

CASE STUDY: Innovation



Hospital Information

Tampa General Hospital
Tampa, Florida
Annual surgeries: 48,000+
Operating rooms: 45

TeamHealth Services

Anesthesiology
Emergency Medicine

Results

55% decrease in unnecessary tests
(from 65% to 10%)

Significant decrease in pre-operative
blood draws

\$574,000

Hospital savings from the Perioperative
Surgical Home model within the first
year of implementation

Challenge

In early 2014, the ABIM Foundation commissioned a survey of U.S. physicians regarding the overuse of medical services in the United States. The research found that nearly three out of four physicians responded that doctors order unnecessary medical tests and procedures at a frequency that could be problematic for America's health care system.

Solution

Tampa General Hospital (TGH), a leader in care delivery, care coordination, and population health management, looked to TeamHealth Anesthesia to help them in reducing costs and improving efficiency without compromising patient care. Together, TGH and TeamHealth implemented the Perioperative Surgical Home (PSH) model of care.

The PSH care model places anesthesiologists in the leadership role for coordination and management of care for surgical patients throughout the surgical care continuum--from pre-operative through post-operative care. PSH helps reduce or eliminate unnecessary pre-operative testing, lessen surgical delays and cancellations, ensure that the patient is ready for surgery, and reduce costs for the patient and the hospital. The PSH model's goals include improved efficiency and cost-effectiveness as well as fewer surgical- and anesthesia-related complications.

PERIOPERATIVE SURGICAL HOME
Anesthesiologists lead the coordination and management of surgical patients throughout the continuum of surgical care from pre-surgery through the post-operative processes.

To test the effectiveness of the PSH approach, TGH and TeamHealth implemented the model for a select group of patients. All patients undergoing elective urologic surgery were evaluated by anesthesiologists. Urology specific labs were obtained at the surgeon's discretion but all other necessary preoperative evaluations were determined by the anesthesia team.

Results

The new protocol significantly decreased the number of tests ordered for patients prior to surgery. Before PSH implementation, 65 percent of patients received an EKG, stress test, or chest x-ray as part of their pre-operative evaluation. After PSH implementation, only 10 percent of patients received one of these tests. Also after PSH implementation, the number of patients who did not require a pre-operative blood draw nearly doubled. In the final analysis, after one year of implementing PSH, the hospital saved \$574,000 with no negative impact on surgical outcomes or efficiency.