

PHYSICIAN TESTIMONIAL: THE AVANOS EDUCATION PROGRAMS

By Adam Myers MD, FACHE, CHCQM, CPHRM

Texas Health Resources (THR) comprises 27 hospitals earning \$4 billion in annual revenues. I serve as chief medical officer and chief operations officer (CMO and COO) for Texas Health Physicians Group (THPG), a subsidiary of THR that includes a large physician network of more than 2,500 physicians practicing in more than 300 locations. THPG performs hip, knee and spine orthopedic procedures using the Avanos Medical ON-Q* Pain Relief System - an innovative, non-narcotic pain pump that provides over three days of predictable pain relief.^{1, 2, 3, 4, 5}

My approach to orthopedic pain treatment is to use regional (not systemic or whole-body) pain treatment. Avanos offers physicians, medical leadership and administrators excellent clinical support and training - an element of the full ON-Q* package that has made it a regional pain treatment of choice for our practice.

PERSONAL AND CLINICAL EXPERIENCE WITH ON-Q*

In the days before I became an administrator, I was a full-time practicing obstetrician. A patient brought ON-Q* to my attention. She had three children, and all three pregnancies resulted in pain from Caesarean sections. Each was treated differently: the first, with opioids, which developed into an addiction. With her second pregnancy, she was determined to avoid opioids at all costs, and treated her pain with spinal anesthesia during the delivery and ice packs/nonsteroidal anti-inflammatory drugs afterward. The recovery was long, painfully uncomfortable, and I believe impeded her bonding with her baby.

Before she had her third baby, she brought up the idea of using ON-Q* after doing some research - I had never heard of it before. With ON-Q*, her pain was more manageable, she avoided opioids, and she moved more freely and nursed easily. Seeing those differences in the same patient - it was like night and day - over the course

of three pregnancies led me to use it regularly on my own patients whenever I could: I became a true believer.

Regional analgesia with ON-Q* may lead to faster, less painful recoveries.^{6,7}

By that, I mean I've used ON-Q* in multiple orthopedic surgeries I've undergone myself. Old injuries from athletics I participated in during younger days led to multiple knee surgeries as an adult, and I tried ON-Q*. For me, too, recovering with narcotic pain management without ON-Q* was like night and day. With ON-Q*, I was ambulatory more quickly than with narcotics alone, and experienced less discomfort because of its local pain relief - not systemic, whole-body sedation.

Having performed and observed thousands of patients who have undergone surgeries, whose recoveries included narcotics or regional analgesia - and experienced it both ways myself - it's clear that regional analgesia with ON-Q* may lead to faster, less painful recoveries.^{6,7}

ON-Q* EDUCATION AND TRAINING EASE HEALTH SYSTEM ADOPTION

In my leadership position and consulting for other health systems, I advocate pain management tools that promote the earliest ambulation - and accomplishing that typically includes regional pain treatment.

But clinical results are one thing: as a CMO, I know that physicians need training and support to learn how to use devices effectively. Avanos support has been essential in encouraging the adoption of ON-Q* at our facility - I've found that it makes surgeons more comfortable using it with their patients.

Avanos Medical offers deep, detailed hands-on training to support anesthesiologists: at their training labs and peer-to-peer educational centers, they teach the necessary ultrasound-guided insertion techniques for the catheters, simulated on live models. They also afford the opportunity to practice on cadavers, showing surgeons the exact anatomy on real tissue, with experts on hand guiding them on how to do it.

FOR HEALTH SYSTEMS, I FEEL ON-Q* IS WORTH THE INVESTMENT BECAUSE OF SEVERAL FACTORS:

- The general U.S. healthcare trend toward narcotics – a pattern of “patient reports pain, patient receives opioids, patient continues to report pain, patient continues to receive opioids until pain is gone” – is an irresponsible path that I feel has played a role in our national opioid addiction crisis. Regional pain treatments may be a way to break this cycle.
- ON-Q* can make recovery more manageable⁸ and is a great tool to have in the clinical toolbox for physicians.
- The Avanos educational support ensures physicians are comfortable with ON-Q*, and helps them

understand how to talk about it with patients and administrators at their facilities.

- Avanos offers patients printed and online educational videos, and a 24-hour hotline if they have questions during the recovery process.

Health system medical leaders need to see the big picture of such training programs, with regard to long-term clinical benefits. They often appreciate that the Avanos ON-Q* training also covers finer business-oriented points that can potentially make ON-Q* more sustainable in clinical workflows – such as how to talk with patients about ON-Q* and explain benefits, how to talk to administrators about the effectiveness and benefits of ON-Q* for quality care and patient recovery, and how to prepare documentation for getting appropriate reimbursements.

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