

Information about office-based surgery

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Before you go

Before you schedule office-based surgery, these are questions you should ask your doctor:

Am I the right candidate for office-based surgery?

You may not be if you have heart disease or other health risks, such as morbid obesity. The hospital also may be a better setting if you need a complicated procedure or multiple procedures on one occasion, requiring a longer sedation time and recovery.

Are you licensed and accredited to perform office-based surgery?

In Arizona, offices using general anesthetic need to be licensed by the Arizona Department of Health Services. Accreditation by a national group is voluntary and can cost thousands of dollars, so not every physician's office seeks it. But earning accreditation from one of the three major agencies is a seal of approval. They are:

Accreditation Association for Ambulatory Health Care, aaahc.org.

American Association for Accreditation of Ambulatory Surgery Facilities, aaaasf.org.

Joint Commission on Accreditation of Healthcare Organizations, qualitycheck.org. (Click "Advanced Search" at the bottom of the home page, then choose "Office-Based Surgery" under "Type of Provider").

Do you have privileges to do the same procedure at a hospital?

Having privileges means your doctor has been reviewed by peers at the hospital and found capable. Credentials must be renewed regularly.

What qualifies you to perform the planned procedure?

Board certification in a medical specialty is voluntary. But if you're getting a facelift, for example, a doctor certified (and experienced) in cosmetic surgery would be a safer choice than one certified in occupational medicine.

What training does your staff have?

This might include training in resuscitation and licenses or certificates to perform assigned duties.

How would you respond to a worst-case scenario?

Well-prepared offices use safety checklists and must have written plans, including how to handle an emergency transfer to a nearby hospital. A crash cart with defibrillator, intubation materials, emergency medicines and other items should be in easy reach.

Who will administer and monitor the anesthesia?

For patients receiving general anesthetic, doctors board-certified in anesthesiology are best. Some offices also use anesthesiologists to administer lower levels of sedation. Certified registered nurse anesthetists also may be used.

The pros and cons

For patients and doctors, office-based surgery offers benefits and downsides.

Benefits

Convenience. Your doctor's office may be closer to home and compact enough to navigate easily. And scheduling usually is more flexible than in a hospital, where multiple doctors and patients vie for sometimes limited time slots.

Lower costs. The difference may not be big, but you'll avoid some of the costs connected to being in a hospital.

Less risk of hospital-acquired infection. Hospitals typically hold people who are sicker and stay longer, with more opportunity for germs to spread.

Privacy and comfort. You won't be parading past scores of people, battling for elbow room during recovery or facing a succession of staff members you've never seen.

Fewer side effects. Newer anesthetics that have boosted the growth in office procedures are shorter-acting and less likely to cause an allergic reaction, nausea or lingering grogginess.

Downsides

Less oversight. Doctors and their medical staffs doing procedures in an office don't face the scrutiny of their skills that they would in a hospital.

No instant backup. Things can go wrong, even under the best circumstances. In the event they do, you won't have the immediately available, far-ranging resources of the hospital. But if you've done your homework, you're just minutes from the hospital - and the doctor's office will move efficiently into emergency mode.

Doctors' up-front costs. For doctors in solo practices, replacing obsolete equipment and keeping up with new regulations can be expensive, and a portion of those costs may be passed along to patients.

Sources: Valley physicians Daniel Aspery of Blue Cross Blue Shield of Arizona, John Bass, Robert Guyette and Celina Reyes-Hailey; Arizona Medical Association; Arizona Medical Board; and Institute for Safety in Office-Based Surgery

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