

Nerve blocks: The Right Choice in a Down Economy

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BY NOW, MOST OF US UNDERSTAND THE CLINICAL BENEFITS OF PERIPHERAL NERVE BLOCKS (PNBS). The financial benefits may be less clear, but they are going to become increasingly important as we experience a down economy and cope with ever-increasing pressure on health care costs. Here are some of the financial benefits I've observed.

In the hospital, patients undergoing major orthopedic surgery, like total joints, who receive PNBs can get out of bed faster, engage immediately and more successfully in rehab and leave the hospital sooner, opening beds for new patients. This is due to the far superior pain control offered by the PNBs and the significant reduction of opioid related side effects such as PONV, itching, constipation and drowsiness. And the faster patients exit the hospital, the lower the risk of complications like pneumonia, deep vein thrombosis, pressure ulcers and hospital-acquired infections. Most of these complications are no longer reimbursed by insurers.

In the ambulatory surgical center, peripheral nerve blocks (instead of general anesthesia) allow patients to bypass the PACU altogether and fast-track out of the facility, improving turnover and reducing nursing interventions. Avoidance of general anesthesia, together with better postoperative pain control, almost eliminates the top two risks for delayed discharge from ambulatory surgery – PONV and pain. One study suggests that PACU bypass can reduce the cost of the procedure by 12 percent.¹

What's more, outpatients who receive PNBs very rarely require unplanned hospital admission due to pain, PONV, somnolence or urinary retention. In this same study, PACU bypass and reduced hospital admissions associated with PNBs translated to an estimated cost savings of \$1.2 million annually for a caseload of 3,000 patients.¹

Finally, PNBs produce high levels of patient satisfaction.^{2,3} This also helps boost the bottom line,

COST COMPARISON:

General vs Regional Anesthesia for Annual Orthopedic Outpatient Caseload of 3,000

	General Anesthesia		Regional Anesthesia/ Nerve Block	
	Admission Rate	Associated Cost	Admission Rate	Associated Cost
PACU Admissions	100%	\$1,260,000	18%	\$226,800
Unplanned Hospital Admissions	17%	\$ 196,350	4%	\$ 46,200
Total Cost		\$1,456,350		\$273,000

Based on median hospital cost of \$3,500 per patient. Estimated cost savings for regional anesthesia caseload is \$1.2 million. RA patients received no volatile anesthetics.

Source: Adapted from Williams BA, Motolenich P, Kentor ML. Hospital Facilities and Resource Management: Economic Impact of a High-Volume Regional Anesthesia Program for Outpatients. *Int Anesthesiol Clin*. 2005 Summer;43(3):43-51.

because satisfied patients return to facilities that satisfy them, and they refer their friends and families.

Nerve blocks are clearly the right clinical choice for a large number of patients undergoing painful orthopedic procedures. These days, it's almost as important to note that they're also the right financial choice for surgical facilities. Peripheral nerve blocks provide tremendous efficiency, much higher patient satisfaction and, fortunately for us, a sense of fulfillment for the anesthesia professionals who perform them.



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