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Low-cost operations with orthopaedic outcomes

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High quality care for patients with musculoskeletal problems requires making outcomes-related decisions on three levels: operational, tactical and strategic. Operational decisions are related to day-to-day provision of care to particular patients; tracking outcomes helps selecting the most appropriate care and adjust it as needed. Tactical decisions include quality improvement initiatives that span from one week to one year; selecting groups of patients with best or worst outcomes helps to adjust the process of care for new patients. In this context, strategic decisions refer to observational and controlled studies that usually last for more than one year and target development of evidence-based recommendations. Existing information systems (IS) are expected to support all three levels of outcomes-related activities. They operate with many types of primary and secondary data that could be useful to all of them. Nevertheless, due to different time span and existing administrative structure of healthcare organizations, corresponding IS are built independently with only a little overlap. It leads to repeatedly collecting, storing and analyzing the same information and ends up with increased cost of operations. Direct integration of all three activities under the umbrella of all-purpose EMR/EHR is possible only theoretically - increasing complexity of the already extremely complex IS inevitably lowers friendliness of the user interface and manageability of the backend. It is expected that an orthopedic add-on to all-purpose EMR/EHR supports operational, tactical and strategic outcomes-related activities at much lower cost that a straight sum of three types of systems.

Biography

Boris Bershadsky has completed his MSEE in Biomedical Engineering, PhD in Pharmacology and Biostatistics and Postdoctoral studies in Higher Mathematics in St. Petersburg, Russia. During the last twenty years he held various executive positions in HIT companies, consulted multiple pharmaceutical organizations and taught graduate courses in primary and secondary data operations in healthcare. He runs Clinical Outcomes Research Centre at Orthopaedic and Rheumatologic Institute, Cleveland Clinic. Currently he is the Director of Outcomes Analytics at School of Public Health and Adjunct Professor at Medical School, University of Minnesota. He has published more than 80 peer-reviewed papers.

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