Program Situation:
- The customer was starting an ASC total joint replacement program from scratch with surgeons who have established a busy and robust inpatient total joint replacement program. Joint surgery volume at that location was over 1000 per year. The surgeons were looking to create additional access for a growing backlog at the hospital as well as meet a community demand for an outpatient option. Procedures included: total hip, knee, and shoulder replacement; partial knee replacement.

Size of the Program:
- New program at an ASC with an initial target of up to 150 surgeries per year.

Initial Challenge:
- The customer needed to recreate a hospital based patient preparation process at the practice and/or surgery center to include patient screening, evaluation, education and post op follow up. Other challenges included staff education and payer contracting.

How Accelero Helped:

Program Infrastructure
- Facilitated discussions between anesthesia and surgeons to determine program guidelines (preop screening process, operational expectations, outcome measures, etc.)

Patient & Care Team Workflow
- Defined patient selection and exclusion criteria
- Facilitated review of education platforms and tools
- Created staff education content and materials

Consistent Care Process
- Defined patient flow from decision for surgery through 6 months post-op
- Defined process for standardized preoperative evaluation and testing
- Worked with surgeons and anesthesia to define anesthesia and pain management approaches
- Established rehabilitation protocols for day of surgery
- Defined patient discharge criteria

Program Documents
- Facilitated creation of pre and post-op order sets for upper and lower extremity joint replacements
- Created patient discharge instructions
- Defined post-operative communication calls and scripting

Payer Readiness
- Created program introduction and overview for use in payer contracting discussion

Data Collection
- Provided recommendations and format for outcomes collection and tracking

Perioperative Workflow
- Assisted with creation of evidence-based guidelines and protocols (bladder scan, PONV screening, TXA criteria)
- Initiated the instrumentation preference card build process to ensure necessary instrumentation was present for the surgery, but not more then was needed, given the space constraints of the facility
- The result of the instrumentation preference card build was identifying all material needed for these surgeries
- The workflow for material planning was designed to ensure rapid instrument processing, helping to avoid any delays in SPD
- Performed multiple workshops to identify and standardize the process for setting up these cases in the OR so everyone knew their responsibilities
- Facilitated the layout of the case cart used to transport trays and material through the system

Results:
- Successfully secured payer contracting within 45 days of project initiation
- Scheduled and completed first total joint within 100 days of project initiation