



ASPIRE

Anesthesiology Performance Improvement and Reporting Exchange



MSQCC

Michigan Surgical Quality Collaborative

WELCOME

ASPIRE and MSQC Members and Friends





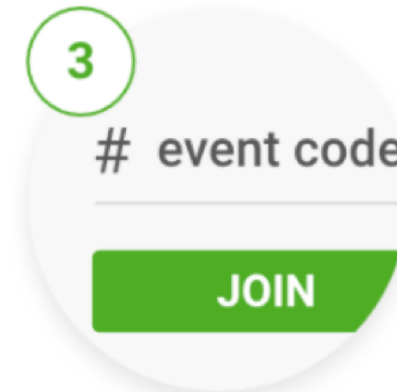
Questions and Comments?



Open browser



Go to www.slido.com



Enter code #MSQC



Join your [@MSQCPSO](#) and
[@MPOGASPIRE](#) colleagues
in conversation
using the hashtag
[#MIValuePartnerships](#)

ENJOY THE MEETING!



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TODAY'S AGENDA

A unique privilege and partnership

MSQC Executive Committee

Surgical Video Review

ASPIRE-MSQC Morning Session

CQI Specific Afternoon Breakout Sessions

Partnering with Primary Care

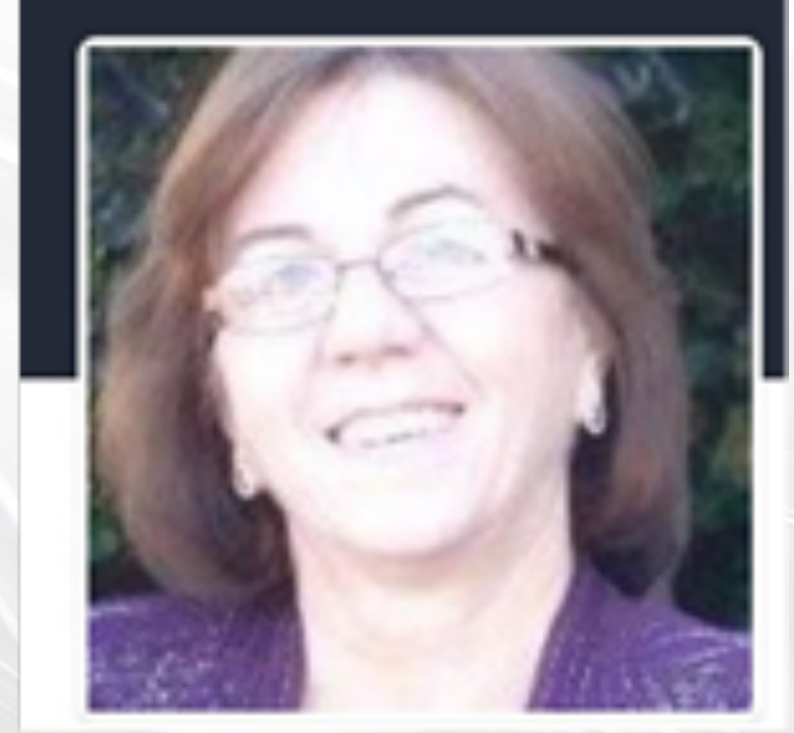
MSQC Thanks You!!!



Connie Bruski, RN
Munson Medical Center



Betty Riegel, BSN
St. John Hospital and Medical Center



Pati Ciofu-Smith
Beaumont Hospital -Dearborn

ASPIRE Updates

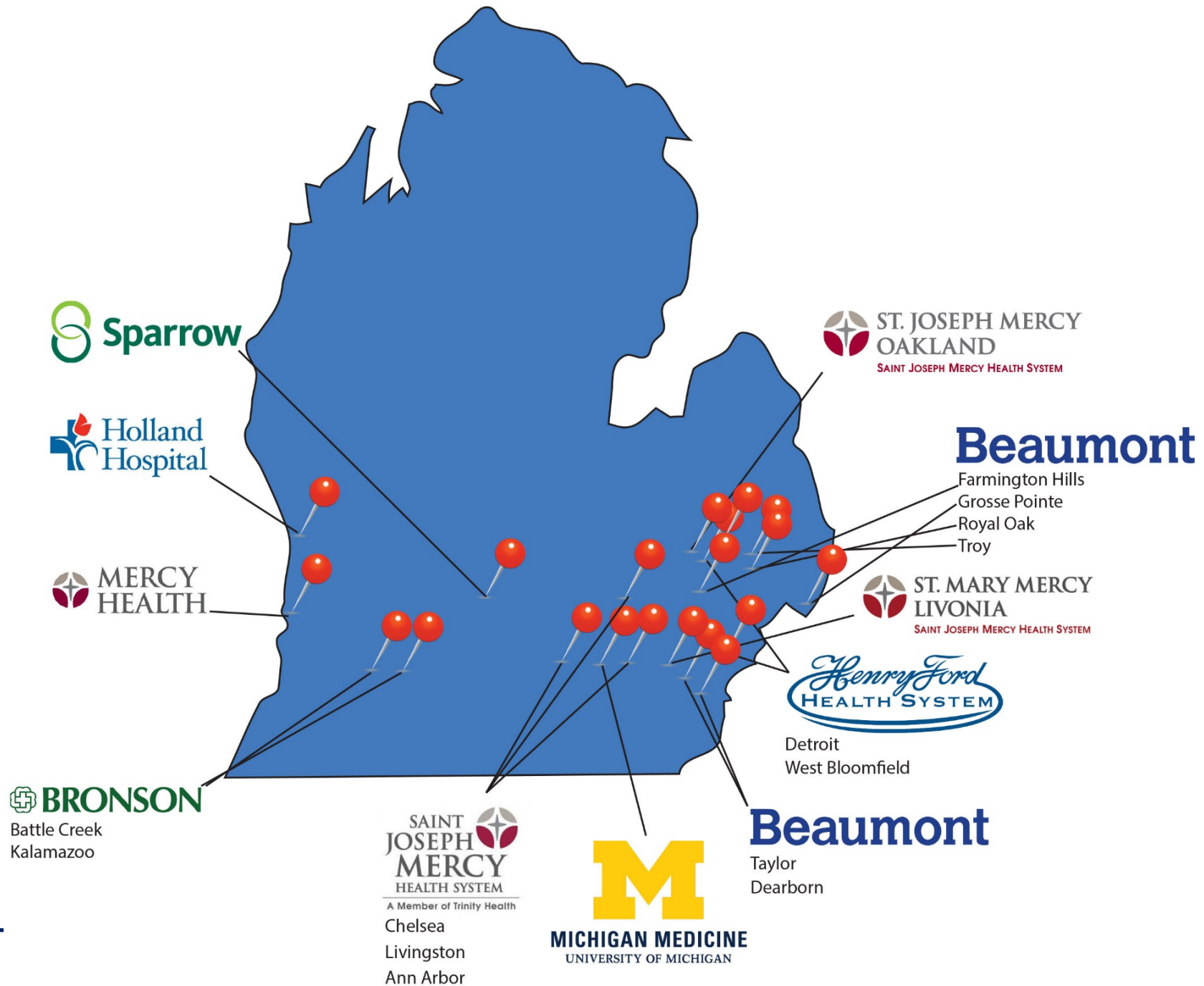
April 20th 2018



1st Group of Sites - 2015

19 Current Sites

2 New Sites



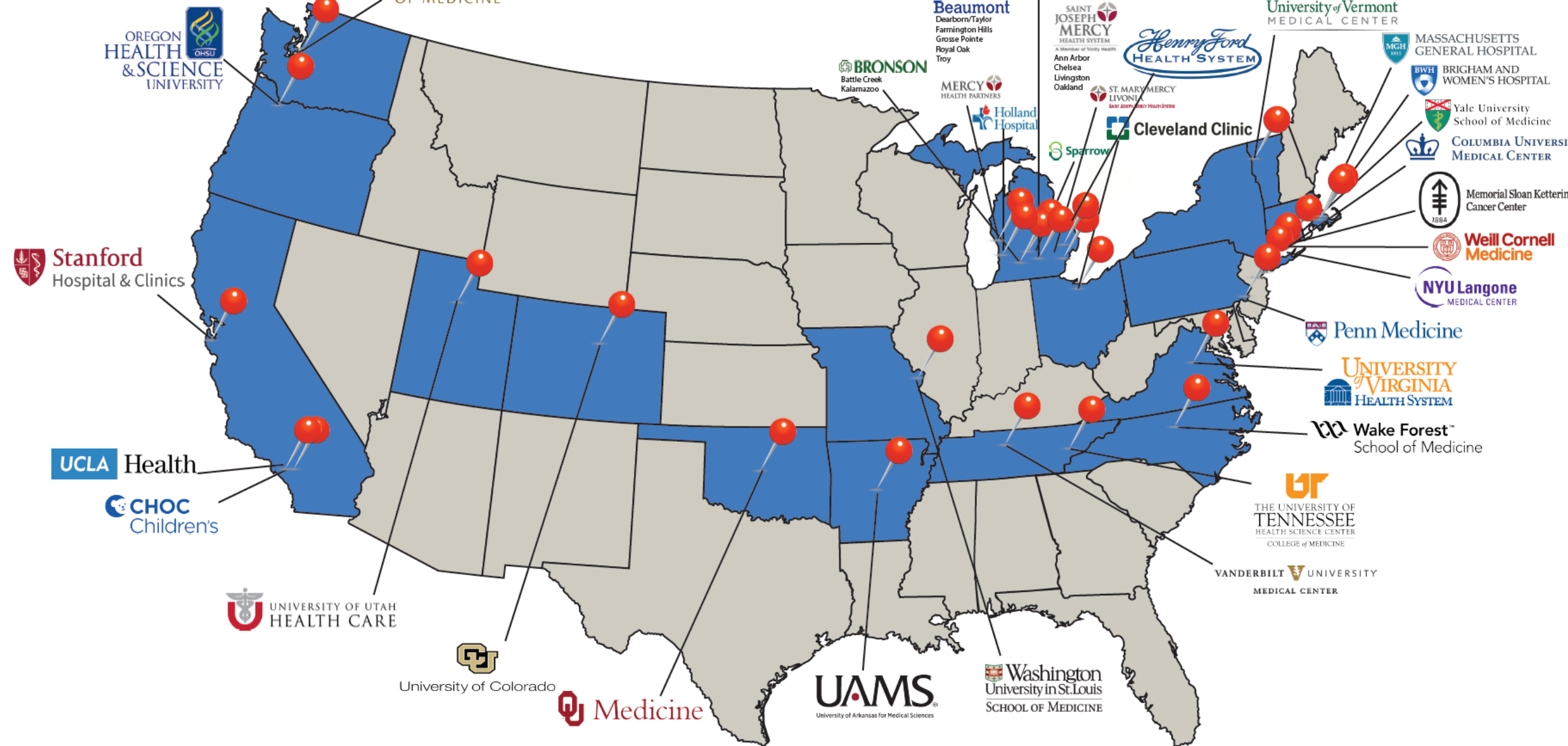
UW Medicine

UW SCHOOL OF MEDICINE



MICHIGAN MEDICINE

UNIVERSITY OF MICHIGAN



OREGON HEALTH & SCIENCE UNIVERSITY

Beaumont
Dearborn/Taylor
Farmington Hills
Grosse Pointe
Royal Oak
Troy

SAINT JOSEPH MERCY HEALTH SYSTEM
A Division of Henry Ford Health
Ann Arbor
Chelsea
Livingston
Oakland

THE UNIVERSITY OF VERMONT MEDICAL CENTER

MASSACHUSETTS GENERAL HOSPITAL

BWH BRIGHAM AND WOMEN'S HOSPITAL

Yale University School of Medicine

COLUMBIA UNIVERSITY MEDICAL CENTER

Memorial Sloan Kettering Cancer Center
1884

Weill Cornell Medicine

NYU Langone MEDICAL CENTER

Penn Medicine

UNIVERSITY OF VIRGINIA HEALTH SYSTEM

Wake Forest School of Medicine

THE UNIVERSITY OF TENNESSEE HEALTH SCIENCE CENTER COLLEGE OF MEDICINE

VANDERBILT UNIVERSITY MEDICAL CENTER

University of Colorado

CU Medicine

UAMS
University of Arkansas for Medical Sciences

Washington University in St. Louis SCHOOL OF MEDICINE

Recruitment 2018

Committed
Anesthesiology
Team

Anesthesia
Information
System



IT Resources

Hospital
Leadership



ASPIRE

Anesthesiology Performance Improvement and Reporting Exchange



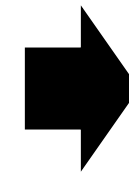
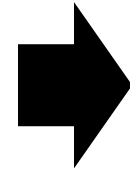
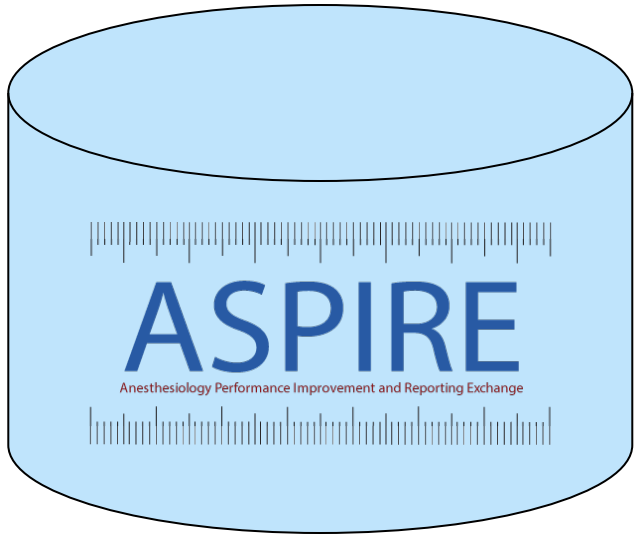
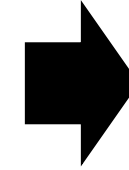
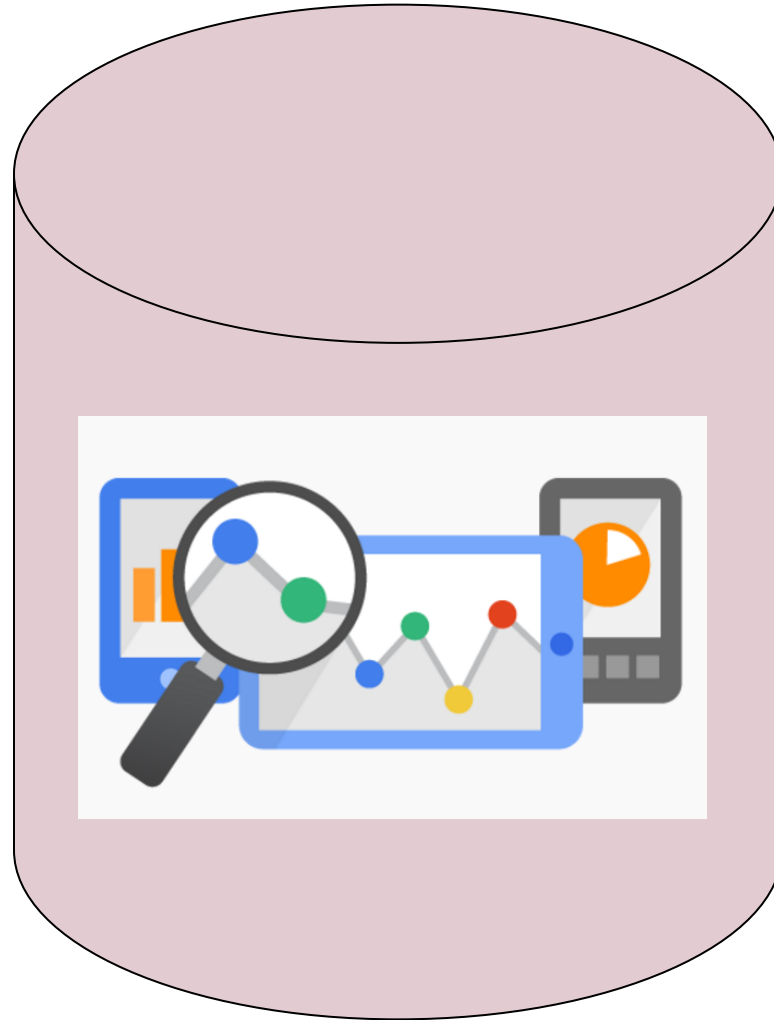
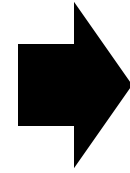
MSQQC

Michigan Surgical Quality
Collaborative

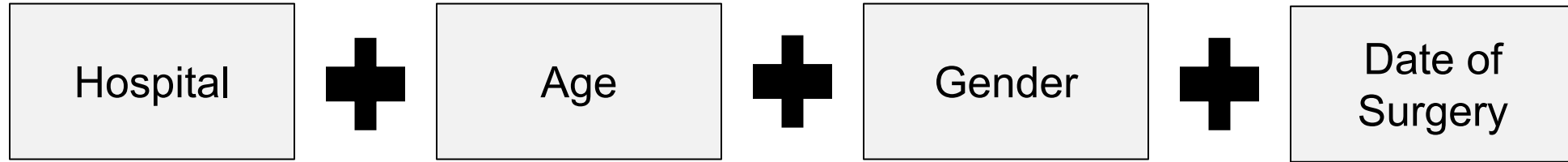


What you have told us...

- CQIs Need to Work Together More
- CQIs Need to Work Together Better
- ASPIRE and MSQC have Areas of Overlapping Interest
- ASPIRE and MSQC have Common Sites



Matching Algorithm – match MSQC and ASPIRE patients without PHI

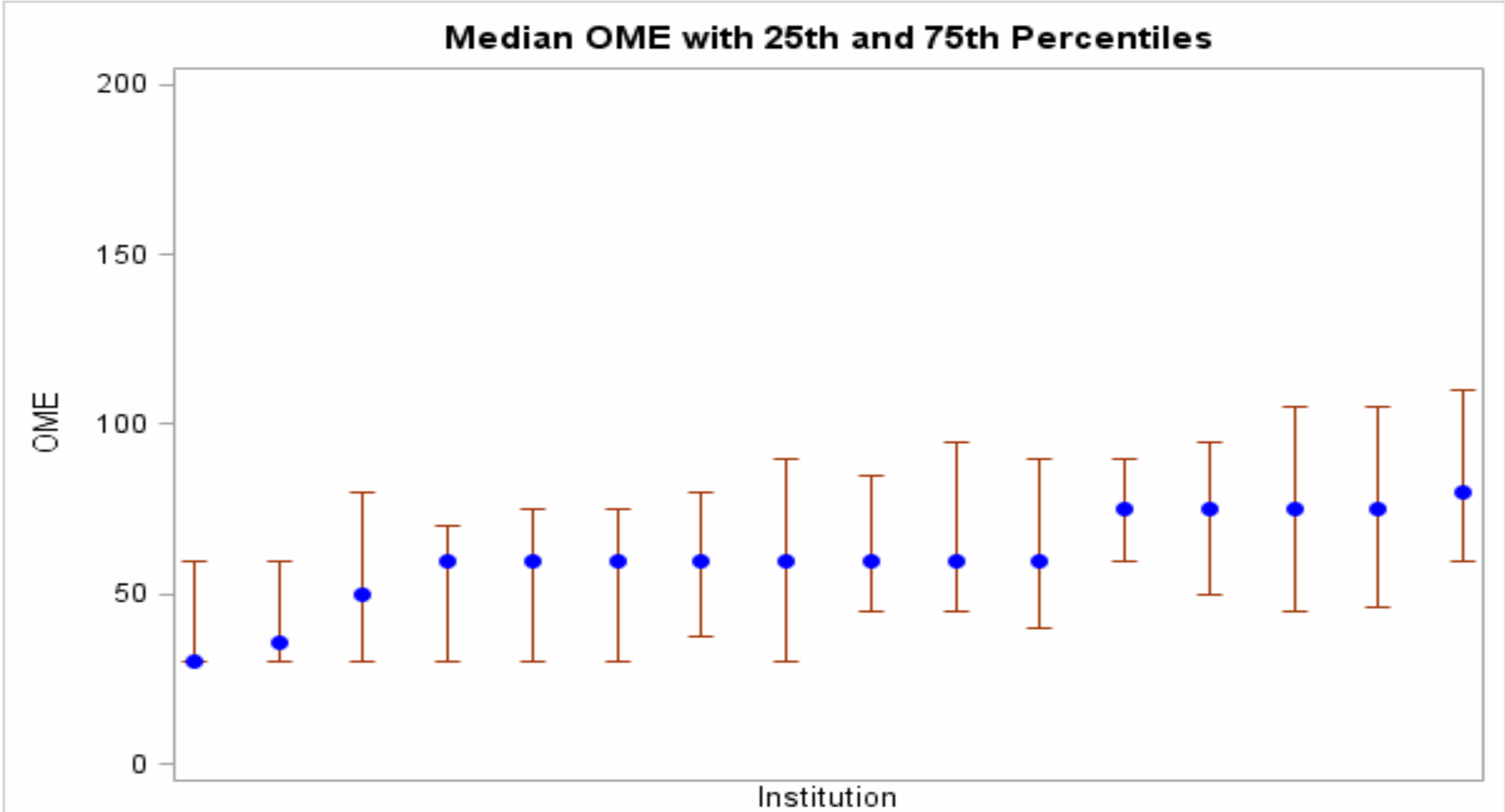


Number of Matched Cases	Number of Cases	Percentage of Cases
1 ASPIRE: 1 MSQC	41,888	92.5 %
2 ASPIRE: 1 MSQC	2,557	5.7 %
3 ASPIRE: 1 MSQC	636	1.4 %
4 ASPIRE: 1 MSQC	143	0.3 %
5 ASPIRE: 1 MSQC	39	0.1 %
6+ ASPIRE: 1 MSQC	6	0.0 %

Institution Name
Beaumont Dearborn
Beaumont Farmington Hills
Beaumont Grosse Pointe
Beaumont Royal Oak
Beaumont Taylor
Beaumont Troy
Bronson Healthcare Group
Henry Ford Health System – Detroit
Henry Ford Health System – West Bloomfield
Holland Hospital
Sparrow Health System
Trinity - Mercy Health Muskegon
Trinity - St. Joseph Mercy Ann Arbor
Trinity - St. Joseph Oakland
Trinity - St. Mary Mercy Livonia
University of Michigan Health System



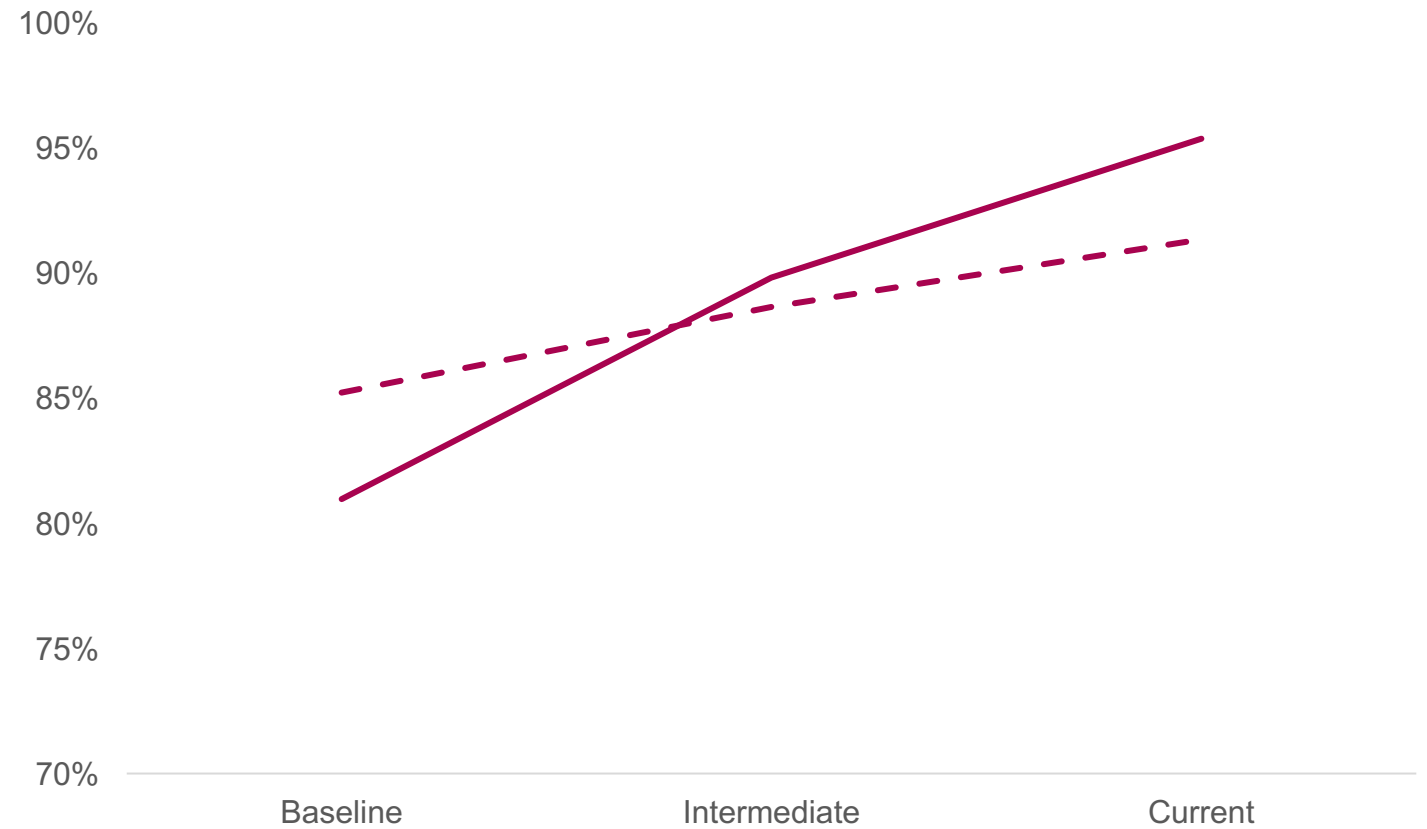
Is there variability in intraoperative opioids delivered?



How ASPIRE/MSQC sites perform with processes of care that reduce complications?

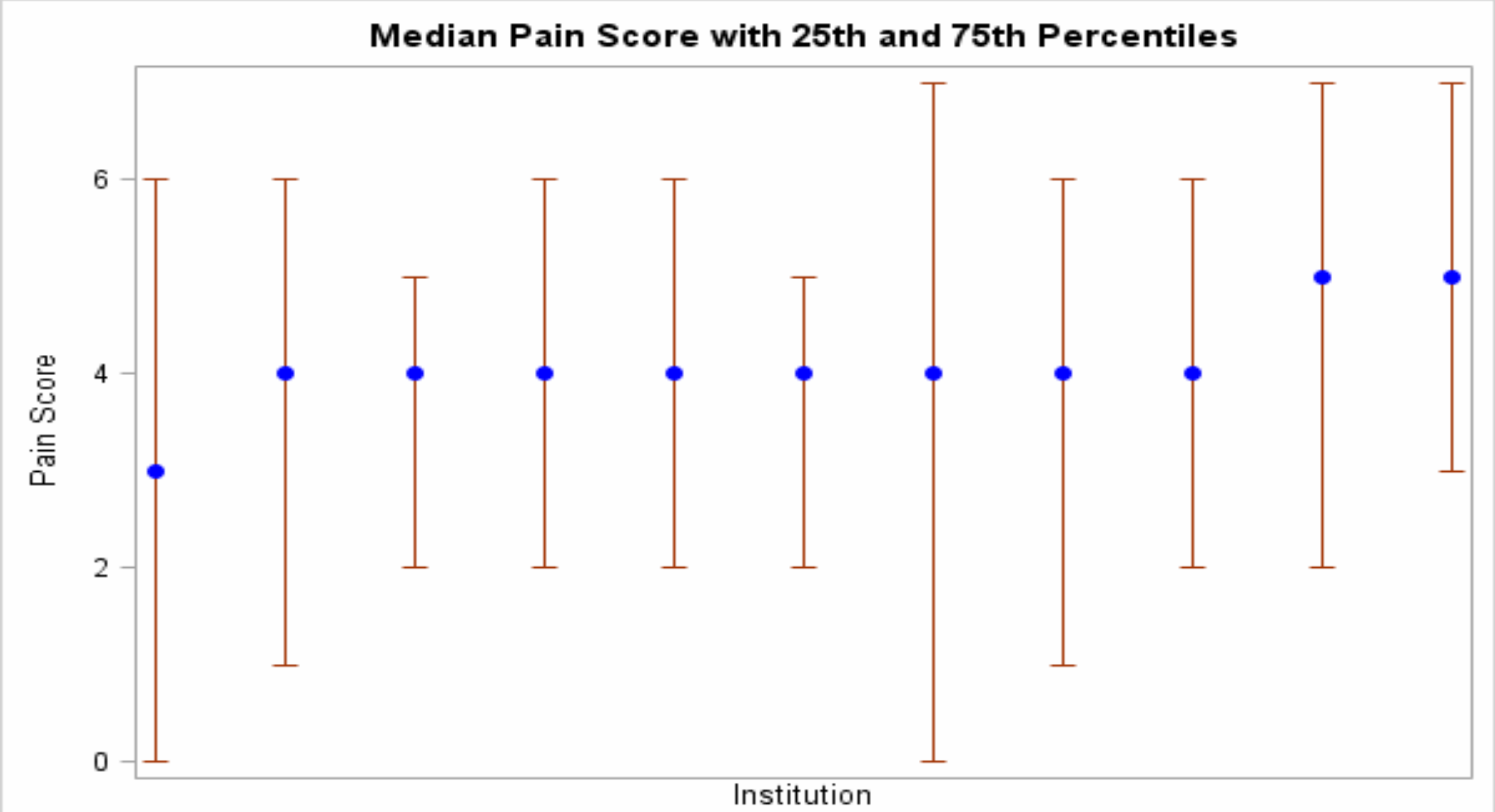
Baseline	~ 2015
Intermediate	~ 2016
Current	~ 2017

———— MSQC/ASPIRE Hospitals
----- Non- MI ASPIRE Hospitals



Lung Protective Ventilation

Is there variability in post-operative pain scores?



Does intraoperative opioid administration correlate with post-op opioids?

OME Quartile	Hysterectomy	Major Vascular	Colorectal
Quartile 1 (0 – 30)	14%	37%	50%
Quartile 2 (> 30 – 60)	22%	44%	47%
Quartile 3 (> 60 to < 90)	48%	42%	66%
Quartile 4 (90 +)	35%	39%	51%

Percent of Patients Requiring Postop IM/IV Narcotics

What we need from you....

Your ideas for how
this data can
improve quality
across Michigan



PROSPER

- Prospective Study on Perioperative Experience and Recovery
- Study that uses surveys and passively collected information (activity/ location) from smartphones to track a patient's experience throughout perioperative period
- No active recruiting! Just posters in clinics/ clinic rooms

Participate in a mobile application research study to help us understand how a procedure changes your activity, quality of life, pain, and mood

- Are you 18 years old or older?
- Are you having a procedure with anesthesia?
- Do you have an iPhone?

For More Information
Please Contact:

Dr. Sachin Kheterpal
Department of Anesthesiology
mpog-prosper@med.umich.edu
IRB #HUM00136663

Available exclusively in the
Apple App Store.



HELPING YOU PROSPER



Join our
research study
PROSPER!

What does this app do?

- Complete health surveys using your iPhone
- Track and visualize your recovery
- Compare your results to other patients

How to enroll

1. Download MyDataHelps from the Apple App Store.
2. Search for "PROSPER" under the Studies section.

Insert
Logo
Here



We need your help!

Think that understanding how quality of life changes before and after surgery is important

Able to display posters and make flyers available to patients in surgical and preoperative clinics

PROSPER team will create flyers and posters and send to your clinic

If interested, we can also send you data on patients from your institution that enrolled

mpog-prosper@med.umich.edu

Thank you!



MSQCC

Michigan Surgical Quality Collaborative

UPDATES

Please do the MSQC UTI Survey



MSQC Colectomy Bundle Recommendations

Postoperative Normothermia in PACU (>96.8F, 36.0C)
Oral Antibiotics with Bowel Mechanical Preparation
Postoperative Day 1 Glucose <140 mg/dL
Appropriate Prophylactic IV Antibiotic: Cefazolin + Metronidazole
Use of Minimally Invasive Surgery OR Short Operative Duration (Open Surgical Approach <100 minutes)

3000 patients have done prehabilitation



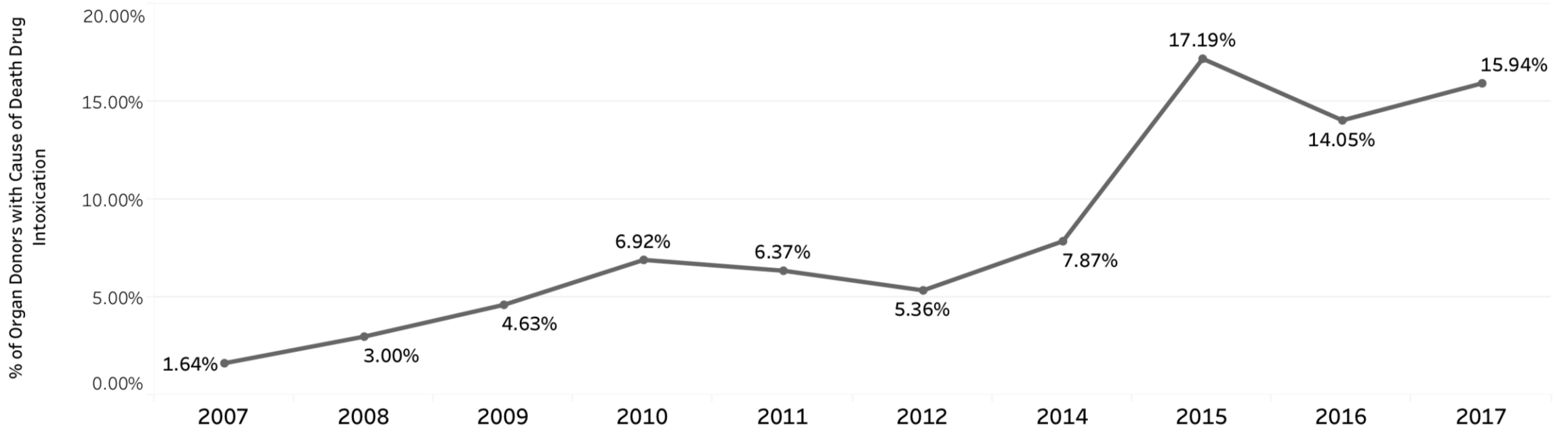
**Average training
duration 3.7 weeks**

**81% of patients are
engaged once sign up**

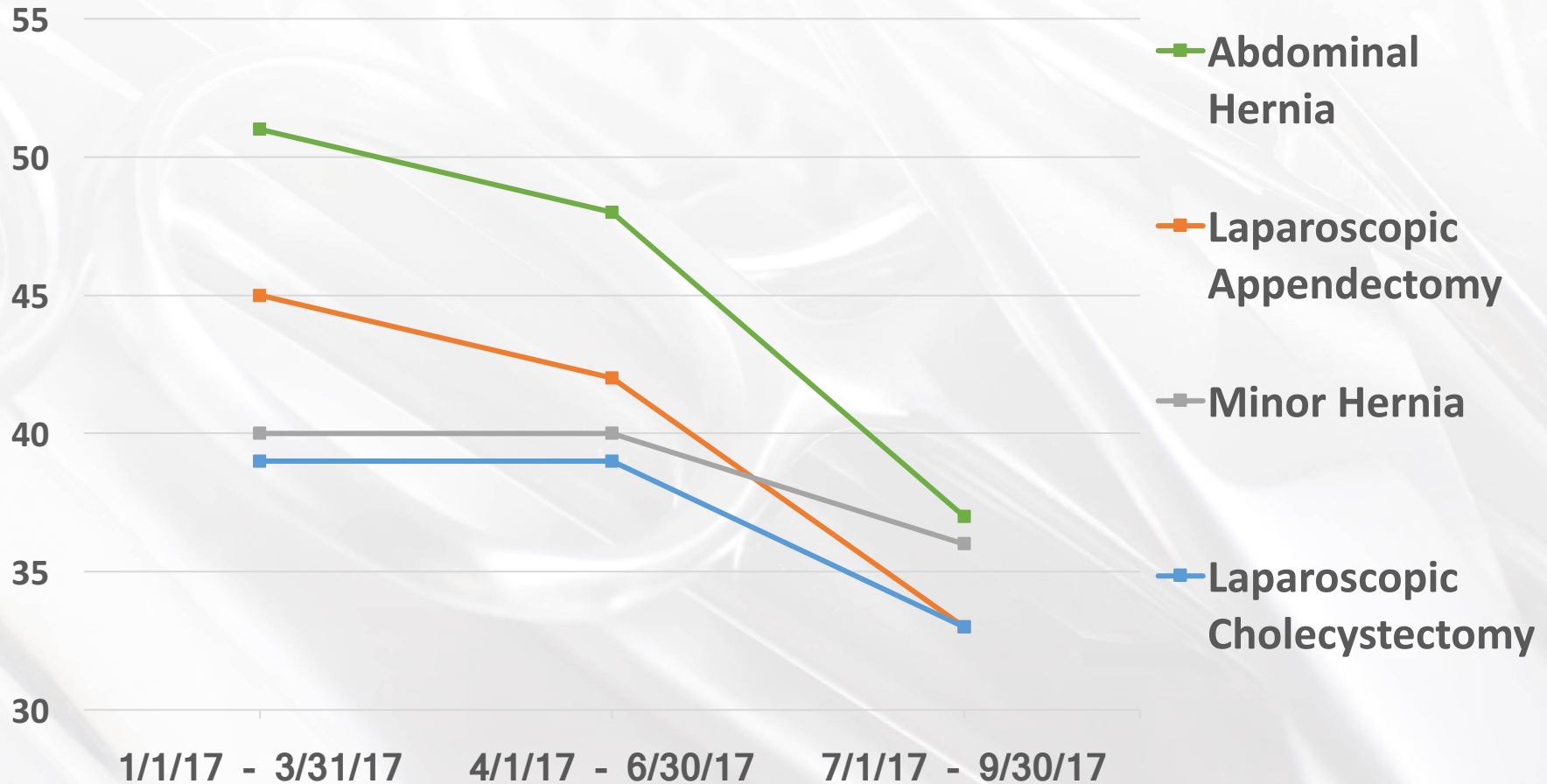
Data Abstraction and Integration



Overdose related organ donors in Michigan



Mean number of 5mg hydrocodone pills prescribed following surgery in Michigan



Reductions in
patient opioid
consumption

New prescribing
recommendations
based on patient
consumption

Monitor Satisfaction, Patient Outcomes

Reductions in
opioid prescribing



PROCEDURE

HYDROCODONE (NORCO) 5 mg tablets
CODEINE (TYLENOL #3) 30 mg tablets
TRAMADOL 50 mg tablets

OXYCODONE 5 mg tablets

Procedure	Hydrocodone (Norco) / Codeine (Tylenol #3) / Tramadol	Oxycodone
Laparoscopic Cholecystectomy	15	10
Laparoscopic Appendectomy	15	10
Inguinal/Femoral Hernia Repair (open/laparoscopic)	15	10
Open Incisional Hernia Repair	40	25
Laparoscopic Colectomy	35	25
Open Colectomy	40	25
Hysterectomy		
Vaginal	20	15
Laparoscopic & Robotic	30	20
Abdominal	40	25
Wide Local Excision ± Sentinel Lymph Node Biopsy	30	20
Simple Mastectomy ± Sentinel Lymph Node Biopsy	30	20
Lumpectomy ± Sentinel Lymph Node Biopsy	15	10
Breast Biopsy or Sentinel Lymph Node Biopsy	15	10

Procedure	Old Recs	New Recs	% Change	Data for Recommendation
Laparoscopic Cholecystectomy	75	75	-	Howard[1], Hill[2]
Laparoscopic Appendectomy	75	75	-	None. Analogy to lap chole.
Inguinal/Femoral Hernia Repair (open/laparoscopic)	75	75	-	Hill[2], Howard "spillover" data
Open Incisional Hernia Repair	200	150	-25%	New MSQC data(75th percentile)
Laparoscopic Colectomy	185	145	-22%	New MSQC data(75th percentile)
Open Colectomy	200	150	-25%	New MSQC data(75th percentile)
Ileostomy/Colostomy Creation, Re-siting, or Closure	-	200	-	New MSQC data(75th percentile)
Open Small Bowel Resection or Enterolysis	-	150	-	New MSQC data(75th percentile)
Thyroidectomy	-	50	-	New MSQC data(75th percentile)
Hysterectomy				
Vaginal	125	100	-20%	New MSQC data(75th percentile)
Laparoscopic & Robotic	175	125	-29%	New MSQC data(75th percentile)
Abdominal	220	185	-16%	New MSQC data(75th percentile)
Wide Local Excision ± Sentinel Lymph Node Biopsy	150	150	-	Michigan Medicine institutional guideline
Simple Mastectomy ± Sentinel Lymph Node Biopsy	150	150	-	Michigan Medicine institutional guideline
Lumpectomy ± Sentinel Lymph Node Biopsy	75	75	-	Hill[2]
Breast Biopsy	75	37.5	-50%	Hill[2]
Sentinel Lymph Node Biopsy Alone	-	75	-	Michigan Medicine institutional guideline

BCBSM Payment for Pain Optimization Pathway following Surgery

- Enhanced surgical fees for surgery not associated with a post-operative opioid prescription via modifier -22
 - Laparoscopic Cholecystectomy
 - Thyroidectomy
 - Inguinal Hernia Repair
 - Sinus Surgery
 - Bariatric Surgery
 - Prostatectomy

Michigan OPEN September 2017 Medication Take Back Event



900 lbs
of pills



17,500
opioid pills collected



1984
oldest opioid collected



Surgery
most common reason for opioid



Event Sites

Ann Arbor
Battle Creek
Chelsea
Clinton
Commerce
Dearborn
Flat Rock
Flint
Jackson
Kalamazoo
Copper Harbor
Lapeer
Livonia

Macomb
Mattawan
Monroe
Ottawa County
Pinckney
Pontiac
Roseville
Royal Oak
Saginaw
South Haven
Wayne
Wixom
Ypsilanti



www.michigan-open.org
<https://opioidprescribing.info>



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in conversation
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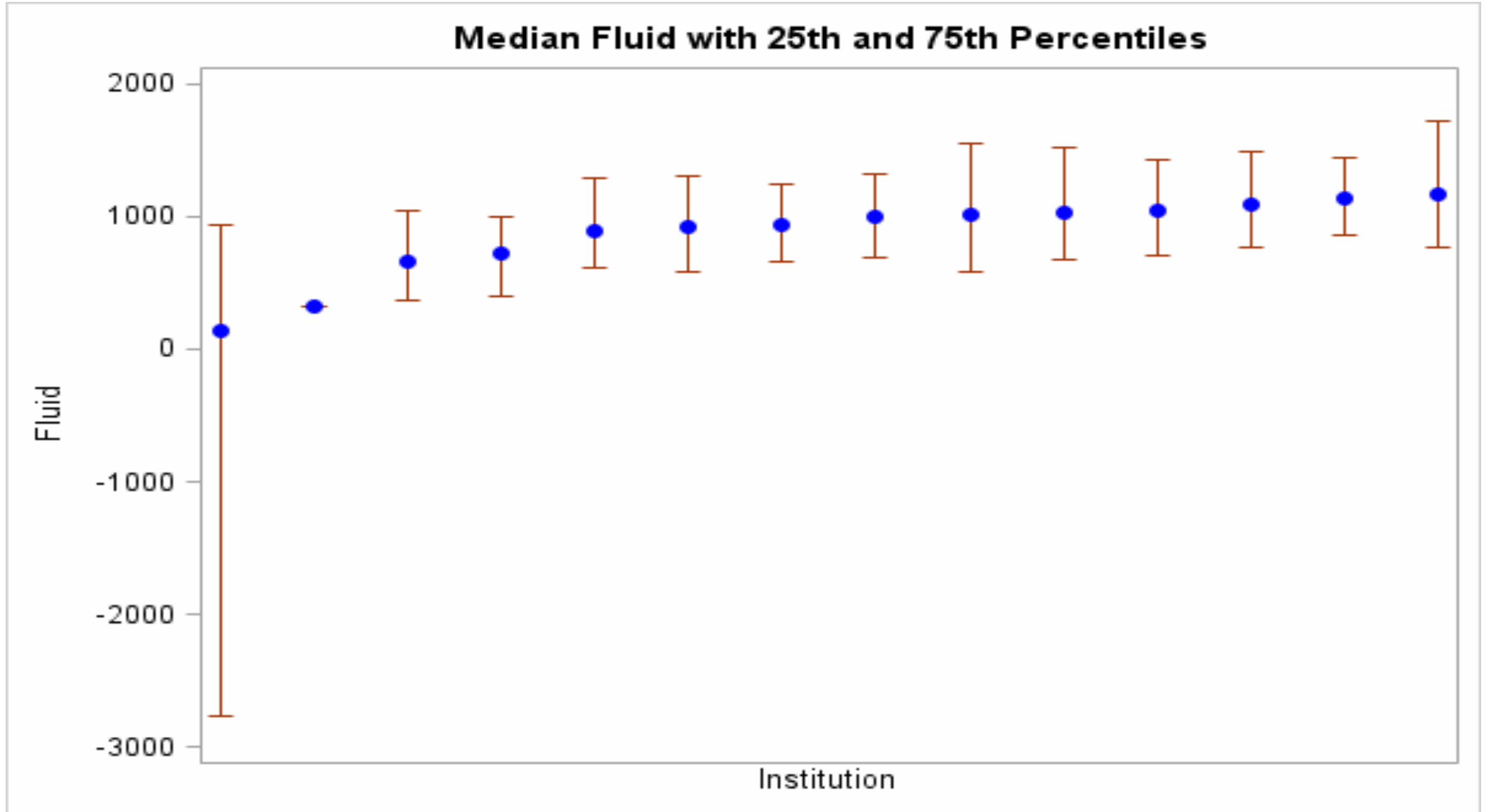
Appendix

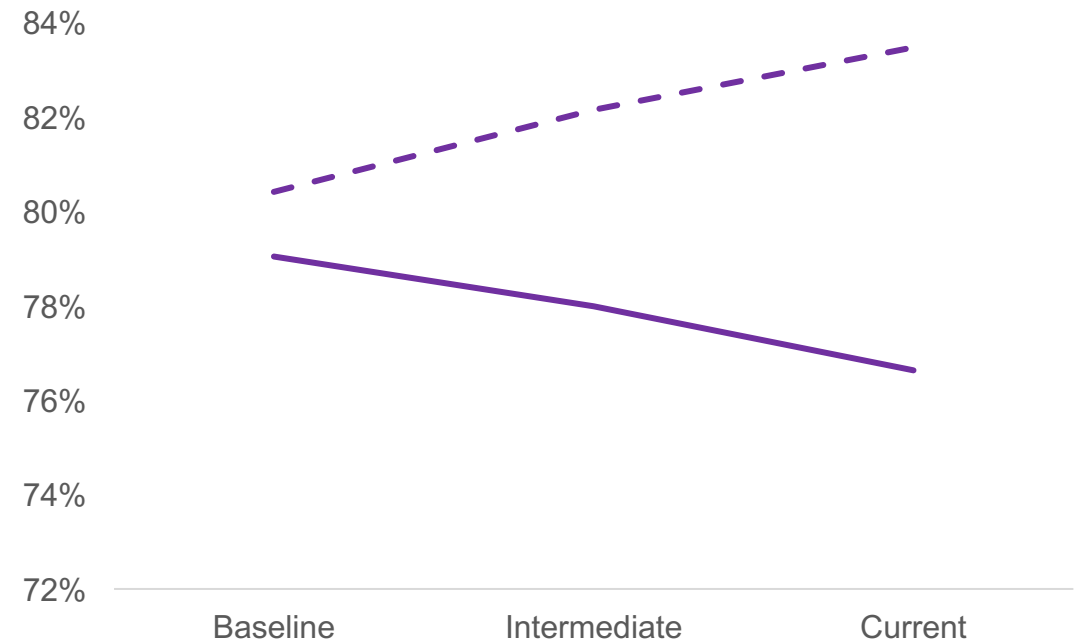
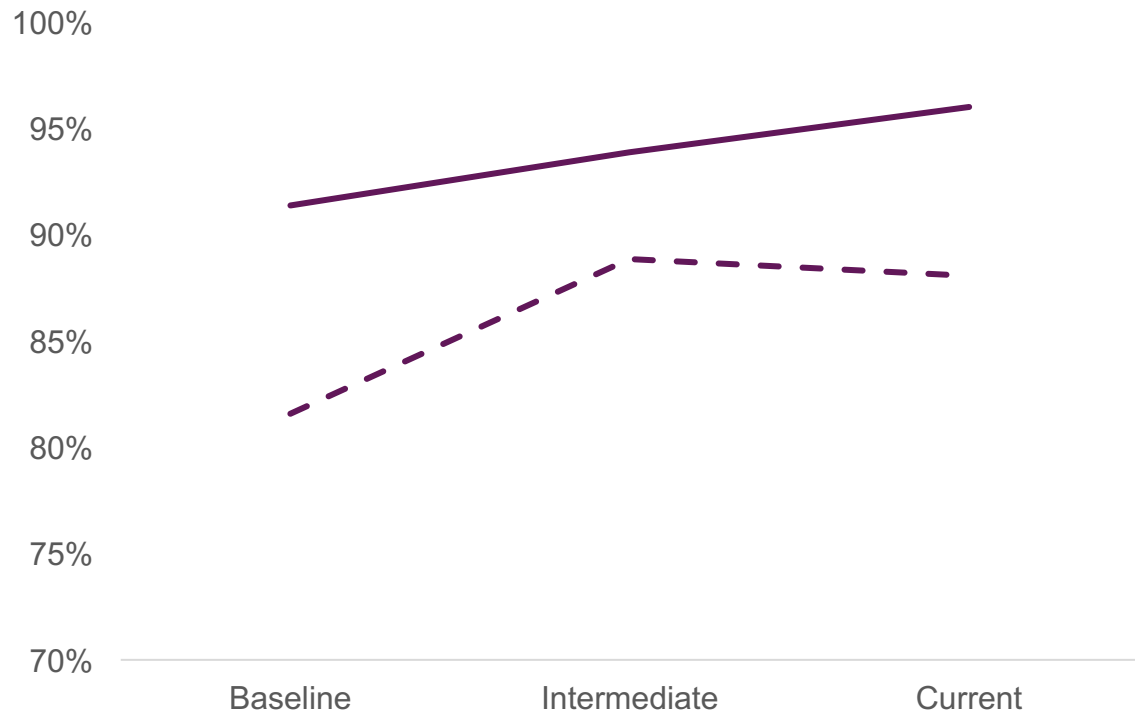
Population Demographics

- 41,888 cases from 19 hospitals
- Case from January 2008 to October 2017

Procedure Type	Case Count	Percent
Hysterectomy	7,008	17%
Open Major Vascular	617	1%
Colorectal	5394	13%
Other	28,869	69%

Anesthetic Characteristics – Fluid Balance by Institution

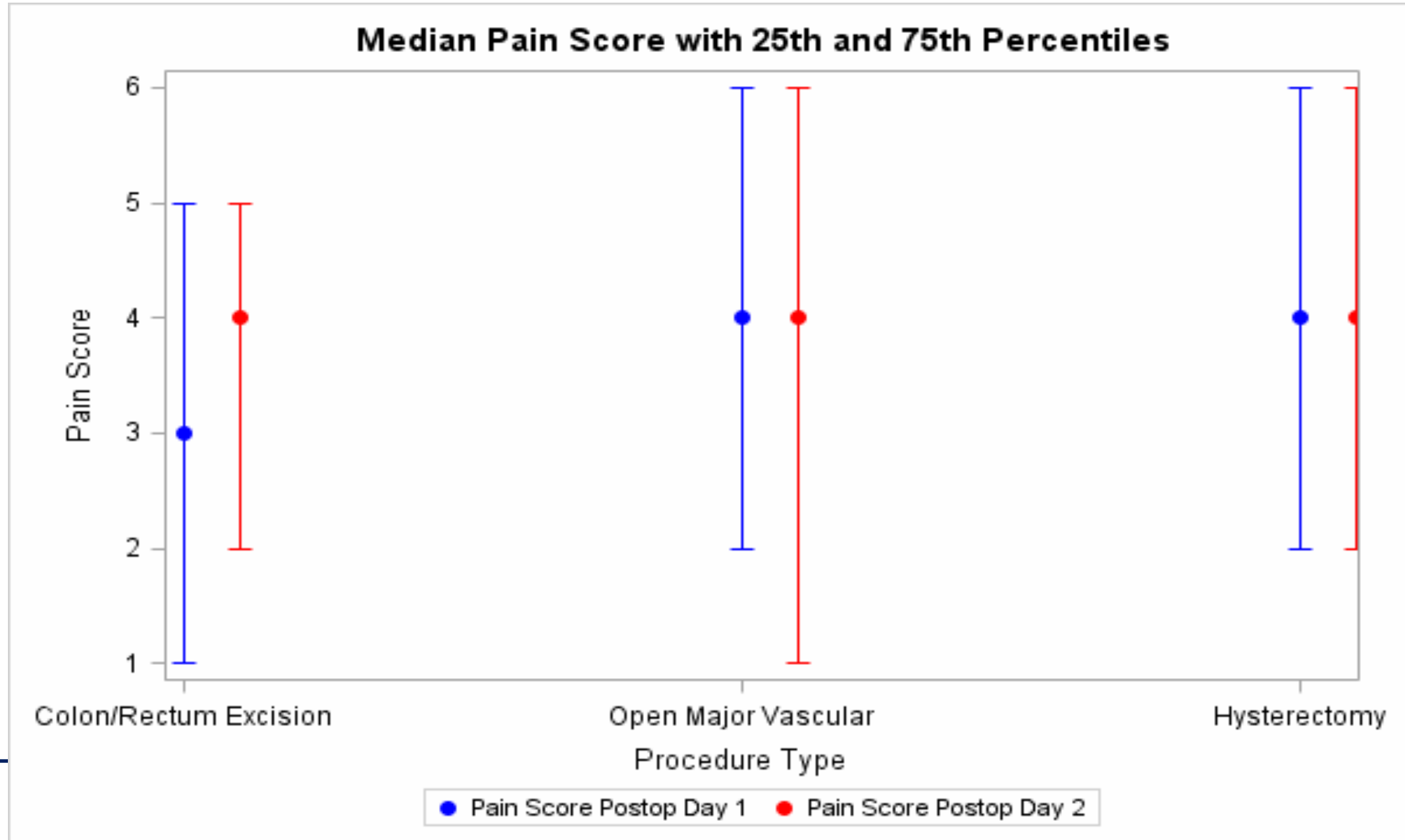




Administration of Reversal

Transfusion Outcome

Surgical Characteristics – Postop Pain by Procedure



OME Quartile and Postop Pain by Procedure

