

5 Ways AEM[®] Can Impact Your Hospital's Bottom Line

ACTIVE ELECTRODE MONITORING is the <u>only</u> technology on the market that continuously shields and monitors laparoscopic instruments <u>during</u> minimally invasive surgery to prevent stray energy burns that can cause unintended injury to patients.

1. A "Never Events" Safeguard

AEM can prevent the Never Event or Hospital-Acquired Condition (HAC) associated with a burn incurred during an inpatient hospital stay. Accidental, unsuspected electrosurgical burn injuries can result in significant complications during and following laparoscopy. Many post-laparoscopic burn victims can suffer from perforated colons or other internal burn injuries. When left untreated, these complications can lead to peritonitis and even death. AEM can prevent electrosurgical burns associated with leakage current from instrument insulation failure and capacitive coupling during laparoscopy.

Centers for Medicare and Medicaid Services (CMS) Initiatives Addressing Never Events

Serious Reportable Adverse Event	CMS Initiative	Relevant ICD-9-CM Codes
Patient death or disability associated with a <u>burn</u> incurred from <u>any</u> source while being cared for in a healthcare facility*	HAC**	Generic category of injury codes: 940 through 949

^{*}Note: Burns were included in the initial Inpatient Prospective Payment System (IPPS) FY2008 final rule.

2. An Economical Technology

Gwinnett Hospital System in Lawrenceville, Georgia, reported that the implementation and use of AEM Laparoscopic Instruments was less expensive than the use of conventional laparoscopic instruments. Their findings showed that after converting to AEM instruments their institution had reduced their cost per procedure. Implementing AEM does not require a change in surgeon technique or operating room protocols and does not lengthen procedure time. AEM also eliminates additional testing procedures to ensure that instruments are free of insulation defects. In some cases, the combination of reusable and disposable AEM instruments provides an economical alternative to expensive, completely disposable solutions.

3. A Loss Prevention Tool

AEM has the potential to reduce hospital liability for laparoscopic procedures and to reduce the escalation of cases to Risk Management. Many of the life-threatening complications from stray electrosurgical burns and their associated financial impact from repair surgeries and malpractice claims can be avoided with active electrode monitoring.

4. An Investment in Patient Safety

AEM eliminates the risk of catastrophic patient injury from instrument insulation failure and leakage current by continuously monitoring the instrument during laparoscopy. It also has the potential to reduce the number of repair surgeries from post-operative complications from a well-documented risk of a burn injury. AEM technology complies with the JCAHO standard requiring proactive initiatives on advancing patient safety² and with *AORN Recommended Practices for Minimally Invasive Procedures*.

5. An Emerging Standard of Care

AEM is following a similar path as previous technological revolutions in surgery. Throughout the history of electrosurgery, many companies that have developed significant breakthroughs in patient safety have seen their technologies become widely used. Some of the centers that have implemented AEM and marketed the technology to the community have also seen an increase in patient draw with AEM becoming a "Community Standard of Care".

^{**}Note: Falls, burns, and electric shock are grouped into one HAC.

¹ V Dennis, "Implementing active electrode monitoring: A perioperative call," Surgical Services Management 7 (April 2001) 32-38.

² Revisions to Joint Commission Standards in Support of Patient Safety and Medical/Health Care Error Reduction, Effective: July 1, 2001.