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Spine and Orthopedic Practice Management

Texas Back Institute makes plans to resume elective surgeries with 400-case backlog

Laura Dyrda - Monday, April 27th, 2020

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Texas Back Institute in Plano is preparing for elective spine surgeries and pain injections to resume in the state.

Isador Lieberman, MD, the institute's president, outlined its strategy to connect with patients and ramp up procedures while facing a backlog of about 400 surgical cases.

Question: What is your strategy for ramping surgery back up?

Dr. IsadorLieberman: I would not be exaggerating if I did not state that we are enthusiastic about reengaging with our patients. With that in mind, the first strategy is ensuring the health and safety of our patients and staff. We had multiple strategy group meetings to review operations on how to get patients back into the clinic and how to capitalize on what we learned with telemedicine. We have implemented a socially distanced check-in process, a screening and PPE strategy for patients and staff, and a sanitation strategy after each patient encounter.

We have also tailored the clinic schedules to accommodate both face-to-face encounters and telemedicine encounters. Once we were content with the clinic plans, we tackled the surgical ramp-up. All the surgeons and interventionalists provided input. We decided to stratify cases into low-risk and high-risk, regarding COVID-19 status. We are fortunate in that we have area hospitals that are being designated COVID-19-free, where we plan to provide surgical services to the low-risk group. We are screening all patients a minimum of 48 hours prior to surgery, and they are being asked to continue isolation until their arrival for surgery. All of these strategies are fluid, and we do expect changes as we encounter new regulations and/or clinical COVID-related issues.

Q: What is the biggest challenge for safety of patients and staff?

IL: The biggest challenge, and what consumed the majority of our strategy time, was exactly how to implement a socially distanced check-in process, a screening and PPE strategy for patients and staff, and a sanitation strategy after each patient encounter. We are concerned about manpower issues, as this new strategy is labor-intensive. In addition, we are concerned about availability of PPE and sanitation resources.

Q: What is your current backlog of surgical cases, and how do you plan to recover financially?

IL: At Texas Back Institute, we have 19 surgeons and three interventionalists. Over the last four weeks, we have continued with a robust telemedicine program. We evaluated well over 600 patients via telehealth methods. Some of our cases from March and April were postponed. Despite that, we estimate a backlog of over 400 surgical cases and over 100 diagnostic or therapeutic injection procedures. The financial recovery will take time. However, I am proud of the TBI team, as we were prepared and acted early to minimize the financial impact on the practice.

Q: What will your practice look like a year from now?

IL: One year from now, every aspect of healthcare delivery will have changed. I suspect we will all have a new respect for social distancing and PPE. I suspect we will be more reliant on telehealth methods, as we now realize the clinical and economic value to all the stakeholders. I also suspect we will see a small decrease in surgical case volume for a 12- to 18-month period, as some patients and some surgeons will be reluctant to accept the risk of a COVID infection during the perioperative period.

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