



## The Cutting Edge

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### **Checklists a Matter of Life or Death, Says 'Checklist Manifesto' Author**

In the face of complex surgery, perhaps the removal of a dangerous tumor in an adrenal gland, an operating room safety checklist can seem like an idiotic distraction to the highly trained, ultra-specialized surgeon. Checklists, writes Boston surgeon and author Atul Gawande in his book "The Checklist Manifesto: How to Get Things Right," are considered by many to be beneath us. In fact, checklists do not resonate with human behavior. We are an inspired lot, motivated by creative juices and reinforced by social values that celebrate heroic individualism. We are cowboys. Do not fence us in with silly lists — busy work. We are doctors. We are venture capitalists. We know best. Yet Gawande proves, without a doubt, that checklists — cognitive safety nets — save lives, millions of dollars and untold heartache, whether the task is flying an airplane, building a skyscraper or operating on an adrenal gland. (GateHouse – February 24, 2010)

More at <http://www.peoriatimesobserver.com/entertainment/x723444093/Book-Notes-Checklists-a-matter-of-life-or-death-says-Checklist-Manifesto-author>

### **Younger, More Diverse Patients Having Total Knee Replacements**

A research team led by Mayo Clinic has found a national trend toward younger, more diverse patients having total knee replacement surgery. The findings were presented March 12 at the 2010 annual meeting of the American Academy of Orthopaedic Surgeons in New Orleans. Researchers found the average age of total knee replacement patients decreased by two years (from 70 years to 68 years) between the two time periods and that the percentage of minorities increased by 1.4 percent (from 8 percent to 9.4 percent). The study also found that Medicare is paying less for total knee replacements, and the length of hospital stays decreased. (AAOS – March 12, 2010)

More at <http://www.sciencedaily.com/releases/2010/03/100312211346.htm>

### **Establishing a Robotic Surgery Program**

With the potential for faster recovery, less pain and less risk of infection, facilities are working to leverage robotic technology and the consumer demand for robotic surgery is on the rise. However, establishing a robotic surgery program takes more than the capital investment of purchasing a robotic system, according to Erin Ulrichsen, RN, MS, CNOR, CNA, robotics program manager for the Visconti Center for Robotics at St. Joseph's Hospital in Atlanta. She is also Professional Issues/Practice Chair for AORN's MIS/Lasers/Robotics Specialty Assembly. Ulrichsen said the key to creating a successful robotics program involves a combined focus on patient safety, staffing, education, public outreach and a sound business model that will keep the robotic system from becoming an unused piece of equipment collecting dust. (AORN – March 1, 2010)

More at <http://www.aorn.org/News/March2010News/ROBOT>



### **Fetal Surgery Continues to Advance**

Repairing birth defects in the womb. Inserting a tiny laser into the mother's uterus to seal off an abnormal blood flow and save fetal twins. Advancing the science that may allow doctors to deliver cells or DNA to treat sickle cell anemia and other genetic diseases before birth. These are examples of the still-emerging field of fetal surgery. "Fetal surgery is a unique field in maternal-fetal medicine," said pediatric surgeon N. Scott Adzick, M.D., medical director of the Center for Fetal Diagnosis and Treatment (CFDT) at The Children's Hospital of Philadelphia. "Detecting birth defects prenatally has allowed physicians to provide better perinatal care," said Adzick, "but many of these babies were already too sick for us to treat them successfully after they were born. This dilemma led to the development of fetal surgery." (Children's Hospital of Philadelphia – February 16, 2010)

More at <http://www.physorg.com/news185544600.html>

### **Concerns Over 'Metal on Metal' Hip Implants**

Some of the nation's leading orthopedic surgeons have reduced or stopped use of a popular category of artificial hips amid concerns that the devices are causing severe tissue and bone damage in some patients, often requiring replacement surgery within a year or two. In recent years, such devices, known as "metal on metal" implants, have been used in about one-third of the approximately 250,000 hip replacements performed annually in this country. They are used in conventional hip replacements and in a popular alternative procedure known as resurfacing. The devices, whose ball-and-socket joints are made from metals like cobalt and chromium, became widely used in the belief that they would be more durable than previous types of implants. (New York Times – March 3, 2010)

More at <http://www.nytimes.com/2010/03/04/health/04metalhip.html>

\*\*\*GENERAL HEALTHCARE Articles\*\*\*

### **Some Nurses Paid More Than Family Doctors**

Despite the growing shortage of family doctors in the United States, medical centers last year offered higher salaries and incentives to specialist nurses than to primary care doctors, according to an annual survey of physicians' salaries. Primary care doctors were offered an average base salary of \$173,000 in 2009 compared to an average base salary of \$189,000 offered to certified nurse anesthetists, or CRNAs, according to the latest numbers from Merritt Hawkins & Associates, a physician recruiting and consulting firm. And the firm's projections for 2010 indicate that the average base salary for family physicians will be about \$178,000 compared to \$186,000 for CRNAs. (CNN – March 23, 2010)

More at [http://money.cnn.com/2010/03/11/news/economy/health\\_care\\_doctor\\_incomes/index.htm?hpt=T2](http://money.cnn.com/2010/03/11/news/economy/health_care_doctor_incomes/index.htm?hpt=T2)

### **Life Expectancy Could be Topic in Health Care Debate**

Despite spending more money than any other country on health care, the United States does not lead the world in life expectancy, a long-known fact that some experts say could raise more questions in the health-care reform debate. The United States ranks 50th out of 224 nations in life expectancy, with an average life span of 78.1 years, according to 2009 estimates from the CIA World Factbook. Some argue part of the problem stems from the privatized nature of the U.S. health care system, whose reform is being vigorously debated on Capitol Hill. (CNN – March 11, 2010)

More at <http://www.cnn.com/2009/HEALTH/06/11/life.expectancy.health.care/index.html?npt=NP1>

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