Robotic-Assisted Surgery

By: Tina Reynolds, RN, MBA, JD, Senior Risk Advisor, of ProAssurance Corporation

A Perfect Storm

An active 67-year-old retiree entered the hospital for what he thought would be a routine prostatectomy. The urologist recommended robotic-assisted surgery (RAS), and the patient and his spouse agreed to proceed. The patient did not know this would be the surgeon's first independent robotic surgery. The planned five-hour RAS evolved into a 13-hour open surgery. The patient experienced a succession of complications including kidney failure, sepsis, stroke, cognitive deficits, a torn rectum, and blood loss requiring several transfusions. He experienced permanent incontinence, required a colostomy, and was debilitated until he succumbed to heart disease four years later.

Experts testified at trial that "confidence" with the device is not achieved until a surgeon has completed 150 to 250 procedures. Prior to performing this procedure, the surgeon had participated in only two proctored robotic prostatectomies—before the hospital granted the surgeon the privilege to independently perform RAS.

Surge in Popularity

"Robot-assisted surgery currently is performed at more than 2,025 academic and community hospital sites nationwide, with growth in excess of 25% annually." While there are at least a dozen surgical robotic companies, Intuitive Surgical, Inc., which manufactures the da Vinci® Surgical System, dominates the market. According to Intuitive Surgical's website, since 2000, more than three million patients have experienced RAS worldwide, using a da Vinci Surgical System. "Every 60 seconds, somewhere in the world, a surgeon uses a da Vinci Surgical System to bring a minimally invasive surgical option to a patient."

With the proliferation of robotic surgery, hospitals may feel pressured to purchase robotic systems. They may also encourage physicians to promote this technology to patients as a means to recoup the investment. However, safe implementation into clinical practice remains a priority. In an effort to maintain quality care, institutions want to ensure that appropriate patient counseling and informed consent for RAS happen consistently. Compliance can be measured by auditing informed consent materials and intermittently interviewing patients.⁴

When making decisions, patients rely on physicians for advice. They expect an objective overview of risks, benefits, and alternatives including the probability of unexpected outcomes. An editorial in *The Lancet* notes, "In medicine, the discomfort of uncertainty, desire to constantly improve, failure to recognize personal biases, and susceptibility to aggressive marketing can lead to innovation being embraced without rigorous evaluation." By not requiring evidence of benefit, hospitals and healthcare organizations may risk the use of inferior techniques or limit the adoption of successful ones. 6

Developing Standards

The skyrocketing interest in RAS could lead patients and hospital personnel to believe that surgeons using this equipment have appropriate training, credentials, and expertise-and that privileges have been granted to surgeons meeting minimum competency criteria. In both 2014 and 2015, the ECRI Institute listed robotic surgery complications due to insufficient training requirements on its Top 10 Health Technology Hazards list.7 Currently, there is no consensus on the appropriate type and duration of training for credentialing surgeons to perform RAS. Requirements also vary widely between facilities. "The lack of a standardized training curriculum lends itself to serious disparity in the quality of robotic training depending on trainee location and specialty."8 Repetition is the hallmark of proficiency, no more so than in surgery. Yet, some hospitals require surgeons to be proctored for just a few robotic surgeries before granting privileges to perform independently.

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Thank You!

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Dues Exemption Reminder

You should have already received membership renewal materials for the State and JCMS membership. Remember that there are certain JCMS dues exemptions for members:

- Those members, who are in good standing and who have been active members of the JCMS for twenty-five (25) years and are over sixty-five (65) years of age, shall be granted dues exempt status.
- Those members, who are in good standing and who are fully retired and have been a JCMS member for at least twenty-five (25) years, shall be granted dues exempt status. In addition, if a member has been a member of MASA for at least thirty (30) years and is fully retired, he/she will be granted dues exempt status (even if they were not a JCMS member for at least 25 years).
- Those members, who are in good standing and who are fully retired and have been a JCMS member for less than 25 years, shall be granted a 30% discount of the regular membership dues rate.
- Those members, who practice less than twenty (20) hours per week of clinical and/or health care related employment activities, shall be entitled to reduced membership dues.

For more information, please contact Kelly Logan, JCMS membership coordinator, at 205-933-8601.

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Several professional societies have made their own recommendations for physician credentialing. The American Urological Association (AUA) and the American College of Obstetricians and Gynecologists (ACOG) have shared their views regarding physician training. Robot-assisted laparoscopic prostatectomy accounts for 85% of all prostate surgeries performed in the US.9 Taking into account this high volume of urological procedures, robotic surgery has been included in the AUA's Core Curriculum for urology residencies. Urologists completing a residency and/ or fellowship training program should complete a minimum of 20 cases; these can be pediatric and/or adult robotic surgical cases. However, the trainee must have console time for a key portion of the procedure with at least ten cases. 10

Gynecologic procedures comprise 52% of total RAS.¹¹ ACOG has also made its opinions known. In a recent publication, ACOG has stated that robotic surgery is not the only or the best minimally invasive approach for hysterectomy; nor is it the most cost-efficient. "Adoption of new surgical techniques should be driven by what is best for the patient, as determined by evidence-based medicine rather than external pressures."12 There may be some advantages to the use of robotics in complex hysterectomies, especially for cancer operations that require extensive surgery and removal of lymph nodes.

The Proof is in the Outcomes

In the constant endeavor to improve care and decrease costs, analysis of patient outcome data is a key factor. "Payers, hospitals, and clinicians around the world are increasingly measuring and reporting patient outcomes to improve care."13 Outcomes measurement has been considered a critical element of healthcare reform. "Major players - including Medicare and Medicaid in the U.S., the National Health Service in the UK, the National Health Care Institute in the Netherlands, and several leading European university hospitals—have all made great strides in this area."14

Does the surge in popularity of RAS coincide with more favorable post-operative outcomes? "Reporting in The Lancet, Robert Gardiner, M.D., of the Royal Brisbane and Women's Hospital in Brisbane, Australia, found there was no significant difference in urinary or sexual function at six weeks or twelve weeks after prostate surgery."15

- $Josette Taylor \ v. \ Intuitive \ Surgical \ Inc., \ Find Law \ for \ Legal \ Professionals \ (February 9, 2017), \ http://caselaw.findlaw.com/wa-supremender \ for \ Legal \ Professionals \ (February 9, 2017), \ http://caselaw.findlaw.com/wa-supremender \ for \ Legal \ Professionals \ (February 9, 2017), \ http://caselaw.findlaw.com/wa-supremender \ for \$ court/1777420.html, accessed February 17, 2018.
- "Committee Opinion No. 628: Robotic Surgery in Gynecology," The American College of Obstetricians and Gynecologists, Obstetrics & Gynecology, March 2015, vol. 125, issue 3, p. 760-767, reaffirmed 2017, https://www.acog.org/Clinical-Guidance-and-Publications/Committee-Opinions/Committee-on-Gynecologic-Practice/Robotic-Surgery-in-Gynecology, accessed April 2, 2018.

"Moving Surgery Forward," https://www.intuitivesurgical.com, accessed March 29, 2018.

- Tara Kirkpatrick, MD, and Chad LaGrange, MD, "Robotic Surgery: Risks vs. Rewards," AHRQ PSNet Patient Safety Network, September 10, 2016, https://psnet.ahrq.gov/webmm/case/368/robotic-surgery-risks-vs-rewards, accessed February 16, 2018.
- "Robotic surgery evaluation: 10 years too late," The Lancet, February 2016, http://www.thelancet.com/journals/lancet/article/ PIIS0140-6736(16)31586-0/fulltext, accessed on February 16, 2018.

- "ECRI Institute Announces Top 10 Health Technology Hazards for 2014," November 4, 2013, https://www.ecri.org/press/ Pages/2014-Top-10-Health-Technology-Hazards-Report.aspx and "ECRI Institute Announces Top 10 Health Technology Hazards for 2015, November 25, 2014, https://www.ecri.org/press/Pages/ECRI-Institute-Announces-Top-10-Health-Technology-Hazardsfor-2015.aspx, both accessed April 2, 2018.
- Benjamin T Carpenter and Chandru P Sundaram, "Training the next generation of surgeons in robotic surgery," Dove Press Ltd., August 3, 2015, https://www.dovepress.com/training-the-next-generation-of-surgeons-in-robotic-surgery-peer-reviewed-fulltextarticle-RSRR#ref4, accessed on February 16, 2018.
- "Robotic Surgery (Urologic) Standard Operating Procedure (SOP)," Board of Directors, American Urological Association, 2017, http://www.auanet.org/guidelines/robotic-surgery-(urologic)-sop, accessed February 16, 2018.

Robotic Surgery: Arm yourself with the latest information on pricing, performance, clinical efficacy, and safety, 2015, https://www. ecri.org/Resources/ASG/Robotic_Surgery_Infographic_MS15369_web.pdf, accessed February 16, 2018.

- "The American College of Obstetricians and Gynecologists, loc. cit. Elisabeth Hansson, Arne Köhler, Nicolai Skarsgård, and Stefan Larsson, "How to Define Health Care Outcomes," BCG Perspectives,
- September 21, 2015, https://www.bcgperspectives.com/content/articles/health-care-payers-providers-how-to-define-health-careoutcomes/, accessed February 16, 2018. lbid.

Jacek L. Mostwin, MD, DPhil, "Prostate Cancer Surgery: Choose Carefully," HealthCentral, September 23, 2016, https://www. healthcentral.com/article/prostate-cancer-surgery-choose-carefully, accessed February 16, 2018.

BUILDING ON THE LEGACY

The Jefferson County Medical Society is proud to announce our partnership with John Compton in the production of the book, A History of Medicine in Jefferson County, Alabama. This will be the first complete history of our medical profession sponsored by the JCMS.

The book will be published by John Compton, owner and founder of Legacy Publishing Co. from here in Birmingham. Legacy has published histories medical societies in Memphis. Jacksonville, Austin, Charleston, Raleigh, Oklahoma City, Tulsa, and Pittsburgh, Pennsylvania as well as for numerous bar associations. The author, Lynn Reeves, is an accomplished writer who has written numerous histories including a biography of Elvis Presley.

The book will be distributed to schools. libraries, bookstores, and may be used by the Birmingham Chamber of Commerce to illustrate the contributions Jefferson County Community has made locally, nationally, and internationally. A unique feature of the book will be biographies of current Medical Society physicians and histories of medical groups, hospitals and retired physicians along with memorials of deceased physicians. Subscriptions are being offered for the biography section.

If you have old photographs, materials or information which may be of interest to the author or if you are interested in including a biography of you or your practice or a memorial tribute, you can contact John Compton at the Jefferson County Medical Society office at 205.933.8601.

Scenes from the 2018 JCMS Annual Social



























Special Thanks to ProAssurance for sponsoring the 2018 JCMS Annual Social.



In The News

F. Darlene Traffanstedt, M.D., joined the Jefferson County Department of Health as Medical Director of Adult Health & Family Planning. She has proven to be a passionate advocate and hard worker for the health needs of our state and local community, especially the underserved.

Dr. Traffanstedt is a native of Florence, Alabama. She graduated from the University of Alabama and the University of Alabama School of Medicine, and completed an internship and residency in Internal Medicine with Baptist Health System in Birmingham. She spent 14 years in the practice of general Internal Medicine in the Hoover/Bessemer area. Dr. Traffanstedt is a former President of the JCMS, and has served on the Alabama Board of Medical Examiners, the State Committee of Public Health, Governor Bentley's Healthcare Improvement Task Force, and the Alabama Opioid Council.

As Medical Director, Dr. Traffanstedt will provide medical guidance and leadership for adult health and family planning clinics and population health programs at JCDH. Additionally, she will direct the development, implementation, monitoring and evaluation of activities designed for the prevention and control of chronic conditions based upon current public health practice.



Mary Evelyn O'Neil, M.D., joined Alabama Pediatrics in Homewood. A native of Tuscaloosa, AL, Dr. O'Neil graduated from the University of Alabama summa cum laude. She received her medical degree from the UAB School of Medicine, then moved to Winston Salem, North Carolina for her pediatric internship and residency at Wake Forest University Baptist Medical Center, Brenner Children's Hospital. Dr. O'Neil remained in North Carolina after residency and worked as a general pediatrician in Winston Salem and Raleigh. She and her husband James, an otolaryngologist at ENT Associates of Alabama, moved back to Birmingham in the fall of 2017.

Dr. O'Neil is a board certified pediatrician. While in North Carolina she was featured on several local television stations and served as an Instructor of Clinical Skills Training at the Campbell University School of Osteopathic Medicine.



Don't Miss This Chance to Win!!

If you join or renew your membership with the Medical Association of the State of Alabama and the Jefferson County Medical Society before December 31st, you will automatically be entered into a drawing for a FREE YETI TUNDRA 45 COOLER.

Go to the JCMS website – http://jcmsalabama.org – and click on the **How To Join** tab to find instructions on how to join or call the State Association at (800) 239-6272.

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IN MEMORIAM

THE JCMS WANTS TO ACKNOWLEDGE THE RECENT PASSING OF THE FOLLOWING JCMS MEMBERS:

John Worrell Poynor, M.D. October 6, 2018

ROBERT V. BARNETT, M.D. NOVEMBER 26, 2018

Elections were held in November and the Officers, Censors and Committee Members for 2019 are:

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Upcoming Events

Jan. 14	Executive Committee Meeting – 5:30 p.m. Board of Censors Meeting – 6:30 p.m.
Jan. 15	The Wayne Finley 811 Breakfast Club Meeting – Joseph B. LaRussa, M.D., will speak on "Remembering Dr. Tinsley Harrison: Teacher of Medicine" at 8:30 a.m. in the JCMS Board Room
Feb. 19	The Wayne Finley 811 Breakfast Club Meeting – The speaker will speak at 8:30 a.m. in the JCMS Board Room
Feb. 25	Executive Committee Meeting - 6:00 p.m.
Mar. 18	Foundation Trust Meeting – 5:00 p.m. Executive Committee Meeting – 5:30 p.m. Board of Censors Meeting – 6:00 p.m.
Mar. 19	The Wayne Finley 811 Breakfast Club Meeting – The speaker will speak at 8:30 a.m. in the JCMS Board Room
Apr. 15	Executive Committee Meeting – 5:30 p.m.
Apr. 16	The Wayne Finley 811 Breakfast Club Meeting – The speaker will speak at 8:30 a.m. in the JCMS Board Room
May 19	JCMS Annual Barons Event
Contac	t Juanita Pruitt at jpruitt@jcmsalabama.org for more information.

JCMS Welcomes the Following New Members

Jonathan Aaron Cappel, M.D. Justin T. Cooke, M.D. Joseph Matthew Ingram, M.D. Brian James King, M.D. Njeri C. Maina, M.D. Anastasia T. Nelson, M.D. Dermatology
Family Medicine
Orthopedics
Dermatology
Allergy
Pediatrics

Mary Evelyn M. O'Neil, M.D. Hugh P. O'Shields Jr., M.D. Armand Sorin Schachter, M.D. Mark L. Vaporean, M.D. Matthew West, M.D. Pediatrics Internal Medicine Psychiatry Internal Medicine Resident



Volunteer Opportunities

The American Red Cross prevents and alleviates human suffering in the face of emergencies by mobilizing the power of volunteers and the generosity of donors.

Blood Services Transportation Specialist

Deliver life-saving blood products to area hospitals and clinics. Must be able to lift at least 40 lbs, have valid state drivers license and 3+ years driving experience.

Service to Armed Forces

Hero Care Network-virtual position. Support by making follow-up calls to military members and/or families to determine if their needs are met, providing other follow-up actions needed for complete and timely client service. A4VA-an exciting opportunity to support female veterans with comfort care interaction during clinical visits at Birmingham VA Medical Center. Shifts are available M-F and are four hours.

Community Outreach Coordinator

Strengthen outreach efforts and build our volunteer workforce by coordinating a team of volunteers who represent Red Cross at community events and presentations. Strong communication skills needed.

Blood Donor Ambassador

Help support blood donors through their life-saving donation process by guiding them from registration to canteen (refreshment) area. Consistent, smiling faces needed.

Community Outreach Volunteers

Support the Red Cross Mission by attending events and/ or activities to promote Red Cross services & share how others can get involved.

Disaster Services

Disaster Action Team - Respond to local families affected by disasters (frequently, these cases are due to home fires), and ensure they have access to basic necessities such as food, clothing, and shelter. Shelter Trainee-assist with opening and staffing an emergency shelter during a disaster.

Mental Health Volunteer - Provide approved disaster mental health interventions that focus on basic care, support and crisis management for individuals experiencing disaster-related stress.

Health Services Volunteer - Support the affected community in a variety of settings including shelters, emergency aid stations, and home visits by providing health and functional needs assessments, illness and injury surveillance, replacing lost medications and medical equipment, and condolence support.

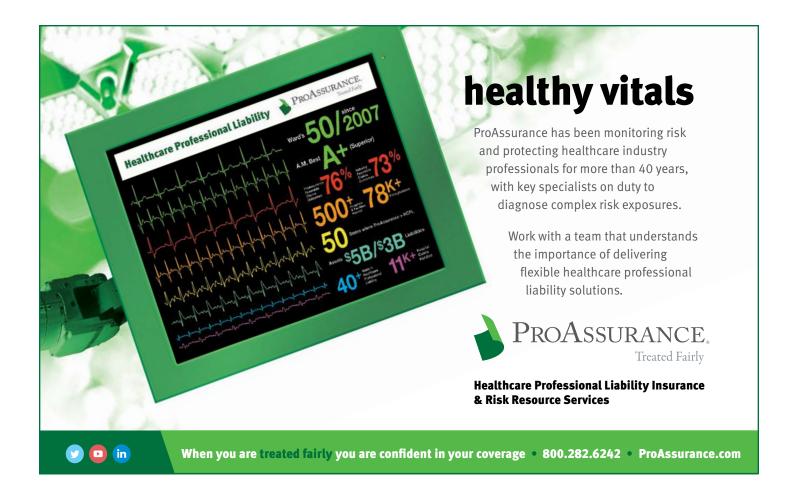
We Need Volunteers!

Want Red Cross to come to your work, civic group, church, etc. to share our needs and talk about our services?

We would love to!

For more information contact: Sandy Zuiderhoek at 334-201-1620 or Sandy.Zuiderhoek@redcross.org

To apply: www.redcross.org/volunteer



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