



The Cutting Edge

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Older Adult Surgical Patients: Presentation and Challenges

The age of the population is increasing dramatically, and the age of the surgical population parallels that of the general population. This is occurring at a time when there are fewer health care providers with geriatric expertise in all disciplines. All health care providers must be knowledgeable about the normal changes of aging and must understand communication challenges with older adult patients. Health care providers must understand the specific risks and benefits of surgery and perform a complete individualized preoperative assessment to improve older adult patients' outcomes. (AORN Journal – August, 2009)

More at <http://www.aornjournal.org/article/PIIS0001209209003263/fulltext>

Robot's Gentle Touch Aids Delicate Cancer Surgery

New, delicate surgery techniques to hunt for tumours could benefit from a lighter touch – but from a robot, rather than from a human hand. Canadian researchers have created a touchy-feely robot that detects tougher tumour tissue in half the time, and with 40% more accuracy than a human. The technique also minimises tissue damage. Surgeons have developed new minimally invasive surgery (MIS) techniques and instruments so that procedures that would previously have required a large incision can now be performed through a tiny 10mm cut. These new methods reduce tissue damage and infection compared with more traditional surgery, and can reduce recovery times and costs. (International Journal of Robotics Research – August 24, 2009)

More at <http://www.sciencedaily.com/releases/2009/08/090821135017.htm>



MRI Simulation of Blood Flow Helps Plan Child's Delicate Heart Surgery

Researchers at the Georgia Institute of Technology, collaborating with pediatric cardiologists and surgeons at The Children's Hospital of Philadelphia, have developed a tool for virtual surgery that allows heart surgeons to view the predicted effects of different surgical approaches. By manipulating three-dimensional cardiac magnetic resonance images of a patient's specific anatomy, physicians can compare how alternative approaches affect blood flow and expected outcomes, and can select the best approach for each patient before entering the operating room. "This tool helps us to get the best result for each patient," said co-author Mark A. Fogel, M.D., an associate professor of cardiology and radiology, and director of Cardiac MRI at The Children's Hospital of Philadelphia. (Journal of the American College of Cardiology – August 10, 2009)

More at <http://www.physorg.com/news169150639.html>

MRI Could Be Unnecessary Prior To Treatment In Most Newly Diagnosed Breast Cancer Patients

New research findings published in the August issue of the Journal of the American College of Surgeons challenge the routine use of magnetic resonance imaging (MRI) as a means to improve surgical outcomes in newly diagnosed breast cancer patients. Researchers found that women diagnosed with breast cancer who received an MRI were more likely to undergo a mastectomy than breast conserving therapy (BCT), and may face delays in treatment. BCT is the removal of a tumor with a safe margin of normal tissue. Although there is sufficient evidence that MRI is a beneficial screening tool in women with a high risk of developing breast cancer, prospective data demonstrating the benefits of MRI in the evaluation of newly diagnosed patients are lacking. (JACS – August 14, 2009)

More at

http://www.redorbit.com/news/health/1737630/mri_could_be_unnecessary_prior_to_treatment_in_most_newly/index.html

Canadian Doctors First to Perform Simulated Brain Surgery

A Halifax neurosurgeon made history this week when he used Canadian-developed technology to remove a simulated brain tumour less than 24 hours before conducting the real operation. On Monday, the work of dozens of experts came to fruition when Dr. David Clarke used a virtual model of Ellen Wright's brain to remove a simulated benign tumour before removing the actual tumour the following morning. The simulator is part of a three-year project in partnership with the National Research Council that will see a team of about 50 people from 10 centres across Canada change the face of brain surgery. (Canwest News Service – August 27, 2009)

More at

<http://www.leaderpost.com/health/Canadian+doctors+first+perform+simulated+brain+surgery/1916219/story.html>

GENERAL HEALTHCARE Articles

More Patients Leaving Hospitals Against Medical Advice

The number of hospital stays that ended with patients leaving against the advice of medical staff increased from 264,000 cases to 368,000 – about 39 percent between 1997 and 2007, according to the latest News and Numbers from the Agency for Healthcare Research and Quality. The report uses statistics from the 2007 Nationwide Inpatient Sample, a database of hospital inpatient stays that is nationally representative of inpatient stays in all short-term, non-Federal hospitals. The data are drawn from hospitals that comprise 90 percent of all discharges in the United States and include all patients, regardless of insurance type, as well as the uninsured. (AHRQ – August 21, 2009)

More at <http://newswise.com/articles/more-patients-leaving-hospitals-against-medical-advice>



Federal Panel's Meaningful Use, Certification Guidance Sparks Criticism

The Health IT Policy Committee, a federal advisory panel, adopted additional recommendations from its Meaningful Use Workgroup on Friday that had physicians, activists, vendors and others warning that the government was moving too fast. Stakeholders including physician groups, health disparities experts, vendors and privacy activists voiced their concerns during the final 10 minutes of the Friday meeting allotted to public comment, after the committee had already voted to adopt the recommendations. The recommendations, which include timelines for development and certification plans, will be used to guide the Office of the National Coordinator for Health Information Technology (ONC) and the Centers for Medicare and Medicaid Services as they develop the "meaningful use" requirements providers must fulfill to get their cut of \$17 billion in health IT funding from the American Recovery and Reinvestment Act (ARRA). (Healthcare IT News – August 14, 2009)

More at <http://www.healthcareitnews.com/news/federal-panels-meaningful-use-certification-guidance-sparks-criticism>

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