

## Editorial

# Online shopping for ambulatory surgery: let the buyer beware!

As government agencies, industry and healthcare payors attempt to contain healthcare costs, there will be increasing pressure to utilize an ever expanding number of non-hospital settings to perform more complex ambulatory surgery procedures on an ever increasing number of patients with health problems. This is already occurring in the United States as ambulatory facilities and their professional staffs are being constantly challenged to merge excellence of care with lowering of cost. Additionally, on the unregulated internet, entrepreneurs are developing sites where patients and surgeons can match needs and services, creating a virtual bidding war.

Prior to 1982, in developed countries, nearly all surgical care was managed in the hospital. In the United States, 80% of all surgery was performed on hospitalized patients; of the 20% that were day surgery procedures only 1% were in freestanding (not attached to a hospital) facilities and 1% in physician's offices (office-based surgery). Today we are fast approaching 75% being day surgery procedures (17% freestanding; 14% office-based). By the year 2005, it is projected that 82% of total surgical volume in the United States will be in an ambulatory setting, of that number, 24% will be in physician's offices.

Question: are the vast majority of ambulatory facilities able to provide safe and appropriate perioperative care for all patients and procedures? Whereas we expect safety regulations and standards for hospitals and freestanding ambulatory centers, the fastest growing segment of ambulatory surgical care, operating rooms within a physician's office, for the most part, remain

without guidelines or accountability to any regulatory agency.

In the January 2000 issue of the *Journal of Plastic and Reconstructive Surgery*, data from an independent survey revealed one death for every 5000 plus liposuction procedures performed in a physician's office. If this doesn't raise a warning flag, then the heading of an article that appeared in the *American Medical News* (an American Medical Association newsmagazine) should: 'Website plans to auction plastic surgery services'. Consumers will be able to solicit bids from physicians over the internet for elective cosmetic surgery. The online service does not check the physician's credentials or provide any verification of background or experience. An internet link is provided to the physician's medical licensing agency; it's up to the consumer to gather the necessary information to make an informed decision. Let the consumer beware!

The office setting cannot become a safe haven for physicians to perform procedures for which they could not have privileges in a hospital or a freestanding center. We have a responsibility to our patients to see that there is no increased risk by maintaining similar standards of care, similar standards of patient safety, regardless of whether a procedure is performed in a hospital, a freestanding facility, or in a physician's office.

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