The DePuy Synthes Distal Radius Sterile Kit can save up to $400 per case due to the reduction in costs associated with sterilization and procedural delays.*

* Data derived from a 2017 double-blinded ethnographic study conducted at 4 US institutions. A budget impact analysis of that data showed that the use of DRSK may eliminate costs associated with sterilization and processing of reusable sets, including equipment, material and labor time.
TIME IS MONEY

As the incidence rate of wrist fractures increases\(^1\), DePuy Synthes understands the need for cost reductions, improved OR productivity, and improved efficiency.

The DePuy Synthes Distal Radius Sterile Kit Solution may reduce direct and indirect hospital costs

- An analysis at a single institution found that single use kits may eliminate a minimum of 4 hours of additional sterilization time per surgery without resulting in higher costs. These single use kits may also eliminate the additional reprocessing that could lead to accumulative savings on a national level.\(^2\)

- A recent study evaluated the use of reusable instrumentation used in distal radius fracture cases. Of the 76 cases included in the study, 3 cases were dismissed due to sterilization and instrumentation problems. Two of the dismissed cases were canceled and one was delayed. The impact of these dismissals was an interruption to the operating room (OR) line of 55 min.\(^1\) Delays such as these may result in unplanned costs to the hospital of approximately $3,410 (\$62/min x 55 min) in OR staffing fees alone.\(^3\)

- Delayed surgeries may also result in staff overtime payments. Research shows a delayed distal radius surgery requiring an hour of overtime resulted in $121 in unplanned staffing costs.\(^4\)

- The double-blinded ethnographic study showed that on average, replacing instrument sets with the DePuy Synthes Distal Radius Sterile Kit (DRSK) would eliminate 69 minutes (range 34 to 115 minutes) of labor time associated with processing reusable instruments.\(^4\)

- In a published survey of surgery staff at a university hospital in Seattle, slow instrument turnaround time was identified as “the number one barrier to a ‘perfect case’.”\(^5\)

- Missing instruments or delayed delivery of sets may cancel or delay surgical procedures, resulting in reduced caseload volumes and limited service line productivity.

- A study published in 2009 examined 50 distal radius procedures and reported missing instruments in 14% of cases causing surgical delays.\(^6\)

- In the double-blinded ethnographic study, the average reported procedural delay associated with processing reusable sets was 2.95 hours (range 1.5 to 5 hours).\(^4\)

- Delays frequently occur in the operating room and have a major effect on patient flow and resource utilization.\(^7\) A published study evaluated 1,531 surgical procedures and found more than half (51.4%) of all cases had at least one delay.\(^3\)

- Surgical delays impact timing of subsequent cases causing a “domino effect” delaying cases later in the day.\(^7\) Even intra-operative delays just 10 minutes long may cost a hospital over $130,000 per year.\(^7\)
SAVING STEPS MEANS SAVING TIME

Single-Use Kits improve efficiency, reduce costs, and minimize delays.²,⁸

STEPS TAKEN

**With DRSK**

1. Surgery scheduled
2. Implants and instruments ordered for case
3. Sterile kits delivered to hospital
4. Sterile product transported to OR
5. Sterile kit is checked for sterility
6. Implants and instruments are unpacked for use in surgery
7. Used implants are logged and catalog numbers recorded for reordering

**Without DRSK**

1. Surgery scheduled
2. Implants and instruments ordered for case
3. Trays delivered to hospital
4. Trays are washed
5. Trays are checked for completeness
6. Trays are sterilized
7. Sterile product transported to OR
8. Tray is checked for sterility (blue wrap tears and indicators)
9. Implants and instruments are unpacked for use in surgery
10. Used implants are logged and catalog numbers recorded for reordering
11. Used trays are transported to SPD
12. Used instruments are hand washed
13. Tray is machine washed
14. Tray is checked for completeness
15. Tray is sterilized
16. Tray is moved to SPD storage to be collected by sales consultant

Distal Radius Sterile Kit was designed to **eliminate over 50% of the steps** associated with reusable sets

7 STEPS

16 STEPS
The OR’s motto is, “if in doubt, throw it out” … If you think something’s contaminated, you’ve got to reprocess it. [Even] if it takes time, and you have to hold the patient.”

- Quality Assurance Manager

“…most of the [trays], we’ve got backups for, but we can’t for every single fracture tray, nobody can afford that… And it’s happened, where we had to hold [the patient] up 2-3 hours just to make sure [the tray is] sterilized. That’s the most important thing. You don’t cut corners.”

- Quality Assurance Manager

What happens when you find a problem with a conventional set?

“It’s devastating, that’s why we don’t even bring a patient back into the room until we’ve checked every tray. And that delays the patient. It doesn’t happen a lot, but when it happens that one time, it’s enough.”

- Clinical Nurse Coordinator

The Solution

Distal Radius Sterile Kit
Optimizing work flow efficiency

- Complete and Ready to Use
- Streamlined Instrumentation
- Promote Economic Savings by Avoiding Sterilization Costs
- Designed for Consistency
- Comprehensive Surgical Options
REFERENCES:


