



# The Cutting Edge

June 11, 2010

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## IN THIS ISSUE:

Nationwide Commitment Needed to Reduce Wrong Site Surgery

Study Finds Lapses in Infection Control Practices at Ambulatory Surgical Centers

Overtreated: Surgery Too Often Fails for Back Pain

Bariatric Surgeries Skyrocket, But Quality and Cost Vary Widely at U.S. Hospitals

Shortcut Through Eyelid Gives Surgeons Less-Invasive Approach

(General Healthcare) Health Lessons from 'The Wizard of Oz'

(General Healthcare) Researchers Find Short People More Likely To Develop Heart Disease Than Tall People

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### **Nationwide Commitment Needed to Reduce Wrong Site Surgery**

In recognition of National Time Out Day on June 16 AORN is launching a campaign that allows perioperative nurses to pledge their commitment to take a "time out" every day for every patient. The campaign will last throughout the year to help shed light on perioperative nurses' daily commitment to keep patients safe. Despite efforts to address errors such as wrong site surgery, The Joint Commission's latest update to its sentinel event statistics indicates that wrong site surgery is still the most common sentinel event reported. In fact, between January and March of 2010, 18 wrong site surgeries were reported to The Joint Commission. These numbers illustrate the important role perioperative nurses play in speaking up for the patient and promoting safety checks to catch errors before they happen. (AORN – June)

More at <http://www.aorn.org/News/June2010News/TIMEOUT/>



### **Study Finds Lapses in Infection Control Practices at Ambulatory Surgical Centers**

An assessment of nearly 70 ambulatory surgical centers in three states found that lapses in infection control were common, including for practices such as hand hygiene, injection and medication safety and equipment reprocessing, according to a study in the June 9 issue of JAMA. Health care delivery in the United States over the last several decades has shifted toward the outpatient setting; ambulatory surgery in particular has been an area of immense growth. "Ambulatory surgical centers (ASCs) are defined by the Centers for Medicare & Medicaid Services (CMS) as facilities that operate exclusively to provide surgical services to patients who do not require hospitalization or stays in a surgical facility longer than 24 hours. Between 2001 and 2008 there was a greater than 50 percent increase in the number of Medicare-certified ASCs in the United States; currently more than 5,000 ASCs participate in the Medicare program. In 2007, these facilities performed more than 6 million procedures with services extending beyond what is traditionally considered surgery to include endoscopy, pain injections, and dental procedures among others," the authors write. "Little is known about infection control practices in ASCs." (JAMA – June 4, 2010)

More at <http://www.physorg.com/news195239350.html>

### **Overtreated: Surgery Too Often Fails for Back Pain**

Even though only a fraction of people with back pain are good candidates for surgery, complicated spine operations are on the rise. So is the hunt for any relief. By one recent estimate, Americans are spending a staggering \$86 billion a year in care for aching backs — from MRIs to pain pills to nerve blocks to acupuncture. That research found little evidence that the population got better as the bill soared over the past decade. The reality is that time often is the best antidote. Most people will experience back pain at some point, but up to 90 percent will heal on their own within weeks. In fact, for run-of-the-mill cases, doctors aren't even supposed to do an X-ray or MRI unless the pain lingers for a month to six weeks. Yet a study last year found nearly one in three aching Medicare patients get some kind of back scan within that first month. (June 10 – Associated Press)

More at <http://www.guardian.co.uk/world/feedarticle/9120826>

### **Bariatric Surgeries Skyrocket, But Quality and Cost Vary Widely at U.S. Hospitals**

The number of bariatric surgeries in the U.S. skyrocketed from 13,386 in 1998 to 220,000 in 2008, but a new study released today by HealthGrades, the leading independent healthcare ratings organization, finds that the nation's hospitals have wide variances in both complication rates and lengths of stay, which largely correlate with the number of times the hospital performs bariatric procedures. According to the study, patients undergoing bariatric surgery at hospitals rated with 5 stars by HealthGrades experienced, on average, 43% fewer complications and 10% less time in the hospitals than patients at average hospitals. (HealthGrades – May 26)

More at <http://www.medicalnewstoday.com/articles/189896.php>

### **Shortcut Through Eyelid Gives Surgeons Less-Invasive Approach**

Surgeons at Johns Hopkins have safely and effectively operated inside the brains of a dozen patients by making a small entry incision through the natural creases of an eyelid to reach the skull and deep brain. They say access to the skull and brain through either lid, formally known as a transpalpebral orbitofrontal craniotomy, sharply contrasts with the more laborious, physically damaging and invasive, traditional means of entry used in brain surgery that requires opening the top half of the skull. The new approach eliminates the need for shaving the patient's hair, pulling up the scalp, opening the top half of the skull, and moving aside whole outer sections of the brain in order to operate on the organ's delicate neurological tissue. (Journal of Otolaryngology Head and Neck Surgery – June 9, 2010)

More at <http://www.medilexicon.com/medicalnews.php?newsid=191262>



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

### **Health Lessons from 'The Wizard of Oz'**

The late actress Judy Garland, who portrayed the orphaned Kansas girl Dorothy Gale in the 1939 film "The Wizard of Oz," would have turned 88 today. You may love the film, but you may not know that it contains lessons about health and medicine. Nurses have used the story of Dorothy and her dog, Toto, to glean a better understanding of wisdom, passion and courage in patient care. A group of 33 nurses and nurse educators analyzed passages from the book and scenes from the movie for metaphorical meanings that apply to nursing. For example, the Wizard helps the Lion to realize that sometimes it is actually wise, and not cowardly, to run from dangerous situations. (CNN – May 26, 2010)

More at <http://patingdrgupta.blogs.cnn.com/2010/06/10/health-lessons-from-the-wizard-of-oz/>

### **Researchers Find Short People More Likely To Develop Heart Disease Than Tall People**

Short people are at greater risk of developing heart disease than tall people, according to the first systematic review and meta-analysis of all the available evidence, which is published online in the European Heart Journal. The systematic review and meta-analysis, carried out by Finnish researchers, looked at evidence from 52 studies of over three million people and found that short adults were approximately 1.5 times more likely to develop cardiovascular heart disease and die from it than were tall people. This appeared to be true for both men and women. Dr Tuula Paajanen, a researcher at the Department of Forensic Medicine, University of Tampere, Tampere, Finland, said that over the years there had been a number of studies that had provided conflicting evidence on whether shortness was associated with heart disease. (European Heart Journal – June 9)

More at <http://www.medicalnewstoday.com/articles/191354.php>

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