

Surgery Registry Integration Application

Name of Participating Institution:

Name of Surgery Registry:

American College of Surgeons - National Surgical Quality Improvement Program (ACS NSQIP) Database

Michigan Surgical Quality Collaborative (MSQC) Database

Michigan Value Collaborative (MVC) Database

Society of Thoracic Surgeons (STS) – *General Thoracic Surgery Database*

Society of Thoracic Surgeons (STS) – *Adult Cardiac Surgery Database*

Other: Please identify:

Name of Anesthesiology Clinical Champion:

Email Address:

Name of Surgery Clinical Champion:

Email Address:

Name of Anesthesiology/Surgery Registry IT Champion:

Email Address:

Name(s) of MPOG IT Support Personnel:

Email Address(es):

Name(s) of Surgery Registry IT Support Personnel:

Email Address(es):

(Optional) Other Committed Surgery Clinical Faculty Contacts:

Email Address(es):

(Optional) Anesthesia Admin Contact:

Email Address:

(Optional) Surgery Admin Contact:

Email Address:

Attestation: I have reviewed the [Surgery Registry FAQ webpage](#). Yes

Attestation: I have reviewed our local performance site IRB and confirm that the IRB includes integration of data from the surgical registry noted above. Yes

Anesthesiology Clinical Champion

Date

Digital Signature

Please send a send the completed signed copy of this application to the MPOG Project Manager

Tory Lacca at <mailto:lacca@med.umich.edu>