

STA 440 Individual Case Study

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2023-12-14

Introduction

These are the three main objectives for this study:

- 1) Is there an association between 30-day mortality and the day of the week in which an operation occurs?
- 2) Is there an association between 30-day mortality and the time of day in which an operation occurs?
- 3) Is there an association between 30-day mortality and the month of the year in which an operation occurs?

Exploratory Data Analysis

Summary Statistics of Baseline Risk Factors for Patients

Predictors	Summary Statistics
Age (mean/SD)	
Age	57.66 \pm 15.04
Gender (count/%)	
Male	14768 (46.15 %)
Female	17230 (53.84 %)
Race (count/%)	
Caucasian	26488 (82.77 %)
African American	3790 (11.84 %)
Other	1243 (3.88 %)
ASA Physical Status (count/%)	
I-II	17261 (53.94 %)
III	13677 (42.74 %)
IV-VI	1055 (3.3 %)
BMI (median/IQR)	
Body Mass Index	28.19 [24.6 , 32.81]
Diseases/Disorders (count/%)	
Cancer	10958 (34.24 %)
Cardiovascular/cerebrovascular disease	16176 (50.55 %)
Dementia	242 (0.76 %)
Diabetes	4166 (13.02 %)
Digestive disease	7037 (21.99 %)
Osteoarthritis	5719 (17.87 %)
Psychiatric disorder	2910 (9.09 %)
Pulmonary disease	3493 (10.92 %)
Indexes (median/IQR)	
Charlson Comorbidity Index	0 [0 , 2]
Risk Stratification Index (30-day mortality)	-0.3 [-1.24 , 0]
Risk Stratification Index (in-hospital complications)	-0.27 [-0.84 , 0]

Summary Statistics of Case Frequencies (Count/%)

Predictors	Summary.Statistics
Hour of Operation	
6:00	562 (1.76 %)
7:00	10631 (33.22 %)
8:00	3807 (11.9 %)
9:00	1664 (5.2 %)
10:00	2501 (7.82 %)
11:00	2855 (8.92 %)
12:00	2763 (8.63 %)
13:00	2623 (8.2 %)
14:00	2063 (6.45 %)
15:00	1267 (3.96 %)
16:00	745 (2.33 %)
17:00	356 (1.11 %)
18:00	163 (0.51 %)
19:00	1 (0 %)
Day of the Week	
Monday	7005 (21.89 %)
Tuesday	7008 (21.9 %)
Wednesday	6266 (19.58 %)
Thursday	5635 (17.61 %)
Friday	6087 (19.02 %)
Month	
January	2670 (8.34 %)
February	2506 (7.83 %)
March	2697 (8.43 %)
April	2698 (8.43 %)
May	2654 (8.29 %)
June	2994 (9.36 %)
July	2325 (7.27 %)
August	3177 (9.93 %)
September	3208 (10.02 %)
October	2689 (8.4 %)
November	2544 (7.95 %)
December	1839 (5.75 %)
Phase of Moon	
New Moon	7708 (24.09 %)
First Quarter	8100 (25.31 %)
Full Moon	8051 (25.16 %)
Last Quarter	8142 (25.44 %)

Methodology

Results

Discussion

Appendix

Extra EDA Visuals

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## Warning: Removed 2 rows containing non-finite values (`stat_density()`).
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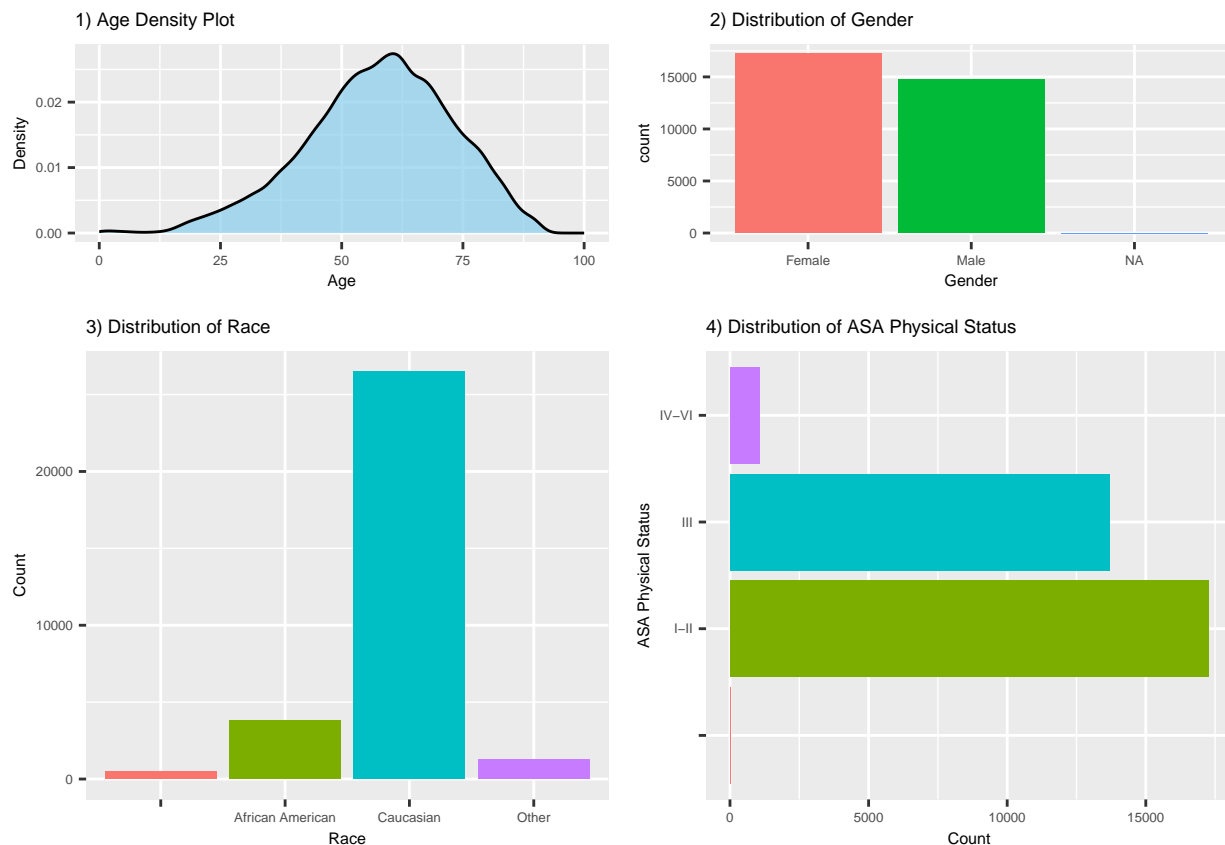


Image 1) Age

Since the distribution of the patients' age is relatively normal and unimodal and not really that skewed to the left the best summary statistic is the mean and the best metric of spread is the standard deviation.

Image 2) Gender

There appears to be a bit more operation cases done on women than men.

Image 3) Race

There are multitude more operation cases done on Caucasian patients than any other racial demographics.

Image 4) ASA Physical Status

*Note: ASA classification uses a grading system of I (one) through V (five) identifying a person in good health and V as a person with a severe, life-threatening condition. The sixth (VI) status identifies deceased organ donors.

Most patients of operation cases reside in the I-II ASA status and then the III status comes in a close second. There are not many patients that reside in the IV-VI status.

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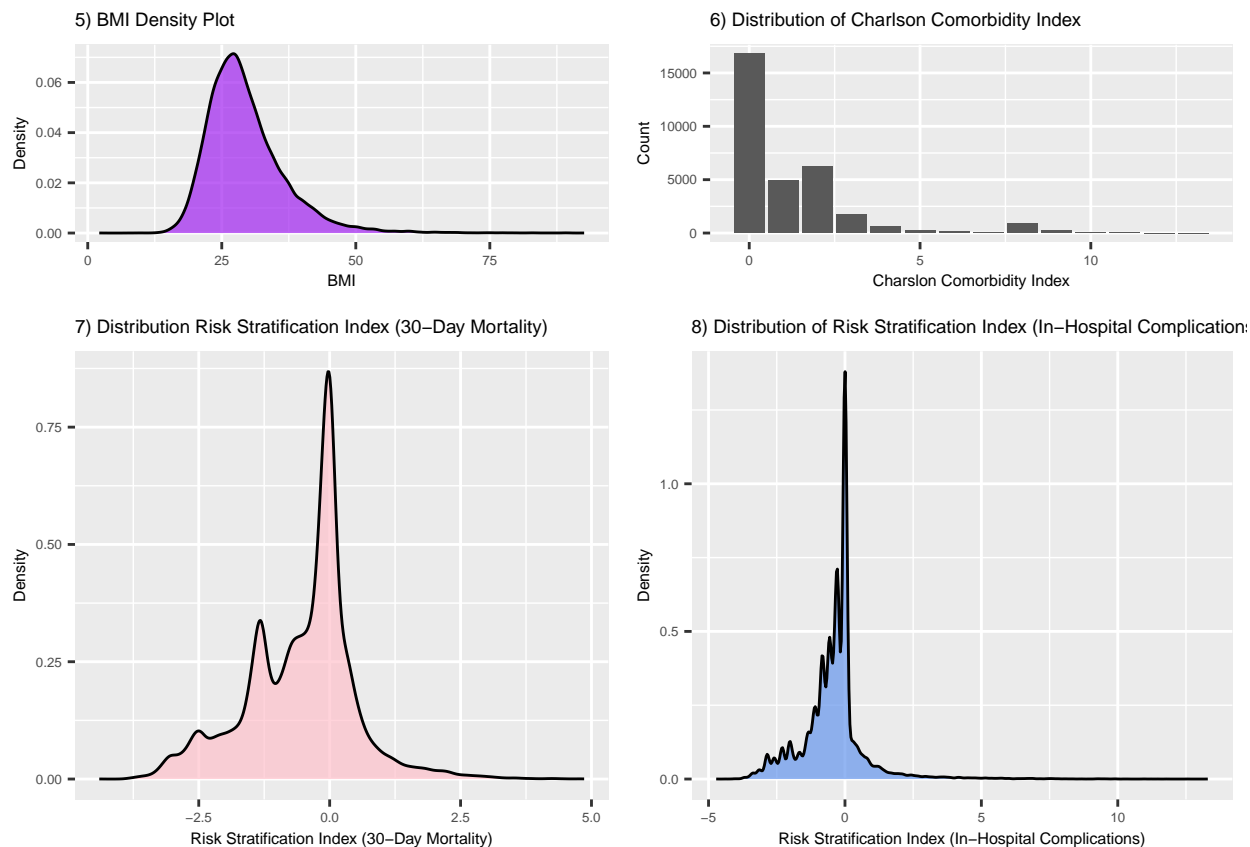


Image 5) BMI

Since the distribution of the patients' BMI is slightly skewed to the right the best summary statistic is the median and the best metric of spread is the IQR.

Image 6) Charlson Comorbidity Index

*Note: The Charlson comorbidity index (CCI) is the most widely used comorbidity index used to determine survival rate (1yr and 10yr) in patient with multiple comorbidities. As the CCI level increases the probability of one year of survival decreases.

Since the distribution of the patients' Charlson Comorbidity Index is skewed to the right the best summary statistic is the median and the best metric of spread is the IQR.

Image 7) Risk Stratification Index (30-Day Mortality)

*Note: The Risk Stratification Index (RSI) is an open source, nationally validated, risk stratification methodology that permits outcomes such as duration of hospitalization and mortality to be compared equally across institutions.

The density chart of the distribution of RSI (30-day mortality) is multimodal and skewed to the left so the median and IQR would be more accurate measures of center and spread.

Image 8) Risk Stratification Index (In-Hospital Complications)

The density chart of the distribution of RSI (in-hospital complications) is multimodal and skewed to the left so the median and IQR would be more accurate measures of center and spread.

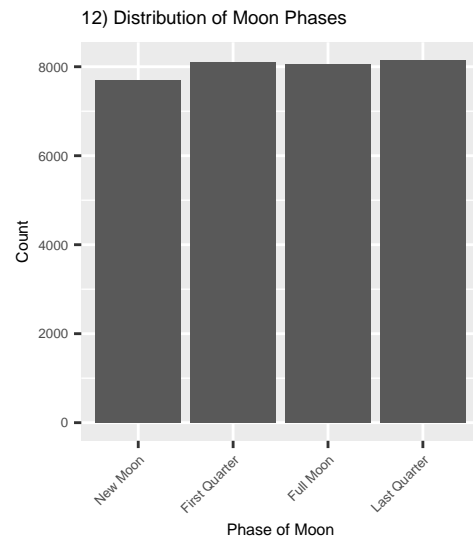
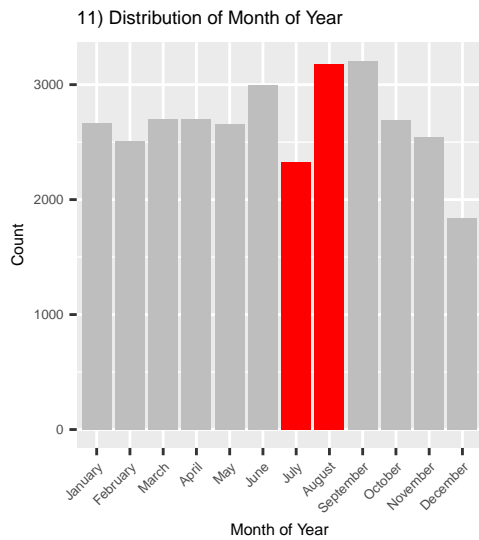
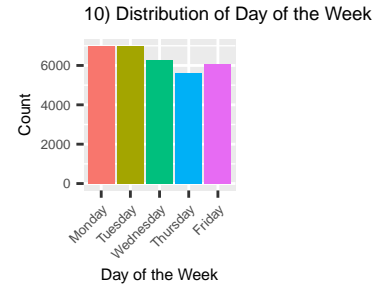
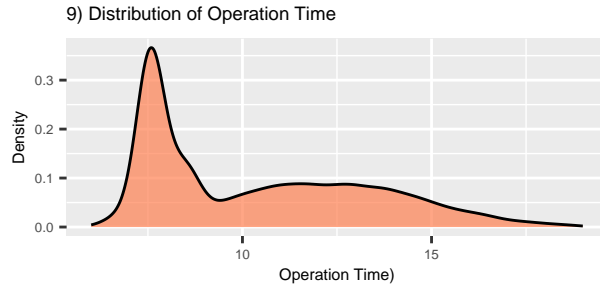


Image 9) Operation Hour

The distribution is bimodal with a huge concentration of operation hours at around 8:00 am and a much smaller concentration at 12:30 pm.

Image 10) Day of the Week

The distribution of the days the of operation cases tend have a higher concentration in the beginning of the week.

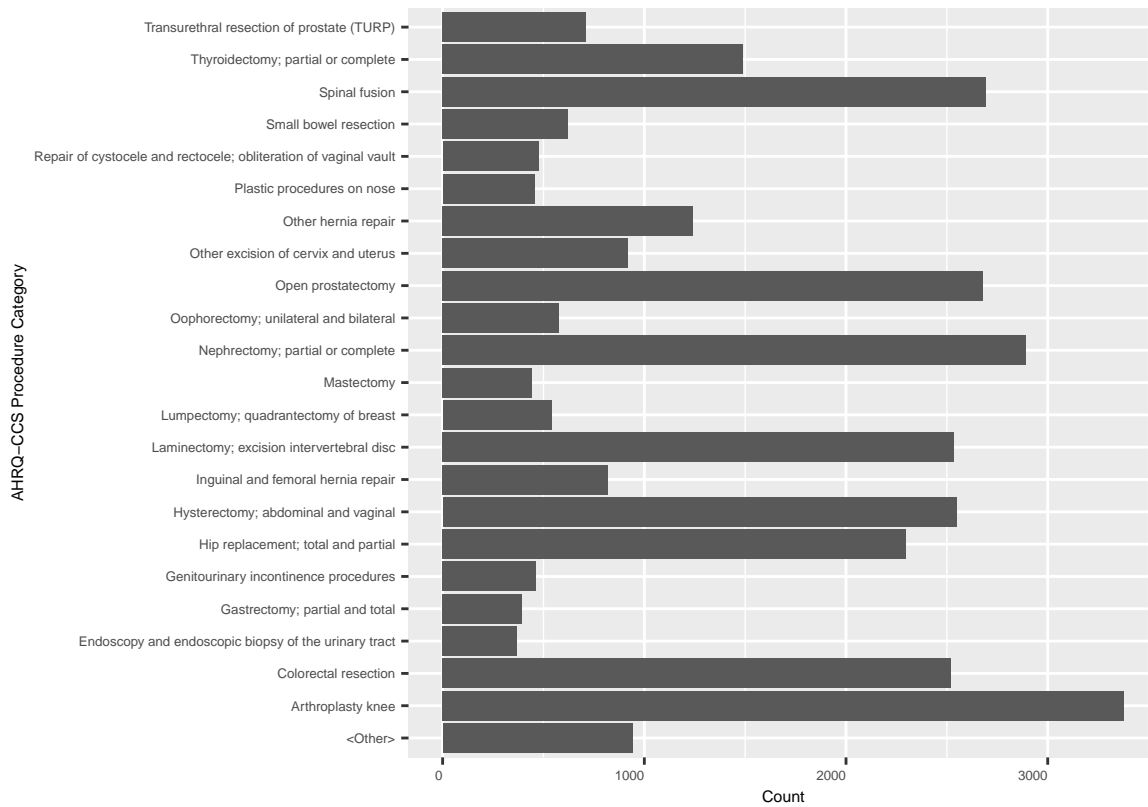
Image 11) Month of the Year

The distribution of the months of operation cases show peaks in June and near the end of the summer (August and September).

Image 12) Phase of Moon

The distribution of the moon phases of operation cases show a relatively uniform distribution with the least cases occurring during new moon phases.

13) Distribution of AHRQ-CCS Procedure Category



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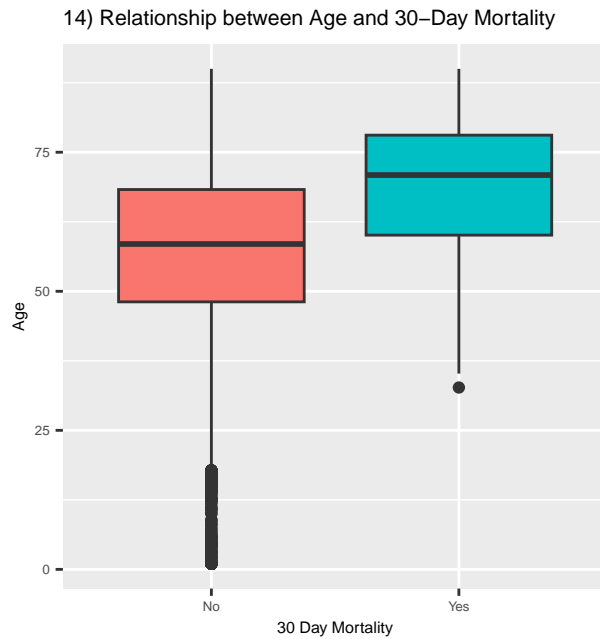


Image 13) AHRQ-CCS Procedure Category

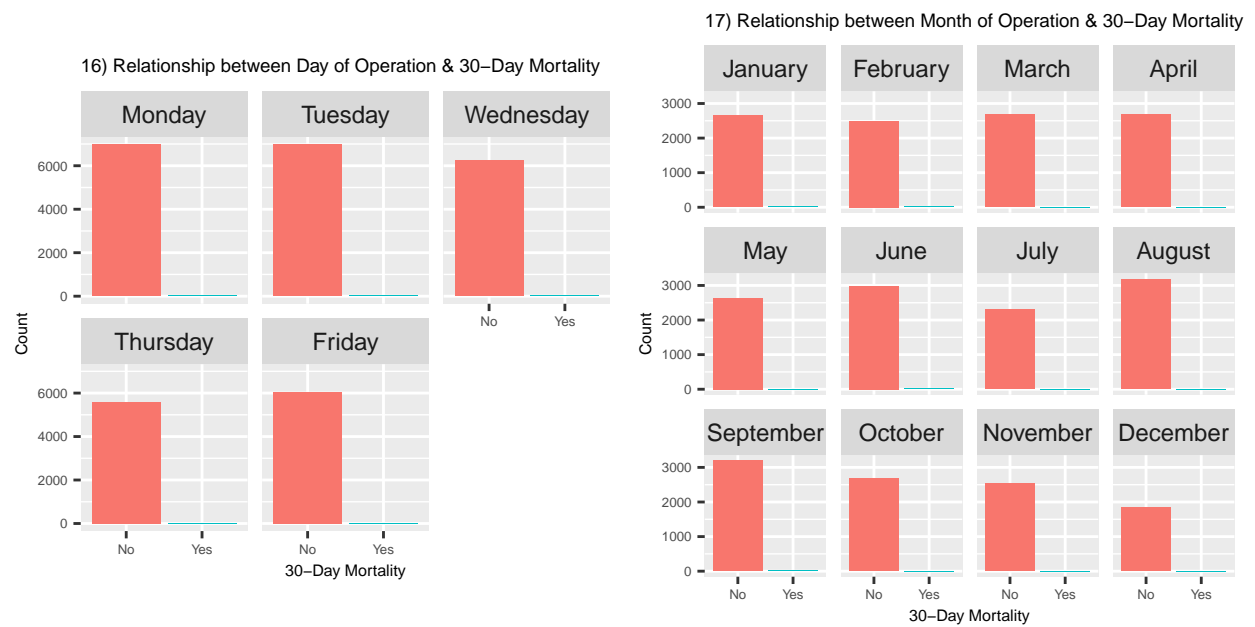
The distribution of procedure type shows there are multiple sporadic procedure types that have very high concentrations of operations and multiple that have low concentrations.

Image 14) Age and 30 Day Morality

The box plots show that operations of patients that have 30-day mortality are of an older age than patients who do not have 30-day mortality.

Image 14) Hour and 30 Day Morality

The box plots show that operations of patients that have 30-day mortality tend to happen later in the day than operations of patients that do not have 30-day mortality.



`summarise()` has grouped output by 'dow'. You can override using the `.groups`
argument.

dow	mort30	Count
Monday	No	6975
Monday	Yes	30
Tuesday	No	6976
Tuesday	Yes	32
Wednesday	No	6245
Wednesday	Yes	21
Thursday	No	5611
Thursday	Yes	24
Friday	No	6056
Friday	Yes	31

[1] 0.004282655

[1] 0.00456621

[1] 0.00335142

[1] 0.004259095

[1] 0.005092821

`summarise()` has grouped output by 'month'. You can override using the
`.groups` argument.

month	mort30	Count
January	No	2651
January	Yes	19
February	No	2489
February	Yes	17
March	No	2685
March	Yes	12
April	No	2686
April	Yes	12
May	No	2644
May	Yes	10
June	No	2980
June	Yes	14
July	No	2313
July	Yes	12
August	No	3168
August	Yes	9
September	No	3192
September	Yes	16
October	No	2681
October	Yes	8
November	No	2539
November	Yes	5
December	No	1835
December	Yes	4

[1] 0.007116105

[1] 0.006783719

[1] 0.004449388

[1] 0.004447739

[1] 0.003767898

[1] 0.004676019

[1] 0.00516129

[1] 0.002832861

[1] 0.004987531

[1] 0.002975084

[1] 0.001965409

[1] 0.002175095

Image 16) Day of Week and 30 Day Mortality

The day with the highest proportion of 30-day mortality cases is Friday, then Tuesday, then Monday, then Thursday, then Wednesday.

Image 17) Month and 30 Day Mortality

The month with the highest proportion of 30-day mortality cases is January, then February, then July.

Work Cited