

# dualPortal and dualX in the ASC Setting



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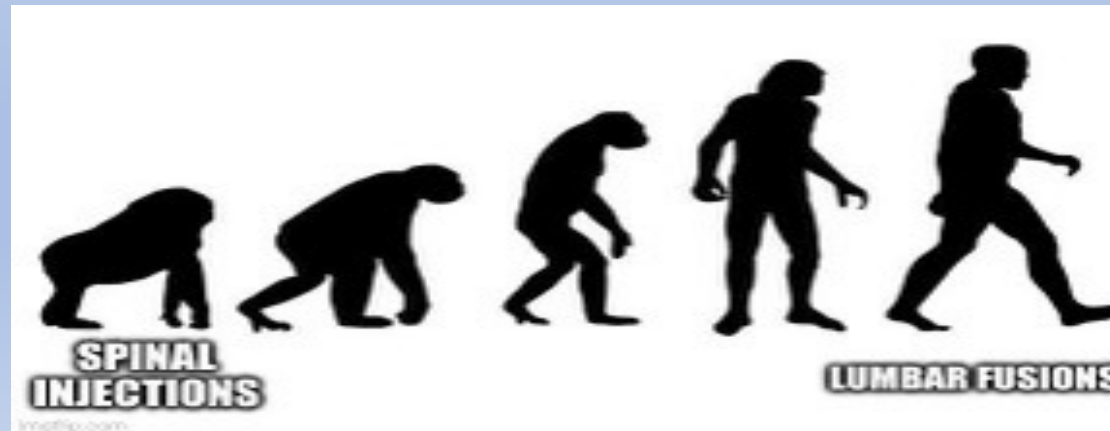
# Ambulatory Surgery Center Benefits

- Economics: Substantially lower costs of care.
- Freestanding: Ease of access, and available OR time
- Focus: Limited, non-emergent cases at high volume
- Quality: High focus on quality with a limited scope
- Ownership
- Input
- Scheduling: Greater flexibility for scheduling cases
- Staff Selection
- Work Life Balance



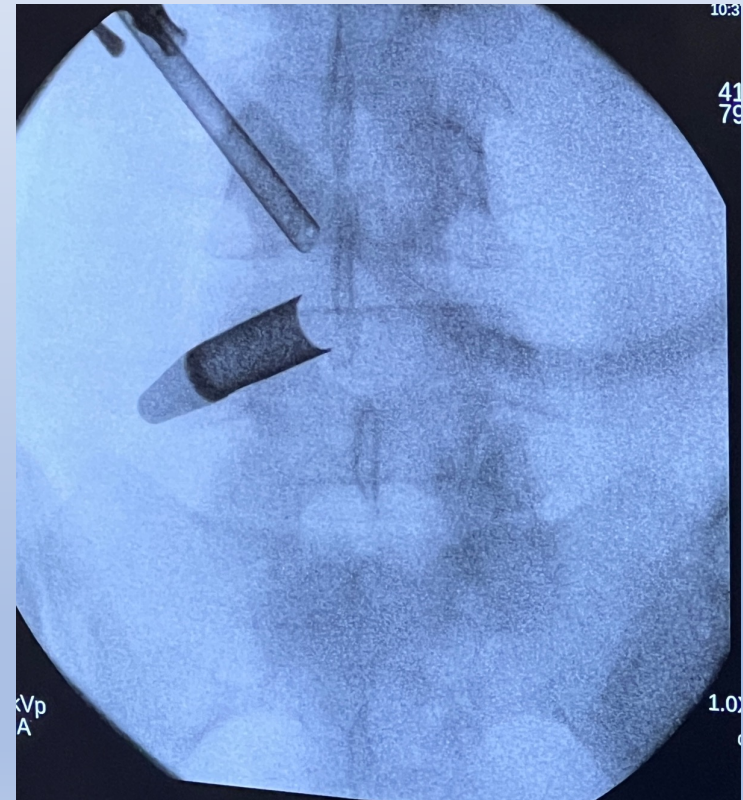
# Progression of Spine Surgery at the ASC

- One level lami/disc, injections, and percutaneous stims
- Then went to one level ACDF's
- Thoracic laminectomy paddle leads, two level ACDF's
- Now on three level ACDF's, outpatient lumbar fusions, revision paddle leads
- Insurance carriers and patients are the driving force
  - Patients don't want to stay in hospitals if they don't have to
- Can achieve the same care standards as a hospital setting!



# Why dualPortal at ASC's?

- Many similarities to hospital advantages
- No capital purchase
  - Utilize existing arthroscopy towers and scopes
- No additional equipment rental fees in addition to disposables
  - Drill control box
  - Rf generator
  - If rental unit goes down, then what?
    - Most ASC's have multiple towers



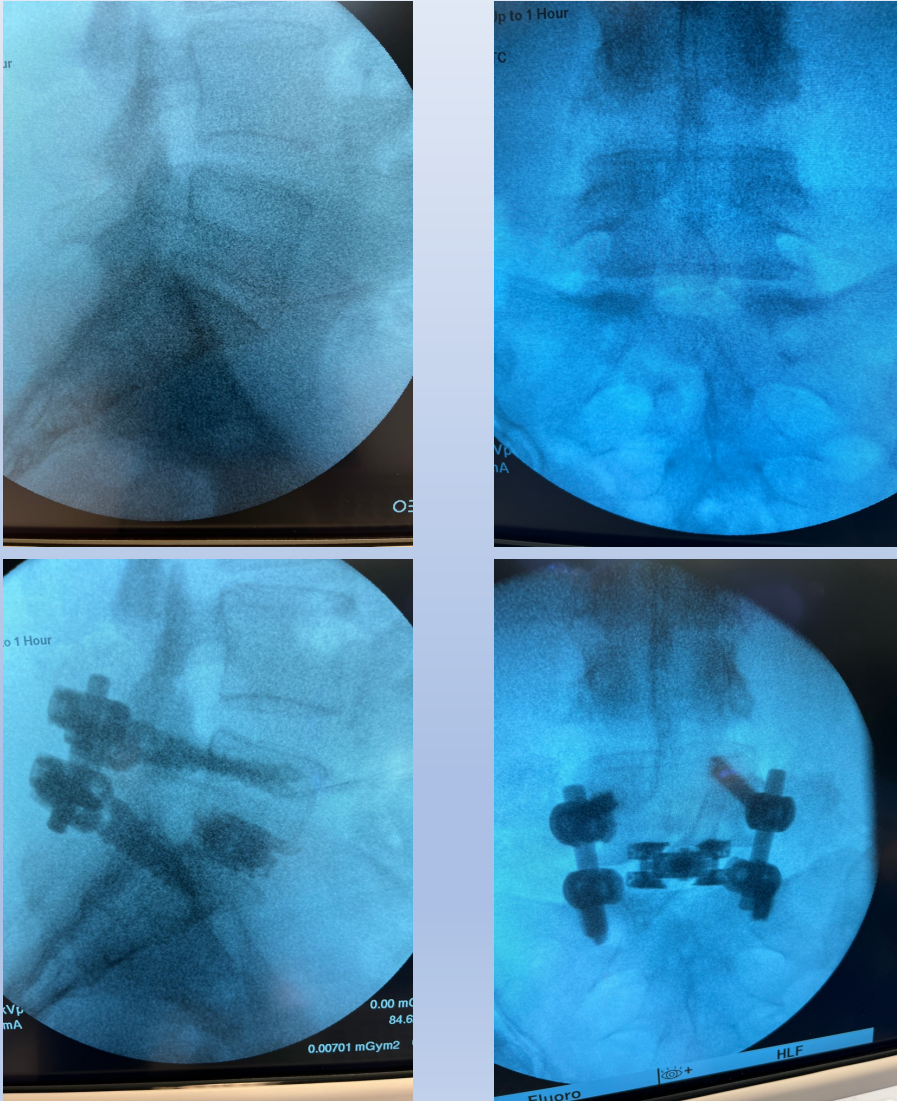


# Why dualPortal at ASC's? (continued)

- Familiar equipment
  - No need to retrain staff
  - Use existing spine and arthroscopic instrumentation
  - Most likely already have disposables
    - Barrel bur and 90 degree coblation wand
    - No added inventory!!!!
- No added space needed for equipment storage
- Only potential issue is scheduling conflicts w/ sportmed
- Most important piece of equipment



# Overcoming cost barriers



- Minimal additional cost to use dualPortal for lami/disc
- Medicare doesn't recognize fusion codes at ASC's
  - Need to negotiate with carve outs with commercial carriers upfront
    - No hospital stay
    - Minimize costs



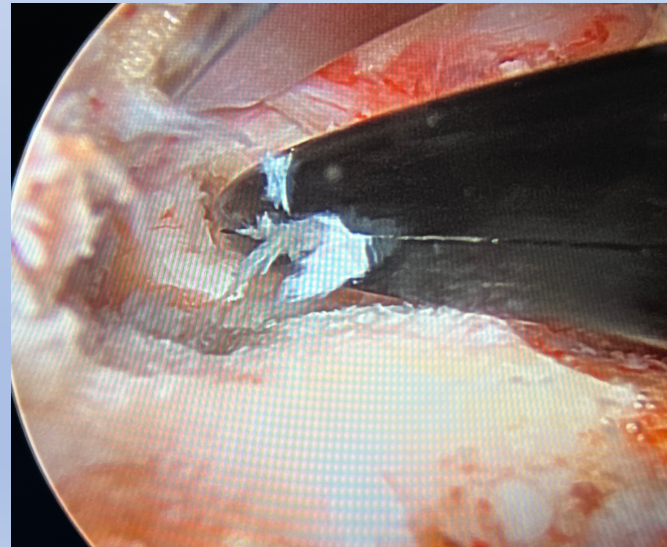
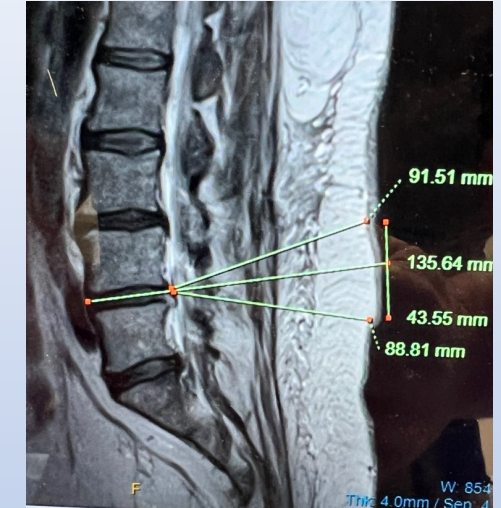
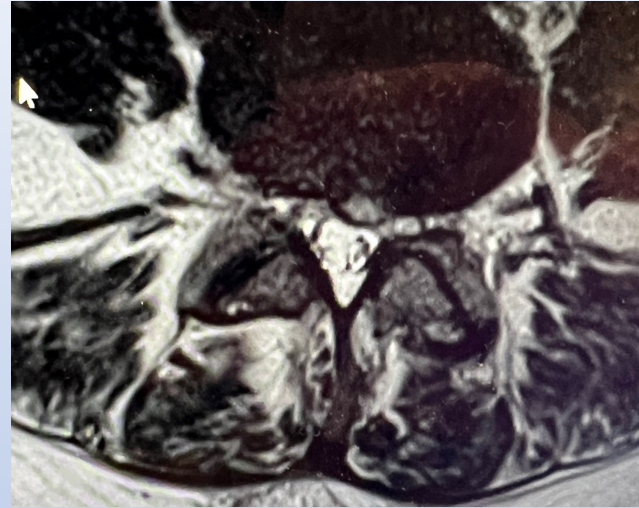
# Overcoming cost barriers (cont.)

- Fusion construct comparison
  - Open TLIF w/bilateral screws
  - MIS TLIF w/ bilateral screws
  - Open dualX w/ unilateral screws
  - MIS dualX w/ unilateral screws
- Marketing opportunities
  - Not many ASC's at the moment
  - LOP/PI
  - Cash pay
  - Patient testimonials



# Additional advantages to dualPortal

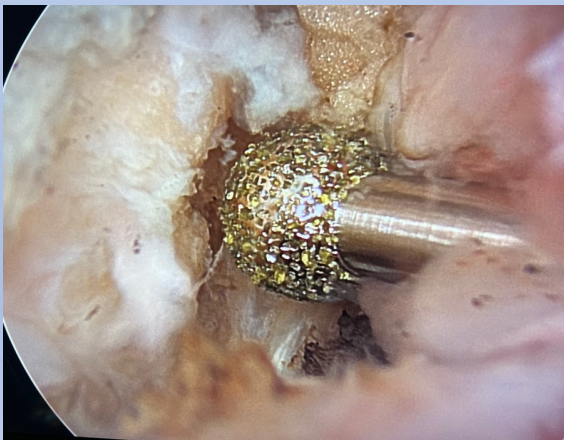
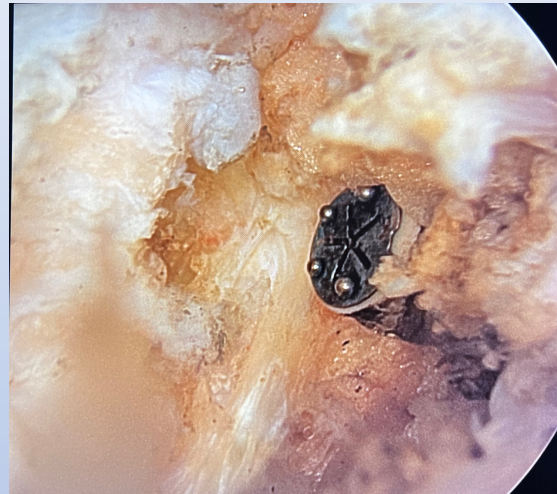
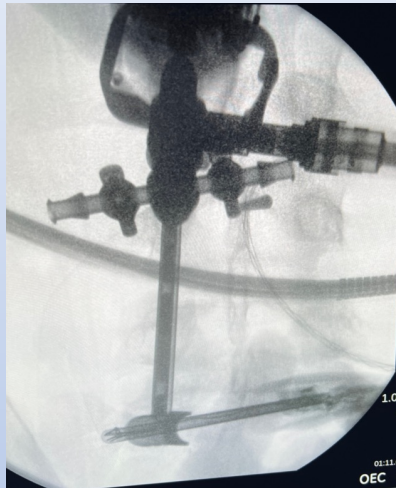
- Ability to provide surgical options to patients you wouldn't normally operate on
- Case study
  - 45 yo female
  - BMI 49
  - Left leg pain
  - Had bariatric surgery and still no other doc would operate on her





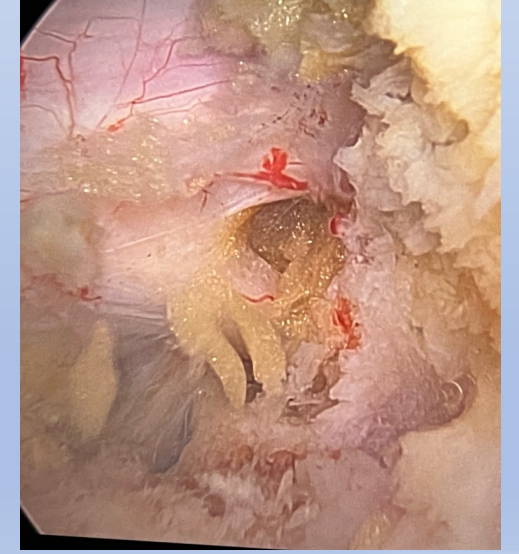
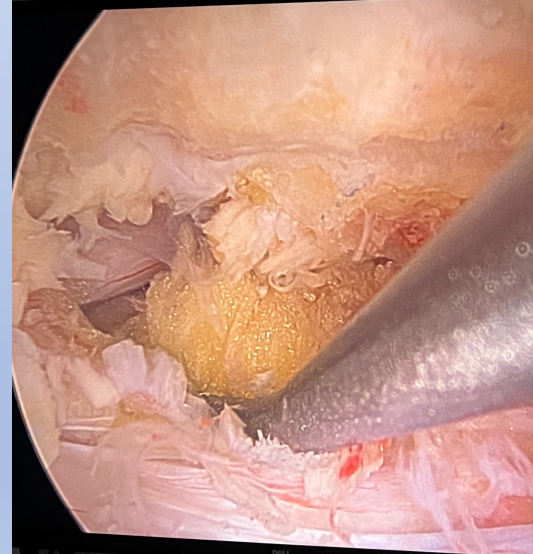
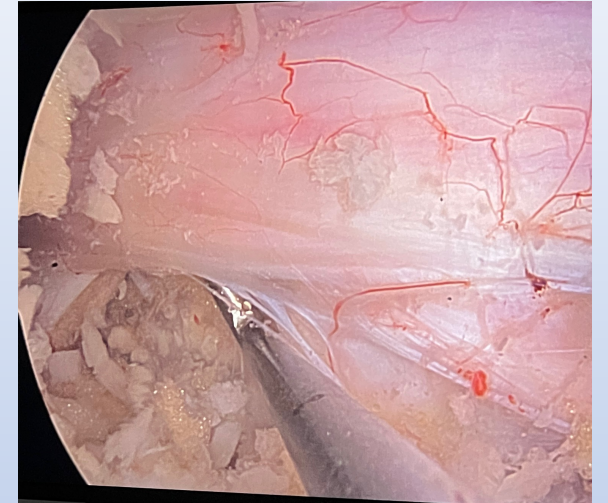
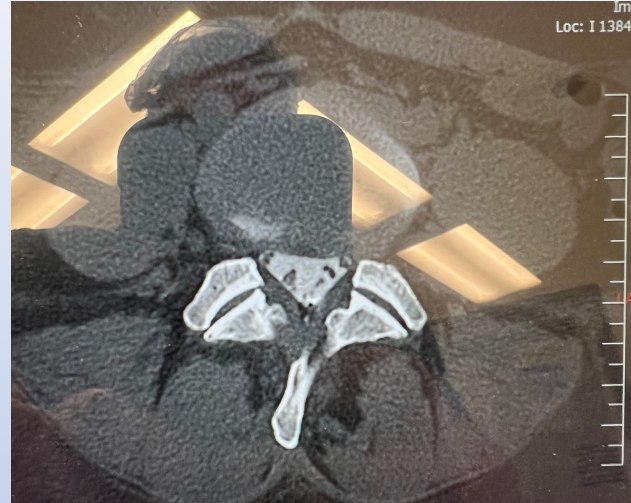
## Additional advantages to dualPortal (cont)

- Ability to do neurolysis/facet debridement



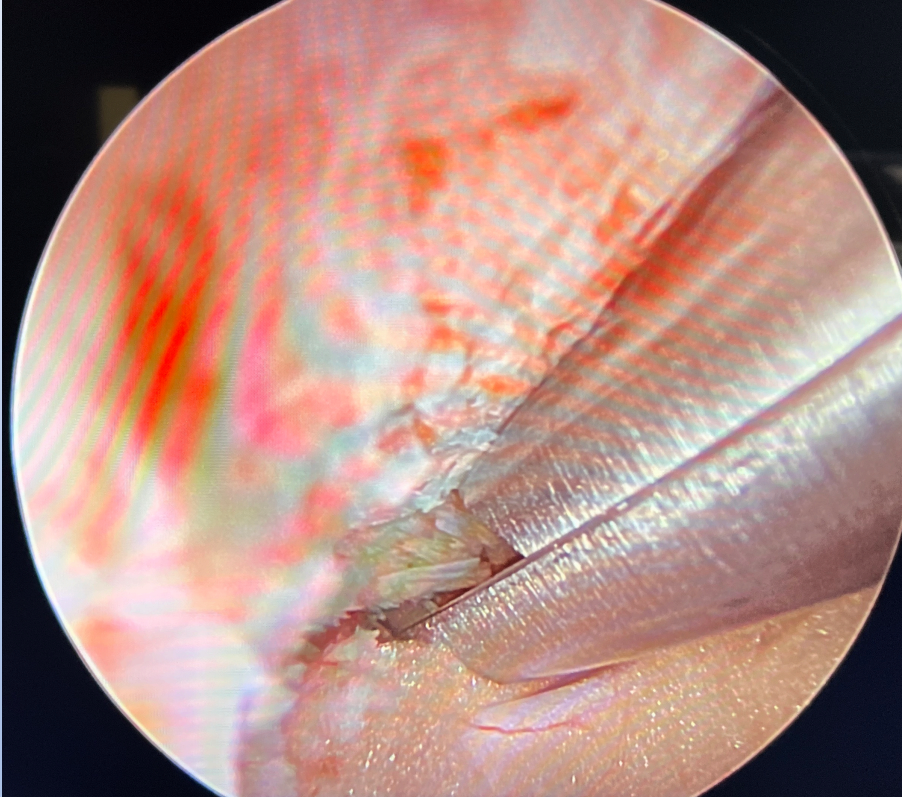
# Additional advantages to dualPortal

- Ease of decompressing the transversing and exiting nerve roots...BILATERALLY!



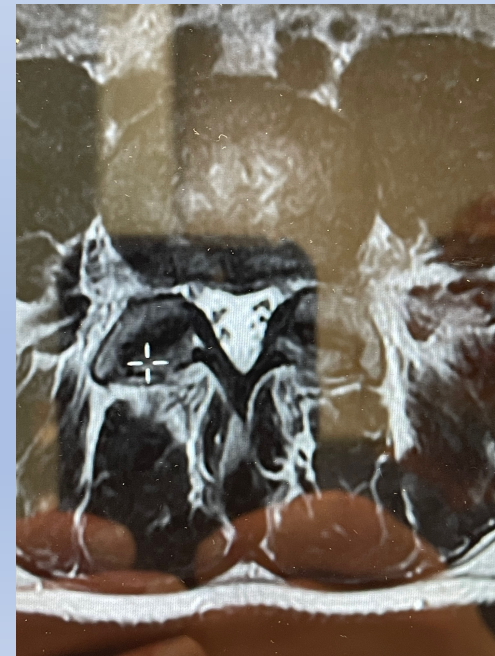


# Handling Complications in the ASC setting



- Patient selection!!!!!!
- Back up plans
  - Be ready to convert to open
    - MIS tubes or preferred lami/disc approach
- Dura Repair available
  - Suture, durastat, duragen, tisseel, duraseal, etc. based on preference
- Transfer to inpatient facility

- Case presentation
  - 2 level dualPortal lami/disc (L4-5,L5-S1)
  - Incidental durotomy at L4-5
    - Tented dura due to water pressure, 6-0 curette
  - Covered with duragen/tisseel
    - Inverted figure 8 suture
    - Intact muscle fascia acts as tamponade
  - Drain placed at lower level w/o suction







# Take Home Message

- dualPortal can be done safely in the ASC setting
  - Natural evolution for dualX lumbar fusions in the ASC
- Spinal surgery is constantly evolving
  - Need to adopt new technology and new techniques or miss the train
  - Insurance carriers and patients are driving the evolution



# Thank You!



