



# SURGICAL EXCELLENCE *with Compassion*





Tallgrass Surgical Center in Topeka, Kansas, offers a broad mix of services to patients in the northeast part of the state, including some who come from more than 60 miles away. Patients who have had surgery at the ASC say it is “awesome,” “fantastic” and “perfect in every way.” Staff and physicians at the ASC agree.

“The staff’s philosophy here is something we call the ‘Wow!’ factor,” says Tallgrass Surgical Center Administrator Nancy Henry. “They want our patients to leave our center saying, ‘Wow! That was the best care I’ve ever had!’ And they all strive to provide that kind of care to all of our patients.”

One of the keys to being able to offer that kind of service, says Henry, is hiring the right staff. To build its team, Tallgrass has relied mostly on referrals.

“People know about Tallgrass,” says Henry. “We have created such a positive work environment that our reputation draws people in. It’s just a fun place to work, yet we remain very professional and we provide quality care. The physicians who work here are also a draw

to our center. Sometimes people who come to us have had a friend or family member that had a procedure here. When they witness the care we provide, they want to be a part of it.”

Another key to great staff, says Henry, is providing comprehensive training when new staff are hired. Before they even begin to work at the ASC, all new nursing staff at Tallgrass undergo one-on-one safety training provided by the ASC’s designated safety officer, who is also the ASC’s OR charge nurse responsible for knowing and overseeing the enforcement of Occupational Safety and Health Administration and Association of periOperative Registered Nurses guidelines, conducting quarterly fire and tornado drills, addressing situations involving employee injuries, disaster preparedness at the ASC, as now

required in Medicare's Conditions for Coverage, and more. Once at work, all staff are assigned a preceptor who spends the next eight weeks assisting with their training in all of the ASC's clinical areas and making certain they complete all the training listed on a training checklist the ASC developed (see the form on page 13).

Staff at Tallgrass, says Henry, are involved in making all of the decisions that affect their work at the ASC and empowered to make decisions on their own whenever possible. They also get a lot of positive feedback for all they do each day from both the managers and physicians at the ASC. Another incentive the ASC uses to retain top-quality staff is a bonus schedule that recognizes longevity with the ASC. Two-thirds of each employee's bonus is paid based on a percentage of the employee's salary and one-third based on the length of time the employee has been with the ASC.

At the same time, Henry and Tallgrass Director of Nursing Jane Alderson, RN, say they are not afraid to pull staff aside to discuss situations that aren't going as well as they should be. "People may take a little bit of time to get used to our approach," says Henry, "but Jane and I work very closely together. We are always very honest and we always deliver these messages along with the message that we want to do the best thing for our physicians and for the center and our patients. It's never punitive. It's 'Let's work together to overcome this, be the best we can be and go above and beyond.' It's that gold standard. Bring your 'A game.' We don't like mediocrity."

"That Tallgrass stamp, especially in a small community like Topeka, is something that all of us at this ASC are very proud of," says Henry. "It's a reflection of who we are and where we work. When

## Kurt R. Knappenberger, MD President



Knappenberger is a Board-certified orthopedic surgeon, a fellow of the American Academy of Orthopaedic Surgeons and one of the founding fathers of Tallgrass Surgical Center. His special surgical interests involve total joint, arthroscopy and fracture care, and in 2002, the Consumers' Research Council of America recognized him as one of America's top surgeons.

Each year during September, Knappenberger sets aside a period of time when he doesn't schedule any patients at the ASC. That's when he heads to Winfield, Kansas, to attend the Walnut Valley Festival, an internationally recognized celebration of folk and bluegrass music. During the rest of the year, Knappenberger pursues his passion for bluegrass music playing guitar with friends and colleagues. He also makes time to brew his own beer.

A Kansas native, Knappenberger attended the University of Kansas School of Medicine in Kansas City, Kansas, and Wichita, and completed his orthopedic surgery residency at the St. Francis Regional Medical Center and St. Louis Shriners Hospital in St. Louis.

you work here, you just feel a personal commitment to everything we stand for and personal ownership of everything that happens here. Everybody who works here must believe in our mission statement: Surgical Excellence with Compassion."

## THE BASICS

**Opened:** 2002

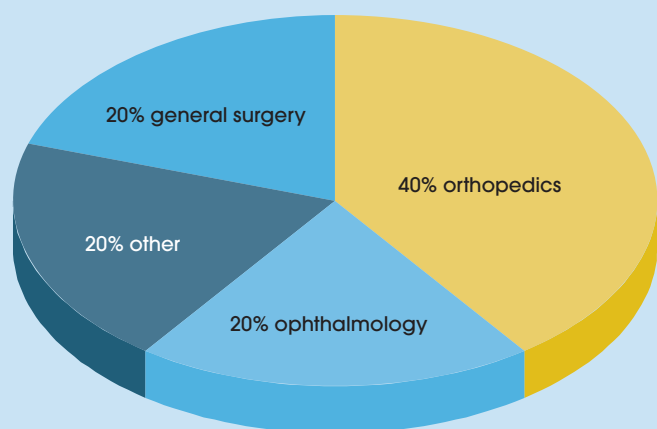
**Facility:** 12,500 sq. ft., 4 ORs; 12 bays used for both pre-op and recovery care, 2 overnight rooms

**Payer Mix:** Blue Cross Blue Shield of Kansas: 40%, Medicare: 25%, Other 35%

**Number of Credentialed Physicians:** 58

**Ownership:** 100% physician owned

## Case Mix by Procedure Codes in 2009



## KEEPING CURRENT

"We do a lot of reading," says Henry, describing how Tallgrass keeps on top of the ever-changing regulatory policies that affect ASCs. The ASC also relies heavily on the ASC Association, taking part in its annual meetings each year, participating in its Outcomes Monitoring Project, incorporating its salary survey and benchmarking data into the ASC's daily operations, carefully reviewing each issue of *ASC Focus*, taking advantage of the seminars and webinars the association offers and frequently visiting the association's web site.

"The association's web site is a reliable source of information," says Henry. "I feel like when information is there, I can trust it. I don't have any hesitation in forwarding that information to my physician owners or to my staff." Tallgrass staff are also active in Kansas's state ASC association, which the ASC Association now manages.

To make sure staff have instant access to up-to-date information about the ASC's policies and procedures, the ASC gave one member of its staff responsibility for organizing all of those documents into a comprehensive guide available on the ASC's shared drive. "What she has done in the last year is just phenomenal," says Alderson, "because now every policy has a number and there's a table of contents with hyperlinks so when you find the policy you're looking for there, you can click on the hyperlink and it takes you right to that policy. Anybody on staff can access these policies at any time."

Any time the ASC's policies or procedures change, the changes are routed to the ASC's policy coordinator. She creates a list of revisions and additions with short narratives explaining exactly what



changed and why. Each January, she gives that list to the ASC's Board so that all of the ASC's physicians know and understand the updates. Additionally, the ASC's medical director is notified immediately about any changes in the ASC's medical policies.

## COMPLIANCE UPDATES

To make certain the ASC is doing all it can to comply with recent changes in its accreditation standards and Medicare's Conditions for Coverage, Tallgrass has formed a committee composed of the ASC's director of nursing, policy coordinator, operating room (OR) charge nurse, pre-op and post-anesthesia care unit charge nurse and administrator. The committee tries to meet weekly to review new regulatory guidelines and standards that apply to the ASC. Participants in these meetings comb through the guidelines carefully looking for any changes the ASC needs to make in response. At monthly staff meetings, the committee conveys information about those changes to all staff.

Over time, the ASC plans to perform quality improvement studies related to the new and revised guidelines it needs to meet. It is also reviewing all of the ASC's contracts to make sure they comply with Medicare's new guidelines, changes in the Health Insurance Portability and Accountability Act adopted by Congress earlier this year and the Red Flags Rule announced by the Federal Trade Commission recently. For assistance, the ASC will likely rely on information from the ASC Association, some seminars available from the American Health Information Management Association and a privacy and security task force coordinated by a group of small hospitals in the region. The ASC was invited to participate in that group thanks to some of its staff's past employment relationships.

## Infection Control

"We have always had a designated person for infection control," says Alderson, as she discusses Medicare's new guidelines in that area. "She tracks our infections, does the investigations and reviews and makes recommendations for risk management." Although that person has always attended some sort of infection control training in the state, adds Alderson, the ASC is looking for new opportunities for this nurse to get additional training. "We're very big on education here at Tallgrass," she says.

Since all of the nursing staff at Tallgrass process their own instruments, the ASC takes extra care to make certain they understand the proper procedures to follow and ensure that the ASC's equipment processing techniques meet the sterility standards required. One nurse and one surgical technician at Tallgrass are certified in central

NEW EMPLOYEE CHECKLIST				
<b>Green Personnel File</b>				
SW	_____	Employee Master Form	To Accountant	
JANH	_____	Application		
JANH	_____	Reference check		
SW	_____	W-4 & K-4	Fax W-4 to State of Kansas/Accountant	
SW	_____	Direct deposit form	To Accountant	
SW	_____	Copy of void check	To Accountant	
JANH	_____	Job Description/Acknowledgement	Need 2 signatures	
JA	_____	ACLS (RN)		
JA	_____	BLS (All Clinical)		
JA	_____	License		
JA	_____	Nurse's Aid Registry (CNA)	<a href="http://www.kanurseaidregistry.org">www.kanurseaidregistry.org</a>	Input SS# and first name only
JANH	_____	Orientation Checklist		
SW	_____	Background Check Authorization		
NH	_____	OIG Database Check	<a href="http://www.oig.hhs.gov/fraud/exclusions/listofexcluded">www.oig.hhs.gov/fraud/exclusions/listofexcluded</a>	
NH	_____	Background Check	<a href="http://www.usinvestigations.com">www.usinvestigations.com</a>	
NH	_____	GSA Debarment Check	<a href="http://www.epis.gov">www.epis.gov</a>	
NH	_____	Sex Offender Security & Confidentiality Agreement	<a href="http://www.accesskansas.com">www.accesskansas.com</a>	
SW	_____	Receipt of Employee Handbook	Give Handbook to employee	
SW	_____	Substance Abuse Forms (A,B,C)		
JA	_____	Bloodborne Exposure Identification		
SW	_____	Life Insurance beneficiary form	Notify Life Insurance Co - 90 days	First day of month after 90 days
SW	_____	Health Ins enrollment or waiver	If enrolled - Health Ins & Accountant	First day of month or 1/1 open
SW	_____	AFLAC enrollment or waiver	If enrolled - AFLAC & Accountant	First day of month or 1/1 open
<b>Mandatory Competency File</b>				
JA	_____	Mandatory Competencies	<a href="http://www.learn.healthstream.com/tallgrass">www.learn.healthstream.com/tallgrass</a>	
NH	_____	Mandatory Risk Mgmt Competency		
JA	_____	Post-op Complications		
JA	_____	Patient Transfer		
JA	_____	Sensitivity Training		
* CR/MR	_____	Safety Training	Check schedule, either can perform	
<b>Manila Health File</b>				
* JA	_____	TB Test (All)	Go to Immediate Care	
* JA	_____	Physical (All)	Go to Immediate Care	
* JA	_____	Drug Test (All)	Go to Immediate Care	
* JA	_____	Hepatitis (Clinical)	Go to Immediate Care	
* JA	_____	Hepatitis B Immunization Form		
* JA	_____	Immunization History (All)		
<b>Other</b>				
SW	_____	Input in AdvantX	Assign User Password	user table, systems/user & personnel/staff
SW	_____	Legiant	Set up on computer and hand punch	
SW	_____	Legiant	Notify for monthly maintenance invoice	
* SW	_____	I-9 & Driver's License & SS Card	File in I-9 book	
SW	_____	Cafeteria plan	File in Cafeteria plan file/Accountant	Eligible on first paycheck
SW	_____	401K	401 K file/Accountant/Plan Rep	Note on calendar 7/1, 1/1
SW	_____	Bonus - Election of 401K	File in Bonus file/Accountant	
JA	_____	Injury/Accident Procedures		
SW	_____	Security Password to Building	E-mail IT	
SW	_____	E-mail / Computer Password	E-mail IT	
SW	_____	Date of Hire	Notify Supervisors for 90-day & annual evals	
SW	_____	Birthday List / Welcome Gift	Notify TGIF Committee	
SW	_____	Drug Screening Pool	Add name to monthly drawing box	
SW	_____	Name Badge		
SW	_____	Laminated Security Card		
SW/NH	_____	Key Management Form	Filed in black binder with Privacy/Sec Officer	
JANH	_____	Building Tour / Staff Introductions		
SW	_____	Message on Erase Board	Notify employees of new hire	
AW	_____	Scrubs		

July 27, 2009

processing. Both know all of the specific sterilization requirements related to all of the ASC's equipment and instruments, and both train and assist other staff as necessary. All OR staff are required to complete an online competency tool each month to ensure they are up to date with any new standards and practices in central process-

## Nancy Henry, RHIA, CHP, CPHRM Administrator



Henry came to Tallgrass Surgical Center in 2005 with 14 years of experience at a critical access hospital where she coordinated everything from the hospital's risk management and quality improvement programs to its medical staff and privacy program. The move to Tallgrass Surgical Center was an opportunity to learn new, exciting things, she says. "It's one of the best decisions I've ever made. The staff and physicians are wonderful, and I certainly appreciate the privilege to serve as their administrator." With the assistance and support of the physicians and staff, she adds, the ASC has been able to expand the number of its ORs, reduce costs, utilize its employees more effectively, promote staff education, offer additional financing options for patients, achieve accreditation from the Accreditation Association for Ambulatory Health Care and recognition from the American Society for Metabolic & Bariatric Surgery as a Bariatric Surgery Center of Excellence, and become an overall, more organized ASC.

Henry is a registered health information administrator (RHIA). She is also certified in health care privacy (CHP) and health care risk management (CPHRM). In July, Henry was elected secretary of the Kansas Association of Ambulatory Surgery Centers. She also participates in the Kansas Health Information Management Association and the Kansas Association of Risk and Quality Management.

Henry holds an associate's degree in applied science from Washburn University and a bachelor's degree in business administration with a focus in health care from Ottawa University. She lives with her husband and four children who are very involved in extracurricular activities. Working for Tallgrass Surgical Center, she says, allows her the flexibility she needs to balance her home and work life.

ing. The ASC is also working to have all of its OR staff credentialed in central processing soon.

### Patient Notifications

After Medicare added new patient notification standards to the Conditions for Coverage this year, the ASC developed a patient rights statement and an advance directive policy and then distributed printed copies of that information to the schedulers in the physicians' offices with which the ASC works. The schedulers, who were already giving the ASC's patients an information brochure about Tallgrass now hand those patients the additional information as well. As the patients check into the ASC, staff ask them to sign a document saying they received that information before the day of their procedure.

The ASC has also developed a separate policy for add-on cases. The ASC's nurses make certain physicians sign a statement to demonstrate the necessity of the same-day care. To self-audit that part



Anesthesiologist Orville Wetzel, MD, and operating room nurse Stephanie Selk, RN

of its patient notification process over time, the ASC has built an occurrence code into its management software that will enable the ASC to produce a report showing which patients underwent surgery on the same day their physician scheduled that surgery. ASC staff will then randomly select some of those patient charts to make certain the required documentation is included there.

**TALLGRASS SURGICAL CENTER, LLC  
NEW PROCEDURE CHECKLIST**

<b>SCHEDULER:</b>	
Patient name: _____	DOS: _____
New procedure code: _____	Physician: _____
Description: _____	Payer: _____
Revised code: _____	Date: _____
Signature: _____	
<b>BUSINESS OFFICE:</b>	
ASC approved code: Y N	
If no, notify scheduler and forward form to Administrator	
If yes, notify scheduler and	
Add code to Procedure Table	
Pull code from CPT Code Table to Procedure Table	
Attach revenue code	
Enter charge – work with DON and MM to establish \$ _____	
Identify type of service	
Signature: _____	Date: _____
<b>CREDENTIALING:</b>	
Physician privileged for procedure requested: Y N	
If no, physician to complete request for privilege	
Requires signature of Medical Director	
Add procedure to physician in AdvantX	
Signature: _____	Date: _____
<b>MATERIALS MANAGEMENT/DIRECTOR OF NURSING</b>	
Determine cost: Supply \$ _____	Implant: \$ _____ Indirect: \$ _____
Total: \$ _____	
Create preference card	
Create equipment list	
Communicate new procedure to OR supervisor	
Type of anesthetic: _____	OR or Procedure room (Circle)
Notify scheduler of anesthetic & type of room	
Verify equipment available	
Signature: _____	Date: _____
<b>PACU:</b>	
Obtain physician's orders	
Create discharge instructions	
Signature: _____	Date: _____
Add to approved procedure policy (Erica/Jane)	
Signature: _____	Date: _____

Form the ASC uses to add new procedures





Orthopedist Michael Schmidt, MD, and surgical scrub tech Bret Ledbetter



General surgeons Carlyle Dunshee, II, MD, and Sidney Hu, MD

## AN ASSIST FROM TECHNOLOGY

Whether scheduling cases, filing insurance claims, generating reports or attempting to stay on top of all the other tasks they manage each day, Tallgrass staff try to use every feature of the management software the ASC installed in 2002 to make sure the ASC is running smoothly and alert them if something is not as it should be. “It starts with our physician preference cards,” says Alderson. “They weren’t

very detailed when we first opened, and as we’ve grown and learned to use the software, we’ve found that the preference card piece of the system is key to inventory depletion, scheduling, identifying equipment conflicts, case costing and more.”

The ASC has built conflict checks into its scheduling program so that the system automatically notifies users when potential conflicts in equipment requests, timing, credentialing/privileging and other



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**Jane Alderson, RN, BSN**  
**Director of Nursing**



Alderson became the director of nursing at the Tallgrass Surgical Center in 2004. The 16 years of nursing experience she brought with her to the role included a short stint as a scrub nurse for an orthopedics practice, several years as a surgical staff nurse and, then, the cardiovascular heart coordinator at Stormont-Vail Regional Health Center in Topeka and three years as the director of surgery at Holton Community Hospital in Holton, Kansas. One important change she helped institute at Tallgrass soon after she arrived, she says, was the cross-training of the entire nursing staff. "They still have a primary role, whether that is as an operating room (OR) nurse, a pre-op nurse or a recovery room nurse" says Alderson, "but now they also have the ability to function in all phases of nursing at the ASC. That has helped tremendously to give us the flexibility we need to manipulate our staffing to fit our needs each day."

Alderson also played a key role in designing the ASC's perioperative nurse educator position and in bringing bariatric surgery into the ASC. Her daily responsibilities include everything from coordinating the daily OR schedule to overseeing the ASC's quality improvement program and helping to prepare the various financial reports and cost analyses that the ASC's Board requests. She also works closely with ASC Administrator Nancy Henry each day, steps in as needed to provide direct patient care and serves as the ASC's bariatric coordinator. She was integral in helping the ASC obtain designation as an American Society for Metabolic & Bariatric Surgery Bariatric Surgery Center of Excellence recently and in bringing uni-compartmental knee surgery into the ASC.

Alderson holds a bachelor of science degree in nursing from Wichita State University and a bachelor of life sciences degree from Kansas State University. Most of her free time, she says, she spends with her family, which includes three children, ranging in age from 5 to 15.

operational resources occur. Clinical staff keep a careful eye on the schedule through the day so they can make whatever minute-by-minute adjustments are needed, and when cases are running ahead of schedule on a particular day, will call patients to invite them to come into the ASC earlier than expected for their procedure that day.

The ASC case costs nearly every case it performs. Utilizing these data reports, staff can identify in advance cases where reimbursement and costs may not be aligned. After a case is performed, billers sometimes identify new codes and rarely used codes that trigger a case costing review or an update of the ASC's existing case costing data for a certain procedure. Thanks to the computerized notifications and its experienced billing and coding staff, the ASC is quick to identify and follow up with the ASC's insurance providers each time a discrepancy in payments and the ASC's contract occurs.

When a new physician is coming to the ASC, staff prepares by requesting a copy of the physician's preference card from another surgical facility where the physician has performed procedures in the past. They also obtain orders and discharge instructions and meet with the physician's office scheduler so they can enter all

the information the ASC needs into its software program before that physician ever performs a case at Tallgrass. (A copy of the form the ASC uses to request new physician information appears below.) "Our entire staff gets involved and does an analysis of cost, reimbursement and feasibility," says Henry. Before the physician's first day, staff also provide the physician with personalized dictation and building codes that enable him or her to access the ASC's dictation service and enter the facility as needed while tracking the physician's individual use of these services.

## Electronic Time Keeping

Last March, the ASC replaced the manual punch system it used to track employee hours with an electronic timekeeping system. The new system allows staff to run reports without making any manual calculations and has proven popular with both managers and staff. Because the new timekeeping system also interfaces with Microsoft® Office Outlook®, the ASC's employees can log on to the system from home to view the total number of hours they have worked in a week, see who is on vacation, request vacation and even get their supervisor's approval for vacation online. Staff like the idea that they can go online and immediately see a record of their paid time off accounts. Managers say that since the system was put in place and staff are able to manage their own hours, overtime hours, which were already low in comparison to national benchmarks, have continued to decrease significantly.

TALLGRASS SURGICAL CENTER, LLC NEW PHYSICIAN FACILITY CHECKLIST		
PHYSICIAN/PROVIDER:		
INITIAL/DATE	TASK	RESPONSIBLE PARTY
	<b>CREDENTIALING</b> <input type="checkbox"/> Application complete <input type="checkbox"/> Add to Advantix - privileges updated & credentialing module complete	Erica
	<b>TRANSCRIPTION</b> <input type="checkbox"/> Notify home transcriptionist <input type="checkbox"/> Assign dictation number <input type="checkbox"/> Provide Dictation card	
	<b>CODING/CHARGES</b> <input type="checkbox"/> List of procedures doctor will be performing here <input type="checkbox"/> Check to see if there are non-covered procedures & educate provider	Montra
	<b>MATERIALS MANAGEMENT</b> <input type="checkbox"/> Complete list of items needed with reference numbers and manufacturer <input type="checkbox"/> Glove size <input type="checkbox"/> Former preference card from another facility <input type="checkbox"/> Any special request pertaining to OR	Amy/Jane
	<b>SCHEDULING</b> <input type="checkbox"/> Block time <input type="checkbox"/> Block time release 5 days out <input type="checkbox"/> Paperwork required within 24 hours and what paperwork is required <input type="checkbox"/> Extension directory <input type="checkbox"/> Introduction to their scheduler	Becky
	<b>BUILDING CODE</b> <input type="checkbox"/> Have added to building code <input type="checkbox"/> Add to All Staff Mtg Agenda <input type="checkbox"/> Email Nurse Managers	Nancy
	<b>ORIENTATION</b> <input type="checkbox"/> Lockers <input type="checkbox"/> Scrubs <input type="checkbox"/> Equipment/Instruments <input type="checkbox"/> Orders <input type="checkbox"/> Reimbursement-Implant <input type="checkbox"/> Education	Jane
	<b>REGISTRATION</b> <input type="checkbox"/> Order Name Signs	Jill





Staff in December 2008



Ophthalmologist Cindy Penzler, MD

### EMR

Although it has investigated some options, Tallgrass has not yet invested in an electronic medical records (EMR) system, preferring instead to spend more time investigating the systems that are available and the ways those systems would be able to interface with any EMR systems the ASC's physicians might obtain.

### PRE- AND POST-OPERATIVE ASSISTANCE FOR PATIENTS

To help patients prepare for surgery and cut down on last-minute cancellations, Tallgrass created a perioperative nurse educator position. The nurse who fills that position makes certain that every patient is prepared for surgery on the day he or she arrives

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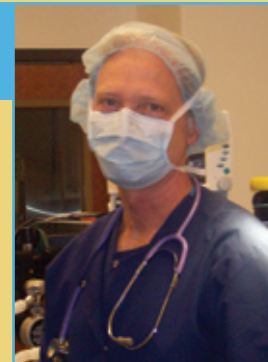
William E. Gitchell, MD  
Anesthesiologist and Medical Director

Before becoming the medical director at Tallgrass, Gitchell spent 20 years working in a local hospital. "I'm very ready to defend hospitals for the troubles they have," he says, "because we worked as hard as we could. I'm also delighted to be in an ASC because here we have a unique opportunity to give people an experience the hospitals simply can not because of all the many kinds of things they have to do."

For many years, Gitchell spent one or two weeks each year contributing his anesthesiology services and expertise to a hospital on the Mosquito Coast in Honduras. "These people were living in a situation where they couldn't get care," says Gitchell. "There'd be a 50-year-old person who had a hernia that they were just living with, and the jungle clinic could give them some narcotic and help them reduce it, but then they'd have to come back with it again. These people couldn't afford transportation to get into the cities to have those things done, so I got to help with some of that. I also got to see what health care outside the United States looks like and recognize what a wonderful health care system we have."

A few years back, Gitchell and his daughter, now a fine arts major at the University of Kansas, started making their own glass beads. Eventually, he built a shop in his basement equipped with propane oxygen torches, lots of ventilation and good lighting. Today, he routinely supplies his daughter with the beads she uses to create lamps, jewelry and more.

Gitchell received his medical degree from the University of Kansas School of Medicine in Kansas City, Kansas, spent one year in primary care internal medicine at the University of Arkansas for Health Sciences in Little Rock and completed his anesthesiology residency at the University of Kansas for Health Sciences and Hospital in Kansas City, Kansas. He is a diplomate of the American Board of Anesthesiology.



at the ASC. She also makes certain all of necessary testing and evaluations needed for each patient have been conducted and all of the documentation required is complete.

Tallgrass also maintains an easy-to-navigate web site ([www.tallgrass-topeka.com](http://www.tallgrass-topeka.com)) that it updates regularly. The site includes profiles of the

physicians who practice at the ASC, information about the procedures the ASC performs, patient forms, the ASC's patients' rights notice, a discussion of pediatric anesthesia, links to other important web sites and responses to frequently asked questions such as "Can I Afford a Lap Band Procedure?" and "How Will I Meet my Anesthesiologist?" Recently, the ASC added videotaped interviews conducted with several patients who had undergone procedures at the ASC as well as a way for patients to make payments for services they received at the ASC online.

At discharge, all patients who undergo procedures at the ASC receive a folder that includes information about at-home follow-up care, how to contact someone for additional assistance once returning home and the ASC's patient satisfaction survey. The folder also includes a link to that survey on the ASC's web site that patients can complete on line. "We have very high patient satisfaction scores," says Henry.

### OPTIMISTIC ABOUT THE FUTURE

Soon after Tallgrass opened, says Knappenberger, who was one of about 10 physicians who spent five years planning the ASC, "We



Surgical scrub tech LeTicha Peyton, general surgeon James Hamilton, Jr, MD, and surgical scrub tech Bret Ledbetter

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Shana Hubbell, RN, and post-op supervisor Micheala Rapp, RN

found out that the best thing for us was to kind of stay quiet, run under the radar and just win patients one at a time by taking great care of them. That philosophy has been very successful for us.”

“Now, almost six years into it,” he adds, “the ASC certainly has met our expectations. We have control of schedules, we’ve been able to get turnover times that are at appropriate levels, we’ve been able to get the level of care up to where we’d like to see it—especially in regard to the kind of one-on-one personal care that the patients get here versus other facilities. So, we’ve certainly had our headaches, but it has paid off.” Ac-



Anesthesiologist Orville Wetzel, MD

cording to Knappenberger, as word has gotten out in the community about some of the services the ASC is able to offer, the local hospitals have made improvements as well.

One particular area of patient care where the ASC has been able to contribute significantly to some important improvements, says Knappenberger and ASC anesthesiologist and Medical Director William Gitchell, MD, is in pain control. Using regional anesthesia wherever practical has the combined benefit of decreasing the dosage and duration of general anesthesia and providing significantly enhanced post-operative pain control.

“It comes down to a very practical matter,” says Gitchell, “and that is that we’re intending for people to be comfortable enough to go home. In a hospital setting they’re not concerned if they’re comfortable enough to go home because they’re quite happy to bring them upstairs and let them stay a day or two. And if there are ways that you can keep people comfortable and let them go home, we just don’t see any reason why you shouldn’t do that. We attempted doing shoulders using regional anesthesia only for ‘some of the bigger procedures,’ but fairly quickly found that there are a significant number of people who just hurt a lot after those and uniformly block everybody so that you can cut down on that post-op pain and, then, the narcotics, which give them all the side effects of sedation and nausea. People just wake up feeling better and can go home.”

Another reason Tallgrass has been successful, says Knappenberger, is that the physicians behind the ASC from the very beginning have been able to keep their long-term goals and values in mind and put their personal interests aside to work together for a common goal. Partly because the Topeka economy has not been as hard hit by some of the recent economic downturns that have hurt other parts of the country, partly because “surgeons in Topeka are not a dime a dozen,” and partly because of the great care Tallgrass is able to provide, Knappenberger says he’s extremely optimistic about the future of the ASC. “I’ve not seen any drop in business at all,” he says. “We’ve been staying pretty busy.”

“As word has gotten out that there’s excellent care here, and good personal care,” he adds, “we just see this place expanding, so we’re looking at some long-term things like more space and more physicians coming here. We’re constantly talking about what the future might hold, but we definitely see being a bigger part of this community.” **-ASC**

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