THE REGISTER

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2014 Contributors
The AJRR would like to thank our 2014 contributors for their support.

The AJRR has a Hospital Reporting and Dashboard Video Demonstration
The link below provides a demonstration of the AJRR reporting dashboards. The dashboards and reports are intended to provide our participants with quality metrics that can be used for a variety of improvement efforts. The reports and dashboards shown will be continuously improved over time with input from our stakeholders.

http://www.youtube.com/watch?v=-TYnEYkVE28

The AJRR has a Listserv
If you are interested in joining a user group listserv, please contact us at info@ajrr.net and we’ll sign you up.

The AJRR has promotional materials for participants
We have developed a few items which hospitals may use to promote their collaboration with AJRR. We are happy to provide an “AJRR Participant” logo for use on brochures, newsletters, or websites. We also have a template press release which you are free to tailor for your Surgeon Champion and local community. If you did not receive those materials, but would like to use them as your participating hospital, please contact Caryn Etkin at 847-430-5032 or etkin@ajrr.net.
For AJRR, the biggest highlight of the first quarter is always the AAOS Annual Meeting. This year’s conference in New Orleans (March 11-15) was no different. AJRR Board and staff members were quite busy with a variety of activities. First, we started with the Board of Directors meeting on March 10. Prior to the meeting, the Board directed Avalere Health, LLC to review our business approach to operating a national registry. Avalere’s presentation of their final report was our main agenda item for the day. The business audit results will assist AJRR in identifying models for continued operational success. Their directives include the expansion of staff and related activities that will take the organization to the next level. Avalere Health also suggested that the AJRR move from a monitoring and surveillance operation into a quality initiative for all of Orthopaedics. As a result of their report, we will have numerous discussions in the coming months. During the Board meeting, we also discussed several exciting new initiatives including contracting with individual practice groups in addition to hospitals; the development of a five-year business plan; we determined charges for the newly composed Data Committee; and coordinated efforts and receive nominations to the AJRR Commission.

AJRR Board member Terence Gioe, MD, (see photo) and Medical Director David Lewallen, MD, moderated sessions for meetings of the International Consortium of Orthopaedic Registries (ICOR), an initiative of the US Food and Drug Administration (FDA). There was lively discussion about the Medical Device Epidemiology Network (MDEpiNet) system and the development of ICOR-USA as a core of the National Postmarket Surveillance System for Orthopedic Devices. The FDA will be relying on the national registries to collect relevant data that can be utilized to measure patient satisfaction and determine the longevity of implant products.

On March 12, we hosted a session, “Worldwide Orthopaedic Arthroplasty Registries”, which introduced audience members to the variety of collaborative registry efforts occurring around the world. International efforts were represented by participants from Sweden, Finland, and the ICOR initiative (see photos). Our session also featured domestic state-based efforts from California, Michigan and Virginia; and other collaborative registry efforts from Kaiser Permanente, Mayo Clinic and the Agency for Healthcare Research and Quality (AHRQ) funded Function and Outcomes Research for Comparative Effectiveness in Total Joint Replacement (FORCE-TJR) project. For more information about the session, please see: http://www.aaos.org/news/acadnews/2014/AAOS3_3_13.asp

AJRR staff also attended a meeting of the International Society of Arthroplasty Registers (ISAR). This exciting group of registries from around the world is continually expanding and becoming the organization to determine international approaches and directions for data collection and reporting. This spring, ISAR will hold its 3rd international meeting in Cambridge, MA. For registration information, go to www.ajrr.net. Anyone interested in registry development should attend this meeting.

During the meeting, we also had the opportunity to meet with many interested hospitals and health systems. The common statement this year was not, “I didn’t know we had a national registry,” but rather, “How can I sign up my hospital?” We are definitely making great progress!
This quarter, we are pleased to feature two amazing champions from Illinois, our home state and one of the leading states in terms of hospital enrollment. Under the direction of Jennifer Perkins, RN, BSHA, ONC, Memorial Medical Center in Springfield was one of the first hospitals to join AJRR, signing up over two years ago. Alana Burns, BS, of NorthShore University HealthSystem has been a strong advocate for AJRR and oversaw the enrollment of the four hospitals in her system which are in the northern suburbs of Chicago and include Evanston, Glenbrook, Highland Park, and Skokie Hospitals. Both champions are also spearheading their hospitals’ efforts with AJRR staff on our Level 2/Level 3 pilot program.

Jennifer Perkins is the Orthopedic Services Program Coordinator at Memorial Medical Center. Jennifer has worked as an RN at Memorial, a Magnet-designated hospital, for more than 20 years, most of which has been directly involved with orthopedics. She obtained a BS in Health Administration in 2006 and will begin an MBA program this summer at the University of Illinois at Springfield. She is a member of the National Association of Orthopaedic Nurses, and holds certifications in Orthopaedic Nursing and Lean Six Sigma. As the Orthopedic leader in the area, Jennifer attributes Memorial’s success to the opportunity to partner with their physicians and collaborate with outside entities, such as AJRR, in efforts to continually raise the standards and improve patient quality of care.

Alana Burns has been Manager of Orthopaedic Research and Outcomes at NorthShore University HealthSystem since 2012. Prior to her current position, Alana had eleven years of research experience specializing in Orthopedic Surgery, Plastic Surgery, Chronic Obstructive Pulmonary Disease, and Alzheimer’s disease. Her start in Orthopedics began at the Hospital for Special Surgery in New York City, where she managed their Sports Medicine Clinical Research Department for more than five years. Alana attended Michigan State University on a full basketball scholarship, graduating with a BS in Physiology. She will complete her MA in Bioethics and Medical Humanities from the University of Louisville in May 2014. In addition to her research endeavors, she is a sought after motivational speaker and mentor for Type 1 Diabetics.
Breaking News!

We have a new member of the AJRR Executive Committee. In January 2014, Daniel J. Berry, MD, became Vice-Chair of the AJRR Board of Directors. Dr. Berry is Chairman of the Department of Orthopaedic Surgery at Mayo Clinic and was AAOS President from 2011-2012. He has a long-standing interest in developing a national joint registry and we are pleased to have him serve in this new role for our leadership.

Starting October 1, 2014, hospitals and orthopaedic practices were going to be required to use the International Classification of Diseases 10th edition (ICD-10). Congress recently passed a one-year patch for the Medicare Sustainable Growth Rate (SGR) formula to postpone a 24 percent cut in Medicare payments to physicians scheduled to take effect starting April 1, 2014. Contained within the patch is a provision delaying the implementation of ICD-10 for one year. The bill is awaiting President Obama's signature.

Please know that while we currently accept ICD-9 diagnosis and procedure codes, AJRR's data system is already fully compatible with ICD-10. We will soon distribute the appropriate ICD-10 triggering procedure codes so that you can begin your transition plan.

AJRR recognizes that in many cases, some of the data to be submitted may need to be acquired from health record systems outside of the hospital. For these instances, we have developed legal agreements for private practice groups. While our main collaborators will continue to be hospitals, these contracts can be put in place for practices affiliated with participating hospitals. For more information, please contact Caryn Etkin at 847-430-5032 or etkin@ajrr.net.

Verification of data submitted to the registry is critical for maintaining a high level of quality and confidence in our reporting. In March 2014, AJRR selected a firm to audit the 2013 data we received. Starting in April, West Virginia Medical Institute will be working with 12 randomly selected participating hospitals to review data submissions and to ensure that procedures conducted at the hospitals adequately reflect the procedural volume.

The National Quality Registry Network (NQRN™) is a voluntary network of private and public registry stewards and other stakeholders interested in advancing the development and use of registries (e.g., national, regional, specialty, and health system) to measure and improve patient outcomes. AJRR is now a member of the NQRN™ Council and is actively involved in discussions with other registries pertaining to registry vendor assessments, the development of a Clinical Registry Self-Evaluation Toolkit, and a variety of other exciting topics. We look forward to the next NQRN™ meeting for Clinical Data Registries on April 22.

Since the beginning of the year, the AJRR has had lots of exposure in our nation’s capital. We are actively seeking clarification on the Common Rule and how it affects our ability to recruit hospitals. The Common Rule is a federal policy regarding biomedical and behavioral research involving human subjects in the United States (http://www.hhs.gov/ohrp/humansubjects/commonrule/). In most situations, ours included, Registries are exempt from the Rule. Hospital's legal teams find it difficult to concur with the exemption. We have made congressional visits to gain support for clarification of the Rule. E. Anthony Rankin, MD, Co-chair (right) of the AJRR Regulatory Committee, has joined our DC staff to make those visits. Another of our initiatives was to meet with Centers for Medicare & Medicaid Services (CMS) to determine if there was an opportunity to devise a program that would incentivize hospitals for their participation in a national registry. William Maloney, MD, AJRR Chair, and Eric Rugo, AJRR Director, participated in those January meetings.


The Michigan Arthroplasty Registry Collaborative Quality Initiative (MARCQI) is a Blue Cross Blue Shield of Michigan (BCBSM) and Blue Care Network (BCN) Collaborative Quality Initiative (CQI) that aims to improve the quality of care for all hip and knee replacement patients in Michigan. The project objective is to create a statewide infrastructure by developing a consortium of hospitals in Michigan that will engage in quality improvement activities for hip and knee joint replacement. By reducing complications, the project is also expected to reduce the costs of this care in the State of Michigan. The consortium aims to improve the quality of care by addressing variations in patient outcomes. MARCQI has three main goals:

1. Improve patient safety and the quality of hip and knee joint replacement procedures performed in Michigan by promoting continuous quality improvement activities throughout the state.
2. Improve quality of hip and knee joint replacement procedures by reporting on results and identifying devices and techniques with inferior outcomes through the analysis of registry data.
3. Demonstrate to patients and payers that MARCQI institutions are improving the value of arthroplasty services.

To accomplish the goals of MARCQI, it is imperative to support the ability of participating hospitals to voluntarily collect and disseminate data on individual center performance, in a non-punitive manner. This structure will allow continuous quality initiatives and monitoring of patient outcomes, thereby advancing the hip and knee joint replacement procedures quality of care.

Since 2012, MARCQI has established a consortium of 44 Michigan hospitals and has data on 35,157 total joint replacement procedures. In 2014, MARCQI began the process to release to AJRR a limited basic data set for those hospitals wishing to participate.

The initiative has also successfully constructed the framework for an electronic system for capturing, storing, and retrieving clinical outcomes data for a registry of patients undergoing hip and knee total joint replacement surgery at multiple locations across Michigan with data collection and compilation in the MARCQI Coordinating Center through an internet-based, secure data portal to build a sustainable and cost efficient system to track patient outcomes at each participating hospital with data standardization and custom reports. Finally, investigators have collaborated with the participating hospital medical directors and care providers at each MARCQI hospital to identify and promote quality improvement and the adoption of “best practices”.

The MARCQI consortium consists of the Coordinating Center, which is housed at the University of Michigan, the Data Management Center, located at St. Joseph Mercy Hospital Ann Arbor, and the network of participating hospitals in Michigan. This CQI is led by colleagues at the University of Michigan; Brian Hallstrom, MD, Clinical Assistant Professor in the Department of Orthopaedic Surgery, and Richard Hughes, PhD, Associate Professor in the Departments of Orthopaedic Surgery and Biomedical Engineering.

For more information please see http://marcqi.org/.
New Staff!

With countless activities going on in Washington, DC with respect to registries, we felt the need to have a “boots on the ground” person. AJRR has secured the services of the Judi Buckalew, AAOS Manager of Regulatory and Government Relations, to assist us with monitoring legislative and regulatory issues that may affect our operations.

Judi develops and advocates AAOS positions in the regulatory and legislative areas and interacts with federal regulatory agencies including the FDA, CDC, NIH, AHRQ, CMS, GAO, CBO, and IOM.

Prior to joining AAOS, Judi was a Partner and Director of the Legislative Practice for Powers, Pyles, Sutter & Verville, a Washington, DC health law firm representing numerous medical specialty and health provider clients, including AJRR.

Judi worked as a Medicare program analyst for CMS and then became Senior Legislative Advisor for the U.S. Senate HELP and HHS Appropriation Committees. Following eight years of work in the Senate, Judi served with distinction as a Senior Member of the White House Office of Public Liaison for President Ronald Reagan, and received a Commission in the United States Navy from Vice President George Bush. Judi served as a Naval Intelligence Reserve officer in the Pentagon for six years.

After leaving the White House, Judi entered the pharmaceutical corporate sector, working as a Manager of Government Relations and Grassroots Coordinator for Hoffman La Roche and then opening and directing the Washington Government Relations office for Zeneca, a British pharmaceutical company.

Judi is a registered nurse, with a Masters in Public Health degree from UCLA. She lives in Arlington, Virginia, with her rescue dog Zoe and two other jealous golden retrievers.
We continue to make excellent progress on our Level 2/Level 3 pilot program. We are pleased to say that we have received Level 2 test data from 6 hospitals. Thus far, we have already learned a great deal. For example, we were pleased to hear that all pilot sites plan to submit data electronically. That is, there will not be manual entry of the additional elements. Sites are submitting the Level 2 data elements in conjunction with their Level 1 data via an Excel or .csv file. However, we have identified a few challenges including the time it takes to create an extract with the additional data elements. We also recognize that hospitals are concerned with accurately tracking re-admission information. This data can be difficult to obtain especially if a patient visits another hospital. Furthermore, some Level 2 data elements are captured outside of the hospital in a private practice setting. As such, the workflow for Level 2 goes out of the hospital. To address this issue, we developed agreements for private practice groups to participate in AJRR. Additionally, in some cases the lab values included in Level 2 may be difficult to add to the electronic report as they may exist in a different data capture system. There are also federal initiatives that may require AJRR to adapt some of the Level 2 elements in our system. For instance, AJRR’s intentions to become a Qualified Clinical Data Registry (QCDR) mean that we will need to add 6 new items to our Level 2 list of variables if we are selected (see below).

As for the Level 3 Patient-Reported Outcome Measures (PROMs) pilot testing, participating sites are working with us to define what Level 3 means for clinical care, or they might intend to do research with the PROMs results. Many of our colleagues have not used PROMs previously so are looking for guidance and suggestions on how and where to capture this data (i.e., during clinic appointments, using paper forms vs. web-based forms). Hospitals will have the option to use our web-based system to provide PROMs to their patients or use their existing systems for data capture. Essentially, what we have already learned is that sites may use different tools at different time points. We frequently hear that sites are looking to us for guidance in that area. It is our goal to work with the Data Committee in 2014 to develop recommendations for which PROMs tools to use at which time points. This standardization will allow AJRR to provide more meaningful national reports to our participants.

We are extending the duration of our pilot program to allow sites ample time to develop their Level 2 reports and to determine their preferred methods for PROMs implementation. Level 2 will be defined further if we are selected to be a QCDR. This means that we will continue to work on these platforms throughout the 2nd quarter and in to the 3rd quarter. We appreciate your continued support and patience with this important initiative.

Qualified Clinical Data Registry (QCDR)

In our last newsletter, we mentioned that the Centers for Medicare & Medicaid Services (CMS) has created an additional pathway for physicians to participate in the Physician Quality Reporting System (PQRS). The American Taxpayer Relief Act (Public Law 112-240), recognized that clinical data registries can be used to measure and improve health care through a process whereby physicians participating in a QCDR are “deemed” to have satisfied quality reporting requirements under PQRS. AJRR is completing the criteria to be considered a QCDR, having previously submitted a self-nomination form in January. At the end of March, we submitted our validation strategy, which includes details on how AJRR will determine whether eligible professionals have submitted accurately and satisfactorily on the minimum number of their eligible patients, visits, procedures or episodes for a given measure. On our website, we have also posted the detailed specifications of the quality measures we will collect to ensure transparency of information to the public. Please see http://www.ajrr.net for further details. CMS will post the list of QCDRs on May 30, 2014. Stay tuned for our next newsletter for more information on QCDRs.
AJRR Participating Hospitals

Advocate Christ Medical Center
Allegheny General Hospital
Allen Memorial Hospital
Aspirus Wausau Hospital
Aurora Health Care
  • Aurora Medical Center Grafton
  • Aurora Medical Center Washington County
  • Aurora Sinai Medical Center
  • Aurora St. Luke’s Medical Center
Ball Memorial Hospital
Bayhealth Medical Center
  • Bayhealth Kent General
  • Bayhealth Milford Memorial
Baylor Healthcare System
  • Baylor All Saints Medical Center
  • Baylor Medical Center at Carrollton
  • Baylor Medical Center at Garland
  • Baylor Medical Center at Irving
  • Baylor Medical Center at McKinney
  • Baylor Medical Center at Waxahachie
  • Baylor Regional Medical Center at Grapevine
  • Baylor Regional Medical Center at Plano
  • Baylor University Medical Center
Benefis Hospital
Beth Israel Deaconess Medical Center
Beth Israel Hospital - Plymouth
Blessing Health System
Boston Medical Center
Bronson Methodist Hospital
Cabell Huntington Hospital
Cadence Health
  • Central DuPage Hospital
  • Delnor Community Hospital
Carolinan Healthcare
  • Carolinas Medical Center
  • Carolinas Medical Center–Lincoln
Catholic Health
  • Kenmore Mercy Hospital
  • Mercy Hospital of Buffalo
  • Sisters of Charity Hospital
  • Sisters of Charity Hospital–St. Joseph Campus
Centegra Health System
  • Centegra Hospital - McHenry
  • Centegra Hospital - Woodstock
Central Peninsula General Hospital
Cheyenne Regional Medical Center
CJW Medical Center
Cleveland Clinic
Concord Hospital
Conway Medical Center
Cuyuna Regional Medical Center
Denver Health and Hospital Authority
Doylestown Hospital
Eisenhower Medical Center
EvergreenHealth Medical Center
FirstHealth Moore Regional Hospital
Fletcher Allen Health Care
Franciscan St. Francis Health
Froedtert Health
  • Community Memorial Hospital
  • Froedtert Memorial Lutheran Hospital
  • St. Joseph’s Community Hospital
George Washington University Hospital
Grant Medical Center
Hancock Regional Hospital
Hanover Hospital
Hartford Hospital
Hawaii Pacific Health
  • Pali Momi Medical Center
  • Straub Clinic and Hospital
  • Wilcox Memorial Hospital
HealthEast Care System
  • St. John’s Hospital
  • St. Joseph Hospital
  • Woodwinds Hospital
Henry Ford Macomb Hospital
Hospital of Central Connecticut
Houston Medical Center
Indiana Orthopaedic Hospital
Inova Mount Vernon Hospital
Kadlec Regional Medical Center
Lakeland Regional Health System
Lakeview Medical Center (WI)
Lancaster General Hospital
Lutheran Health Network (IN)
  • Bluffton Regional Medical Center
  • Dukes Memorial Hospital
  • Dupont Hospital
  • Kościuszko Community Hospital
  • Lutheran Hospital
  • The Orthopedic Hospital
  • St. Joseph Hospital
Maine Medical Center
Major Hospital
Marquette General Hospital
Massachusetts General Hospital
McLaren Health Care
  • McLaren-Greater Lansing
  • McLaren Orthopedic Hospital
MedStar Union Memorial Hospital
Memorial Hermann Health System
  • Memorial Hermann Memorial City Medical Center
  • Memorial Hermann Southwest Hospital
Memorial Medical Center (IL)
Memorial Medical Center (MI)
Memorial Medical Center (WI)
Mercy Health System
  • Mercy Fitzgerald Hospital
  • Mercy Philadelphia Hospital
  • Mercy Suburban Hospital
  • Nazareth Hospital
Mercy Hospital Springfield (MO)
Methodist Hospital (KY)
Mission Hospital (NC)
Morristown Medical Center
Mount Carmel New Albany
Mountain States Health Alliance
  • Indian Path Medical Center Hospital
  • Johnson City Medical Center Hospital
  • Johnston Memorial Hospital
MountainView Regional Medical Center
Munson Medical Center
New York Methodist Hospital
Nix Health
North Mississippi Medical Center
NorthBay HealthCare
  • NorthBay Medical Center
  • NorthBay VacaValley Hospital
Northeast Hospital Corporation
Northern Hospital of Surry County
NorthShore University HealthSystem
  • Evanston Hospital
  • Glenbrook Hospital
  • Highland Park Hospital
  • Skokie Hospital
Northwest Medical Center (AZ)
Northwestern Memorial Hospital
Novant Health
  • Novant Health Brunswick Medical Center
  • Novant Health Charlotte Orthopaedic Hospital
  • Novant Health Forsyth Medical Center
  • Novant Health Franklin Medical Center
  • Novant Health Gaffney Medical Center
  • Novant Health Huntersville Medical
Center
- Novant Health Kernersville Medical Center
- Novant Health Matthews Medical Center
- Novant Health Prince William Medical Center
- Novant Health Rowan Medical Center
- Novant Health Thomasville Medical Center

NYU Hospital for Joint Diseases
OASIS Hospital
Ochsner Clinic Foundation
- Ochsner Baptist
- Ochsner Medical Center
- Ochsner Medical Center–Kenner
- Ochsner Medical Center–West Bank

OrthoCarolina Research Institute
OrthoColorado Hospital
Orthopaedic Hospital of Wisconsin
OSS Orthopaedic Hospital

Palmetto Health
- Baptist Easley Hospital
- Palmetto Health Baptist
- Palmetto Health Baptist Parkridge
- Palmetto Health Richland

Park Nicollet Methodist Hospital
Park Ridge Health
Penn State Milton S. Hershey Medical Center

Physicians Regional Medical Center
Pinnacle Health Hospitals
- Community General Osteopathic Hospital
- Harrisburg Hospital

Pomona Valley Hospital Medical Center

Providence Health & Services
- Providence Holy Cross Medical Center
- Providence Hood River Memorial Hospital
- Providence Little Company of Mary San Pedro
- Providence Little Company of Mary Torrance
- Providence Medford Medical Center
- Providence Milwaukie Hospital
- Providence Newberg Hospital
- Providence Portland Medical Center
- Providence Saint Joseph Medical Center
- Providence Seaside Hospital
- Providence St. Peter Hospital
- Providence St. Vincent Medical Center
- Providence Tarzana Medical Center
- Providence Willamette Falls Medical Center

Quincy Medical Center
Reading Hospital

Reno Regional Medical Center
Renown Regional Medical Center
River Oaks Hospital (MS)

Rockford Memorial Hospital
Roper St. Francis Healthcare
- Bon Secours St. Francis Hospital
- Roper Hospital
- Roper St. Francis Mount Pleasant Hospital

Rush University Medical Center
Saint Alphonsus Health System
- Saint Alphonsus Medical Center–Baker City
- Saint Alphonsus Regional Medical Center
- Saint Alphonsus Medical Center–Nampa
- Saint Alphonsus Medical Center–Ontario

Saint Mary’s Regional Medical Center (NV)
San Antonio Community Hospital
Sanford Health
- Sanford Medical Center–Fargo
- Sanford USD Medical Center

Schneck Medical Center
Scott & White Memorial Hospital
Selby General Hospital

Sentara Healthcare
- Martha Jefferson Hospital
- Rockingham Memorial Hospital
- Sentara CarePlex Hospital
- Sentara Leigh Hospital
- Sentara Norfolk Hospital
- Sentara Northern Virginia Medical Center
- Sentara Obici Hospital
- Sentara Princess Anne Hospital
- Sentara Virginia Beach General Hospital
- Sentara Williamsburg Regional Medical Center

Sharp Healthcare
- Sharp Chula Vista Medical Center
- Sharp Coronado Hospital
- Sharp Grossmont Hospital
- Sharp Memorial Hospital

Sibley Memorial Hospital
Sinai Hospital (MD)

Singing River Health System
- Ocean Springs Hospital
- Singing River Hospital

Southeast Georgia Health System
Sparrow Hospital
Spencer Hospital
St. Dominic Hospital (MS)
St. Elizabeth Regional Medical Center (NE)
St. Francis Hospital & Medical Center (CT)
St. Helena Hospital (CA)
St. John's Hospital (IL)
St. John’s Medical Center (WY)
St. Luke’s Boise Medical Center (ID)
St. Luke’s Hospital (MO)
St. Mary’s Hospital (MN)
St. Mary’s Hospital and Regional Medical Center (CO)
St. Peter's Hospital (NY)
St. Vincent's HealthCare (FL)
- St. Vincent's Medical Center Riverside
- St. Vincent's Medical Center Southside
- St. Vincent's Clay County

St. Vincent Infirmary Medical Center (AR)
St. Vincent’s Medical Center (CT)
Stanford Hospital & Clinics
Steward Holy Family Hospital
Stillwater Medical Center
Swedish Health Services
- Ballard Campus
- First Hill Campus
- Issaquah Campus

Texas Health Presbyterian Hospital–Plano
Texas Spine and Joint Hospital
ThedaCare
- Appleton Medical Center
- New London Family Medical Center
- Riverside Medical Center
- Shawano Medical Center
- Theda Clark Medical Center

The Ohio State University–Wexner Medical Center
The Valley Hospital
Thomas Jefferson University Hospitals
Torrance Memorial Medical Center
Unity Hospital
University of California, Los Angeles Medical Center
• Ronald Reagan UCLA Medical Center
• University of California Medical Center, Santa Monica

University of California, San Francisco Medical Center

University of Colorado Hospital

University of Iowa Hospitals and Clinics

University of Maryland - St. Joseph Medical Center

University of Michigan Health System

University of Pennsylvania Health System
• Hospital of the University of Pennsylvania
• Penn Presbyterian Medical Center
• Pennsylvania Hospital

University of Texas Southwestern Medical Center

University of Utah Hospital

University of Wisconsin Hospitals and Clinics

Valley Medical Center

Virginia Hospital Center

Virginia Mason Medical Center

WellSpan Health
• WellSpan Gettysburg Hospital
• WellSpan Surgery and Rehabilitation Hospital
• WellSpan York Hospital

WellStar Health System
• WellStar Cobb Hospital
• WellStar Douglas Hospital
• WellStar Kennestone Hospital
• WellStar Paulding Hospital

Wesley Medical Center

Western Maryland Health System

William Beaumont Hospital

Winthrop-University Hospital

WVU Healthcare Ruby Memorial Hospital
In 2011, there were **11** Hospitals

Today, we have **270** Participating Hospitals and Counting
Please support the AJRR through donations to the Orthopaedic Research and Education Foundation. Scanning this QR Code will take you directly to the AJRR donation page.