

INDIVIDUAL APPROACH BEATS ‘ONE SIZE FITS ALL’ IN THE O.R.

Hospitals can benefit greatly from digital O.R. integration projects. But integration needs to be performed with the right focus in order to have a true impact on productivity in the long-term. Off-the-shelf product packages that rigidly focus on integration of video sources in the O.R. fall short of what can be achieved by a more encompassing approach, says Dennis Kogan. He is Managing Director of S-CAPE, a specialist for digital O.R. integration solutions.

Why should a hospital embark on a digital O.R. integration project these days?

O.R. integration means deploying a platform that can aggregate clinical content from divergent data sources and interprets it to boost productivity and efficiency. There are two key benefits. The first one is improving utilization of a hospital's total capacity to conduct surgical procedures by streamlining workflow via information access and process automation. The second one is increasing focus on the patient and reducing the team's stress and fatigue from managing abundant disparate data sources. Both have tangible clinical and economic value, improving quality of care and a hospital's ability to generate profits.

When people talk about O.R. integration, they usually mean visualization and video integration. Is that what we are talking about primarily?

Over the years many endoscopy vendors have been quite active in the O.R. integration space: it is natural that their focus on video sources has become a dominant feature. While it is clear that managing medical technology in highly complex O.R. environments is a burden for the surgical team, improvements in video routing and visualization are only part of the puzzle to solve. The surgeons are in fact only one of the stakeholder groups involved. There are nurses, O.R. managers, anesthesiologists, biomedical engineering and IT staff. O.R.'s are highly interdisciplinary, and everyone plays a part in keeping the department safe and productive. That is why it is important to take a more comprehensive approach that fits into and in fact improves the workflow of all these professionals.

What else should be addressed in well-conceptualized O.R. integration projects?

A lot is about what we call the ‘fast data’ concept of truly being able to access highly relevant medical content at the point of care, at the right time. Information must flow as fast as the patient is travelling through the perioperative cycle. This can be achieved to a different degree via different means. Intelligent visualization of medical data sources is one of them, especially during the actual surgery. Equally important however is streamlining the interfaces between various department-level systems and the electronic patient record so that key data points are available and adverse events are avoided. The



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reality is that different kinds of information need to be easily retrievable at each point of the perioperative cycle. And this can be enabled by higher interoperability between IT systems and medical devices, faster and more ubiquitous documentation capabilities, as well as appropriate remote collaboration tools, to name a few.

What services does S-CAPE offer in order to help the hospital achieve the ‘holistic way’?

There is no one-size-fits-all. An O.R. integration project is an interdisciplinary effort. It is important to form a balanced team of all stakeholders, including IT experts, clinicians and administration. S-CAPE has been in the O.R. integration

market for 15 years, with more than 5000 installations as of today. We offer a tailored, consultative approach, plus a modular integration platform that serves as a fundamental layer for O.R. integration; a “LEGO-block-like” methodology and system, if you will, which we have perfected in multiple projects over the years.

What are the advantages of such an additional integration platform?

Being fast and minimizing impact on the infrastructure footprint are certainly big advantages since they significantly reduce downtime and project management for the hospital. It is definitely the case that many of the key integrated workflow tools can be deployed in retrofit to existing physical and IT infrastructure. Another big advantage is vendor-neutrality. It is not a closed off-the-shelf product. The platform can be connected and re-connected to devices and systems of any vendors today and in the future. In our opinion, this definition of being “future-proof” is as important as being able to adopt new technologies. ||

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