

The Economic Case for Switching-Out Your Spinal Fusion Bone Graft Tool



For more than 20 years, surgeons have used the same inefficient and ineffective spinal bone graft delivery tool for lumbar fusions. A significant improvement is now available.

Switching to the new KG[®]1 tool from Kleiner Device Labs offers significant improvements in spinal fusion standards of care and outcomes for patients, simplicity and speed for surgeons, and significant procedure and stay cost savings for the facility.

SAVE MONEY BY ELIMINATING EXPENSIVE GRAFT ADDITIVES

Switching to the new more effective KG 1 spinal graft tool can reduce surgeons' use of Bone Morphogenetic Protein (BMP) at \$2,000-\$7,000/case.

SAVE MONEY UNDER BUNDLED PAYMENT PROGRAMS

In 2018, CMS increased bundled payment programs for spinal fusion procedures. The KG 1 facilitates faster procedures, cutting 20 minutes per fusion level, reducing O.R. time and costs.

The KG 1 has been proven to improve spinal fusion success rates, from 75% to 92%¹ in clinical tests, reducing the number of corrective revision procedures needed, which often cost \$30,000 or more.

Related hospital stay costs can also be reduced because the KG 1 reduces nerve and tissue trauma during surgery, allowing faster patient recovery.

REDUCE HOSPITAL-ACQUIRED INFECTION RISK

As a single-use, disposable tool, the KG 1 reduces the risk of infection from insufficiently cleaned instruments. An ECRI Institute study found that cannulated instruments represented 35% of dirty instrument events in which inadequate cleaning was a factor.² The KG 1's improved effectiveness also facilitates successful MIS strategies, which offer less infection risk than open procedures, and reduces the number of revision surgeries, which have higher SSI rates³.

IMPROVE MEDICARE HOSPITAL COMPARE AND HCAHPS RATINGS...AND CONSUMER REVIEWS

The significant improvement in patient outcomes from use of the KG 1 can positively impact Medicare Hospital Compare ratings, affecting at least 8 different rating criteria.⁴

Outcome impact on HCAHPS scores is debated, but studies by Manary, Boulding, Staelin, and Glickman show correlation between specific visit outcomes and pain management to HCAHPS scores.⁵ Reducing fusion failures from 1-in-4 to 1-in-12 with the KG 1 may have a significant impact on the hospital's score.

Yelp* isn't just for restaurants any more. Hospitals and individual doctors are finding themselves rated by consumers independent of traditional clinical quality measures, which can affect consumer care choices. Evidence indicates outcomes matter here, too, and Yelp* reports 11M health reviews.^{6, 7}



IMPROVE SURGEON SATISFACTION

The KG 1 spinal graft tool was developed by a spine surgeon to address the frustrations that he and colleagues experienced in surgical process and outcomes with predecessor tools.

The KG 1 addresses many different surgeon frustrations, resulting in faster, simpler and more effective surgical procedures.

“Over the last five months in my T-lif and L-Lif operations, I have been able to expedite bone graft insertion for these procedures and avoid the problems that I encountered with round, end-dispensing bone funnels... It has decreased my operating time, eliminated the frustration and challenge of interbody grafting and improved my early fusion results without using BMP.” – Srdjan Mirkovic, M.D., Northshore Orthopedic Institute.

1 Medical Devices: Evidence and Research, 2016: 9 105-114

2 If It's Not Clean, It's Not Sterile: Reprocessing Contaminated Instruments, ECRI Institute, 4.11.17

3 Rates of infection after spine surgery based on 108,419 procedures. Spine (2011) 36:556-6310.1097/BRS.0b013e3181eadd41

4 Medicare.gov, Hospital Compare overall rating

5 N Engl J Med 2013; 368:201-203

6 NPR, 8.6.15

7 <https://www.yelp.com/factsheet>, 5.14.18

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IMPROVE PATIENT OUTCOMES

With peer review published improvements in spinal fusion success from 75% to 92%, the KG 1 helps surgeons and hospitals improve performance against their mission.

The effects of failed fusions are often tragic for patients. Many patients are in significantly more pain than before, and the risks of painkiller addictions and other negative health and life consequences are high.

With this new tool, there are substantial opportunities to improve the standard of care for spinal fusion procedures and decrease the direct and indirect costs.

IT'S JUST A SIMPLE TOOL SWAP

The KG 1 costs about the same as the true all-in cost for each use of an equivalent durable tool in most hospitals or ASCs. Any modest price differences are more than offset by the significant cost savings and risk reductions delivered by the device.



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