



The Cutting Edge

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IN THIS ISSUE:

Study Finds Mixed Results on Effectiveness of Surgical Care Improvement Measures

Surgical Suite Still Appeals to RNs

When Bariatric Surgery Is A Family Affair, Patients Do Better

Preventing Sharps Injuries

Decline in International Medical Graduates Exacerbates Shortage of General Surgeons

(General Healthcare) Resident Work Hours, Supervision Face New Round of Restrictions

(General Healthcare) Binge Eating Should be Included as an Official Psychiatric Disorder in New Mental Health

Study Finds Mixed Results on Effectiveness of Surgical Care Improvement Measures

An analysis of data on adherence to surgical care improvement measures finds that when analyzed as a composite infection-prevention score, the improvement measures were associated with a lower probability of postoperative infection. However, adherence to individual measures – the format of publicly reported performance data – was not associated with a significantly lower risk of infection, according to a study in the June 23/30 issue of JAMA. “The Surgical Care Improvement Project (SCIP), a national quality partnership dedicated to reducing the rate of surgical complications, has developed 20 measures covering various discrete elements of patient care. There are 9 publicly reported SCIP measures, 6 of which focus on postoperative infection prevention,” the authors write. Validated data from hospitals are reported on the Health & Human Services (HHS) Web site, Hospital Compare. “Despite broad support from national stakeholders and a significant investment of time and money by the hospitals to collect these data, no large-scale investigation has been undertaken to evaluate their effectiveness for improving outcomes in routine clinical care.” (AMA – June 18, 2010)

More at <http://www.newswise.com/articles/view/565774>



Surgical Suite Still Appeals to RNs

First, the bad news: Americans are growing more dissatisfied with their jobs. According to a recent survey conducted by The Conference Board, a business membership and research organization, only 45% of Americans are satisfied with their work — the lowest level recorded in the past 22 years. Reasons cited for such unhappiness include the worst recession since the 1930s, fewer workers finding their jobs interesting and dropping incomes. Now, the good news: Perioperative nurses, according to a recent survey conducted by the Association of periOperative Registered Nurses, tell a different story. AORN's 2009 survey of perioperative nurses indicates they are very satisfied with their jobs. (AORN – February 17, 2010)
More at <http://news.nurse.com/article/20100217/OR02/100216013>

When Bariatric Surgery Is A Family Affair, Patients Do Better

If you and a family member have gastric bypass together, chances are you'll both do much better than if you have surgery alone, according to a new study presented today at the 27th Annual Meeting of the American Society for Metabolic & Bariatric Surgery (ASMBS). Researchers followed 91 patients from 41 families who were either siblings, parent and child, spouses, cousins, grandmother and granddaughter, in-laws or aunt or uncle and nephew or niece and compared them to a control group of individual gastric bypass patients of similar body mass index (BMI), age and gender. After six months, one year and two years, family members who had gastric bypass surgery together lost more of their excess weight than patients who had the surgery by themselves. (ASMBS – June 22, 2010)
More at <http://www.medicalnewstoday.com/articles/192441.php>

Preventing Sharps Injuries

Sharps injuries occur more frequently in surgical settings. That's according to a recent study published in the Journal of the American College of Surgeons (JACS) that found percutaneous sharps injuries from needles and other pointed and edged sharps occurred more frequently in surgical settings, as compared to nonsurgical settings between 1993 and 2006. These injuries occurred in spite of the requirement to provide safety-engineered devices as mandated by the Needlestick Safety and Prevention Act of 2000. Of the 31,324 total sharps injuries analyzed in the study, 7,186 were to surgical personnel. After the Needlestick Safety and Prevention Act passed in 2000, injury rates in nonsurgical settings dropped 31.6%, but increased 6.5% in surgical settings. (AORN – July, 2010)
More at <http://www.aorn.org/News/July2010News/Sharps>

Decline in International Medical Graduates Exacerbates Shortage of General Surgeons

A decline in the number of international medical graduates (IMGs) is threatening patient access to quality surgical care, according to a new study in the June issue of the Journal of the American College of Surgeons. For years, a flat supply of new U.S.-educated medical school graduates in the specialty of general surgery has created a strong need for IMGs, graduates of medical schools located outside the U.S. and Canada. The study reveals that a decline in IMGs practicing general surgery in the U.S. is creating a "crisis of urgency" as demand for general surgeons continues to grow. Rural areas are particularly threatened by this trend. In 2005, IMGs represented 17.4 percent of all general surgeons; now they represent only 14.8 percent. Meanwhile, since 2005, the total number of rural surgeons has declined nearly 40 percent to 998, according to researchers. (JACS – July 7, 2010)
More at http://www.eurekalert.org/pub_releases/2010-07/wsw-dii070710.php

GENERAL HEALTHCARE Articles

Resident Work Hours, Supervision Face New Round of Restrictions

In 2003, resident workweeks were limited to 80 hours to improve patient safety and end the 120-hour workweeks common during training. Seven years later, the Accreditation Council for Graduate Medical Education has proposed more changes that call for increased supervision of physicians-in-training, tighter limits on moonlighting and reduced work hours for first-year residents. The goal is to reduce medical errors, ensure patient safety and improve quality of care, said Thomas Nasca, MD, ACGME chief executive officer.



If approved, the revisions, published online June 23 in the New England Journal of Medicine, would take effect in July 2011. The workweek maximum would remain at 80 hours. (ACGME – July 5, 2010)
More at <http://www.ama-assn.org/amednews/2010/07/05/prl10705.htm>

Binge Eating Recommended as a Psychiatric Diagnosis

Binge Eating Should be Included as an Official Psychiatric Disorder in New Mental Health guidelines, but obesity should not, a group of medical experts is recommending. Psychiatrists are in the process of revising their field's diagnostic manual, known as Diagnostic and Statistical Manual of Mental Disorders. The manual contains descriptions, symptoms and other criteria for diagnosing mental disorders. It has implications for what treatments doctors use and what insurance plans may choose to cover. DSM's fifth edition is due in 2013. Binge eating is the most common eating disorder in the United States and remains a difficult condition to identify and treat. (CNN – June 1, 2010)

More at <http://www.cnn.com/2010/HEALTH/06/01/eating.disorders.bingeing.obesity/index.html?npt=NP1>

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