Report notes:

I am VA Data 2

Data cleaning: recalculated BMI, removed proced = 2, categorized ASA into 1/2/3 and 4/5 b/c no deaths in ASA=1 group

Examined missing data- MCAR or MNAR b/c no differences in other vars distributions based on albumin missingness

Made table 1, table 2 of hospital death rates

Note: hospital 30 does not have expected death rates in table 2 b/c it had no BMI values for most recent pd 39, so its probabilities couldn’t be predicted

Modeled logistic regressions for death30 ~ proced + asa + bmi + albumin and then death30 ~ proced + asa + bmi; compared results (no different interpretations)

Complete cases for BMI, procedure, ASA (maybe albumin?) to find predicted odds of death

Bootstrapping: 10,000 iterations where we resampled from complete cases population, then used coefficient estimates from this model to predict probabilities for original complete cases data set of those in period 39 (t/f hosp 30 was excluded since there were no complete cases for it in pd 39), mean bootstrapped probability and 95% CI for this mean were calculated by hospital by selecting the 2.5% and 97.5% values for each hospital’s mean probability distribution

Limitations: missing data (albumin), difference in death rates b/t complete cases and excluded (which leads to expected values that are too conservative), one hospital we can’t estimate for because no complete cases