

4 Steps to Make Your Surgery Center Surgeon-Friendly

By Leigh Page | January 10, 2011

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Jeff Peters, president of Surgical Directions in Chicago, says when he helped a financially struggling ambulatory surgery center apply the following four surgeon-friendly changes, volume increased by 17 percent. "Surgeons went from 'Do I really want to go there?' to looking forward to doing their cases there," he says.

1. Create collaborative governance. Surgeons will be happy with the opportunity to share any problems they have. For example, hold quarterly meetings where surgeons, anesthesiologists and the OR director can bring up concerns.

2. Hire a surgeon-friendly manager. The ASC manager should communicate well with surgeons and understand how to run a business. If the ASC is run by a hospital, this position should not be filled by the OR manager for the hospital. "Inpatient OR managers are often not focused on getting the patient in and out or in service the surgeon," Mr. Peters says.

3. Use service-oriented anesthesiologists. "Your anesthesiologists should be focused on driving volume and making the surgeon's life easier," Mr. Peters says. If they cannot do this, hire another group. "One way to align the anesthesiologist with the center is to make him medical director," he says. The anesthesiologist then understands the day-to-day operation of the center.

4. Take on pre-admission testing. The ASC handles pre-admission testing, which is usually done by the surgeon's office. The anesthesiologist calls up the patient, collects information for the history and physical, and determines what medications they are on. "This is rarely done, but it was the key step in increasing surgeons' use of the center," Mr. Peters says. "Surgeons greatly appreciate it when you take this work off their hands."

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