Submission Period' filter at the top left of the tab allows for filtering by the latest four submission periods, or for the past 12 months aggregated. The 'Population Stratification' filter defaults to the overall population but allows for filtering by severe sepsis and/or septic shock cases.

In addition, the 'Sort By' filter allows users to sort cases by each of the variables displayed in the table. Users can also use the 'Unique Personal Identifier (search)' box in the top right of this section to search for specific cases by their Unique Patient Identifier.

Summary

Demographics

Outcomes

Specifications

Click 'Specifications' to view more details about this tab

Submission Period

Population Stratification

Sort By

Unique Personal Identifier (search)

12 Month (2025 Q2 - 2026 Q1)

Overall

Medical Record Number

To download the displayed table in CSV or Excel format, click 'Download Crosstab.'

Summary

Demographics

Outcomes

Patient

Specifications

Click 'Specifications' to view more details about this tab

Submission Period

Population Stratification

Sort By

Unique Personal Identifier (search)

Download Crosstab

12 Month (2025 Q2 - 2026 Q1)

Overall

Medical Record Number

To download data, select 'Patient - Data,' and click the download button.

Download Crosstab

×

Select a sheet from this dashboard

☒

Patient - Data

☐

Patient - Title

Select Format

☒ Excel

☐ CSV

Download

Data Quality Summary Tab

The purpose of this tab is to provide a high-level summary of the quality of each hospital's submitted data, including missing and invalid data.

⁴ The missing and invalid case summary tables include cases meeting the report inclusion criteria, excluding exceptions.
⁵ Counts and percentages of missing and invalid demographic variables may differ between the 2025 and 2026 reports. Please refer to the specifications for additional details.
⁶ #: Number
⁷ %: Percentage

Latest Refresh Date - 6/25/2026

Data Quality Case Summary Table

The Data Quality Case Summary table provides key case metrics by month, including the number cases meeting inclusion criteria and cases with exceptions. Detailed information regarding the report's inclusion criteria and how these categories are defined can be found in the Specifications of this tab.

Data Quality Case Summary¹

	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	12 Month
Cases Meeting Inclusion Criteria	85	87	85	81	89	83	132	125	124	149	138	151	1,329
Cases with Exceptions	0	0	0	0	0	0	0	0	0	0	0	0	0

Cases Meeting Inclusion Criteria (Excluding Exceptions) Table and Chart

The Cases Meeting Inclusion Criteria (Excluding Exceptions) table displays the number of cases in each patient population (severe sepsis, septic shock, overall) by month. Cases are only included in this table if they meet the report inclusion criteria and are not flagged as exceptions. Detailed information regarding the report's inclusion criteria can be found in the Specifications of this tab.

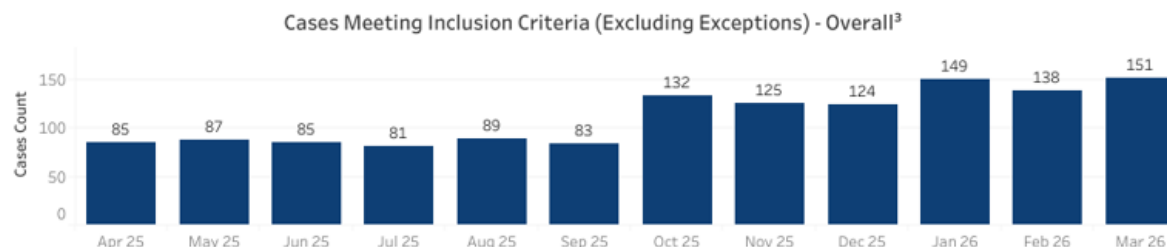
Cases Meeting Inclusion Criteria (Excluding Exceptions)²

	Apr 25	May 25	Jun 25	Jul 25	Aug 25	Sep 25	Oct 25	Nov 25	Dec 25	Jan 26	Feb 26	Mar 26	12 Month
Severe Sepsis	25	30	29	23	26	28	41	39	34	41	35	32	383
Septic Shock	61	58	57	58	64	57	91	87	90	110	103	119	955
Overall	85	87	85	81	89	83	132	125	124	149	138	151	1,329

The Cases Meeting Inclusion Criteria (Excluding Exceptions) bar chart displays the number of cases in a single patient population (severe sepsis, septic shock, overall) by month. The 'Population Stratification' filter to the left of the chart allows users to select which patient population to view on the chart.

Population Stratification

- ☐ Severe Sepsis
- ☐ Septic Shock
- ☒ Overall



³ The sum of Severe Sepsis and Septic Shock cases for a given timeframe may be greater than the number of Overall cases if any individual cases are reported as having both Severe Sepsis and Septic Shock.

Missing and Invalid Case Summary Tables

The Missing and Invalid Case Summary tables display the number of cases with missing and/or invalid values reported for select Demographic and Severity variables by submission period. Detailed information describing how missing and/or invalid values are classified can be found in the Specifications of this tab.

Missing Demographic Case Summary - Overall^{4, 5}

	2025: Q2 (4/1/25 - 6/30/25)	2025: Q3 (7/1/25 - 9/30/25)	2025: Q4 (10/1/25 - 12/31/25)	2026: Q1 (1/1/26 - 3/31/26)	12-Month (2025 Q2 - 2026 Q1)
# ⁶ of Cases with Missing Demographics	0	0	0	0	0
% ⁷ of Cases with Missing Demographics	0.00%	0.00%	0.00%	0.00%	0.00%

Invalid Demographic Case Summary - Overall^{4, 5}

	2025: Q2 (4/1/25 - 6/30/25)	2025: Q3 (7/1/25 - 9/30/25)	2025: Q4 (10/1/25 - 12/31/25)	2026: Q1 (1/1/26 - 3/31/26)	12-Month (2025 Q2 - 2026 Q1)
# of Cases with Invalid Demographics	0	0	0	1	1
% of Cases with Invalid Demographics	0.00%	0.00%	0.00%	0.59%	0.15%

Missing and Invalid Severity Variables Case Summary - Overall⁴

	2025: Q2 (4/1/25 - 6/30/25)	2025: Q3 (7/1/25 - 9/30/25)	2025: Q4 (10/1/25 - 12/31/25)	2026: Q1 (1/1/26 - 3/31/26)	12-Month (2025 Q2 - 2026 Q1)
# of Cases with Missing or Invalid Severity Variable	159	166	131	151	607
% of Cases with Missing or Invalid Severity Variable	89.33%	93.26%	90.34%	88.82%	90.46%

⁴ The missing and invalid case summary tables include cases meeting the report inclusion criteria, excluding exceptions.

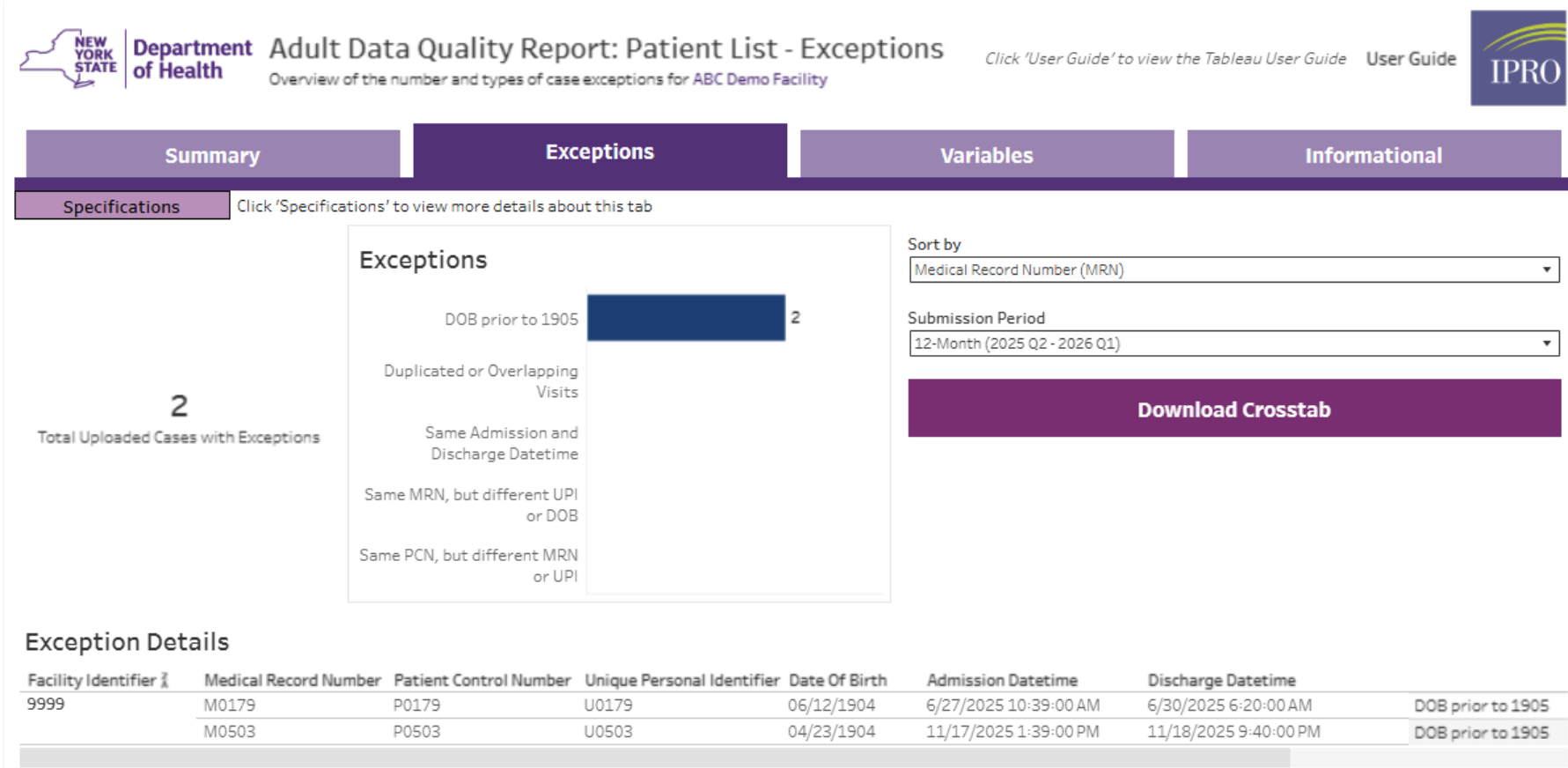
⁵ Counts and percentages of missing and invalid demographic variables may differ between the 2025 and 2026 reports. Please refer to the specifications for additional details.

⁶ #: Number

⁷ %: Percentage

Exceptions Tab

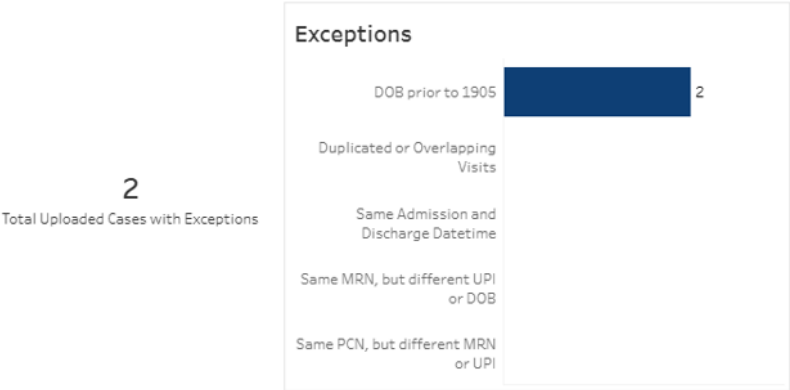
The purpose of this tab is to list the number of cases with exceptions and types of exceptions that result in cases being omitted from the Quarterly Report. These cases should be corrected before the next data submission so that the corrected data will display with the subsequent report refresh.



The five exceptions are:

- Date of Birth (DOB) prior to 1905
- Duplicated or Overlapping Visits
- Same Admission and Discharge Datetime
- Same Medical Record Number (MRN), but different Universal Patient Identifier (UPI) or Date of Birth (DOB)
- Same Patient Control Number (PCN), but different Medical Record Number (MRN) or Universal Patient Identifier (UPI)

The Exceptions chart summarizes the number of cases with exceptions and the number of cases that fall under each exception.

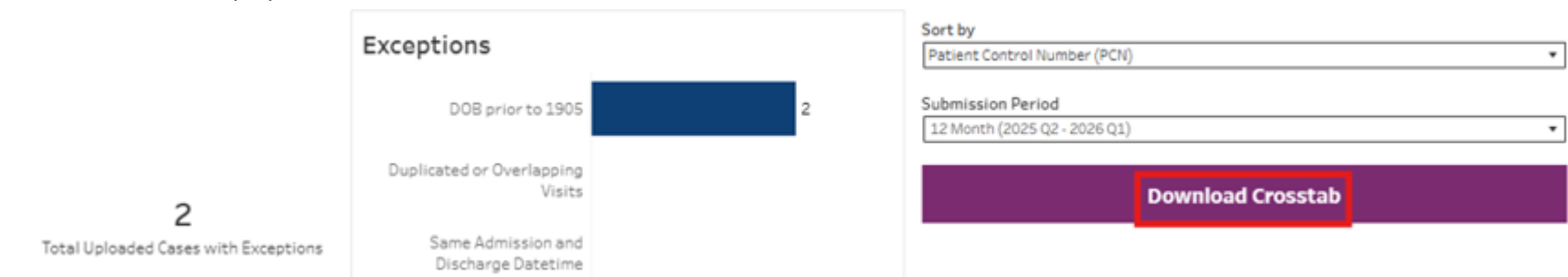


The Exception Details table provides users with the details of which cases were flagged as exceptions so that users can identify and correct these cases before the next data submission.

Exception Details

Facility Identifier	Medical Record Number	Patient Control Number	Unique Personal Identifier	Date Of Birth	Admission Datetime	Discharge Datetime	
9999	M0123	P0123	U0123	10/18/1904	3/11/2026 9:26:00 PM	3/18/2026 3:13:00 PM	DOB prior to 1905
	M0251	P0251	U0251	06/06/1904	3/5/2026 12:34:00 AM	3/11/2026 1:04:00 PM	DOB prior to 1905

To download the displayed table in CSV or Excel format, click 'Download Crosstab'.



To download data, select 'Exception - Details,' and click the download button.

The screenshot shows a dialog box titled 'Download Crosstab' with a close button (X) in the top right corner. Inside the dialog, there is a section 'Select a sheet from this dashboard' with two options: 'Exception - Details' (selected with a checkmark and a bar chart icon) and 'Exception - Total Count' (with a bar chart icon). Below this, there is a 'Select Format' section with two radio buttons: 'Excel' (selected) and 'CSV'. At the bottom right of the dialog is a blue button labeled 'Download' which is highlighted with a red rectangle.

Variables Tab

The purpose of this tab is to allow users to see a detailed breakdown of missing and/or invalid data for demographic and severity variables, and to compare rates of missing and/or invalid data to hospitals statewide. The 'Submission Period' filter at the top right of the tab allows for filtering by the latest four submission periods, or for the past 12 months aggregated. The 'Population Stratification' filter defaults to the overall population but allows for filtering by severe sepsis and/or septic shock cases.


Department of Health

Adult Data Quality Report: Variables Summary
 Overview of variables with missing and/or invalid values for ABC Demo Facility

[Click 'User Guide' to view the Tableau User Guide](#)


Summary
Exceptions
Exclusions
Variables
Informational

Specifications
[Click 'Specifications' to view more details about this tab](#)

The Variables tab displays data for cases meeting the report inclusion criteria, excluding exceptions.

Submission Period
 2024 Q2 (4/1/24 - 6/30/24)

Population Stratification
 Overall

Missing Demographics

	# ¹ Missing	% ² Missing	% ² Missing - State
Insurance Number	0	0.00%	4.45%
Patient Zip Code of Residence	0	0.00%	0.02%
Transfer Facility Identifier Receiving	0	0.00%	4.26%
Transfer Facility Name Receiving	0	0.00%	3.83%
Transfer Facility Identifier Sending	0	0.00%	3.87%
Transfer Facility Name Sending	0	0.00%	3.72%

Invalid Demographics

	# ¹ Invalid	% ² Invalid	% ² Invalid - State
Transferred In - Source of Admission Mismatch	3	2.45%	2.76%
Transferred Out - Discharge Status Mismatch	1	0.81%	3.61%

Comorbidity/Risk-Factor Variables

	# ¹ Missing	% ² Missing	% ² Missing - State	# ¹ Invalid Datetime
Patient Care Considerations Datetime	0	0.00%	5.29%	0

Severity Variables
[Select "Expand" to see additional severity variables. Select items again and select "Collapse Values" from tooltip to close.](#)

	# ¹ Missing	% ² Missing	% ² Missing - State	# ¹ Invalid Datetime	# ¹ Invalid Min/Max
Appt 1 Expand ▼	11	9.01%	25.96%		
Appt Datetime 1 Expand ▼	11	9.01%	25.96%	0	
Bilirubin Arrival Expand ▼	1	0.81%	4.98%		
Bilirubin Arrival Datetime Expand ▼	1	0.81%	4.98%	0	
Creatinine Arrival Expand ▼	1	0.81%	1.64%		
Creatinine Arrival Datetime Expand ▼	1	0.81%	1.64%	0	
Diastolic 1 Expand ▼	0	0.00%	0.41%		
Diastolic Datetime 1 Expand ▼	0	0.00%	0.41%	1	

¹ #: Number
² %: Percentage

Tableau Report User Guide

The *Missing Demographics* table shows the number and percentage of cases with missing data for demographic variables and variable pairs that allow blanks. These variables are Insurance Number and Patient Zip Code of Residence, and the variable pairs are Transfer Facility Identifier and Name Receiving, and Transfer Facility Identifier and Name Sending. This table also displays the number and percentage of cases missing data for these variables and variable pairs at the state level.

Missing Demographics

	# ¹ Missing	% ² Missing	% ² Missing - State
Insurance Number	3	0.68%	3.79%
Patient Zip Code of Residence	0	0.00%	5.30%
Transfer Facility Identifier and Name Receiving	41	9.36%	3.78%
Transfer Facility Identifier and Name Sending	15	3.42%	2.08%

The *Invalid Demographics* table displays the number and percent of cases that have invalid values for the Source of Admission and Discharge Status variables based on their status as transfer cases. Detailed information regarding how cases are identified as transfers, and what qualifies as an invalid value can be found in the specifications of this tab.

Invalid Demographics³

	# ¹ Invalid	% ² Invalid	% ² Invalid - State
Transfer Facility Receiving: Source of Admission # 4	0	0.00%	1.31%
Transfer Facility Sending: Discharge Status # 02 or 82	0	0.00%	2.46%

³ Counts and percentages may differ between the 2025 and 2026 reports due to changes in the logic for these categories and the identification of transfer cases. Please refer to the specifications for additional details.

Tableau Report User Guide

The *Severity Variables* table displays the number and percentage of cases missing data for severity variables for each hospital, and the percentage of cases missing data for these variables at the state level.

Severity Variables Select "Expand" to see additional severity variables. Select items again and select "Collapse Values" from tooltip to close.

	# ¹ Missing	% ² Missing	% ² Missing - State	# ¹ Invalid Datetime	# ¹ Invalid Min/Max
Aptt 1 Expand ▼	150	34.24%	25.51%		
Aptt Datetime 1 Expand ▼	150	34.24%	25.51%	0	
Bilirubin Arrival Expand ▼	0	0.00%	5.06%		
Bilirubin Arrival Datetime Expand ▼	0	0.00%	5.06%	0	
Creatinine Arrival Expand ▼	0	0.00%	1.94%		
Creatinine Arrival Datetime Expand ▼	0	0.00%	1.94%	0	
Diastolic 1 Expand ▼	0	0.00%	1.15%		
Diastolic Datetime 1	0	0.00%	1.15%	0	

- To view all variables within a category (e.g., Aptt 1, Aptt 2, Aptt 3, Aptt Max), select 'Expand' under the category of interest. To collapse a category, click any of the row labels or table values in the category, and select 'Collapse Values' in the tool tip.

Aptt 1
Expand ▼

Aptt 1
Aptt 2
Aptt 3
Aptt Max

✓ Keep Only ⊗ Exclude ≡+ ≡- ≡≡

5 items selected · SUM of Measure Values: 121

Aptt 1
[Collapse Values](#)

Informational Tab

The purpose of this tab is to provide information on cases with missing and/or invalid data flags. These flags do not result in the exclusion of cases from the Quarterly Report, but users are still encouraged to identify and correct the flags identified on this tab. The 'Submission Period' filter in the middle of the tab allows for filtering by any of the latest four submission periods, or for the past 12 months aggregated. The 'Population Stratification' filter defaults to the overall population but allows for filtering by severe sepsis and/or septic shock cases.

 **Department of Health**

Adult Data Quality Report: Patient List - Informational
Overview of cases with missing and/or invalid variable flags for ABC Demo Facility

[Click 'User Guide' to view the Tableau User Guide](#) **User Guide**



SummaryExceptionsVariables**Informational**

Specifications

Click 'Specifications' to view more details about this tab

# of Cases* (based on filter selections)	671	¹ The 'Submission Period' and 'Population Stratification' filters affect all tables on this tab.
# of Cases with Flags	607	² Cases refers to cases meeting inclusion criteria, excluding exceptions.
# of Cases with Invalid Datetime	0	³ #: Number
# of Cases with Invalid Demographics	1	Submission Period*
# of Cases with Invalid Max	261	12-Month (2025 Q2 - 2026 Q1)
# of Cases with Invalid Min	252	Population Stratification*
# of Cases with Missing All First Severity Variables	0	Overall
# of Cases with Missing Demographics	0	
# of Cases with Missing First Lab	108	
# of Cases with Missing First Vital	0	

Case Details

Choose a Flag*
Missing First Lab

⁴ The 'Choose a Flag' filter only affects the 'Case Details' table on this tab.

Download Crosstab

Medical Record Number	Unique Personal Identifier	Patient Control Number	Admission Datetime	Discharge Datetime	Flag Type	Field Name	Field Value
M0001	U0001	P0001	2025-04-07 15:04	2025-04-20 10:19	Missing First Lab	lactate_level_1	
						lactate_level_dt_1	
M0002	U0002	P0002	2025-04-09 02:59	2025-04-15 16:47	Missing First Lab	lactate_level_1	
						lactate_level_dt_1	
M0004	U0004	P0004	2025-04-10 05:35	2025-04-11 15:12	Missing First Lab	aptt_1	
						aptt_dt_1	
						lnr_1	
						lnr_dt_1	
						lactate_level_1	
						lactate_level_dt_1	
M0007	U0007	P0007	2025-04-10 21:15	2025-04-23 16:22	Missing First Lab	aptt_1	
						aptt_dt_1	
						lnr_1	
						lnr_dt_1	
M0018	U0018	P0018	2025-04-15 05:07	2025-04-21 20:19	Missing First Lab	aptt_1	
						aptt_dt_1	
M0022	U0022	P0022	2025-04-16 19:22	2025-04-21 13:27	Missing First Lab	lactate_level_1	
						lactate_level_dt_1	
M0026	U0026	P0026	2025-04-18 01:51	2025-04-20 12:19	Missing First Lab	lactate_level_1	
						lactate_level_dt_1	
M0031	U0031	P0031	2025-04-21 03:42	2025-05-05 18:28	Missing First Lab	aptt_1	

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The summary table on the top left lists the number of cases with the following flags (based on the filter selections): Invalid Datetime, Invalid Demographics, Invalid Max, Invalid Min, Missing All First Severity Variables, Missing Demographics, Missing First Lab, and Missing First Vital.

# ³ of Cases ² (based on filter selections)	1,329
# of Cases with Flags	1,234
# of Cases with Invalid Datetime	2
# of Cases with Invalid Demographics	0
# of Cases with Invalid Max	0
# of Cases with Invalid Min	61
# of Cases with Missing All First Severity Variables	0
# of Cases with Missing Demographics	132
# of Cases with Missing First Lab	608
# of Cases with Missing First Vital	3

The *Case Details* table at the bottom of the tab lists all cases that were flagged, indicating the MRN, PCN, UPI, Date of Birth, Admission Date, and Discharge Date for the identified cases. Users are encouraged to double-check the patient’s information and correct the data if necessary.

Case Details

Choose a Flag⁴
All

⁴ The 'Choose a Flag' filter only affects the 'Case Details' table on this tab.

Download Crosstab

Medical Record Number	Unique Personal Identifier	Patient Control Number	Admission Datetime	Discharge Datetime	Flag Type	Field Name	Field Value
M0001	U0001	P0001	2025-11-03, 22:50	2025-11-04 22:00	Missing Value	aptt_3	
						aptt_dt_3	
						inr_3	
						inr_dt_3	
						transfer_facility_id_receiving	
						transfer_facility_nm_receiving	

To download the displayed table in CSV or Excel format, click ‘Download Crosstab’.

Case Details

Choose a Flag⁴
All

⁴ The 'Choose a Flag' filter only affects the 'Case Details' table on this tab.

Download Crosstab

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To download data, select 'Patient List Informational' and click the download button.

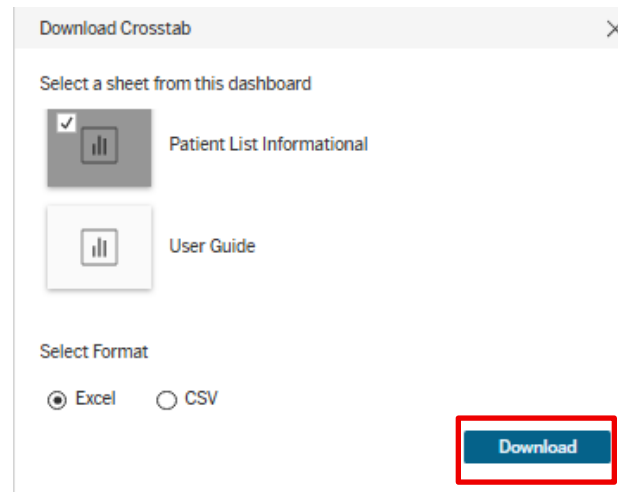


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