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Nosovitch James
Johns Hopkins University

Cathyann Feher RN,MSN
Lehigh Valley Health Network, Cathyann.Feher@lvhn.org

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Comparison of Gallbladder Procedure Cost by Surgeon

James Nosovitch, Cathyann Feher, RN, MSN
Lehigh Valley Health Network, Allentown, Pennsylvania

BACKGROUND / INTRODUCTION

- A standard doctor's preference card (DPC) for laparoscopic cholecystectomy was implemented with the goal of increasing efficiency while decreasing costs
- DPCs lay out all the necessary equipment, supplies, and instruments to successfully carry out an operation
- An analysis of gallbladder procedure cost by surgeon and location will help to determine where there is the greatest variation in procedure costs and how they impact other outcomes such as length of stay and duration cut-close
- In the future, this analysis will help to determine if the DPC is decreasing cost while maintaining a high level of quality care

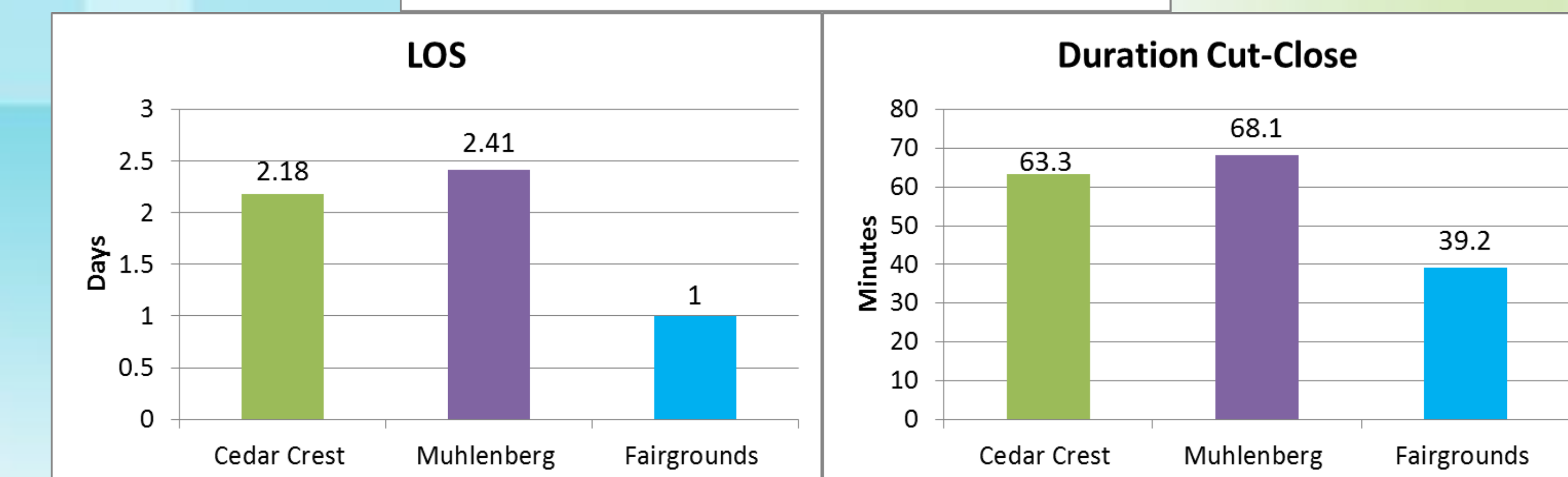
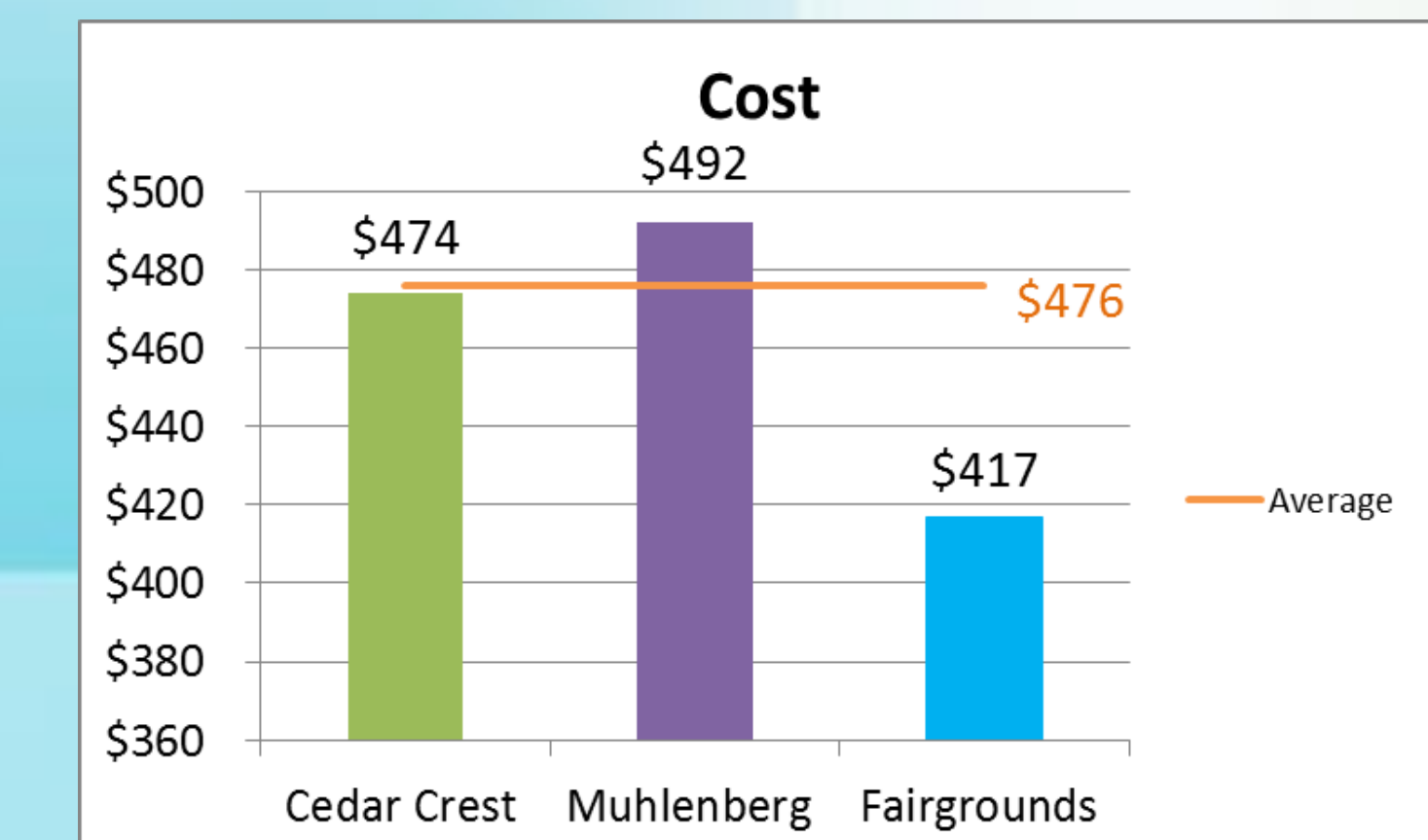
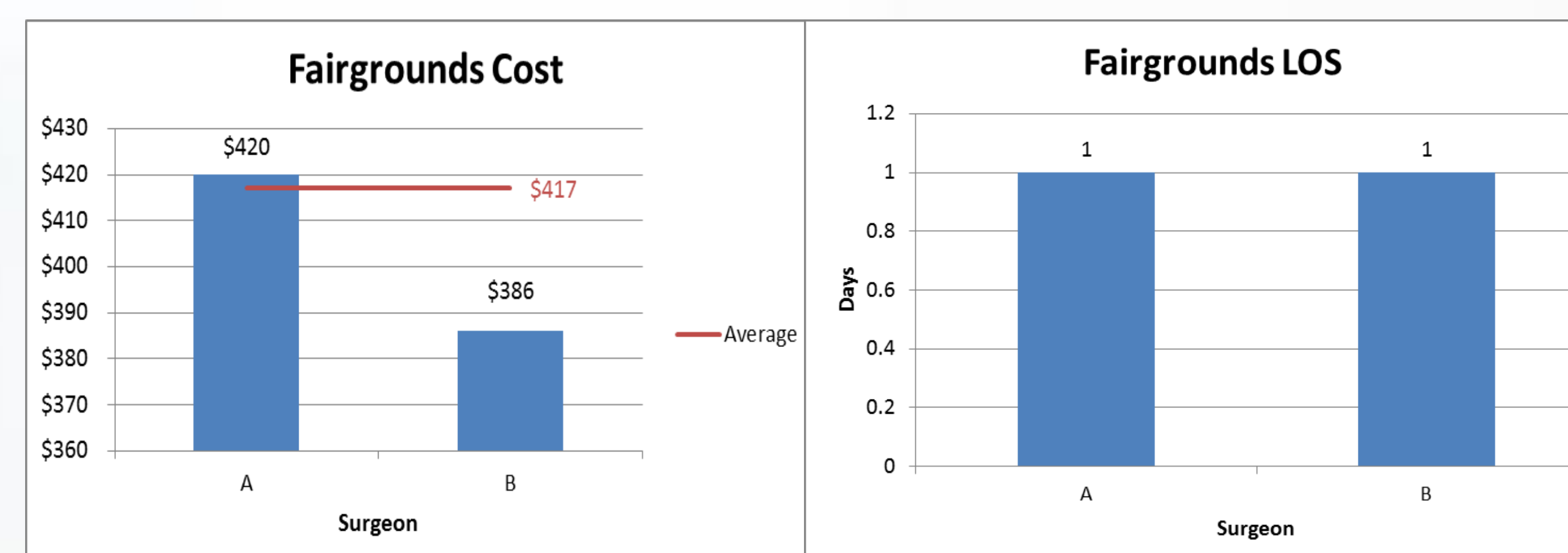
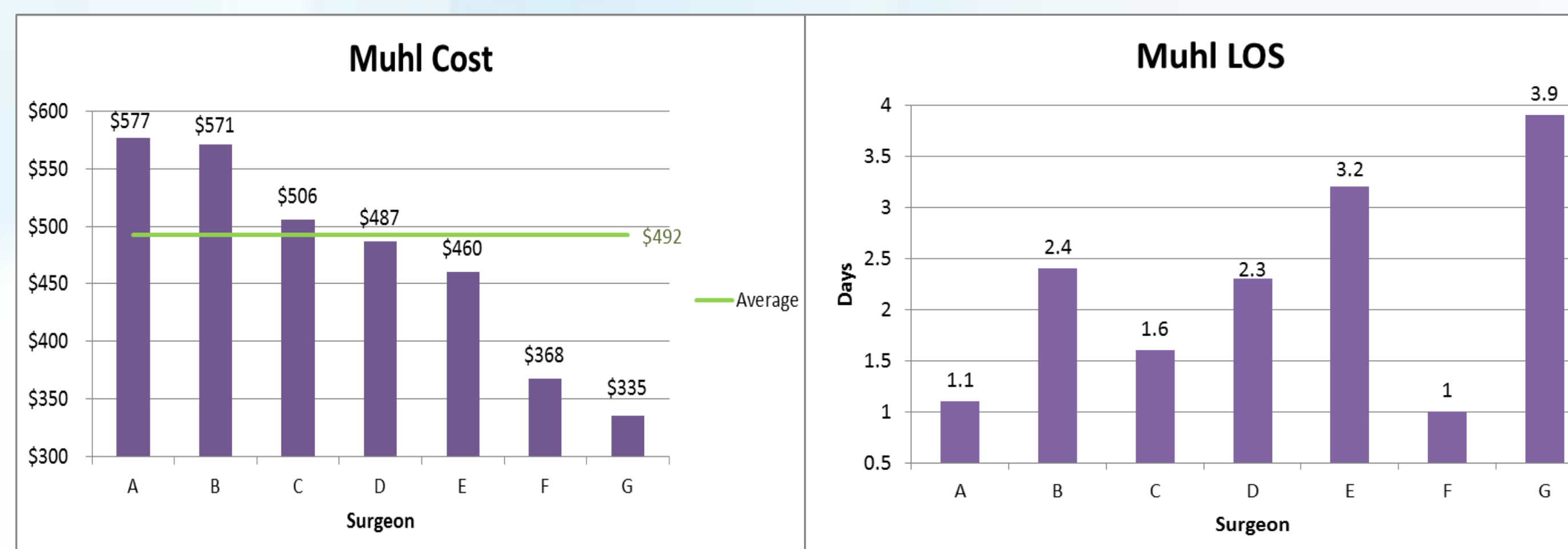
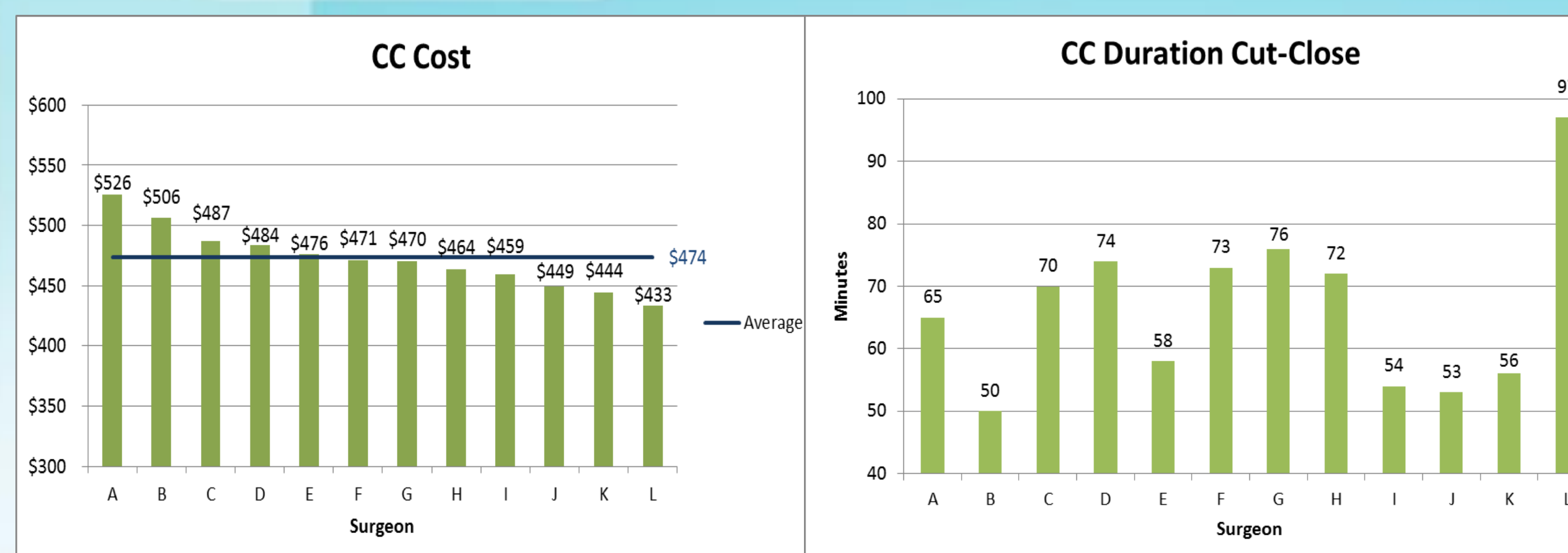
METHODS

- Surgical Compass Portal
 - Procedure cost manager tool
 - Gathered and analyzed data from laparoscopic cholecystectomies that occurred between July 1, 2016 – May 31, 2017
 - Compared cost, LOS, and duration cut to close among surgeons at Cedar Crest, Muhlenberg, and Fairgrounds
 - Excluded surgeons with a case volume <5
 - Ranked surgeons alphabetically with A being the most expensive
 - Calculated a weighted average of each measure at each location

OUTCOMES/RESULTS

- Cedar Crest – 12 surgeons, 654 cases
- Muhlenberg – 7 surgeons, 287 cases
- Fairgrounds – 2 surgeons, 61 cases

	Cedar Crest n = 654	Muhlenberg n = 287	Fairgrounds n = 61
Average cost	\$474	\$492	\$417
Average duration	63.3 min	68.1 min	39.2 min
Average LOS	2.18 days	2.41 days	1 day



CONCLUSION/RECOMMENDATIONS

- Some surgeons primarily do elective cases, while others do mostly emergent cases. This is a possible reason for variance in cost and cut-close duration
- Based on the variation in procedure costs, it is clear that not all surgeons are using the standard DPC
- Further analysis must be done to see which surgeons are in compliance with the DPC and where they rank in terms of cost
- More elective cases should be done at Fairgrounds rather than Cedar Crest and Muhlenberg, due to low costs and shorter LOS

References:

Surgical Compass Portal by the Advisory Board

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