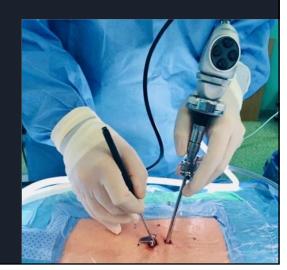






## Strengths

- O1 The least invasive method to perform spine surgery.
- O2 Excellent approach to perform outpatient spine surgery.
- O3 Techniques and efficacy have already been validated by other well-established surgical specialties (sports medicine, general surgery, etc.).



5



### Weaknesses

- O1 Technically very challenging.
- O2 Instrumentation has historically not been robust enough to perform complex spine surgery.
- Financial incentives aren't aligned (i.e., lack of revenue/reimbursement model).





# Opportunities

- O1 Training opportunities for residents, fellows, and practicing spine surgeons.
- O2 Development of endoscopic (light, camera, irrigation), instrumentation (decompression, instrumentation, fusion), and augmenting (RF, laser, neuromonitoring) technologies
- O3 Establishment of reasonable revenue/reimbursement models that align with the best interests of our patients



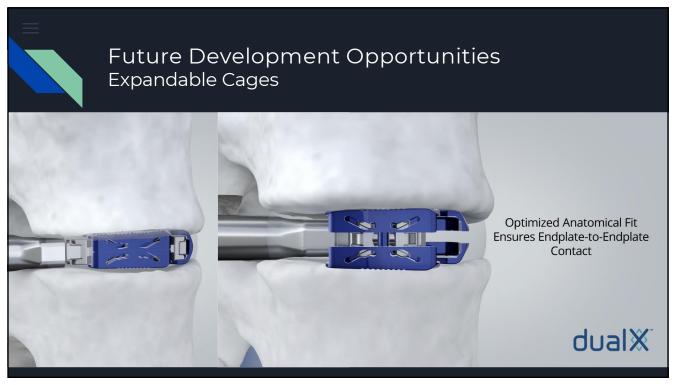
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### Threats

- O1 Lack of training opportunities for residents, fellows, and practicing spine surgeons.
- O2 Lack of interest from industry partners
- O3 Financial incentives aren't aligned

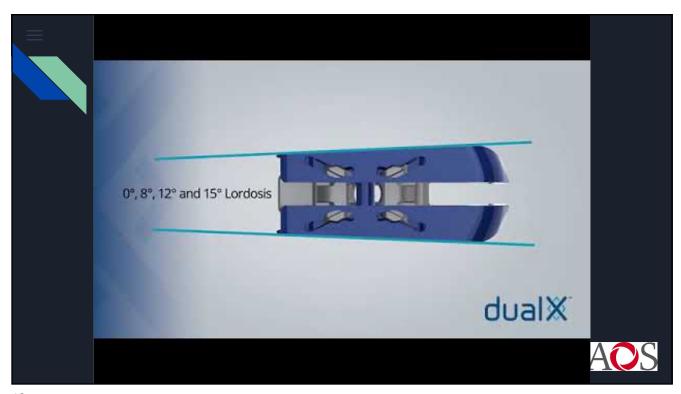








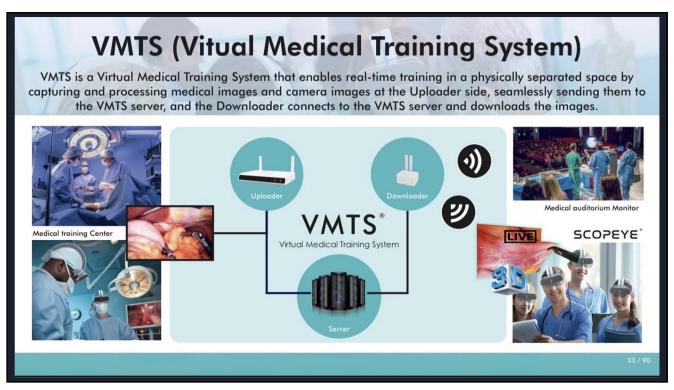






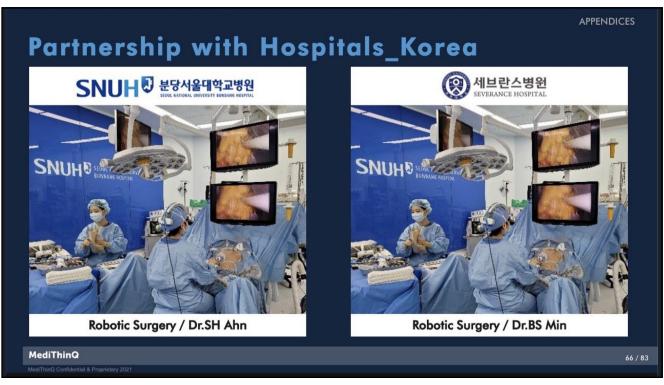


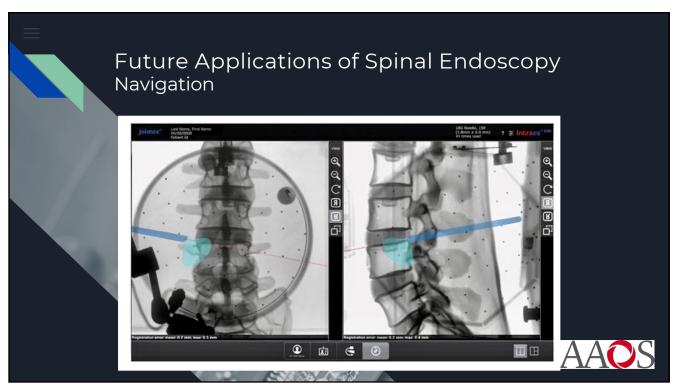








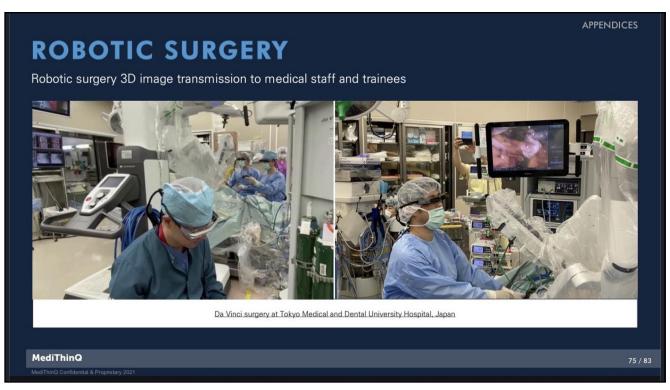














### **SUMMARY**

- SWAT analysis of spinal endoscopy reveals distinct advantages over conventional methods.
- Future development opportunities should help facilitate wider adoption of spinal endoscopy as a standard of care.
- Future applications of new technology may help accelerate and elevate spinal endoscopy to the next level of surgical care.

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